

"Children are blessing from God":
Sociocultural and religious factors
affecting the Uptake of family
planning among Muslim
communities in Lamu and Wajir
counties in Kenya.

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Doctoral thesis submitted to fulfill the requirements for the degree of "Doctor in Health Sciences"

Academic year: 2024/2025



## Summary

The overall objective of the study was to assess factors affecting contraceptive uptake among Muslim women of reproductive age in Lamu and Wajir Counties in Kenya.

The doctoral study used a crossectional study design utilizing mix methods approaches. The quantitative method utilized a semi structured questionnaire that was administered to 663 women of reproductive age. The qualitative component entailed, In-depth Interviews (IDI) and Focus Group Discussion (FGD) that collected data among a total of 104 participants (93 discussants and 13 IDI's interviewed).

# **Key Findings**

The results from the cross-sectional surveys showed that the percentage of women currently using family planning in the two counties was 18.6%, with Contraceptive Prevalence Rate (CPR) of 32.7% and 3.4 percent in wair and Lamu respectively. The reasons for non-use were; the belief that Islam does not allow FP use (70.6%) and husband's disapproval (78%). The key determinants of contraceptive use in Lamu were; current employment, education, ever discussed FP with their partners. In Wajir the key determinants were education and the belief that FP is allowed in Islam.

The results from the qualitative study revealed varied misconceptions about Islam and family planning especially in Wajir. These misconceptions include FP is haram (prohibited). The findings also show deep-rooted social-cultural norms that encourage large family sizes, the inability of women to make decisions on whether to use contraceptives, and overall gender dynamics.

Additionally, the findings from men's perspective revealed that men regarded family planning as a western/foreign idea, FP as woman's affairs while they still wanted to be consulted, and associated family planning with promiscuity and ill health.

### **Conclusion**

This doctoral study reveals significant disparities in contraceptive utilization across the two counties, despite their shared religious affiliation. The disparities in contraceptive uptake in the two counties are attributed to; misinterpretation of the Islamic teachings, differing educational levels and social cultural norms. To address these social cultural barriers to FP it is paramount to develop culturally sensitive social behaviour change programme that address the religious misconceptions. To address the myths and misconceptions through social behaviour change. Additionally, empowering women and girls through education as well as involving men on matters of FP is essential.

#### About the author

Batula Abdi is a development specialist and an expert in Sexual and Reproductive Health (SRH). Currently she serves as technical advisor on sexual and reproductive health for UNFPA sub regional office in the Caribbean. She has worked in several countries in different capacities, Kenya, Uganda, Tanzania, Zambia Sudan and Somalia.

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