

Knowledge and Attitude regarding the Family Planning among Spouses in Sub-Urban Primary Health Care Centres in Erbil Province

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ABSTRACT

Background and Objectives: Family Planning refers to couples who make educated choices about having children, such as timing their pregnancies and limiting the number of children that they will have via contraceptive techniques.

Objective of the Study: To assess couples' knowledge and attitudes about family planning and its association with their socio-demographic characteristics.

Methods: A quantitative, cross-sectional study using a self-administered questionnaire which consisted of socio-demographic characteristics, couple's knowledge (17 question) and couple's attitude (18 questions) among 288 couples in primary health care centers sub-urban Erbil province from September 2021 to December 2022, met the exclusion criteria for pregnant who refused participation and inclusion criteria in reproductive age 15-49, married women with their partner and who use contraceptives. The data were analyzed with the statistical package for the social science version 26.

Results: Most of the spouses were in the age group 25–34 years old. The sources of information about family planning methods for husbands were 56.3% from social media, and the wives 54.9% from family. Most of the husbands are 51.4%. Their overall knowledge regarding family planning methods was fair. There was an association between the husbands' occupation and knowledge of family planning methods (P -value=0.044). The highest proportions of the study sample (66%) of the husband and (63.2%) of wives preferred oral contraceptive pills as the best method for family planning.

Conclusion: The overall knowledge of the husbands was fair(acceptable), while the wives had good knowledge. There was a correlation between the husband's knowledge and the wife's attitude towards family planning methods based on sociodemographic characteristics, but there was no correlation between the husbands' knowledge and the wives' knowledge.

Keywords: Knowledge; Attitude; Practices; Family Planning Methods; Contraceptive Types.

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INTRODUCTION

A couple describes family planning and spacing as a deliberate attempt to limit or minimize the number of children they want using contraceptive methods. The way of life is accepted by individuals and couples, based on knowledge, attitude, and responsible decision-making, to promote the well-being and health of their families and contribute to promoting society. Birth control is recognized as an important response to improving women's health and human rights [1]. People may use family planning to achieve their desired number of children and calculate the spacing between their pregnancies and births. It is accomplished by the use of contraceptive techniques as well as the treatment of infertility problems. A family planning program assists couples and individuals in realizing their basic right to select for themselves when they want to have children and how many children they want to have [2]. Birth control is a decision by a person or a couple to know how many babies they want to have, when to decide to have children and how long to continue between conceptions. The action should be freely taken without force after a person has had full knowledge of the benefits of family-size planning, the procedures to use, the relative benefits of each approach, and the expected complications of the mentioned methods [3]. Contraceptives are tools or medications that inhibit ovulation or avoid sperm delivery to the womb to prevent conception. It is claimed that a woman's ability to space and track pregnancy directly impacts her health and her children's health. Contraceptive use also has a vital role in alleviating problems like accidental pregnancy and abortion. To increase maternal health, abortion is also used, and the criteria for family planning are reduced [4]. While the adolescent fertility rate in Iraq is still among the highest in the area,

contraception is only approximately 36% of the total population of Iraq. This implies that many couples and people who need family planning services will not get them, violating their reproductive rights. The Ministry of Health developed the National Family Planning Strategy (2021-2025) with the support of the United Nations Population Fund (UNFPA) and funding from Sweden, and in consultation with a wide range of stakeholders, including women and young people, to ensure that their rights and needs are adequately addressed [5]. Importance of the study: No major studies have been conducted to elaborate on the standard of family planning methods in the Kurdistan region, but it seems that males play an important role in family planning-related decision-making, and they are the ones who usually fix the number of kids in the family. In the few previous studies, only one partner participated (female). The aim of the study is to assess couples' knowledge and attitudes about family planning and its association with their socio-demographic characteristics.

METHODS

A descriptive (cross-sectional) study was conducted to identify knowledge, and attitude of family planning among spouses in sub-urban primary health care centers in Erbil province. The study was carried out in three primary health care centers in sub-urban areas in Erbil province, Kurdistan region, (Razhan, Kasnazan and Daratw) primary health care centers (PHC). The distribution of the area was according to municipalities. Razhan health care center belongs to the Bnaslawia Municipality, Kasnazan primary health care center belongs to Kasnazan Municipality and the Daratw health care center belongs to the Daratw Municipality. This study was carried out from 1st September 2021 to 1st

December 2022. This period includes preparing the questionnaire tools and writing the methodology with data collection, data analysis, result and conclusion. Prior to the initiation of the present study, the approval was obtained from the ethical and scientific committee of College of Nursing / Hawler Medical University and Minister of Health/ Director of Health/ Planning Department of Kurdistan region, Iraq. The ethical form was approved with code number (116) dated on 7th Oct 2021. Both anonymity and the confidentiality of the participants were preserved. The names of the participants, their addresses, and any other information that could be used to personally identify them were not used in this study. The objectives of the study were explained to the people who took part in the research, and their agreement was gained. Epi Info 7 was used to calculate the sample size. This method was used to calculate the sample size by entering the total number of spouses which was about 1145, with a confidence level of %95 and an error margin of %5. The calculation resulted in 288 samples. The researcher took 288 spouses in Razhan, Kasnazan, and Daratw health care centers in Erbil city. A thorough examination of the pertinent literature was used by the researcher as the basis for the construction and selection of a questionnaire as well as an interview technique. The interview lasts for approximately 7 to 10 minutes. A structure for conducting interviews in the form of a questionnaire was designed in order to ensure accurate data collection. This format is comprised of five components and includes the information presented below. Demographic characteristics: such as; spouses age, religion, ethnicity, husband and wife occupation, husband and wife education, income, house ownership and car ownership. Family planning history. The absolute Category Rating (ACR)

method was used for the statistical calculation to determine the overall knowledge and attitude. Knowledge of Spouses Regarding Family Planning consists of 17 questions and the knowledge is classified as follow: good, fair, and poor. Attitudes of Spouses Regarding Family Planning. It consists of 18 questions, and the attitude is classified as follows: positive, neutral, and negative. According to the statistical findings, the overall level of the husband's knowledge was 51.4% and the wife's 39.6% and the husband's attitude was 39.2% and the wife's 37.5%. Data from the study were analyzed using the Statistical Package for Social Science (SPSS, Version 26), included a descriptive statistical analysis of frequency, the percentage of the questionnaire items and a chi-square test for the association between demographic characteristics and other sections of the questionnaire.

RESULT

Table 1 shows that the highest percentage of the husband-and-wife participants were in the age group 25–34 years, which is 33.3% for husbands and 41.3% for wives. The highest percentage of the sample members in the level of education holding a secondary school were 27.8% for husbands and 31.3% for the wife. As for the occupation, the findings reveal that most husbands had skilled manual workers, about 25.7%, while 30.6% of wives were unemployed.

Table 1: Distribution study sample according to the socio-demographic characteristics of Spouses

Variables		Husband Frequency(%)	Wife Frequency(%)
Age group	15-24	71(24.7)	100(34.7)
	25-34	96(33.3)	119(41.3)
	35-44	89(30.9)	57(19.8)
	45-54	32(11.1)	12(4.2)
Education level	Illiterate	33(11.5)	33(11.5)
	Read & write, and prima-	76(26.4)	35(12.2)
	Intermediate	63(21.9)	83(28.8)
	Secondary	80(27.8)	90(31.3)
Occupation	College and above	36(12.5)	47(16.3)
	Unemployed	47(16.3)	88(30.6)
	Unskilled manual worker	57(19.8)	57(19.8)
	Skilled Manual workers	74(25.7)	56(19.4)
	Non-manual workers	65(22.6)	51(17.7)
	High level occupations	45(15.6)	36(12.5)

Number of the sample study= 288

The finding in Figures 1 illustrated that the highest percentage of both husbands and wives were in the age category under 20 years old regarding the family planning

history related to age at marriage, which is about 43%, and 55% of the wives were under 20 years old for the same age category related to age at marriage.

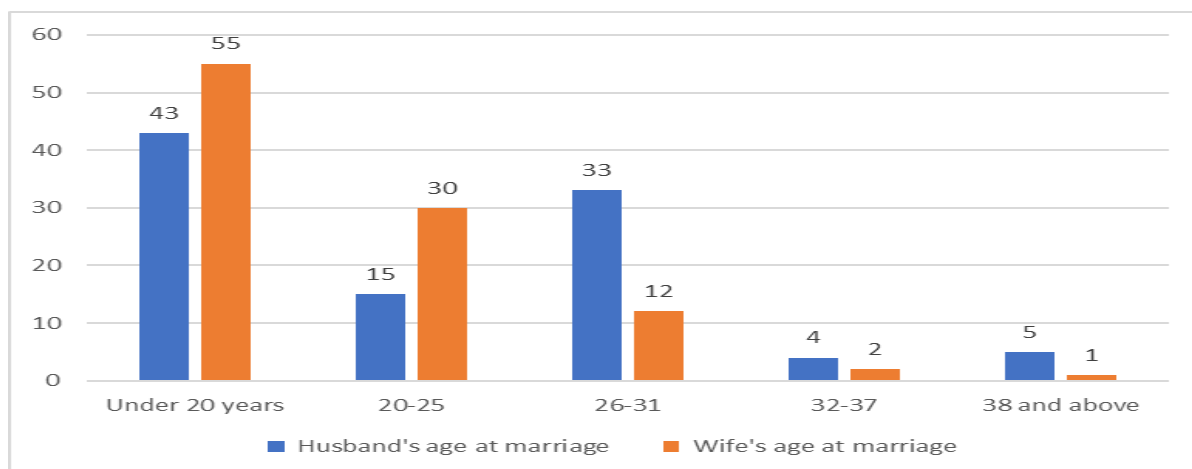


Figure 1: Husband and wives age at marriage

The result in figure 2 regarding the sources of contraceptive availability for husbands were pharmacies, which is about 55.9%. While the sources of contraceptive

availability for wives were health care centers, pharmacies, and government hospitals, with 53.5%, 55.2%, and 52.4%, as shown in the same figure 3.

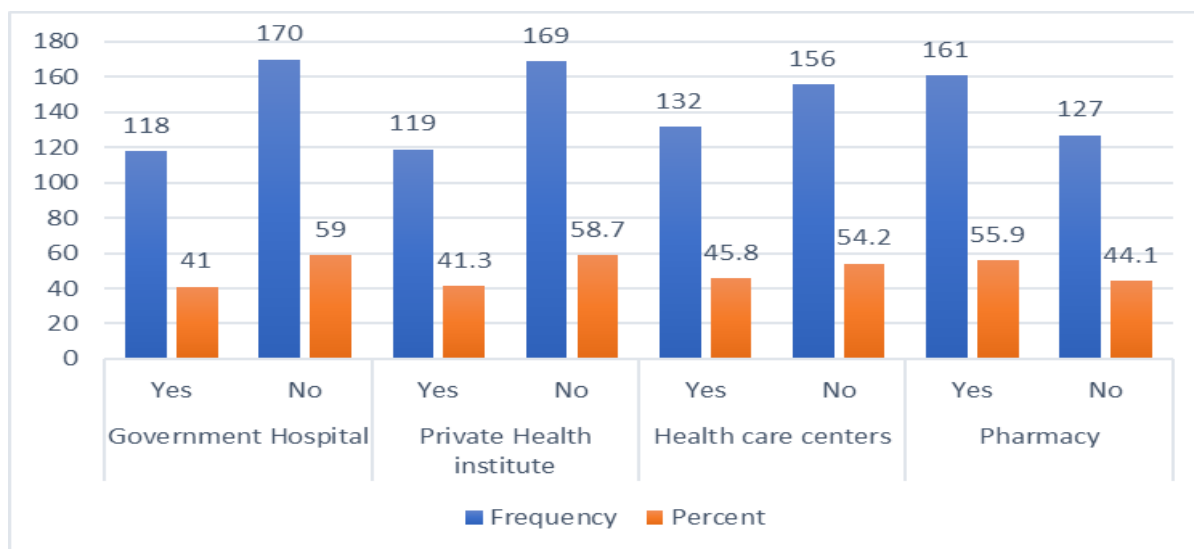


Figure 2: Sources of availability of contraception for husband

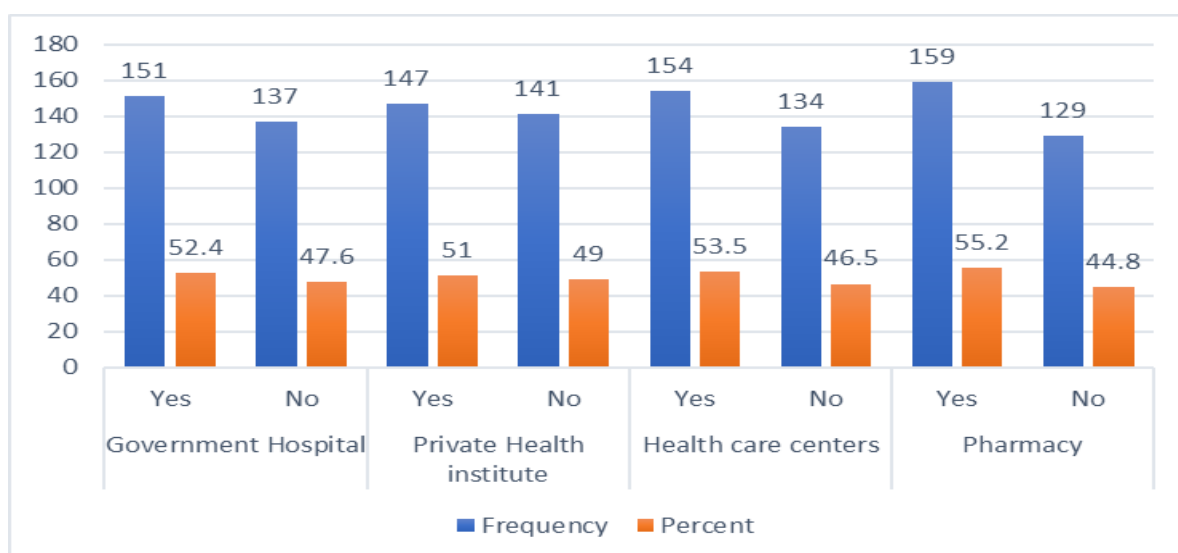


Figure 3: Sources of availability of contraception for Wife

Table 2 demonstrated that 51.4% of husbands expressed a fair level of knowledge regarding family planning. While 39.6% of wives expressed a good level of knowledge regarding family planning.

Table 2: Overall husband's and Wife's knowledge's regarding family planning

	Levels	Husbands	Wives
		Frequency (%)	Frequency (%)
Good		111(38.5)	114 (39.6)
Fair		148 (51.4)	80 (27.8)
Poor		29 (10.1)	94 (32.6)
	Total	288 (100)	288 (100)

Table 3 indicated that 37.5% of wives expressed a positive attitude regarding family planning, while 39.2% of husbands expressed a positive attitude regarding family planning, while 31.9% of them expressed a neutral level and 28.8% expressed negative level.

Table 3: Overall Husband's and wife's attitudes of spouses regarding family planning

	Levels	Husbands	Wives
		Frequency (%)	Frequency (%)
Positive		113 (39.2)	108 (37.5)
Neutral		92 (31.9)	82 (28.5)
Negative		83 (28.8)	98 (34.0)
	Total	288 (100)	288 (100)

Table 4 shows a significant association between the husband's occupation and the husband's knowledge regarding family planning, where the significance value was (P-value 0.044). This value was less than the alpha value (P-value \leq 0.05). While, there was non-significant

association between other variables of socio-demographic characteristics and age group of husbands (P-value 0.493), husband's religion (P-value 0.893), husband's education level (P-value 0.608) and husband's age at marriage (P-value 0.742).

Table 4: Association between socio-demographic characteristics and husband's knowledge regarding family planning in the study sample

Variables		Overall Knowledge		P-Value
		Yes	No	
Age group of husband	15-24	46	25	0.493
	25-34	66	30	NS
	35-44	61	28	
	45-54	14	18	
Husband's Religion	Muslim	150	81	0.893
	Christian	37	20	NS
Husband's education level	Illiterate	21	12	0.608
	Read & write, and primary	52	24	NS
	Intermediate	38	25	
	Secondary	56	24	
	College and above	20	16	
Husband's occupation		29	18	0.044
	Unemployed			S
	Unskilled manual worker	29	28	
		48	26	
	Skilled Manual workers	49	16	
	Non-manual workers	32	13	
Husband's age at marriage	High level occupations			
	Under 20 years	78	47	0.742
	20-25	32	10	NS
	26-31	59	35	
	32-37	6	5	
	38 and above	12	4	

Number of the sample study= 288 Spouses

Table 5 revealed that there was a non-significant association between all variables of the socio-demographic characteristics,

and the wife's knowledge of spouses regarding family planning, where all values were greater than the alpha value (P-value 0.05).

Table 5: Association between socio-demographic characteristics and wife's knowledge regarding family planning in the study sample

Variables		Overall		P-Value
		Yes	No	
Age group of wife	15-24	69	31	0.845
	25-34	84	35	NS
	35-44	35	22	
	45-54	6	6	
Wife's Religion	Muslim	154	74	0.254
	Christian	40	20	NS
Wife's education level	Illiterate	21	12	0.466
	Read & write, and primary	23	12	NS
	Intermediate	51	32	
	Secondary	65	25	
	College and above	34	13	
Wife's occupation	Unemployed	56	32	0.897
	Unskilled manual worker	39	18	NS
	Skilled Manual workers	39	17	
	Non-manual workers	37	14	
	High level occupations	23	13	
Wife's age at marriage	Under 20 years	110	49	0.414
	20-25	53	32	NS
	26-31	26	9	
	32-37	3	3	
	38 and above	2	1	

Number of the sample study= 288 Spouses

Table 6 demonstrated that there was a non-significant association between all variables of the socio-demographic characteristics, and the husband's attitudes of spouses regarding family planning,

where all values were more than the alpha value (P-value 0.05). The result accepted the null hypothesis, which is that the variables are independent, and rejected the alternative hypothesis.

Table 6: Association between socio-demographic characteristics and husband's attitudes regarding family planning in the study sample

Variables		Overall Attitude			P-Value
		Agree	Neutral	Disagree	
Age group of husband	15-24	34	22	15	0.575
	25-34	29	35	32	NS
	35-44	30	26	33	
	45-54	20	9	3	
Husband's Religion	Muslim	86	75	70	0.303
	Christian	27	17	13	NS
Husband's education level	Illiterate	15	12	6	0.298
	Read & write, and primary	35	17	24	NS
	Intermediate	25	17	21	
	Secondary	21	35	24	
	College and above	17	11	8	
Husband's occupation	Unemployed	19	16	12	0.846
	Unskilled manual worker	24	20	13	NS
	Skilled Manual workers	34	21	19	
	Non-manual workers	21	20	24	
	High level occupations	15	15	15	
Husband's age at marriage	Under 20 years	51	40	34	0.722
	20-25	17	14	11	NS
	26-31	35	28	31	
	32-37	4	5	2	
	38 and above	6	5	5	

Number of the sample study= 288 Spouses

Table 7 shows that there was a significant association between the wife's age at marriage and the wife's attitudes toward spouses regarding family planning, where the significance value was (P-value 0.016). While there was a non-significant association between other variables of

socio-demographic characteristics and age group of the wife (P-value 0.062), wife's religion (P-value 0.898), wife's education level (P-value 0.661), and wife's occupation (P-value 0.367), where these significance values were more than the alpha value (P-value 0.05).

Table 7: Association between socio-demographic characteristics and wife's attitudes regarding family planning in the study sample

Variables		Overall Attitude			P-Value
		Agree	Neutral	Disagree	
Age group of wife	15-24	34	36	30	0.062
	25-34	48	26	45	NS
	35-44	24	17	16	
	45-54	2	3	7	
Wife's Religion	Muslim	86	66	76	0.898
	Christian	22	16	22	NS
Wife's education level	Illiterate	13	10	10	0.661
	Read & write, and primary	16	10	9	NS
	Intermediate	28	24	31	
	Secondary	34	22	34	
	College and above	17	16	14	
Wife's occupation	Unemployed	33	30	25	0.367
	Unskilled manual worker	27	11	19	NS
	Skilled Manual workers	19	18	19	
	Non-manual workers	13	16	22	
	High level occupations	16	7	13	
Wife's age at marriage	Under 20 years	60	47	52	0.016
	20-25	35	22	28	S
	26-31	10	11	14	
	32-37	3	0	3	
	38 and above	0	2	1	

Number of the sample study= 288 Spouses

DISCUSSION

The finding of the current study is similar to a quantitative, cross-sectional study that has been done in Karachi, Pakistan in 2014 on 200 couples for the age group 25-34 [6]. And another cross-sectional study design with a quantitative approach has been conducted in Ghana in 2019 on 206 married couples, which is equal to the current results of the study [7]. A recent study shows that most of the participants in the level of education hold a secondary school, 27.8% for husbands and 31.3% for the wife shows in (Table 1). Agreeing with a cross-sectional study conducted in Egypt in 2017 on 284 showed the highest level of education for both wives and husbands: 39.1% had a secondary level [8]. The result of the present study illustrated that most husbands and wives were in the category of under 20 years regarding the family planning history related to age at marriage as shown in (Figure 1), for both husbands and wives. A descriptive cross-sectional design was utilized in Egypt in 2020 among 176 married couples which showed that most of the husbands and wives in the study were >25 years old which is in contrast to the current study [9]. Regarding the sources of spouse's information toward the FP methods, the current study showed the information source about the wives' family planning was friends, family and relatives as seen in (Figure 3), similar to a cross-sectional study performed on 547 women in Mumbai, India in 2016 showing the highest percentage of married women got information from the social circle (10). According to the same result of the current study, the sources of information about the family planning of husbands were the media (TV, radio, newspaper, and journal), and friends. Similar to a study done in Egypt in 2020 on 176 married couples shows that the husbands got the information from television [11].

Table (2) demonstrated that more than half of the husbands overall knowledge regarding family planning was expressed at a fair level, which is friendly to a study that was conducted in Egypt among 284 married husbands in 2017 and showed the highest percentage of husbands were fair in knowledge regarding FP [12]. While in (Table 2) the wives expressed a good level of knowledge of spouses regarding family planning. Similar to the present study, a cross-sectional study was done in Pakistan in 2016 among 503 married women which showed the majority 99% of wives have good knowledge regarding FP [13]. In the current study, both the husbands and the wives expressed a positive overall attitude regarding family planning, as shown in (Table 3). Similar to the present study, a cross-study was conducted among 560 married couples in Saudi Arabia in 2017 which showed the highest rate of spouses having a good attitude toward family planning methods [14]. The present study shows a significant association between the husband's occupation and section two of the questionnaire related to the husband's knowledge regarding family planning, where the significance value was (P-value 0.044) as shown in (Table 6). In contrast to the current study, in 2021 in India, a cross-sectional study carried out among 200 married husbands. The result showed that there is a non-significant association between the husband's knowledge of FP methods and socio-demographic characteristics; the values were more than (P-value 0.05) [15]. The current study shows there is a non-significant association between all variables of the socio-demographic characteristics and the wife's knowledge regarding family planning, where all values are greater than the alpha value (P-value 0.05) as shown in (Table 6). Similar to the recent study, a non-experimental survey that was conducted in

India among 200 married women in 2021 showed that there is a non-significant association between socio-demographic characteristics and knowledge of husbands regarding the family planning methods the value; was more than (P-value 0.05) [16]. The current study shows there is a non-significant association between all variables of the socio-demographic characteristics, and the husband's attitudes regarding family planning, as demonstrated in (Table 7). A similar study has been done in Gangwadi, India among 320 married men in 2014 which showed that statistically there was a non-significant association between the attitude of the husbands and the variable of the socio-geographic characteristics [17]. Along with the present study, a cross-sectional study done among 150 married men in 2015 in Nigeria showed that there was a non-statistically significant association among the husband's attitude with socio-demographic characteristics [18]. There is a significant association between the wife's age at marriage and section three items of the questionnaire related to the wife's attitudes regarding family planning, where the significance value was (P-value 0.016) as shown in (Table 8). Similar to the current study regarding the significant association of wife practices regarding the FP methods with socio-demographic variables, a cross-sectional study was done in Al-Amara city, Iraq in 2020 among 270 married women showed there were a highly significant association between the attitudes of wives and socio-demographic characteristics) [19]. While, there was a non-significant association between other variables of socio-demographic characteristics, age group of the wife, religion, education level, and wife's as demonstrated in (Table 8). In contrast to the current research, a cross-sectional study has been conducted in Al-Amara, Iraq in 2020 among 270 married

women and showed a highly significant association between the socio-demographic values and wife's attitudes toward family planning [20]. Also, an opposite quantitative study done in India in 2019 among 92 participants (married women) showed an alpha value of more than (P-value 0.05) [21].

CONCLUSION

Apart from sociodemographic data, the results suggest that more than half of the couples obtained their contraceptives through pharmacies as a source of availability. The spouses used contraceptive methods for 1-5 years, and they visited primary health care centers and clinics every six months. According to the statistical data, the assessment of the husband's knowledge of contraceptive techniques was fair when compared to the wife's knowledge of the same variable, which passed in the assessment. The findings are based on statistical analysis of the husband's awareness of contraceptive methods. Both partners' attitudes were positive, and a wife's overall practices regarding FP approaches were positive. Regarding the association between the sociodemographic characteristics and the knowledge of the spouses, the study indicated that there was a significant association between the husband's sociodemographic variables (occupation), and knowledge regarding the FP methods is in contrast to the wife's knowledge regarding the FP methods; there was no significant association. Furthermore, there was no association between the husband's attitude and knowledge of FP methods, while there was an association between the wife's attitude and sociodemographic characteristics (years of marriage), and finally, there was no significant association between the sociodemographic characteristics and the wife's practices regarding FP methods.

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