

The Role of Interspousal Communication in Adoption of Family Planning Methods: A Couple Approach

NASRA M. SHAH*

Introduction and Related Research

Of the several approaches designed to study the adoption of family planning methods one approach emphasizes the dynamics related to the husband-wife dyad, especially communication and interaction between the spouses as related to family planning behaviour. Interspousal communication has been shown to be an important variable in family planning behaviour in relatively underdeveloped as well as developed societies.

Authors of the well-known Puerto Rican family study attributed a great deal of importance to interspousal communication as an explanatory factor in family planning and fertility behaviour [5 and 6]. Hill [6] described communication as the "hub" variable and concluded that the principal factors in family planning adoption were emphasis on planning, communication between spouses and the ability to come to a joint decision.

Using data from a survey in East Pakistan (now Bangladesh), Green [3] showed that contraceptive use was correlated directly with interspousal communication. Among non-user couples, 75% of the husbands and 69% of the wives said they had learned nothing from their spouses, compared with only 45% and 17% of user husbands and wives saying they had learned nothing from each other. Green feels that one of the major barriers to diffusion of action-associated knowledge about family planning is the lack of communication between spouses.

Rainwater [13] used Elizabeth Botts' scheme of family role relationships to study the differential effectiveness of family planning use by family

*The author is a Research Demographer at the Pakistan Institute of Development Economics, Islamabad. The paper is based on research work conducted as part of her Sc.D. dissertation at the Johns Hopkins University, Baltimore (Md.). The author is thankful to M. L. Qureshi, J.G. Hardee, M. Afzal, Iqbal Alam and Mehtab Karim for their helpful comments and suggestions. Responsibility for any errors or omissions, however, rests with the author only.

type among a sample of American couples [1]. He found that couples having a joint or intermediate role relationship were more likely to use effective methods compared to couples having segregated role relationships. All of the couples having joint role relationships were using effective contraception after the last wanted child as compared to 60% of the intermediate segregated and only 26% of the highly segregated groups.

Michel [8], in a study of 550 French urban families showed that positive interaction within the couple was more closely related with the success of family planning, especially reduction of excessive fertility, than socio-economic status variables like education, occupation or income. Other studies by Green *et al.* in Bangladesh [4] and Poffenberger in an Indian village [11] also support the positive relationships between interspousal communication and family planning use.

Recent data from the United States, however, calls into question the positive association between these variables. Polgar and Rothstein [12] in a study of Puerto Ricans and blacks in New York city showed that use or non-use of contraception was not strongly related to the conjugal role types. The authors attribute this lack of difference to the increasing use of methods like pill and IUD, methods which are coitus-independent and do not require joint action for use. Stokes and Dudley [20] in their study of white, non-farm families in Kentucky showed that women living in jointly organized families had lower fertility than women living in segregated conjugal families. The joint and intermediate groups generally reported higher ever-use of most methods, although the conjugal role structure appeared to have little effect on the use of coitus-independent methods—pill and IUD. In another study of white, non-farm, non-catholic couples in Kentucky, Stokes [21] showed that conjugal role relationship did not have a significant effect on fertility after controlling for socio-economic status.

The positive relationship between interspousal communication (ISC) and contraceptive use has important implications for programmes aimed at providing family planning information to spouses. Michel [8] and Green *et al.* [4] have argued that one of the reasons for low adoption rates among couples is the lack of communication between them. One way of increasing ISC is to provide family planning information to both spouses. In an experimental study in Dacca, Bangladesh, it was shown that couples living in the colony where both spouses were provided family planning information showed much greater clinic attendance and contraceptive use compared to colonies where only the husband or wife was given such education. This suggests that information that is provided to husband as well as wife is likely to increase the knowledge and motivation level of the "couples" as a unit thus contributing to increased communication resulting in higher actual adoption of contraceptive methods. Given the contradictory findings and keeping in mind the policy implications it is important to find out whether the said positive relationship between ISC and family planning use holds true in case of Pakistani couples.

Objective

The major objective of the present paper is to discuss the role of husband-wife communication in adoption of certain contraceptive methods in the light of past research.

The analysis is based largely on simple cross tabulations showing the relationship between ISC and contraceptive use without controlling for any of the host of factors which might have significant influences on family planning use.¹ The aim of the present paper, however, is to deal specifically with the particular link between ISC and ever-use of contraceptive methods. Distinction between various types of methods (coitus dependent versus coitus independent) is made in order to see whether the positive relationship holds after controlling for type of method. A brief discussion of the relationship between other communication channels (e.g. mass media) and use of family planning methods is also included.

The responses of husbands and wives have been matched in order to arrive at scales of couples agreement with regard to communication as well as use. Matching of responses enables us to ascertain the maximum proportion of ISC and reported contraceptive use and thus constitutes a better measure of these phenomena than responses of only one spouse.² Further detail and rationale for using the couple as a unit of study is given in the next section.

Data and Methodology

The paper is based on data collected as part of the National IMPACT Survey conducted in Pakistan in 1968-69.³ Analysis in the present paper is restricted to data from West Pakistan. The survey was designed to elicit information on knowledge, attitudes and practice of family planning together with a detailed pregnancy history and some details on background socio-economic variables from a national sample of ever-married women in about 2500 households. About half of the households were randomly selected for interviewing husbands of currently married women. The present paper analyses data for 1,027 matched couples.

Interspousal communication (ISC) is viewed as one of the factors in a sequence of variables related to the use of family planning methods and fertility decline. Figure 1 gives a schematic representation of the hypothetical relationships between various sets of factors using practice of family planning methods as the dependent variable.⁴ Background demographic and socio-economic variable are related to family planning practice by means of four sets of intervening factors generally similar to the scheme used by Hill and others in the Puerto Rican study. One basic difference between the two approaches is the use of the 'couple' rather than only the husband or wife as the unit of analysis in the present study.

Some of the reasons why studying the couple should be more useful compared to studying any individual spouse are as follows: Firstly, the process of procreation—which is our ultimate dependent variable—essentially involves the couple and not just one partner. Physical as well as emotional support and

¹Multivariate analysis of adoption using stepwise regression techniques is in process. Using a two-stage model, the "effect" of intervening variables (including ISC) on adoption is being analysed after controlling for socio-economic and other background factors. The analysis of relationship between the sets of variables is based on the sequence shown in Figure 1.

²For problems related to matching of couples' responses, see Yaukey [22] and Hill [5].

³For details of the survey, see Pakistan Family Planning Council [10] Sirageldin [18]; Sirageldin and Hardee (19) and Pakistan Population Planning Council Special Report. [9]

⁴For detailed analysis based on this model see Shah [17].

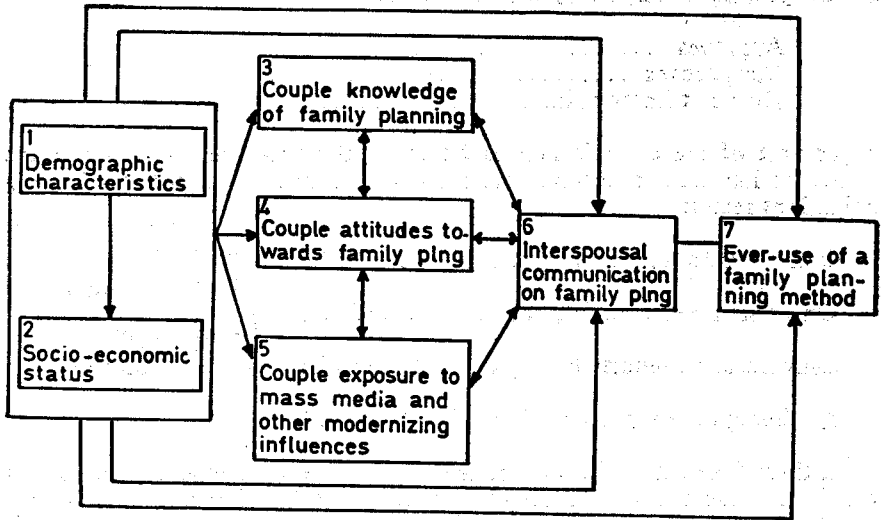


FIG. 1

Schema of Factors Related to Inter-spousal Communication on Family Planning and Family Planning Use.

reinforcement might be essential elements for continued adoption. Secondly, analyzing the socio-economic as well as knowledge and attitudinal characteristics of the couple as opposed to either spouse is theoretically more comprehensive since any of the spouses can initiate family planning discussion and use. For example, the literacy and occupational status of both husband and wife can have important influences on family planning behaviour. Thirdly, using the responses of both spouses can give us a better idea about the accuracy in responses. If both spouses report having used a method our confidence in the validity of response is heightened. Lastly, analysis of couple responses has important implications for the communication behaviour between husband and wife. For example, if both partners have knowledge of how to interfere with their procreation potential, the likelihood that the subject would come up in conversation is increased because either spouse possesses a minimum amount of knowledge to initiate discussion.

With these rationale in mind responses of the husbands and wives have been matched in terms of communication as well as use. ISC in the present paper is defined in terms of the following questions which were asked from both spouses:

Q. 1. Have you ever talked about family planning with your husband/wife?

Yes.....

No.....

Q. 2. Do you know his/her opinion about it?

Approves
 Disapproves
 Does not know opinion

A major part of the analysis here is based on the first question. When the responses of husbands and wives are matched on this question the following combinations result:

- | | | |
|----|--|-------------------------------|
| 1. | Both spouses report having talked to each other. | } "Joint" Communication |
| 2. | Only wife reports having talked to the husband. | |
| 3. | Only husband reports having talked to the wife. | } "Separate" Communication |
| 4. | Neither spouse reports having talked to the other. | |

If these four categories were ranked on a scale of communication, 1 and 4 would constitute the two extremes with 2 and 3 forming an intermediate category. Among the couples where both spouses report talking there is probably more empathy (and consensus)⁶ on the subject since both spouses recognize the interchange to have taken place. It is recognized, however, that overt communication is not a necessary condition of empathy as shown in Dacca (Carlaw et al; 1971).

Although we do not have data to support this in the present study, it can be hypothesized that couples where both spouses report communication (joint communication) on family planning are generally more communicative couples characterized by "joint" type of role-relationships within the family. On the other hand, couples where only one or neither of the spouses report such communication are generally less communicative couples and are characterized by "intermediate" and "segregated" role relationships if classified according to Bott's scheme [1]. Following from the studies reviewed above, couples having joint type of role relationships and a large amount of empathy and consensus would have a greater potential for family planning action. We, therefore, denote couples where both spouses reported talking as "high communication" or "joint communication" couples. Couples where only one of the spouses reported communication are denoted as couples having "separate communication".

It is in order to point out that the data that we have for measuring ISC is rather limited in nature compared to many of the studies reviewed above. However, we hope that communication on family planning might represent one aspect of a whole range of interaction patterns that exist between the husband and wife. One possible critique of using ISC as the independent variable to study ever-use could be that such communication is a necessary antecedent to use. Although this might be true for some cases, a definite one to one correspondence between the two is not essential. Methods that are coitus-dependent and require physical cooperation of the spouses imply a greater likelihood of ISC.

⁶The terms empathy and consensus are defined in Hill and other's terms as: "The extent to which each spouse correctly perceives the ideas and attitudes of the other" and "mutually recognized agreement." [5 pp. 143-144].

In either type of method, however, ISC does not have to precede use. ISC might not take place at all, or it might take place after the use of a method. Furthermore, in a male dominant society like Pakistan ISC may be a unidirectional phenomenon. For example, the husband might initiate discussion and ask his wife to adopt a certain method. He might make the decision which she executes. In a situation like this, communication role of the husband rather than joint communication is the important factor related to the dynamics of use.

In the present study adoption of family planning has been defined as the ever-use (past and current) of any family planning method. Finer distinction in terms of effective versus ineffective methods is attempted by comparing adoption of programme as opposed to non-programme methods.⁶ Our definition of adoption has the weakness of including couples at the two extremes of an adoption continuum—regular users of effective methods with one time users of an ineffective method. Our contention here is that although the measure is not methodologically so refined, a couple who has at least tried a method (even if once) is behaviourally one step farther than a couple who has never used any method.

Findings

Communication data for rural and urban couples are presented in Fig. 2. Interspousal communication was noticeably higher in urban as compared to rural areas. Both spouses reported communication about family planning among 24% of the urban and 10% of the rural couples. The rural—urban differential is also observable where only the wife reported communication—26% in urban compared to 18% in rural areas. Among the couples where only the husband reported communication, however, the same proportion reported talking (14%) in rural and urban areas. This finding of no difference between the urban and rural husbands, is surprising because urban husbands are more literate, have higher incomes and greater knowledge of family planning and would therefore be expected to report higher communication.

Regarding contraceptive use, husbands and wives are not in complete agreement about whether a method has been used. Seventeen percent of the husbands and 15% of the wives gave independent reports of the use of a family planning method. Seventy-six percent of the husbands and wives agreed they had never used a method while 8% agreed they had ever used any method. In 10% of the cases only the husband reported use while in another 6% of the cases only the wives reported use. Thus, if the responses of husbands and wives are combined 24% of either husband, wife or both reported having ever-used a family planning method. The analysis in the present paper has been organized in terms of the combined responses of husbands and wives. We believe that these different reporting patterns might be related to the effectiveness, regularity or type of method used. It is expected that couples where both spouses reported use would be the regular users of more effective methods.

⁶The programme refers to the government family planning programme launched in 1965. Among the reversible methods of contraception, the method emphasized greatly was Intrauterine Devices (IUD); other methods that the programme sought to provide were diaphragm, foam, jellies, condoms.

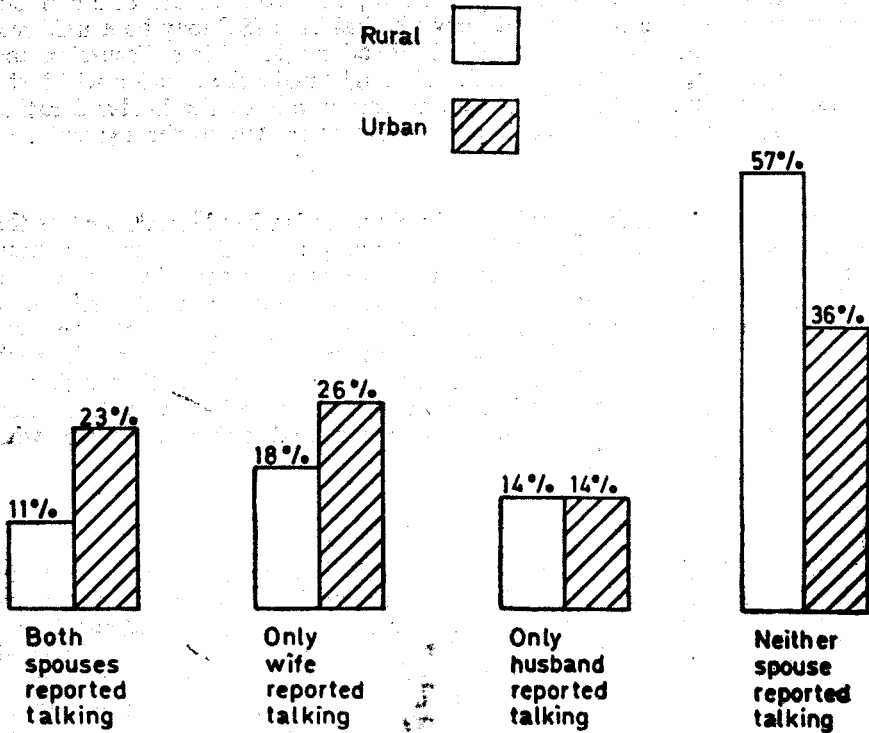


FIG. 2

Percentage of Interspousal Communication About Family Planning for Rural and Urban Areas, West Pakistan Couples, 1968

The Relationship Between ISC and Ever-Use

The relationship between ISC and ever-use of a family planning method is presented in Figure 3 and Table 1. Couples having joint communication (i.e. couples where both spouses reported talking) reported the highest proportion of ever-use. Among couples where only one of the spouses reported ISC, only 25% couples reported use (by either or both spouses) compared to 65% couples where both spouses reported ISC (Fig. 3). Furthermore, among 57% of the rural and 70% of the urban couples having joint communication, at least one spouse reported ever-use; the corresponding percentages for couples where only the husband reported talking were 22% and 36% and 18% and 28% where only the wife reported talking (Table 1). The largest differences in reported use existed among couples where both spouses reported use. Thirty-three percent of rural and 31% of urban couples having joint ISC reported use compared to only 5% of rural and 8% of urban couples where only the husband

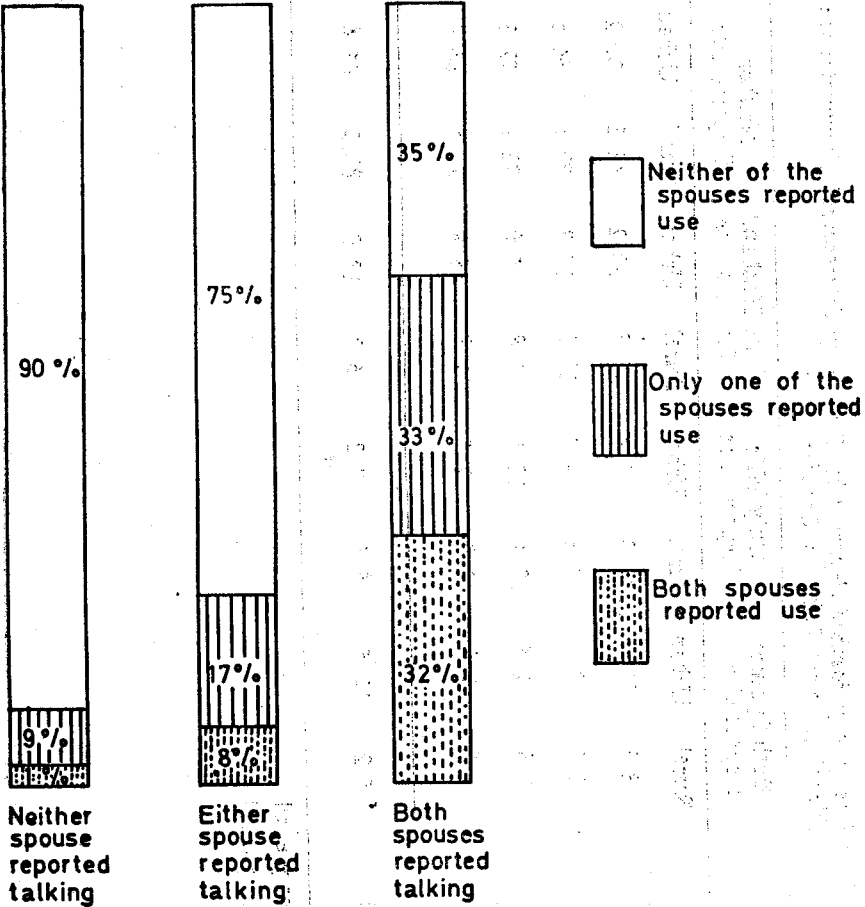
Table I
 Percentage Distribution of Ever Use of Any Method Reported by Couples by Interspousal Communication on Family Planning, West Pakistan Couples, 1968

| Interspousal Communication | Both Spouses Report Use | | Only Wife Reports Use | | Only Husband Reports Use | | Neither Reports Use | | Total | |
|------------------------------|-------------------------|-------|-----------------------|-------|--------------------------|-------|---------------------|-------|-------|-------|
| | Rural | Urban | Rural | Urban | Rural | Urban | Rural | Urban | Rural | Urban |
| Both spouses report talking | 33.3 | 31.1 | 10.0 | 9.4 | 13.3 | 29.2 | 43.3 | 30.2 | 60 | 106 |
| Only husband reports talking | 5.3 | 8.1 | 6.6 | 9.7 | 10.5 | 17.7 | 77.6 | 64.5 | 76 | 62 |
| Only wife reports talking | 3.8 | 12.6 | 10.4 | 10.1 | 3.8 | 5.0 | 82.1 | 72.3 | 106 | 119 |
| Neither reports talking | 0.6 | 1.9 | 3.0 | 2.5 | 4.8 | 8.8 | 91.5 | 86.9 | 331 | 160 |
| Total | 5.2 | 12.5 | 5.6 | 7.2 | 6.3 | 13.9 | 82.9 | 66.4 | 573 | 447 |

X^2 rural = 138.62 significant at $p < .01$

X^2 urban = 112.47 significant at $p < .01$

reported ISC.⁷ Urban husbands reported a noticeably high proportion of ever-use when the couple had a joint communication pattern as opposed to a separate communication pattern—29% for joint communication compared to 10% where only the wife reported talking. The differences for use reported only by wives were generally small.



INTERSPOUSAL COMMUNICATION ON FAMILY PLANNING

FIG. 3

Percentage of Ever-Use Reported by Neither, Either or Both Spouses by Interspousal Communication on Family Planning, West Pakistan Couples, 1968

⁷The differences for rural as well as urban areas are significant at pp. < .05 using the z statistics.

In order to see whether this positive relationship between ISC and ever-use holds true for specific types of methods further analysis was carried out. The results are presented in Table II and III. Table II shows the proportion of use reported for programme methods and Table III for non-programme methods. The former type of methods can be generally regarded as the more modern and effective methods compared to the latter type of methods. One noticeable difference in use reported for the two sets of methods is that a relatively much smaller proportion of both spouses reported use for non-programme as compared to programme methods—1% compared to 5% in rural and 4% compared to 13% in urban areas. The differences in use reported only by husbands or wives were not very large.

The significant positive relationship between ISC and ever-use can also be observed for programme methods. Twenty eight percent of rural and 25% of urban couples having joint communication reported use (by both spouses) compared to 4% of rural and 7% of urban couples where only the husband reported talking (Table II).^a Both husbands and wives reported higher use when the couple had joint communication in rural and urban areas. Husbands reported a noticeably higher proportion of use (24%) when the couple had a joint rather than separate communication pattern—13% when only the husband reported talking and 7% when only the wife reported talking.

The significant positive relationship between ISC and ever-use in case of non-programme methods seems to be true only for use reported by either spouse (Table III). Husbands and wives having joint communication reported more use compared to those having separate communication patterns. Urban husbands again reported much higher use when the communication pattern was joint rather than separate—24% husbands reported use when the communication pattern was joint, compared to 13% when only the husband reported talking and 4% when only the wife reported talking.

It might be noted here that the differences in use reported by rural as opposed to urban couples, though present, are not as noticeable as the strong "within-group" differences in use reported by rural or urban respondents having different communication patterns. This is particularly true in case of use of all methods and programme methods (Tables I and II). Both spouses reported roughly the same proportions of ever-use in rural as well as urban areas when the couple had a joint communication pattern. On the other hand, the within-urban and within-rural differences by type of communication are very large.

We can conclude that ISC has a positive association with ever-use reported by either or both spouses in case of programme methods but the relationship is not so strong in case of non-programme methods.

Use of IUD and Pill: The Two Coitus-independent Methods

The programme methods in Table II include IUD and pill, the two coitus independent methods studied by Polgar and Rothstein (1970) and found to be unrelated to conjugal role relationships. Table IV gives reports of husbands and wives on the ever-use of pill and IUD for the various communica-

^aThe differences for rural as well as urban areas are significant at $p < .01$ using the z statistics.

Table II
 Percentage Distribution of Ever-Use of Program Methods Reported Couples by Interspousal Communication, West
 Pakistan Couples, 1968¹

| Interspousal Communication | Both Spouses Report Use | | Only Wife Reports Use | | Only Husband Reports Use | | Neither Reports Use | | Total | |
|------------------------------|-------------------------|-------|-----------------------|-------|--------------------------|-------|---------------------|-------|-------|-------|
| | Rural | Urban | Rural | Urban | Rural | Urban | Rural | Urban | Rural | Urban |
| Both spouses report talking | 28.3 | 25.2 | 10.0 | 8.4 | 11.7 | 24.3 | 50.0 | 42.1 | 60 | 106 |
| Only husband reports talking | 3.9 | 6.5 | 2.6 | 4.8 | 5.3 | 12.9 | 88.2 | 75.8 | 76 | 62 |
| Only wife reports talking | 0.0 | 6.7 | 9.4 | 5.0 | 2.8 | 6.7 | 87.7 | 81.5 | 106 | 119 |
| Neither reports talking | 0.3 | 0.6 | 1.5 | 1.3 | 0.9 | 3.1 | 97.3 | 95.0 | 331 | 160 |
| Total | 5.2 | 12.5 | 5.6 | 7.2 | 6.3 | 13.9 | 82.9 | 66.4 | 573 | 447 |

¹ Programme methods include condom, diaphragm, foam, jelly or cream, tampon or sponge, IUD, pill, male or female sterilization
 χ^2 rural = 166.56 significant at $p < .01$
 χ^2 urban = 110.12 significant at $p < .01$

Table III
 Percentage Distribution of Ever-Use of Non-Program Methods Reported by Couples by Interspousal Communication, West Pakistan Couples, 1968^a

| Interspousal Communication | Both Spouses Report Use | | Only Wife Reports Use | | Only Husband Reports Use | | Neither Reports Use | | Total | |
|------------------------------|-------------------------|-------|-----------------------|-------|--------------------------|-------|---------------------|-------|-------|-------|
| | Rural | Urban | Rural | Urban | Rural | Urban | Rural | Urban | Rural | Urban |
| Both spouses report talking | 5.0 | 5.7 | 11.7 | 13.2 | 11.7 | 23.6 | 71.7 | 57.5 | 60 | 106 |
| Only husband reports talking | 1.3 | 1.6 | 3.9 | 6.5 | 6.6 | 12.9 | 88.2 | 79.0 | 76 | 62 |
| Only wife reports talking | 1.9 | 6.7 | 2.8 | 9.2 | 3.8 | 4.2 | 91.5 | 79.8 | 106 | 119 |
| Neither reports talking | 0.0 | 1.3 | 1.8 | 1.3 | 4.5 | 8.1 | 93.7 | 89.4 | 331 | 160 |
| Total | 1.0 | 3.8 | 3.3 | 6.9 | 514 | 11.4 | 90.2 | 77.9 | 573 | 447 |

^aNon-Programme methods include abstinence, rhythm, withdrawal, douche, breast feeding, abortion and other methods.
 X² rural = 36.53 significant at p < .01
 X² urban = 50.8 significant at p < .01

Table IV

Percentage Distribution of Wives and Husbands Reporting Ever-Use of IUD and Pill by Interspousal Communication, West Pakistan Couples, 1968

| ISC | Wives | | Husbands | |
|--------------------------------|--------------------------|-------------------------------|--------------------------|-------------------------------|
| | Reported Ever-Use of IUD | Reported Ever-Use of the Pill | Reported Ever-Use of IUD | Reported Ever-Use of the Pill |
| Both spouses reported talking | 18.0 (167) | 6.7 (165) | 13.9 (165) | 9.8 (164) |
| Only husbands reported talking | 2.9 (138) | 1.4 (138) | 4.4 (135) | 2.2 (136) |
| Only wives reported talking | 5.8 (224) | 0.4 (224) | 0.4 (223) | 1.3 (223) |
| Neither reported talking | 1.2 (489) | 0.0 (488) | 0.2 (489) | 0.0 (490) |

Parentheses contain the number of cases in each category.

iton patterns.⁹ The strong positive association between joint ISC and ever-use is present, particularly for the IUD. Eighteen percent of the wives reported using an IUD, when the couple had a joint communication pattern compared to 3% when only husband reported talking and 6% when only the wife reported talking.¹⁰ Similarly, 7% of the wives reported using the pill when the communication pattern was joint compared to 1% when the husband reported talking and 0.4% when the wife reported talking.¹¹ The husband's reports on the two methods also followed a similar trend as the wives. Thus, ISC was found to have a noticeable positive association with the use of IUD and pill as reported by both husbands and wives. Perhaps it is only in some cultures at a certain level of development and generally high levels of contraceptive use that conjugal role relationships cease to be important factors in use of given methods. One specific reason for the Polgar and Rothstein findings might be the greater amount of independence that the wife has in terms of decision-making (about contraception) in a society like America. The fact that use of contraception constitutes a rather novel situation for couples in Pakistan might be leading to more ISC among them. Finally, it is difficult to make any conclusive judgement about this relationship in the absence of more detailed information on the general interaction patterns and role relationships between Pakistani couples.

Family Planning Use in Relation to Other Communication Channels

The spouse is one of the many possible sources for gathering information on family planning. The Pakistan family planning program attempted to deliver family planning information through several sources, mass media as well as interpersonal. The Impact Survey collected data on the channels from which the husbands and wives had gathered such information. The relevant information for analysing the relationship between exposure to various sources and ever-use is presented in Table V. Sources have been categorized into four types of channels according to a scheme suggested by Rogers (1971) and modified for our purposes.¹²

It has been reported in the literature that although mass media channels are effective in conveying knowledge of family planning to the couples, interpersonal channels are more effective in motivation towards the actual adoption of a family planning method, particularly in the later stages of a programme [See 7, 14, 15 and 16]. Table V shows that Pakistani husbands and wives who reported that they had heard of family planning from interpersonal cosmopolite sources i.e., family planning personnel and doctors consistently reported the highest proportions of ever-use in both rural and urban areas.¹³ Also, respondents who had heard of family planning from mass media chan-

⁹The discrepancies in reporting the use of a method were generally in favour of the husband reporting higher use on most methods except the IUD. The two methods worth noting were abstinence and condom. Three percent of the wives reported having ever used abstinence compared to 8% of husbands; the corresponding figures for condom were 5% and 8% respectively.

¹⁰The differences are significant at $p < .05$ using the z statistic.

¹¹The differences are significant at $p < .05$ using the z statistic.

¹²Detailed analysis on the fertility response of couples to various media of communication imparting family planning knowledge is currently underway and will be reported in a later paper.

¹³It must be pointed out that the categories of exposure to sources information are not mutually exclusive, i.e., a person who had heard from more than one type of source was counted in all the sources from which she/he had heard. Hence, the data in Table V can be treated only as indicative of trends rather than specific test of a hypothesis.

Table V

Percentage Distribution of Ever-Use Reported by Couples by Exposure of Wives and Husbands to Sources of Family Planning Knowledge, West Pakistan Wives and Husbands, 1968**

| Source of Knowledge about F.P. | Ever-Use Reported by Either or Both Spouses | | | | | |
|---|---|-------|----------|-------|-------|----------|
| | Rural | | | Urban | | |
| | Wives | N | Husbands | N | Wives | Husbands |
| Mass Media, cosmopolite ¹ | 28.7 | (143) | 20.8 | (231) | 44.6 | 43.8 |
| Interpersonal, cosmopolite ² | 33.7 | (184) | 30.4 | (125) | 46.6 | 52.9 |
| Interpersonal, localite ³ | 19.7 | (411) | 20.6 | (282) | 37.6 | 42.3 |
| Interpersonal localite-cosmopolite ⁴ | 30.8 | (13*) | 10.2 | (127) | 28.6 | 40.7 |

**Only those cases where husbands or wives has heard from the source are included in each category.

¹ Radio, TV, cinema, newspapers and posters

² F.P. personnel and doctors

³ Friends and relatives, spouse, hakim, religious leader

⁴ Meetings and parties

* Refers to N less than 25

nels reported fairly high proportions of ever-use. In general, reported ever-use was found to be positively associated with the number of channels from which the husbands or wives had heard of family planning.

Discussion

The relationship between interspousal communication and ever-use of programme as well as non-programme methods has been analysed by means of simple cross tabulations and without controlling for any of a host of factors which are likely to effect use regardless of ISC. Husband wife communication has been treated as one factor in a larger model consisting of background as well as intervening variables related to adoption of contraception.

Given the limited information on communication, we found a strong positive relationship between ISC and family planning use—particularly when communication and use were reported by both spouses. This type of relationship suggests perhaps that certain couples who are more “modern” and have greater consensus and empathy in terms of one behaviour (communication) are more modern in terms of other behaviours—adoption of family planning methods in the present case.¹⁴

The relationship between ISC and the two coitus-independent methods—namely IUD and pill—is also clearly positive. It has been argued that although we have limited data available, the lack of association between conjugal role types and contraception is perhaps true only for developed societies with high rates of contraceptive use.

These findings suggest that if both spouses can be reached and provided family planning education the likelihood of ISC increases. When both spouses have knowledge of the means of contraception and both spouses have favourable attitudes towards family planning the situation is very congenial for increased communication. Greater amount of ISC in turn facilitates actual adoption of contraceptive methods. These theoretical notions which have been upheld by data from the IMPACT survey have important policy implications for programmes aimed at family planning education. Family planning programmes in most countries have been generally directed only at the females. The present study indicates that this approach might not achieve optimal results in terms of adoption of contraception since it is less likely to open the dialogue between husband and wife compared to an approach where both spouses are reached by family planning programmes.

Finally, analysis of interspousal communication seems to be a promising area for understanding better the dynamics related to the adoption of family planning methods. The data suggest that “couple” orientations and information rather than the “orientation” of only one spouse might be a highly significant variable in recruiting more adopters.¹⁵

¹⁴For example, further analysis of the data shows that couples where both spouses (rather than one) have higher aspirations for girls' education, smaller ideal family size, higher exposure to mass media of communication, and favourable attitudes towards family planning are more communicative couples and report greater use of family planning methods.

¹⁵Multivariate analysis of the data shows that when both spouses are educated, have high effective knowledge of family planning and both have knowledge of each other's approval of family planning, positive behaviour in terms of actually adopting a contraceptive method is greatly enhanced. Thus, when both spouses possess certain attributes the ‘gains’ in family planning adoption are much greater than if only one of the spouses possesses such attributes.

References

1. Bott, Elizabeth. "Urban Families: Conjugal Roles and Social Networks." *Human Relations*. Vol. 8, No. 4. 1958.
2. Carlaw, Raymond W., Richard Reynolds, Lawrence W. Green and N.I. Khan. "Underlying Sources of Agreement and Communication Between Husbands and Wives in Dacca, East Pakistan." *Journal of Marriage and Family*. Vol. 33, No. 3. 1971.
3. Green, Lawrence W. "Identifying and Overcoming Barriers to the Diffusion of Knowledge About Family Planning." *Advances in Fertility Control*. Vol. 5, No. 2. 1970.
4. _____, Harold C. Gustafson, William C. Griffiths and David Yaukey. *The Dacca Family Planning Experiment*. Berkeley. (Health Education Reports. No. 3.) 1972.
5. Hill, Reuben, Mayone J. Stycos and Kurt W. Back. *The Family and Population Control: An Experiment In Social Change*. Chapel Hill: University of North Carolina Press. 1959.
6. Hill, Reuben. "The Significance of the Family in Population Research." In William T. Liu (ed.) *Family and Fertility*. Notre Dame. 1967.
7. Hutchinson, Jean. "Using TV to Recruit Family Planning Patients." *Family Planning Perspectives*. Vol. 2, No. 2. March 1970.
8. Michel, Andree. "Interaction and Family Planning in the French Urban Family." *Demography*. Vol. 4, No. 2. 1967.
9. Pakistan. Population Planning Council. *National Impact Survey Report*. Lahore. No date.
10. Pakistan. Family Planning Council. *National Impact Survey 1968: Survey Design and Development*. Karachi: Inter Service Press Ltd. 1968.
11. Poffenberger, Thomas. *Husband Wife Communication and Motivation Aspects of Population Control in an Indian Village*. Baroda (India): M.S. University of Baroda, Department of Child Development. 1969.
12. Polgar, Steven and Frances Rothstein. "Family Planning and Conjugal Roles in New York City Poverty Areas." *Social Science and Medicine*. Vol. 4. 1970.
13. Rainwater, Lee. *Family Design: Marital Sexuality; Family Size and Contraception*. Chicago, Aldine Publishing Company. 1965.
14. Rogers, Everett M. and Floyd F. Shoemaker. *Communication of Innovations: A Cross Cultural Approach*. New York: The Free Press. 1971.
15. Schramm, Wilbur. "Communication in Family Planning." *Reports on Population/Family Planning*. New York: The Population Council. April 1971.
16. _____ "The Things we know About Family Planning Information." In Robert R. Blake (ed.) *Final Report on International Conference on Communication in Family Planning*. Chapel Hill: The North Carolina Population Centre. 1971.
17. Shah, Nasra M. : "Interspousal Communication and Agreement as Variables in the Study of Family Planning". Unpublished Sc. D. Dissertation. Baltimore: Johns Hopkins University. 1974.
18. Sirageldin, Ismail. "The Survey Method in Family Planning Research and Evaluation: Review and a Proposal." Paper presented at joint American Association for Public Opinion Research/World Association for Public Opinion Research Conference. Atlantic City. 1972.

19. ———— and Gilbert Hardee. "A Flexible Interaction Model for Analysing Sample Survey Data for Planning and Evaluation of Fertility Control in Pakistan." *In Cento Symposium on Demographic Statistics*. Ankara (Turkey): Office of U.S. Economic Coordinator for CENTO Affairs. 1970.
20. Stokes, Shannon C. and Charles Dudley. "Family Planning and Conjugal Roles": Some Further Evidence." *Social Science and Medicine*. Vol. 6. 1972.
21. ———— "Family Structure and Socioeconomic Differentials in Fertility." *Population Studies*. Vol. 27, No. 2. 1973.
22. Yaukey, David W., William Griffiths and Beryl J. Roberts. "Concurrence and Empathy on Birth Control Motivation in Dacca, East Pakistan." *American Sociological Review*. Vol. 32, No. 5. 1967.