

Full Length Research Paper

A study on the perception of adolescents towards contraceptive use in Blantyre District of the Southern Region of Malawi

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Accepted 24 April, 2015

A study was conducted to explore attitudes towards contraceptive use among sexually active tertiary schooling adolescents in Blantyre District of the Southern Region of Malawi. The study design was exploratory and employed qualitative data collection and analysis method. A purposive sample size of 23 (13 female and 10 male) sexually active adolescents was used in the study. Data was collected through in-depth interviews that were conducted using an open ended interview guide. Qualitative data was manually analysed using content analysis. Two themes that emerged from the adolescents' narrations were positive and negative attitudes towards contraceptive use. Positive attitudes were developed from acknowledging benefits of contraceptives; and having beliefs and values that recognised responsibility; readiness; and motivation for contraceptive. The motivation factors included the desire for good life, health, stable future family, higher education and independence. Negative attitudes on the other hand arose from challenges, disadvantages, misconceptions as well as beliefs and values that disapprove the use of contraceptives among adolescents. To increase contraceptive use among sexually active adolescents, there is a need for adequate information about contraceptives in terms of advantages, disadvantages and side effects. This would help mitigate negative attitudes on contraceptives from misinformation and misconceptions.

Keywords: Contraceptives, contraceptive side effects; condoms, adolescents, contraceptive misinformation and misconception.

INTRODUCTION

Most adolescents especially those aged between 15 and 19 years are sexually active yet they rarely use contraceptives due to negative attitudes (Munthali et al., 2006). Low contraceptive use among adolescents results

List of Abbreviations

COMREC, College of Medicine Research and Ethics Committee; FP, Female participant; HIV, Human Immunodeficiency Virus; MDHS, Malawi Demographic Health Survey; MP, Male participant; NSO, National Statistical Office; STI, Sexually Transmitted Infection; WHO, World Health Organization.

in unintended pregnancies and births. Globally, more than 70% of unmarried adolescents aged between 15 and 19 years experience unwanted pregnancies (WHO, 2007). In addition, 14 million adolescents give birth each year with 12.8 million births occurring in developing countries alone (Stover and Ross, 2010). Global contraceptive use prevents more than 200 million unintended births annually (Stover and Ross, 2010). Nearly 70% of young women in sub-Saharan Africa, Southeast Asia and South Central Asia have unmet needs for contraception (Barroso, 2010). In Malawi, there is a remarkably high unmet need for contraceptive use among adolescents as only 31% of male and 15% of female adolescents use modern contraception methods (Alan Guttmacher Institute, 2005). In addition, there is inconsistent and incorrect use of contraceptives among the adolescents (Cleland et al., 2006).

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Existing policies, guidelines and programs in Malawi favour the provision of health promotion information and services to the youth. The policies include the National Population Policy, National Sexual and Reproductive Health and Rights Policy, National Reproductive Health Strategy, National Family Planning Policy and Contraceptive Guidelines and, the Youth Friendly Health Services initiative. All these efforts aim at promoting the participation of adolescents in decision making about healthcare, however, contraceptive use among sexually active adolescents is still low (Alan Guttmacher Institute, 2005; Biddlecom, et al., 2007; NSO, 2011). According to MDHS 2010, the contraceptive prevalence rate for girls aged between 15 and 19 years is at 29% (NSO, 2011).

Evidence shows that nearly 90% of adolescents approve family planning, but do not use any contraceptive method (Lema et al., 2002). Study results by Munthali et al., (2006) show that adolescents regretted for not using contraception during their last sexual encounter but gave vague reasons for their actions. Little is known regarding adolescents' attitudes towards contraceptives in Malawi. The aim of the study was therefore to explore the adolescents' attitudes towards contraceptive use among sexually active tertiary schooling adolescents in Malawi.

METHODOLOGY

Design

The study used an exploratory design that utilized qualitative data collection and analysis methods to understand adolescent's attitudes towards contraceptive use.

Setting

Data was collected between March and July, 2011 from four tertiary schools in Blantyre district of the southern region of Malawi. Three schools are situated in the urban and one in a semi-urban area of the district. The urban tertiary schools were; Malawi Institute of Journalism, Soche Technical College and Skyway Institute of Management, Research and Development. The semi-urban based school was Mpemba Staff Development Institute.

Sample

Data saturation was reached after interviewing 19 (11 female and 8 male) adolescents that were purposively sampled. However, data collection continued with 4 more participants to validate the data saturation. Consequently, the final sample comprised 23 (13 female and 10 male)

adolescents that were approached and consented to participate in the study.

Inclusion and exclusion criteria

To be recruited for the study, the adolescents had to be; aged between 18 and 19 years, sexually active, unmarried and able to communicate either in English or vernacular language. The study excluded adolescents that were; married, out of school, not sexually active, younger than 18 years and above 19 years old.

Recruitment process

Students were informed about the research including its purpose. Consenting participants who met the inclusion criteria were selected and an appointment was scheduled for the interview.

Data collection

Data was collected through face to face in-depth interviews using an open ended questionnaire. To enhance openness, data was collected by individuals of the same sex during the interviews. The interviews were conducted at Blantyre Youth Centre for urban students and at church premises for the semi-urban students. The students were asked about their sexuality and their views on contraceptive use. Each interview was audio-taped and notes were taken to record any other observations or where a participant objected to have the conversation audio-recorded.

Data analysis

Data was manually analyzed using content analysis (Schilling, 2006). All participants responded to the interviews and the interviews were transcribed verbatim and translated into English within 24 hours. Back translation by an independent person ensured that meanings of narrations were not lost during translation. The first stage of the analysis examined common repeated responses from each question. The second stage involved grouping similar responses into categories. The categories were validated with the participants and themes were developed and are reported as study results.

Trust worthiness

To ensure trustworthiness of the results, four criteria for enhancing rigor in qualitative research were used namely

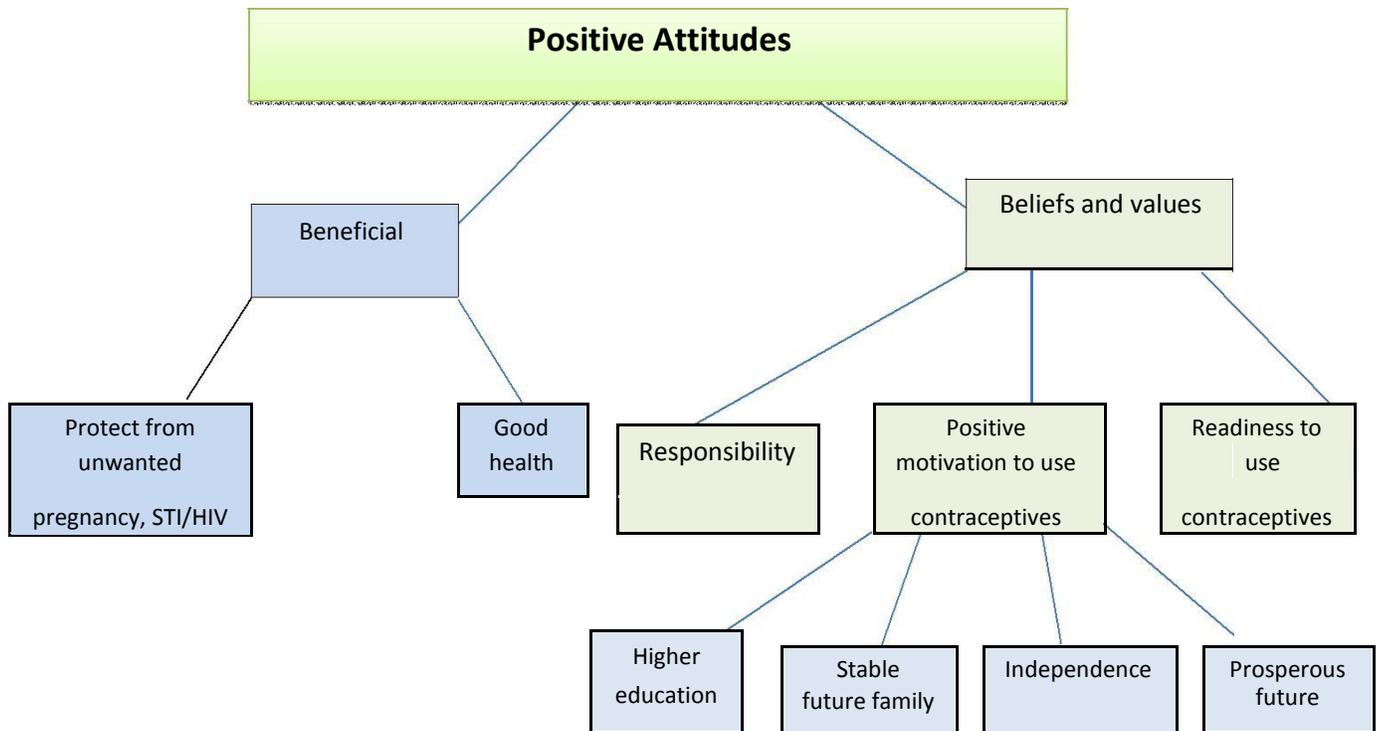


Figure 1. Factors that contributed to the development of positive attitudes among adolescents towards contraceptive use

credibility, confirmability, dependability and transferability (Polit and Beck, 2000). The qualitative data was validated to ensure confirmability (Streubert and Carpenter, 1995). Credibility was ensured by using the member checking approach in which the researchers referred back to the participants to verify the data and interpretation of the findings. Transferability was established through collection of data that included field notes, together with a rich mix of participants' narrations. Confirmability was ensured through the process of bracketing where by all previous knowledge; beliefs and common understanding about attitudes regarding adolescents' use of contraceptives were set aside.

Ethical consideration

Ethical approval to conduct the study was obtained from the College of Medicine Research and Ethics Committee (COMREC). The heads of the tertiary institutions granted permission for the study to be conducted with students from their institutions. Informed consent was obtained from every participant before the interview started. All ethical issues such as maintaining confidentiality were strictly observed during the study. The participants were known by code numbers instead of their actual names and the data was kept in locked drawers.

RESULTS

There were 13 adolescents (10 female and 3 male) that were 18 years old and 10 that were 19 years old (3 female and 7 male), thus in total there were 23 (13 female and 10 male) adolescents.

Adolescent attitudes towards contraceptives

The adolescents' narrations revealed two major themes, positive and negative attitudes which appeared to influence their decision to use contraceptives or not. Adolescents who held positive attitudes acquired such stance not only from contraceptive benefits but also beliefs and values they had on contraceptive use (Figure 1). On the other hand, negative attitudes stemmed from challenges, disadvantages, misconceptions and beliefs and values which prevented them from using contraceptives (Figure 2).

Positive attitude towards contraceptive use

The positive attitudes towards contraceptive use were derived from two sub themes that depicted benefits as well as beliefs and values about contraceptive use by the

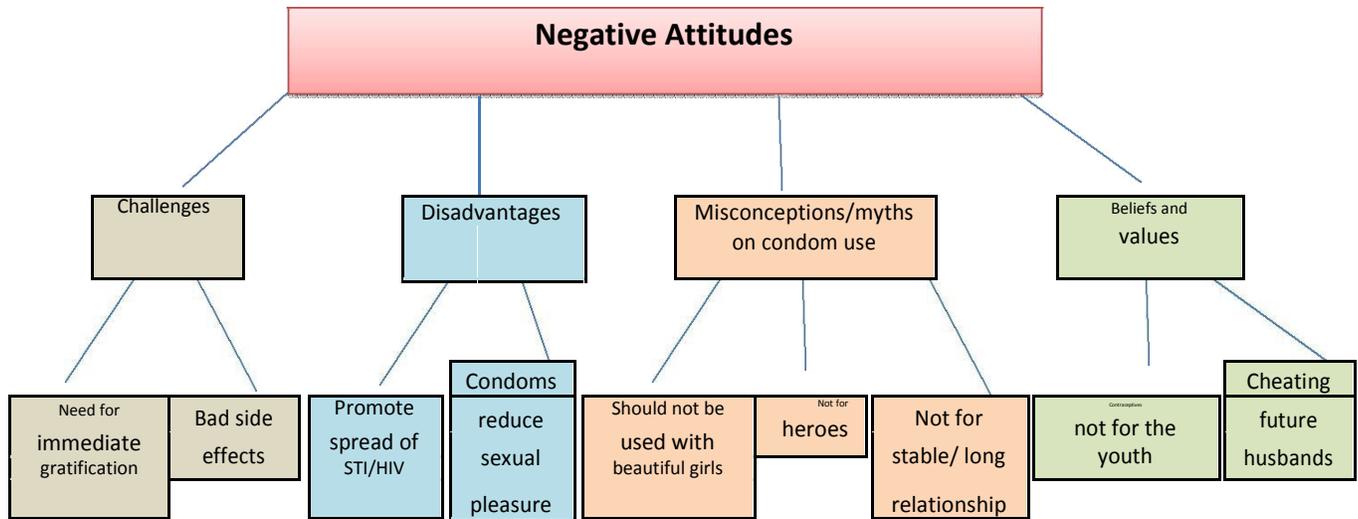


Figure2. Factors that made adolescents develop negative attitudes towards contraceptive use

adolescents (Figure 1). Benefits such as prevention of pregnancy and STIs including HIV and leading a healthy life were cited by the majority of the adolescents. Thus they held the view that contraceptives promote good physical and psychological health among them.

Benefits of using contraceptives

A total of 12 adolescents explained that contraceptives assisted them to prevent unwanted pregnancies, thus offering them opportunities to continue with school especially for the girls. They further explained that contraceptives reduce forced or early marriages, unsafe abortion, psychological discomfort that arises from unwanted pregnancies and worries that arise due to lack of finances to support a child. A male adolescent (MP # 10) shared as follows;

“Contraceptive prevents early and unwanted pregnancies. There are several complications when it comes to giving birth early...adolescents feel ashamed. They may opt for an abortion which is very dangerous because it can result into death or damage of the reproductive organs. When the child is born without any complications, adolescents face problems as they are unable to raise children due to financial challenges...”

The adolescents further explained that contraceptives especially condoms provide dual protection from pregnancy and against sexually transmitted infections (STIs) including Human Immunodeficiency Virus (HIV). A male participant (MP #8) narrated as follows;

“..I prefer condoms because they protect me and my partner from contracting sexually transmitted infections. We need to protect ourselves from contracting HIV because

at the moment there is no known cure for the disease. As future leaders, we need to use contraceptives to promote good health.

All the adolescents explained that disease prevention assisted them to lead healthy lives and hence accomplish their dreams in life. This point was elaborated further by a male adolescent;

“...I even think about diseases. Good health is the first thing for all my dreams to be accomplished. So, I need to make sure that I am in good health and with that everything will just follow.”- MP #19.

Beliefs and values about adolescents’ use of contraceptives

The adolescents in their narrations described several issues that depicted their beliefs and values which influenced their decision to use contraceptives. These included readiness and responsibility to use contraceptives and what they valued in life which provided them with positive motivation to use the contraceptives.

Responsibility to use contraceptives

Some of the participants (10 adolescents) reported that they were responsible for their lives therefore they had to use contraceptives if they could not abstain from sex. This view was shared by a female adolescent (FP # 3);

“With the current lifestyles practiced by the youth, young girls are indulging into sexual relationships at an early age such as 13 years... I feel I only am responsible for

my life I use condoms to protect myself."

Readiness to use contraceptives

Over half (14) adolescents shared the view that readiness for sex meant readiness to use contraceptives as well. A female adolescent (FP #1) explained as follows; *"When I decide to have sex, I always use contraceptives, because without contraceptives I will be inviting more problems for myself...."*

Motivation to use contraceptives

Adolescents' motivating factors for contraceptive use emerged from what they value in life such as the desire for higher education, stable future family, prosperous future, independence and good health.

High education

All the 23 adolescents narrated that they valued their education to be very important for their future. Generally, the respondents wanted to complete their education first before getting married or starting to raise children as shared by a male respondent (MP #7) *".. My wish is to have a PhD in my current field of study and I wish to pursue my studies first before getting married and start raising children."*

Stable future family

The adolescents explained that contraceptive use prevents early childbearing and shared their desire for a stable family in future. They expressed their desire to marry later in life so that they should have the desired number of children that they can manage as parents. They therefore took the advice to postpone childbearing during adolescence to achieve their future goals as narrated by a male respondent (MP #9);

"...my parents advised me that I should not marry anyhow but that my future wife should be faithful. They further advised that I should follow the right process and not being forced to marry a lady because I am responsible for her pregnancy. I desire to have a stable family in future and I make sure that I am well-prepared for marriage."

Prosperous future

A total of 19 adolescents reported that contraceptive use ensured them of a successful and prosperous future. One male respondent (MP #13) explained;

"What I value in my life is success; I have to succeed in life and that's all. I don't want to marry young, have children that I cannot manage to take care of and become poor, therefore I use contraceptives."

Independence

Independence was valued among all the adolescents. Some therefore were determined to use contraceptives so that they achieve their set goals in life and become independent. A female adolescent (FP #20) narrated as follows:

"I wish to complete my studies and get employed. I wish to work hard in whatever I do so that I gain independence from my parents. Contraceptive use will assist me attain my ambitions of becoming independent."

Negative attitudes toward contraceptive use

The narrations from the adolescents showed that some of them had negative attitude toward contraceptives. The negative attitudes were developed from the disadvantages, challenges and negative beliefs on contraceptive use. The study results also show that some adolescents developed negative attitudes due to misconceptions and myths on condom use in particular (Figure 2).

Some adolescents explained that contraceptive use among adolescents had more disadvantages than advantages. The disadvantages include; promotion of premarital sex, reduction of sexual pleasure due to condom uses and bad side effects.

Promotion of premarital sex

The adolescents felt that the use of contraceptives encouraged premarital sex, promiscuity and thereby promoting the spread of STIs including HIV and AIDS. One male respondent (MP #15) made the following contribution;

".. There are some girls who use the pill and since they know that they cannot get pregnant, it makes them get wild and consequently they have many relationships. Their multiple sexual partners put them at a high risk of contracting sexually transmitted diseases."

Condoms reduce sexual pleasure

Reduced sexual pleasure was commonly cited as the reason for inconsistent and non-use of condoms. All male adolescents shared the view that condoms act as a barrier during sex. This point was narrated by a male adolescent (MP#12) as follows;

".. but still there is also a problem with condoms, you don't feel good because there is reduction in friction when you put on a condom. It takes a long time to reach orgasm when you are using a condom due to reduced friction, so I prefer plain sex..."

Challenges of using contraceptives

The main challenges that adolescents encountered were bad side effects that are associated with contraceptive use and the need for immediate gratification. The adolescents were mostly concerned with satisfaction of their sexual desires than their protection against pregnancy and diseases.

Bad side effects

Some (7) respondents reported that it was not proper for them to use contraceptives because of bad side effects. Female respondents explained that contraceptive pills were not suitable for adolescents because they cause problems that can manifest in future such as delayed fertility. Immediate side effects from hormonal methods experienced by some adolescents were weight gain, development of pimples, menstrual disorders such as disappearance of menses, interrupted and heavy menses; and, local discomforts such as pain, sores and irritation with condom use. A female participant (FP #4) narrated as follows regarding the hormonal methods.

".. the pill .. and other methods are meant for married people or those who already have children because they cannot cause much disturbance to the functioning of their reproductive organs. But for the youth, I feel that these contraceptives can disturb the functioning of their reproductive organs and they may bring problems in future."

Need for immediate sex gratification

Five male adolescents explained that sometimes condoms are not used despite being available because people are taken up by the heat of the moment. The need for immediate sexual pleasure overrides the need to put on condoms to prevent pregnancy and STIs as shared by a male participant;

"...Sometimes you can plan to use a condom but it just happens that you are confused and taken up in the events of the moment and you even forget that you have a condom in your pocket, therefore you do it without a condom. You only remember after you have finished and that is when you say aa but I had a condom with me (laughing)." – MP #11.

Beliefs and values that prevent adolescents' use of contraceptives

Both male and female adolescents stated that they believed that contraceptives were not meant for the youth. Other female adolescents explained that using contraceptives meant cheating future partners. Half of them described the youths that use contraceptives as dishonest people who cheat on their future partners because despite being sexually active, they look innocent and appear as if they are abstaining. Consequently they are viewed as virgins by their future partners when in actual fact they had already experienced sex. A female respondent (FP #21) explained;

".. I cannot use contraceptives, because using them is one way of hiding whatever I am doing from my future husband. He will find me without a child and think that I am a virgin when in fact I am not."

Contraceptives messages should target the elderly

The adolescents explained that messages on contraceptives should not be given to the youth because contraceptives are meant for married people and other child bearing adults. This point was narrated by a female adolescent as follows;

"..When I hear the messages about contraceptives that are aired on the radio, I think they target adults especially women and they should continue doing so. In hospitals there are also special programs for women who attend the contraceptive clinics. At these clinics, they are taught more about the methods that are available but they target adults and married people not the youths. This practice should continue"- FP # 5.

However other adolescents preferred receiving messages on contraceptives at their current age but apply the knowledge in future when they are married.

Misconceptions and myths about condom use

Some male adolescents (7) had misconceptions about condom use which included the views that condoms should not be used when having sex with beautiful girls. In addition condoms should not be used by heroes or among adolescents who are in long-term relationships but that they should be used for new or casual relationships only as shared by male respondent (MP #17).

"..When a boy wants to have a relationship with a girl he will propose one who is beautiful. To use a condom with a beautiful girl is not on. .even your friends will mock you about it.. They look at the beauty of the girl and say how can you use a condom on this beautiful girl? It is a loss.

People who do not use condoms are heroes, not cowards or old fashioned. I think it's better to use condoms when you have sex with prostitutes or when the relationship is new."

DISCUSSION

Demographic characteristics

The respondents were all in late adolescence which is characterised by the ability to reason coherently and make independent decisions. At this age, most of the adolescents are sexually active (NSO, 2011).

Positive attitudes toward contraceptive use

Several factors indicated adolescents' positive attitude towards contraceptive use as they recognised the important role contraceptives play in the prevention of unwanted pregnancies and STIs including HIV/AIDS. The results that the respondents desired to postpone pregnancy beyond adolescence agree with those from the previous studies (Ryan, et al., 2007; Stevens-Simon, et al., 2005) where personal feelings, attitudes and skills played a great role in motivating adolescents to use contraceptives.

The adolescents expressed the desire to attain high education and thereby leading a good life. In addition they were aspiring for stable, prosperous future family and good health. Results from other studies (Witwer, 1993) also show that adolescents who were motivated and self-determined developed positive attitudes towards school and were less likely to have premarital pregnancy. In addition, young men used contraceptives because they did not want to miss out on life opportunities (Viner and Booy, 2005). Adolescents, therefore, need to be assisted to have goals in life which can help them focus on their future hence delay pregnancy beyond adolescence.

Another factor that encouraged adolescents to develop positive attitude towards contraceptive use was the desire to avoid pregnancy and child bearing during adolescence. These findings are consistent with other previous studies in Malawi and Uganda (Munthali et al., 2006; Neema, et al. 2007). Pregnant adolescents that experience school interruption bring shame and disgrace to their families (Neema et al., 2007). The adolescents are forced into early marriage when they become pregnant hence straining their lives as they struggle to raise the children as well as take care of the family since mostly they are financially dependent (Munthali et al., 2006). Furthermore, the fear of pregnancy, abortion complications, early family and responsibility enabled young men and women to use contraceptives (Westfall, et al., 1996). Thus the use of contraceptives can assist adolescents attain their goals.

Negative attitudes towards contraceptive use

Negative attitudes toward contraceptive use were due to misinformation regarding the side effects. The wrong information held by the adolescents was that girls who use contraceptives experience child birth problems in future. Thus for the respondents, contraceptives were meant for married or single adults that have children already. Young men thought that contraceptives had permanent side effects such as infertility and tended to shun them (Westfall et al., 1996). Thus, the perception of side effects, anxiety about possible side effects, myths and misinformation about the side effects affected correct and consistent contraceptive use as also reported by Flood, (2003). The central issue is that each of the contraceptive methods has both specific advantages and disadvantages. Specific drawbacks with a given contraceptive can lead to discontinuation of its use if the adolescents are not given adequate information (East, et al., (2007). Therefore, there is a need for adolescents to be given adequate information about contraceptives in terms of the advantages, disadvantages and side effects and how to manage the side effects.

The study revealed negative attitudes among adolescents towards condom use. Condoms could have been perceived appropriate to the adolescence because they offer dual protection from both pregnancy and sexually transmitted infections. The reluctance associated with condom use is complex. Evidence shows that men of all ages do not like to use condoms (Brady et al., 2009). One of the misconceptions was that condoms cannot be used on beautiful girls. This predisposes adolescents to unintended pregnancy and STIs including HIV and AIDS. There is a need for adolescents to be provided with information on sexual and reproductive health which includes HIV transmission, prevention and disease progression, so that they can develop positive attitudes towards condoms for their own protection when sexually active.

Another misconception was that condoms should be used among casual or new lovers but not on stable relationships because of the trust and love between the partners in the established relationships. This is consistent with other research findings which showed an increased willingness to use condoms when the partner was not trusted and decreased usage among partners that trust each other (Rosenbaum, 2010). Condoms have become associated with one-night stands, therefore to demonstrate trust and commitment many adolescents insist on not using them (Civic, 2000). Furthermore, a study by Civic, (2000) found that condom use in established heterosexual relationships was inconsistent and declined with time as the relationship progress. Long-term relationships may result in partners believing that they know each other well enough to forgo the use of condoms. Adolescents should therefore be encouraged to always protect themselves because they may contract

STIs from the special partner they trust.

In contrast, other studies (Kabiru and Opinas (2009) reported consistent condom use in romantic and steady relationships. The results were contributed to the fact that young people in steady relationships were aware of the likelihood of engaging in sexual intercourse and were therefore prepared and kept condoms for such usage. Improved communication in romantic sexual relationships is therefore associated with greater negotiations for safer sex and should therefore be encouraged.

Reduced sexual pleasure was reported as the main reason for inconsistent use of condoms in this study, in addition to pain and irritation. Condoms interpose a mechanical barrier between sex partners, limit physical contact, reduce tactile sensation, and attenuate heat transduction, all of which reduce sexual pleasure. This reduction in pleasure is one of the main reasons most people cite for avoiding condom use in several studies (Brady et al., 2009; Choi, et al., (1994); Randolph, et al., 2007; Oguntola, 2011). Men highly value unprotected sex and appear to believe that condoms reduced pleasure more often than women (Oguntola, 2011). However, it is the incorrect use of condoms that can cause lack of sexual enjoyment which may contribute to poor sexual satisfaction (Crosby et al., 2010).

Lack of adequate time for condom application is reported to reduce sexual pleasure of both partners (Crosby, et al., 2005). The lack of time is attributed to men's concerns that the interruption caused by putting on a condom may make their female partner change their minds about having sex. However, 'slowing down' may enhance sexual pleasure by increasing sensation for partners, promoting female orgasm and reducing problems with erection and penile irritation (Crosby et al., 2005). On the other hand, there are reports on the positive aspects of condom use related to sexual pleasure. Using condoms makes some people focus better on their sexual pleasure without distractions due to thoughts about unintended pregnancy and STIs (Crosby et al., 2005). This can enhance sexual excitement. Therefore, civic education should emphasise on these positive aspects of condom-induced pleasure to the public in general and particularly to the adolescents to increase their awareness which can make them develop positive attitudes towards condom use.

Limitations

The study was descriptive and was conducted among the schooling adolescents from Blantyre which is in the southern region of the country. Like any other qualitative study, the results cannot be generalized to all other parts of the country due to cultural and life style differences.

CONCLUSIONS

Adolescents in this study had both positive and negative attitudes towards contraceptive use. Efforts should aim at enhancing the factors that lead to the development of positive attitudes towards contraceptive use. Sexually active adolescents should be taught about the benefits of contraception which would assist them to realize their goals in life and focus on their future. There is need for adolescents to be given adequate information about contraceptives in terms of the advantages, disadvantages and side effects and how to manage the side effects. This would help mitigate negative attitudes that the adolescents have on contraceptives due to misinformation and misconceptions. Civic education should emphasise on the positive aspects of condom use which include dual protection against STIs and unwanted pregnancies.

Conflict of interest

None of the authors has any conflict of interest in the paper being published in the journal of research in nursing and midwifery.

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