



# Effect Natural Child-Spacing Methods on Family Psychosocial Wellbeing in the Bonassama Health District of the Littoral Region of Cameroon.

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## ABSTRACT

This study investigated the effect of natural child-spacing methods on family psychosocial well-being in the Bonassama Health District. This study was predicated on the understanding that the intentional timing of births within a family is a critical factor in maternal and child health outcomes. The objective was to examine how much natural child-spacings methods affect family psychosocial wellbeing in the Bonassama Health District of the Littoral region of Cameroon. Methodologically, the study employed the sequential explanatory research design comprising a quantitative and qualitative methods. The research sample comprised 531 couples, estimated using an inbuilt formula for sample size in EPI-Info 7.0. Data collection was facilitated through questionnaires and focus groups, and the analysis incorporated both descriptive and inferential statistical tools. The linear regression test was used to test the hypotheses because the hypotheses aimed to measure “effect” and not the relationship. The Chi-Square test was used for natural child-spacing method by demographic information for some specific details, and to determine possible patterns in the use of the above-mentioned child-spacing methods. The qualitative data derived from the focus groups were analyzed using the thematic analysis approach with the aid of themes. The research revealed a remarkably positive, moderate, and significant effect of natural child-spacing method on family psychosocial wellbeing. Based on these compelling results, the researchers proposed several actionable recommendations. These included that couples are encouraged to embrace child spacing methods that best suit their reproductive goals and household circumstances. By practicing responsible child spacing, families can reduce economic pressure, enhance their psychosocial wellbeing, and invest more effectively in their children’s education and health. Choosing appropriate methods, whether temporary or permanent, fosters stronger marital relationships and a more supportive home environment.

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## INTRODUCTION

Family psychosocial wellbeing is increasingly recognized as a central determinant of sustainable development, particularly in low- and middle-income contexts where demographic pressures intersect with economic vulnerability and evolving social norms. In Cameroon, families navigate complex realities shaped by rapid urbanization, persistent rural–urban disparities, religious diversity, and strong kinship systems. Psychosocial well-being within the family encompassing relational stability, mental health, communication patterns, gender dynamics, and perceived social support, plays a pivotal role in shaping reproductive intentions and behaviors. Decisions regarding childbearing are rarely individual; rather, they are embedded in collective family expectations, cultural values surrounding fertility, and intergenerational influences. Understanding how psychosocial factors mediate reproductive decision-making is therefore critical for contextualized and ethically grounded public health interventions.

Within this framework, the use of natural child spacing methods such as fertility awareness-based approaches, lactational amenorrhea, and periodic abstinence emerges not merely as a biomedical choice but as a relational and psychosocial practice. In Cameroon, where religious teachings, particularly within Christian and Muslim communities, significantly influence attitudes toward contraception, natural methods are often perceived as congruent with moral, spiritual, and cultural values. However, their effectiveness and sustainability depend heavily on couple communication, mutual trust, shared decision-making, and psychosocial resilience. By linking family psychosocial wellbeing to the adoption and continuity of natural child spacing methods, this study situates reproductive health within a broader systems perspective, highlighting how emotional climate, gender equity, and relational cohesion shape both reproductive autonomy and family stability. By examining these dynamics, the article seeks to provide valuable insights into how health institutions can better support couples in making informed child spacing choices that will benefit both their psychosocial well-being and the broader economy of Cameroon.

### Statement of the Problem

In contemporary society, the timing and spacing of children in a family during its reproductive years have profound implications for psychosocial well-being. Psychosocial well-being, as a multi-dimensional construct, encompasses emotional, social, and psychological aspects of family life. In normal circumstances, every family strives to have psychosocial well-being at the highest possible level. Psychosocial well-being allows individuals in a family with children to effectively cope with stress, maintain positive

relationships, and lead fulfilling lives. Family members who are content with their lives and feel good about themselves are more likely to engage in social relationships and activities. On the other hand, when poor family psychosocial well-being sets in, due to large families, overcrowding, poor accommodation, and economic hardship, it will inevitably lead to problems for family members.

It is observed that most mothers practicing short birth spacing end up nursing two or more children of the same age range. The couple will thus develop stress, depression, and other chronic diseases, having disastrous complications. The mother is prone to having infertility, abortions, premature deliveries, still births, malformed babies, pre-eclampsia, and eclampsia. The children suffer from diminished care, poor health, malnutrition, infectious diseases, and poor education, all of which culminate in high maternal and infant morbidity and mortality. The society will automatically be plagued with an illiterate population, juvenile delinquency, social disorder, and social unrest. Therefore, the quest for family psychosocial well-being should concern all couples. The present study seeks to find out the extent to which natural child spacing methods can act as a determinant of family psychosocial wellbeing in the Bonassama Health District, Littoral Region of Cameroon.

## LITERATURE REVIEW

Natural Child Spacing methods (NCS) refers to a variety of methods used to prevent or plan pregnancy, based on identifying a woman's fertile days. For all natural methods, abstinence or avoiding unprotected intercourse during the fertile days is what prevents pregnancy. The effectiveness and advantages of NCS address the needs of diverse populations with varied religious and ethical beliefs. They also provide an alternative to women who wish to use natural methods for medical or personal reasons. For reproductive health service providers, NCS expands options and improves the quality of child spacing services.

Natural child spacing methods or NSC is an innovation because it is an educational, not a technological solution to family planning (Borkman, 1979). According to the WHO definition natural family planning refers to techniques for planning or preventing pregnancies by observation of the naturally occurring signs and symptoms of the fertile and infertile phases of the menstrual cycle. It is implicit in the definition of natural family planning, when used to avoid pregnancies, that there is abstinence from sexual intercourse during the fertile phase of the menstrual cycle (Lancot, 1979). Key concepts of NFP are that it does not interfere with physiological processes; men and women can have personal knowledge and awareness of their fertility; both share responsibility for family planning, not just the man

or woman. Abstinence need not be negative but can have positive effects on the relationship, and the practice of NFP can help the couple's communication and role relationship.

Raith, Frank, Freundel (1994) described two factors which have been found to have a major influence on the effectiveness of natural methods. One is the standard of teaching given to a woman about how to use their chosen method. The second factor is the motivation of the couple. The influence of these two factors is apparent in the results acquired by various multi-center effectiveness studies. The user failure rate for example, for the sympto-thermal method varies among different countries from 2.5 to 15.5, with a method failure rate of 0.5 to 2.6, as did about 25% of those using the cervical-mucus method, compared with less than 5% of those using oral contraceptives or intrauterine devices. While the sympto-thermal method is more effective than the cervical mucus method, both methods show wide and overlapping ranges of failure and discontinuation rates among different groups of women. These rates seem high when compared with other methods. However, cumulative pregnancy rates showed that although, in the short term, oral contraception produced a lower pregnancy rate after 1 year of use than the calendar method (28 vs 36), at the end of the third year, the calendar method was more effective than oral contraception. Also, the results differ from couples who want to prevent a pregnancy and those who merely intend to space the children.

**Periodic abstinence (fertility awareness) method:**

Abstinence refers to delaying or avoiding some or all sexual behaviors. From a child-spacing perspective, it is only necessary for couples to avoid sexual acts that involve the introduction of seminal contents into the vagina; however, certain STIs may be transmitted from skin-to-skin contact. Primary abstinence refers to delaying some or all sexual behaviors by those who have never been sexually active. Secondary abstinence refers to the conscious decision to delay or avoid some or all sexual behaviors among those who have been sexually active in the past. Periodic abstinence refers to abstaining from penovaginal intercourse during the fertile window of the menstrual cycle.

Polygamy is used to promote periodic abstinence. About 2.6 million couples still use periodic abstinence in sub-Saharan Africa. Periodic abstinence is another form of natural child spacing, as well as the rhythm method, where couples will not engage in sexual intercourse during a specific period of the female's menstrual cycle. The use of this method depends on the knowledge of the menstrual cycle, and so its implementation is less documented.

**Calendar or Rhythm method:** According to Su, Yi, Wei, Chang & Cheng (2017), this is the most widely used of the periodic abstinence techniques. Calendar methods are various methods of estimating a woman's likelihood

of fertility, based on a record of the length of previous menstrual cycles. The rhythm method assumes that ovulation occurs at a predictable time within the cycle (Trussell, 2011). This system may be used to achieve pregnancy by timing unprotected intercourse for days identified as fertile or to avoid pregnancy by restricting unprotected intercourse to days identified as infertile (Pillitteri, 2010). The calendar method is a calculation-based approach where previous menstrual cycles are used to predict the first and the last fertile day in future menstrual cycles. This method requires a good understanding of the fertile and infertile phases of the woman's menstrual cycle. It is based on the regularity of the menstrual cycle and the fact that an ovum (egg) can only be fertilized within 24 hours of ovulation. This natural is based on the life span of sperm as well as the life span of the female ova.

According to WHO (2020), during the menstrual cycle, 3 or 4 days before and 3 or 4 days after ovulation, the woman is likely to conceive. The process of calculating the woman's safe days is achieved when the woman records her menstrual cycle for six months. She subtracts 18 days from the shortest cycle, and the difference is the fertile day. She also subtracts 11 days from the longest cycle, and this becomes the last fertile day. Starting from the first fertile day until the last day, the woman should avoid sex to avoid conception (WHO, 2005). Advantages of this method are as follows: it is natural, approved by many religions, the woman gets to know her body and menstrual cycle, can be helpful for partners who are very careful and do not have sex during the ovulation period and several days before and after (Ataullahan et al., 2019). Disadvantages are its non-protection against STIs and the need to figure out when ovulation occurs for each month, since this can differ from one month to the next. Young women often have irregular periods; therefore, this method requires a lot of work, needs careful instructions, and cannot have sexual intercourse for at least a week in each month. Teens and women with irregular periods are advised not to use it (Ataullahan et al., 2019).

**Basal body temperature (BBT) method,** on the other hand, is defined as the lowest natural, non-pathologic body temperature recorded after a period of rest. Women have used charting average basal body temperatures over the length of a menstrual period as a tool to determine if ovulation has occurred or not. Basal body temperature measurements have been used for decades to help women optimize the timing of intercourse during a fertile window (WHO, 2007). This unique methodology was also prevalent before the advent of oral contraceptive pills, as it aided women in avoiding fertilization during a fertile period. Still to this day, women use this seemingly simple tool for spacing purposes.

Ideally, charting the daily basal body temperature will show a noticeable increase of approximately 0.5 to 1 degree F shortly after ovulation. This increase then sustains until the start of

menstruation, in which BBT then decreases back to baseline (Su, Yi, Wei, Chang, Cheng (2017). Unfortunately, accurate results are dependent on consistent measurements every day, which can be challenging for many women. They added that, for the most accurate results, temperatures need to be recorded at the same time every day, immediately upon waking up. Measurements are also subject to environmental influences such as a fever secondary to an infectious process, emotional stressors, alcohol consumption, and the addition or discontinuation of oral contraception from a daily regimen.

BBT is a method in which the couple avoids sexual intercourse during the woman's fertile period, exhibited by a change in temperature on a well-monitored graph. BBT falls 0.50 before the day of ovulation and during ovulation, it rises to a full degree because of progesterone and maintains its level throughout till menses start, and this is the basis for the method (WHO, 2005). The woman must take her temperature early every morning before any activity. If she notices that there is a slight decrease and an increase in her temperature, this is a sign that she has ovulated. The woman must then abstain from coitus for the next 3 days or till the temperature drops (WHO, 2007).

Tracking basal body temperature relative to ovulation helps a woman better understand her menstrual cycle for various reasons. If functioning as a , Thijssen, Meier, Panis & Ombelet (2014) explain that women should avoid intercourse from the start of menstruation until approximately three days after the spike of BBT. These three days are only an approximation as the BBT may not have a distinct elevation until three days after ovulation in some women. In women with irregular menstruation, basal body temperatures are perceived as less accurate due to the unpredictability of ovulatory timing (Su, Yi, Wei, Chang, Cheng, 2017).

**The cervical mucus (Billings) method** is a type of periodic abstinence method focused on the fluid discharged from the lower part of the uterus. This fluid plays a significant role in successful egg formation. It protects the sperm when it tries to reach the egg in the woman's reproductive system (uterus). The amount and quality of cervical mucus changes throughout a woman's monthly cycle. These changes help determine the right time for the female to ovulate or release eggs. This is a method which women use to monitor their fertility, by identifying when they are fertile and when they are infertile during each menstrual cycle. Attention to the sensation of the vulva, and the appearance of any vaginal discharge should be made. This information can be used to achieve or avoid pregnancy during regular or irregular cycles, breastfeeding, and perimenopause. Described by the World Organization of the Ovulation Method Billings (WOOMB) as "Natural Fertility Regulation", this method may be used as a form of

fertility awareness or natural family planning, as well as to monitor gynecological health (WHO, 2009).

The basis of this method is the changes in cervical mucus during ovulation. Careful observation of the mucus pattern during the menstrual cycle enables women to avoid sex in periods when they are fertile, preventing sperms encountering an egg, thus preventing pregnancy. To check if the woman is ovulating, the cervical mucus must be thin, copious, slimy, and watery (WHO, 2005). Advantages of this method are as follows: it is natural, approved by many religions, women get to know their bodies and menstrual cycle, can be helpful for partners who are very careful and do not have sex during the ovulation period and several days before and after (Ajaero et al., 2016). Disadvantages of this method include, does not protect against STIs, need to figure out when ovulating for each month, since this can differ from one month to the next and young women often have irregular periods, requires a lot of work, needs careful instructions, can't have sexual intercourse for at least a week in each month, teens and women with irregular periods should not use it.

**The Lactation and Amenorrhea Method (LAM):** It is another natural child-spacing method. Lactation and amenorrhea are the use of breastfeeding as a contraceptive method. It is based on the physiological effect of suckling to suppress ovulation. Using breastfeeding effectively as a contraceptive for 6 months after delivery requires that the mother feed the baby with nothing but breast milk. However, if the infant is not, LAM provides contraception for the mother, and it works primarily by preventing the release of eggs from the ovaries. During breastfeeding, the resumption of postpartum ovulation is delayed, and this can be used to prevent conception as long as the mother fully or nearly fully breastfeeds and remains amenorrheic (Stewart et al., 2013). Exclusively breastfed, this method would not be an effective birth spacing method (WHO, 2018).

LAM is a method of avoiding pregnancies which is based on the natural postnatal infertility that occur when a woman is amenorrheic and fully breastfeeding. LAM is 98% - 99.5% effective during the first six months postpartum (Alberta Medical Association, 2009). In this method, breastfeeding must be the infant's only (or almost only) source of nutrition. Feeding formula, pumping instead of nursing, and feeding solids all reduce the effectiveness of LAM. The infant must breastfeed at least every four hours during the day and at least every six hours at night. The mother must not have had a period after 56 days post-partum (Hatcher, 2007). It was suggested that suckling stimulus may be the key variable that determines the return of postpartum ovulation (Howie & McNeilly, 2011). The advantages of LAM method: it is natural, it is cost-free, has no side effects, no supplies needed, decreases post-partum bleeding, best source of nutrition, does not interfere with sexual intercourse, and increases bonding between mother and child (Idris et al., 2021). The disadvantages of this

method are, only effective in women who have given birth in the last 6 months, who have not had menstrual period after childbirth and are feeding their babies with breast milk, does not protect against STIs, only effective until menstrual period returns, may need to use a lubricant with sexual intercourse because of vaginal dryness (Idris et al., 2021).

**The Withdrawal method (Coitus Interruptus):** This is one of the oldest methods of contraception. The couple still proceeds with sexual relations, but the method relies on the man withdrawing the penis from the vagina before ejaculation time and emits spermatozoa outside the vagina (WHO, 2018). The advantages of this method are that it is free, and there is no need for any device. Its disadvantages include pre-ejaculation fluid containing a few sperm that may cause fertilization. Coitus interruptus is 85% least effective without using any other birth control method within a year (Lanre, 2015). Coitus interruptus, also known as the rejected sexual intercourse, withdrawal, or pull-out method, is a method of birth control in which a man, during intercourse, withdraws his penis from a woman's vagina prior to ejaculation to keep sperm from joining the egg (STDR, 2011). Withdrawal is sometimes referred to as the contraceptive method that is "better than nothing". Unfortunately, ejaculation may occur before withdrawal is complete, and, despite the care used, some spermatozoa may be deposited in the vagina.

If the male partner withdraws before ejaculation every time a couple has vaginal intercourse, about 4% of couples will become pregnant over the course of a year (Jones et al., 2009). However, more realistic estimates of typical use indicate that about 18% of couples will become pregnant in a year using withdrawal. These rates are only slightly less effective than for male condom use, which has perfect- and typical-use failure rates of 2% and 17%, respectively (Jones et al., 2009).

**METHODS**

This study employed a mixed-methods approach. The aim was to benefit from both the detailed, contextualized insights of qualitative data and the generalizable, externally valid insights of quantitative data. The research design used was the study employed the convergent research design comprising a quantitative and qualitative method. With the help of stratified sampling, the eleven targeted health areas were divided into two strata. "Strata A" had only health areas with large population size of couples, while "Strata B" consisted of health areas with low population densities. This technique was necessary in this study because it avoided bias since it was based on the population size of each health area. The simple random sampling technique was applied to select four accessible health areas. This was because the simple random sampling technique provided each health area in the strata of

interest with an equal chance of being represented in the sample. The purposive sampling techniques ensured only couples having at least two children were selected to participate in the study. The research sample comprised 531 couples having at least two children, estimated using an inbuilt formula for sample size in EPI-Info 7.0.

The quantitative data were analyzed using the descriptive and inferential statistical tools. The descriptive statistical tools used were frequency count, percentages, mean, and standard deviation, and a multiple-response set aimed at calculating the summary of findings for each variable for a quick comprehension of the overall findings. The addition of the mean was to better appreciate the use of natural contraceptive methods, hormonal methods, barrier methods, and surgical methods to space their children. In addition, the mean was equally used to better grade the family psychosocial well-being of the respondents. In addition to the descriptive statistical tools, the linear regression test was used to test the hypotheses because the hypotheses aimed to measure "effect" and not the relationship. The use of the linear regression test gives us additional information/prediction on the extent to which a unit of improvement in the use of natural contraceptive methods, hormonal methods, barrier methods, and surgical methods for child-spacing would have on family psychosocial wellbeing. To guide the mathematical procedure before the use of the linear regression test, a test of normality was computed. The computing of the normality assumption was done using an advanced statistical test, the Kolmogorov-Smirnov, because the sample size is above 50. Finally, the Chi-Square test was used for natural contraceptive methods, by demographic information for some specific details, and to determine possible patterns in the use of the natural contraceptive child-spacing method (Table 1).

**Table 1: Test of Normality**

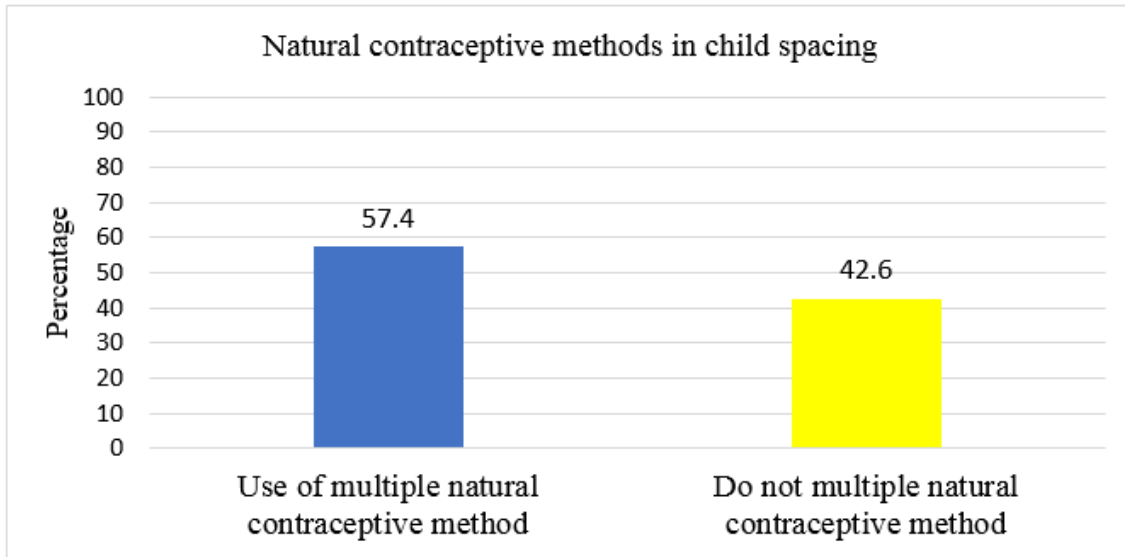
Variables	Kolmogorov-Smirnov		
	Statistic	df	Sig.
Natural contraceptive methods	.150	510	.000
Family psychosocial wellbeing	.191	510	.000

Statistics from the test of normality revealed that all data significantly deviate from the normal distribution curve ( $p$ -value < 0.05). Data that do not significantly deviate from the normal distribution curve, the  $p$ -value is greater than 0.05. Therefore, the data was subjected to log transformation, and scores were standardized and boot trapping used for optimal results.

On the other hand, the qualitative data that were derived from the focus group were analyzed using the thematic analysis approach with the aid of themes and quotations. Themes are umbrella words that capture the main idea of the participants' statements, while

quotations are the direct statements from the participants.

**FINDINGS**



**Figure 1:** Distribution of Respondents by Use of Natural Contraceptive Methods in Child Spacing

In aggregate, 57.4% of respondents used different natural contraceptive methods while 42.6% do not, and the overall mean 2.82 below 3.0 on 4 implies that natural contraceptive methods were moderately used.

**Table 2:** Association between Natural Contraceptive Methods and Family Psychosocial Wellbeing

			Family psychosocial wellbeing		Total	Test of association (Chi-Square)
			High	Low		
Natural methods	Used	n	224	77	301	X <sup>2</sup> =13.065 p-value = 0.000
		%	74.4%	25.6%		
	Not used	n	107	102	209	
		%	51.2%	48.8%		
Total		n	331	179	510	
		%	64.9%	35.1%		

More so, when family psychosocial wellbeing was compared by use of natural contraceptive methods in child spacing, a significant association was observed (X<sup>2</sup>=13.065, p-value 0.000, < 0.05), whereby respondents using natural contraceptive methods 74.4% experience higher family psychosocial wellbeing than those not using it 51.2%.

**Table 3: Respondents' Opinion on the Use of Natural contraceptive Methods Affect their Family Psychosocial Well-Being**

Themes	Quotations
Improve health	<p>"The use of the natural family planning method has helped us to have fewer children thus, improves on family health." (Respondent A)</p> <p>"My ability to take good care of my children is good because I have fewer children thanks to the natural family planning method. In addition, this has helped to improve on our family health." (Respondent D)</p> <p>"We are able to provide good health care of the family because of the family method practice." (Respondent C)</p> <p>"The health of the family is bound to improve when it has fewer members." (Respondent E)</p> <p>"Our family has been impacted positively health wise, economically, and in the education of our children as well as general wellbeing." (Respondent B)</p> <p>"The health of the family is improved." (Respondent E)</p>
Better family care	<p>"Since the use of the natural family planning method, we have children at the planned time, and this has help to improve on our ability to care for the family." (Respondent F)</p> <p>"In our home, I and my wife are able to cater well for the family because we only have children when prepared for." (Respondent A)</p>
Children education	<p>"Well spaced-out delivery leads to children who are well catered for and well educated." (Respondent B)</p> <p>"Our family has been impacted positively health wise, economically, and in the education of our children as well as general wellbeing." (Respondent A)</p> <p>"Good education for the family members." (Respondent G)</p>
Financially/economically	<p>"Our family has been impacted positively health wise, economically, and in the education of our children as well as general wellbeing." (Respondent C)</p> <p>"Financially, we are fine because we have the required number of children." (Respondent D)</p> <p>"I am to provide for my family because I only have children when ready and planned." (Respondent G)</p>

Furthermore, among the respondents who took part in the focus group discussion and were using natural family planning methods to space their children, many said it has help improve on their family health as depicted in some of their statements "*The use of the natural family planning method has helped us to have fewer children thus, improves on family health.*" (Respondent A), "*My ability to take good care of my children is good because I have fewer children thanks to the natural family planning method. In addition, this has helped to improve on our family health.*" (Respondent D)

In addition, some said it has empowered them to care better for their family as depicted in the statements "*Since the use of the natural family planning method, we have children at the planned time, and this has help to improve on our ability to care for the family.*" (Respondent F), "*In our home, I and my wife are able to cater well for the family because we only have children when prepared for.*" (Respondent A)

Furthermore, some added that it has helped them to effectively provide their children's educational needs, as depicted in the statements "*Our family has been impacted positively health-wise, economically, and in the education of our children as well as general*

*wellbeing.*" (Respondent A), "*Good education for the family members.*" (Respondent G)

Finally, some respondents stated that it has helped their family financially, as depicted in the statements "*Our family has been impacted positively health-wise, economically, and in the education of our children as well as general well-being.*" (Respondent C), "*Financially, we are fine because we have the required number of children.*" (Respondent D)

In conclusion, for those using natural contraceptive methods to space their children, they reported that their family psychosocial wellbeing has been positively impacted health-wise, family care, children's education, and economically.

### Testing of Hypothesis

**Ho:** Natural methods of child-spacing do not have any significant effect on family psychosocial wellbeing in the Douala IV municipality.

**Ha:** Natural methods of child-spacing have a significant effect on family psychosocial wellbeing.

**Table 4:** Linear Regression Predicting a Unit of Effect of Natural Contraceptive Methods on Family Psychosocial Wellbeing

	Coefficients		p-value
	B	Std. Error	
(Constant)	22.941	.567	.000
Natural contraceptive methods	.452	.034	.002
<b>Model Summary</b>			
R		.452	
R-Square		.135	
Std. Error of the Estimate		2.767	
<b>ANOVA<sup>a</sup></b>			
F-test		10.845	
p-value		.002	
n		510	

Dependent Variable: Family psychosocial wellbeing  
 Predictor: (Constant), Natural contraceptive methods

Statistically, findings showed that use of natural contraceptive methods in birth spacing has a positive, moderate, and significant effect on family psychosocial wellbeing (Coefficient value 0.452, F-test 10.845, p-value  $0.002 < 0.05$ ), significant at 5% level. Predictively, this implies for every unit of improvement in the use of natural contraceptive methods in child spacing, family psychosocial wellbeing moderately increases. Thus, the null hypothesis was rejected and the alternative accepted.

## DISCUSSIONS

Findings showed that the use of natural contraceptive methods in birth spacing has a positive, moderate, and significant effect on family psychosocial well-being. Predictively, this implies for every unit of improvement in the use of natural contraceptive methods in child spacing, family psychosocial wellbeing moderately increases. Thus, the null hypothesis was rejected and the alternative accepted. When family psychosocial wellbeing was compared by use of natural contraceptive methods in child spacing, a significant association was observed whereby respondents using natural contraceptive methods experience higher family psychosocial wellbeing than those not using it. This implies that when families monitor fluid discharge, practice prolonged lactation while breastfeeding, practice abstinence to prevent unintended pregnancies, practice withdrawal method of child spacing, identify the fertile phase in each menstrual cycle; use the calendar method, and chart my basal body temperature daily, their psychosocial wellbeing is ensured. That is, they feel happy, capable, well-supported and satisfied with life. This is in congruence with Huppert (2009), who summarized psychological well-being to be about lives going on well.

A huge majority of respondents accepted that natural methods of birth control are safe and they choose them because they are cheap. This is in line with the Canadian Contraception Consensus Part 2 of 4, (2015),

which concluded that Abstinence is 100% effective regarding contraception. This is in line with Stewart et al. (2013), who concluded that during breastfeeding, which is another NFP, the resumption of postpartum ovulation is delayed, and this can be used to prevent conception as long as the mother fully or nearly fully breastfeeds and remains amenorrheic. No financial weight is enquired for these particular NFPs.

Furthermore, when use of natural contraceptive methods was compared by demographic information, a significant association was observed with gender and birth spacing method. The majority of women were more glued to natural contraceptive methods than men. This study serves as evidence of a solution to the problem identified in the empirical study by Kemi and Olurotimi (2011), who had concluded that the importance of breastfeeding as a means of natural birth spacing was not well appreciated among women. Based on these findings, it was recommended that the health benefits of breastfeeding to the mother and child should be emphasized in the hospitals, maternity centers, churches, markets and at village meetings. There is, therefore, empirical evidence that the required work has been done.

However, by age range, younger respondents using natural methods were slightly more than older respondents. In fact, the use of natural methods decreases with an increase in age. The same was observed with duration in a relationship/marriage as it slightly decreases with increased relationship duration. Finally, by level of education, respondents with a tertiary level of education use it slightly more than their counterparts with a lower education level. In other words, the use of natural contraceptive methods slightly increases with increasing level of education. In line with this view is the opinion of McCusker (1976), who explained that through fertility awareness, spouses learn to appreciate their own unique gift of fertility and sexuality, and during the abstinence phase, couples curb unruly desire and develop non-physical ways of expressing love, thereby applying the knowledge gained

on NFP methods and consequently, psychosocial wellbeing.

From the focus group discussion, it was revealed that, natural family planning has helped improve on family health as depicted in some of the respondents' statements; These statements are in line with the Family Systems Theory by Bowen (1974), who outlined that the family is a system and a change in the functioning of one family member is automatically followed by a compensatory change in another family members. Still in line with the family system theory, through the concept of differentiation, the discipline required of natural child-spacing method users helps a couple to take a step by teaching them to make decisions regarding their joint fertility based on objective observations, not emotions. Bowen's theory further emphasizes that natural child-spacing method impact family dynamics through promoting shared responsibility and communication between partners and allowing couples to work together toward a common goal, which enhances the emotional connection between partners, fostering a sense of mutual support and understanding, and consequently psychosocial wellness.

During the focus group discussion, some said it has empowered them to care better for their family as depicted in the statements. Kaslow (1982) suggested that the ability of couples to manage fertility in a way that aligns with personal and religious beliefs can also promote a sense of well-being and reduce stress associated with unintended pregnancies. More so, during the focus group discussion, it was revealed that NFP leads to better family financial and or economic standards. Participants exposed these facts through recorded statements, such as since the use of the natural child-spacing method, their families impacted positively. Their general well-being, education of the children, as well as economic progress was reported. A respondent further added that their family is very fine as they have the number of children they wanted from the beginning of their marriage. This is in congruence with Cleland (2012), who concludes that, in the broader context, child spacing also plays an important role in promoting psychosocial well-being, as it allows parents to allocate sufficient time and resources for each child's care and development.

## RECOMMENDATIONS

Couples are encouraged to actively learn about and consistently apply natural contraceptive methods such as fertility awareness-based methods. Informed and consistent use promotes better decision-making about family size and the timing of births, contributing to reduced stress and improved family harmony. Couples should consider their financial, emotional, and physical capacity when planning children. Proper spacing allows better allocation of resources toward children's healthcare, nutrition, and education, reducing economic

strain and fostering stability. Also, natural child spacing should be practiced within a supportive partnership. Couples should intentionally nurture their relationship through quality time, conflict resolution strategies, and shared responsibilities to enhance marital harmony. Spacing children appropriately allows parents to recover physically and emotionally, thereby promoting a healthier home environment. Couples should view natural family planning not merely as a reproductive choice, but as a holistic strategy for strengthening marital harmony, economic stability, emotional balance, and overall psychosocial well-being. When practiced consistently and collaboratively, natural child spacing becomes a sustainable pathway to healthier families and stronger communities.

## CONCLUSION

To conclude, the findings of this study strongly support the hypothesis that natural methods of child-spacing have a significant effect on family psychosocial well-being. Statistically, findings showed that use of natural contraceptive methods in birth spacing has a positive, moderate, and significant effect on family psychosocial wellbeing. This implies that for every unit of improvement in the use of natural contraceptive methods in child spacing, family psychosocial well-being moderately increases. This demonstrates the considerable impact that the natural has in helping couples make informed and fitting child spacing decisions that ensure their psychosocial well-being. This study concludes that natural contraceptive methods exert a positive and statistically significant influence on family psychosocial well-being. The evidence demonstrates that consistent use of these methods moderately enhances family health, cohesion, and stability. Findings revealed that as couples increasingly adopt natural contraceptive methods, their psychosocial well-being correspondingly improves. This improvement was reflected in healthier family interactions, reduced stress, and enhanced marital harmony. Focus group discussions further confirmed that natural child spacing fosters informed decision-making among couples. Participants emphasized that having fewer children eased family health management and improved the quality of care. The results also show that natural methods promote better allocation of resources for children's education and development. Financial and economic well-being emerged as critical outcomes of effective natural child spacing practices. By reducing economic strain, families reported improved emotional stability and greater psychosocial resilience. The findings highlight that natural family planning contributes to both physical and mental well-being in households. Thus, the study validates the hypothesis that child spacing through natural methods is integral to psychosocial health. Overall, natural family planning stands as a sustainable pathway to improved family wellbeing and social stability.

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