

A Qualitative Assessment of the Acceptability of Family Planning among 83 Adolescent Girls and Young Women in the City of Conakry in 2026

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ABSTRACT

Raising awareness about sexual and reproductive health is a key concern that involves the acceptability of contraceptive methods. The aim of this research is to analyse the factors influencing the acceptability of family planning among adolescent girls and young women in the city of Conakry. This is a qualitative study. The results were obtained through semi-structured interviews with 83 adolescent girls and young women in the municipality of Conakry, six health workers and a project supervisor working on SRHR. Analysis of the empirical data revealed that adolescent girls and young women in the municipality of Conakry have limited knowledge of family planning methods. In addition to lacking sufficient knowledge of the actual use of contraceptives, adolescents and young women adopt a negative attitude towards these methods, which they consider alien to their socio-cultural values. Added to these socio-cultural factors are the prejudices and shame they experience when discovered by a third party using these contraceptive methods. The data also reveal that economic difficulties are a factor in the refusal to use these methods. Finally, to improve acceptance of family planning among adolescent girls and young women, the findings suggest that the state should provide effective access to contraceptive methods to help young people avoid the consequences of not using them.

KEYWORDS: *contraceptive methods, health, social influences, interventions, Guinea.*

INTRODUCTION

Sexual and reproductive health is a state of complete physical, emotional, mental and social well-being encompassing all aspects of sexuality and reproduction (Cinelli, 2023; Maffi et al., 2017), enabling individuals to enjoy a satisfying and safe sex life. Indeed, with the aim of promoting sexual and reproductive health, it is important to respect, protect and guarantee people's sexual rights (Pétiniot, 2022), whilst ensuring their autonomy and informed decision-making regarding sexuality (Giami, 2015).

To ensure good health, it is very important to have access to accurate, precise and reliable information from the relevant organisations. In Africa, as in the Republic of Guinea Conakry, many people in certain communities hold misconceptions about health services. This is particularly true of adolescents and young people, who are under-represented in health facility attendance and are rarely reached by sexual health programmes (Kouadio, 2025; Koné and Coulibaly, 2024). They find it difficult to accept

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health services, particularly those relating to sexuality and reproduction, due to socio-cultural constraints, the realities of daily life, or the experiences of their parents, which serve as benchmarks or norms for them. However, the acceptability of health services primarily refers to the extent to which they are actually and safely used by people who are in need of healthcare or who express a need for it (Mbuku et al., 2025). Limited access to sexual and reproductive health services can result in the use of unsafe methods and abortion (El Haouaki and Dekiki, 2024; Perrin, 2024).

Today, many religious and community leaders have recognised the importance of family planning in a country's development process. With the support of international organisations, these leaders remain committed to raising awareness among their congregations about the benefits of family planning. In the city of Conakry, many young women feel ashamed to visit family planning centres, particularly in rural areas where they fear being recognised (Toudeka et al., 2023; Sidibé et al., 2020). Family planning is recognised as one of the cornerstones in reducing maternal and infant mortality.

More than 20 million girls aged 15 to 19 become pregnant each year worldwide, and around 16 million of them give birth (Philibert et al., 2021; Rahmawati et al., 2019; Ronen et al., 2018). Teenage pregnancies, which are often unwanted, lead to an increased risk of unsafe abortions, maternal and neonatal complications, vulnerability and a deterioration in living conditions (Acotchéou et al., 2023).

In the Republic of Guinea, the infant and neonatal mortality rate is one of the highest in West Africa and remains a cause for concern, with approximately 32 deaths per 1,000 live births (UNICEF, 2022). Therefore, further reducing maternal mortality requires access to family planning services to reduce births, stillbirths and neonatal deaths. As family planning is a means of birth control, it helps to save lives.

Many teenage girls and young women often face problems related to unwanted pregnancies and the experience of clandestine abortions. However, these problems can be prevented by providing these vulnerable groups with accurate information on sexual health. To this end, governments and NGOs in Conakry have committed to promoting sexual and reproductive health for the well-being of families (Viera et al., 2017; Balde, 2021). Through these organisations, counselling sessions are offered to better protect young people, and peer educators are

deployed to help prevent unwanted and early pregnancies among young people.

Despite these measures, adolescents' behaviours regarding sexual and reproductive health are characterised by various risk-taking behaviours that make them more vulnerable to STIs/HIV/AIDS, and to early and/or unwanted pregnancies. These behaviours highlight the need for additional initiatives to increase the availability of family planning (Kagambega et al., 2025; Sidibé et al., 2020). Guinea's 2018 Demographic and Health Survey (DHS) indicates a significant unmet need for family planning of 22%.

This therefore raises the issue of the acceptability of family planning services and how these services are perceived by the population, particularly by adolescents and young people. Finally, despite the confidence some adolescents and young women have in their ability to manage natural methods or their menstrual cycle, it is crucial to remember that conception can still occur. It is always essential to be aware of the limitations of these methods and to always consider other contraceptive methods to protect against unwanted pregnancy.

What factors influence the acceptability of family planning among adolescents and young people in the city of Conakry?

Methodological approach

1. Population and sampling

This is a qualitative cross-sectional study conducted in the city of Conakry, which enabled the collection of non-numerical data, namely the respondents' comments on the research topic. The target population consisted of 83 adolescent and young women aged between 14 and 28, and six healthcare workers, including a specialist in sexual and reproductive health rights.

The sample of adolescent and young women was selected using a non-random method with a convenience sampling technique, meaning that those encountered who were immediately available were interviewed. The study sample of healthcare workers (doctors, nurses) was selected using a non-random method with a volunteer technique, meaning that those who agreed to answer the questions were included in the sample.

2. Data collection tools and techniques

Interviews with the target group were conducted using two interview guides provided to each participant. The data collected related to the knowledge of adolescent girls and young women regarding family planning. Sociocultural and

economic factors linked to family planning were also recorded. The interviews were conducted using a mobile phone (Tecno Pova 5G, Model L8) equipped with a voice recorder, with the respondents' consent. Data collection took place over 18 days from 7 to 24 March 2026, with the support of an interpreter trained in the collection and management of qualitative data. Semi-structured interviews were conducted with the defined target group until saturation was reached.

3. Data analysis

Once transcribed, the interviews were analysed on the basis of the items contained in the interview guide, followed by thematic grouping to compare the responses obtained with the research hypothesis. Responses that were more or less identical were classified by area of interest. Indeed, after listening carefully to the interview recordings, units of meaning were identified in order to give substance to the themes and sub-themes that emerged from the interviews as a whole.

Results

Interviews were conducted with the respondents on the issue of the acceptability of family planning.

1. The knowledge of teenage girls and young women in the city of Conakry regarding family planning

Awareness of family planning is often the first barrier for teenage girls and young women. Interviews revealed that the majority of those surveyed are aware of family planning. One of the girls surveyed stated:

I've heard people talk about family planning quite a few times. I think it's a good thing (T.A., student – Sixth Form College, aged 19; March 2026).

Not only are they aware of its existence, but they also know that family planning helps to space out births and prevent unwanted pregnancies.

My mum has often told me that family planning helps prevent unwanted pregnancies (D.E., pupil – Amadou Sylla High School, aged 18; March 2026).

Family planning services are available to all teenage girls and young women who wish to use a family planning method. On this subject, one of the health workers interviewed stated the following:

It should be noted that family planning is available and accessible to everyone in all health centres in Conakry (Midwife, 35, March 2026).

It was with this in mind that another healthcare worker stated:

Family planning is important because it allows couples to space out and limit the number of children they have (H. G., doctor, aged 44, March 2026)

The teenage girls and young women surveyed demonstrated an understanding of family planning in relation to birth spacing and the prevention of unwanted pregnancies. This view is reinforced by the vital role parents play in passing on knowledge about reproductive health. Furthermore, the availability and accessibility of family planning services were highlighted as a benefit to communities.

Furthermore, a small proportion of teenage girls and young women believe that family planning has no benefits. On this point, one respondent said:

People have been talking about this issue for ages, even back when I was at school. But my father, a devout Muslim, told me that it's not right to practise family planning (K. F., apprentice seamstress, aged 25, March 2026).

One respondent put it this way:

...among Muslims it's forbidden (laughs). Among us Christians, even though some healthcare workers ask us to use modern contraceptive methods, pastors and priests insist that the Holy Bible forbids it. It is even one of the reasons why we are asked to be faithful to our partners (A. S., UGLC-SC student, aged 24, March 2026).

Despite the widespread dissemination of information on family planning, religious leaders are attempting to promote negative social perceptions of the practice, sometimes in direct contradiction to public health messages. Miscommunication surrounding this practice within this community fuels confusion and slows down the process of acceptance among young girls and women of childbearing age.

Family planning encompasses all the methods and services that enable couples to have the number of children they want, when they want them. It is with this in mind that a nurse stated:

Contraceptive methods help to: limit the number of births, prevent sexually transmitted infections and sexually transmitted diseases, and reduce the number of unwanted pregnancies (L. A., Nurse, aged 36, March 2026).

This quote illustrates that, from an economic perspective, family planning is also a powerful tool in the fight against poverty. Although contraception is beneficial, it can also have side effects. These vary depending on the type of method used. One student interviewed stated:

I've had to resort to it. I often feel very nauseous and have the urge to vomit. I've also put on weight. "Awa". Hmm, I also have a friend who's started getting headaches and frequent mood swings (S. M., UGANC student, aged 22, March 2026).

A doctor shared his opinion, stating:

I won't talk in terms of consequences, but rather in terms of side effects, as women experience different effects depending on their individual physiology. Side effects include weight gain and irregular periods. (D. T., Doctor, aged 38, March 2026).

The use of contraceptive methods can lead to feelings of sadness or anxiety in teenage girls and young women. In some cases, teenage girls and young women may experience feelings of regret, particularly when they find the side effects excessively bothersome

2. Sociocultural and economic factors relating to family planning

The findings of this research suggest that socio-cultural and religious trends influence perceptions of contraceptive practices, particularly family planning. Adolescent girls and young women who attend family planning centres may feel ashamed or afraid of being judged by their peers due to the stigma associated with the use of contraceptives. It is in this context that one respondent stated:

I'm ashamed to go to health centres or family planning clinics. I'm afraid someone will find out. Hmm... My parents don't know that I'm sexually active (T. S., student, aged 20, March 2026).

In line with this, a nurse also said:

Teenage girls and young women are ashamed to go to family planning clinics, and they are also very afraid to confide in us (A. B., doctor, aged 32, March 2026).

On the other hand, others are keen to attend sexual and reproductive health education centres because they want to learn something new and look after their sexual health. In this regard, one interviewee stated the following:

They aren't ashamed or afraid to speak out; they raise their concerns and then help them find solutions (A. Z., midwife, aged 32, March 2026).

Whilst some teenage girls and young women feel ashamed and afraid at the thought of visiting family planning centres, others go there without hesitation and speak freely. These differences can be explained by social pressure, as in some communities discussions about sexuality are frowned upon and cause embarrassment. Conversely, when the environment is very open, young women feel free to act.

Furthermore, traditional beliefs often influence ethnic perspectives on modern contraception. Certain ethnic groups are often reluctant to use modern contraceptive methods due to their cultural beliefs and traditions. This is why one respondent stated:

Our parents refuse to use modern contraceptive methods because that is what they say, and we also believe that every child is a blessing. Contraceptives go against our cultural and religious traditions (B. H., ISIC student, aged 24, March 2026).

In some groups, having children is regarded as a source of wealth. Certain religious beliefs reject contraception as contrary to socio-cultural values. Religion therefore reinforces social perceptions by determining whether or not certain health practices are acceptable.

Furthermore, the adolescent girls and young women surveyed were asked about the cost of contraceptive products. According to their statements, the majority felt that contraceptive products are affordable and that they can obtain them.

Discussion

1. Knowledge, perceptions and reasons for adopting family planning among teenage girls and young women in the city of Conakry

The findings of this study have shown that the majority of adolescent girls and young women in Conakry have heard of family planning and have a general understanding of it, even if this understanding is, in some cases, superficial. Overall, family planning is associated with birth spacing and the prevention of unwanted pregnancies. This view, widely shared by almost all respondents, clearly reflects the effective dissemination of public health messages within families and communities in general through healthcare facilities and the mass media.

However, this knowledge appears selective and of a low standard depending on the sources of information and the content conveyed. Although family planning is of paramount importance, communities' understanding of it often remains superficial, as it is influenced by socio-cultural constraints (Mbayé, 2025; Laure et al., 2019). Aspects relating to the prevention of sexually transmitted infections are almost entirely overlooked and rarely discussed (Ouédraogo et al., 2022). These adolescent girls and young women incorporate knowledge derived from their immediate environment (Mondain, 2023; Essodinamodom, 2022), which plays a decisive role in how they perceive this practice.

Furthermore, the interviews reveal the presence of religious beliefs. Some of the women interviewed view family planning as a morally forbidden practice. Conflicts arise between the recommendations issued by health institutions and religious and moral prescriptions, which do not always align (Ouattara et al., 2017; Karsenty et al., 2013). In this context, family planning finds itself caught in a tension between the norms promoted by health policies, cultural norms and religious norms. In order to choose between the different perspectives, they receive health messages, interpret them and analyse them in light of the norms (Tchéché, 2022) and values of their community or background (Guérande et al., 2022).

In addition, the side effects of contraceptive methods have a significant influence on how teenage girls perceive them. Experiences – such as nausea, weight gain or mood swings – that individual teenage girls or young women have encountered are often shared by girls in general, and this reinforces their reluctance to adopt family planning methods. Thus, contraception is not only evaluated in terms of effectiveness (Jean, 2022), but also in terms of its physical and social acceptability (Dadda et al., 2025). These findings are consistent with those of Boulet (2025), Dobrzynski (2022) and Thomé (2022), who demonstrated that adverse effects contribute to the social construction of the risks associated with contraception. The findings of this study confirm previous research that has highlighted the central role of family planning in improving reproductive health indicators (Laoungang, 2024), particularly the reduction of unwanted pregnancies and unsafe abortions (Sow, 2025).

2. Between social dynamics and economic constraints: an analysis of contraceptive practices among teenage girls and young women in Conakry

The findings of this study revealed that shame, fear of social judgement and various forms of stigmatisation

emerged as major barriers to accessing reproductive health services. These findings demonstrate that social norms strongly influence the sexuality of adolescent girls and young women, which is often shrouded in secrecy or even expected to adhere to abstinence.

From this perspective, accessing family planning services is associated with an active sex life, exposing young girls to specific societal scrutiny. However, in certain contexts, adolescent girls and young women access health services without constraint (Diallo, 2025; Kouadio, 2025). This observable difference therefore points to the influence of the immediate social context. More open living environments encourage greater communication about sexuality with very few taboos. These discussions help to dismantle false perceptions and beliefs (Meite, 2023) and facilitate the fulfilment of family planning needs (Affo et al., 2019).

Religious beliefs appear to be major determining factors. Within communities, every child is seen as a blessing (Fanny and Assi, 2025). This idea contributes to the valuing of fertility and the rejection of contraceptive practices. This view is part of a societal symbolism in which motherhood is associated with social success and the sustainability of social groups. The refusal to use modern contraception stems from reproductive patterns influenced by religion and socio-cultural constraints (Nouhou, 2016; Diallo, 2014).

The findings of this study corroborate research that has revealed the combined influence of religion, social norms, peer pressure and gender inequalities on adolescents' sexual and reproductive behaviours (Bambara et al., 2023; Nouhou, 2016). Furthermore, although the affordability of contraceptives is generally considered satisfactory, this does not automatically translate into actual use of the services.

Conclusion

This study identified the factors influencing the acceptability of family planning among adolescent girls and young women in the city of Conakry. During the study, the interviews conducted revealed that adolescent girls and young women in the municipality of Conakry have limited knowledge of family planning methods. They lack sufficient understanding of how contraceptives actually work, leading them to adopt a negative attitude towards these methods, which they consider alien to their socio-cultural values. In addition to these socio-cultural factors, there are the prejudices and the shame they feel when discovered by a third party using these contraceptive methods.

The data also reveal that economic problems are a factor in the refusal to use these methods. This research should assist health facilities and the various relevant organisations or associations in implementing strategies to strengthen the beliefs of these adolescent girls and young women. Among these strategies, a regular community outreach programme should be considered to reduce the risks associated with not using contraceptive methods.

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Declaration of conflict of interest

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