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Challenges and prospects of contraceptives use among women attending family planning services in Yobe State, Nigeria

Mohammed A. N. A. Imam^{1,a}, Bhola Khan^{2,b}

¹Department of Sociology, Yobe State University, Damaturu, Nigeria

²Department of Economics, Yobe State University, Damaturu, Nigeria

^{a,b}E-mail: abusakin55@gmail.com , bholakhan.apj@gmail.com

ABSTRACT

The study focuses on the challenges and prospects of contraceptive use among the women attending family planning services in Potiskam general hospital. The main objective of this study is to identify the major challenges facing the ideal use of the best contraceptive methods among women and to address the available prospects to be adapted in order to contribute for the improvement of family planning services in Yobe State. The population of the to study comprises of one hundred women attending family planning services in Potiskam General Hospital, and Sample size technique adopted using Krejcie and Morgan formula. The structured questionnaire was used to collect data for this study. The data obtained were analyzed by using mean and standard deviation. The findings of the study revealed that the fear of health risk, Lack of consensus among partners, Cultural norms and Religious are considered as the main challenges prevent family planning practice among women mainly the use of contraceptive methods. The findings also revealed that, the use of withdrawal (Coitus Interrupts), the use of Oral Contraceptives (The Pills) method, the use of Female and male Condoms is some of the common methods of family planning devices among women in study area. Finally, the results indicated that, the use of mass media campaign to educate women about family planning devices, use of symbols to display appropriate family planning equipment's for women and use of guidance and counseling in Primary Health Care to educate women about family planning devices are some of the available prospects and solutions to be adopted for effective promoting family planning services in general and use of contraceptives in particular among women. It is recommended among others that, there is need

for government through the Ministry of Health and its partners to revive and support family planning education to both household and community level.

Keywords: Challenges, Prospects, Contraceptives, Family Planning, Services

1. INTRODUCTION

Nigeria is the most populated country in Africa with 160 million people and 3.2% annual growth rate according to national Population Commission (2006), which making the country facing a population exploitation. The current total fertility rate is estimated to be 5.7 per woman. Low utilization of modern contraceptives is one of the key determinants of high fertility in Nigeria as addressed by World Health Organization report (WHO, 2005). Modern contraceptives which include hormonal and non-hormonal methods are preferred above the traditional methods like periodic abstinence and coitus interrupts because they are more efficacious and are associated with lower failure rates. The correlates of low contraceptive use include high rates of unwanted pregnancies, abortions, maternal morbidity and mortality. The utilization of modern contraceptives is an important component of maternal, new-born, and child health services (WHO, 2005).

Nigeria records one of the highest ratios, with maternal mortality ratio of 545 deaths per 100,000 live births (Nigeria Demographic and Health Survey & National Population Commission, 2008). Several factors play an important role in the use of contraceptives among women of childbearing age (Williamson, Parkes, Wight, Petticrew and Hart, 2009). The identification of these factors is crucial to the planning and implementation of suitable family planning programmes (Ezebialu, and Eke, 2013). While studies on factors affecting the use of contraception among women have been reported for selected areas in Nigeria (Population Reference Bureau, 2011), in-depth analysis of factors affecting the use of modern contraception among women of childbearing age in a national survey has been scarcely reported in Nigeria. Family planning plays a pivotal role in population control, poverty reduction and human development (Longwe et al., 2012).

It is a prerequisite for achieving the United Nations' Millennium Development Goals and for realizing the human right of reproductive choice (Allen, 2007). The population problem in Nigeria is more acute in the rural areas, where poverty is highest and the major livelihood activity is farming (Asa, 2006). This study therefore, aimed at examine the challenges hindered the use of contraceptives and ascertaining the prospects and solutions for Improving Levels of Contraceptive among Women Attending Family Planning in Potiskum General Hospital, Yobe State.

2. METHODOLOGY

The study generally adopted survey design to give a clear picture of the situation and explore the phenomenon. The population of this study comprises 100 Women Attending Family Planning in Potiskum General Hospital. The sample method used was simple random sampling which mean every individual has the same chance of being selected in the sample. Sample size technique adopted using Krejcie and Morgan formula (80) women accordingly.

The structured questionnaire was used to collect primary data, while secondary data were obtained from different sources such as textbooks, journal, published articles, hospital files, records and websites. The standard deviation statistical tools were also used to analyze the collected data.

3. CONCEPTUALIZATION OF TERMS

3. 1. Concept of family planning

Weiner (2009) conceptualized family planning as having the number of children you want, and when you want them. Delano (2010) posits that, family planning is a means by which individuals or couples space the process of conception, pregnancy and childbirth at intervals mutually determined by both husband and wife, in order to have the desired number of children that they can conveniently maintain. Family planning also assists couples who have difficulty in having children. Dixon-Meller and Germain (2012) conceived family planning as not only the ability to avoid childbearing when it is not wanted but also the ability to ensure childbearing when it is wanted.

According to Lucas and Gilles (2006), family planning is to encourage couples to take responsible decisions about pregnancy and enable them to achieve their wishes with regard to preventing unwanted pregnancies, securing desired pregnancies, spacing of pregnancies and limiting the size of the family. Nigeria Demographic and Health Survey, NDHS (2003), defined family planning as the use of modern contraceptives or natural techniques, to limit or space pregnancies. Okoye and Okoye (2007) conceptualized family planning as couple's conscious effort to regulate the number of the children they would have. The World Health Organization, WHO (2009) defines family planning as a way of thinking and living that is adopted voluntarily, upon the basis of this knowledge, attitudes and responsible decisions by individuals and couples, in order to promote the health and welfare of the family group and thus contribute effectively to the social development of a country.

3. 2. Concepts of contraceptive use

Hennink (1997) defines contraceptive use as "the deliberate employment of a technique or device to prevent conception". Contraceptive use has been described as the most important proximate determinant of fertility (Bongaarts et al., 2004). The proximate determinants of fertility are the biological and behavioral factors through which social, economic and environmental variables affects fertility. Contraception is defined as the practice of methods intended to prevent or space future pregnancy (Irja, 2007).

Contraceptive methods can be divided into two categories: traditional and modern. Modern contraceptives are easily classifiable and include oral contraceptives, intrauterine devices (IUDs), female and male sterilization, injections, condoms and the diaphragm (Irja, 2007). Other practices, which have a direct impact on fertility that have been used include prolonged breast feeding and postpartum sexual abstinence, which are probably used by mothers more for recuperating between births, child survival and child spacing rather than for limiting family size.

Thus, these methods have not been considered as contraceptive methods although, their fertility inhibiting characteristics are well recognized. Traditional methods recognized in this

study include withdrawal, periodic abstinence, and use of herbs and wearing of traditional beads.

3. 3. Common methods of family planning among women

The World Health Organization (WHO, 2014) outlined different family planning methods and their effectiveness including abstinence which mean refraining from vaginal anal or oral intercourse and it has high effectiveness of not getting pregnant, different types of condom both for male and female, diaphragm which is barrier type birth control method prescribed by family planning clinician, female sterilization, intrauterine device and vaginal spermicide among others.

3. 4. Traditional ways of using contraceptive devices among married couples

Traditional/Natural family planning methods (NFP) or fertility awareness methods (FAM) are methods which used the body's natural physiological changes and symptoms to identify the fertile phase of the menstrual cycle (WHO, 2009). The effective use of these methods depends on the client's ability to use calendars, write on charts, and read thermometers. Therefore, these methods may not be truly available to a population with low resources and a low rate of literacy. However, it is important that health professionals be prepared to offer these methods. These methods includes: Firstly, Basal thermometer needed for some methods or(calendar method basis) which mean a women must keep a monthly record of the days she menstruates. From, this with help of a qualified natural family planning counselor she can estimate when she is most likely to get pregnant if she has sex. Secondly, the Basal Body Temperature (BBT) Methods Basis, it is the hormone progesterone which the ovaries secrete after ovulation induces a slight rise in body temperature which is maintained until menstruation. The fertile phase of the menstrual cycle can be determined by taking accurate measurements of the basal body temperature to determine this shift (WHO, 2009). Thirdly, cervical Mucus (Billing) Method and it is based on detecting the changes in cervical mucus secretion and in the sensations in the vagina. Before ovulation, the cervical mucus becomes slippery and stretchy. The mucus changes are greatest around the time of ovulation.

4. LITERATURE REVIEW

A myriad of different factors affects personal decisions about what types of family planning method he should use: Effectiveness people who are not in a financial or emotional situation to have children might opt for the most effective type of family planning in order to avoid pregnancy. A couple or woman with a casual approach towards parenthood, such as not actively pursuing it, but not unwilling to take it on, might choose a less certain form of contraception, such as natural family planning.

4. 1. Challenges facing the choice of contraceptives methods among women

4. 1. 1. Religion

Some religions, such as Catholicism, have restrictions on contraception based on the belief that it is God's will to bring children into the world. According to Dixon-Muller (1999), religious believers or observers might choose to avoid certain methods of family planning, such

as birth control pill, in an effort to live their lives according to the teachings of their religion. Like the other two Abrahamic religion, Islam values the family and encourages procreation. Some Muslims have concluded from these facts that Islam does not permit family planning.

4. 1. 2. Cost

Some forms of contraception, such as minor surgery (like vasectomy), carry a fairly significant amount of one's time and cost as compared to other options, such as condom or the calendar cycle methods which are less expensive; hence, couples engage in them.

4. 1. 3. Health Risk

For people with multiple sexual partners, the choice to use family planning devices helps them to keep healthy. For example, using condoms can reduce the chance of contracting sexually transmitted diseases.

4. 1. 4. Permanence

Some contraception choices, such as vasectomy, are usually permanent. So couples who do not want to have children at present, but would like to have one in the future, might want to choose a less – permanent option such as condoms or birth control pills.

4. 1. 5. Partner involvement

One has to consider the preferences of his or her partner when choosing a birth control option. For example, some men do not like to have sex using a condom. In that case, birth control pills might be a better choice for preventing an unwanted pregnancy, according to the National Institute of Health (Olaitan, 2009).

4. 1. 6. Socio-economic factors

There are some contraceptive methods of family planning that are expensive, and some couples cannot afford to use or purchase them due to their financial situations in the society. For instance, people in rural areas cannot afford to use the expensive contraceptive methods of family planning such as vasectomy, Intra-uterine devices (IUD) (which are small, flexible, plastic frame inserted in the vagina of women) and female sterilization method. Therefore, the government action is required to make more access to the common people specially in less privilege households.

4. 1. 7. Cultural norms factors

This is the most important factor influencing the choice of family planning among couples. This includes: community norms, religious belief and gender role. The values and practices that subjugate women are also deeply rooted in religious belief. Christianity, Islam, and indigenous Nigerian religions, share a rare agreement with respect to the position of the woman in the home. These religions prescribe that women should obey their husbands, should be submissive to them and feed the family members. In Nigeria, patriarchy promotes high fertility by providing incentives among women for a large family size; for instance, "Ewu-Ukwu" is a ceremony held for mothers of ten or more children in the Igbo culture.

5. RESULTS AND DISCUSSION

This part of the study is about the results and discussion of the major and significance findings. A total number of 80 structured questionnaires were administered to the women attending family planning in Potiskum general hospital. All administered questionnaires were successfully completed and returned therefore, the analyzes of collected data based on 80 questionnaires.

Table 1. Most common contraceptive practice methods among women.

S/N.	ITEMS	SA	A	D	SD	\bar{X}	SD	Remarks
1	Withdrawal (Coitus Interruptus) as a traditional method	50	20	8	2	3.47	0.77	Agreed
2	Vaginal Spermicides method	4	5	61	10	2.03	0.62	Disagreed
3	Oral Contraceptives (The Pill) method	54	6	12	8	3.32	1.06	Agreed
4	Intrauterine Device (IUD) method	-	-	45	35	1.56	0.49	Disagreed
5	Female Condoms	60	10	8	2	3.60	0.77	Agreed
6	Emergency Contraceptive Pills method (ECP)	70	7	2	1	3.82	0.52	Agreed
7	Diaphragm method	18	2	13	47	1.88	1.23	Disagreed
8	male Condoms	50	20	7	3	3.46	0.81	Agreed
9	Cervical Cap method	3	2	68	7	2.01	0.51	Disagreed
10	Abstinence as a traditional method	70	7	2	1	3.82	0.52	Agreed
11	f Calendar as a traditional method							Agreed

Source: Author's Calculations, 2018

Findings from Table 1 revealed that withdrawal method (coitus interrupts), oral contraceptive (the pills), condom, use of emergency contraceptive pills, total abstinence, and calendar or methods are the most commonly used contraceptive methods among the women (respondents) attending family planning clinic in potiskum general hospital. While the uses of

virginal spermicide, intrauterine and contraceptive device (IVCD), use of diaphragm and cervical cap methods are the frequently used methods.

For this study, none of the respondents indicate the use of injectable, but in a study carried out by Johnson (2016) on knowledge, Attitude, and practice of family planning among women in a Rural community in Southern Nigeria revealed that the injectable method of contraception was the most widely known by almost half of the respondents of the study.

Several studies have reported that the most community used family planning method to be the injectable contraceptive (Gebremariam & Addissie 2014).

Table 2. Factors militating against the effective used of contraceptive among women.

S/N.	ITEMS	SA	A	D	SD	\bar{X}	SD	Remarks
1	Cost of family planning facilities among women	40	36	2	2	3.42	0.67	Agreed
2	Fear of health risk prevent to adopt the family planning	42	18	15	5	3.21	0.96	Agreed
3	Lack of consensus among partner is considered as factors preventing family planning programme among women.	60	10	17	3	3.41	0.91	Agreed
4	Socio-economic factors are considered to prevent family planning practice among women.	48	31	1	0	3.57	0.56	Agreed
5	Cultural norm is considered as factors that prevent family planning practice among women.	55	5	19	1	3.42	0.89	Agreed
6	Community norm is considered as factors that prevent family planning practice among women.	43	20	5	12	3.17	1.08	Agreed
7	Religious considered as factors that prevent family planning practice among women.	36	27	14	3	3.2	0.86	Agreed
8	Parents involvement in the relationship between couple can be considered as a factor that preventing family planning	60	16	3	1	3.68	0.60	Agreed
9	Lack of available family planning facilities in the society can be considered as a factor that prevent family planning practice among women	32	24	18	6	3.02	0.96	Agreed
10	Lack of knowledge about the health benefits of family planning can be considered as factor that preventing family planning practice among women							Agreed

Source: Author's Calculation, 2018

Findings from Table 2 revealed that all of the respondents agreed that the cost of family planning and fear of health risk (side effects) prevents most of them from practicing family planning. Also, lack of consensus among partners, socio-economic factors, cultural and community norms are some of the beliefs preventing them from practicing family planning. The study also revealed that, religious factors, parents' involvement in couple's relationship, lack of available family facilities and ignorant of health benefits of family planning are some of the reasons hindering the effective use of family planning among the respondents.

Findings from this study is in contrary with that of Johnson (2016), which indicates that negative attitude towards family planning is attributed to fear of side effects, while in another study carried out by Duse & Mohd (2006) in Northern Nigeria, 78% of the respondents stated that their negative attitude was as a result of husband's negative inheritance.

Table 3. The prospects and solutions to be adopted for improving the levels of the use of contraceptive among women.

S/N.	ITEMS	SA	A	D	SD	\bar{X}	SD	Remarks
1	Use of mass media campaign to educate women about family planning programme.	60	17	2	1	3.70	0.58	Agreed
2	Use of symbols to display appropriate family planning equipment for women to see and raise their awareness.	50	18	10	2	3.45	0.80	Agreed
3	Use of guidance and counseling in Primary Health Care to educate women about family planning programme.	45	25	7	3	3.40	0.80	Agreed
4	Household visit by Health Care Personals in the community to educate women about family planning programme.	65	13	1	1	3.77	0.52	Agreed
5	Provision of free access of family planning facilities among women in the community under study.	27	40	5	8	3.07	0.89	Agreed
6	Use of women health personnel in the community to educate the women about the modern method of family planning.	55	20	4	1	3.61	0.64	Agreed
7	Use of non-governmental health personnel to educate the women about the modern methods of family planning.	70	4	5	1	3.78	0.60	Agreed
8	Involvement of community leaders towards educating women about the modern methods of family planning	65	13	1	1	3.77	0.52	Agreed
9	Involvement of religious leaders towards educating the women about the health	40	27	3	10	3.21	100	Agreed

	benefits of family planning in the community							
10	Government involvement towards educating women about the economic implication of having more children in the society.	65	13	1	1	3.77	0.52	Agreed

Source: Author's Calculation, 2018

The Table 3 revealed that mass education of women through the use of mass media, use of symbols, guidance and counseling unit in the family planning clinic, household visits by health zone personnel, and free access to family planning facilities will encourage utilization of family planning among the respondents. Also, use of both religious and community leaders and involvement of non-governmental organizations personnel in educating the women on the benefits of family planning and the advantage of spacing between births will encourage the utilization of family planning among the women attending Potiskam general hospital.

6. CONCLUSION AND RECOMMENDATION

This paper concludes that the withdrawal method, oral contraceptive pills, use of emergency contraceptive, total abstinence and the calendar method are the most frequently used family planning methods. The use of intra urine contraceptive device, corrival caps and the diaphragm are not used frequently by the respondents. The study also concludes that, injectable are not commonly used in the study area.

Some of the challenges to smooth are of family planning in the study area circles, fear of side effects, cultural and religious factors, cost, parents' involvement, lack of enough family planning facilities, and lack of consensus among partners.

With adequate information on the benefits and family through the involvement of mass media, cultural and religious leaders, as well as easy accessibility to family planning facilities will offer them the opportunity to make informal choices and encourage the practice of family planning. This will eventually participation, reduces unwanted programs, spacing, and improve maternal health in the community.

Based on the above findings and considering The Nigerian Vision 2020 to enhance the uptake of family planning services and realization of the MDGs, the following recommendations are made as the way forward:

- 1) The government through the Ministry of Health to revive and support family planning education at both household and community level that targets the woman and her partner. This could be undertaken through print and mass media, traditional leaders, market places as well as newsletters and posters.
- 2) In addition, public health facilities also need to use revenue generated through facility improvement funds (FIF) to improve the quality of FP services, including infrastructure, to encourage utilization of the services at facility level by the providers
- 3) Revamping and supporting Community Based Distribution of Family Planning services by the government, NGOs, and the CBOs is inevitable. The NGOs and CBOs need to

revamp and support the services of community-based distributors so that contraceptives could reach the underserved who are the majority in slums.

- 4) 4. Lastly, the Ministry of Health in collaboration with development partners involved in the provision of family planning services need to enhance large scale training of service providers in quality care, client follow up, communication skills, counseling, referral and feedback and provision of a wide choice of methods.

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