

Contraceptive Knowledge, Perception and Preference among Married Women Attending the Family Planning Unit of Turai Umar Yar'adua Maternity and Children Hospital Katsina

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Abstract

The aim of this study is to examine the contraceptive knowledge, perception and identify preferred methods among married women attending Family planning Unit of Turai Umar Yar'adua Maternity and Children Hospital Katsina. The theory of planned behavior was used as a theoretical framework. A cross sectional descriptive survey was applied as a design. A total of 66 women were selected as the sample respondents from Family planning Unit of Turai Umar Yar'adua Maternity and Children Hospital Katsina. The sample size was determined by the use of sample size determination chart based on the statistics of the client's register per month as obtained from the facility. The instrument used for data collection was a structured questionnaire. The data collected was analyzed using descriptive statistics of frequency tables and percentages. Findings from the study reveal that most of the women (81.8%) have good knowledge about contraception, and their perception towards contraception was positive. Furthermore, the study established that the most common method used was hormonal contraception Implants (86.4%). However, health benefits and couple decision are identified as the main factors that influence the choice of contraceptive method. The study recommends massive enlightenment campaign about the usefulness and health benefit of family planning. Also Men should be involved in family planning/ other reproductive health right of women campaigns in other to change Women attitudes towards family planning and informed reproductive health choice.

Keywords: *Family planning, hormonal contraception implant, IUD, Couple decision*

Introduction

Family planning refers to the use of modern contraception and other methods of birth control to regulate the number, timing, and spacing of human births. It allows parents, particularly mothers to plan their lives without being overly subject to sexual and social imperatives. However, family planning is not seen by all as a humane or necessary intervention. It is an arena of contestation within broader social and political conflicts involving religious and cultural injunctions, patriarchal

subordination of women, social-class formation, and global political and economic relations (World Health Organization (WHO), 2012).

Contraceptive use has increased in many parts of the world, especially in Asia and Latin America, but continues to be low in sub-Saharan Africa. Globally, the use of modern contraception has risen slightly, from 54% in 1990 to 57.4% in 2015 (WHO, 2016). Regionally, the proportion of women aged 15–49 reporting use of a modern contraceptive method has risen minimally or plateaued between 2008 and 2015. In Africa, it went from 23.6% to 28.5%, in Asia, it has risen slightly from 60.9% to 61.8%, and in Latin America and the Caribbean it has remained stable at 66.7% (WHO, 2016).

Although, contraceptive knowledge, perception and uses differs substantially among most countries of the World, particularly developing nations, Nigeria inclusive, yet it has been observed that despite efforts to make the product available fewer than 10% of Married Women use contraceptive in Nigeria (Aliyu et al, 2010). Nigeria is one of the countries where significant progress has not been recorded in contraceptive uptake, despite decades of family planning programs. The country's fertility rate has consistently remained high over several decades, and is currently 5.7 children per women, (Nigerian Demographic and Health Survey Reports-NDHS, 2013) as compared to 4.0 in neighboring Ghana and 4.6 in Kenya, East Africa. Despite the high level of family planning awareness in Nigeria, current contraceptive use for modern contraceptives is just 10% according to Aransiola et al (2014). There are, however, considerable variations across geographical areas and social strata. The contraceptive prevalence rate is significantly much lower in Northern Nigeria compared to the South. However, the rate of contraceptive use is lower among rural compared to urban dwellers, and among the poorer compared to richer population (Aransiola et al, 2014).

Plethora of literatures attempted to assess the contraceptive knowledge and perception in many countries, however these studies generally believed that contraceptive knowledge is high, but the use of contraceptive are low and in few cases high in most countries, where studies were conducted. Among the studies Thomas, Dow and Linder (1983) on the perceptions of family planning among rural Kenyan Women have found that although, there is high level of knowledge, approval and perceptions about the family planning goals and objectives; however, the use of contraceptive is low. Among the factors identified as responsible for this;

are high levels of desired fertility, alternative non-contraceptive birth spacing and concern over the safety, availability and cost of contraceptives.

Armah-Ansah (2018) examines the perception of family planning use among married men and women at Anomabu community in the Mfantseman Municipality of the Central Region of Ghana. The study found that in spite of about 5 decades of lurching family planning programme in Ghana, still the prevalence rate of family planning is low and one of the factors contributes to low family planning prevalence rate is the perception among the married men and women in Ghana. The study further established that married men and women have high knowledge about the modern method of family planning in Ghana.

Nsubuga et al (2016) investigate contraceptive use, knowledge, attitude, perception and sexual behaviour among female university students in Uganda. The study established that knowledge about contraceptives method is high, still perceived acceptability of contraceptive use is also higher. Tilahun et al (2013) try to understand family planning knowledge, attitude and practice among married couples in Jimma Zone, Ethiopia. Finding from the study shows that family planning methods are well-known to the study population. However, long term contraceptive methods are the most acceptable to Women, while traditional methods are better known to Men. Moreover, increased knowledge and awareness about contraceptive method was attributed to formal education. In a related study Dingeta et al (2021) assess the relationship between contraceptive utilization and socio-cultural factors among young Married women in Eastern Ethiopia, using multivariable logistic regression analysis. The study found low contraceptive utilization, however socio-cultural factors are found to be responsible for low contraceptive utilization among the young married women in rural Ethiopia.

Mustafa et al (2015) undertakes a study about family planning knowledge, attitudes and practices among married Men and Women in rural areas of Pakistan. Finding from the study revealed that majority of the respondents are aware about the modern contraceptive method. However, the use of these modern contraceptive methods is generally low, due to incomplete family size, negative perceptions, in-laws disapproval, religious concerns, side-effects and lack of access to quality service.

Efeyinwa et al (2020) found that only few families use method of family planning, and those who do not practice it perceived it as interfering with God's plan for

fruitfulness. The study further found that most common used method of family planning among married women of reproductive age in the rural communities of Ebonyi State-Nigeria was the natural method (57%) and artificial method (43%), however, among those using artificial methods majority use condoms (32.7%), implant (27.3%), injectables (23.64) and Pills (16.4%). Aliyu et al (2010) study the contraceptive knowledge, attitude and practice among married Women in Samaru Community, Zaria Nigeria, using multi-stage random sampling technique to study 200 women in Samaru Community. The study indicated that contraceptive use is low. Omo-Aghoja et al (2009) undertake a study to determine the knowledge, practices and perceptions of contraceptive in rural Southern, Nigeria, they show that contraceptive usage is poor, despite high level of awareness. They further viewed that the other factors determine the contraceptive usage in Nigeria is the male partners decisions that influence contraceptive use (Blackstone & Iwelunmor, 2017). Ejembi et al (2015) investigate contextual factors influencing modern contraceptive use in Nigeria. The study found individual and community characteristic as factors influence modern contraceptive usage in Nigeria. To Asaolu et al (2021) awareness about the use of modern contraceptives among the university students in Calabar, Nigeria is limited, also knowledge and application of modern and natural contraceptive methods are low, rather Folkloric method of contraceptive is the most acceptable method

The present study aims at examining the contraceptive knowledge, perception and identifies preferred methods among married women attending Family planning Unit of Turai Umar Yar'adua Maternity and Children Hospital Katsina. Beside this introduction section, section two is the methodology, results and discussions are in section three. Finally conclusion and recommendations are contained in section four.

Methodology

Study Design

A cross sectional descriptive survey design was used for the study.

Research Area/Setting

The study setting was Turai Umar Yaradua Maternity and Children Hospital Katsina, Nigeria. It is located at Gidan-Dawa, off, Hassan Usman katsina road. GRA. Katsina.

Study Population

The population of the study is all the married women who attended the family planning Unit of Turai Umar Yar'adua Maternity and Children Hospital Katsina, whom by the hospital records numbered an average of 80 clients per month.

Instrument for Data Collection

The researchers used a set of structured questionnaire to obtain information for the study. The designed questionnaire is made up of basically section A & B. Section A comprises of questions on the socio demographic data of the respondents/clients, while section B comprises of 22 questions on the respondents/clients' knowledge, perception and preference of the contraceptive. Likerts' scale was used to score the respondents/clients' perception, while close ended questions were used to answer questions on the respondents/clients' contraceptive knowledge and preference.

Method of Data Collection

The researchers obtained an introductory letter from the Department of Nursing Science and presented to the State Ministry of Health, Katsina for necessary support and approval to conduct the study. Afterwards, the prepared questionnaire was administered to the respondents/clients (following an informed consent), odd number clients who presented to the clinic on day one of data collection were selected, and even number clients who presented to the clinic on the day two of the data collection were selected, and this method was maintained up to the end of the data collection. Questionnaire was retrieved for analysis. The data was collected at the family planning unit from the consented respondents at Turai Umar Yar'adua Maternity and Children Hospital Katsina.

Method of Data Analysis

The data obtained were inputted into SPSS (statistical package for social sciences) software V.20, and analyzed using descriptive statistics, frequency distributions tables and percentages.

Results and Discussions

All the 66 questionnaires administered to the targeted respondents were duly filled and returned to the researchers. Below are the data being presented in frequency tables and percentage.

**Table 4.1: Distribution of the respondents according to their socio-demographic status
n=66.**

Variables	Frequency	Percent
Age in Years		
15-20	4	6.1
25- 30	46	69.7
35-40	12	18.2
45-50	4	6.1
Marital status		
Married	66	100.0
Non Married	0	0
Tribe		
Hausa	60	90.9
Yoruba	4	6.1
Igbo	2	3.0
Religious		
Islam	64	97.0
Christianity	2	3.0
Parity		
Nullipara	6	9.1
Multipara	53	80.3
grand multipara	7	10.6
Occupation		
Civil servant	48	72.7
Business woman	10	15.2
House wife	6	9.1
Others	2	3.0
non formal	4	6.1
Education		
Primary	2	3.0
Secondary	22	33.3
Tertiary	38	57.6

Table 4.1 presents the distribution of the respondents according to their socio demographic status, 46 respondents are between the ages of 25-30 years and this represents 69.7%, which is the highest percentage of the total respondents. While 4

respondents each are between the ages of 15 -20 and 45- 50 years respectively, representing 6.1% of the total respondents, which is also the lowest figure. All the 66 respondents are married representing 100% of the respondents' marital status. The respondents ethnicity shows that 60 are Hausas respondents and this represents 90.9%, which is the highest; while 2 (represents 3.0%) are Igbos respondents and is the lowest. The religious status of the respondents shows that 64 respondents practice Islam as their religion and this represents 97.7% of the respondents, which is the highest. Also 2 respondents practice Christianity as their religion representing 3.0% and is the lowest. According to their parity, 53 of the respondents representing 80.3% are multipara, while, the lowest is 6 respondents, who are Nullipara which represents 9.1%. According to their occupations, 48 of the respondents are Civil Servants representing 72.7% and is the highest, while, 2 respondents (represents 3.0%) performed other occupations, which is the lowest. According to educational status, 38 respondents attended tertiary education, which constitute 57.6% and is the highest, while, 2 respondents or 3.0% attended primary education, which is the lowest value.

Table 4.2 distribution of the respondents according to their level of Knowledge about contraceptive n= 66

Level	Number	Percentage
Good > 60%	54	81.81
Average 50 – 60%	8	12.12
Poor < 50%	4	6.06

Table 4.2 reveals that 82% of the respondents have good knowledge about contraceptive methods and only 4% have poor knowledge, which is comparable with a study which shows that majority of the respondents are fully aware and knowledgeable about modern methods of family planning, especially the Implant and IUCD methods. This finding is consistent to a study by Babalola (2012) who found that majority (75%) of women know at least one modern contraceptive method. However, the finding is in contrast with that of Kamla-Raj et al (2013) who established that 46% of the respondents are knowledgeable about the non-prescribed method, most especially condom. Studies who found a high knowledge about contraceptive methods among Women in Nigeria are Efeyinwa et al (2020), Aliyu et al (2010), Omo-Aghoja et al (2009).

Table 4.3: Distribution of the respondents according to their perception of contraceptives, n=66

Statement	SA3		A2		NA1		Not 0 determine		Mean
	NO	%	NO	%	NO	%	NO	%	
There are great advantages of contraceptives	32	48.5	34	51.5	00	00	00	00	2.4
Societal view on contraceptive is that it is something good	10	15.2	52	78.8	4	6.1	00	00	2.09
Culturally contraceptive is perceived as something good	16	24.2	16	24.2	34	51.5	00	00	1.8
Contraceptive method has some advantages to the mother	10	15.2	56	84.8	00	00	00	00	2.15
Contraceptive method has some advantages to the family	8	12.1	58	87.9	00	00	00	00	1.7
Contraceptive has some advantages to the country	2	3.0	62	93.9	2	3.0	00	00	2
Contraceptive is a western view adopted by us	4	6.1	60	90.9	2	3.0	00	00	2.0
Aggregated mean	82		338		42		0		
		420			42				
		60			6				

Key;
 SA- Strongly agreed 3
 A- Agreed 2
 NA- Not agreed 1
 ND- Not determine 0

Table 4.3 also revealed that contraceptives are considered something good, culturally, socially and religiously. The respondents are also of the opinion that contraceptives is a western view adopted by our society, the study also indicates that contraceptives is highly accepted by the population of the setting with an aggregated mean of 2.02. This agreed with the study by kamla-Raj, et al (2009) that shows that high acceptance of contraceptives following increased awareness by health care providers. This finding is also in line with that of Olukunmi and Lanre (2013), who shows that socio-economic, religious factors and cultural norms do not influence couples' choices, whereas educational background of the couples and information from the health care providers influence the choice of family planning among couples.

Table 4.4: Distribution of the respondents according to method of preference, reasons and influences, n=66

Type of contraceptive	Number	Percentage
Injectable	5	7.6
Intrauterine	4	6.1
Implants	57	86.4
Orals	0	0
Reason		
Duration of the method	12	18.2
Family decision	2	3.0
Health benefits	52	78.8
Influence		
My self	6	9.1
My husband	2	3.0
Both	58	87.9

According to table 4.4 above, 57 respondents preferred implants and this represents 86.4% constituting the majority, while 4 respondents preferred intrauterine methods, which represents 6.1% and is the lowest. This is in contrast to a study by Olatun, Koledole and Oluwale (2012), who shows that in Africa; only 5% of married women are reported using contraception. Similarly, 52 respondents preferred contraceptives, because of the health benefits and this represents 78.8 %

of the total respondents, while 2 (3.0%) respondents preferred contraceptives, because it is a family decision. Again, 58 respondents were influenced by both themselves and their husbands' decisions, which represent 87.9%, while 2 (3.0%) respondents were influenced by the husband's decision only. This tallies with Blackstone and Iwelunmor (2017) who found decision of the male partner as the main factor influence choice of the contraceptive method. However, it is contrary to a study by Kamla-Raj et al., (2013) who reported a huge difference in contraceptive use between women who are influence by their husbands about family planning compared to their counter-part who are not. Among the women who discussed family planning with their husband, about 1/5th of them were allowed to use contraceptives, whereas among their counter-parts, not even 1/10th of them are using contraceptives.

Conclusion and Recommendations

Based on the results from the study, it can be concluded that the respondents have good knowledge about the modern methods of family planning such as Implants, Injectable and intrauterine. However, Implants is the most preferred contraceptive method use by the selected married Women in Katsina. The respondents' perception about contraceptive is that it is believed to be something good and the major reason for accepting contraceptive is because of the health benefit to the family and society at large. In addition to that, decisions to use modern contraceptives methods are majorly influenced by the decision of both the husband and the wife.

Therefore, the study recommends the need for government and non-governmental organizations to intensify massive enlightenment campaign about the usefulness of contraceptives and the health benefit of family planning, through mass media and other modern means of communication. Also, the Provision of counseling service programs aim at increasing knowledge about different contraceptive methods and reduce misconceptions of contraceptive. This involves setting up outreach services focusing on health talk on the choice of family planning. Men should be involved in family planning/ other reproductive health right of women campaigns in other to change their attitude towards family planning and informed reproductive health choice.

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