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Contraceptive Prevalence amongst Married Women in Bayelsa State, Nigeria

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Abstract: A study on the contraceptive prevalence amongst married women residing in Bayelsa State was carried out. Its principal objectives was to carry out a random estimate of contraceptive prevalence amongst married women in Bayelsa State, and to determine the contraceptive prevalence, types of contraceptive used and factors affecting the latter amongst women in Bayelsa State. The study was aimed at promoting general public awareness on family planning amongst women in Bayelsa State. A Non-experimental study design on the contraceptive prevalence amongst married women residing in Bayelsa State. A sample random method was employed where only four hundred and ninety eight (498) women within the age range of 15 -45 years of age were interviewed. Out of the five hundred (500) questionnaires only four hundred and ninety eight (498) were retrieved and used in this study. The highest contraceptive prevalence were between age range of (21-30) (75, 15.7%) highest users based on educational level are Tertiary 142 (28.5%) occupation was business women 99 (19.9%) based on children 1 – 2 surviving children 104 (28.7%). From the result of the research carried out, contraceptive prevalence rate amongst married women in Bayelsa is low when compared to worldwide figure, though higher than the national figure in Nigeria. Education of eligible women on the use of contraceptive should be encouraged.

Keywords: Contraceptive, Prevalence, Married Women, Bayelsa State.

INTRODUCTION

Over the years the issue of birth control has become a matter of primary concern in Nigeria. Every man expects his wife to give her clear response in regards to family planning. History, has shown that sub-Sahara Africa are still wallowing in the pit of low contraceptive prevalence [1-14] and high fertility rate causing attendant problems like population explosion, unwanted pregnancies and its demography changing number of births, deaths, diseases and poor socioeconomic development [15-28]. Also Nigeria is considered the most populous country in Africa with a population of one hundred and forty million (140 million), a population growth rate) and fertility rate of five point three percent (5.3% fertility rate) causing serious demographic and health issue to the nation [29]. There is paucity of literature on population growth control measures in Bayelsa State and Nigeria at large. Population growth is a global problem and Nigeria is considered the fastest growing African nation with population growth projection of 206,830,983 a growth rate of 2.57%. Bayelsa State alone has been estimated to have a population of 1,703,358 with high level of poverty and illiteracy present in the region, it's expected that the population explosion in the future will hit the sky if no drastic measure is taken to educate the populace on population control.

Aim

The study was aimed at promoting general public awareness on family planning amongst women in Bayelsa State.

Objectives

The objectives were to carry out a random estimate of contraceptive prevalence amongst married women in Bayelsa State, and to determine the contraceptive prevalence, types of contraceptive used and factors affecting the latter amongst women in Bayelsa State.

Limitation of the Study: This study was limited to selected people that are present in Yenagoa the city of Bayelsa State.

MATERIALS AND METHODS

Research Design: The research design used in this study was the cross-sectional design. A crosssectional survey amongst married women attending post-natal, antenatal in commonly known hospitals,

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health centers and subjects approached which were not in the hospital.

Stratified Random Sampling technique was used and ethical clearance was sort from the ethics committee of the University of Port Harcourt.

Data Collection: 500 married women residing in Yenagoa, Bayelsa State were sampled through self-administered closed-ended questionnaires and personal oral interviews. The questionnaires were thoroughly filled by respondents, all questions answered. These techniques were used to enable the researchers find out from respondents their knowledge, attitude, belief, feelings, future and past behavior towards the study subject. The sample drawn for this study represents

contraceptive prevalence amongst married women in Bayelsa State.

Statistical Study

This was done using (IBM) SPSS Statistics version 22. Chi-square test was used to represent the results in simple percentages.

RESULTS

In table 1 the age brackets with users and nonusers of contraceptives amongst the subjects were observed. The highest users and non-users were found in the age brackets 21-30yrs {176(35.4%) and 102(20.5%)} respectively while the least users and nonusers {20(4.0%) and 10(2.0%)} respectively.

Table-1: Percentage of users and number of contraceptive prevalence in selected characteristics

CHARACTERISTICS	USERS	PERCENTAGE	NON USERS	PERCENTAGE
AGE				
15 - 20	20	4.0%	10	2.0%
21 – 30	176	35.4%	102	20.5%
31 - 40	75	15.1%	50	10.0%
Above 40	29	5.8%	28	5.6%
Unspecified	2	0.4%	6	1.20%

Key: The figures in parenthesis are in percentages. P=.05

In table 2 the educational level of users and non-users of contraceptives amongst the subjects were observed. The highest users were found among

respondents with tertiary education 142(28.5%) and respondents with secondary school level of education 113(22.7%) were found to be the highest non-users.

Table-2: Educational level of the users and non-users

CHARACTERISTICS	USERS	PERCENTAGE	NON USERS	PERCENTAGE
None	-	=	3	0.6%
Primary	24	4.8%	17	3.4%
Secondary	133	26.7%	113	22.7%
Tertiary	142	28.5%	61	12.3%
Unspecified	2	0.4%	3	0.6%

Key: The figures in parenthesis are in percentages. P=.05

In table 3 the users and non-users of contraceptives were observed based on their occupation. The highest users and non-users were found among

business women {99(19.9%) and 84(16.7%)} respectively. The least users were found in the category of others with 15(3.0%).

Table-3: Occupation of the users and non-users

CHARACTERISTICS	USERS	PERCENTAGE	NON USERS	PERCENTAGE
Professional	34	6.8%	13	2.6%
Housewife	20	4.0%	13	2.6%
Students	69	13.9%	25	5.0%
Business women	99	19.9%	84	16.7%
Skilled worker	21	4.2%	14	2.8%
Civil servants	51	10.2%	27	5.4%
Others	15	3.0%	13	2.6%

Key: The figures in parenthesis are in percentages. P=.05

In table 4 the users and non-users of contraceptives were observed based on the number of children they have. The highest users were found

among women who have one to two numbers of children 104(20.9%). The least users were found

amongst women who have greater than six numbers of

children 18(3.6%).

Table-4: Assessing users and non-users by the Numbers of Children they have

No. of Children	USERS	PERCENTAGE	NON USERS	PERCENTAGE
(1-2)	104	20.9%	61	12.3%
(3-4)	96	19.3%	56	11.3%
(5-6)	35	7.0%	24	4.8%
> 6	18	3.6%	19	3.8%
Unspecified	48	9.6%	37	7.4%

Key: The figures in parenthesis are in percentages. P=.05

In table 5 the users and non-users of contraceptives were observed based on religion. The highest users were found among women who are

Pentecostals 143(28.7%), followed by Catholic women 48(9.6%) and the least users being women categorized as other religion 3(0.6%).

Table-5: Assessing users and non-users by Religion

Religion	USERS	PERCENTAGE	NON USERS	PERCENTAGE
Pentecostal	143	28.7%	110	22.1%
Catholic	48	9.6%	23	4.6%
Anglican	44	8.8%	24	4.8%
Jehovah's witness	28	5.6%	10	2.0%
White garment church	27	5.4%	110	22.1%
Moslem	7	1.4%	9	1.8%
Others	3	0.6%	1	0.2%

In table 6 the users and non-users of contraceptives were observed based on tribes. The highest users were found among women who are Pentecostals 143(28.7%), followed by Catholic women

48(9.6%) and the least users being women categorized as other religion 3(0.6%).

In table 7 the highest incidence and percentage of sum total between age ranges 21 - 30 were 307 (58.0%).

Table-6: Assessing users and non-users by Tribes

Tribes	Users (%)	Non-users (%)	Total (%)
Bayelsan	189 (37.9)	112(22.5)	301(60.4)
Non Bayelsan	110(22.1)	87(17.5)	197(39.6)
Total	299(60.0)	199(40.0)	498(100.0)

Table-7: Percentage incidence and factor affecting contraceptive prevalence among Bayelsan and non Bayelsan according to Age range occurrence of miscarriage, stillbirth, abortion and none, showing users and non-users

Age	Miscarr	iage	Stillbirth	Abortion	None	Sum total	Users	Non user
	%		%	%				
15 - 20	Incident		2	7.8	18	33	11	22
21 - 30	34	51.5	16	64.3	151	307	192	195
31 - 40	25	16.0	18.2	63.0	134	53	81	-
Above 40	7	-	18.0	9.7	14	55	27	28
Total	66		52	165	246	529	203	326

In table 8 the general knowledge of the use of contraceptives was examined and it showed that male condoms had (395), injectable (379) and oral pill (362)

were seen to have the highest level of awareness, while Norplant had the lowest level of awareness (69) in this study.

Table-8: General knowledge of respondent on contraceptive methods

Contraceptive Methods	Yes	No
Male condom	395	103
Female condom	165	333
Injectable	379	119
Oral pills	362	136
IUCD	234	264
Norplant	69	429
Cervical cap	81	417
Vaginal spermicides	84	414
Diaphragms	127	371
Calendar Method	195	303
Herbs	346	152
Billing method	420	78
Bilateral tubaligation	75	423
Vasectomy	89	409.

In table 9 the source of the knowledge of respondents on contraceptive methods were examined and it was shown that health clinic was the major source

of awareness (338) while the category of others (19) was considered the lowest.

Table-9: Sources of knowledge of respondents on contraceptive methods

Sources	Yes	No
Radio	244	254
Television	177	321
Print media	69	429
Posters	81	415
Health clinic	338	160
School lesson	104	394
Friends & Husbands	224	274
Others	19	479

Key Note: (Others include personal discovery)

DISCUSSION

There was a high awareness of contraceptive method among all categories of respondents. Among the modern contraceptive, male condoms were considered to be the most affordable and accessible by the respondents. This may indicate the effectiveness of the social marketing of male condoms. However, despite the high level of contraceptive awareness, less than a fifth of the respondents were using any modern method of contraception. The proportion of contraceptive users was highest among age group (21 – 30) years [24].

Respondents with one to two surviving children are least likely to use any contraceptive methods (61.5%) as against those with six or more children amongst whom (66.7%) practiced contraception. This find agrees with the demographic health survey of 1992 that contraceptive prevalence increases sharply with the number of children a woman has as women who had reached their desired family size seems to stop having children [24].

The awareness of contraception did not translate to the use of contraceptive since about (99.6%)

of respondent are aware of contraception and only (60.34) used any form of contraception. These findings corroborate with similar studies within Africa [13, 17, 25].

Some studies had highlighted the importance of education in influencing the contraceptive usage rate with individuals possessing secondary education and above are more likely to use contraceptive method. However, some cannot be said of this study where it would be suggested that education status was not sufficient enough to influence the contraceptive usage. This is because (22.7%) of respondents had secondary education and above and still did not use any form of contraception. The lack of influence of level of education had been mentioned earlier in a similar study in Nigeria [23]. This is not surprising since the more educated a woman is, the shorter her reproductive career would be as such may not have a serious need for contraception.

The predominance of Christians in index study is not surprising because of the Christian background of the population in Bayelsa as illustrated by earlier studies. However denominational inclination does not

influence the use of any kind of contraception since a large bulk of catholic used condoms as against their normal contraceptive practice doctrine (Billing's method) [4, 25].

The role of husbands, a significant socio cultural influence on the wives hence acting as either major stumbling block or stimulator to the use of contraceptive methods had been highlighted in various studies [5, 17]. Our study noted the role of the men in the decision of women not willing to use any form of contraception since respondents gave husbands objections as reason for non-use of contraception.

Some factor affecting non-users was because their spouse disapproved it. Few said stopping pregnancy is against God's plan for creation, others were not even aware of such information. Those among users was because, many younger ones are seen most likely to use contraception because they were force into marriage half primary secondary because they got pregnant, other had stillbirth because their tender age range. Therefore encourages contraception to enable them get back to their careers.

Bayelsan are known to have babies of their early ages due to poor schooling or no-schooling of all. This corroborate with the fact that before now female children were not given the opportunity to attend school by their parent because of the belief that female children belong to other family and their job is the kitchen and child bearing. Many were force to do handwork other were given for marriage to train their brothers. Most of Bayelsan women are primary, secondary holder but now that the state has developed many went back to school, thereby promoting contraception, other never border, but choose to be business women while their children were given opportunity to attend school [2, 25].

Considering the fact that Christianity has grown far than before, penticostal encourages contraception because they disagree with abortion-few non-Christians prefer abortifacient to contraceptive methods fear of it side effects.

A health clinic was the main source of information on contraceptive amongst the respondents. The role played by friends and husbands also contributed a significant proportion of the source of contraceptive information. This is in keeping with the findings of Onwuzunke and Zochukwu and Nwosu where the mass media contributed significantly to the source of information.

CONCLUSION

It is necessary for better use of the mass media to ensure the dissemination of information especially the radio which unfortunately was revealed to be underutilized in the study. Similarly efforts should be made in incorporating the husbands during the pre-choice counseling. This will positively contribute to improved uptake and implementation of services. It must be highlighted that the overall contraceptive usage is better assured when survival and general level of education in communities is improved.

Finally, the contraceptive prevalence rate amongst women of Bayelsans (indigenes) 37.9% is low though higher than the national. This may require the need for further studies to promote information on contraceptive options and side effects.

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