

Socio-Economic Status, Contraceptive Knowledge And Use Among Rural Women In Ikeji Arakeji, Osun State, Nigeria

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Abstract

The study examined socio-economic status, knowledge and use of contraceptives among women in Ikeji Arakeji, Nigeria. A cross-sectional survey was carried out and questionnaire was used to elicit information from respondents who were randomly selected. The Statistical Package for Social Sciences was used to analyze the data. The study revealed high level of education and high percentage of Christian among the respondents. In addition, almost half of the respondents were in 25-34 age range, while four in every five respondents were married. High knowledge of contraceptives among respondents did not translate to high contraceptive usage. In all, almost one third claimed to be current users of contraceptives. Data analyses revealed associations between age and current use of contraceptives and also religion and current use of contraceptives. The study concluded that age and religion should be taken into consideration in designing an intervention programme on contraceptive usage in the study area.

Background/Statement of the Problem

Knowledge of contraceptives and use are the key variables in any study on fertility regulation and in the evaluation of family planning programmes. Acquiring knowledge about fertility control is an important step towards gaining access to and then using a suitable contraceptive method in a timely and effective manner (NDHS, 2003). This should be the priority of the less developed countries, Nigeria inclusive. But despite high birth and maternal mortality rates in Nigeria, government seems not to be keenly interested in pursuing any aggressive family planning measures (Ebigbola, 1988). Population and development policies stress economic development rather than attempts to reduce fertility. The contraceptive information and services offer to women in Nigeria is often compromised (Ozumba et al 2005).

Oye-Adeniran et al, (2004) states that large number of Nigerian women experience unwanted, unintended or ill timed pregnancies and births. According to a 1997 survey of women in Southwestern Nigeria, at least 27% of women had ever been pregnant when they did not want to be. Similarly, in a survey conducted in Southwestern and Northern Nigeria in the mid-1990, 20% of women reported ever experience an unwanted pregnancy (Okonofua, et al, 1999). The 2003 Demographic and Health Survey (DHS) found that of live births to women in the previous three years, 15% were reported to be unplanned. It has also been reported that about 12% of all pregnancies in Nigeria (not including those that result in spontaneous abortion) end in induced abortion and another 9% result in unplanned births (Henshaw et al. 1998).

According to the 2003 NDHS, the level of knowledge of at least one contraceptive method among all women (currently married, sexually active and inactive unmarried women and for women who have never had any sexual experience) was 79% and 77% know at least a modern method. Despite this high knowledge of at least one contraceptive method, only 29% of all women reported in the same survey to have used at least one of the known methods. The data showed that there had been no significant change in level of contraceptive use since 1999 (15% reported in 1999 and 16% reported in 2003).

The Demographic and Health Survey of 2008 revealed that 72% of all women know at least one method of contraceptive. However, only 29% of all women reported ever using a method of contraception at some time, 24% used at least a modern method and 13% used at least a

traditional method. The overall contraceptive use prevalence among all women in Nigeria was 15%. This is an indication that prevalence of use is low.

Several factors have been stated as responsible for this trend though many are not tested empirically. While some scholars posit that residence, zone, education etc, are part of the factors responsible for differentials in prevalence and use, others are interested in location of clinics and cost. For instance, many scholars posited that the reason for nonuse of contraception in Nigeria generally point to women's perceived lack of need, fear of side effects, opposition to contraception on personal or religious grounds and spousal negative attitude to contraceptive use. An examination of socio-economic characteristics of women, their knowledge and use of contraceptive may help in policy advocacy and formulation that will help to promote knowledge and the use of contraceptives. This study is therefore an effort in this direction and women in the rural area, Ikeji Arakeji, Osun State, Nigeria are the focus of this study.

Objectives

The main objective of this study is to ascertain socio-economic status, contraceptive knowledge and use among rural women in Ikeji Arakeji, Osun State, Nigeria.

The specific objectives include the following:

1. To know the socio-economic characteristics of women in Ikeji Arakeji, Osun State, Nigeria.
2. To examine the relationship between the socio-economic characteristics, knowledge and use of contraceptive among women in Ikeji Arakeji, Osun State, Nigeria.

Research Questions

The following questions are formulated to guide the study:

1. What are the socio-economic characteristics of women in the study area?
2. What is the relationship between socio-economic characteristics, knowledge and use of contraceptive among women in the study area?

Methodology

The study area is Ikeji Arakeji in Oriade Local Government Area, Osun State, Nigeria. Ikeji Arakeji is a rural area that harbors different tribes, religions, social class, ethnics, etc. This makes it suitable for the study. Using appropriate sampling determination formula, Data was collected from 245 respondents by the use of structured questionnaire. Simple random sampling technique was used to select respondents using the household as a reference point. Information was collected on respondents' socio-economic and demographic characteristics. Information was also sought on knowledge and the use of contraceptive. Data were analyzed at univariate (using frequency distribution and bivariate levels (using cross tabulation and chi-square test)

Results

This section presented results that were generated from the survey. Table 1 presented the socio-economic characteristics of the respondents. Age distribution revealed a common feature of growing populations. Respondents who reported less than twenty five years age range (<25 years) were 17.1 percent of the total population. Almost 50.0 percent (48.6%) of the total sampled population were within the 25-34 age brackets. Majority of the respondents were educated, 80 percent of the total respondents had at least secondary education.

A majority of the respondents were Christians (82.9%) and mostly Pentecostal (62.9%). This was instructive because the area of study housed one of earliest Pentecostal churches in Nigeria. More than 14.0 percent (14.3%) claimed Islam as their religion and also 2.9 percent claimed to be the adherents of traditional religions.

Table 1: Percentage Distribution of Respondents by Socio-demographic Characteristics

Category Age	Frequency N= 245	Percentage
<25	42	17.1
25 - 34	119	48.6
35 – 44	56	22.9
45 – 49	28	11.4
Total	245	100.0
Mean Age		31.4
Educational Qualification		
Primary	49	20.0
Secondary	49	20.0
Post Secondary	147	60.0
Total	245	100.0
Religion		
Catholic	21	8.6
Protestant	28	11.4
Pentecostal	154	62.9
Islam	35	14.3
Traditional	7	2.9
Total	245	100.0
Marital Status		
Single	7	2.9
Married	238	97.1
Total	245	100.0
Income		
<10,000	91	37.1
10,000 – 19999	98	40.0
20,000 – 29999	28	11.4
30,000 >	28	11.4
Total	245	100.0

Source: Field Survey, 2011

Almost all respondents were married, an indicator of a rural environment. The study revealed 97.1 percent of married women and 2.9 percent of unmarried women. Income distribution of the sampled population showed that more than one third of respondents (40.0%) and (37.1%) were earning 10, 000 – 19999 and <10,000 naira every month respectively. Those who claimed to be earning more than 20,000 naira every month were 11.4 percent of total respondents. Ditto the percent of those who were earning more than 30,000 naira every month.

The study also examined the knowledge of respondents about different contraceptive methods and use of these methods. Table 2 below showed that all respondents had had about contraceptives. There was a one hundred percent affirmation to the question, "Have you ever heard of contraceptives?" On whether respondents had used contraceptive or any other thing to delay or avoid pregnancy, 42 percent answered in the affirmative. Out of the 42 percent that claimed ever used of contraceptives, 70 percent said they were currently using at least one contraceptive method. All respondents who were currently using contraceptive claimed that their husbands were in support of it and over 70 percent claimed that contraceptive use was a joint decision of the husbands and wives.

Table 2: Percentage Distribution of Respondent by Contraceptive Knowledge, Methods and Use

Questions	Freq.	Percent (%)
Ever heard of contraceptives	245	100
Ever used contraceptive or anything to delay/avoid pregnancy		
Yes	105	42.7
No	140	57.1
Total	245	100.0
Currently use of contraceptives		
Yes	77	73.3
No	28	26.7
Total	105	26.7
Your husband support the use of contraceptives		
Yes	77	100.0
Who initiated the use of contraceptive methods		
Husband alone	7	9.1
Wife alone	14	18.2
Both	56	72.7
Total	77	100.0
Contraceptive methods currently in use (Multiple responses allowed):		
Condom	56	62.7
Injection	42	54.5
Abstinence	77	100.0
Ovulation	14	18.2
Others	7	9.1

Source: Field Survey, 2011

Table 3: Distribution of Respondents Who are Currently Using Contraceptives by Selected Variables

Variable	Category	N	%	Chi-square	Df	P. value
Level of Education	Primary	14	28.6	3.712	2	0.156
	Secondary	21	42.9			
	Post Secondary	42	28.6			
Marital Status	Single	0	0.0	3.303	1	0.069
	Married	77	32.4			
Income	<10,000	28	30.8	1.927	3	0.588
	10000 – 19999	35	35.7			
	20,000 – 29999	7	25.0			
	30000 +	7	25.0			
Age	< 25	21	50.0	21.295	2	0.000
	26 – 34	21	17.6			
	35 +	35	41.7			
Religion	Christianity	56	27.6	17.857	2	0.000
	Islam	21	60.0			
	Traditional	0	0.0			

Source: Field Survey, 2011

Further analysis of the socio-economic characteristics of respondents and the use of contraceptives (Table 3) revealed significant relationship between age and contraceptive use. Also, significant relationship was found between religion and contraceptive usage.

Discussion of findings

This study was undertaken to assess the socio-economic status of women, their knowledge and use of contraceptives. The findings corroborated other findings by other scholars and publications. For instance, the findings from this study were in line with that of NDHS, 2008. High level of knowledge did not translate to high contraceptive use. Moreover, contraceptive use showed evidence of increase with the level of education. In addition, the findings were generally

in agreement with the findings of Myer et al (2007) who found that knowledge of contraception was higher among women of high socio-economic status.

Conclusion

The study was carried out to ascertain the relationship between socio-economic status of women in the child bearing ages and the use of contraceptives. The study revealed high level of education and high percentage of Christian among the respondents. In addition, almost half of the respondents claimed to belong to 25-34 age range while four in every five respondents were married. High knowledge of contraceptives did not translate to high contraceptive usage. Finally, the study revealed associations between age and current use of contraceptive and also religion and current use of contraceptive. The study concluded that age and religion among any other factors should be taken into consideration while designing an intervention programme on contraceptive usage in the study area.

Recommendations

In views of the findings from this study, the following recommendations were made:

There is a need for serious intervention programme that will stimulate the use of contraceptive among women in the study area. Age of people should be taken into consideration while the programme is being designed.

Moreover, religious organizations should be encouraged to teach and educate their members about the importance of family planning and contraceptive use to the children, mothers, fathers, family and the society at large.

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