



Research Article

Factors Influencing the Attitude of Women towards Family Planning in Umuahia North Local Government Area of Abia State

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Abstract

The purpose of this study is to find out the factors that influence the attitudes of women towards family planning in Umuahia North Local Government Area of Abia State. Specifically, the study attempts to find out the influence of education, health, religion, culture, age of women and income on the attitudes of women towards family planning. This research work deals with the types of contraceptive methods, importance of family planning and the benefits of family planning. The subjects were selected using simple random sampling. A total of 358 questionnaires were administered to subjects of the target population which are the educated women randomly selected from five communities under Umuahia North Local Government: Eziamah Ossah, Mgbaja Ossah, Umuchima, Umuafai and Amuzukwu. The data collected were analyzed using percentage approach and the results showned.

Keywords: Factors, Attitude, Women, Family Planning, Umuahia North.

INTRODUCTION

Family planning as the name implies is having children by choice and not by chance; it is the process of having specific number of children at intervals acceptable by individuals or couples, to promote the health and welfare of the family. Family planning is not a new idea all over the world and also applies to Umuahia North Local Government Area of Abia State. Throughout the ages, individuals and families have tried to regulate their fertility either by using herbs, abstinence during ovulation, prolonged breast feeding and living with parent in-laws to avoid sex or polygamy [1].

Historically, most communities in the past used to have policies that encourage large population. Traditionally, in Africa, the low level of economic development and heavy reliance on agriculture have brought about several factors that encourage high fertility. Religious and cultural traditions favour large families because children are expected to help their parents financially and to ensure a kind of family immortality by continuity of the family name [2].

African women traditionally have played major roles in agricultural production, though their primary roles are that of wives and mothers having limited right as subordinates to the males in the household. The status of women is further eroded by the practice of polygamy because they have limited opportunities [3]. At the societal level, child bearing is therefore an important way for them to gain status through the number of children raised. Children are also needed for labour in the farm and a potential old age security which they provide in later life, especially for their mothers because women are often denied inheritance right or forfeit right to use land upon death of husband; and they need children especially sons to ensure that someone cares for them in their old age. Also, a man's health and integrity are often determined by the number of wives and children he has and since the African religion was highly practiced, it was believed that ancestors are expected to reincarnate through childbirth as descendants [4].

Family planning services in Africa have been woefully inadequate. African women have suffered most, the high rate of unsafe abortion increase every day and about 10,000 African women resort to this practice which indicate their frustrated desire to control their fertility. In recent years, most African government nudged by global advocacy efforts and their family planning associations, have come to accept that fewer, better spaced births lead to healthier children and lower

maternal mortality and morbidity [5]. In sub-Sahara Africa as a whole, only 17% of married women are using contraceptives as against 50% of North Africa and the Middle East, 39% in South Asia, 76% in East Asia and the Pacific and 68% in Latin America and the Caribbean. Only a few countries such as South Africa, Botswana, Zimbabwe and Kenya have family planning being successful enough to increase contraceptive use to much higher levels [6].

In Nigeria, the 2008 Nigerian Demographic Health Survey (NDHS) found out that only 10% of married women of reproductive age use contraceptive. This is lower in current sub-Saharan Africa average of 17%. An analysis on the total Contraceptive Prevalence Rate (CPR) indicates the wide state variation ranging from 0.3 in Jigawa to 41.6 in Lagos state as well as a zonal variations ranging from 2.7 in the North West to 28.5 in the South west. The major organizations working in family planning in Nigeria are National and International Non-Governmental Organizations (NGOs). The organizations include Pathfinder International, Society for Family Health, etc. Most financial support for family planning in Nigeria comes from bilateral and multilateral donors, and private organizations [7].

Nigeria being the most populous country in Africa account for approximately one sixth of African population with a current population in excess of 200 million and a growth rate of more than 2% [8]. In addition, Nigeria has infant and maternal mortality rate of about 74.86 death/1000 live births and 630 births/100,000 live births respectively. This is mostly due to high rates of unwanted pregnancies which lead to abortion. Also, inability to space in between pregnancies contributes to the high rates of maternal and infant mortality. Although maternal and infant mortality is seen among women of all ages, income, racial and ethnic groups, the highest rate occur among adolescents and low income women [9]. Nigeria, mostly the Northern part has a problem of inadequate family planning facilities, lack of availability of the services, and poor knowledge and use of family planning services by women of reproductive age group. These lead the researcher to carry out research on the use of family planning among women of reproductive age group in Umuahia North Local Government Area of Abia State.

MATERIAL AND METHODS

RESEARCH DESIGN

A cross-sectional descriptive type of survey design was used to find out the factors affecting family planning among women of reproductive age in Umuahia North Local Government Area of Abia State.

STUDY AREA

Researcher selected Five Communities (Eziama Ossah, Mgbaja Ossah, Umuafai, Umuchima and Amuzukwu) in Umuahia North Local Government Area where the research study were carried out. Umuahia North Local Government Area is a bustling commercial and economic centre of Abia State Capital Territory.

STUDY POPULATION

Population of a study is a group of persons or aggregate items, things the researcher is interested in getting information to determine the Factors influencing the attitude of women towards family planning in Umuahia North LGA. A total number of respondents formed the population of the study. The study population consists of Women of reproductive age group (15-49 years), irrespective of their ethnic or religious background, educational or marital status, and involve only those that are living in Umuahia North Local Government Area (Health Centres) and they are estimated to be 5,248.

INSTRUMENT FOR DATA COLLECTION

Data for this research were collected with the aid of closed ended questionnaires. The questions were arranged in sections according to the objectives of the study. The questionnaire contained questions on socio-demographic data on the first section, questions on knowledge of family planning on the second section, and questions on use, factors influencing the use and methods of family planning used on the third section.

VALIDITY OF INSTRUMENT

The major research instrument used is the questionnaires. This was appropriately moderated. The respondents were administered with the questionnaires to complete, with or without disclosing their identities. The questionnaire was designed to obtain sufficient and relevant information from the respondents. The primary data contained information extracted from the questionnaires in which the respondents were required to give specific answer to a question by ticking in front of an appropriate answer, the questionnaires were administered to the respondents, however, some respondents were asked the questions orally and their responses were noted in the questionnaire. The questionnaires contained about 15 structured questions which were divided into sections A and B.

RELIABILITY OF INSTRUMENT

The questionnaire for the research was drafted and presented by the researcher to the Supervisor for content and face validity. The question used by the researcher in obtaining the data from respondents was constructed in a simple and unambiguous word for easy understanding.

ETHICAL CONSIDERATION

Approval to conduct the study was obtained from the department of Public Health, faculty of Health Sciences, National Open University of Nigeria, Umudike Study Centre and Umuahia North Local Health Authority. Informed consents were obtained from the individuals before administering questionnaire to them, explanation on the purpose of the study was done to the respondents and consented them to participate before enrolling them for the study, confidentiality on the identity of the respondents was ensured and no monetary compensation was given.

METHOD OF DATA COLLECTION

This is a method in which data was collected. This include surveys, observations, focus groups, experiments and secondary data analysis.

METHOD OF DATA ANALYSIS

The data collected from the study were analyzed using descriptive statistical measures. The statistical methods employed include; percentage, frequency distribution table.

RESULTS

FREQUENCY PERCENTAGE			
Age	21-26	19	5.8%
	27-32	99	30.0%
	33-38	33	10.0%
	>=39	75	22.7%
	Total	104	31.5%
		330	100.0%
Community Group	Eziama Ossah	79	23.9%
	Umuchima	67	20.3%
	Umuafai	67	20.3%
	Mbaja Ossah	57	19%
	Amuzukwu	60	20%
	Total	330	100.0%
Religion	Christianity	211	63.9%
	Islam	119	36.1%
	Others	0	0%
	total	330	100.0%
Marital status	Single	11	3.3%
	Married	270	82.1%
	Divorced	20	6.1%
	Widow	28	8.5%
	Separated	0	0%
	Total	330	100%

Majority of the respondents 104 (31.5%) are aged 39 years and above while the least 19 (5.8%) are aged 15-20 years. Eziamah Ossah 79 (23.9%) is the community of majority of the respondents, followed by Umuchima and Umuafai which constitute 67 (20.3%) each of the respondents and the least is Mgbaja Ossah and Amuzukwu which both constitute 57 (19%) and 60 (20%) respectively of the respondents. Majority of the respondents are Christians 211 (63.9%) while 119 (36.1%) are Muslims. Majority of the respondents are married 271 (82.1%), followed by 28 (8.5%) who are widows, 20 (6.1%) are divorced while none are separated.

TABLE 4.1 (b) SHOWING SOCIO-DEMOGRAPHIC DATA OF RESPONDANTS

		Frequency	Percentage
Occupation	Civil servant	60	18.2%
	Trader	94	28.5%
	Housewife	145	43.9%

	Others	31	9.4%
	Total	330	100.0%
Level of education	Secondary	115	34.8%
	Tertiary	84	25.5%
	Secondary study	95	28.8%
	Others	0	0%
	Total	330	100%
Number of pregnancy	0	20	6.1%
	1-5	166	50.3%
	6-10	131	39.7%
	11>	13	3.9%
	Total	330	100%
Number of children	1	17	5.2%
	2	34	10.3%
	3	48	14.4%
	4	69	20.9%
	Others	162	49.1%
	Total	330	100%

Majority of the respondents 145 (43.9%) are house wife's, followed by traders which constitute 94 (28.5%), 60 (18.2%) are civil servants, while the least constitute of 31 (10.9%) which are others. Most of the respondents 115 (34.8%) attained secondary level of education, followed by 95 (34.8%) who attained secondary education and the least 36 (10.9%) who primary level of education. Majority of the respondents 166 (50.3%) had 1-5 pregnancies, followed by 131 (39.7%) who had 6-10 pregnancies and the least 13 (3.9%) who had 11 and above pregnancies. Most of the respondents 162 (49.1%) have other number of children, followed by 69 (20.9%) have four children and the least 17 (5.2%) have one child.

Table 4.2 SHOWING DATA ON KNOWLEDGE OF FAMILY PLANNING

		FREQUENCY	PERCENTAGE
Have you heard of family planning?	Yes	310	93.9%
	No	20	6.1%
	Total	330	100%
If yes, what do you understand by family planning		20	6.1%
	Spacing	238	72.1%
	Prevention	56	17.0%
	Termination	16	4.8%
	Total	330	100.0%
What was your source of information		20	6.1%
	Friends	59	17.9%
	Health personnel	209	63.3%
	Media	42	12.7%
	Husband	0	0%

	Total	330	100.0%
What method of family planning do you know?		7	2.1%
	Traditional	32	9.7%
	Modern	115	47.0%
	Both	120	36.4%
	None	16	4.8%
What type of traditional method do you know?		183	55.5%
	Amulet / laya	68	20.6%
	Scarification mark	42	12.7%
	Sparrow feather	37	11.3%
	Total	330	100.0%
What type of modern method do you know?		51	15.5%
	Abstinence	31	9.4%
	Condom	67	20.3%
	Pills	139	42.1%
	Sterilization	39	11.8%
	Others	3	.9%
	total	330	100%

310 (93.9%) of the respondents have heard of family planning while 20 (6.1%) have not. 238 (72.1%) of the respondent understand family planning to be spacing of children, 56 (17.0%) understand it to be prevention of pregnancy while 16 (4.8%) understand it to be termination of pregnancy. 209 (63.3%) of the respondents got their information from health personnel, 59 (17.9%) from their friends, 42 (12.7%) from the media while none got the information from their husbands. 155 (47.0%) of the respondents know modern method of family planning, 120 (36.4%) know both the modern and traditional method of family planning, 32 (9.7%) know the traditional method while 16 (4.8%) do not know any method of family planning. 68 (20.6%) of the respondents know the amulet type of traditional family planning, 42 (12.7%) know the scarification mark type of traditional family planning while 37 (11.2%) know the sparrow feather type of traditional family planning. 139 (42.1%) of the respondents know the pills type of modern family planning, 67 (20.3%) know condom, 39 (11.8%) know sterilization, while 31 (9.4%) know abstinence.

TABLE 4.3 SHOWING DATA ON USE OF FAMILY PLANNING

		Frequency	Percentage
Are you using any form of contraceptive?		13	3.9%
	Yes	119	36.1%
	No	178	53.9%
	Stopped	20	6.1%
If yes, what type do you use?		214	64.8%
	Oral pills	34	10.3%
	Diaphragm	0	.0%
	Injectable	8	2.4%
	Implants	7	2.1%
	Others	67	20.3%
If no why?		155	47.0%
	Husband disagree	23	7.0%
	My religion is against it	89	27.0%
	It is expensive	0	.0%
	I just don't want to	56	17.0%

If stopped why?	Others	7	2.1%
		310	93.9%
	It has failed me	0	.0%
	Because of the side effect	20	6.1%
	I want to get pregnant again	0	.0%
	It is expensive	0	.0%

Majority of the respondents 178 (53.9%) don't use any form of contraceptive, 119 (36.1%) use a form of contraceptive, while 20 (6.1%) have stopped using contraceptive. 67 (20.3%) use other types of contraceptive 34 (10.3%) use oral pills, 8 (2.4%) use injectable, 7 (2.1%) use implants while none use diaphragm. 89 (27.0%) of the respondents do not use any contraceptive because their religion is against it, 56 (17.0%) because they just don't want to, 23 (7.0%) because their husbands disagree while 7 (2.1%) don't use because of other reasons. Only 20 (6.1%) of the respondents stopped using contraceptive because of the side effects.

TABLE 4.4 FACTORS INFLUENCING THE USE OF FAMILY PLANNING

	Frequency Percentage	
Do you discuss family planning with your husband?	38	11.5%
Yes	161	48.8%
No	131	39.7%
Total	330	100.0%
Do you have family planning center in your area?	7	2.1%
Yes	313	94.8%
No	10	3.0%%
Total	330	100.0%
Is the family planning center from your home?	7	2.1%
Yes	116	35.2%
No	207	62.7%
Total	330	100%
Have you given information on the various method of family planning	55	16.7%
Yes	195	59.1%
No	80	24.2%
Total	330	100.0%
How much do you spend on each visit to the family planning center?	245	74.2%
<500	7	2.1%
>500	22	6.7%
1000	28	8.5%
>1000	28	8.5%
Total	330	100.0%

Majority of the respondents 161 (48.8%) discuss family planning with their husbands, while 131 (39.7%) of the respondents do not discuss family planning with their husbands. 313 (94.8%) of the respondents have family planning center in their area while 10 (3.0%) don't. family planning center is not from the homes of 207 (62.7%) of the

respondents while it is far from the homes of 116 (35.2%) of the respondents. 195 (59.1%) of the respondents have information on the various methods of family planning while 80 (24.2%) don't. 28 (8.5%) of the respondents spend 1000 and >1000 on each visit to family planning center, 22 (6.7%) spend >500 while 7 (2.1%) spend <500.

TABLE 4.5 SHOWING DATA ON METHODS OF FAMILY PLANNING USED

	Frequency	Percentage
what method of family planning do use	216	65.5%
IUCD	40	12.1%
Implants	7	2.1%
Condom	10	3.0%
Sterilization	3	.9%
Others	54	16.4%
Total	330	100.0%
why did you choose the method above	216	65.5%
it is less expensive	7	2.1%
it is more effective	44	13.3%
it is easy to use	46	13.9%
it has fewer side effect	17	5.2%
Total	330	100.0%
Who choose the method for you?	216	65.5%
health personnel	13	3.9%
Husband	26	7.9%
Myself	75	22.7%
Total	330	100.0%
Are you satisfied with the method chosen?	216	65.5%
Yes	86	26.1%
No	28	8.5%
Total	330	100.0%

54 (16.4%) of the respondents use other methods of family planning, 40 (12.1%) use IUCD, 10 (3.0%) use condoms while 7 (2.1%) use implants. 46 (13.9%) use the method because it is easy to use, 44 (13.3%) because it is more effective, 17 (5.2%) because it has fewer side effects while 7 (2.1%) because it is less effective. 75 (22.7%) choose the methods by themselves, 26 (7.9%) their husbands chose the methods for them while 13 (3.9%) health personnel chose it for them. 86 (26.1%) of the respondents are satisfied with the method used while 28 (8.3%) of the respondents are not satisfied.

DISCUSSION

The findings of this study shows that majority 310 (93.9%) of the respondents are knowledgeable about family planning while 20 (6.1%) are not, which is comparable with a study which shows that Majority of the respondents were knowledgeable of family planning [10], the findings of this study also shows that Majority 155 (47.0%) of the respondents know modern method of family planning especially the oral pills method, only 20.3% know of condom which is in contrast with the findings of a study which shows that 46% of the respondent are knowledgeable about the non-prescribed method most especially condom [11]. This is also comparable with a study which shows that MAJORITY (75%) of women know at least one modern contraceptive method [12].

The findings of this study shows that Majority of the respondents 178 (53.9%) don't use any form of contraceptive, which is comparable with a study which shows that In Africa, only 25% of married women are reported using contraception. this study shows that majority (27.0%) of the respondents do not use any contraceptive because their religion is against it, which is in line with a report which says about 40% of women reported they would not use contraception because they were morally opposed to it, any cited a strong conviction that children are gifts from God and engaging in family planning is a denial of his divine plan for individuals to procreate [14,15] The findings of this study shows that only 3.3% unmarried adolescents use a form of contraceptive which is in contrast with findings which says that Current use of contraceptive is highest among sexually active unmarried [16, 17].

Majority of the respondents 161 (48.8%) discuss family planning with their husbands, while 131 (39.7%) of the respondents don't discuss family planning with their husbands in which 87.5% of those who discuss with their husbands are allowed to while 12.5% of those who discuss with their husbands are not allowed to use family planning. This is in line with a study that reported a huge difference in contraceptive use between women who discuss with their husbands about family planning compared to their counter-part who did not. Among the women who discussed family planning with their husband, about 1/5th of them were allowed to use contraception whereas among their counter-parts, not even 1/10th of them are using contraception. Kamla-Raj (2019). This study shows that majority of the respondents 115 (34.8%) attained secondary level of education which is comparable with a study that identified a factor that shapes the attitude of people about family planning to be due to their level of education. They say the education is the strongest predictor of men's attitude towards family planning. A better educated and well informed man is more likely to accept family planning than a half educated utile rate man [18, 19].

The findings of this study shows that majority 54 (16.4%) of the respondents use other methods of family planning which constitute mostly of lactational amenorrhea, 40 (12.1%) use IUCD, 10 (3.0%) use condoms while 7 (2.1%) use implants which is in contrast with a study which stated that the three most popular methods among married women are female sterilization, IUD, and the pill with prevalence level of 21%, 14% and 7% respectively [20, 21]. This study also shows that majority 46 (13.9%) use the method because it is easy to use, which is in contrast to a study which stated that the most commonly used modern method is considered more effective at preventing pregnancy and require access to family planning services [22].

CONCLUSION

In essence, the research work was successfully researched to meet the objectives set at the beginning of the dissertation work. While one cannot completely rule out one form of limitation or the other, it was a success to a greater extent. On the whole, the research has been a worthwhile exercise. It has afforded the researcher the opportunity to really appraise the situation on the ground and allow one to bring out areas that might need attention for the improvement of the research work.

The findings show that majority of women of reproductive age in Umuahia North Local Government Area have at least secondary school education indicating the lack of use of family planning, especially among those with no formal education. The knowledge of family planning was generally good with the major determinant being obtaining information from health personnel. The use was generally poor with major determinants being that the respondents believe that their religion is against it.

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