



The Determinants of the Utilization of Modern Contraceptives among Married Women in Dala Local Government, Kano State

Umar Yunusa, Hafsat Hussaini, Umar Lawal Bello, Ruqayya Hamza,
Binta Mansur Yola, Idris Abdulrashid, Ahmed Suberu
Department of Nursing Sciences, Bayero University Kano, Nigeria

Correspondent Author: Umar Yunusa,
Correspondent Email: uyunusa.nur@buk.edu.ng

Abstract

High fertility rate is a major factor responsible for infant, child and maternal mortality in the developing world. The study aims to assess the determinants of the utilization of modern contraceptives among married women in Dala local government, Kano state. A descriptive cross sectional design was used for the study. An interviewer-administered questionnaire was utilized to collect data from 200 eligible respondents that were randomly selected using a multistage sampling technique from the study setting. Collected data were entered into SPSS version 20 and analyzed using descriptive statistics. Findings from the study revealed that one-third of the respondents (33%) are using a modern method of contraceptive as at the time of conducting the study while close to half (49%) have never used any method of modern contraceptive. Major factors associated with the utilization of modern contraceptive include husband's decision, adequate knowledge of the contraceptive method and ability of contraceptive methods to promote and maintain a healthy life. On the other hand, fear of side effects, lack of knowledge about modern contraceptive, cultural and religious misconceptions on modern contraceptive methods, the desire to have many children and the difficulty to conceive are the major factors hindering the utilization of modern contraceptive methods. Increasing the level of awareness on the methods, increased availability and access to modern contraceptives and the proper management of their side effects are measures that can help in improving use. In conclusion, the majority of the respondents are currently not using modern contraceptives at the time of conducting the study. It is therefore recommended that government, health care workers and other stakeholders adopt more rigorous strategies of public enlightenment on the importance of using modern contraceptive methods.

Keywords: *Determinants, Utilization, Modern, Contraceptive, Women*

1.0 Introduction

Utilization of modern contraception is on the increase globally and in Africa (World Health Organization WHO, 2018). Modern Contraceptive Prevalence Rate (mCPR) increased from 54% in 1990 to 57.4% in 2015 across the world (WHO, 2018) while it increased from 23.6% to 28.5% in Africa. In

Nigeria, mCPR increased from 10% in 2013 to 12% in 2018 (National Population Commission NPC, 2019). On the other hand, the mCPR in Kano state by NPC (2019) and Center for Research Evaluation, Resources and Development CRERD (2019) is 5.6% and 7.8% respectively which is less than the national mCPR.

The target of Sustainable Development Goal SDG 3.1 is to reduce the global maternal mortality ratio (MMR) to less than 70 per 100,000 live births by 2030. In Nigeria, the 2018 NDHS survey revealed that MMR is 556 per 100,000 live births. This is likely related to the high rate of five children per woman (4.5 in urban areas and 5.9 in rural areas) and 6.5 children per woman in Kano State (NPC, 2019). As modern contraceptive methods have become more widely available throughout the world, infant mortality has decreased from approximately 150 deaths per 1000 live births in the 1950s to 80 deaths per 1000 live births in 1990s. According to population action International, infant mortality in developing countries could be decreased by one third by increasing the spacing between births 2-4 years (Frey & Field, 2000). The health status of infants and children is also improved as a result of effective contraception. Modern contraception helps by reducing unintended pregnancies, abortions, and facilitating spacing of births, effective contraception provides both health and social benefits to mothers and their children. Contraceptive usage is a central part of the quality of care in the provision of family services (Khadijeh, Suet, Suziana & Aliyar, 2017).

Modern contraceptives use is therefore a cost-effective and important public health intervention to reduce maternal mortality and prevent unwanted pregnancies (Beson, Appiah & Adomah, 2018). It is estimated that the number of maternal deaths would decrease by 30% in developing countries if all women who wish to avoid pregnancy use an effective contraceptive method (Fateme, Sharifah, Hejar, Muhammad, & Rosliza, 2013). Modern contraceptives methods currently used include the oral pill, injectable, condoms, intrauterine device, sterilization and norplant (Ajuang, 2014). Factors associated with modern contraceptive use among young people include; socioeconomic, cultural and physical norms. Male involvements in using modern contraceptives enable them to take care of reproductive issues as well as maternal and neonatal care (Gray & Kinnear, 2012). The

rate of utilization of contraceptives among women is affected by both demand and supply. Demand factors include cultural or religious perceptions about contraceptive use as well as the ability to access health services. On the other hand, supply factors include types of contraceptive methods, provision of a trusting interaction between patient and health provider, knowledgeable explanation of types of contraceptive methods available (Eugenie, 2016). Other factors include the desire to have children after, distance to the health facility, listening to the radio and geographical differences (John & Derrick, 2017).

The low rate of modern contraceptive use in Kano State (NPC, 2019) makes women in the setting at higher risks of maternal mortality. There is a dearth of empirical evidence on the reason for the consistently low rate of modern contraceptive use in Kano state despite increased public enlightenment. This study was therefore conducted to assess the determinants of utilization of modern contraceptive in Dala community of Kano state.

2.0. Methodology

A descriptive cross-sectional design was used in the study. The target population for the study are mainly married women (15-49 years) living in Dala local government area of Kano State.

2.1 Sample Size and sampling technique

The sample size was determined using Cochran's sample size formula (1963)

$$n = \frac{Z^2 pq}{e^2}$$

Where; n= sample size for the study. Z= 1.96 (Z score corresponding to 95% confidence interval), P= proportion of currently married women that are using a modern method of contraception in Kaduna State based on Nigerian Demographic Health Survey NDHS 2018 (NPC, 2019) =13.7%. e= margin of error (5%). q=complimentary probability i.e. 1-p

$$n = \frac{(1.96)^2 \times 0.137 \times 0.863}{(0.05)^2}$$

n = 181.67 this was Approximated to 182

Therefore, the minimum sample size for the study is 182 and 10% to compensate for

incomplete responses. Hence a sample size was increased to 200 women.

A multi-stage sampling technique was used and the data was collected in three stages. At the first stage, one ward was selected out of 12 wards of the Dala Local Government (i.e. Gobirawa ward). At the second stage, Gobirawa ward was further stratified into four (4) districts which are (Kurna, Tudunbojuwa, Tudun Fulani & Dandishe). Two streets were selected from each of the districts. At the third stage, 25 respondents were recruited using systematic sampling to participate in the study from each of the streets making a total of 200 respondents for the 8 streets.

2.2 Instrument of Study

A structured and validated Interviewer Administered Questionnaire (IAQ) was used for the study. The instrument consists of questions carefully structured to elicit appropriate responses on 4 thematic areas as follows; socio-demographic data of the respondents, the proportion of married women utilizing modern contraceptive methods, factors associated with utilization of modern contraceptive method and measures for improving the utilization of modern contraceptive among married women in Dala LGA of Kano State.

2.4. Data Analysis

All statistical data were entered in the Statistical Package for Social Sciences (SPSS) version 20.0 and analyzed using descriptive statistics by presenting results in simple frequency tables and percentages. The proportion of women using the modern contraceptive method was presented in a Pie

Chart. Mean and standard deviation of items in the Likert scale were computed.

2.4. Ethical consideration

Ethical clearance to conduct the study was sought from the Human Research Ethics Committee HREC, Kano state ministry of health and approval was received with reference number MOH/Off/797/T.I/1384.

3.0 Results

A total of 200 questionnaires were successfully completed and analyzed (100% response rate). Findings from the study as revealed in Table 3.1 showed that more than half of the respondents (56.5%) are between the ages of 25 and 34 years. The mean age of the respondents is 28.9 ± 1.1 . More than half of the respondents (56%) had less than 5 children. Majority of the respondents (92%) are of Hausa ethnic group. Table 3.1 further revealed that close to one-third of the respondents (32%) had tertiary education and less than one-third of the respondents (30.5%) are engaged in vocational occupations.

Figure 3.1 showed that only one-third of respondents (33%) are using a modern contraceptive method. The study further revealed that about half of the respondents (49%) have never used any method of contraception. Findings, as indicated by Table 3.2, shows that the most common methods of contraceptives used by the respondents who reported that they are currently using a method of modern contraceptive include; implannon (51.9%), Depo-Provera (23.6%), Noristerat (8.8%) and male condom (8.8%).

Table 3.1 Distribution of Respondents by Socio-Demographic Characteristics (N=200)

Socio-demographic Characteristic	Frequency (n)	Percentage (%)
Age (Years)		
15-24	53	26.5
25-34	113	56.5
35-49	34	17.0
Mean age 28.9 ± 1.1		
Parity		
0-4	112	56.0
5-9	74	37.0
10 and above	14	7.0
Ethnic group		
Hausa	184	92.0
Fulani	11	5.5
Yoruba	5	2.5
Educational Qualification		
No formal	47	23.5
Primary	23	11.5
Secondary	66	33.0
Tertiary	64	32.0
Occupation		
Unemployed	55	27.0
Petty trading/business	37	18.5
Artisanship/vocation	61	30.5
Civil servant	48	24.0

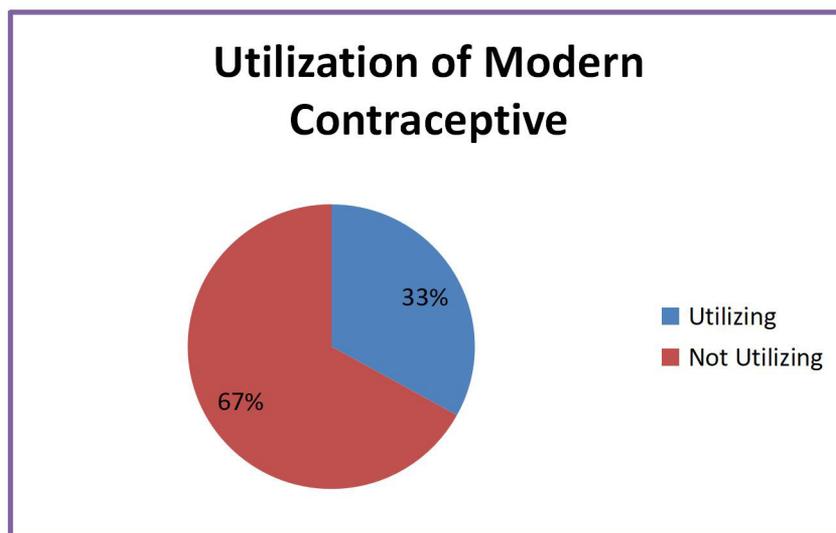


Fig. 3.1 Utilization of Modern Contraceptives

Table 3.2 *Distribution of Respondents by the Method of Contraceptive Used (N=102)*

METHOD	N	%
Implanon	53	51.9
Depo-provera	24	23.6
Noristherat	9	8.8
Male condom	9	8.8
Jadelle	6	5.8
Lydia	5	4.9
Microgynon	5	4.9
IUCD	4	3.9
Tubal ligation	4	3.9
Excluton	3	2.9
Female condom	1	1

Table 3.3 reveals that the factors that influence women to use modern contraceptives include husband’s decision, adequate knowledge of contraceptive method, the ability of contraceptive methods to promote and maintain healthy life and wellbeing, the adequate upbringing of children and having a high level of education. Table 3.4 shows that factors that hinder women to utilize modern contraceptive methods include fear of side effects, lack of knowledge about modern contraceptive, cultural and religious misconception on modern contraceptive methods, desire to have many children and difficulty to conceive. Other factors responsible for hindering

women from using modern contraceptive methods include the inadequate supply of contraceptive method and unskillful health care providers. In order to improve the utilization of modern contraceptive methods, the following suggestions were made by respondents as indicated in Table 3.5, increase the level of awareness on the modern contraceptive methods, increase availability and access to the modern method of contraceptive and proper management of side effects of modern contraceptives. Other strategies include involvement of husbands in awareness creation and health education on the benefits of the modern contraceptive.

Table 3.3 *Distribution of Respondents by Factors Associated with Utilization of Modern Contraceptives (N=200, DR=3) Decision Mean 3.0, Aggregate Mean = 3.7*
(SA= Strongly Agree, A= Agree, SD= Strongly Disagree, D= Disagree, U= Undecided)

Factors associated with utilization of modern contraceptive	SA	A	U	D	SD	Mean
Promote and maintain healthy life	75	85	23	12	5	4.1
Husband’s decision	54	86	39	12	9	3.8
Adequate explanation on method	70	60	46	17	7	3.8
Proximity to source of method	67	50	57	16	10	3.7
Spacing between children	59	82	40	11	8	3.9
Desire of having few children	53	80	33	18	16	3.7
Adequate upbringing of children	45	83	36	25	11	3.6
High level of education	54	55	45	26	20	3.5
knowledge about method	66	61	29	22	22	3.6

Table 3.4 Distribution of Respondents by Factors That Hinders Women from Utilization of Modern Contraceptives (N=200, DR=3) Decision Mean 3.0, Aggregate Mean = 3.7) (SA= Strongly Agree, A= Agree, SD= Strongly Disagree, D= Disagree, U= Undecided)

Factors associated with utilization of modern contraceptive	SA	A	U	D	SD	Mean
Inadequate supply of methods	58	50	43	18	31	3.4
Lack of knowledge about contraceptive	55	60	46	21	18	3.9
Cultural misconception on contraceptive	65	63	41	19	12	3.8
Religious misconception on contraceptive	72	46	36	24	22	3.6
Difficulty to conceive	59	43	48	19	31	3.4
Lack of explanation on methods	54	64	44	26	12	3.6
Unskillful health care provider	48	62	49	26	15	3.5
Fear of side effects	52	87	29	16	16	3.7
High cost of modern contraceptive	36	70	53	30	11	3.5
Interest of having many children	58	75	36	21	10	3.8
Low level of education	47	70	47	23	13	3.6
Husband and husband family refusal	47	75	40	25	13	3.6

Table 3.5 Distribution of Respondents by Measures for Improving Utilization of Modern Contraceptives (N=200, DR=3) Decision Mean 3.0, Aggregate Mean = 3.7) (SA= Strongly Agree, A= Agree, SD= Strongly Disagree, D= Disagree, U= Undecided)

Factors associated with utilization of modern contraceptive	SA	A	U	D	SD	Mean
Increase awareness on methods	77	68	22	10	23	3.8
Increase availability and access	57	79	34	15	15	3.7
Free contraceptive methods	66	66	38	20	10	3.8
Increase husband involvement	54	62	46	23	15	3.6
Proper management of the side effects	57	73	36	22	12	3.7
Health education	61	65	36	23	15	3.7
Sensitization of the public on	56	58	30	26	30	3.4

4. Discussion

The study was conducted to assess the determinants of utilization of modern contraceptives among women in Dala local government area, Kano State. Findings from the study revealed that more than half of the respondents are between the ages of 25 and 34 years with an average age of 28.9 ± 1.1 . This is likely because the age range comprises of women that are in their active reproductive age. More than half of the respondents have less than 5 children and the majority of the respondents are of Hausa ethnic group. These findings are similar to that of the study

conducted in Calabar by Njoki, Emechebe, Ekabua, and Abeshi (2014) which shows that majority of the respondents (70%) are between the ages of 25 and 35. In addition, more than half of the respondents (57%) in the Calabar study are multiparous. On the contrary, the study reveals that two-thirds of respondents in the Calabar study are Igbos. The difference in ethnicity is mainly because of the difference in geographical location predominated with a population of a specific ethnic group. Findings further revealed that only about one-third of the respondents had tertiary education and less than one-third of

the respondents are engaged in vocational occupations. The high proportion of people with educational qualification below secondary school explains why the majority of the respondents are engaged in a non-formal occupation such as artisanship and petty trading.

Findings from this study revealed that only one-third of respondents are using a modern contraceptive method. The study further revealed that about half of the respondents have never used any method of contraception. This is higher than findings of NDHS by NPC (2019) which showed that only 12% of women are a contraceptive method. The wide variation is likely because of study population demographics. The current study used married women who are all urban residents,, unlike the NDHS which took into cognizance all categories of women from both rural and urban settings. Findings from this study are lower than that of a global report by the World Health Organization in 2015 where it was reported that 57.4% of reproductive women are using modern contraceptives (WHO, 2018). The findings are however higher than that of the study conducted by Darroch, Gilda and Haley (2011) which found that only 17% of sexually active women that participated in the study reported that they aren't using the modern method of contraception.

On the factors associated with the utilization of modern contraceptives, findings from the study reveal that the factors that influence women to use modern contraceptives include having adequate knowledge of contraceptive methods, understanding the ability of contraceptive methods to promote and maintain healthy life and wellbeing, supporting adequate upbringing of children, having a high level of education and husband's decision to allow wives use a contraceptive method. This is in line with findings of the study conducted by Gray and Kinnear (2012) which reveals that male involvements in using modern contraceptives

enable them to take care of reproductive issues as well as maternal and neonatal care. The study further reveals that factors that hinder women to utilize modern contraceptive methods include fear of side effects, lack of knowledge about modern contraceptive, cultural and religious misconception on modern contraceptive methods, desire to have many children and difficulty to conceive. Other factors responsible for hindering women from using modern contraceptive methods include the inadequate supply of contraceptive method and unskillful health care providers. In order to improve the utilization of modern contraceptive methods, respondents suggest increase level of awareness on the modern contraceptive methods, increase availability and access to the modern method of contraceptive and proper management of side effects of modern contraceptives.

Other strategies include involvement of husbands in awareness creation and health education on the benefits of the modern contraceptive. These findings are similar to that of the study conducted by Eugenie (2016) which revealed demand and supply factors associated with the use of modern contraceptive methods. Demand factors include cultural or religious perceptions about contraceptive use as well as the ability to access health services. On the other hand, supply factors include types of contraceptive methods, provision of a trusting interaction between patient and health provider, knowledgeable explanation of types of contraceptive methods available (Eugenie, 2016). Findings from the study are also similar to that of the study conducted by John and Derrick (2017) which reveals the desire to have children after, distance to the health facility, listening to the radio and geographical differences as factors associated with the increased use of modern contraceptive methods

5. Conclusion

The study concluded that the majority of the respondents are currently not using modern

contraceptives. Cultural and religious misconception, the desire of having many children and also, husband and husband family refusal are the main reasons implicated in hindering women in the study area from using modern contraceptives. In order to improve the utilization of modern contraceptive methods, the study suggests increasing public enlightenment on the modern contraceptive methods, increase availability and access to the modern method of contraceptive and proper management of side effects associated with its use.

6.Recommendation

Based on findings from the study, it is therefore recommended that;

- There should be orientation and re-orientation of the general public in order to clear the misconceptions about modern contraceptive methods.
- The process of public enlightenment should include men, community and religious leaders in order to encourage acceptance of the larger public.
- Government, health care workers and other stakeholders adopt more rigorous strategies of public enlightenment on the importance of using modern contraceptive methods.
- Government and donor agencies should ensure the availability of different methods of modern contraceptive which should be accessible to women who require it at free or subsidized rates.

Conflict of Interest

There is no conflict of interest amongst the Authors relating to any part of this study.

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