



## UTILIZATION OF CONTRACEPTIVES AMONG FEMALE SENIOR SECONDARY SCHOOL STUDENTS IN ANDONI LGA OF RIVERS STATE

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**ABSTRACT:** *This study investigated the utilization of contraceptives among female senior secondary school students in Andoni LGA of Rivers State. A descriptive survey design was adopted as the research design for this study. The population of the study comprised of one thousand, three hundred and nineteen (1319) female senior secondary school students in Andoni Local Government Area of Rivers State. A multi-stage sampling technique was adopted to select a sample of 496 for the study. The instrument for data collection was a structured questionnaire with a reliability coefficient of 0.85. Data analysis was using statistical tools such as percentage, regression and chi-square. The findings of the study showed that the level of utilization of contraceptives among the respondents was 51.8%. The methods of contraceptives used include condom 105(42.2%), oral contraceptive pills 82(32.9%), withdrawal 39(15.7%), and intra uterine contraceptive device 23(9.2%). Age was found to have statistically significant relationship with utilization of contraceptives whereas religion and parents' occupation were not. It was concluded that female senior secondary school students in Andoni LGA only had an average level of contraceptive utilization. Therefore, the Planned Parenthood Federation of Nigerian should consider the rural areas particularly adolescents in their effort to increase contraceptive utilization by supplying free contraceptives to the rural areas time, youth friendly centres in and set up LGA this may help to fill the gap in utilization.*

**KEYWORDS:** Contraceptives, Utilization, Female, Secondary School Students, Religion, Age, Parents' Occupation

### INTRODUCTION

Contraceptive utilization is the best option provided for any sexually active individual who is concerned about the risk of pregnancy. Contraceptive refers to a product or medical procedure used to prevent unwanted pregnancy. According to Dray (2012), contraceptive offers the chance to prevent pregnancy after unprotected sexual intercourse by acting as a physical barrier, preventing ovulation or changing the cervical mucus and uterine lining. The commonest type of contraceptive used among adolescents is the male condom which often tear accidentally during sexual intercourse or if the wrong size is used. There have been efforts in Nigeria to promote the use of contraceptives, but with the 14.1% contraceptive prevalence, this reveals that there is a low level of contraceptive utilization even among senior secondary school students necessitating enquiring into factors that could explain the trend



(Chimah, Lawoyin, Ilika&Nnebue, 2016). Senior Secondary school students are within the adolescent ages of 13 – 19 years. During this time their body experiences physical, psychological, emotional and social changes. Adolescence is the end of childhood and the beginning of a transitional period in which the growing person is neither a child nor an adult. It is a period when there are a lot of changes in feeling, emotion, psychology and attitudes towards the opposite sex. The sexual activities are often unplanned among senior secondary school students which usually lead to unintended pregnancies and sexually transmitted diseases.

It has been observed that young women make use of contraceptives than older women because they want to prevent pregnancies and sexually transmitted infections. This may be very true because most of them are yet to get married and relationships undefined when compared to older women who are married and are ready to start having children. Considerable increase of contraceptive use from age of 25 to 44 years indicated that the majority of women are either spacing their pregnancy or have reached their desired number of children and therefore chose to avoid pregnancy by using modern contraceptive methods (Osmani, Reyer, Osmani&Hamajima, 2015). On the other hand, religion which is perceived as one of the strongest sources and a means of social control is described by Durkheim in Lukes (2012) as a unified system of beliefs and practice relative to sacred things, which unite in one simple moral community all those who adhere to it. Some religious groups/sects abhor sex education to be taught or preached in the worship centers. Thus, these religious sects debar the utilization of contraceptives among adolescents with the idea that it promotes immorality among them. Also, contraceptive use could be influenced by adolescents' parents' occupation. As opined by Ifeadike, Eze, Ugwoke and Nnaji (2015), those whose parents are of low occupation such as petty trading, farming and fishing may find it difficult to practice family planning method and have inadequate access to contraceptive because they are unable to afford the contraceptives. This increasing number of adolescent pregnancy and school dropouts prompted the need to assess the utilization of contraceptives by female senior secondary school students in Andoni L.G.A.

### **Statement of the Problem**

It has been observed that pregnancy among senior secondary school students, maternal mortality rate, premarital childbirth and sexually transmitted diseases including HIV is rising in Nigeria in spite of interventions by both private and public agencies aimed at providing youth-friendly centers in public and private hospitals where adolescents can obtain contraceptive services. This is due largely to the low contraceptive utilization among youths. The National Demographic Health Survey (2010) reveals that 90% of adolescent women aged 14-20 years in Nigeria have no access to contraceptives, 85% of the women aged 21-30 years cannot access contraceptives and 87% of adolescent women do not use contraceptive. The inadequate contraceptives coverage is multifaceted. The cultural, religious and family diversity of Nigeria makes the utilization of contraceptive a menace among senior secondary school students in recent times. This work is therefore focused on the utilization of contraceptives among senior secondary school students in Andoni LGA, Rivers State.

### **Research Questions**

What is the level of utilizations of contraceptives on female senior secondary school students in Andoni LGA of Rivers State?



## Hypotheses

The following hypotheses were tested at 0.05 alpha level:

1. There is no significant relationship between age and utilization of contraceptive among female senior secondary school in Andoni LGA of Rivers State.
2. There is no significant relationship between religion and utilization of contraceptive among female secondary school students in Andoni LGA of Rivers State.
3. There is no significant relationship between parents' occupation and utilization of contraceptive among female secondary school students in Andoni LGA of Rivers State.

## METHODOLOGY

**Research Design:** The research design adopted in the study was a descriptive cross-sectional research study.

**Population for the Study:** The population for the study consisted of 1,319 female senior secondary school students in Andoni Local Government Area of Rivers State.

**Sample and Sampling Techniques:** The sample size for this study was 496 which was determined using the Taro-Yamane formula on 95% confidence interval and 5% margin of error. Multistage sampling techniques was used to select the respondents for the study. The first stage involved simple random sampling technique to select eight (8) secondary schools from the existing (12) schools in the L.G.A. Second stage involved selecting sixty-two (62) students using proportionate stratified random sampling techniques.

**Instrument for Data Collection:** The instrument for data collection was a structured questionnaire titled utilization of contraceptives questionnaire (UCQ). The questionnaire consisted of section A and B. Section A consisted of demographic data of respondent, such as age, class, religion and parents' occupation. Section B was focused on the utilization of contraceptive.

**Validity of the Instrument:** The face and content validity of the questionnaire was not carried out because it is a standardized instrument.

**Reliability:** Reliability of Instrument not tested because was adopted from the University of Many Washington Student Health Centre, Virginia with reliability co-efficient of 0.85.

**Method of Data Collection:** Data collection was done by a face-to-face delivery of the questionnaire to the respondents. The content of the questionnaire was explained including the instructions for answering the questions. The respondents were given option to accept or decline, those who accepted to answer the questions were administered the questionnaires. The completely filled ones were retrieved immediately.

**Method of Data Analysis:** The analysis was done using computer software called Statistical Package for Social Science (SPSS) version 23.0. for data entry and analysis. Percentage was



used to answer research question 1, Hypotheses 1 was tested with the logistic regression while hypothesis 2 and 3 were tested with the Chi-square test at 0.05 alpha level.

## RESULTS

The results of the study are presented in Tables 1 to 4 below:

**Table 1: Level of utilization of contraceptives among female senior secondary school students in Andoni**

Items	Frequency (F)	Percentage (%)
<b>Utilization of Contraceptive</b>		
Yes	249	51.8
No	232	48.2
<b>Total</b>	<b>481</b>	<b>100.0</b>
<b>Contraceptive method used</b>		
Condom	105	42.2
Oral contraceptive pill	82	32.9
Withdrawal	39	15.7
Intra uterine contraceptive device	23	9.2
<b>Total</b>	<b>249</b>	<b>100</b>
<b>How often respondents used contraceptives</b>		
Always	115	46.2
Often	63	25.3
Sometimes	47	18.9
Occasionally	24	9.6
<b>Total</b>	<b>249</b>	<b>100</b>

Table 1 shows the level of utilization of contraceptives among female senior secondary school students in Andoni. The result shows that the level of utilization of contraceptives among the respondents was 51.8%. The methods of contraceptives used include condom 105(42.2%), oral contraceptive pills 82(32.9%), withdrawal 39(15.7%), and intra uterine contraceptive device 23(9.2%).

**Table 2: Regression analysis showing the relationship between age and utilization of contraceptive**

Model	R	R square	Adjusted R Square	P	B	Decision
	0.015	0.003	-.002	0.000	1.452	Significant

Table 2 shows regression analysis on the relationship between age and utilization of contraceptive among female senior secondary school in Andoni. The result of the study shows a significant low positive relationship between age and utilization of contraceptive ( $r = 0.015$ ;  $p < 0.05$ ). The result further showed that as age increases utilization of contraceptive



increases ( $B = 1.452$ ). Therefore, the null hypothesis which states that there is no significant relationship between age and utilization of contraceptive among female senior secondary school in Andoni LGA was rejected.

**Table 3: Summary of Chi-square test showing relationship between religion and utilization of contraceptive among female senior secondary school students**

Religion	Utilization of contraception		Total	df	X <sup>2</sup> -value	p-value	Decision
	Yes F(%)	No F(%)					
Christianity	233(51.6)	218(48.3)	451(100)	2	.505	.777	H <sub>0</sub> accepted
Islam	6(46.2)	7(53.8)	13(100)				
Traditional	10(58.8)	7(41.2)	17(100)				
<b>Total</b>	<b>249(51.8)</b>	<b>232(48.2)</b>	<b>481(100)</b>				

*\*Not Significant*

Table 3 shows Chi-square test of the relationship between religion and utilization of contraceptive among female senior secondary school in Andoni. The result of the study shows a non-significant relationship between religion and utilization of contraceptives ( $X^2$ -value = .505; df = 1;  $p > 0.05$ ). Thus, the null hypothesis which states that there is no significant relationship between religion and utilization of contraceptive among female senior secondary school in Andoni LGA was accepted.

**Table 4: Summary of Chi-square test showing relationship between parents' occupation and utilization of contraceptive among female senior secondary school students**

Parents' occupation	Utilization of contraception		Total	df	X <sup>2</sup> -value	p-value	Decision
	Yes F(%)	No F(%)					
Civil servant	105(52.5)	95(47.5)	200(100)	3	3.647	.456	H <sub>0</sub> accepted
Business	61(49.6)	62(50.4)	123(100)				
Fishing	34(45.3)	41(54.7)	75(100)				
Trading	44(60.3)	29(39.7)	73(100)				
<b>Total</b>	<b>249(51.8)</b>	<b>232(48.2)</b>	<b>481(100)</b>				

*\*Not Significant*

Table 4 shows the Chi-square test of the relationship between parents' occupation and utilization of contraceptive among female senior secondary school in Andoni. The result of the study shows a non-significant relationship between parents' occupation and utilization of contraceptive ( $X^2$ -value = 3.647; df = 3;  $p > 0.05$ ). Thus, the null hypothesis which states that there is no significant relationship between parents' occupation and utilization of contraceptive among female senior secondary school in Andoni LGA was accepted.



## DISCUSSION OF FINDINGS

The finding of this in Table 1 shows that the level of utilization of contraceptives among the respondents was 51.8%. The finding of this study is similar to that of Lengelar and Simon (2013) where the contraceptive utilization level was in a close range. This similarity in the characteristics of the respondents might be implicated for the similarity found in the two studies as they were both carried out among students who are majorly adolescents. This finding is different from that of the Kenya Demographic Health Survey (2018) which reported a contraceptive utilization rate of 25% for sexually active adolescents aged 15-19 years. The most commonly used methods of contraceptives among the students was condom 105(42.2%), oral contraceptive pills 82(32.9%), withdrawal 39(15.7%), and intra uterine contraceptive device 23(9.2%). This however is in line with that of the Kenya Demographic Health Survey (2018) which showed that the most commonly used method among the adolescents was condom. This is not surprising because condom is easily accessible to the adolescents, they can go to any medicine shop and get it unlike other methods such as IUCD and implant that require insertion by medical practitioners in the hospital, which they may feel reluctant to access. Also, the high level of condom used among adolescents and the youths compared to other methods might be attributed to the intensive campaign for condom use by different governmental and non-governmental agencies during the HIV/AIDS surge which may have helped to increase its popularity and the subsequent use. The finding of this study is at variance with that of Khan, Hossain and Hoq (2012) which showed the utilization of contraceptives among respondents as low. The finding of this study is also at variance with that of Marrone, Abdul-Rahman, Coninck and Johansson (2014) which found the utilization of contraceptives to be low. The difference between the present study and the previous ones might be due to the fact that the present study was carried out among students whereas the previous ones were community based.

The result of the study shows a significant low positive relationship between age and utilization of contraceptive ( $c = 0.015$ ;  $p < 0.05$ ). The result further showed that as age increases utilization of contraceptive increases ( $B = 1.452$ ). This finding is anticipated because all the study respondents are adolescents who are growing to maturity and as such they are more exposed to sexual activities as they grow older and may need to use contraceptives to avoid unwanted pregnancies. The finding of this study is also in line with that of Yidana, Zibhin, Azongo & Abass (2015) who reported from a test of association between the age of respondents and their use of contraceptives that as the age of respondent increases, the likelihood of contraceptive use also increases and that respondents' age has a significant relationship with the use of contraceptives ( $P < 0.001$  and  $X^2 = 24.7$ ). The finding of this study is in keeping with that of Kana, Tagurum, Hassani, Afolanranmi, Ogbeyi, Difa, Amede and Chirdan (2016) which showed that one of the main determinants of contraceptive use was age ( $p < 0.05$ ). Also, this study is also in tandem with that of Sunnu, Adatara, Yaw-Opore, Anthony and Nyande (2016), which showed that age has a significant association with contraceptive usage ( $p < 0.05$ ). The finding of this study is in line with that of Mola, Pitangui, Barbosa, Almeida, Marinho de Sousa, Pio and Araujo (2016). Which showed that those who began having sex at young ages were less likely to use contraceptive, and tend to engage in higher risk sexual behaviors such as alcohol or drug use prior to sexual intercourse. The finding of this study is also in keeping with that of Olawole-Isaac, Oni, Oladosu, Amoo and





Adekola, (2017) which showed that there was a significant association between age ( $p < 0.001$ ) and compliance to family planning.

The finding of this study also shows that more Christians than those of other religion utilized contraceptives though, even a reasonable proportion of the respondents belonging to other religion also utilized contraceptives. The finding of this study may not be surprising because religion is often an important part of the cultural fabric of communities and, as such, can influence decision making, ideologies, moral and ethical behaviors. Religious beliefs on issues of fertility, contraceptive adoption, and abortion can differ greatly among different religious group. The finding of this study corroborates that of Jones and Dreweke (2011) which showed that contraceptive use was common among individuals of all religious denomination. The result of the tested hypothesis shows a non-significant relationship between religion and utilization of contraceptive ( $X^2$ -value = .505;  $df = 1$ ;  $p > 0.05$ ). This is in keeping with a research conducted by Meyer, Gold and Haggerty (2010) which showed that religiosity was not significantly associated with contraceptive use at last intercourse or planned contraceptive use. The finding of this study is not in consonance with that of Murigi (2012) which showed that religion has been found to influence adolescent's contraceptive and sexual activity with the result showing religion to be associated with less use of condoms and or hormonal methods. The finding of this study is also different from that of Agadjanian (2013) which shows how context-specific doctrines and concerns influence the relationship between religious beliefs and contraceptive use. This variation might be due to the variation in the study population and location. Also, a study has also established how religious doctrinal differences account for variations in fertility levels across denominations (Agadjaian&Yabiku, 2014). These studies illustrate the effect of religious beliefs and doctrinal practices on knowledge and utilization of contraceptive.

The result shows that there was a non-significant relationship between parents' occupation and utilization of contraceptive ( $X^2$ -value = 3.647;  $df = 3$ ;  $p > 0.05$ ). Though the relationship was not significant but the low relationship found can influence adolescents' decision on contraceptive use. This finding may not be unexpected because in many cases, the parents have to provide support for their adolescents to obtain the products. The occupation of an individual can determine his/her economic status and this can influence vast life issues including contraceptives. This finding can be explained with the assertion of Kimble (2014) that adolescents depend on their parents for food and shelter, since 95% of them are still living with their parents, utilization of contraceptives is a barrier for them as most of these young adults do not have resources of their own. The finding of this study is also in keeping with that of Beson, Apiah and Adomah-Afari (2018) which showed that economically disadvantaged women are generally unable to take responsibility for their own health choices. This is clear as it was found that use of contraceptive is higher among women with high income. Correspondingly, unintended pregnancy, implying low contraceptive use, is higher among low income women.

## CONCLUSION

Based on the finding of the study, it was concluded that the female senior secondary school students in Andoni LGA had low level of utilization of contraceptives which has a significant relationship with the age of the students.



## RECOMMENDATIONS

The following recommendations were made based on the findings of the study:

1. The Planned Parenthood Federation of Nigerian should consider the rural areas particularly adolescents by making effort to increase access to this may help to fill the gap in utilization.
2. The government should build youth friendly centres at the rural areas and employ mainly adolescents to manage such centres so that adolescents will feel comfortable accessing the contraceptives services in such centres.
3. Non-governmental health agencies committed to sustaining contraceptive use should incorporate religions leaders in their effort to promote contraceptive knowledge and utilization during their health campaign for contraception.
4. Government should closely monitor the accessibility of these free contraceptives in the different health centres in the country to encourage accountability and utilization modern contraceptive methods.

## REFERENCES

- Agadjanian, V. (2013). Religious Denomination, Religious involvement, and Modern Contraceptive Use in Southern Mozambique. *Studies in Family Planning*, 44 (3), 259-274.
- Agadjanian, V., &Yabiku, S.T. (2014). Religious Affiliation and Fertility in a Sub-Saharan Context: Dynamic and Lifetime. *Perspectives in Population Research and Policy Review*, 33 (5), 673-691.
- Besonj,P., Appiah, R. &Adomah-Afari, A. (2018). Modern Contraceptive Use among Reproductive-aged Women in Ghana: Prevalence, Predictors, and Policy Implication. *BMC Women's Health*, Retrieved from <https://bmcwomenshealth.biomedcentral.com/articles/10.1186/S12905-018-0649-2>.
- Chimah, U.C., Lawoyin, T. O., Ilika, A.L.&Nnebue, C.C. (2016). Contraceptive Knowledge and Practice among Senior Secondary School Students in Military Barracks in Nigeria. *Nigerian Journal of Clinical Practice*, 19(2), 182-188.
- Drays, S. (2012). Unplanned Pregnancy Statistics. Retrieved from <http://www.chow.com/about/4611925/unplanned-pregnancy>
- Jones, R.K. &Dreweke, J. (2011). *Countering Conventional Wisdom: New Evidence on Religion and Contraceptive Use*. New York:Guttmacher Institute.
- Kana, M. A., Tagurum, Y. O., Hassan, Z. I., Afolanranmi, T. O., Ogbeyi, G. O., Difa, J. A., Amede, P. &Chirdan, O. O. (2016). Prevalence and Determinants of Contraceptive Use in Rural Northeastern Nigeria: Results of a Mixed Qualitative and Quantitative Assessment. *Annals of Nigerian Medicine*, 10(1), 2-10.
- Khan, M.M., Hossain, M.E. &Hoq, M.N. (2012). Determinants of contraception use among adolescents in Bangladesh. *Asian Journal of Social Science* 8(12), 181-190.
- Lengelar, A.B., & Simon, H. (2013). Knowledge and Use of Contraceptives among Secondary School Girls in Dar es Salaam Tanzania. *Journal of Applied Pharmaceutical Science*, 3 (01), 66 -68.





- Lukes, S.(2012). Is Durkheim’s understanding of Religion Compatible with believing?, *Religion*, 42:1, 41 – 52, DOI:10. 1080/0048721 X . 2011.637312.
- Marrone, G., Abdul-Rahman, L., Coninck, Z. & Johansson, A. (2014). Predictors of Contraceptive use Among Female Adolescents in Ghana. *African Journal of Reproductive Health*, 18(1), 102-109.
- Meyer, J.L., Gold, M.A. & Haggerty, C.L. (2011). Advance Provision of Emergency Contraception among Adolescent and Young Adult Women: a systematic review of literature. *Journal ofPediatry and Adolescent Gynecology*, 24(1), 2-9.
- Mola, R., Pitangui, A.C.R., Barbosa, S.A., Almeida, L.S., Marinho de Sousa, M.R., Pio, W.P. & Araujo R.A. (2016). Condom Use and Alcohol Consumption in Adolescents and Youth. *Einstein (Sao Paulo)*, 14 (2), 143 – 151 doi:10.1590/5169-45082016A 03677.
- Murigi,M.W.(2012). Utilization of Contraceptives among Secondary School Adolescent Girls in Karuri, Kiambaa Sub-country, Kiamba Country. (Dissertation) Retrieved from <https://pdfs.semanticschoar.org>
- Olawole – Isaac, A., Oni, G.A., Oladosu, M., Amoo, E., Adekola, & Paul, O. (2017). Inter-spousal communication as a determinant of contraceptive use in Nigeria: A mixed method. Retrieved from <http://ijasos.ocerintjournals.org>.
- Osimen, G. U. Akinyemi, B., & Samuel, A.T. (2013). Ethnicity and Identity Crisis: Challenge to National Integration in Nigeria. *IOSR Journal of Humanities and Social Science* 16(4), 79-86, [www.Iosrjournals.Org](http://www.Iosrjournals.Org).
- Yidana, A., Ziblim, S., Azongo, T.B. & Abass, Y.I. (2015). Socio-cultural determinants of contraceptives use among adolescents in Northern Ghana. *Public Health Research*, 5(4), 83-89.