

Utilization of modern contraceptives among female traders in Jos South LGA of Plateau state, Nigeria

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Received: 30.08.12; Accepted: 24.10.12

ABSTRACT

Background: Contraceptive use is important to promoting women's health and protecting their rights. It has been shown to reduce maternal morbidity and mortality. **Aim:** The study aimed at determining the level of awareness, utilization, preferred methods of contraceptives and factors affecting contraceptive use among female traders of Jos south Local government area of Plateau state. **Materials and methods:** The study was a cross sectional descriptive study that was carried out among female traders within reproductive age group who were not pregnant and consented for the study. Data was generated using a semi-structured interviewer's administered questionnaire. **Result:** Two hundred and twelve women were interviewed, their ages ranged from 15-49 years with a mean age of 30 ± 3.72 . Majority (69.3%) were married. The level of awareness of modern contraceptives was high (93.4%) and the most popular contraceptive methods were male condom (95.5%), injectable (87.4%) and oral contraceptives pills (85.9%) while the unpopular methods were female condom (40.4%), cervical diaphragm (17.5%), cervical cap (12.1%) and spermicides (12.6%). The prevalence of modern contraceptive utilization was 51.9% while 102 (48.1%) were not using any form of contraceptives. Factors found to be associated with contraceptive use among the female traders included marital status ($p < 0.0001$), religion ($p < 0.0001$), education ($p = 0.048$) and parity ($p = 0.0003$). **Conclusion:** The use of modern contraceptives has remained low despite the high level of awareness of the modern contraceptives among the female traders. Health education on the importance of the use of modern contraceptives should be given to female traders to encourage the use among them.

Key words: Modern contraceptive, awareness, utilization, female, traders

INTRODUCTION

Although the use of modern contraceptives is an important factor in controlling fertility

through prevention of unintended and unwanted pregnancies, contraceptive use is still very low in Sub-Saharan Africa (SSA), where the levels of fertility and unmet need for family planning is high.^[1] Evidence from the recent Nigeria demographic and health survey indicates that only about 15 percent of sexually active Nigerian women currently practice effective contraception^[2] though the figure varies from region to region being higher in the southern part of the country with a prevalence of modern contraceptive use of 12.5% among married women compare to a prevalence rate of 5.3% among married women in the Northern part of the country. The same pattern follows for fertility rate where the northern part of the country has a higher fertility rate of 6.6% compare to 4.5% in the south and a higher maternal mortality rate of 1,287 per 100,000 live birth in the north compare to 225 per 100,000 live birth in the south.^[3]

Contraceptive use is seen as pivotal to protecting women's health and rights, impacting upon fertility and population growth, and promoting economic development particularly in sub-Saharan Africa. Globally, contraceptives help prevent an estimated 2.7 million infant deaths and the loss of 60 million years of healthy life.^[4]

Several reports have associated unwanted pregnancy, high fertility rates and high parity with the high maternal mortality rate (MMR) in Nigeria.^[5] Fortunately, contraception when accepted and used by majority of women in any given community has been shown to reduce unwanted pregnancy, high parity and consequently maternal mortality.^[6,7]

The study aimed at determining the level of awareness, utilization, preferred methods of contraceptives and factors affecting contraceptive use among female traders of Jos south Local government area (LGA) of Plateau state.

MATERIALS AND METHODOLOGY

Study area

The study was carried out in Jos south LGA of plateau state, which is one of the 17 LGA in the state and one of the four LGAs around the metropolis; it is located close to the city centre and politically is one of the local governments that make up Plateau –North senatorial district. The Local Government area is divided into four districts which are Du, Gyel, Vwang and Kuru.

The major ethnic groups in the Local Government area are the Berom, beside other minor settlers like the Hausa, Igbo, Yoruba, Miango. and the main occupation of the people is both subsistence and commercial agricultural production. The LGA has 33 government owned primary health care

centres including other private and faith based health facilities.

Study population

The study population was female traders of reproductive age group in the three markets; Abbattoir, Bukuru and Vom markets.

Study design

The study was a cross sectional descriptive study, with female traders as the study population. All female traders who consented were included in the study.

Sample size estimation

The minimum sample size was determined using the formula:

$$N = \frac{Z^2 pq}{d^2}$$

Where N= minimum sample size

Z= confidence interval= 95 % (1.96)

P= the prevalence of modern contraceptive usage. A contraceptive prevalence rate of 15% that was gotten from the 2008 Nigeria Demographic and Health survey was used as the prevalence

q=complementary probability (1-p) =0.85

d=precision/error tolerated (5%)

The minimum sample size of 196 was calculated but a total of 212 women consented for the study and were included in the study.

Sampling technique

Simple random sampling technique by balloting was used to select three markets which were Abbattoir market, Bukuru market and Vom market out of the 9 major markets in Jos South LGA of plateau state. There were a total of 256 female traders of reproductive age group who were not pregnant in the three markets put together but only 212 consented for the study and were all included in the study.

Data collection:

Data was collected using an interviewer-administered questionnaire; the women were interviewed in English language but interpreted in Hausa language for those who did not understand English. The questionnaire was in

four different sections, the socio-demographic characteristics, contraceptive knowledge, women's perception on contraceptives and the contraceptive use among the women.

Ethical consideration

Ethical clearance was obtained from Jos University Teaching Hospital ethical committee, permission was obtained from the LGA and the market leaders and subsequently an informed verbal consent was obtained from the female traders before the commencement of the study.

Data analysis

All data generated during the study were processed and analyzed using the EPI info version 3.5.1 statistical software. A confidence level of 95% was used for relevant test statistic and a *p*-value of <0.05 was considered significant. Chi square was used to assess significant association between the socio-demographic characteristics and the knowledge and use of the contraceptives among the female traders in the markets.

RESULT

Two hundred and twelve women consented for the study and were interviewed, their ages ranged from 15-49 years with a mean age of 30 ± 3.72 . Among them, 147(69.3%) were married while 54(25.5%) were single. Most (46.7%) had secondary school education as the highest educational level while 17(8%) had no formal educational attainment. There were diverse tribes but the major ones among them were Berom (32%), Igbo (16.5%) and Mwaghavul (10.4%). For the spouses, secondary school education was the highest educational attainment (46.3%) while semiskilled workers were the majority (36%) (Table 1).

Out of the 212 female traders interviewed, 198(93.4%) were aware of contraceptives while 14(6.6%) were not aware of contraceptives. The most popular contraceptive methods that were known to the women were male condom (95.5%), injectable (87.4%) and oral contraceptives pills (85.9%) while the unpopular methods were female

condom (40.4%), cervical diaphragm (17.5%), cervical cap (12.1%) and spermicides (12.6%).

The number of female traders who were currently using contraceptives were 110(51.9%) while 102 (48.1%) were not using any contraceptives. The contraceptive methods that were used by the female traders were male condom (22.7%), oral pills (18.2%) and injectable (17.3%) while the least of the methods used by the female traders were female condom (2.7%) and bilateral tubal ligation (0.9%) (Table 2).

Factors found to be associated with contraceptive use among the female traders included marital status, contraceptive usage was more among married women than the others ($p < 0.0001$), religion, contraceptive use was more among Christian women ($p < 0.0001$), education ($p = 0.048$), those with primary school education were found to be using the contraceptives more than the others and parity, those who had more than five children were the majority among those using the contraceptives ($p = 0.0003$). The husband's educational level and occupation was not found to be associated with contraceptive use among these female traders (Table 3).

DISCUSSION

The level of awareness of contraceptives among these female traders was quite high, 93.4% of them were actually aware of one form of modern contraceptive or the other. Many other studies have also shown a high level of awareness of contraceptives in different groups of people including the rural women.^[8-10]

Although the general level of awareness was high, some contraceptive methods were more popular than others; among the most popular methods were the male condom, being the most known among the female traders followed by the injectable and the oral contraceptive pills. The female condom was not so popular, only about 40% of the female traders were aware of the female condom and other contraceptive methods

Table 1: Socio-demographic characteristics of the female traders N=212

| Socio-demographic characteristics | frequency | percentage |
|------------------------------------|-----------|------------|
| Age (years) | | |
| < 25 | 50 | 23.6 |
| 26- 29 | 39 | 18.4 |
| 30-34 | 38 | 17.9 |
| 35-39 | 32 | 15.1 |
| ≥40 | 53 | 25 |
| Marital status | | |
| Married | 147 | 69.3 |
| Single | 54 | 25.5 |
| Divorced | 2 | 0.9 |
| Widow | 9 | 4.3 |
| Educational status | | |
| None | 17 | 8 |
| Primary | 60 | 28.3 |
| Secondary | 99 | 46.7 |
| Tertiary | 36 | 17 |
| Religion | | |
| Christian | 204 | 96.2 |
| Islam | 8 | 3.8 |
| Parity | | |
| Nulliparous | 59 | 27.8 |
| 1 | 22 | 10.4 |
| 2-4 | 86 | 40.6 |
| ≥ 5 | 45 | 21.2 |
| N=147 | | |
| Husband's educational level | | |
| None | 12 | 8.2 |
| Primary | 29 | 19.7 |
| Secondary | 68 | 46.3 |
| Tertiary | 38 | 25.8 |
| Husband's occupation | | |
| Skilled | 46 | 31.3 |
| Semiskilled | 53 | 36 |
| Unskilled | 48 | 32.7 |

Table 2: Awareness and use of contraceptive among female traders

| Awareness | frequency | percentage |
|-----------------------------|-----------|------------|
| Yes | 198 | 93.4 |
| No | 14 | 6.6 |
| Contraceptive methods Known | | |
| Male condom | 189 | 95.5 |
| Injectable | 173 | 87.4 |
| Oral pills | 170 | 85.9 |
| IUCD | 127 | 64.1 |
| Implants | 123 | 62.1 |
| Bilateral tubal ligation | 107 | 54 |
| Female condom | 80 | 40.4 |
| Cervical diaphragm | 31 | 15.7 |
| Spermicide | 25 | 12.6 |
| Cervical cap | 24 | 12.1 |
| Vaginal ring | 24 | 12.1 |
| Contraceptive use | | |
| Yes | 110 | 51.9 |
| No | 102 | 48.1 |
| Methods currently using | | |
| Male condom | 25 | 22.7 |
| Oral pills | 20 | 18.2 |
| Injectable | 19 | 17.3 |
| IUCD | 17 | 15.4 |
| Calendar method | 14 | 12.7 |
| Lactational amenorrhoea | 11 | 10 |
| Female condom | 3 | 2.7 |

Table 3: factors associated with contraceptive use among female traders

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| Factors | contraceptive usage | non contraceptive usage | p-value |
|------------------------------------|---------------------|-------------------------|---------|
| Marital status | | | |
| Married | 88(59.9%) | 59(40.1%) | <0.0001 |
| Single | 19(35.2%) | 35(64.8%) | |
| Divorced/widow | 3(27.2%) | 8(72.8%) | |
| Educational status | | | |
| None | 7(58.3%) | 5(41.7%) | 0.048 |
| Primary | 21(72.4%) | 8(27.6%) | |
| Secondary | 38(55.9%) | 30(44.1%) | |
| Tertiary | 21(55.3%) | 17(44.7%) | |
| Religion | | | |
| Christian | 109(53.4%) | 95(46.6%) | <0.0001 |
| Islam | 1(12.5%) | 7(87.5%) | |
| Parity | | | |
| Nulliparous | 23(39%) | 36(61%) | 0.0003 |
| 1 | 12(54.4%) | 10(45.5%) | |
| 2-4 | 44(51.2%) | 42(48.8%) | |
| ≥ 5 | 31(68.9%) | 14(31.1%) | |
| Husband's educational level | | | |
| None | 7(58.3%) | 5(41.7%) | 0.598 |
| Primary | 18(62.1%) | 11(37.9%) | |
| Secondary | 36(52.9%) | 32(47.1%) | |
| Tertiary | 21(55.3%) | 17(44.7%) | |
| Husband's occupation | | | |
| Skilled | 20(47.6%) | 22(52.4%) | 0.716 |
| Semiskilled | 28(52.8%) | 25(47.2%) | |
| Unskilled | 21(47.7%) | 23(52.3%) | |

that were not so popular among this group of women were the spermicide, cervical cap and vaginal ring. The male condom has also been reported from other studies to be the most

popular method probably due to the frequent advertisement on the media as regards both family planning and prevention of sexually transmitted diseases.^[10,11] A study in Uganda also found male condom, oral contraceptive pills and injectable to be the most popular method of contraceptive being used by women.^[12]

Despite the high level of awareness of contraceptives, only about 51% of the female traders were using contraceptives to control fertility. The 51% level of contraceptive use found in this study is far higher than the figure recorded by the Nigeria demographic and health survey of 2008 that was put at 15% and also higher than the level of 20% found in a study conducted among women in Enugu, Eastern Nigeria^[2,13] but lower than the 66.3% prevalence rate found among rural women in south western Nigeria.^[10] This higher rate may be because of the higher literacy level and the religion of the women since most are Christians in the Eastern part of the country. Generally, the prevalence of modern contraceptive use has been reportedly low in most part of Africa as seen from the result of different studies carried out. Studies have shown a prevalence rate of 1.5% in Senegal and 34.9% in a predominantly rural Muslim area of North India.^[14,15]

Certain factors found to be associated with none utilization of modern contraceptives in this group of women was marital status, religion, educational status and parity. Majority of those using contraceptive among the female traders were married women which is well understood considering our culture here where family planning is seen as solely married women's affairs. Our findings of married women using contraceptives more than the unmarried is consistent with the findings in a study conducted in Uganda and Haiti.^[16,17]

Most of those using contraceptives were traders with secondary school education, the positive effect of education on contraceptive use could be associated with delay in marriages and first pregnancies, and increase women's understanding of reproductive health issues caused by education. This finding has been reported in other studies.^[18-20]

More Christian women than the Muslim women were using the modern contraceptive and the same was found in other studies.^[21,22] Majority of women perceive family planning as a means of regulating the number of children believing that contraceptive use stops a woman from having further children and not in the light of spacing children which may be the reason for the high contraceptive use amongst women with greater parity who probably have completed their family size compare to those with lesser parity and desiring more children.

CONCLUSION

Awareness of modern contraceptive though high in this part of the country, its use remain low with factors like marital status, religion and parity playing significant roles in the use of the modern contraceptives. Health education on the importance of the use of modern contraceptives should be given to female traders to encourage the use among them.

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doi: <http://dx.doi.org/10.14194/ijmbr.1310>

How to cite this article: Envuladu E.A, Agbo H.A, Mohammed A, Chia L, Kigbu J.H , Zoakah A.I. Utilization of modern contraceptives among female traders in Jos South LGA of Plateau State, Nigeria. *Int J Med Biomed Res* 2012;1(3):224-231

Conflict of Interest: None declared