

Full Length Research Paper

Perception and use of contraceptive amongst female secondary school students in Lagos, Southwest Nigeria

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The high maternal mortality and morbidity rate in Nigeria is a major concern for every stakeholder in the health sector and unsafe abortion is a major cause. As a remedy, it was suggested that active efforts to promote sexuality education and contraceptive use should be intensified among Nigerian adolescents. In this regard, we studied the level of contraceptive knowledge and use among adolescents in three secondary schools in Lagos between January to March 2010. Results showed that 5% of 1155 students with knowledge of contraception are users, 85% of sexually active respondents were non-users while condom is the most common contraceptive method used. Also, nearly 45% of respondents obtained knowledge about contraception from their parents. We believe that there is a need for aggressive advocacy on adolescent reproductive health (ARH) before initiation of sexual activity and dissemination of information on family planning methods among the teenage.

Key words: Contraceptive knowledge and usage, sexual behaviour, adolescent, Nigeria.

INTRODUCTION

The high maternal mortality and morbidity rate in Nigeria is a major concern for every stakeholder in the health sector and unsafe abortion is one of the major causes. UNDP WHO (1998), Oye-Adeniran et al. (2004). A further analysis shows that, young women are particularly vulnerable to unsafe induced abortion with its attendant sequelae (Anochie, 2003). Other reproductive health risks include sexually transmitted diseases (STDs) including HIV (Orji, 2002). Sometime ago, a ministerial inquiry on maternal health in Nigeria reported that about 500,000 clandestine induced abortions occurred in 1980 and these accounted for a high proportion of death amongst unmarried women (Uche et al., 1997). In fact, Otoide et al. (2001) postulated that 25% of maternal deaths is due to abortion. A group of investigators found that, teenagers represent a large proportion of admissions, for complications of abortion resulting in

deaths at Ile-Ife (Okonufua et al., 1992). A study of female postsecondary students in Enugu State Nigeria, showed that, 21% of respondents reported having had unwanted pregnancy and 18% reported having had induced abortion. In that study, 51% had never used a contraceptive method, and 76% did not use any method the first time they had sexual intercourse. This group of individuals is therefore the targets for adequate advocacy for contraceptive methods/usage, to reduce incidence of unwanted pregnancy (Uche et al., 1997). Sexual activity amongst teenagers has increased over the years. Michael et al. (2003), Cadmus (2010) in the 1990 demographic and health survey (DHS), 40% of teenage women in Nigeria had given birth or expecting their first baby, with the highest incidence being in the Northern Region DHS, 1990; Columbia, Md USA (1992). In another study, it was found that 29% of women under 19 years of age have had induced abortion and 80% of them were sexually active (Uche et al., 1997).

In a survey at Ibadan, it was found that while over 90% of young men and women professed being informed about reproductive health, only 27% of those in

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secondary school could identify their monthly period and 44% of those in secondary schools had been pregnant with all of these, having had an induced abortion. The young women were said to have blamed lack of family planning information for their non-use of contraceptives (Nicholas et al., 1986; DHS, 2003). In another study at Ibadan, Cadmus (2010) found that sexually active young adults are less likely to use contraception than adults even in marriage. Adolescents were usually more informed about abortion and its sequelae than about contraception. In some cases, fears resulting from misconceptions about contraception contribute to none usage (Orji, 2002).

A study by Okpani and Okpani (2000) of seven hundred and sixty-eight (768) randomly selected single senior secondary school girls from Port Harcourt (mean age 16.32 years) on aspects of sexual activity and contraceptive use, showed that, two hundred and ten pregnancies (24 deliveries and 186 induced abortions) had occurred in 142 out of 605 girls (78.8%) who admitted being sexually exposed. The mean, modal and youngest ages of initiation into sexual activity were 15.04, 15 and 12 years respectively. At the time of the survey, 190 girls (24.7%) were sexually active and 74.2% of their male consorts were older working men, suggesting financial gains, as a motive for the girls' sexual activity. Other findings were high awareness (72.4%) of the relationship between sexual activity and sexually transmitted diseases; a rather low level (56%) of knowledge of effective contraceptive methods, and limitation of contraceptive method use by sexually active girls, largely to the rhythm and withdrawal methods. Exposure to multiple sexual partners and a high level of parental approval of subjects' use of contraception were also present. It was suggested that, active efforts to promote sexuality education and contraceptive use, should be intensified among Nigerian adolescents (Okpani, 2000). Unwanted pregnancy most often leads the individual to undergo unsafe abortion for various reasons. Lack of contraceptive use is a major factor in the incidence of unwanted pregnancy. In this article, we present the contraceptive knowledge and usage among teenagers attending secondary school in the metropolitan city of Lagos, in the Southwestern part of Nigeria between January and February 2010.

METHODOLOGY

This study was conducted between January and March 2010, in the Cosmopolitan city of Lagos Nigeria. Two secondary schools with mixed student population and a female only secondary school were identified for the study. After designing the study questionnaire, the approval of the Research and Ethics committee of the hospital was sought and obtained. A self administered questionnaire was given to 1500 single female students in three secondary schools in Lagos, Nigeria. The school authorities were approached and consent duly obtained. The students were well informed and consent duly obtained after explanation by one of the authors.

Questions were asked about actual age, age at menarche, contraceptive knowledge and source of information on contraception, sexuality, contraceptive usage, contraceptive type known/used and reasons for non-usage of contraception. All the data were collated and analyzed using the SPSS version 11.

RESULTS

All the participants responded. Analysis showed that they were all single, nulliparous, and of the age range 9 to 19 years. Of the 1500, 77% claimed knowledge of contraception and 23% (345) had none (Table 1). When the 77% respondents that had knowledge of contraception were asked on source of information on contraception, 45% said TV/Radio, 35.0% through the parents while 9.9% obtained information through sisters and 10% from friends (Table 2).

The most common type of contraception known is the condom (33%) followed by pill (28%). Others were "native" 24%, injection 10%, IUCD 5% (Table 3).

However, only 5% (58) of the 1155 that have knowledge of contraception were using any form of contraception (Table 4). When asked for reason of non-usage of contraception, surprisingly 67% were not having sexual activity (Table 4). However, among the sexually active respondents, 85% were not using any form of contraception because "they were not bothered"! (Table 5).

DISCUSSION

In this study, it is observed that there is a definite discrepancy between students understanding of contraception and sexual behaviour. Though 23% of the studied group had any knowledge of contraception, 33% engage in sexual activity. This rate of sexual activity is similar to the rates reported in other studies by Adinma (1995), DHS (1999), Ebuehi (2006). A further analysis showed that, only 15% of sexually active group used any form of contraception. This confirmed that awareness does not translate to the use of contraception. This compares with figures of 17% quoted by Srivastava (2005). Though it was not ascertained in our study, whether pregnancy was intended, this low rate of contraceptive usage would give rise to increased rate of unwanted pregnancy and/or abortion with attendant sequelae. If in the Demographic and Health Survey (1990) only 11% of sexually active women aged 15 to 19 years ever used any modern contraceptive method; then 20 years on 15% are contraceptive complaint, it shows the need to intensify the awareness campaign for contraceptive usage among the adolescent.

In times past, parents were ranked low as a source of information on sexuality but in our study, the family-parents and sisters- ranked the same as the traditional TV and radio outlets. The influence of family values on sexual behaviour and contraceptive attitude of

Table 1. Contraceptive knowledge.

Contraceptive knowledge	Number	Percentage
No	345	23
Yes	1155	77
Total	1500	100

Table 2. Source of information on contraception.

Source of information on contraceptive	Number	Percentage
Parents	404	35
Sister	115	9.9
Friend	115	10.0
TV/Radio	520	45
Others	1	0.1
Total	1155	100

Table 3. Type of contraception known.

Type of contraceptive known	Number	Percentage
Native	277	24
Pill	324	28
Injection	115	10
IUCD	58	5.0
Condom	381	33
Total	1155	100

Table 4. Contraceptive usage.

Contraceptive usage	Number	Percentage
No	1097	95
Yes	58	5
Total	1155	100
Reason for non-usage of contraception	Number	Percentage
Not bothered though sexually active	324	28
Not having sex	773	67
Has side effect	58	5.0
Total	1155	100

Table 5. Having sexual activity.

Having sexual activity	Number	Percentage
Not bothered	324	85
Has side effect	58	15
Total	382	100

adolescents has been well documented (Odumegwu et al., 2002; Biddlecom et al., 2009). The high percentage of respondents that were sexually inactive, could

therefore be due to the influence of family value impact on the population studied. The most common method of contraception known to the respondents is the condom,

as 33% of the study population is using it. This agreed with earlier studies by Anochie (2003), Orji et al. (2005) and Ebuechi et al. (2006).

One of the outcomes is the fact that, 85% of the sexually active respondents (324) were not bothered concerning contraception. Teenage pregnancies are associated with maternal, fetal and neonatal adverse outcomes; they drop out of school becoming parents that are unlikely to have the economic and social means to cater for their children. This is in tandem with the findings of Okonofua (1995) where contraceptive usage was low. In this study, the finding that only 5% of the respondents with knowledge of contraception use any of the methods compares favourably with 6% obtained in the Nigeria demographic and health survey of 1990. This shows that after many decades of family planning activity, there is still a wide gap between knowledge and usage. This is worrisome in the face of increased sexual activity amongst adolescents and the hazards of sexually transmitted diseases.

Conclusion

Despite the high rate of sexual activity in the group studied, the contraceptive usage rate is low. There is a need for aggressive advocacy about adolescent reproductive health before initiation of sexual activity and dissemination of information on family planning methods amongst the teenage group.

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