
AWARENESS AND PRACTICE OF CONTRACEPTION AMONG FEMALE SECONDARY SCHOOL STUDENTS IN UYO, NIGERIA

*Ntiense M Utuk - MBBS, FWACS

*Aniekan M Abasiattai - MBBCH, FWACS, FICS

*Bassey Edu - MBBS

**Department of Obstetrics/Gynaecology, University of Uyo Teaching hospital, Uyo, Nigeria*

ABSTRACT:

Background:

Adolescent sexual activity is very prevalent in many countries. Unprotected premature sexual intercourse results in a high incidence of induced abortion, unwanted pregnancy and sexually transmitted infections. Objective: The aim of this study was to determine the degree of awareness of contraception and its practice among female secondary school students in Itu, Akwa-Ibom State, Nigeria.

Method: A descriptive cross sectional study design was used to recruit 378 consenting female students selected by simple random sampling. Semi-structured, self-administered questionnaires were administered after explanation of the study and assurance of confidentiality. Three hundred and twelve forms were properly filled and analysis was done manually on these using simple proportions and percentages.

Results: Majority of the respondents were Ibibio 220 (70.5%) and between 13 and 17 yrs old (89.6%). Two hundred and thirty six (75.6%) were aware of contraception. Twenty nine (16.0%) of those who were sexually active had ever practice any form of contraception. The three common forms of contraception known were the male condom (36.0%), the calendar method (34.0%) and the oral contraceptive pills (25%). The foremost sources of information about contraception were from TV/radio (36.0%), parents (25.0%) and female friends (14.8%). Of those who were sexually active 116(64.8%) had sexual debut at 11-15years of age.

Conclusion: This study demonstrated that the level of awareness of contraception was high but the practice of contraception was

comparatively low. It also demonstrated that the age at sexual debut was early and the rate of sexual intercourse high. This emphasizes the need for provision of timely and accurate contraceptive information through sex education in secondary schools in our environment.

Key words: Contraception, Awareness, Practice, Sexual debut

INTRODUCTION

Nigeria has one of the highest maternal mortality ratios in the world (576/100,000 live births), representing 32% of all deaths among women¹. Complications from unsafe abortion contribute as much as 40.0% to this ratio². A large proportion of these patients are teenagers whose sexual debut is often early and unplanned³. Moreover, teenage pregnancies are associated with various complications, including anaemia, malaria, spontaneous abortions, preeclampsia/eclampsia, as well as fetopelvic disproportion with its attendant risks⁴. The risk of cervical carcinoma and infection by the human immunodeficiency virus is related to early age of unprotected sexual intercourse⁴. The use of effective contraceptive methods has been shown to reduce maternal and infant mortality by protecting against unwanted pregnancy and unsafe abortions⁵. Unfortunately, in Nigeria, the overall contraceptive prevalence remains low at 16%, even though there has been a striking increase in its use worldwide⁶.

This study was conducted to determine the awareness and practice of contraception among female secondary school students in Itu, Akwa Ibom State, South-South Nigeria.

METHOD:

This cross sectional study was carried out at West Itam Secondary School, Ekit-Itam,

Corresponding Author: Dr. Ntiense M Utuk
Department of Obstetrics/Gynaecology, University of Uyo
Teaching hospital, Uyo, Akwa Ibom State, Nigeria.
PMB: 1136.
E-mail: utukntiense1@gmail.com

Akwa – Ibom State. This is a co-educational school located in Itu local Government Area, one of the 31 Local Government Areas of Akwa-Ibom State, Nigeria. Itu has a population of approximately 161000. The school has a student population of approximately six thousand from JS1 to SS3 and was chosen by convenience. A minimum sample size was computed using the Leslie Fischers formula $n=Z^2 pq/d2$ with a prevalence factor of 85% being the awareness of contraception in Nigeria by the National Demographic and Health Survey 2013. A minimum sample size of 215 was determined, including a 10% non response rate. Permission was obtained from the relevant authorities.

Three hundred and eighty seven female students who volunteered for the study were selected through balloting by simple random sampling. Three trained research assistants administered the questionnaires during break over a period of four weeks. The questionnaires contained questions on socio-demographic data, awareness and practice of contraception and age at sexual debut. The sources of information on contraception were also explored. Sixty seven forms were not properly filled, representing a none response rate of 17.5%. A total of 312 questionnaires, were returned properly filled and were

analysed by simple proportions and percentages.

RESULTS:

Table I shows the socio-demographic data of the respondents. The majority of the respondents were Ibibio (70.5%), and all were Christians. Most (48.0%) were in the 13-15 year age group while 41.6% were in the 16-17 year age group.

Table 2 shows the percentage distribution of awareness of contraception. Two hundred and thirty six (75.6%) of the respondents were aware of contraception, of which the male condom (35.6%), the calendar method (33.9%), the oral contraceptive pill (25%) were the most known. Other contraceptive devices the respondents knew were the injectables (16.9%), and the intrauterine contraceptive device (2.5%).

Table 3 shows the sources of information about contraception. Most of the respondents knew about contraception through Television and radio (36.0%), while (25.0%) heard about them from their parents. Other sources of information included female friends (14.8%) and the school (14.0%). Male friends provided information in 8.9% of cases.

Table 4 shows that 179 respondents were sexually active and the age at sexual debut. One hundred and sixteen (64.8%) had

TABLE I: SOCIODEMOGRAPHIC DATA: N=312

VARIABLE	FREQUENCY	PERCENTAGE
AGE (YEARS)		
10 – 12	15	4.8%
13 – 15	150	48.2%
16 – 17	130	41.6%
11 – 18	17	5.4%
TOTAL	312	100%
TRIBE		
IBIBIO	220	70.5%
ORO	30	9.6%
ANNANG	24	7.7%
OTHERS	38	12.2%
TOTAL	312	100%
RELIGION		
CHRISTIANITY	312	100%

**TABLE 2: AWARENESS OF CONTRACEPTION:
NUMBER OF RESPONDENTS AWARE OF CONTRACEPTION N =236.**

CONTRACEPTION METHOD	NUMBER	PERCENTAGE
Male Condom	84	35.6%
Oral Contraception Pills	26	11.0%
Injectables	40	17.0%
Intrauterine Contraceptive Device	6	2.5%
Calendar Method	80	33.9%
TOTAL	236	100%

**TABLE 3: SOURCES OF INFORMATION ON CONTRACEPTION:
N= 236.**

SOURCE	NUMBER	PERCENTAGE
TV/Radio	85	36.0%
Parents	59	25.0%
Female Friends	35	14.8%
School	33	14.0%
Male Friends	21	8.9%
Sisters	3	1.3%
TOTAL	236	100%

**TABLE 4: AGE AT SEXUAL DEBUT:
SEXUALLY ACTIVE RESPONDENTS N = 179.**

AGE (years)	NUMBER	PERCENTAGE
1 – 10	31	17.4%
11 – 15	116	64.8%
16 – 20	32	17.8%
TOTAL	179	100%

commenced sexual intercourse by 11-15 years of age, while 31(17.3%) had done so by 10 years. Thirty two (17.8%) had done so by 16-20 year of age. Of the respondents that were sexually active, only 29 (16.2 %) practiced contraception.

DISCUSSION

This study demonstrates the high level of awareness of contraception among female secondary school students in our environment. This is in agreement with several other studies ^{7,8} and reflects the continuous widespread information on

contraception from the mass media sponsored by donor agencies and marketers⁹. However, despite the increased awareness there was a low level of usage of contraception. This is similar to other studies which also highlight the little attention shown to adolescent reproductive health needs as well as the fact that they are too embarrassed to source for contraception^{10,11}

The most commonly used methods of contraception were the condom and calendar methods. This agrees with earlier studies ^{12,13,14}. This is probably due to increased awareness of condoms due to the widespread campaign

about sexually transmitted diseases, including the Human Immunodeficiency virus. There is also increased accessibility as they are sold and are readily available even in patent medicine stores and supermarkets. The stigma of access of contraception in conventional family planning centers is thus avoided. This may explain the reliance on calendar methods of contraception, as highlighted in this study. Calendar methods are private and do not entail access to any personnel. However these methods require high motivation and have a relatively high failure rate¹⁵.

The commonest sources of information about contraception were from the media, parents and friends. This agrees with studies conducted by other researchers.¹⁶ This information, however, may not be scientifically accurate and may give rise to misconceptions. Health institutions and family planning clinics, where factual information can be obtained, are disregarded. The study also showed an early age at sexual debut. This is in agreement with several other studies^{10,11}. This relationship between early age at sexual debut and low practice of contraception may predispose to a high incidence of unwanted pregnancy, as well as its numerous complications, including unsafe abortion with its high attendant maternal mortality and morbidity¹⁷. This shows the need for increased enlightenment about contraception among adolescents.

CONCLUSION

This study shows the high level of awareness of contraception among secondary school students in Akwa-Ibom State; however, the level of practice was low. Massive and effective promotion of family planning, and improved access to contraception as part of a dedicated adolescent reproductive health program, should be the focus. This will improve safe sexual practices. There is a need to incorporate sexuality education and contraceptive information in all secondary school curriculum. If there is resistance on moral and cultural grounds by religious

leaders efforts must be made to persuade critics. At community and national level, elected officials may need legislation to make sex education legally binding.

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