

Title: Contraceptive Awareness and Prevalence Rates among Women in a Nigerian

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Abstract

Background: Contraception awareness and prevalence rates are key indicators of a woman and population's reproductive health. A regular assessment of contraceptive awareness and prevalence rate is imperative in developing countries; regions with high rates of unintended pregnancy and unsafe abortion which aims at identifying potential spheres of intervention.

Aim: We assessed the contraceptive awareness and prevalence rates among women in Lagos, Nigeria.

Materials and Methods

This was a prospective cross-sectional population based survey in which 16214 consenting women, aged 15 to 45 years of age, from randomly selected households and communities across the 20 local government areas (LGA) of Lagos state, Nigeria. They had in-depth interview with the aid of an interviewer administered structured questionnaire to assess their knowledge and use of contraception. Data obtained were presented in frequency and proportions.

Findings: The overall contraceptive prevalence rate was 30.2% (95% CI: 29.3 - 31.2). Pills were the commonly mentioned method by 65.9% of the women followed by injectables (64%). None of the women indicated awareness of male sterilization. Friends, health care workers and neighbours were the leading sources of information on options of contraceptive methods. Contraceptive prevalence rates were significantly higher in educated women.

Conclusion

Awareness of contraceptive options is high among Nigerian women within the reproductive age group but acknowledgement rate of male sterilization as an option is almost non-existent.

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Key Words: Contraception, Family planning, Women, Contraceptive awareness

Introduction

Currently, women in Nigeria have an average of 5.3 children each. Since 1990, fertility rate has decreased from 6.0 children per woman to the current average of 5.9 children in women in rural areas and 4.5 children among urban women. At these fertility rates, as in several other developing countries, populations will double in less than 20 years, with increasing threat of a global population crisis. This makes the deliberate control of fertility imperative and the widespread use of safe adequate contraception crucial.

Family planning allows people to attain their desired number of children, if any, and to determine the spacing of their pregnancies through the use of contraceptive methods. The prevention of unintended pregnancies helps to lower maternal ill-health and the number of pregnancy-related deaths. Contraceptive information and services are fundamental to the health and human rights of all individuals.

In Africa, one in 26 women of reproductive age die from pregnancy related complications, as against one in 9400 in Europe. Similar unpleasant statistical disparities also exist with fertility and contraceptive use between low-income and high-income countries and have remained an intractable challenge. Multiple programs and efforts by various organizations to improve the uptake of contraceptive methods in Africa have yielded only minimal encouraging results. Current estimates suggests that 54 million unplanned pregnancies, 79,000 maternal deaths and 1.2million childhood mortality could have been prevented with widespread equitable access to effective contraception.

This study assessed the awareness and prevalence rates of contraception among women in Lagos Nigeria.

Materials and Methods

This was a 2-year (January 2015 to December 2017), community-based, descriptive, cross-sectional survey in which 16214 consenting women, in randomly selected communities across the 20 local government areas of Lagos State, had in-depth interview using an interviewer administered, structured questionnaire designed for the study. Enumeration areas were identified by random selection of households and respondents,

one woman per household was also selected by stratified random selection. The data obtained were analyzed using SPSS, version 22 and frequency and proportions were calculated for categorical variables. Tables and bar charts were used for graphical illustration.

Results

Women aged 25-29 years of age (19.5%) and who had completed secondary education (42.2%) accounted for majority of the study respondents (Table 1). Almost 3/4th of the women (73.7%) were aware of contraception with the contraceptive pills being the most acknowledged in 65.9% of women followed by injectables (64%). (Table 2). None of the women indicated awareness of male sterilization (Table 2). Friends, health care workers and radio were the leading sources of information on options of contraceptive methods among the women surveyed (Table 3).

The contraceptive prevalence rate was 30.2% (95% CI: 29.3 -31.2) (Table 4). The Catholics and Spiritualists each had the highest contraceptive prevalence rate (CPR) of 33.3% (Table 4). Women who had completed secondary education had the highest (40.6%) contraceptive prevalence rate by level of education (Figure 1). Contraceptive use was significantly associated with age ($p < 0.001$), level of education ($p < 0.001$) of respondents but not with religious affiliation (Table 5).

Table 1: Socio-demographic characteristics of the respondents

Variables	No (n=16214)	(%)
Age Group:		
15-19	1430	8.8
20-24	2596	16
25-29	3162	19.5
30-34	2919	18
35-39	2399	14.8
40-49	2367	14.6
Not indicated	1341	8.3
Educational Level:		
No schooling	844	5.2
Part primary	438	2.7
Primary completed	1330	8.2
Part secondary	1654	10.2
Secondary completed	6842	42.2
Other post-secondary	535	3.3
Part university	1540	9.5
University/Poly Graduate	2610	16.1
Others	146	0.9
Not indicated	275	1.7

Table 2: Respondents awareness of contraception

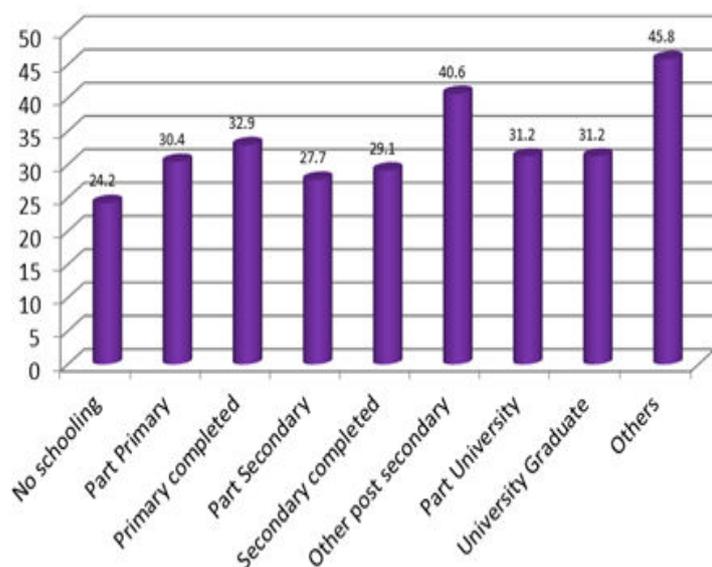
	Frequency	(%)
	n=15357	
Are you aware of contraception?		
Yes	11321	73.7
No	4036	26.3
Contraceptive methods ever heard of		
Pill	7455	65.9
IUD	3725	32.9
Injections	7247	64
Implants	2860	25.3
Foam, Jelly	298	2.6
Condom/Femidom/Diaphragm	5998	53
Female sterilization	568	5
Male sterilization	0	0
Rhythm/Periodic abstinence	743	6.6
Withdrawal	2158	19.1
Total abstinence	1289	11.4
Breast-feeding	1251	11.1
Traditional methods	1089	9.6

Table 3: Sources of Information on Contraception

Source of knowledge of the methods*	No.	(%)
Friend	3840	33.9
Neighbour	1556	13.7
Relation	466	4.1
Father	38	0.3
Mother	362	3.2
Parents	298	2.6
Radio	1777	15.7
TV	1388	12.3
Newspaper/Magazines	436	3.9
Teachers	758	6.7
Doctor	2576	22.8
Classmates	316	2.8
Pastor	51	0.5
Siblings	407	3.6
Nurse	3624	32

Some respondents indicated multiple sources of information /knowledge on contraception

Fig. 1. Contraceptive prevalence by level of education



Discussion

The 16214 women, who took part in the survey, were fairly evenly distributed in proportions between the ages 20 to 49 years and about half (54%) of the respondents had more than the primary level of education. The fact that many (73.7%) of the women in our study were aware of modern contraceptives is encouraging, however, the room for improvement is obvious. This is similar to reports by Adinma et al South-East Nigeria of an overall mean awareness of contraception of 70.9%.⁹ Arbab et al among Qatari women in a similar survey found that 94.6% of women knew about contraception but only 64.9% were in favour of contraception.¹⁰ Megabiaw in Ethiopia also reported that majority (93.1%) of the street women had heard about modern contraceptives.¹¹ Our finding of a relatively lower level of awareness about contraception informs the need to identify and tackle critical barriers to contraceptive awareness. Adefalu et al in North-West Nigeria reported that 82.4% of women were aware of at least one form of contraception.¹² Despite the higher awareness rates reported by these studies our finding is more representative of the general population due to our very large sample size.

The contraceptive pills method was the most acknowledged, in 65.9% of women followed by injectables (64%). None of the women indicated awareness of male sterilization. Nsubuga et al in Uganda observed that the most commonly known and used methods, in a related study, were the male condoms and oral pills, but knowledge of the female condom was very low.¹³ Hoque et al in Botswana found that the condom (95.6%) was the most commonly known method followed by the oral contraceptive pill (86.7%).¹⁴ Adefalu et al in Nigeria found that the most popular and least common modern contraceptive methods were the male condom (86.8%) and vasectomy (26.6%) respectively.¹² The variation in findings from these studies and ours may be explained by the different types of study population. Both Nsubuga et al and Hoque et al studied university students, a relatively educated population unlike in our study where more than 50% had no form university education.

Friends, health care workers and radio were the leading sources of information on options of contraceptive methods among the women we surveyed. Bankole et al in South-West Nigeria observed that the most frequent sources of contraception information were friends, television and magazines/newspapers, but their most preferred sources were physicians/health worker.¹⁵ The peer-to-peer transmission route appears to be important in the dissemination of information about contraceptives.¹²

The contraceptive prevalence rate of 30.2% found in our study was similar to the contraceptive prevalence of 33.4% noted by Ekweani et al¹⁶ in Zaria Nigeria and 34.3% reported by Megabiaw¹¹ in Ethiopia but lower than 46.6% reported by Nsubuga et al¹³ in Uganda and 43.8% reported by Adefalu et al¹² in North-West Nigeria. We observed that prevalence rates were highest among Catholics, Spiritualists and among women who had a minimum of secondary school education. The 2018 National Demographic and Health Survey (NDHS) reported that

Table 4: Contraceptive prevalence by religious affiliations

Religious affiliation	No.*	Prevalence (%)
Catholic, n=1060	354	33.4
Islam, n=3064	920	30
Traditional, n=97	31	32
Protestant, n=777	214	27.5
Pentecostal, n=3243	940	29
Spiritual, n=658	219	33.3
Others, n=78	32	41
None, n=16	8	50
Total, N=8993	2718	30.2

Number of respondents using contraception

Table 5: Relationship between characteristics of respondents and contraceptive prevalence

Characteristic	P value	Odds Ratio	95% C.I.	
			Lower	Upper
Religion*	0.787	0.986	0.893	1.089
Education	<.000	1.12	1.058	1.185
Age	<.000	1.011	1.005	1.017
Marital Status	<.000	0.733	0.643	0.835
Constant	<.000	0.234		

Islam=reference Married= reference,

28% of sexually active, unmarried women aged 15-49 years, use a modern method of contraception.¹ Our prevalence rate of 30.2% is similar to the 2018 NDHS report despite the inclusion of married women in our survey. The 2013 NDHS reported a contraceptive prevalence rate of 11%,¹⁷ findings from our study buttress the fact that the uptake of modern contraceptive in Nigeria is improving.

Conclusion

The uptake of modern contraception among Nigerian women is increasing. The widespread adoption of proven and effective interventions geared towards increasing contraceptive prevalence rates should continue.

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