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Utilization of family planning services among residents of Mkar community, Gboko LGA, Benue State, Nigeria

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ABSTRACT

Introduction

Family planning is an organized effort to assist people to have the number of children they want and to space them as they choose or want to. It is the key to slowing unsustainable population growth and the resulting negative impacts on the economy, environment, and national and regional development efforts.

Purpose

The purpose of the study was to assess the level of utilization of family planning among residents of Mkar Community, Benue State, Nigeria.

Materials and methods

A sample of 110 women of childbearing age was selected from the community using a purposeful non-probability sampling technique. Data was obtained using questionnaires. Descriptive statistics were used to summarise and organise data while Chi-square test was used to test for association between variables and the level of significance was set at 5% (0.05).

Results

The results of this study showed that 95.5% of the respondents knew about family planning, 68.2% were currently using at least one method of family planning and 40% indicated they use family planning to avoid unwanted pregnancies. Age group ($p=0.737$) and religious affiliation ($p=0.12$) were not significantly associated with the utilization of family planning while marital status ($p=0.002$), educational level ($p=0.021$), and occupational status ($p=0.002$) were found to be significantly associated with the utilization of family planning.

Conclusion

The utilization of family planning in this survey was low, despite a reported high awareness and knowledge about family planning in the study area. There is, therefore, a need for more campaign and public enlightenment programs on family planning utilization, importance, and benefits, to fast track the spread of information and further improve its utilization.

INTRODUCTION

There have been concerns about the galloping population growth and its effects on the human race. The world's population is increasing and now approximately eight billion people with the potential of further increase (Population Reference Bureau [PRB], 2015). Nearly all of this growth is occurring in developing nations where fertility rates remain relatively high.

The United Nations Population Fund (UNFPA) inferred in its 2019 state of the world population report that Nigeria has a population of 201 million (Aluko, 2019). The country had an average population growth of 2.6% between 2010 and 2019. Africa's most populous country grew by about 5 million people from 2018 when UNFPA gave the population as 195.9 million (Fowowe, 2019).

Family planning is an organized effort to assist people to have the number of children they want and to space them as they choose or want to. According to the [World Health Organization \[WHO\], \(2015\)](#), family planning allows people to attain their desired number of children and determine the spacing of pregnancies. It is achieved through the use of contraceptive methods and the treatment of infertility. It is the key to slowing unsustainable population growth and the resulting negative impacts on the economy, environment, and national and regional development efforts.

[Achem \(2015\)](#) stated that adopting effective family planning methods nationwide would help to grow the country's economy, enhance development, and bring about reduced population. This will aid in proper planning for further development. [WHO \(2015\)](#) enumerated the benefits of family planning to include prevention of pregnancy-related health risks in women, reducing infant mortality, helping to prevent HIV/AIDS and other sexually transmitted infections (STIs), and reducing teenage pregnancies.

The use of contraceptives has increased in many parts of the world, especially in Asia and Latin America but continue to be low in sub-Saharan Africa ([Aina, 2008](#)). Globally, the use of modern contraceptives has risen slightly from 54% in 1990 to 57.4% in 2015 ([Olawande & Fasasi, 2016](#)). Regionally, the proportion of women aged 15-49 reporting use of a modern contraceptive method has raised minimally between 2008 and 2015 ([Alade & Aina, 2015](#)). In Africa, it went from 23.6% to 28.5%, in Asia it has raised slightly from 60.9% to 61.8%, and in Latin America and the Caribbean; it has remained stable at 66.7% ([WHO, 2019](#))

It is alarming that 214 million women of reproductive age in developing countries who want to avoid pregnancy are not using a modern contraceptive method ([Page, 2013](#)). This is associated with a limited choice of method, limited access to contraception particularly among young people, poorer segments of the population of unmarried people, fear of experience of side effects, cultural or religious opposition, poor quality of available services, users' and providers' bias and gender-based barriers. The unmet need for contraception remains too high ([Alade, 2004](#)). The inequality is fueled by both a growing population and sabotage of family planning services.

The National Bureau of Statistics in 2018 stated that the country's economy as measured by the Gross Domestic Product (GDP) grew by 1.93% ([Aluko, 2019](#)). This represents 0.63% points lower than the population growth of 2.6%. The trajectories suggest that Nigeria has about 87 million people in extreme poverty with six Nigerians falling into extreme poverty every minute ([Fowowe, 2019](#)). This trend will persist should population growth continue to outpace economic growth and with the preference for large families no longer fashionable, it has become imperative to investigate the utilization of family planning with the hope that it will become a means of controlling population growth in the community.

MATERIALS AND METHODS

Research Design

A cross-sectional survey research design was adopted to study the utilization of family planning among residents in Mkar community, Benue State, Nigeria.

Description of the Study Area

The study area was Mkar community of Ipav, Gboko Local Government Area of Benue State. It is a suburban community situated at the outskirts of Gboko town. The community is bordered by Mbaamandev, Akaajime. and Ahwa communities. The community dwellers are largely farmers, but there are some civil servants, few businessmen, and petty traders there too. A good number of the residents of this community are students and the dominant religion is Christianity. There are 5 tertiary institutions, 3 hospitals, and numerous primary and secondary schools within the community. It is worthy of note that the community dwellers understand English and speak the Tiv language fluently. The community has some social amenities like electricity, pipe-borne water, access roads, and a market. The community has a population of over 7,000 people. (Source: [Zaki Gabriel Asue Chekwa, Kindred Head, Hyaku-ya; Personal Communication](#)).

Sample Size and Sampling Technique

The sample size used for the study was 110 women aged 15-49 years. A purposeful non-probability sampling technique was adopted to select this sample.

Data Collection

Data were collected using questionnaires which were issued from one household to the other within the community. The literate respondents were allowed to fill

their questionnaires without assistance while the non-literate respondents were interviewed using the question items from the questionnaire.

Data Analysis

Data obtained from the survey were analysed using Statistical Package for the Social Sciences version 23 (IBM corporation). The results were presented in tables as frequencies and percentages. Chi-square test was used to determine the statistical significance of observed differences in the cross-tabulated variables. The level of significance was set at 5% (0.05).

RESULTS

The majority of the respondents (27.3%) were between ages 30-34 years while 5.4% were within 15-19 years. 75.4% of respondents were married and 91.8% were of the Christian faith. Participants were mostly educated with 33.6% attaining tertiary education and 16.4% were without any form of education at all. The occupation of respondents indicated 37.3% were farmers while 2.7% were artisans (Table 1).

Table 1
Distribution of socio-demographic characteristics of respondents

Variables	Variable category	Respondents (N = 110) n (%)
Age (in years)	15-19	6 (5.4)
	20-24	18 (16.4)
	25-29	27 (24.5)
	30-34	30 (27.3)
	35-39	11 (10)
	40-44	11 (10)
Religion	45-49	7 (6.4)
	Christian	101 (91.8)
	Muslim	5 (4.5)
	Traditionalist	3 (2.7)
Education	Others	1 (1)
	Illiterate	18 (16.4)
	FSLC	23 (20.9)
	SSCE	32 (29.1)
	A level	37 (33.6)
Marital status	Single	9 (8.1)
	Married	83 (75.4)
	Divorced	7 (6.4)
	Separated	10 (9.1)
	Others	1 (1)
Occupation	Farming	41 (37.3)
	Artisan	3 (2.7)
	Trader	23 (21)
	Housewife	22 (20)
	Civil servant	16 (14.5)
	Others	5 (4.5)

It was observed that 95.5% of the respondent had heard about family planning while 4.5% of the respondents did not know about family planning. The source of information on family planning indicated that 15.2% of respondents heard about family planning from family members, 25.7% from friends, 7.6% from media, 42.9% from the hospital, 6.7% from the church/mosque, and 1.9% from other sources (Table 2).

Table 2
Level of awareness on family planning

Variable	Category	Respondents (N = 110) n (%)
Know about Family planning?	Yes	105 (95.5)
	No	5 (4.5)
Source of Family Plating Information		(N = 105)
	Family member	16 (15.2)
	Friends	27 (25.7)
	Media	8 (7.6)
	Hospital/Clinic	45 (42.9)
	Church/Mosque	7 (6.7)
Others	2 (1.9)	

75 (68.2%) of the respondents have used family planning services while 35 (31.8%) have never used family planning services in their entire life. 40% of respondents admitting to using family planning to avoid getting pregnant while 4% indicated they use it to guide against communicable disease (Table 3).

Table 3
Utilization of family planning

Variable	Category	Respondents (N = 110) n (%)
Usage of family planning	Yes	75 (68.2)
	No	35 (31.8)
Reasons for using Family Plating Information		N=75
	To avoid getting pregnant	30 (40)
	To help in spacing my children	25 (33.3)
	To prevent diseases like HIV	3 (4.0)
Information	To control the family population	11 (14.7)
	To groom healthy and nourished children	6 (8.0)

17.3% used condom, 14.7% used drugs (pills), 5.3% used IUCD, 4% used sterilization, 14.7% used hormonal injections, 2.7% used withdrawal method, 16% used natural method, 5.3% used emergency contraceptives and 20% used implant (Table 4).

Table 4
Method of family planning usage

Method of family planning used	Frequency
	N=75
	n (%)
Condom	13 (17.3)
Drugs (pill)	11 (14.7)
IUCD	4 (5.3)
Sterilization	3 (4)
Hormonal injection	11 (14.7)
Withdrawal	2 (2.7)
Natural method	12 (16)
Emergency contraception	4 (5.3)
Implant	15 (20)

Result also indicated that respondents' age group ($p=0.737$) and religious affiliation ($p=0.12$) were not significantly associated with the utilization of family planning while marital status ($p=0.002$), educational level ($p=0.021$), and occupational status ($p=0.002$) were found to be significantly associated with the utilization of family planning services (Table 5).

Table 5
Utilization of family planning concerning socio-demographic characteristics

Variable	Usage of family planning		Total	Chi-Square	df	p-value
	Yes N (%)	No N (%)				
Age group						
15-19	5 (6.6)	1 (2.9)	6	3.555	6	0.737
20-24	12 (16)	6 (17.1)	18			
25-29	19 (25.3)	8 (22.9)	27			
30-34	23 (30.7)	7 (20)	30			
35-39	7 (9.3)	4 (11.4)	33			
40-44	6 (8)	5 (14.3)	11			
45-49	3 (4)	4 (11.4)	7			
Total	75	35	110			
Marital Status						
Single	6 (8)	3 (8.5)	9	17.137	4	0.002
Married	56 (74.7)	27 (77.1)	83			
Divorced	6 (8)	1 (2.9)	7			
Separated	7 (9.3)	3 (8.6)	10			
Others	0 (0)	1 (2.9)	1			
Total	75	35	110			
Religious Affiliation						
Christian	69 (92)	32 (91.4)	101	10.908	3	0.12
Muslim	3 (4)	2 (5.7)	5			
Traditionalist	2 (2.7)	1 (2.9)	3			
Others	1 (1.3)	0 (0)	1			
Total	75	35	110			
Educational Level						
Illiterate	11 (14.7)	7 (20)	18	9.765	3	0.021
FSLC	16 (21.3)	7 (20)	23			
SSCE	23 (30.7)	9 (25.7)	32			
A level	25 (33.3)	12 (34.3)	37			
Total	75	35	110			
Occupational Status						
Farming	27 (36)	14 (40)	41	19.098	5	0.002
Artisan	2 (2.7)	1 (2.9)	3			
Trader	18 (24)	5 (14.3)	23			
Housewife	14 (18.7)	8 (22.9)	22			
Civil servant	11 (14.7)	5 (14.3)	16			
Others	3 (4)	2 (5.7)	5			
Total	75	35	110			

Statistical significance was set at $p<0.05$

DISCUSSION

The findings of this study revealed that majority of the respondents were between the age group of 30-34 years. This indicates that the residents of this community promote girl-child education and discourage early marriage.

The marital status of the respondents indicated that many were married which is similar to the finding of Etokidem, et al. (2017) in Cross River state which found that 72.1% of the respondents were married. 8.2% of the respondents were single indicating that they had given birth but were not legally married to any man.

The most common occupation of the respondents was farming. This could be associated with the fact that farming is the main source of livelihood and an inheritance from the forefathers.

The study showed that majority of the respondents (95.5%) knew about family planning. This was similar to the 98.6% level of awareness claimed by respondents in the study carried out by [Durowade, et al. \(2017\)](#). The main source of information on family planning as captured in the study was from hospitals/clinics (40.9%) which was low when compared to the findings of [Nwachukwu & Obasi \(2008\)](#), who in their research reported that 71.8% of respondents got the information on family planning from health workers.

The results of this study further found that 68.2% of the respondents were currently using at least one method of family planning. This was similar to the 68.3% of the respondents in Cross River State and the 68.8% of the respondents in Ekiti state in the researches of [Etokidem, et al. \(2017\)](#), and [Durowade, et al. \(2017\)](#), respectively. 40% of the respondents indicated that they used family planning to avoid unwanted pregnancy and it was not far from the findings of [Etokidem, et al.](#), who pegged the figure at 33.8% in his research.

The findings of this study also revealed that implant (20%) and condom (17.3%) were the most dominant methods of contraception used by the respondents. This was contrary to the findings of [Anyanwu, et al. \(2013\)](#) who in their study revealed that traditional methods of abstinence and prolonged breastfeeding were the commonest. The use of implant and condom as the most popular family planning method may be due to the level of exposure of the respondents being that they are resident within a suburban community that is dominated by schools and their high literacy level. Another important factor that might have encouraged the usage of condoms and implants could be the availability of some functional hospitals within the area.

The study indicated that 31.8% of the respondents had not used family planning at all in their lifetime. This was quite on the high side, though slightly lower when compared with the research carried out by [Duru, et al. \(2018\)](#) who reported that 51.7% of the respondents had never used family planning in their life.

CONCLUSIONS

The utilization of family planning in this survey was low, (31.8%) despite a reported high awareness and knowledge about family planning in the study area. The use of modern contraceptive methods of implant and short term barriers (condom) was found to be more rampant among women of childbearing age, with indications that age and religious factors influence the utilization of family planning and choices made. There is, therefore, a need for more campaign and public enlightenment programs on family planning utilization, importance, and benefits, crucially including the religious leaders, to fast track spread of information and further improve the use of family planning services.

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Ethics Approval: Ethical approval for this work was obtained from the Biological Sciences Department, Abubakar Tafawa Balewa University, Bauchi, Nigeria, and the kindred head of Hyaku-ya.

Conflict of Interest: None declared.

OrCID iDs: Nil identified.

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