FAMILY PLANNING SERVICES UTILIZATION AMONG WOMEN VISITING BETTER LIFE PRIMARY HEALTHCARE CENTRE FOR FAMILY PLANNING SERVICES IN ONDO CITY, ONDO STATE, NIGERIA

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ABSTRACT

BACKGROUND: Family planning services are essential to promote family health and reduce maternal morbidity and mortality by preventing unwanted and high-risk pregnancies. Services are aimed at women with serious underlying medical conditions, grand multipara, couples who have reached their desired family size, sexually active teenagers, and anyone else who needs or wants to avoid pregnancy.

AIM: This study aims to investigate the use of family planning services among women attending Better Life Primary Healthcare Center for Family Planning Services in Ondo City, Ondo State, Nigeria.

METHODOLOGY: This study included ninety-one (91) women who attended the health center for family planning services. For this study, a descriptive cross-sectional study and a systematic random sample were adopted. The results were analyzed using SPSS version 21.

RESULTS: The results show mean age of the respondents is 30.75 ± 6.207. 39 (42.9%) were between the age of 26 – 30 years, 82 (90.1%) were Christians, 23 (25.3 %) were traders and 53 (58.2%) had tertiary education. 27 (29.7%) had 1 – 3 children, 41 (45.1%) weighed between 60 – 70kg, 60 (65.9%) had blood pressure less than 120/80mmHg and 52 (57.1%) utilized Jadelle contraceptive for their family planning services.

CONCLUSION: Family planning (FP) has numerous benefits for the mother, the children, the family and society at large. All policies and programs aimed at encouraging women of childbearing age in the community to seek family planning services should be encouraged.

Keywords: Family, Planning, Utilization, Women

INTRODUCTION
Family planning (FP) has myriad health, social, and economic benefits for women, their families, and the nation. Family planning services can help improve maternal and child health and reduce unwanted pregnancies and unsafe abortions (Foreman & Player, 2013). Women are more likely to use family planning methods as educational and employment opportunities for women improve and they fully contribute to the economic well-being of the family (Kitula, 2017; Kassim, 2020). The correct use of contraceptive methods enables women to actively participate in family planning and at the same time to participate fully in working life. Family planning plays an important role in reducing malnutrition, improving child survival and maternal health (USAID, 2005). Several studies have also shown that promoting family planning reduces poverty, hunger, maternal and child mortality and contributes to the empowerment of women. Although there are different methods of birth control, there are two main categories: modern and traditional. Sterilization, intrauterine devices (IUDs), birth control implants, birth control injections, oral contraceptives, male and female condoms, emergency birth control pills, birth control patches, spermicidal foams and sponges are all modern birth control methods.

Hubacher and Trussell (2015) Calendar method, withdrawal and folk methods (Marquez, Kabamalan & Laguna, 2017), cervical mucus and lactational amenorrhea methods are examples of traditional contraceptive methods (Almalik, Mosleh & Almasrwe, 2018). Other traditional methods of contraception that are particularly prevalent in Africa include virginity verification and the use of traditional medicines and herbs (Shange, 2012). (Keele, Forste & Flake, 2005). Various initiatives have been launched at global and local levels to increase the use of contraceptives. This includes the inclusion of family planning-related goals in Goals 3 and 5 of the 2030 Agenda for Sustainable Development. In addition, other strategies and action plans, such as the One Plan II 2016-2020 and the Health Sector Strategic Plan IV 2015-2020, prioritize contraception (UNFPA, 2019). Similarly, the 2006 National Population Policy and the 2017 National Health Policy emphasize the importance of educating the public about the importance of family planning (FP) and involving non-governmental stakeholders in the delivery of family planning services (URT, 2006; UR, 2017). Access to information about contraception is a key component of any family planning program.

According to UNFPA (2019), family planning is not only a collection of methods and tools for deciding whether one wants to have children, but also information about how and when to become pregnant. One of the essential components of the family is the availability of information about contraceptive methods. Much emphasis has been placed on understanding family method preferences (Safari et al., 2019) as well as knowledge and awareness about contraceptive methods (Kapiga, Hunter & Nachtigal, 1992; Msoffe & Kiondo 2009; Kara, Benedicto & Mao, 2019). There is a need to identify factors that either facilitate or hinder married women’s decision to access contraceptive information to support family planning. Information about contraceptives is crucial for women who want to avoid unwanted pregnancies and thus help reduce induced or unsafe abortions. In their theory of information worlds, Jaeger and Burnett (2010) proposed a holistic approach to information access. Access to information about contraceptive methods for family planning has the potential not only to increase contraceptive acceptance, but also to make informed decisions about highly effective and trustworthy methods.

METHODS

Study area

The research was conducted in Better Life Primary Healthcare Centre, Ondo City, Ondo State Nigeria. The Better Life Primary Health Centre is located at Okelisa/Okedoko, Ondo West Local Government, Ondo State. It was established on 1st January 2007 and operates on 24 hours basis. The Better Life Primary Health Centre is licensed hospital by the Nigeria Ministry of Health and registered as Primary Health Care Centre. Ondo City is the second largest town in Ondo State, Nigeria.

Study population

This study comprises of ninety-one (91) women who came to the health centre for family planning services utilization at Better Life Primary Healthcare Centre, Ondo City, Ondo State, Nigeria.
Study design and sampling
This study was a cross-sectional descriptive study. A systematic random sampling was used in selecting ninety-one (91) participants for this study.

Data collection methods
The data was collected from ninety-one (91) participants using appropriate tools. The data comprises of two sections namely socio-demographic characteristics and information on the various contraceptive services they utilized during their visit to the Better Life Primary Healthcare Centre for planning services.

Data analysis
The results were analysed using Statistical Package for Service Solutions (SPSS) Version 21. The results were presented in percentage and frequency.

Ethical consideration
Approval to conduct this research was obtained from the coordinator of the primary healthcare centre. Informed consents were obtained from the participants and their confidentiality was ensured.

RESULTS
SECTION A: Socio-Demographics information of the participants (n = 91)

<table>
<thead>
<tr>
<th>Variables</th>
<th>Observable variables</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (years)</td>
<td>20 – 25 26 – 30 31 – 35 36 – 40 41 – 45 46 and above Total</td>
<td>13 39 19 14 5 1</td>
<td>100</td>
</tr>
<tr>
<td>Mean + Std Deviation = (30.75 + 6.207)</td>
<td>Mean + Std Deviation = (30.75 + 6.207)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sex</td>
<td>Female Total</td>
<td>91</td>
<td>100</td>
</tr>
<tr>
<td>Religion</td>
<td>Christianity Islam Total</td>
<td>82 9</td>
<td>90.1 9.9</td>
</tr>
<tr>
<td>Occupation</td>
<td>Banking Civil Servants Full Housewife Hair Dressing Nurse Student Tailoring Teaching Trading Total</td>
<td>6 8 7 10 1 7 14 15 23</td>
<td>91</td>
</tr>
<tr>
<td>Level of education</td>
<td>None Primary Secondary Tertiary Total</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SECTION B: Trends in family planning utilization of the participants (n = 91)

<table>
<thead>
<tr>
<th>Variables</th>
<th>Observable variables</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of child(ren) given birth to</td>
<td>1 – 3 4 – 6 7 and above Total</td>
<td>63 27 1</td>
<td>69.2 29.7 1.1</td>
</tr>
<tr>
<td>Weight (kg)</td>
<td>31 – 40 41 – 50 51 – 60 61 – 70 71 – 80 81 – 90 91 – 100 Total</td>
<td>2 8 28 41 9 2 1</td>
<td>2.2 8.8 30.8 45.1 9.9 2.2 1.1</td>
</tr>
<tr>
<td>Blood pressure (mmHg)</td>
<td>Less than 120/80 120/80 – 129/89 130/90 – 139/99 140/100 and above Total</td>
<td>60 26 2 91</td>
<td>65.9 28.6 2.2 100</td>
</tr>
<tr>
<td></td>
<td>129/89 130/90 – 139/99</td>
<td>26</td>
<td>28.6</td>
</tr>
<tr>
<td></td>
<td>140/100 and above Total</td>
<td>2</td>
<td>2.2</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>3.3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>91</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>
Variables Observable variables Frequency Percentage (%)
Types of contraceptives
commonly used
Jadelle Depovera 52 57.1
Noristerat Implanon 19 20.9
Total 13 14.3
91 100

DISCUSSION

Socio-Demographics information of the participants (n = 91)
The table above shows that the mean age and standard deviation of the respondents were (30.75 ± 6.207) and 39 (42.9%) were between 26 – 30 years old, 91 (100%) were females, 82 (90.1%) were Christians, 23 (25.3 %) were traders and 53 (58.2%) had tertiary education.

Trends in family planning utilization among the participants (n = 91)
27 (29.7%) had 1 – 3 children, 41 (45.1%) weighed between 60 – 70kg, 60 (65.9%) had blood pressure less than 120/80mmHg and 52 (57.1%) utilized Jadelle contraceptive for their family planning services.

CONCLUSION

The benefits of family planning to individuals, families, communities and society underscore its importance. Family planning (FP) has a plethora of health, social, and economic benefits. Family planning services can reduce malnutrition, infant and maternal morbidity and mortality, unwanted pregnancies, unsafe abortions, reduce the spread of sexually transmitted infections, address the problem of sexually transmitted infections, reduce infertility rates, and improve maternal and newborn health. All efforts and programs aimed at encouraging the use of family planning services by women of childbearing potential in the community should be encouraged.

References


