

FACTORS INFLUENCING THE USE OF MODERN BIRTH CONTROL METHODS IN NIGERIA

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Abstract

The paper examines the factors that influence the use of modern methods of birth control in Nigeria. These factors include religion, culture, education, and income, refusal by spouse, lack of trained personnel and lack of family planning clinics. Malthusian theory is relevant and suitable for this study and so it was adopted as the theoretical framework. Also, modern methods of birth control were identified and discussed; they are condom, oral contraceptives, female sterilization, male sterilization, Intrauterine Devices (IUDs), contraceptive sponges and emergency contraception. Therefore the paper recommends that there is need for government to include family planning services as part of the health care programme at federal, state and local levels. This will go a long way to address the problem of maternal and infant mortality. Government and non-governmental organizations should create more awareness especially at the grassroots to sensitize and educate people on birth control methods.

Key words: Birth control, Family planning, Modern birth control, Contraceptive

Introduction

The Nigerian Demographic Health Survey (NDHS, 2008) shows that the level of fertility rate in Nigeria is quite high because the Total Fertility Rate (TFR) is 5.7, which means that an average Nigerian woman will bear approximately six children throughout her reproductive years. Improving reproductive health is central to achieving the Millennium Development Goals (MDGs) an improving maternal health, reducing child mortality, eradicating extreme poverty, promoting gender equality and empowering women. In view of this, there is need for men and women to have access to safe and effective methods of fertility control. The decision on when or even whether to have children is a human right that everybody must enjoy.

According to Onah (2006), the current total fertility rate in Nigeria is 5.8% from 6.5% recorded previously. Such a high fertility rate is similar to those of African countries with contrast to 1.2 in most developed countries. Findings indicate that 25% of the world population lives in developed countries while the remaining 75% live in developing countries. This proportion, 75% of the population of the developing countries account for the 85% of all births worldwide, 93% of all infant and childhood deaths and 99% of all maternal deaths. It is noteworthy that the developing countries of Africa, Asia and Latin America have a greater proportion of the world population. For instance while average births per women in the year 2000 remained 1.5 for developed countries, 2.8 for Asian and Latin American/Carribbean countries and 5.3 for African countries. Also, out of six billion people in the world by 2000, about 4.9 billion or 81.6% live in the developing nations (NDHS, 2008).

Jones (2004) opines that in Africa, the problem of food shortage in feeding the population is overwhelming. This food shortage is associated with social problems such as poverty, scarcity

of land, hunger, and environmental degradation, political and social instability (Lacey, 1993; Furtado, 2008; Okoroafor, 2001). It has been observed that some developing countries like Korea, Brazil, Columbia, China, India and Bangladesh have successfully applied family planning programmes as a panacea for overpopulation (World Bank, 2004). Nigeria has also adopted family planning as a strategy to curb the high rate of population growth that the country is presently experiencing. Duze and Mohammed (2006) maintain that the adoption rate of the family planning method is still low.

International organizations like World Population Bureau (WPB), World Bank (WB), United Nations Development Programme (UNDP) and United Nations International Children Emergency Fund (UNICEF) have contributed immensely towards population control in developing countries. The 1994 International Conference on Population and Development (ICPD) held in Cairo sensitized governments and these organizations to formulate population policies in order to control population growth through improvement in the lives of women and the populace. Birth control refers to methods or devices which can be used to prevent pregnancy. It can also be regarded as fertility control or contraception. The planning and provision of birth control is called family planning: Family planning refers to a programme designed to assist couples to choose the number of children they want to have, the spacing and timing of their births. It involves the use of various techniques, devices, drugs, sexual practices in order to prevent conception or pregnancy.

Birth control methods have been used since ancient times but effective and safe methods only became available in the 20th century (Hurt, 2012). Some cultures do not encourage the use of modern birth control methods because they regard it as morally wrong and politically undesirable. Studies indicate that about 222 million women who want to avoid pregnancy in developing countries are not using modern birth control methods (UNPF, 2012; Carr, Gates, Mitchell and Shah, 2012). Some women prefer to use Natural Family Planning (NFP) methods because of the belief that artificial birth control methods have side effects. Effective birth control methods include condoms, contraceptive sponge, hormonal contraception including oral pills, patches, vaginal rings, diaphragms, injectable contraceptives and Intra Uterine Devices (IUDs) (Hurt, 2012). Emergency contraception can prevent pregnancy after unprotected sex. Permanent contraception includes sterilization by means such as vasectomy and tubal ligation.

However, NDHS (2008) reports that low level of family planning is a major factor in the high rate of fertility pattern and population growth rate with contraceptive prevalence rate of about 14.62 per cent for any method and 9.7% for modern method in 2008. Also, United Nations observed that family planning is necessary for the attainment of sustainable human development. About 70% of Nigerian's population live and work in the rural communities with a very high fertility rate (Ekong, 2003). The introduction and acceptance of modern birth control methods are very vital in controlling the population growth in Nigeria. Federal Office of statistics (FOS) report shows that the adoption of modern birth control methods rose from 1% in 1994 and declined to 7.1% in 1995. Report in 1998 also shows that only 5.1% of all women in the country were using family planning methods (FOS, 1997).

World Population Reference Bureau (WPRB, 2001) data clearly indicate that the population crisis experienced in Nigeria has a negative impact on the socio-economic development of the country. Findings show that the Nigerian population has grown steadily from about 56 million in 1960 to 127 million in 2001 and is projected to rise to 204 million in the coming years 2025. The implication is that developing countries particularly Nigeria will continue to experience

high birth rate which will eventually give rise to high population growth. Adopting modern birth control method is a very complex issue in Africa. According to Johnson (2002), African women draw on a complex social repertoire in making contraceptive choices. He went further to state that this does not depend on modern or traditional methods. Apart from controlling population there are other reasons for use of modern birth control methods. UNFPA (2006) reports that about 201 million women around the world do not have access to effective family planning methods.

Nwachukwu (2008) conducted a study on the use of modern birth control methods among rural communities in Imo State, Nigeria. The results of the study indicate that factors that militate against the use of modern birth control methods include health reaction, fear of the unknown, effects, cost, spouse disapproval, religious belief, cultural disapproval, shyness, procurement difficulties, ignorance or inadequate information, moral disapproval, long distances of sources and poor service of Family Planning Clinics and Planned Parenthood Federation of Nigeria. Findings of the study show that modern birth control methods were still very low in the study area and it was also observed that only 30% of the respondents used modern birth control methods while the majority of them relied on the traditional methods of birth control. In another study conducted by (Maaji, 2011) on acceptance of family planning among rural dwellers in Kano State, Nigeria, results show that factors influencing fertility pattern among rural dwellers include income levels and education. Some of the factors that are responsible for high fertility and population growth among rural dwellers include ignorance and illiteracy. Also, poor quality services and lack of awareness are responsible for low level of contraceptive prevalence among rural dwellers.

Theoretical Orientation

This paper is anchored on the Malthusian theory on population. Malthus was widely known for his theories about change in population. Thomas Robert Malthus (1766 – 1834); famous theorist of population highlighted the potential dangers of over population of the world which would increase in geometric proportion while the food resources available for them would increase only in arithmetic proportion. In simple words, if human population was allowed to increase in an uncontrollable way, then the number of people would increase at a faster rate when human population reaches the limit up to which food sources could not support it, any further increase would lead to population crash caused by natural phenomena like famine or disease. Malthus regarded ideals of future improvement in the lot of humanity with skepticism, considering that throughout history, a segment of every human population seemed relegated to poverty. He explained this phenomenon by arguing that population growth generally expanded in times and in regions of plenty until the size of the population relative to the primary resources cause distress. Malthus puts forth his views that opposed the belief of scholars like Marques de Condorcet and William Godwin who were optimistic about population growth in England.

Malthus provided two types of checks to reduce the excessive procreation. He argued that two types of checks hold population within resource limits and they are positive checks and preventive checks. Positive checks raise the death rate and these include hunger, disease and war. Preventive checks lower the birth rate and these include abortion, birth control, prostitution, postponement of marriage and celibacy. Preventive checks as proposed by Malthus are very relevant to the issue of birth control which is a major variable in this study. Malthus was pessimistic of exploding population when the commensurate food supply was not in sight. He was opposed to the popular view in 18th century Europe that society improved until it reached a stage of perfection. According to Malthus, the dangers of population growth precluded progress towards a utopian society. He believes that the power of population is

indefinitely greater than the power in the earth to produce subsistence for man (Evans, 1998). Malthus stated that the increase of population is limited by the means of subsistence. He also argued that population increases whenever means of subsistence increase. According to him, the superior power of population is usually repressed and the actual population kept equal to the means of subsistence by misery and vice (Rohe, 1997)

Ehrlich and Ehrlich (1994) opine that the population of any society depends on its territory or physical environment for subsistence. Food and other needs are usually derived directly or indirectly from the environment which consists of land. It is noteworthy that population of a nation may increase without a corresponding increase in land on which this population depends on for sustenance. These scholars held the view that the key to understanding over population is not population density, but the number of people in an area relative to its resources and the capacity of the environment to sustain human activities.

Malthusian theory was adopted as the framework for this study because it addresses the issue of population i.e. the number of people in a nation. Modern birth control methods are strategies used in family planning aim at regulating fertility rate of individuals in the society. In the same way, Malthusian theory emphasizes the fact that some preventive measures should be taken to avoid population explosion. Therefore, Malthus theory on population is the most suitable, relevant and appropriate theory for this study because it best explains the phenomenon at hand.

Modern Methods of Birth Control in Nigeria

Some common methods of birth control used in Nigeria are discussed in this section. They are:

1. Hormonal Contraceptives

This method of birth control is used to prevent ovulation and fertilization. Hormonal contraceptives include oral pills and injectables. The combined oral contraceptive pill popularly known as pill is the most commonly used contraceptive among married and unmarried females. They are available in chemists, pharmacy shops and health institutions in the country. Some of the disadvantages of using this method include blood clots that can cause permanent disability, cardiovascular problems and death. Brita, Nobre and Vieira (2011) argue that the benefits are greater than the risk of pregnancy because pregnancy also increases those risks. However, oral contraceptives reduce the risk of ovarian cancer but increase the risk of breast cancer and cervical cancer. There is a general belief that prolonged use of oral contraceptive pills can lead to permanent sterility. This may be the reason why some people will not adopt this method of birth control but will prefer to use natural family planning methods such as Billings Ovulation Method (BOM). Some women who may want to use this method do not have adequate information on how to use it and so may resort to using other methods which they think are more effective in preventing pregnancy. This method of birth control is applicable to only females.

2. Condoms

The most commonly used method of birth control in Nigeria is condom. We have two types of condom, male condoms and female condoms. Male condom is usually put on a man's erect penis to prevent sperm from entering a woman's vagina. Condoms are made of latex. Female condom is made of nitrile. Demographic and Health Survey (DHS, 2003) reports indicate that the condom is the main birth control method known of and used by Nigerian women of reproductive age. According to this report, the extensive marketing of condoms in response to the Human Immuno deficiency Virus

(HIV) and Acquired Immune Deficiency Syndrome (AIDS) epidemic, with the active involvement of both government and Non-Governmental Organisations (NGOs), has been responsible for this increased awareness and subsequent increase in condom use. Condoms are cheaper, readily available, easy to use and have few side effects. Condoms are regarded as barrier method of birth control because it prevents pregnancy by physically preventing sperm from entering the uterus. Individuals using this method of birth control should ensure that they are used properly in order to prevent unwanted pregnancy.

3. **Intrauterine Devices (IUDs)**

Intrauterine device commonly known as IUD is a small T-shaped birth control device which contains progesterone or copper. IUDs are usually introduced into the uterus to prevent pregnancy. This method of birth control is reversible and very effective. An advantage of copper IUD is that it can provide emergency contraception up to five days after unprotected sex. In Nigeria, older married women prefer to use IUD while young married women are reluctant to use this birth control method because of its side effects. Reasons for non adoption of this method among young married women include fear of infertility, heavy menstrual flow, painful cramps disapproval by spouse and menopause. IUDs do not contain hormones and because of this reason, breastfeeding mothers prefer to use it. After removal of the device fertility usually return immediately.

4. **Contraceptive Sponges**

This is another barrier contraceptive that is usually combined with spermicide. To be effective they are usually inserted in the vagina before sexual intercourse. The sponge can be inserted 24 hours before sexual intercourse and must be left for at least six hours after insertion. They are used to cover the cervix. Some women are allergic to this method. Disadvantages of this method include urinary tract infections and yeast infections.

5. **Female Sterilization**

This method of birth control is commonly used in developed countries than in developing countries like Nigeria. Female sterilization entails a method known as tubal ligation. This involves tying of the fallopian tubes to prevent pregnancy. This method is permanent but with advancement in medical science and technology, it is possible to attempt a tubal reversal to reconnect the fallopian tubes in females. The demand for this method of birth control is low due to religious belief, ignorance, cost and lack of skilled personnel. Some women regret the decision after adopting this method. There are certain problems associated with female sterilization and they include uterine perforation, bladder and intestinal injuries, intra abdominal bleeding. Tubal ligation decreases the risk of ovarian cancer (Hurt, 2012).

6. **Male Sterilization**

Surgical sterilization for men is known as vasectomy. Vasectomy is a minor surgical procedure where the vas deferentia of a man are severed and then tied or sealed in a manner which prevents sperm from entering the seminal stream (ejaculate). This method of birth control is very rare among men. The demand for this method is very low due to the belief and attitude of men. Many men are not interested in family planning methods particularly male sterilization. Nigerian men will like to prove that

they are fertile and can have as many children as they wish. This method is an obstacle to realizing this dream. At University College Hospital Ibadan, Nigeria, only two cases of voluntary vasectomy were performed over a 30-year period while in Jos, Northern Nigeria, only 10 cases of vasectomy were recorded over a 16-year period compared with 3,675 female sterilizations (Maaji, 2011). Although, sterilization is considered to be permanent and irreversible, it is possible to attempt a vasectomy reversal to reconnect the vas deferentia in males. However, the rate of success usually depends on the original technique and the person's age.

7. **Emergency Contraceptives**

Many people in Nigeria are not aware and knowledgeable about the use of emergency contraceptives. Emergency contraceptives are medications (morning-after pills) or devices used immediately after unprotected sexual intercourse with the intent to prevent pregnancy (Gizzo, Fanelli, Sarcardi, Patrelli and Omar, 2012). Lack of knowledge of this method leads to increase in maternal mortality rate and induced abortions which occur as a consequence of unwanted pregnancies. A cross-sectional sample of potential providers of emergency contraceptives conducted by Society for Family Health shows that 81% approved of this method of birth control. Some reasons for disapproval of this method include religion (5%), potential side effects (3%) and the belief that it leads to permanent infertility (29%). Also, results of the study indicate that only 80% of the providers had training in emergency contraceptives, only two providers knew both the correct dose and timing. It has been observed that private medical practitioners provide a substantial proportion of family planning and reproductive health services in Nigeria but a study conducted by Mustapha (2000) shows that 79.9% of doctors correctly described emergency contraceptive methods, only 23% reported that they had emergency contraceptive products in their clinics and only 13.8% used the correct brand currently available in Nigeria. The study also indicates that a large proportion of the doctors did not know the exact timing of this method in relation to sexual intercourse while only a few gave correct names and dosage of administration. This method of birth control is used by females to prevent ovulation and fertilization. Providing morning after pills to women in advance does not affect rates of sexually transmitted infection, condom use, pregnancy rates or sexual risk – taking behavior (Kripke, 2007).

Factors influencing use of Modern Birth Control Methods in Nigeria

Birth control increases economic growth because of fewer dependent children, more women participating in the workforce and less consumption of scarce resources. Also, greater access to birth control methods will lead to improvement in women's earnings, assets, body mass indexes, children's schooling and body mass indexes (Canning and Schultz, 2012). In spite of the fact that birth control methods can be used to regulate fertility and prevent pregnancy, certain factors influence the use of modern birth control methods in Nigeria. These factors are as follows

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1. **Culture**

Culture encourages more children, female compliance to enhance their economic status and increase their perceived social security for their old age (by having many children to care for them when they are old). Culture is a very important factor influencing the use of modern birth control methods. In African society and Nigeria in particular, people attach so much importance to children. In traditional African society, polygny is a common marriage practice where a man is entitled to marry two or more women. The number of wives a man has is a yardstick for measuring his wealth. It then implies

that the more wives, the more children and more hands to work in the farm. There is a belief that the major reason for marriage is to have children. With this kind of reasoning and orientation, some people still find it difficult to adopt birth control methods to prevent pregnancy.

2. **Religion**

Different religions vary in their perceptions of the ethics of birth control. For instance, the Catholic Church encourages, supports and accepts only Natural Family Planning (NFP) but strongly discourages the use of artificial birth control methods. Children are regarded as gifts from God and so they should not be prevented from coming into the world. It is noteworthy that some Catholics in both developed and developing countries still accept and use modern methods of birth control. Among the Muslims, contraceptives are allowed as long as they are not harmful to the health but their use is discouraged by some people. Some other religious groups believe that preventing conception is ethically acceptable while intervening after conception has occurred is not acceptable.

3. **Education**

Education is another important factor that influences the acceptance and use of modern birth control methods. Educated people are more likely to embrace these methods than uneducated people. In a study conducted in Kano, it was observed that the level of education of people has a significant relationship with family size. Mustapha (2006) conducted a study in Northern Nigeria on the influence of education on contraceptive use. Results of the study indicate that there is a positive relationship between education and contraceptive use. The impact of education is that it empowers individuals to make rational decisions and understand that it is possible to control fertility. The obstacle to acceptance of modern birth control methods is high level of illiteracy.

4. **Income**

Income also has a significant relationship with the use of modern birth control methods. Some people may have the zeal to adopt birth control methods but due to financial constraint, they cannot afford it. Such people are likely to have many children whom they cannot cater for because they do not control their fertility or prevent pregnancy as a result of lack of finance. This can lead to high rate of infant mortality and maternal mortality.

5. **Lack of trained Personnel**

Trained and skilled personnel are needed to provide services to patients who want to adopt any of the birth control methods. Some of these health service providers lack adequate training and so they are not in a better position to inform their clients about how to use the method they have chosen. This is a problem because when people are not well informed, the method will not be effective thereby leading to unwanted pregnancy and consequently abortions.

6. **Lack of Family Planning Clinics**

In Nigeria, most of the family planning clinics are located in the urban areas. It then implies that people living in the rural areas are cut off and so they do not have access to these clinics and they cannot get the services of the health workers. Studies in Nigeria show that women in the rural areas still use the traditional methods of birth control because they are not aware of the modern birth control methods.

7. **Disapproval by spouse**

In some situations, it is the man that makes the decision on the particular method of birth control to be used. In an ideal situation, the couple should decide on which method they want to use to control fertility. Nigeria is a patriarchal society where men make decisions and women are expected to obey. Some men believe that allowing their wives to use any method of birth control will mean giving them licence to be promiscuous and encouraging them to have extra-marital affairs with other men. Disapproval by the husband is a contributory factor to low demand for use of birth control in Nigeria especially when a man is suspicious of his wife and does not trust her.

Conclusion and Recommendations

Family planning was introduced in Nigeria since 30 years ago but it is still surprising that many people are not keen to adopt any of these birth control methods available. Traditional methods and natural family planning methods are preferable to artificial modern birth control methods. In most developed countries of the world, people are aware and knowledgeable about these modern birth control methods and there is high demand for them as a means of controlling fertility, preventing conception or pregnancy. The story is different in a developing country like Nigeria where many people are reluctant and unwilling to use any of these birth control methods because of ignorance and the superstitious belief that usage can lead to permanent sterility.

There is need for government to include family planning services as part of the health care programme at federal, state and local levels. This will go a long way in addressing the problem of maternal and infant mortality. For more education on the benefits of use of birth control methods, religious leaders should be enlightened on the need for adopting birth control methods because religion has a tremendous impact on the decision to use birth control methods. Government and non-governmental organizations should create more awareness especially at the grassroot to sensitize and educate people on birth control methods. Men should also be sensitized on this issue and not only women

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