

Postpartum Resumption of Sexual Activity and Use of Modern Contraceptives among Women Attending Post Natal Clinics in Eleme Local Government Area, Rivers, Nigeria

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Abstract

Conception and child birth come with hormonal, physical and social changes that affect sexual health of couple. This paper investigated postpartum resumption of sexual activity and use of modern contraceptive among women attending post natal clinics in Eleme Local Government Area of Rivers State. A descriptive cross sectional survey design was adopted for the study. The population of the study consisted of all women attending post natal clinic in Eleme Local Government area of Rivers State. A sample size of 256 women attending postnatal clinic between June and July 2017 was used for the study. A pretested semi-structured questionnaire was used to collect data. Data collected were analyzed using percentages and binary logistic regression at 0.05 significant level. The findings of the study showed that 51.6% of the respondents had resumed sexual activity. Furthermore, only 14.5% resumed before 6weeks while 37.1% after 6weeks post-partum. Also, 23.8% used contraceptive on resumption of sexual activities. The finding of the study showed that resumption of sexual activity post-partum significantly predict modern contraceptive use ($p=0.031$). Also the finding of the study showed that time of resumption significantly predict modern contraceptive use ($p= 0.047$). Conclusively, resumption of post-partum sexual activity predicts modern contraceptive use. This paper recommended that contraceptive use should be emphasized at post natal clinic.

Keywords: Postpartum, sexual resumption, contraceptive use, Post Natal, Eleme

Introduction

Conception and childbirth are unique period in maternal life. These periods are accompanied by changes in hormonal, physical and social health of the woman that have the tendencies of influencing sexuality and sexual health of the couples (Olugbenga-Bello, Oke, Owonikoko, Akande, Fawole, Dada, Ernest, Fabusuyi, Fasheyi, & Idowu, 2017; Anzaku, & Mikah, 2014). Sexual health is one of the vital part of maternal health. Sexual health is the integration of the physical, emotional, intellectual and social aspect of sexual being in a way that is passively enriching and enhance personality, communication and love (WHO, 2018). Maternal sexual function changes during pregnancy and postpartum period. This is explained by the fact during this period the pelvic floor muscles and the perineum are damaged due to laceration and mode of delivery (Song, Ishii, Toda, Tominatsu, Katsuyama, Nakamura, Nakai & Shimoya, 2014). Postpartum period is the period beginning immediately the birth of the child and extending for six weeks or 45days (Danasu, Sridevi, & Sangeetha, 2016). During the postpartum period sexual dysfunctions that may arise include superficial and deep dyspareunia, vagina dryness, vagina tightness, or loss of sexual desire (Acele, & Karacam, 2012; Signorello, Harlow, Chekos & Rekke, 2001; Barrett, Pendry, Peacock, Victor, Thakar, & Manyonda 2000).

In most traditional polygamous societies, engaging in sexually activity before a child is fully weaned is a salient taboo. Most men after delivery of the child shift their attention to other wives allowing for breastfeeding for about 2 to 3 years without sexual intercourse to prevent pregnancies (Dada, Akesode, Olanrewaju, Olowo, Sule-Odu, Fakoya... 2002). This is not so in recent times as shown in bodies of evidence from literature, as time of resumption of sexual activities ranges from 5 to 8weeks after delivery or in some cases one year after delivery (Rowland, Foxcroft, Hopman & Patel, 2005; Hanafy & El-ESawy, 2016). This a shift from the salient taboos inhibiting engaging in sexual activities after child birth in most traditional societies and could be explained by the prevailing monogamous marital relationship. Factors that could explain delay in the time of resumption of sexual activities postpartum ranges from decreased libido, inability to reach orgasm, dyspareunia and inability to get sexual pleasure, fear of becoming pregnant, mode of delivery (Amiri, Omidvar, Bakhtiari, & Hajiahmadi, 2017).

The resumption of postpartum sexual intercourse increases the vulnerability of mothers to unintended pregnancies (Olugbenga-Bello, et. al., 2017, Anzaku, & Mikah, 2014). A woman who is sexually active after delivery not using an effective contraceptive method increases her vulnerability to pregnancy in the month before her first menstruation (Borda, Winfrey, & McKaig, 2010). About 214 million women were estimated to have an

unmet need for modern contraception developing regions (Guttmacher Institute, 2018). Despite the provision of information about contraceptive during antenatal and postnatal cares, most women resume sexual intercourse within 6 weeks postpartum without the use of a modern contraceptive method in many countries (Borda, et.al, 2010; Nyengidiki, & Eyindah 2008). This behavior results in women having babies too soon which has the tendency of increasing maternal morbidity and mortality, thereby increasing maternal mortality rate in a given country. Eleme, is a traditional society in Rivers State where it is expected that women will delay resumption of sexual activities postpartum. However, there is a paucity of studies to ascertain whether women abstain for sexual activities postpartum. This study therefore examined postpartum resumption of sexual activities and use of contraceptive among woman attending postnatal clinics in Eleme Local Government Areas, Rivers, Nigeria.

Methodology

Study Design

A descriptive cross sectional study design was used for the study to determine the resumption of sexual activities and the use of contraceptives among post natal mothers in Eleme Local Government Area of Rivers State. The population of the study consisted of all mothers who have delivered and are attending a post natal clinic in Eleme Local Government Area between the months of June and July 2017. The sample size for the study consisted of 256 postpartum mothers in Eleme Local Government Area who attended post natal visit between the months of June and July 2017 in the five comprehensive health centers.

A pretested semi-structured questionnaire consisting of seven sections A-C was adopted to extract information on the variables of the study. Section A addressed the socio-demographic characteristics of the respondents. Section B addressed the time of return of sexual activities among post natal mothers, it consisted of (3) items. Section C addressed the percentage of mothers who use contraceptives in their post natal period and method of contraceptives used. Data collected were entered into the computer using Statistical Package for Social Sciences (SPSS 20.0) software for analysis and data were presented using frequency, percentages and binary logistic regression.

Results

Table 1: Percentage distribution showing proportion of respondents who had resumed sexual activities postpartum

Response	Frequency	Percentage
Yes	132	51.6
No	124	48.4
Total	256	100.0

Table 1 shows the proportion of respondents who had resumed sexual activities postpartum. The result of the study show that 51.6% of respondents had resumed sexual activities postpartum while 48.4% had not resumed sexual activities postpartum.

Table 2: Percentage distribution showing time of resumption of sexual activities post-partum

Time of resumption	Frequency	Percentage
Before 6 weeks	37	28.0
After 6 weeks	95	72.0
Total	132	100.0

Table 2 shows percentage distribution of time resumption of sexual activities postpartum. The finding of the study reveal that of the respondents who had resumed sexual activities 72.0% resumed after 6 week postpartum while 28.0% resumed before 6 weeks.

Table 3: Percentage distribution showing use of contraceptive on resumption of sexual activities post-partum

Use of contraceptives	Frequency	Percentage
Yes	61	46.2
No	71	53.8
Total	132	100.0

Types of contraceptives use

Condom	23	37.7
Oral pills	3	4.9
Injectibles	5	8.2
Safe periods	26	42.6
Implants	4	6.6

Table 3 shows the percentage distribution on contraceptive use on resumption of sexual activities postpartum. The finding of the study shows that 46.2% of the study respondents used contraceptive on resumption of sexual activities postpartum. Of the 61 persons who used contraceptive on resumption of sexual activities 37.7% used condom, 42.6% safe periods, 8.2% oral contraceptives, 6.6% Implants.

Table 4: Binary logistic regression analysis showing the likelihood of contraceptive use on resumption of sexual activities

	B	S.E	Wald	df	Sig	Odds ratio	95% CI for Exp(B)	
							Lower	Upper
Not resumed sexual activities	Ref							
Resumption of sexual activities	-.655	.303	4.677	1	.031	.519	.287	.940

Table 4 shows the likelihood of using contraceptive on resumption of sexual activities. The result of the study shows a significant relationship between resumption of sexual activities and use of condom ($p=0.031$). The result also show that as women resume sexual activities postpartum there is a decrease in contraceptive use ($B= -.655$) and that respondents who had resumed sexual activities postpartum are 1.9 times less likely to contraceptive compared to those who had not resumed sexual activities postpartum($OR=0.519$, 95%CI: .287-.940).

Table 5: Binary logistic regression analysis showing the likelihood of contraceptive use on time of resumption of sexual activities

Time of resumption	B	S.E	Wald	df	Sig	Odds ratio	95% CI for Exp(B)	
							Lower	Upper
Before 6 weeks	Ref							
After 6 week	.702	.410	2933	1	.047	2.017	.904	4.503

Table 5 show the likelihood of contraceptives use on time of resumption of sexual activities postpartum. The finding of the study showed that significantly respondents who resumed sexual activities after 6 weeks postpartum are 2 times ($OR=2.017$, 95% CI: 0.904-4.503) more likely to use contraceptives compared to respondent who resumed before 6 weeks postpartum. The result also showed that as time of resumption of sexual activities increases, contraceptive use prevalence also increase ($\beta =0.702$)

Discussion

The result of the study showed that more than half of the study sample had resumed sexual activity postpartum. This may be due to shift in form of marriage as traditional African are polygamous. The high proportion of return to sexual activities in relation to traditional practices is a pointer that there is a shift in the post partum sexual abstinence which were the practice in traditional society. This shift may be explained by the fact most marriage in societies where Christianity is the other of the day are monogamous as Christian religion forbids polygamy.

This rate is lower than the rate (67.6%) observed by Anzaku and Mikah (2014) in Jos, Nigeria on postpartum resumption of sexual activity, sexual morbidity and use of modern contraceptives among Nigerian women in Jos. The difference in the proportion of women who had resumed sexual activity postpartum could be attributable to cultural and religious diversities in these part of the country. In the Northern part of Nigeria polygamy is still the other of the day which might have

The result further showed that low proportion of women resumed sexual activity before 6weeks postpartum. This could be attributable to pains due to tear of the vagina during delivery and the fear of pregnancy when menses had not returned. This finding is comparable to the findings of Adanikin, Awoleke, Adeyiolu, Alao



and Adanikin (2014) on resumption of intercourse after childbirth in southwest Nigeria and the study of Bien, Rzonca, Iwanowicz-Palus and Lenkiewicz (2016) on Factors affecting sexual activity of women after childbirth. The similarities may be connected to the sampled population of the study.

The result also indicated that postpartum contraceptive prevalence of 46.2%. Contraceptive prevalence in this study is low and could be attributable to perception that breastfeeding could provide sufficient contraception. The finding of the study is comparable to the finding of Gizaw, Zewdu, Abuhay and Bayu, (2017) on extended postpartum modern contraceptive utilization and associated factors among women in Gozamen district, east Gojam zone, Northwest Ethiopia. The finding of this study is higher than the finding of the study of Anzaku and Mikah (2014) where contraceptive rate among postpartum women was 19.1%. The findings of the study is also higher than the findings of Mengesha, Worku and Feleke (2015) on contraceptive adoption in the extended postpartum period in Northwest Ethiopia. The finding of the study is higher than the finding of Ujah, Ocheke, Mutihir, Okopi and Ujah (2017) on postpartum contraception where 39.8%. The difference in the rate as indicated in this study could be attributable to the free contraceptive commodities in primary health centers in Rivers State. The finding of the study further revealed that more than 50% of the study respondents are not using contraceptive on resumption of sexual activity postpartum. This is quite worrisome, as it indicates that these large cohorts of women are at risk of pregnancy which are usually unwanted pregnancies. In Nigeria abortion is a criminal offence, therefore most unwanted pregnancy are terminated in an unsafe environment and by quack posing risk to complication. There is therefore an urgent need to intensify the use of contraceptive at post natal clinics and at immunization clinic to improve maternal health.

The odds of contraceptive use significantly increases with time of resumption of sexual activity. Women who resumed sexual activity after 6 weeks were about 2 times more likely to use contraceptives compared to those who resumed before 6 weeks. Plausible explanation for the use of contraceptive might be as a result of the fact that after 6 weeks vagina pains might have reduce in most of the women and that some at this time menses had not returned.

Conclusion

Conclusively, the finding of the study showed that majority of the study respondents had resumed sexual activity and majority resumed sexual activity after 6 weeks postpartum. Contraceptive use prevalence among study respondents was high. The result also showed that time of resumption significantly predict contraceptive use.

Recommendations

Based on the findings of the study, the following recommendations were postulated.

- There is an urgent need for Public Health Nurses and other medical personnel at the primary health centers to intensify health counselling on contraceptive use immediately after delivery to mother to improve contraceptive use before 6 weeks postpartum.
- Community stakeholders should openly encourage women at the community level to use contraceptives as the result of the study showed that women resume sexual activity before 1 year. Implying the eroding cultural beliefs.
- Health personnel discussion with couples about postpartum sexuality and contraception should be part of routine antenatal and immediate postpartum care in order to prevent unplanned pregnancies and improve their health seeking behavior
- Non-Governmental Organizations should partner with Healthcare providers and family planning service providers in other to indulge in regular campaign on contraceptive use to help improve contraceptive utilization postnatal.
- Mass media such as radio, television, and newspaper should be used to provide culturally appropriate education to women about sexual resumption and use of contraceptives.

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