Experiences, Perception and Preference of Newly Delivered Mothers towards Family Planning in Ekiti State University Teaching Hospital, Ado-Ekiti, Ekiti State, Nigeria.

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ABSTRACT : This study measured perception, experiences and preference towards family planning among 98 selected newly delivered mothers in Ekiti State University Teaching Hospital (EKSUTH), Ado-Ekiti, Ekiti State, Nigeria. Descriptive, cross-sectional hospital-based survey was use. Data was collected via Interviewer-administered semi-structured questionnaire. Descriptive and inferential statics were used for data analysis. Result revealed thatall the respondents are aware of family planning. The perception about family planning was also positive with 87.8% of women indicating at least one benefit of family planning while only 27.6% ever use any form of modern family planning method before. On experiences with adverse effects related to family planning, 12(44.4%) experienced mild and bearable adverse effects, 3 (11.1%) indicated excess weight gain, 5 (18.5%) experienced severe irregular bleeding, another 5 (18.5% experienced heavy bleeding while 1 (3.7%) claimed to have frequent severe headache. When asked about intention to use family planning method 62.2% were willing to use family planning, out of which 28.6% indicate willingness to use if can be convinced by the service providers. On preferred method, condom was mostly preferred with 18.2% women indicating intentions, followed by implant which 16.3% wished to use. The study concludes that Family planning utilization is very low. Therefore family planning counseling is urgently needed to improve uptake of family planning in Ekiti State.

Key words: family planning, perception, experiences, preferences, newly delivered mothers

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I. INTRODUCTION

Pregnancy is not a disease, but period of pregnancy is associated with lot of risks to women. Globally, an estimated 585 000 women die each year as a result of complications from pregnancy and child birth (Hogan, et. al., 2010). The World Health Organization (WHO, 2011) indicates that more than half of these death occur in developing countries. Family planning is widely acknowledged as an important intervention that can reduce maternal and child mortality and improves maternal health by ensuring adequate birth spacing, preventing unwanted pregnancies and unsafe abortions (WHO, 2011). Family planning has direct impact on women's health and consequences of pregnancy yet a lot of women in developing countries have unmet need of family planning. Short pregnancy interval can increases the risk of maternal and child mortality and morbidity. Specifically, short pregnancy interval is closely associated with urethro-placenta bleeding disorders (abruption placentae and placenta praevia), uterine rupture, (Conde-Agudelo, Rosas-Bermudez &Kafury-Goeta, 2007). Family planning use during the first year postpartum has the potential to significantly reduce the number of unplanned pregnancies at the period when subsequent pregnancy holds the greatest risk for mother and baby (Conde -Agudelo, Rosas -Bermudez, &Kafury-Goeta, 2007; Anzaku&Mikah, 2014). Previous studies have indicated that most women wish to space successive children by at least two years. Others studies revealed thatas a lot of women in developing countries resume sexual activities shortly after child birth without the use contraceptives. For example, Anzaku and Mikah, (2014) in their study among Nigerian women observed that sexual intercourse was resuming by 67.6 % of women within 8 weeks postpartum and only 19.1 % of them use either barrier method or any form of contraceptives. These findings revealed the reasons why post partum family planning counseling should be an essential part of the midwives' roles. Without early introduction of family planning, unplanned pregnancy and short birth intervals are imminent. In Ekiti state, studies have indicated high knowledge of family planning with poor uptake (Durowade, et al, 2017; Osakinle 2010). Also, religion, culture, poor access and fear of side effects have been indicated as reasons for low uptake of family planning in the state just has was found in other states of Nigeria Mairiga, Kullima, Bako&Kolo, 2010: Durowade et al., 2017)

Despite the availability of several studies related to family planning in Nigeria and in Ekiti state, there exist gap in literature about perceptions, experiences and preferences of women especially the newly delivered mothers. Experiences with past utilization of family planning can be part of important reasons why a woman will like to use or not use family planning. This study was based on this background and investigated experiences, perception and preferences towards family planning among newly delivered mothers in Ekiti State University Teaching Hospital (EKSUTH), Ado-Ekiti.

Objectives of the Study

The general objective of the study was to investigate perceptions, experiences and preference related to family planning among newly delivered mothers in Ekiti State University Teaching Hospital (EKSUTH) Specific objective of the study were to:

- 1. Ascertain the prevalence of use of family planning among newly delivered mothers
- 2. Examine the awareness and perceptions of newly delivered mothers
- 3. Investigate their experiences with family planning use and
- 4. Determined the most preferred method of family planning among newly-delivered mothers

Research Questions

In order to achieve the stated objectives, the following research questions were raised and answered descriptively

- 1. What is the prevalence of family planning use among newly delivered mothers in EKSUTH?
- 2. What are the perceptions of newly delivered mothers in Ekiti State towards family planning?
- 3. What methods of family planning will be preferred by newly delivered mothers?
- 4. What method of family planning is preferred by newly delivered mothers in EKSUTH?

II. MATERIALS AND METHOD

Research Design

The study employed a descriptive, cross-sectional hospital-based survey to investigate perceptions, experiences and preferences towards family planning among newly delivered mothers in EKSUTH

Sample and Sampling Techniques

Respondents were 98 newly delivered mothers who delivered in EKSUTH, labour ward between Augustand October, 2018. Eligible criteria were being newly delivered mother of a live baby and willingness to participate voluntarily in the survey. Purposivesampling technique was used; labour ward was purposively selected.

Sample Size Calculation

Taro Yamane formula for sample size determination was used to calculate the sample size n=N/(1+N(e)2). Where n= sample size required, N= target population and e= sampling error which is taken as 0.05 n=120/(1+120(0.05)2) n=120/(1+120(0.0025)) n=120/(1+0.3) n=120/(1+0.3) n=120/(1.3) n=92.30 Approximately 92

Research Instrument

Interviewer-administered semi-structured questionnaire was used for data collection. The instrument contain five (5) sections, section A focused on demographic data of the respondents, section B shall consist of questions to elicit information prevalence of family planning use among newly delivered mothers, section C consist of questions on perceptions of respondents towards family planning, section D consist of questions on experiences of respondents with family planning and section E consist of questions to elicit information on respondents preferred method of family planning.

Validity and Reliability of the Instrument

Face and content validity of the instrument was carried out by the research supervisor and the internal consistency of the questionnaire was assessed using Cronbach's alpha and was found to be 0.75. which means the instrument is reliable

Data Collection and Procedure

Labour wards nurses administered the questionnaire to newly delivered mothers within few hours after delivery. After giving detailed description of the study, verbal informed consent was obtained from newly delivered mothers who met the inclusion criteria. The questionnaire was administered to mothers within few hours after delivery.

Ethics approval

Ethical approval to carry out this study was obtained from the Ethics and Research Committee of Ekiti State University Teaching Hospital, Ado- Ekiti, Ekiti state, Nigeria. Permissions were obtained from all newly delivered mothers before the commencement of the survey. Verbal informed consent was obtained from all the respondents prior to the inclusion in the study. Their right to declining participation was also explained to them.

Data analysis

The questionnaires were checked for completeness and consistencies after which data was coded, entered, cleaned and analysedusing the Statistical Package for the Social Science (SPSS version 20.0). simple descriptive statistics was used to present data.

III. RESULTS

The socio- demography characteristics of the respondents were analyzed using frequency counts and percentages as shown in table 1. The respondents were within the ages of 16-45. 66 out of 98 (67.3%) respondents were within the ages of 26-35; also majority of the respondents 53 (54.1%) had completed first degree in University. On the number of previous live birth 29 (29.6%) were primi-para, others were multi-para women with 28.6% of them having two children, 20.4% having three children eight percent of them ,having four and the remaining 13% having up to five children and above.

Table 1: Demographic characte	eristics of the respondents
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Demography Data n=98	Ν		%	
Age				
16-25	1515	15.3	15.3	
26-35	66 66	67.3	67.3	
36-45	17 17	17.4	17.4	
Educational level				
junior secondary school	4 4	4.1	4.1	
senior secondary school	19 19	19.4	19.4	
post secondary education but not university	22 22	22.4	22.4	
University Graduates	53 53	54.1	54.4	
Number of previous live birth	29		29.6	
1	29 28	29.6	28.6	
2	28 20	28.6	20.4	
3	20.8	20.4	8.2	
4	8 13	8.2	13.3	
5 and above	13	13,3		

Experiences and perception towards family planning

Table 2; shows the results of newly delivered mothers 'experiences with and perceptions towards family planning

Experiences with family planning	(n=98) N	%	
Have you heard of family planning	ng before?		
Yes	98	100	
No	0	0	
Used family planning methods be	fore		
Yes	27	27.6	
No	71	72.4	
If No, how do you prevent pregna	incy		
Do nothing	33	46.5	
Use ovulation calculation	16	22.5	
Use withdrawal method	22	31.0	
If yes, indicate the methods use			
Condom	6	21.7	
Pills	5	17.8	
IUCD	4	14.3	
Injectables10		35.7	
Implant	3	10.7	
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Table 2 shows that all respondents 98 (100%) have heard about family planning, only 27 (27.6%) have used one family planning methods before while 72 (72.4%) have not. Among those who have used family planning methods before, six (21.7%) use condom, five (17.8%) use pills, 10 (35.7%) use injectables, 4four (14.3%) use IUCD and the remaining three (10.7%) use implant.

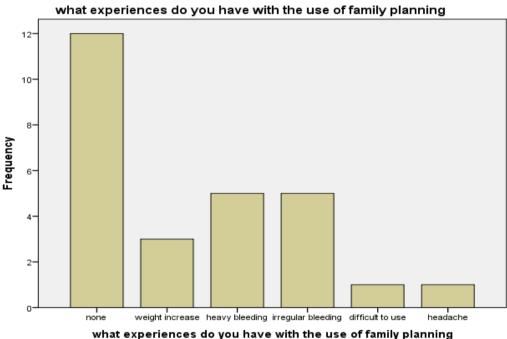


Figure 1: Experiences with use of family planning t experiences do you have with the use of family plann

On experiences with adverse effects related to family planning, 12(44.4%) experienced no adverse effects, three (11.1%) indicated weight gain, five (18.5%) experienced irregular bleeding, another five (18.5% experienced heavy bleeding while one (3.7%) claimed to have frequent headache.

Perceptions towards family planning

Eighty eight percent of the respondent perceived family planning as a good practice and they were able to mention some of the benefits of family planning such as; prevention of unwanted pregnancy, protects against STI, reduces risks associated with pregnancy, help one to have desired number of children, help to increase spaces between one child and the other and that it control population growth. Twenty two who perceived family planning as a bad practices indicated not to have use any form of family planning before but have heard about side effects associated with the use of family planning and the side effects mentioned include weight gain, delay in return of fertility, heavy bleeding, increase abdominal obesity and cancer.

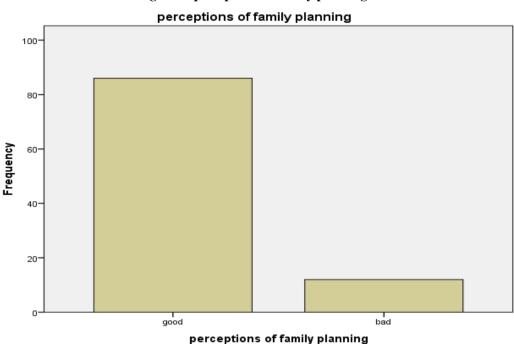


Figure 2: perceptions of family planning

Preferences for family planning

Sixty one percent of the respondents were willing to use family planning out of which twenty-nine percent have no preference for any method. They indicated that they can use any method suitable for them based on the counseling by service providers. eighteen percent will prefer condom, sixteen percent prefer implant, twelve percent prefer condom, ten percent prefer injectables and three percent prefer the use of contraceptive pills

Table 3				
Preferences related to family planning n=98	Ν	%		
Will you be willing to use family planning method?				
Yes	61	62.2		
No	37	37.8		
Which method of family planning will you prefer most?				
I have no preferred method, I can use any method if I service providers can counsel me	28	28.6		
Condom	18	18.3		
Implant	16	16.3		
Withdrawal	12	12.2		
Injectable	10	10.2		
I don't want to use any method	8	8.2		
Pills	3	3.1		
Lactational amenorrhea	3	3.1		
Total	98	100		

IV. DISCUSSION OF FINDINGS

This study shows poor utilization of modern methods of family planning despite a hundred percent awareness of family planning and its various methods. This finding is similar to findings in other studies in Nigeria and in Ekiti State (Asekun, et al., 2013; Osakinle, 2010). The findings display that the reason why knowledge is likely not transcends to practice may be closely related to misconceptions about family planning which is found to be high among non-users of family planning in the study. Other finding revealed that 44.4% of users did not experience side effects. However, the remaining 65.6% who experienced side effects mentioned weight gain, irregular menstruation, heavy flow of blood and frequent headache. This is also similar to finding of others researchers (Sedgh& Hussein, 2014, Asekun et al., 2013).

This implies that the side effects of family planning may not be as bad as it has been exaggerated among non- users in the state. Also, the finding on high uses of withdrawal method is not far from the fear of side effects of other method yet is it known that withdrawal method is has high failure rate and cannot be reckon with as an effective method of family planning. The users of withdrawal should be encouraged to use at least a simple barrier method like male condom since it has male involvement.

The study find that despite poor utilization of family planning, majority of women have positive perception towards family planning and were able to mention some of its benefits. This finding creates hope for the future of family planning practices and the facts that over 28% of the respondents majority which are non user of family planning indicate intention to use later if convinced by services providers about methods that can be suitable for them shows that if mobilization is increases, it is very likely that utilization of family planning in Ekiti state will increase. The study further revealed that both primipara and multi para have positive perceptions towards family planning but are different in their experiences.

V. CONCLUSIONS AND RECOMMENDATIONS

Based on the findings of this study, it was concluded that newly delivered mothers in Ekiti state have positive perception of family planning, poor present utilization and hope for better utilization in the future. Therefore the following recommendations were made.First and foremost, nurses, midwives and all family planning providers should brighten their little corners by increasing their advocacy on use of modern methods of family planning with emphasis on the facts that most side effects of family planning are not outrageous and may not be difficult to cope with compare to exposure to stress of pregnancy and unwanted children. Nurses in EKSUTH should include family planning in health talks in various clinics, wards and units especially on antenatal, clinics, antenatal wards and labour ward. Furthermore, government and all non-governmental organizations should plan and organize programme that will encourage increase utilization of modern family planning in Nigeria as a whole.

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