

ADOLESCENTS' KNOWLEDGE OF CONTRACEPTION AMONG UNIVERSITY STAFF SCHOOLS IN RIVERS STATES

Akpan, U.S.¹, Inyang, M.P.², Chukumati, C.N.³, Akpan, D.S.⁴

University of Port Harcourt, ⁴University of Uyo,
NIGERIA.

¹el_samjoy@yahoo.com, ²mfrekemfon@yahoo.com, ³cchukumati@yahoo.com,
⁴adanielsamuel@yahoo.com

ABSTRACT

Contraception is the best form of preventing unwanted pregnancies in all populations at all times. Adolescents are not fully matured to take some decisions as they sometimes rely on superiors or peers for guidance and this affect their reproductive health. Knowledge of contraceptives in developing nations like Nigeria is limited among adolescents. The study was aimed at assessing the knowledge of contraception in University staff schools in Rivers State. Three objectives and research questions guided the study. The descriptive survey design was used. Simple random technique was used to select 300 adolescents in University staff schools. Validated and reliable questionnaire was used for data collection. The data obtained was analyzed using the descriptive statistics of frequency and percentages. The findings of the study showed that the respondents' level of knowledge on contraception was poor. It was recommended that contraception education be incorporated into the school curriculum to enhance the students' knowledge of the subject area which impacts on their reproductive health.

Keywords: Contraceptives, Adolescents, Knowledge

INTRODUCTION

Worldwide, contraception is used to prevent unwanted pregnancies. It is the safest and most reliable form of birth control. Contraception is defined as the any device, technique or method that can alter one or more processes of reproduction in such a way that sexual intercourse can occur without impregnation (Mosby Dental Dictionary, 2008). It comes in different forms such as the modern method, the traditional methods and the natural methods. These methods have their level of effectiveness depending on the correct usage.

Adolescents' age lie between 9 and 19 years as it is a transitory phase of life experienced after childhood and before adulthood marked with distinct changes ranging from secondary sexual growth to changes in hormonal milieu to emotional, cognitive and psychological development (Olukoya & Ferguson, 2002; Chichetti & Beeghly, 1990). Adolescents at this age are susceptible to sexual abuse and sexual indulgence by superiors and experienced peers. They have virtually limited knowledge on the basics of contraceptive education. The incidence of unwanted pregnancies peaks at these adolescent years. About six million unwanted pregnancies occurs each year and 90% of these occurs in adolescent women who are not using contraceptives in developing nations, 90% of which occur in adolescent women that are either not using contraceptives or relying on traditional and natural contraceptive methods (Guttmach Institute, 2010).

The Social Cognitive Theory propounds that from observing others, behaviours are learnt (Bandura, 1986). According to him, "...human functioning is explained in terms of a model of triadic reciprocity in which behavior, cognitive and other personal factors, and environmental events all operate as interacting determinants of each other (Bandura, 1986, p.

18). One rehearses knowingly and unknowingly what he or she has learnt and could even do better with practice. Adolescents being sexual active beings grow up with inbuilt sexual urges and find themselves among other sexual beings. They tend to learn fast in such environments because of their exposure to models of sexuality behaviours. Some of these models are exhibited on the media, social networks and around them. The models rarely show the use of contraceptives. This act misleads their viewers especially the adolescent population who are inexperienced.

Contraceptives use in Nigeria is generally low as a research accounted for only 15% use of contraceptives throughout the nation's population (Kabir, et al, 2003). Report has it that the use of contraceptives in Nigeria is low and this could be due to the yearning for more children, lack of knowledge of the available contraceptives, high cost of healthcare couple with low socio economic status of citizens, lack of awareness with biased religious and traditional beliefs and limited access to family planning services (Emuveyan & Dixon, 1995; Ibrahim & Sadiq, 1999).

Numerous factors lead to low use of contraception among adolescents in Nigeria. These include myths and misinformation or rumours, and unconfirmed information passed within social networks (Okonofua, Otoide & Oransaye, 2001; Ankomah, Oladosu & Anyanti, 2011; Orji & Onwudiegwu, 2002). Contraception knowledge might increase with education as this knowledge can also lead to increase and proper use which is an aspect of healthy behaviour. According to UNFPA (2010), the use of contraception increases with education and literacy levels. Most adolescents are naïve about contraception. Their knowledge of contraception is low, as their exposure to it might also be low.

Lack of proper and adequate knowledge on contraception has not only impacted on the reproductive health of adolescents, but it has deplorable consequences on the future lives of the adolescents and the nation as a whole. Incidence of increasing unwanted pregnancies, sexually infected infections, school drop outs, untimely death and other social related problems prevail among the youths populace. This is why it was needful to assess the adolescents' level of knowledge on contraception.

OBJECTIVES

The objectives of this study was to assess:

1. The knowledge of contraception among adolescents in secondary schools in Rivers State.
2. The source of knowledge of contraception among adolescents in secondary schools in Rivers State.

QUESTIONS

1. What is the level of knowledge of contraception possessed by secondary school adolescents of Rivers State?
2. What is the source of knowledge on contraception among secondary school adolescents of Secondary schools in Rivers State?

METHODOLOGY

Research Design

The research design for this study was a descriptive survey design which employed the questionnaire for the purpose of collecting data on adolescents' knowledge of contraception.

Participants

Two thousand five hundred adolescents' students of the University of Port Harcourt and Rivers State University of Science and Technology, all in Rivers State constituted the population. The sample consisted of 300 adolescents selected randomly from senior secondary classes-SS1-100, SS2-100 and SS3-100.

Instrumentation

The instrument used for data collection was a 30-item self-developed questionnaire tagged ACKQ designed with two sections: A-Demographic data, B- Knowledge items with yes or No response option. The instrument alongside research questions was validated by three experts in the Faculty of Education, to establish its face and content validity. The reliability of the instrument was established with a reliability coefficient of 0.82 after administering thirty copies of the questionnaire to randomly selected adolescents students of Rivers State College of Art and Science staff school, Rivers State.

Data Collection and Analysis

The questionnaire was administered by self and three other trained research assistants and administered and retrieved on the spot. Descriptive statistics of frequency and percentages was used to analyze the data. For decision-taking on knowledge level, the modified version of Ashur(1977) was used as criteria. Thus, 20% and below-Very Low, 21-39% - Low, 40-59% - Average, 60-80% -High, 80% and above-Very High (Okafor, 1997).

RESULTS

Table1. Respondents' Responses on Knowledge of contraception [Field Work (2016)]

<i>Knowledge Statements</i>	<i>Ye (f)</i>	<i>(%)</i>	<i>No (f)</i>	<i>(%)</i>
Have you ever heard of contraceptives?	84	28	216	72
Contraception is the process of preventing pregnancy using medication, device or other methods?	98	33	202	67
Contraceptives are drugs, methods or any device used to prevent pregnancy.	92	31	208	69
Contraception helps in preventing unwanted pregnancies	90	30	210	70
Use of condom helps in preventing unwanted pregnancies.	170	57	130	43
Condom use prevents sexually transmitted infections	178	59	122	41
Contraceptives come in different forms	86	29	214	71
Do you know any contraceptive methods?	72	24	228	76
Withdrawal Billing's method is a contraceptive method	26	9	274	91
I recognize Abstinence as a contraceptive method	70	23	230	77
I know about Male Condom	134	45	166	55
I know about Female Condom	100	33	200	67
I know Intra Uterine Contraceptive Device (IUCD)	40	13	260	87
I know that diaphragms are contraceptives	36	12	264	88
Cervical cap is a type of contraceptive	36	12	264	88
Some pills are used as contraceptives	80	27	220	73
Some contraceptives are in form of injection	46	15	254	85
Cluster (%)		28.24		66.59

The respondents from the control group did not show a good knowledge of contraceptives. A total of 28% of control group do know the meaning of contraception. 30.7% of the control group believe that contraception helps in preventing unwanted pregnancies, 28.7% from control group also consented that contraceptives come in different forms

The results of the study showed significant increases in contraception knowledge for sampled students in the study group (62.7%). A total of 88% agreed that condom use prevents sexually transmitted infections from the intervention (study group) while only 35.3% of the study group disagreed that abstinence as a contraceptive method.

Table2. Respondents source of information on contraception

<i>Source of information on contraception</i>	<i>Yes (%)</i>	<i>No (%)</i>
a)friends	20	80
b) School subjects	5	95
c)classmates	39	61
d)teachers	43	57
e) mothers	7.1	92.9
f) father	5	95
g)other relatives	11.4	88.6
h) mass media (TV, radio, books, magazines, advertisement)	56	44
i) social media (internet, whatsapp, face book, twitter, etc)	52	48
j)books, journals and magazines	42	58
k) Pharmacy/ chemist shop	25.4	74.6
l) Health workers (nurse, doctor, etc)	11.4	88.6
m) Church/religious gathering	1.6	98.4

Field Work (2016)

Majority of the sampled students got their source of information on contraception through mass media (56%), social media (52%), teachers (43%) and books, journals and magazines (42).

Other sources of contraception include classmates (39%), friends (20%), Pharmacy/chemist shop (25.4%), other relatives and health workers (11.4). The least of all the sources of information on contraception include mothers (7.1%), fathers and school subjects (5%), Church/religious gatherings (1.6%).

DISCUSSION OF FINDINGS

Table 1 above showed that adolescents of university staff schools in Rivers state possessed low knowledge about contraception. Adolescents are naïve about so many things that pertain to reproductive health. They are not fully aware of contraception though they know and are acquainted with a type of contraception known as condom, as well as its usefulness. Nevertheless, though few of them knew about other types of contraception, majority of them were still in the dark concerning such issues. Contrary to this finding, contraceptive

knowledge among adolescent secondary school girls was found very high in a study at among secondary school adolescents' girls in Lagos state (Tayo, et al, 2011). This might be as a result of the study location. Urban dwellers and dwellers in a more developed environment would be more exposed to information and knowledge about any subject compare to their counterparts in rural or less developed areas.

Table 2 revealed that the major source of their information was the mass media (TV, radio, books, magazines, advertisement) followed by social media (internet, whatsapp, face book, twitter, etc). This result is not surprising as youths of today are either glued to the mass media or the social media. They spend most of their times at home watching televisions especially channels that exhibit sexual activities in differs forms. Most of the intent of such channels are not to educate the masses, rather to entertain viewers at their detriment. Adolescents who may not be fully guided fall prey of these vices in the media.

Social media is another centre for activities that promotes sexual indulgence. Most scraps are posted daily on social media- internet, facebook, twitter, etc. adolescents of these days have undeniable and wide access to social media with assorted gadgets. This findings is in support of the findings that showed that media was the highest source of contraception (Tayo, et al. 2011). The result of this study is in support of a research which showed that issues about sex education were either rarely or never discussed with parents (Ugwu, 2012). Most parents do spend quality time with their wards. They rarely discuss issues that bother on the health of their children especially issues bothering on sexuality education. Some parents feel such discussions might lead them into practicing it. So they avoid it.

CONCLUSION

The study has assisted in determining the adolescents' knowledge of contraception in University staff schools in Rivers State. There exists low level of contraception knowledge among adolescents despite the fact that they have lots of contacts with people studying and working in the University. Furthermore, the major source of contraception information remains mass and social media

RECOMMENDATION

In order to improve their knowledge on contraception, the following recommendations were made:

1. Contraception education should be incorporated into the secondary school curriculum and taught at all classes. This will expose the students to the concept of contraception, methods, effect and usage. This when achieved will not only increase their knowledge level, rather it will improve and inculcate the right attitude towards contraceptives.
2. Parents should not shy away from the subject of contraception. They should start at an early age to educate their wards about issues pertaining to contraception.
3. Religious bodies and their leaders should not shy away from contraception education. This is because their followers hold them in high esteem and would believe and practice what they hear from their leaders.

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