

Determinants of Family Planning Utilisation Among Male Civil Servants in Selected Ministries in Kwara State, Nigeria

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Abstract:

The study examined determinants of family planning utilisation among male civil servants in selected ministries in Kwara State, Nigeria. The study adopted a cross-sectional descriptive design. The population for this study consisted of male civil servants in selected ministries in Kwara State. The sample size was calculated using Leslie Fisher's formula where a sample size of 376 was derived. Multi-stage sampling procedure was used to select the calculated sample size from selected ministries in Kwara State. The instrument for data collection was a self-developed questionnaire which was validated by experts of Nursing Science and Tests & Measurement. Descriptive and inferential statistics were used to analyse the data collected while all hypotheses were tested at 0.05 level of significance. The findings of the study revealed that majority of the respondents were aware of different family planning methods as there was high rate of knowledge about family planning in Kwara state. But despite the high rate of knowledge of family planning methods, many people were left out of the utilisation of family planning in the study area. Also, there was association between age ($X^2 = 2.66, p < 0.05$), religion ($X^2 = 1.56, p < 0.05$), education ($X^2 = 3.73, p < 0.05$), income ($X^2 = 2.36, p < 0.05$) and family planning utilisation. In addition, an association existed between knowledge and family planning utilisation; and attitude and family planning utilisation among male civil servants in Kwara State. It was recommended among others that people especially husbands need to be educated

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on the importance of family planning as it will help reduce misconceptions and increase utilisation of family planning services.

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Introduction

In most African societies, Family planning (FP) which is one of the components of safe motherhood is underutilized by couples. In many homes, women cannot access family planning services without their husbands' consent because of the patriarchal nature of the societies (Babatunde et al., 2019). These women are at high risk for unwanted pregnancies once their husbands are not supportive of family planning. Invariably, this may push them to procure abortions, which in most cases are unsafe leading to its attendant morbidities and maternal mortalities (Blackstone & Iwelunmor, 2017). In Nigeria, the Nigerian Demographic Health Survey (NDHS) found that only 10% of married women of reproductive age use contraceptives. This is lower than the current Sub-Saharan Africa average of 17%. Further analysis of the total contraceptive prevalence rate (CPR) indicates wide state variations, ranging from 0.3% in Jigawa to 41.6% in Lagos state, as well as zonal variations ranging from 2.7% in the North West to 28.5% in the South West (Fayehun, 2017).

The International Conference on Population and Development at the Fourth World Conference on Women emphasized the importance of reproductive rights and reproductive health both for men and women and the greater involvement of men in reproductive health. Though maternal deaths are rare events in developed countries, however, they remain common events in many developing countries. In Nigeria, according to the World Bank Statistics, Maternal Mortality Ratio is quoted at 814 per 100,000 live births (Ntoimo & Chirwa-Banda, 2017). Also, according to a 2015 report from the World Health Organization (WHO), approximately 830 women die from preventable causes related to pregnancy and childbirth every day. And even more specific representation is provided by the United Nations Children's Emergency Fund, UNICEF, which reports that "Every single day, Nigeria loses about 2,300 children under five and 145 women of childbearing age. This makes the country the second largest contributor to the under-five and maternal mortality rate in the world (WHO, 2017).

Traditionally, men are the heads of households and decision makers in all issues in their respective households. Men decide on FP and the number of children as well as how to use what is produced by the family (Okigbo, et al., 2015). Also, findings have shown that since men were the decision makers, they were expected to initiate discussions on FP and the number of the children the couple wants to have (Adamou, et al., 2019, Geleta, et al., 2015, Mustapha, et al., 2015). Men have long been considered to be beyond the scope of family planning programmes. The reasons included the notions that the reproduction is primarily a woman's issue and that men usually do not take responsibility for reproductive health and family planning (Sekoni, & Oladoyin, 2016; Smith, 2017). However, in order to reduce maternal deaths due to frequent child-bearing, the women's spouses have to be involved in the couple's contraceptive practices especially in developing countries where women have relatively limited personal control over their lives and are dependent on their husbands for many decisions.

It has been reported that all over the world, men play critical roles in women's ability to seek health care. Yet, more often than not, they are not adequately informed about women's reproductive health needs or even their own. It is believed that when men and women are aware of each other's health needs, they are more likely to receive needs services (Adamou, et al., 2019, Geleta, et al., 2015, Mustapha, et al., 2015).



Family Planning decision making is germane in sexual and reproductive health. Man is the head of a family and so a primary decision maker in the family regarding reproduction, family size and contraception use. Failure to fulfill this role makes men to be responsible for the large proportion of ill reproductive health suffered by their female partners and so their involvement in family planning helps not only in accepting a contraceptive but also in its effective use and continuation (Polis, 2016, Sultan, 2018).

In view of the above, the study examined determinants of family planning utilisation among male civil servants in selected ministries in Kwara State, Nigeria. This study specifically examined:

1. the knowledge of family planning methods among male civil servants;
2. the attitude of male civil servants towards family planning methods;
3. the association between socio-demographic status and family planning utilisation among male civil servants;
4. the association between knowledge and family planning utilisation among male civil servants; and
5. the association between attitude and family planning utilisation among male civil servants.

Research Questions

The following research questions were raised for this study:

1. What is the knowledge of family planning methods among male civil servants in Kwara State?
2. What is the attitude of male civil servants towards family planning methods in Kwara State?

Research Hypotheses

The following research hypotheses were postulated for this study:

1. There is no significant association between socio-demographic status and family planning utilisation among male civil servants in Kwara State
2. There is no significant association between knowledge and family planning utilisation among male civil servants in Kwara State
3. There is no significant association between attitude and family planning utilisation among male civil servants in Kwara State

Methodology

The study adopted a cross-sectional descriptive design. This is an observational study usually referred to as snapshot or prevalence study. The population for this study consisted of male civil servants in selected ministries in Kwara State. The sample size was calculated using Leslie Fisher's formula and it is calculated below.

$$N = \frac{Z^2 pq}{d^2}$$

Where

Z = standard normal deviation of 1.96 which corresponds to 95% confidence interval

N= sample size

p = 57% = 0.57

q = 1-0.57 = 0.43

d = 0.05 degree of accuracy

N = $1.96^2 \times 0.57 \times 0.43$



0.05²

N= 376

Multi-stage sampling procedure was used to select the above calculated sample size from selected ministries in Kwara State. The instrument for data collection was a self-developed questionnaire which was validated by experts of Nursing Science and Tests & Measurement. Six research assistants were recruited and trained to help in the administration of the questionnaire. These research assistants were female community health extension workers who visited all selected Ministries in the study area. The purpose of the study was explained to the respondents and the questionnaire was administered to consenting eligible men. Copies of questionnaire were sorted out to check for errors and omissions at the end of collection of data. Thereafter, data was entered into the computer and analyzed using Statistical Package for Social Sciences (SPSS) version 20. Descriptive and inferential statistics were used while all hypotheses were tested at 0.05 level of significance.

Results

Question 1: What is the knowledge of family planning methods among male civil servants in Kwara State?

Table 1: Frequency distribution of respondents about family planning and contraceptive methods

Variable	Frequency	Percentage
Heard about family planning methods		
YES	312	84.3
NO	58	15.7
Total	370	100
Do you know any method that can be used to delay pregnancy		
YES	295	79.7
NO	75	20.3
Total	370	100
If yes, is it possible to obtain this method?		
YES	211	71.5
NO	84	28.5
Total	295	100
Which of the following contraceptive methods do you know?		
Pills	43	13.8
IUCDS	30	9.6
Injectable	30	9.6
Implants	8	2.6
Condoms	138	44.2
Female sterilization	10	3.2
Male sterilization	10	3.2
Spermicide	5	1.6
Natural method (Withdrawal method)	38	12.2
Total	312	100



Do you know where modern contraceptives can be obtained?		
YES	312	84.3
NO	58	15.7
Total	370	100

If yes, where can you or other men obtain contraceptive method?		
Government Hospital	188	60.3
Private Hospital	112	35.9
Patent Medicine Store	12	3.9
Others	Nil	Nil
Total	312	100

From the above analysis, 312 (84.3%) respondents have heard of family planning while 58 (15.7%) have not. 295(79.7%) respondents know the method that can be used to delay pregnancy, while 75(20.3%) respondents does not. 211 (71.5%) respondents said it is possible to get those method used to delay pregnancy, while 84(28.5%) respondents said it is not possible. 43 (13.8%) respondents know pills, 30 (9.6%) know IUCDS, 30 (9.6%) injectables, 8 (2.6%) respondents said they know implants, 138 (44.2%) respondents know of condom, 10 (3.2%) respondents know of female sterilization, 10 (3.2%) know about male sterilization, 5 (1.6%) know of spermicide, and 38(12.2%) respondents know about natural method such as withdrawal method. 312 (84.3%) respondents submitted they know where modern contraceptives can be obtained, while 58 (15.7%) respondents said they don't. 188 (60.3%) respondents replied that it contraceptives can be gotten from Governmental hospital, 112 (35.9%) respondents chse private hospital, and 12(3.9%) respondents said it can be gotten from patent medicine store,

Question 2: What is the attitude of male civil servants towards family planning methods in Kwara State?

Table 2: Descriptive Analysis of attitude of male civil servants towards family planning methods

Family planning methods should be discouraged among couples as it cause infertility

	Frequency	Percentage
Strongly agree	58	15.7%
Agree	180	48.7%
Undecided	28	7.6%
Disagree	74	20%
Strongly disagree	30	8.1%
Total	370	100

Husband and wife should not discuss family planning method with health care worker due to religion

	Frequency	Percentage
Strongly agree	98	26.5%
Agree	75	20.3%
Undecided	30	8.1%
Disagree	113	30.5%



Strongly disagree	54	14.6%
Total	370	100

Husband and wife should not discuss family planning method with health worker for cultural reason

	Frequency	Percentage
Strongly agree	85	23%
Agree	79	21.2%
Undecided	37	10%
Disagree	126	34.1%
Strongly disagree	43	11.6%
Total	370	100

Family planning methods should not be allowed among couples due to fear of side effect

	Frequency	Percentage
Strongly agree	125	33.8%
Agree	87	23.5%
Undecided	39	10.5%
Disagree	65	17.5%
Strongly disagree	54	14.6%
Total	370	100

Family planning method enhances promiscuity among partners

	Frequency	Percentage
Strongly agree	35	9.5%
Agree	68	18.4%
Undecided	45	12.1%
Disagree	138	37.3%
Strongly disagree	84	22.7%
Total	370	100

The table above shows respondents' responses whether to discourage family planning among couples as it causes infertility. 58 (15.7%) respondents strongly agreed, 180 (48.7%) respondents agreed, 28 (7.6%) respondents were undecided, 74 (20%) respondents disagreed while 30 (8.1%) respondents strongly disagreed that family planning methods should be discouraged among couples as it cause infertility. On responses concerning husband and wife discussion of family planning method with healthcare workers due to religion, 98 (26.5%) respondents strongly agreed, 75 (20.3%) respondents agreed, 30 (8.1%) respondents were undecided, 113 (30.5%) respondents disagreed while 54 (14.6%) respondents strongly disagreed.

On responses concerning husband and wife discussing family planning method with health workers for cultural reason, 85 (23%) respondents strongly agreed, 79 (21.2%) respondents agreed, 37 (10%) respondents were undecided, 126 (34.1%) respondents disagreed while 43 (11.6%) respondents strongly disagreed. On responses concerning family planning being discourage among couples due to fear of side effect, 125 (33.8%) respondents strongly agreed, 87 (23.5%) respondents agreed, 39 (10.5%) respondents were undecided, 65 (17.5%) respondents disagreed while 54 (14.6%) respondents strongly disagreed. On



responses concerning family planning method enhancing promiscuity among partners, 35 (9.5%) respondents strongly agreed, 68 (18.4%) respondents agreed, 45 (12.1%) respondents were undecided, 138 (37.3%) respondents disagreed while 84 (22.7%) respondents strongly disagreed.

Hypothesis Testing

Hypothesis 1: There is no significant association between socio-demographic status and family planning utilisation among male civil servants in Kwara State

Table 3: Association between Socio-demographic Status and family planning utilisation

Variable		Ever User	Non User	X ²	df	p
Age	21 – 30 years	35	0	2.66	6	0.00
	31 – 40 years	120	0			
	41 – 50 years	75	75			
	51 – 60 years	0	65			
Religion	Christians	168	0	1.56	4	0.00
	Muslims	62	138			
	Traditional	0	4			
Ethnicity	Yoruba	212	0	1.93	8	0.67
	Ibo	18	38			
	Hausa/Fulani	0	30			
	Nupe	0	60			
	Others	0	12			
Marriage	Monopoly	230	52	1.24	2	0.08
	Polygamy	0	88			
Education	No formal Edu.	0	10	3.73	8	0.00
	Primary Education	27	0			
	Secondary Education	75	0			
	University Education	118	80			
	Postgraduate	0	60			
Income	less than 100,000	70	0	2.36	8	0.00
	100,000 – 200,000	160	20			
	200,000 – 300,000	0	58			
	300,000 – 400,000	0	42			
	Above 400,000	0	20			

Table 3 shows the association between socio-demographic status and family planning utilisation among male civil servants in Kwara State. From the hypothesis tested, there was



significant association between age ($X^2 = 2.66$, $p < 0.05$), religion ($X^2 = 1.56$, $p < 0.05$), education ($X^2 = 3.73$, $p < 0.05$), income ($X^2 = 2.36$, $p < 0.05$) and family planning utilisation.

Hypothesis 2: There is no significant association between knowledge and family planning utilisation among male civil servants in Kwara State

Table 4: Association between summarized knowledge and family planning utilisation

	Family Planning Utilisation			df	X^2	p
	current users	ever users	non users			
good knowledge	150(50.8%)	80(27.1%)	65(22.9%)	2	154	0.00.
poor knowledge	0(0%)	0(0%)	75(100%)			
Total	150	80	140			
	40.5%	21.6%	37.8%			

Table 4 shows the association between knowledge and family planning utilisation among male civil servants in Kwara State. The chi-square value of 154 is significant because the p-value of 0.00 is less than the conventional 0.05 level of significance. Therefore, the null hypothesis is rejected. Hence, there is significant association between knowledge and family planning utilisation among male civil servants in Kwara State.

Hypothesis 3: There is no significant association between attitude and family planning utilisation among male civil servants in Kwara State

Table 5: Association between summarized attitude and family planning utilisation

Variable	Family planning utilisation			df	X^2	p
	current users	ever users	non users			
Favourable attitude	0(0%)	57(28.9%)	140(71.4%)	1	304	0.00.
Unfavourable attitude	150(86.7%)	23(13.3%)	0(0%)			

Table 5 shows the association between attitude and family planning utilisation among male civil servants in Kwara State. The chi-square value of 304 is significant because the p-value of 0.00 is less than the conventional 0.05 level of significance. Therefore, the null hypothesis is rejected. Hence, there is significant association between attitude and family planning utilisation among male civil servants in Kwara State.

Discussion

The findings of the study revealed that majority of the respondents were aware of different family planning methods as there was high rate of knowledge about family planning in Kwara state. In a study conducted by Tizta et al (2013), they discovered that the concept of family planning was well known in the studied population. It was also discovered that many people were left out of the utilisation of family planning in the study area, even though family planning was known by more than half of the sampled respondents. In consonance with this

finding, Adamou, et al. (2019), Geleta, et al. (2015), and Mustapha, et al. (2015) concluded that men who were aware of contraceptive methods had little knowledge of their correct use.

The findings of the study revealed the association between socio-demographic status and family planning utilisation among male civil servants in Kwara State. It was revealed that there was significant association between age, religion, education, income and family planning utilisation. This was in consonance with the findings of Sultan (2018) who found a significant relationship between demographic factors (education and income) and family planning utilisation.

From the findings of the study, it was revealed that there was association between knowledge and family planning utilisation among male civil servants in Kwara State. Likewise, an association was found between attitude and family planning utilisation among male civil servants in Kwara State

Conclusion

It is concluded that many civil servants were aware of different family planning methods as there was high rate of knowledge about family planning in Kwara state. But despite the high rate of knowledge of family planning methods, many people were left out of the utilisation of family planning in the study area. Also, there is relationship between socio-demographic factors such as age, religion, education, income and family planning utilisation. This implies that the aforementioned factors must be critically looked into as they have tendencies to improve the usage of different family planning method. In addition, an association existed between knowledge and family planning utilisation; and attitude and family planning utilisation among male civil servants in Kwara State.

Recommendations

Based on the conclusion and findings of this research, the following recommendations were made.

1. People especially husbands need to be educated on the importance of family planning as it will help reduce misconceptions and increase utilisation of family planning services.
2. Government should strategize how family planning programmes will be available and accessible to those who live in rural areas. Strategies such as involvement of couples as well as leaders of different rural communities, economic empowerment of women and steady research directed at improving safety and reduction of side effects.
3. Other than being available, provision of family planning services should be affordable to those who need the services. Take for example, the likes of IUCD, hysterectomy, vasectomy, and tubal ligation among others should be made affordable to communities within the country.
4. Family planning service provision should be monitored from time to time so to ensure it meets up with the set objective. If effective, maintenance must be strictly adhere to. If ineffective, Government and health workers should re-strategies on how to make it effective for the benefit of the society and the country at large.



References

- Adamou, B.M., Iskarpatyoti, B.S., Agala, C.B. & Mejia, C. (2019). Exploring gaps in monitoring and evaluation of male engagement in family planning. *Gates open Research* 3.
- Babatunde, J.O., Olusola, J.O. & Osakinle, E.O. (2019). Attitude of married men and women towards family planning practices in Ekiti state. *British journal of psychology research*, 7(1), 1-8.
- Blackstone, S.R. & Iwelunmor, J. (2017). Determinants of contraceptive use among Nigerian couples: evidence from the 2013 demographic and health survey. *Contracept Reprod Med.* 2(1),9.
- Bongaarts, J. (2015). Global fertility and population trends. *Seminars in reproductive medicine*, 33(1), 5-10
- Fayehun, F. (2017). Contraceptive use in Nigeria. Retrieved from <http://www.contraceptiveuseinNigeria.com>.
- Geleta, D., Birhanu, Z., Kaufman, M. & Temesgen, B. (2015). Gender norms and family planning decision making among married men and women in rural Ethiopia; A qualitative study. *Science Journal of Public Health*, 3(2), 242.
- Mustapha, G., Amzat, K.S., Hameed, W., Ali, S., Hussain, W. & Munroe, E. (2015). Family planning knowledge, attitude and practice among married men and women in rural areas of Pakistani: findings from a qualitative needs assessment study. *International journal of reproductive medicine*,
- Ntoimo, L.F.C. & Chirwa-Banda, P. (2017). Examining the role of couple characteristics in contraceptive use in Nigeria and Zambia. *African Journal of Reproductive Health*, 21(4), 93-101.
- Okigbo, C.C., Speizer, S.I., Corroon, M. & Gueye, A. (2015). Exposure to family planning messages and modern contraceptive use among men in urban Kenya, Nigeria and Senegal: a cross-sectional study. *Reproductive health*, 12(1), 63.
- Polis, C.B. (2016). Contraceptive Failure rates in the developing world: An Analysis of Demographic and Health Survey Data in 43 countries. New York: Guttmacher institute. Retrieved from <http://www.guttmacherinstitute.org/report/contraceptive-failure-rate-in-developing-world>
- Sekoni, O., and Oladoyin, V. (2016). Determinants of family planning uptake among men in Ibadan, Nigeria. *Journal of community medicine and primary health care*, 28(1), 38-44
- Smith, L. (2017). "Birth control, what is the best option?" *Medical News Today*. Retrieved from <https://www.medicalnewstoday.com>.
- Sultan, S. (2018). Effects of education, poverty and resources on family planning in developing countries. *Clinics in mother and child health*, 15(1), 289.
- WHO (2017) Trends in maternal mortality 1990-2015. Fed min of Health, Nigeria; National reproductive health working group meeting report



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