

The Demand for Orthodox and Modern Family Planning Among Rural Dwellers in Oyo State, Nigeria

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Abstract: This research examined the demand for orthodox and modern family planning among rural dwellers in Oyo State. The data was sourced for the study using a convenience sampling technique, which took place at the antenatal clinics. A total of 350 pregnant women from three antenatal clinics from three local governments in Oyo state were randomly selected. The statistical method adopted for the study was a descriptive survey. Data was collected with a validated questionnaire. The research was guided by three research questions. The findings of the study showed that the majority of the respondents engaged in modern family planning methods (56.6%), while 24.7% engaged in orthodox family planning, and 18.9% of them were not practicing any form of family planning method. The study also proved that condoms were the most commonly used contraceptive. The study concluded that the factors that influenced family planning were awareness, child spacing, financial constraint, partner support. Despite the high usage and awareness about contraceptives, the majority of the respondents had a large family size. This could be as a result of the wrong usage of contraceptives or the desire to have a large family size.

Keywords: Contraception, Contraceptive, Family Planning, Modern, Orthodox.

I. Introduction

Nigeria is the most populated country in Africa with a population of 218,839,589 as at 2022 [1]. The average global fertility rate is 2.4 children per woman, whereas Nigeria has an average fertility rate of 4.67 [2]. According to [3], Nigeria's President, Muhammadu Buhari, launched the Revised National Policy on Population for Sustainable Development, stressing the need for modern contraceptive methods in the country with the aim of decreasing the fertility rate and increasing the standard of life of its citizens. Nigeria has struggled to keep up with the title of "Africa's largest economy" over the past few years due to its dwindling crude oil production, which used to be a major source of income and foreign exchange for the country. Consequently, the population rate in the country is alarming; hence, the need for its citizens to embrace family planning methods.

Family planning is the act of controlling the birth rate of individuals or couples, and it is also a method adopted for child spacing through the use of contraceptive methods[4]. Beyond childbirth control, family planning is crucial in averting unplanned pregnancies, unsafe abortions, the rate of pregnancy-related deaths, and sexually transmitted diseases [5]. In the same light, [6] stressed the impact of family planning on child spacing, fertility, unintended pregnancy, child development, and the opportunity to focus their investments on the few children they have. Most couples in rural areas lack the financial resources needed to support a large family, resulting in malnutrition, illiteracy, and poor health conditions for the children. However, family planning can be achieved through the use of modern or orthodox contraceptives

Contraceptives are substances or devices used to prevent pregnancy and sexually related risks. Similarly, contraception is the deliberate preclusion of conception via the use of medications, devices, sexual acts, chemicals, and surgical methods [7]. According to [8], the benefits of contraceptives include pregnancy prevention, reduction of pregnancy-related mortality and morbidity, and sexual-related diseases like HIV, chlamydia, HPV (Human papillomavirus infection), and cervical cancer.

Orthodox methods of contraception do not involve hormone manipulation, and it is also a type of contraception in which a woman's menstrual cycle is observed and recorded to determine her fertile and "safe" days [9]. Herbs; withdrawal (coitus interruptus), rhythm (calendar method), mucus inspection method, basal body temperature, lactational infertility, sympothermal method, douching and urination; and periodic abstinence are all forms of orthodox contraception [10]. Other Orthodox contraceptives in Nigeria include laced rings, bracelets, and waist beads [11]. The advantages of orthodox contraception are that it does not require the use of medication or hormonal alteration, and it does not require a physician's attention [10]. However, the disadvantages include: it does not prevent sexually transmitted diseases; it is not totally effectual in the prevention of pregnancy; it requires taking a record of the female's menstrual period; and the withdrawal method requires self-restraint and mastery [9].

Modern contraception methods are those which involve hormonal manipulation or undergoing a medical procedure via medication or gadgets to prevent conception [12]. Examples of modern forms of contraceptives include: male condom, female condom, implant, male sterilization, female sterilization, diaphragm and spermicides, injectable, intrauterine devices (IUD), and oral contraceptive pills.

According to [13], elements that influence the rate of family planning include levels of literacy, religious commitment, family income, fertility choice, unfavorable perceptions of family planning, a preference for unverifiable family planning techniques, limited access to trustworthy sources of information, household responsibilities, and inadequate male partner assistance on family planning issues. However, according to the 2020 statistical report on men and women in Nigeria, more than 83% of the female population were not practicing any contraceptive methods in Nigeria in 2018 [14]. Hence, the need for its citizens to adopt family planning practices.

II. Statement of the problem

In Nigeria, most of its citizens do not observe family planning practices, which is detrimental not only to the people but to the country's economy. People who do not practice safe family planning methods are prone to risks such as sexually transmitted infections, unplanned pregnancy, abortions, and pregnancy-related risks. Nigeria is a developing country fraught with different economic problems such as poverty, unemployment, high illiteracy rate, and insecurity of lives and properties, amongst others. However, the country's high population is one of Nigeria's major setbacks as its fertility rate is on the increase. This study, therefore, focuses on the demand for orthodox and modern family planning among rural dwellers in Nigeria.

III. Objectives of the Study

The main objective of the study was to determine the demand for orthodox and modern family planning among rural dwellers in Nigeria. Specifically, the study sought to determine:

- i. The most practiced type of family planning (Modern/ Orthodox)
- ii. The obstacles associated with family planning.
- iii. The reasons for family planning among rural dwellers in Nigeria

IV. Research Questions

- i. What is the most practiced type of family planning among rural dwellers in Nigeria?
- ii. What are the obstacles associated with family planning among rural dwellers in Nigeria?
- iii. What are the reasons for family planning among rural dwellers in Nigeria?

V. Methodology

The research approach adopted was a descriptive cross-sectional study approach conducted at the antenatal clinics in Oyo state and Ibadan, Nigeria. Ethical clearance was assessed by the ethical review committee of the hospitals before the commencement of the study. The population for this study consists of 350 consenting pregnant women randomly selected from 3 maternity clinics from 3 local governments in Oyo State, Ibadan. The clinics were selected based on their rural location. Data was collected with a validated questionnaire. The

purpose of the questionnaire was to determine the demand for modern or orthodox family planning among rural dwellers in Nigeria. The reliabilities of the instrument were determined through the test and test re-test method.

VI. Results

Table1. Demographic Characteristics of Respondents

Demographic Characteristics of the Respondents	Frequency	Percentages
Age		
18-27	175	50.0
28-37	124	35.4
38-47	42	12.0
48-55	9	2.6
Total	350	100
Marital Status		
Single	35	10.0
Married	310	88.6
Separated/ Divorced	5	1.4
Total	350	100
Literacy Level		
Literate	86	24.6
Illiterate	264	75.4
Total	350	100
Religion		
Muslim	131	37.4
Christianity	208	59.4
Others	11	3.1
Total	350	100
Occupation		
Farming	194	55.4
Trading	86	24.6
Vocational skills	58	16.6
Others	12	3.4
Total	350	100
Monthly Income (In Naira)		
Below 10,000	12	3.4
10,000-25,000	221	63.1
26,000-41,000	86	24.6
42,000-57,000	26	7.4
58,000 and above	5	1.4
Total	350	100
Type of Family		
Monogamy	118	33.7
Polygamy	232	66.3
Total	350	100
Number of Children		
1-3	61	17.4
4-6	177	50.6
7 and above	112	32.0
Total	350	100
Local Government Area		

Atiba Local Government	133	38.0
Ibadan North East Local Government	95	27.0
Ibadan South East Local Government	122	35.0
Total	350	100

Source: Field survey,2022

The demographic characteristics of the respondents shows that 50% of the respondents were aged 18-27 years, 35.4% were aged 28-37 years, 12.0% were aged 38-47 and 2.6% were aged 48-55 years. This implies that majority of the respondents were aged 18-27years. On marital status, 10.0% of the respondents were single, 88.6% were married while the remaining 1.4%were separated/ divorced. This implies that majority of the respondents were married. On literacy level, 24.7% of the respondents were literates while the remaining 75.4% were illiterates. This implies that majority of the respondents were illiterates. On religious affiliation, 37.4% were Muslims, 59.4% were Christians, while 3.1% were practicing other religion. This implies that majority of the respondents were Christians. On occupation 55.4% of the respondents were farmers, 24.6% were traders, 16.6% had a vocational skill(s), while the remaining 3.4% were practicing other occupation. This implies that most of the respondents were farmers. On monthly income, 3.4% of the respondents were earning below 10,000, 63.1% were earning between 10,000-25,000, 24.6% were earning between 26,000-41,000, 7.4% were earning between 42,000-57,000 while the remaining 1.4% were earning 58,000 and above. This implies that majority of the respondents were earning between 10,000-25,000 naira per month.On type of family, 33.7% of the respondents were from monogamous homes, while the remaining 66.3% of the respondents were from polygamous homes. This implies that, majority of the respondents were from polygamous homes. On number of children, 17.4% of the respondents had 1-3 children, 50.6% of the respondents had 4-6 children, while the remaining 32.0% had 7 children and above. This implies that majority of the respondents had 4-6 number of children. On local government area, 38.0% of the respondents were from Atiba local government area, 27.0% were from Ibadan north east local government, while 35.0% were from Ibadan south east local government. This implies that, majority of the respondents were from Atiba local government area.

Table2. Contraceptive Usage by Type

Family Planning Type	Frequency	Percentage(%)
Modern Family Planning		
Condom	170	48.6%
Oral contraceptive pill	28	8%
Total	198	56.6%
Orthodox Family Planning		
Withdrawal method (coitus interruptus)	56	16%
Douching and urination	5	1.3%
Herbal mixture	16	4.7%
Laced accessories (rings, bracelets, and waist beads)	9	2.7%
Total	86	24.7%
None	66	18.9%
Grand Total	350	100

Source: Field survey, 2022

Table 2 shows that 56.6% of the respondents practiced modern family planning practice, 24.7% of the respondents practiced orthodox family planning practice, while 18.9% of the respondents did not indulge in any form of family planning. This implies that majority of the respondents practiced modern family planning practices.

Table3. Obstacles Associated with Family planning

ITEMS	SA	A	D	SD
I am unaware of family planning	24 6.9%	17 4.9%	198 56.6%	111 31.7%
My religious belief is against family planning	18 5.1%	40 11.4%	103 29.4%	189 54.0%
I have so much trust in my family planning practices	152 43.4%	72 20.6%	89 25.4%	37 10.6%
My partner supports the idea of family planning	91 26.0%	140 40.0%	63 18.0%	56 16.0%
I am afraid to indulge in family planning because of the fear of side effects	37 10.6%	54 15.4%	103 29.4%	156 44.6%

Source: Field survey, 2022

The responses to the statement “I am unaware of family planning” revealed that 6.9% (24) of the respondents strongly agree to the statement while 4.9% (17) agree. However, 56.6% (198) of the respondents disagree to the statement and lastly, 31.7% (111) strongly disagree. A total of 88.3% disagree that they are unaware of family planning while 11.8% agree. This inferred that majority of them are aware about family planning.

The responses to the statement “My religious belief is against family planning” revealed that 5.1% (18) of the respondents strongly agree to the statement while 11.4% (40) agree. Again, 29.4% (103) of the respondents disagree to the statement and lastly, 54.0% (189) strongly disagree. A total of 83.4% disagree that their religious belief is against family planning while 16.5% agree. This inferred that majority of their religious belief is not against family planning.

The responses to the statement “I have so much trust in my family planning practices” revealed that 43.4% (152) of the respondents strongly agree to the statement while 20.6% (72) agree. However, 25.4% (89) of the respondents disagree to the statement and lastly, 10.6% (37) strongly disagree. A total of 36.0% disagree that they have so much trust in their family planning practices while 64.0% agree. This inferred that majority of them have so much trust in their family planning practices.

The responses to the statement “My partner supports the idea of family planning” revealed that 26.0% (91) of the respondents strongly agree to the statement while 40.0% (140) agree while. However, 18.0% (63) of the respondents disagree to the statement and lastly, 16.0% (56) strongly disagree. A total of 34% disagree that their partner supports the idea of family planning while 66% agree. This inferred that majority of their partner supports the idea of family planning.

The responses to the statement “I am afraid to indulge in family planning because of the fear of side effects” revealed that 10.6% (37) of the respondents strongly agree to the statement while 15.4% (54) agree. However, 29.4% (103) of the respondents disagree to the statement and lastly, 44.6% (156) strongly disagree. A total of 75.0% disagree that they are afraid to indulge in family planning because of the fear of side effects while 25.0% agree. This inferred that majority of them are not afraid to indulge in family planning because of the fear of side effects.

Table4.Reasons for Family planning

ITEMS	SA	A	D	SD
I practise family planning due to financial constraints	124 35.4%	68 19.4%	84 24.0%	74 21.1%
I practise family planning for child spacing	84 24.0%	121 34.6%	96 27.4%	49 14.0%
I practise family planning to avoid sexually related infections	54 15.3%	100 28.7%	112 32.0%	84 24.0%

Source: Field survey, 2022

The responses to the statement “I practise family planning due to financial constraints” revealed that 35.4% (124) of the respondents strongly agree to the statement while 19.4% (68) agree. Again, 24.0% (84) of the respondents disagree to the statement and lastly, 21.1% (74) strongly disagree. A total of 45.1% disagree that they practise family planning due to financial constraints while 54.8% agree. This inferred that majority of them practise family planning due to financial constraints.

The responses to the statement “I practise family planning for child spacing” revealed that 24.0% (84) of the respondents strongly agree to the statement while 34.6% (121) agree. However, 27.4% (96) of the respondents disagree to the statement and lastly, 14.0% (49) strongly disagree. A total of 41.4% disagree that they practise family planning for child spacing while 58.6% agree. This inferred that majority of them practise family planning for child spacing.

The responses to the statement “I practise family planning to avoid sexually related infections” revealed that 15.3% (54) of the respondents strongly agree to the statement while 28.7% (100) agree. However, 32.0% (112) of the respondents disagree to the statement and lastly, 24.0% (84) strongly disagree. A total of 56.0% disagree that they practise family planning for child spacing while 44.0% agree. This inferred that they majority of them do not practise family planning to avoid sexually related infections.

VII. Discussion of Findings

Table 1 shows the demographic representation of the respondents. It can be inferred that the majority of the respondents fall between the ages of 18–27, which is the reproductive women's age group. The majority of the respondents were married women of age. Few of them were single, which could be as a result of pregnancy out of wedlock, and the least proportion were separated. Most of the respondents were illiterate, which is a result of the rural location of the study population. The most predominant religion was Christianity, while the main occupation was farming. The majority of the respondents were earning between 10,000 and 25,000 naira per month due to the nature of their work.

Table 2 shows the contraception used by type. It can be concluded that most of the respondents preferred the condom contraceptive family planning practice. [15] asserted this from a study that focused on determinants of contraceptive use, that 57.1% of the respondents preferred condoms to other contraceptive methods. The modern family planning type was the most predominant in this study as 56.6% of the respondents preferred it to the orthodox family planning method (24.7%), while the remaining respondents did not indulge in any form of family planning method due to factors like unawareness, religious belief, trust in their family planning practices, partner's lack of support, and the fear of side effects.

Table 3 shows the obstacles associated with family planning. It can be established that majority of them were aware of family planning. This finding correlates with [4] research on the awareness of family planning amongst antenatal patients, where 89% of the respondents were aware of family planning. It can also be drawn that the majority of their religious beliefs are not against family planning, with Christianity being the most predominant religion. The majority of them had so much trust in their family planning practices and their partners were supportive of their family planning practices. It can also be inferred that the majority of them are not afraid of the fear of side effects. Condoms been the most commonly used family planning contraceptive. However, this study does not correlate with a study taken by [16], where the main reasons for their non-indulgence in family planning were partner disapproval and religious prohibition. The major reason for the latter's result is that the research was conducted in a rural setting in North-West Nigeria, where Islam is the most predominant religion and the religion does not support family size limitation.

Table 4 shows the reasons for family planning. The majority of them practiced family planning due to financial constraints and child spacing. It was also inferred that most of them did not practice family planning to avoid sexual-related infections.

VIII. Conclusion

Most of the respondents were practicing modern family planning types, with condoms being the most commonly used contraceptive. The main factors of family planning are child spacing, financial constraint, and partner support. Religious belief, fear of side effects, and prevention of sexually transmitted infection, on the other hand, were not reasons for their indulgence in family planning. Despite the high usage and awareness about contraceptives, the majority of the respondents had a large family size. This could be as a result of the wrong usage of contraceptives or the desire to have a large family size due to the fact that most rural women from polygamous homes in Africa compete with their co-wives with children as they believe that the wife with the highest number of children will get the most attention and respect from the husband.

IX. Recommendations

The following recommendations were made on the basis of the study's findings:

- i. The government should enforce a birth control policy to control the fertility rate for a more developed and productive country.
- ii. There should be a public awareness campaign on the importance of family planning.
- iii. There should be a public orientation on the proper usage of contraceptives.

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