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Factors Influencing Contraceptive Use among Women of Reproductive Age in Owerri North, Imo State, Nigeria

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Abstract: *This study was carried out to determine factors influencing contraceptive use among women of reproductive age. This was a community based descriptive survey which took place in Owerri North, Imo State, Nigeria among women of reproductive age. Simple random sampling was used to select thirty percent of semi-urban and rural autonomous communities. A structured self-administered questionnaire which examined the socioeconomic characteristics, cultural factors, proportion of women on any method of contraceptive and health facility factors was administered to three hundred and ninety seven respondents. Data obtained was analyzed using Statistical Package for the social Sciences (SPSS) version 21. Frequencies were generated and Chi-square was used to test significance. Level of significance was set at 0.05. A total of three hundred and ninety six (396) questionnaires were retrieved. Findings of this study revealed that most respondents 72 (58.0%) who uses contraceptive method regularly were between the age range of 33-41 years and 69 (53.1%) in the age range of 24-32 compared to women in the age range of 15-23 who recorded low usage 129(20.3%) . The commonest reason for 144(87.3%) respondents on low usage was that their husband/partner do not support them on any method of contraceptive. The study revealed that Condom (Female), prolonged breast feeding and periodic abstinence 126(61.8%) were the more commonly used current method of contraception compared to pills, intrauterine device and injectables which recorded 69 (33.8%). The findings revealed that a big portion 81(83.5%) of women don't get their contraceptive method as at when due while 50(89.35%) of women said the contraceptive methods were not affordable. Factors found to be significantly associated with contraceptive use were: age level, educational level, occupation, support from partners/husband , accessibility and availability of contraceptive methods and decision making by partners/husband . Re-education on the complications and benefits of contraceptive use should be carried out by health workers so as to improve contraceptive uptake. Female education and male involvement should also be advocated.*

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I. Introduction

Contraceptive use is part of family planning package. A large and empirically verified demand for contraceptive methods to space or limit childbearing exist worldwide (WHO, 2009). Currently, over 200 million women have an unmet need for modern contraception, that is, they are sexually active, want to delay or stop childbearing, and are not using modern contraceptive methods (MacQuarrie, 2014). More than 80 million unintended (mistimed or unwanted) pregnancies occur each year worldwide, contributing to high rates of induced abortion, maternal morbidity and mortality, and infant mortality (Smith, Ashford, Crible and Clifton, 2009). As world population rises to 7.6 billion, the per capita production of money basic commodities is falling, for instance the recent global food shortage is an evidence according to the Population Reference Bureau (PRB, 2018). The effort to raise incomes and living standard is falling in many countries like Nigeria, particularly where population is growing more rapidly and where family planning is not fully practiced. The survival of the human race is endangered if population growth is not checked adequately (Tsui, McDonald-Mosley and Burke, 2010).

According to Olaitan (2009), family planning is the practice that helps individuals or couples to attain the objectives to avoid unwanted pregnancy, bring about wanted birth, regulate the interval between one pregnancy and another and determine the number of children in the family. Family planning involves two concepts which are contraceptive use and other family planning services used by couples to bring about healthy sexual relationship among them without fears of unwanted pregnancies (Isah and Nwobodo, 2009). Family planning services other than contraceptive use include counselling, providing basic infertility services, offering pregnancy testing, sexually transmitted disease screening and treatment services to prevent infertility and improve the health of women, men and infants (Gisaw and Regassa, 2011). Contraceptives are methods, devices or drugs used among sexually active people to reduce or prevent unwanted pregnancy and space birth. Contraceptive methods are either traditional or modern methods of family planning. The traditional method

include prolonged breast feeding, post partum, the use of ring, waist band, wooden doll, the use of black soap and salt to be taken immediately after sex. On the other hand, modern method emphasized the use of temporary methods (pills, intrauterine contraceptive device, injectables, condom), permanent methods (vasectomy and tubectomy) and natural methods which involves withdrawal method and rhythm (Ayeni, 2002). Contraceptive use is a key factor in controlling fertillity rates as proper use can prevent unwanted pregnancy and high risk pregnancies that often lead to maternal and infant morbidity and mortality. It is also important for other reasons such as; reducing women's dependency on their husbands/partners by allowing them more opportunities to work, saving mothers and children lives, lightens the burden and responsibility of husbands/partners in supporting their families, enable parents/partners to give their children basic needs (food, shelter, education, and better future) and with a good political climate, it boosts economic development of women of reproductive age.

Women of reproductive age group are women between menarche and menopause within the age bracket of 15-49 (WHO, 2009). Women of reproductive age in Owerri North Local Government Area has a population projection of sixty one thousand one hundred and sixteen (61,116) as at March 2018 (National Bureau of Statistics, 2018) and with the craving for large families in this locality, high population increase may likely be sustained for a long time if active population control measures are not instituted. Owerri North Local Government Area of Imo State has experienced a phenomenal demographic transition over the last few decades despite the efforts of Government at all level to improve use of contraceptives among others. The census figures show that the total population of Owerri North grew from 95,105 in 1991 to 175,395 in 2006 (National Population Commssion of Nigeria, 2006). This study therefore aims to ascertain the factors influencing contraceptive use among women of reproductive age in Owerri North as to devise decision strategies that will effectively increase acceptance and uptake of contraceptive methods. More specifically, reducing the rate of maternal and newborn mortality levels, improving the quality of family planning services and encouraging proper and continuous use of contraceptives.

II. Material And Methods

This community based descriptive survey was carried out on women of reproductive age among between the age bracket of 15-49 years in Owerri North Local Government Area, Imo State, Nigeria. A total of three hundred and ninety seven respondents of women of reproductive age formed the target population of this study.

Study Design: This study employed descriptive survey design.

Study Location: This study was carried out in Owerri North Local Government Area of Imo State. Owerri North is a Local Government Area of Imo State, Nigeria with headquarters at Uratta. It has an area of 198 square km with a population of 93,093 males and 82,302 females at the 2006 census. The postal code of the area is 460.

Study Duration: February 2018 to April 2019

Sample size: 397 women of reproductive age

Sample size calculation: The sample size was determined using Taro Yamane's (1967:886) formula for determination of sample size which states that in a finite population, when the original sample collected is more than 5% of the population size, the corrected sample size is determined by using the Yamane's formula.

$$n = \frac{N}{(1 + N (e^2)}$$

Where n = Sample size, N = Study Population, E = Confidence Margin (0.05) at 95% confidence

Total population of women of reproductive age = 61,116

Therefore, using the formula Taro Yamane's formula

$$= \frac{61,116}{1 + 61,116 (0.05)^2} = 397$$

Subjects & selection method: A multistage sampling technique was used to select the study sample. In stage one, the Local Government was clustered into existing autonomous communities. The autonomous communities was made up of rural and semi-urban autonomous communities. Simple random sampling was used to select thirty percent of semi-urban and rural autonomous communities. The rural autonomous communities selected include Agbala, Awaka, Emii, Obibiezena and Ulakwo, while the semi-urban autonomous communities are Egbu and Naze. Proportional sample size from each for each of the selected autonomous communities was determined. The second stage was determination of the section of the autonomous community to commence the selection of the households. The autonomous community was divided into four sectors and the first sector was selected by simple random sampling. After which, a bottle was spinned to select the direction to move.

The third stage was selection of respondents from the households by systematic random sampling technique. The determined sampling interval for each of the selected autonomous communities was employed.

The first household that was selected was chosen through simple random sampling (balloting) and thereafter, the sampling interval was maintained until the desired number of respondents was gotten.

Procedure methodology

After written informed consent was obtained from Institutional Review Board (IRB) of School of Health Technology, Federal University of Technology, Owerri for review and approval from Local Government Chairman of Owerri North LGA, a well-structured questionnaire was used to collect data from the respondents. The instrument consisted of four sections (A-D). Section A sought information on demographic factors of the respondents. Section B contained seven items which sought information on cultural factors of the respondents. Section C comprised of six items meant to elicit information on the proportion of women on any method of contraceptive, while section D contained eight items, which sought information on health facility factors influencing contraceptive use among women of reproductive age in Owerri North Local Government Area of Imo State.

To ensure the validity of the instruments, the questionnaire was submitted to the supervisor and two other experts in the field of Public Health. The instrument was vetted to ensure its appropriateness in relation to language, clarity, adequacy of content and ability to elicit accurate information in relation to the purpose of the study. Based on the criticisms and suggestions made by the experts, the initial drafts of the instrument were modified.

A pre-test was carried out in Owerri West Local Government Area which is outside the area of study but has the same characteristics with the study. Copies of the instrument will be administered to 20 respondents. The result obtained was compared for consistency test via Crombach Alpha test. A reliability coefficient of 0.68 was obtained.

Copies of the questionnaire was administered by the researcher to the respondents in the various communities for study in Owerri North Local Area. Every respondent who receive the questionnaire for completion was given instruction on how to do so. An appeal was made to respondents to complete the questionnaire on the spot and return to the researcher and to be honest with their responses. Particular attention was paid to the uneducated women of reproductive age. The items in the questionnaire was read and interpreted to them and their responses were ticked as it corresponds with the options. The administration and collection of the questionnaire spanned through a period of 3 months.

Statistical analysis

Data analysis was performed using Statistical Package for the Social Sciences (SPSS) version 21 and Microsoft Excel 2010. As part of the initial analysis, descriptive method was used to describe the data characteristics. Tables of distribution was constructed for variables in the data and they were expressed in percentages. Chi square test was performed at 5% level to test for significant association between demographic, cultural, facility, and other intervening factors influencing contraceptive use. Probability value (p value) was used to interprete the results and p value less than 0.05 was considered significant.

III. Result

Distribution of the respondents by their demographic profile

Similarities in contraceptive use were observed in age group of the respondents for instance, 14.9% of the women were between the age range of 15-23, 32.8% were between the range of 24-32, 31.3% were between the range of 33-41 and 21.0% were between the range of 42-49. The data shows that 0.6% of the women had no formal education, 20.2% had primary education, 51.3% had secondary education and 28.0 had tertiary education. The data shows that 2.0% of the respondents were housewife, 11.9% were farmers, 29.3% were civil servants, 25.3% were petty traders and 22.0% were students. The data on the table also showed that 49.0% of the respondents were married, 27.3% were single, 7.8% divorced, 6.3% separated and 8.8% widows. The data further shows that 7.9% of the respondents have 1-2 children, 38.6% have 3-4 children, 41.7% have more than 5 children and 11.9% have no child. The data on the table revealed that 98.0% of the respondents are Christians, 1.8% were Muslims while 0.2% were traditional worshippers.

Table 1: Distribution of women of reproductive age by demographic profile

S/n	Variables	Use of contraceptive method		Total(%)
		Yes (%)	No (%)	
1	**Age group**			
	15-23	12(20.3)	47(79.7)	59(14.9)
	24-32	69(53.1)	61(46.9)	130(32.8)
	33-41	72(58.0)	52(41.9)	124(31.3)
	42 - 49	37(44.6)	46(55.4)	83(21.0)
	Total	**190**	**206**	**396**
2	**Highest level of education**			
	No Formal education	0(0)	2(100)	2(0.5)
	Primary education	30(37.5)	50(62.5)	80(20.2)
	Secondary education	83(40.9)	120(59.1)	203(51.3)
	Tertiary education	35(31.5)	76(68.5)	111(28.0)
	Total	**148**	**248**	**396**
3	**Occupation**			
	House Wife	2(25.0)	6(75.0)	8(2.0)
	Farmer	15(31.9)	32(68.1)	47(11.9)
	Civil Servant	76(65.5)	40(34.5)	116(29.3)
	Petty Trader	16(16.0)	84(84.0)	100(25.3)
	Student	18(20.7)	69(79.3)	87(22.0)
	Others (specify)	6 (15.8)	32(84.2)	38(9.6)
	Total	**133**	**263**	**396**
4	**Marital Status**			
	Married	121(62.4)	73(37.6)	194(49.0)
	Single	38(35.2)	70(64.8)	108(27.3)
	Divorced	15(48.4)	16(51.6)	31(7.8)
	Separated	6(24)	19(76.0)	25(6.3)
	Widow	13(37.1)	22(62.9)	35(8.8)
	Others (specify)	0(0)	3(100.0)	3(0.8)
	Total	**196**	**200**	**396**
5	**Number of Children**			
	1-2 children	20(64.5)	11(35.5)	31(7.9)
	3-4 children	85(55.6)	68(44.4)	153(38.6)
	> 5 children	29(17.6)	136(82.4)	165(41.7)
	No child	4(14.9)	43(91.5)	47(11.9)
	Total	**138**	**253**	**396**
6	**Religion**			
	Christianity	243(62.6)	145(37.4)	388(98.0)
	Islam	0(0)	7(100.0)	7(1.8)
	Traditional	0(0)	1(100)	1(0.2)
	Total	**243**	**153**	**396**

Cultural factors affecting contraceptive use among Respondents

The result of the respondents for cultural factors on contraceptive use is presented on table 2. The data shows that 32.6% of the respondents said yes that their husband/partner support them on any method of contraceptive, 41.7% said no while 25.8% said sometimes their husbands/partners do. The data on the table revealed that 46.0% agreed that their traditional/religious belief allow contraceptive practice, 24.5% disagreed while 29.5% said they do not know about that. The data shows that 15.4% of the respondents believed that family pressure makes women marry early in their autonomous community, 35.9% believed it is peer group influence, 31.8% said they do not know while 16.9% believed it is other reasons. The data shows that 20.5% of the respondents think it is the refusal by their husband/partner that hinder them from contraceptive practice, 24.7% thinks it is religious belief, 32.8% thinks it is the need for male children while 22.0% thinks it is the rumour and myth about contraceptives. The data also revealed that about 48.5% of the respondents agreed that

decision making by their husband/partner can hinder them from using contraceptive method while 51.5% do not agree to that. The data shows that 46.7% of the respondents think craving for male children can make their husband/partner prevent them from contraceptives while 53.3% do not think so.

Table 2: Distribution of women of reproductive age in Owerri North by cultural factors affecting contraceptive use

S/N	VARIABLES	Use of contraceptive methods Yes (%)	No (%)	frequency (%)
1	Husband/partner support on any method of contraceptive			
	Yes	50(38.8)	79(61.2)	129(32.6)
	No	21(12.7)	144(87.3)	165(41.7)
	sometimes	29(28.4)	73(71.6)	102(25.8)
	Total	**100**	**296**	**396**
2	Traditional/religious belief on contraceptive practice			
	Yes	96(52.7)	86(47.2)	182(46.0)
	No	17(17.5)	80(82.5)	97(24.5)
	I don't know	13(11.1)	104(88.9	117(29.5)
	Total	**126**	**270**	**396**
3	Cause of early marriage in your autonomous community			
	Family pressure	22(36.1)	39(63.9)	61(15.4)
	Peer group influence	41(29.1)	101(71.1)	142(35.9)
	I don't know	11(8.7)	115(91.3)	126(31.8)
	other reason (specify)	13(19.4)	54(80.6)	67(16.9)
	Total	**87**	**309**	**396**
4	Hindrance from contraceptive practice			
	Refusal by husband/partner	10(12.3)	71(87.7)	81(20.5)
	Religious belief	57(58.2)	41(41.8)	98(24.7)
	Need for male children	29(22.3)	101(77.7)	130(32.8)
	Rumours and Myths about contraceptives	14(16.1)	73(83.9)	87(22.0)
	Total	**110**	**286**	**396**
5	Decision making by husband/partner hindrance from contraceptive use			
	Yes	27(14.1)	164(85.9)	191(48.5)
	No	61(29.9)	143(70.1)	204(51.5)
	Total	89	307	**395**
6	Need for male children			
	Yes	45(24.3)	140(75.8)	185(46.7)
	No	31(14.7)	180(85.3)	211(53.3)
	Total	**76**	**320**	**396**

Proportion of women on any method of contraceptive among women of reproductive age in owerri north

Data presented in Table 3 shows the proportion of women on any method of contraceptive among women of reproductive age in Owerri North. The data shows that 51.5% of the respondents have used any method of contraceptive while 48.5% have not. The data revealed that 33.8% of the respondents use pills, Intrauterine device (IUCD), Injectable (Depo-provera) as method of contraceptive, 61.8 % use Condom (Female), prolonged breast feeding and Periodic abstinence, 4.4% use other methods. The data shows that 43.9% attest that their husband/partner made the choice of these contraceptive methods for them, 20.8% said they made the choice themselves while 24.7% of the respondents choice was made by health worker. The data on the table further revealed that 13.9% of the respondents attest that their partner/husband use male condom as method of contraceptive, 28.3% use withdrawal method, 1.5% use Vasectomy/male sterilization, 1.8% use other methods while 54.5% do not use any method of contraceptive. The data revealed that 54.8% of the respondents were given information on the type of contraceptive methods of choice before selection while 45.2% were not given information on the type of contraceptive methods of choice before selection. The data shows that the factors that made the respondents to choose a particular choice of contraceptive methods were low cost (43.3%), low risks of complications (27.5%), husband/partner choice (18.7%) and others (10.4%).

Table 3: Frequency and Percentage Count of the proportion of women on any method of contraceptive among women of reproductive age in Owerri North

S/N	VARIABLES	FREQUENCY	PERCENTAGE
1.	Contraceptive method used or presently using		
	Yes	204	51.5
	No	192	48.5
	Total	**396**	**100**
2	Method of contraceptive used/using		
	Pills, Intrauterine device (IUCD), Injectable (Depo-provera)	69	33.8
	Condom (Female), prolonged breast feeding, periodic abstinence	126	61.8
	Tubal ligation, Others	9	4.4
	Total	**204**	**100**
3	Choice of contraceptive method		
	Partner/husband	174	43.9
	Myself	82	20.8
	Health worker	98	24.7
	Others	42	10.6
	Total	**396**	**100**
4	Partners method of contraceptive		
	Male condom	55	13.9
	Withdrawal method	112	28.3
	Vasectomy/male sterilization	6	1.5
	None	216	54.5
	Others	7	1.8
	Total	**396**	**100**
5	Information on any contraceptive method		
	Yes	217	54.8
	No	179	45.2
	Total	**396**	**100**
6	Reason for chosen a particular contraceptive method		
	Low cost	172	43.4
	Low risk of complications	109	27.5
	My husbands/partners choice	74	18.7
	Others	41	10.4
	Total	**396**	**100**

Influence of health facility factors on contraceptive use among women of reproductive age in owerri

Data presented in Table 4 shows the association between health facility factors of contraceptive methods and its use among women of reproductive age in Owerri North North. The data shows that 30.6% of the respondents get contraceptives as at when due while 24.5% do not. The data revealed that 48.8% of the respondents that get contraceptives as at when due get it from hospital and health institutions, 21.5% get it from drug vendor/pharmacy, 12.4% get it from community based distributor, 9.9% get it from agents (CBDs) while 7.4% get it from other places. The data further showed that the reasons some of the women do not get contraceptives as at when due are; Out of stock (5.2%), Bus fair to travel to clinic (9.3%), Always busy (11.3%), Not affordable (57.7%) and others (16.5%). The data revealed that 27.0% of the respondents like the services of health personnel regarding contraceptives while 73% of the respondents do not like it. The result revealed that the respondents that do not like the services of the health workers said it is as a result of the inconsistencies of the health workers (33.9%), incompetency (18.3%), unfriendly nature (30.2%) and others (17.6%). The results show that the respondents that like the services of the health workers do so because; the health workers offer

satisfactory services (48.6%), they have competent staff (29.9%), they are friendly (17.8%) and others (3.6%). The result further revealed that 17.2% of the respondents think contraceptives are accessible to everyone in their area while 82.8% do not.

Table 4: Distribution of women of reproductive age in owerri North by Health facility factors affecting contraceptive use

S/n	Variables	Use of contraceptive method Yes (%)	No (%)	Frequency (%)
1	If you get your contraceptive as at when due			
	Yes	27(22.3)	94(77.7)	121(30.6)
	No	16(16.5)	81(83.5)	97(24.5)
	Sometimes	14(13.3)	91(86.7.)	105(26.5)
	Others	13(17.8)	60(82.2)	73(18.4)
	Total	**70**	**326**	**396**
2	where you get your contraceptive from if you answer yes			
	Hospital/health institutions	39(66.1)	20(33.9)	59(48.8)
	Drug vendor/pharmacy	16(61.3)	10(38.5)	26(21.5)
	Community Based Distributors	7(46.7)	8(53.3)	15(12.4)
	Agents (CBDs)	5(41.7)	7(58.3)	12(9.9)
	Others	4(44.4)	5(55.6)	9(7.4)
	Total	**74**	**50**	**121**
3	If you don't get your contraceptive when due			
	Out of stock	0(0)	5(100)	5(5.2)
	Bus fair to travel to clinic	2(22.2)	7(77.8)	9(9.3)
	Always busy	3(27.3)	8(72.7)	11(11.3)
	Not affordable	6(10.7)	50(89.3)	56(57.7)
	Others	2(12.5)	14(87.5)	16(16.5)
	Total	**13**	**84**	**97**
4	If you like the services of health personnel regarding contraceptives			
	Yes	27(25.2)	80(74.8)	107(27.0)
	No	19(6.6)	270(93.4)	289(73.0)
	Total	**46**	**250**	**396**
5	If your response is No to question four			
	They are not consistent	18(18.4)	80(81.6)	98(33.9)
	They are not competent	7(13.2)	46(86.8)	53(18.3)
	They are not friendly	27(31.0)	60(69.0)	87(30.2)
	Others	6(11.8)	45(88.2)	51(17.6)
	Total	**33**	**231**	**289**
6	If your response is Yes to question four			
	They offer satisfactory services	45(86.5)	7(13.5)	52(48.6)
	They have competent staff	25(78.1)	7(21.9)	32(29.9)
	They are friendly	15(78.9)	4(21.0)	19(17.6)
	Others	3(75.0)	1(25.0)	4(3.7)
	Total	**88**	**19**	**107**
7	If contraceptives are available to everyone in your area			
	Yes	55(80.9)	13(19.11)	68(17.2)
	No	18(5.5)	310(94.5)	328(82.8)
	Total	**73**	**324**	**396**
8	If your response to question seven is No			
	High cost	15(19.7)	61(80.3)	76(23.2)
	Long distance to clinic	25(38.5)	40(61.5)	65(19.8)
	preferential treatments by staffs	65(36.9)	111(63.1)	176(53.7)
	Others	2(18.2)	9(81.8)	11(3.4)
	Total	**107**	**221**	**328**

Test of Hypothesis

Hypothesis were tested using chi-square. The Statistical Package for the Social Sciences (SPSS) computer software package (version 21.0) was employed for the analysis. Level of significance was set at 0.05 for decision making. Hypothesis were in null form and accepted if p-value was greater than the level of significance (0.05) indicating statistically significant value, and rejected if p-value was less than 0.05.

Hypothesis 1 : Demographic characteristics of women of reproductive age in Owerri North have no significant influence on their contraceptive use

Table 5: Influence of demographic characteristics of women of reproductive age in Owerri North on their contraceptive use.

s/n	Variables	Use of contraceptive method Yes (%)	No (%)	Total (%)	df	sig.	decision
1	Age group				39	0.607	Accepted
	15-23	12(20.3)	47(79.7)	59(14.9)			
	24-32	69(53.1)	61(46.9)	130(32.8)			
	33-41	72(58.0)	52(41.9)	124(31.3)			
	42 - 49	37(44.6)	46(55.4)	83(21.0)			
	Total	190	206	396			
2	Highest level of education				52	0.364	Accepted
	No Formal education	0(0)	2(100)	2(0.5)			
	Primary education	30(37.5)	50(62.5)	80(20.2)			
	Secondary education	83(40.9)	120(59.1)	203(51.3)			
	Tertiary education	35(31.5)	76(68.5)	111(28.0)			
	Total	148	248	396			
3	**Occupation**				65	0.711	Accepted
	House Wife	2(25.0)	6(75.0)	8(2.0)			
	Farmer	15(31.9)	32(68.1)	47(11.9)			
	Civil Servant	76(65.5)	40(34.5)	116(29.3)			
4	**Marital Status**				65	0.021	Rejected
	Married	121(62.4)	73(37.6)	194(49.0)			
	Single	38(35.2)	70(64.8)	108(27.3)			
	Divorced	15(48.4)	16(51.6)	31(7.8)			
	Separated	6(24)	19(76.0)	25(6.3)			
	Widow	13(37.1)	22(62.9)	35(8.8)			
	Others (specify)	0(0)	3(100.0)	3(0.8)			
	Total	196	200				
5	**Number of Children**				52	0.000	Rejected
	1-2 children	20(64.5)	11(35.5)	31(7.9)			
	3-4 children	85(55.6)	68(44.4)	153(38.6)			
	> 5 children	29(17.6)	136(82.4)	165(41.7)			
	No child	4(14.9)	43(91.5)	47(11.9)			
	Total	138	253	396			
6	**Religion**				26	0.696	Accepted
	Christianity	243(62.6)	145(37.4)	388(98.0)			
	Islam	0(0)	7(100.0)	7(1.8)			
	Traditional	0(0)	1(100)	1(0.2)			
	Total	243	153	396			

IV. Discussion

Findings of this study revealed that most respondents 72 (58.0%) who uses contraceptive method regularly were in the age range of 33-41 years and 69 (53.1%) in the age range of 24-32. The study revealed that women between the age range of 15-23 recorded 129(20.3%) usage. This is in accordance with findings by Okeh, et al (2011) where contraceptive use was low among young women and reaches a peak among women from their early thirties. Findings of this study indicated that most 121 (62.4%) women who uses contraceptive methods had 1-2 (20(64.5%) and 3-4 (85(55.6) children compared to non users who had more than five children 136(82.4%). The present study is in accordance with the findings of Belmont and Marolla (2005) which posited that as poverty and population increased, so the family size has decreased to 3-4.

The findings of this study showed that majority 79 (61.2%) women stated partner opposition and need for male children 140(75.8%) as a reason for not using contraceptive methods compared to 50(38.8%) of women who said that partner/husband support them and 45(24.3%) saying male children cannot prevent them from using contraceptive methods. Partner opposition being the reason of not using contraceptive in this study ties with similar studies carried out by Olugbenga-Bello et al (2011) in which 66.3% of the women reported husbands/partners disapproval for non use. The study found that the cultural factors of women of reproductive age in Owerri North have significant influence on their contraceptive use.

Findings showed that the proportion of women that has used atleast one method of contraception was higher 204(51.5%) while 192(48.5%) said they have not used any of the method. The study revealed that Condom (Female), prolonged breast feeding and periodic abstinence 126(61.8%) were the more commonly used current method of contraception compared to pills, intrauterine device and injectables which recorded 69 (33.8%). This is in conformity with findings by Bongart and Elof (2002) where Condom (Female), prolonged breast feeding and periodic abstinence were the most commonly used method of family planning.

Findings revealed that a big portion 81(83.5%) of women don't get their contraceptive method as at when due. The findings of the study also revealed that majority 50(89.35%) of women said the contraceptive methods were not affordable while a large portion 270 (93.4%) said they don't like the services of health personnel regarding contraception. Their main reason being that they are not consistent 80(81.6%) and 60%) agree they are not friendly. This is in conformity to the study by Olugbenga-Bello where 161(26.3%) were not using any method , main reasons being affordability, availability, accessibility and service provision 184(41.2%)

IV. Conclusion

This study has been useful in identifying some of the factors influencing contraceptive use among women of reproductive age in Owerri North, Imo State. Demographic characteristics like age level, education level and occupation were found to influence the use of contraceptive methods among women of reproductive age. Also, cultural factors like peer group influence, and husband/partner support were crucial in influencing the use of contraceptive methods. However, regarding proportion of women on any method of contraceptive, there was a large portion of those who were not using contraceptive methods while health facility factors were availability, affordability and accessibility of contraceptive methods. These were all indications of unmet need of contraceptive methods and low usage of contraceptives among women of reproductive age in Owerri North.

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