Effectiveness of Reproductive Health Education on Undergraduate Students’ Attitude towards Family Planning In South-South Nigeria

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Abstract

This paper focuses on the effectiveness of reproductive health education on undergraduate students’ attitude towards family planning in south-south Nigeria. Quasi experimental research design involving pre-test – post-test of experimental and control groups were used and 400 year one undergraduate students formed the subjects of the study. Literature relevant to the study was reviewed. Treatment with the use of reproductive health education package was given to the experimental group for one semester while the control group followed the normal existing curriculum. Four point likert type scale titled Students Family Planning Attitude Questionnaire (SFPAQ) was used for data collection. Analysis of covariance statistics was used to analyze the data collected. The result showed that the reproductive health education package was highly effective in improving undergraduate students’ family planning attitude. Recommendations were made based on the finding.

Keywords: Reproductive Health, Attitude, Undergraduates, Family Planning

1 Introduction

Sexual activity and reproductive health risks are mutually correlated, hence necessitating the need for protection through the use of the available family planning methods. Majority of the contemporary young people across the globe are engaged into alarming proportions of sexual activity, yet ill-prepared to protect themselves from the attendant risks. More significantly, research has shown that sexually active young people especially in Nigerian universities like other young people are seriously engaged in the practice of unprotected sex mainly due to negative attitude they hold about the existing family planning methods. This attitude potentially puts this significant group of the population into devastating reproductive health risks of early unintended pregnancy and sexually transmitted infections (STIs) with their attendant ills. The consequences of these risks are more disastrous for the young undergraduate students, who if they become victims run the risks of dropping out of the university in a country where university education is still for the privileged few.

Family planning services which place emphasis on the birth control/communication programmes and contraceptive technology is an important aspect of ensuring sexual and reproductive health and therefore helps in achieving the millennium development goals aimed at striking a marked improvement in the overall health status of citizens in 2015. As young people engage in early sexual activity, one would have thought that they will be ready to take responsibility for their own actions. Negligence attitude among this vulnerable group has reportedly led to the falling standard of their reproductive health and therefore needs urgent attention. Besides, most of the studies on family planning issue in the country, border on the negative attitude among adults and young adults, married and unmarried individuals alike. It appears there is a missing link in people’s knowledge of human sexuality and reproductive process which dominates their preventive attitude, thus this paper focuses on the effectiveness of reproductive health educational intervention on undergraduate students’ attitude towards family planning in South-South Nigeria.

2 Statement of Hypothesis

There is no significant difference between the effect of reproductive health education and normal curriculum on undergraduate students’ attitude towards family planning in south-south Nigeria.

3 Literature Review

Adebusonye (1999) in Ibadan, South West of Nigeria noted that among 2,769 and 2,803 in-school young female and male adolescents respectively a high proportion of the subjects had current boy/girlfriends. When asked whether they are interested in future family planning, only a very low proportion, 18% of the total females sampled responded in the affirmative while 68% of the males gave just any reason for not wanting to
accept the programme. Even when asked pertaining to the choice of procedure into marriage in terms of how many children they will have, the study showed that as many as 69% gave a non-numeric answer “God provides”. The low proportion among this urban young population who indicated interest in future family planning points to the fact that such attitude to family planning in future may not exert the desired effect on future risk reduction. Such finding is an indication of the increase STIs including HIV/AIDS, illegally induced abortion, unintended pregnancy, child abandonment among other reproductive health ills in our environs.

Hetlizer (1995) in a study in Malawi found that more than half of the Malawian young girls surveyed from ten villages said they would rather risk pregnancy and of course HIV infection than ask a boy to use condom. Further to this, Ajuwon (2000) in his study of the effect of educational intervention on reproductive health knowledge, attitude and practice among secondary school students in Oyo State confirmed that some young people believe that pregnancy cannot occur during the first sexual episode, whereas others believe that such methods as rhythm method and abstinence are not only difficult to use but not reliable, and that the use of other methods will conflict with their health. In same vein, Oyo-Ita, Kalu, Mkpam, Ikpeme and Etuk (2002) researched on knowledge of reproductive health issues among secondary school adolescents in Calabar and found that among the sexually active young people, 50% of 166 respondents believed that taking a few capsule of antibiotics soon after sex will prevent any risk. Otoide, Oronsaye and Okonofua (2001) in a study of 149 respondents aged 15-19 in Benin City Nigeria noted that 86% prefer abortion, stating that the use of family planning methods is riskier than abortion irrespective of the fact that it is the leading cause of maternal mortality in Nigeria with 80% of the death occurring among young people. To this end, World Health Organization WHO (2001) laments that such attitude towards preventive measures points to the fact that young people are not either properly taught or lack sufficient details about sex and sex related issues. Further to this, Magnani, Seba & Vareau (2001) contend that when young people possess adequate knowledge about sexual risks and preventive measures, their sexual behaviour may tend to be responsible involving preventive attitude.

The negative attitude toward family planning is theoretically explained under the framework of Ajzen and Fishbein’s theory of reasoned action which speculates that when people have adequate information about a behaviour they carefully and thoughtfully consider the implication and consequences of the behaviour (that is they rationally weigh the options) and take action once they perceive that change will benefit them. The unprotective attitude among the sexually active young people and adults alike has severally been attributed by scholars to ignorance and lack of details about sexuality. (Bongaart 1998; Ajuwon 2000; WHO 2001; Adedimeji 2005; Ikulayo 2007 & Oyo-Ita et al (2002).

For instance, Ikulayo (2007) observed that many people in our society still shy away from the discussion of sexuality. NARAL (2006) affirmed that young people are only provided with regulated proportion of this education, stressing only abstinence but fail to emphasize the contraceptive use for the sexually active ones, and Adedimeji (2005) re-affirmed that where the subject is found in Nigerian curriculum, it is lacking in sufficient details because most teachers are either not adequately equipped to teach it or due to the controversies surrounding its open discussion in the Nigerian society.

On the contrary, authors such as Kanta and Zilnik (1972) believe that giving the young population information about sexuality including birth control measures is synonymous to giving them license to engage in sexual activity. The present study thinks that such view undermines the great toll of the attendant consequences of uninformed sexual relationships with their untold complications especially among the young population of the Nigerian society. However it is worth noting that Brieger & Delano (2001) in the United States reported that majority of participants showed favourable attitude towards the use of contraceptives among sexually active students after a sex education focus group discussion programme. AFRSRC (2000) also revealed a decline in proportion of sexually active students who dropped out of school from 16% to 4% among students who participated in sexuality education programme compared to an increase (from 11% to 35%) among the comparison group. Wang, Hertog, Meier, Lou and Gao (2005) in China also reported that balanced and comprehensive sex education increases the likelihood of safe behaviour among the sexually active young people.

4 Materials and Method

Research instrument

A well validated instrument captioned Student Family Planning Attitude Questionnaire (SFPAQ) was used for data collection. The instrument has three sections. Section ‘A’ elicited the respondents’ demographic information such as age, sex, university, faculty and form number. Section ‘B’ was a 15-item likert type scale which measured attitude towards natural family planning methods arranged in four point scale ranging from Strongly Agree(SA), Agree(A), Disagree(D) and Strongly Disagree(SD). Section ‘C’ consists of 18 items measuring attitude towards artificial family planning methods arranged also in four point scale. Respondents were to tick
the options that explain their attitude. A total of 400 copies of the questionnaire was distributed and used for the study.

5 Research Methodology

The study covered all year one undergraduate students in south-south geopolitical zone of Nigeria. A pretest-post test control group quasi-experimental design was used for the study. Intact classes of the experimental group were treated with Reproductive Health Education (RHE) package which was incorporated into GSS 1111 curriculum. RHE topics covered include: human reproductive system; function and process, pregnancy, sexual and reproductive health right; sexually transmitted infections, abortions, family planning method; types, operations and benefits. The control group followed the normal existing curriculum for GSS 1111. Out of the seven (7) public universities in the area, two were randomly selected, and were also assigned as experimental and control group respectively to avoid interactions between them. However, assignment of the subjects to either experimental or control group was not by randomization since intact classes were used. Ten faculties were selected across the two universities, these constituted the intact classes exposed to the treatment where forty (40) subjects per class were selected for the study. Two hundred (200) subjects in the experimental group and two hundred (200) subjects in the control group constituted the sample of the study. A breakdown of the two hundred (200) year one subjects in the experimental group gave one hundred (100) males and one hundred (100) females. The same number also constituted male and female categories of the control group, giving a total sample of four hundred (400) subjects used for the study.

6 Results and Discussion

Using the analysis of covariance with pre-test scores as covariates the hypothesis that says that there is no significant difference between the effect of reproductive health education and normal curriculum on undergraduate students’ attitude was tested as shown in Table I.

Hypothesis: There is no significant difference between the effect of reproductive health education and normal curriculum on undergraduate students’ attitude towards family planning in south-south Nigeria. Analysis of covariance with pre-total reproductive health education as covariate. The result is presented in Table 1:

The result showed that the experimental group students performed significantly better in both artificial and natural family planning attitude test than those in the control group. The high significant difference between the two groups is obviously due to the treatment effect. This result is in agreement with Ajzen and Fishbein attitudinal theory of reasoned action upon which this study on family planning attitude is anchored which indicates that building rational attitude towards a situation results from acquisition of proper and adequate knowledge of the situation. The result has also confirmed (in south-south Nigeria) the research reports of Magnani et al( 2001); Brieger & Delano (2001); AFRSRC (2005) and Wang et al (2005) who found that sex education was effective in improving attitude towards protective measures among sexually active students. The result has debunked the work of Kanty and Zilnik (1972) which said that giving young people detailed information about sexuality will increase illicit sexual activity and immorality among them. The finding of this study corroborates the work of authors such as (WHO 2001; Adedimeji 2005; Ajuwon 2000 and Ikuhaya 2007) who contend that ignorance is paramount to the widespread sexual and reproductive health ills that have plagued our society. By implication, WHO in population reports of (2001) and also Magnani et al (2001) variously contend that discussion of sexual issues is aimed at delaying sexual activity and increasing contraceptive use among sexually active persons thus reducing the incidence of death, drop out of school, STI’s, child abandonment, abortion etc. among the young people.

Obviously, The result of this study in agreement with the above views and in keepings with Ajzen and Fishbein’s theory is evident that it is disastrous to withhold cogent information about sexual issues to the contemporary young people as they may not make informed choices but be left at the mercy of uninformed friends. But equipping young people with facts and balanced sexuality education would empower and facilitate in them the development of responsible sexual attitude, relationships and fulfillment of healthy practices, having been fully aware of the consequences of their actions. This would also help the university undergraduates to appreciate their potentials in attaining their goals of being university graduates and in the long run contribute meaningfully to the development of their families, nation and to the society at large.

7 Recommendations

1) A balanced reproductive health education having been found very effective in this study for addressing undergraduate students attitude towards family planning should be included in first year GSS curriculum in our tertiary institutions by the curriculum planners and policy makers.

2) Although a national sexuality education curriculum exists, it should be adopted as a guide. In Implementation, there should be a continuous fine-tune of the content by curriculum developers in
line with individual or group needs. Such review will be a step towards making reproductive health education curriculum more responsive to broad needs of all categories of young people.

3) There should be a paradigm shift in programming of the curriculum by educators in Nigeria. This should reflect a shift from a narrow-based and controversy prone sexuality education to a cogent and balanced sexual reproductive health education that is young people sensitive. The teaching of such programme in the universities should go beyond the limit of mere passing examinations to foster skill acquisition for responsible sexual behaviour in undergraduate students.

4) Programme developers should intensify educational intervention programmes that emphasize not only abstinence, but birth control and family planning methods among other reproductive health issues.

Table 1 Summary of Analysis of Covariance (ANCOVA) of the students post-total reproductive health education of the treatment with pre-total reproductive health education as covariate

<table>
<thead>
<tr>
<th>Treatment</th>
<th>N</th>
<th>X</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experimental</td>
<td>200</td>
<td>74.27</td>
<td>4.51</td>
</tr>
<tr>
<td>Control</td>
<td>200</td>
<td>74.26</td>
<td>4.44</td>
</tr>
<tr>
<td>Total</td>
<td>400</td>
<td>74.25</td>
<td>4.51</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Source of variation</th>
<th>SS</th>
<th>df</th>
<th>ms</th>
<th>f-cal</th>
<th>sig level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Model</td>
<td>73.167</td>
<td>2</td>
<td>36.584</td>
<td>1.851</td>
<td>.150</td>
</tr>
<tr>
<td>Covariate</td>
<td>8439.256</td>
<td>1</td>
<td>8439.256</td>
<td>426.986</td>
<td>.000*</td>
</tr>
<tr>
<td>Intercept</td>
<td>5.929</td>
<td>1</td>
<td>5.929</td>
<td>.300</td>
<td>.584</td>
</tr>
<tr>
<td>Treatment</td>
<td>71.107</td>
<td>1</td>
<td>71.107</td>
<td>3.598</td>
<td>.059*</td>
</tr>
<tr>
<td>Enor(resident)</td>
<td>7846.583</td>
<td>397</td>
<td>19.776</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>7919.750</td>
<td>399</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* p<.05 alpha level

The result in Table 1 shows the summary of the analysis of covariance on the post-total reproductive health education of the student in the experimental and control groups. The experimental group was taught with the package (reproductive health education); while the control group was not. The post-total reproductive health education mean scores obtained were 74.27 and 74.26 for experimental and control groups respectively.

The result shows that the F-ratio (F= 3.5983, P<.05) for post-total reproductive health education was higher than the critical value of 3.00 at .05 level of significance with 1 and 397 degrees of freedom. With this result the null hypothesis was rejected.

REFERENCES


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