

## TEMPORAL variation in the utilization of CONTRACEPTIVES among CLIENTS of Private Health Facilities in KOGI STATE, NIGERIA

### Background

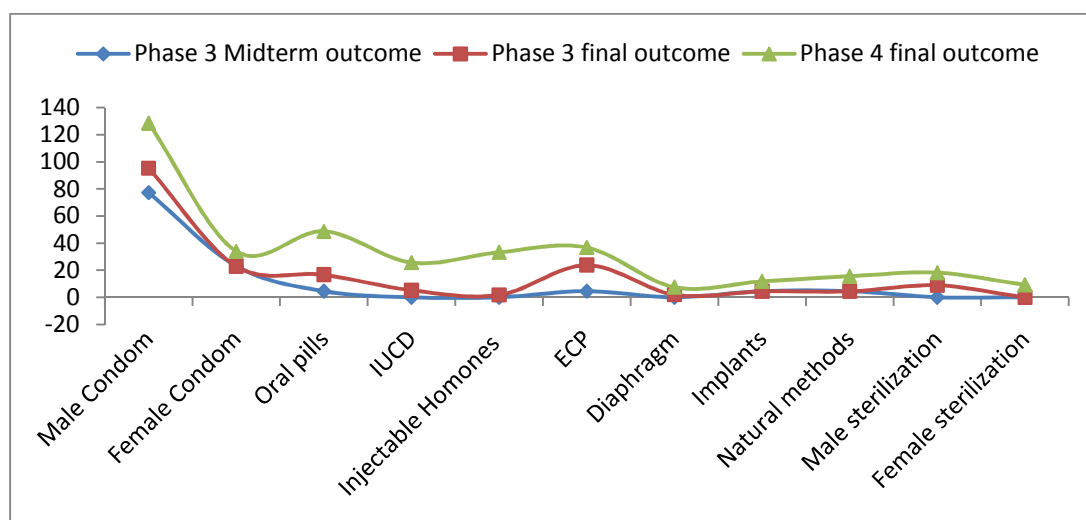
Association for Reproductive and Family (ARFH) a national NGO in Nigeria with support from David and Lucile Packard collaborated with the private health sector to enhance access to FP services in nine Nigerian states in two phases. The study assessed the trend in the utilization of family planning methods provided in project facilities between 2006 and 2010.

### Method

The study was cross sectional. It involved the use of pretested, interviewer administered semi-structured questionnaires to assess the socio-demographics and utilization of methods of FP among male and female exit clients of the facilities in reproductive age. The private facilities were located in four local government areas (LGAs) in Kogi state in the North Central Zone of Nigeria. The sample size was one hundred and thirty three (133). The clients were sampled randomly where the client flow size was low and conveniently where few clients were found. The evaluations of the intervention were conducted at the midterm of the phase three, end of phase three and four which took place in 2006, 2007, and 2010 respectively. The analysis of the trend of FP utilization was done using Microsoft excel and the differences were established using analysis of variance in SPSS version 16.

### Results

Most (85%) of the clients were married and 67% were literate and regular clients of the private facilities on the project. There was preference for male (77.3%) and female (23%) condoms respectively at phase three midterm evaluation. The utilization of emergency contraceptive pills (ECP), injectable hormone (19.3), male condom (18%) and oral pills (12%) were most prominent in phase three final evaluation. However, male condom (33.3%), injectable contraceptive hormones (32%), and IUCD (20.4%) were mostly used in the fourth phase of the project.



Analysis of variance showed a significant difference over time in the use of IUCD ( $P=0.00$ , 95% CI: -7246.25 and -5223.9) and oral contraceptive pills ( $P=0.00$ , 95% CI: -86.9 and -74.9). Although, the difference is small but shows the changes in the use of IUCD and Injectable contraceptive hormone over time among this group is not due to chance.

### **Discussion**

The difference in the utilization of FP methods was prominent in the final evaluation of the phase 4 of the project. The utilization methods of contraception among clients of private health facilities in Kogi state indicates an improvement except for the long acting methods such as female/male sterilization and implants. It implies therefore that projects that are geared towards changing contraceptive behavior tend to yield positive outcomes in the long run than in the short run. The preference for barrier methods across the phases of the project may be explained by the programmatic emphasis on dual protection for unintended pregnancy, HIV and other STIs, contraceptive security and low cost. The preference of injectable for injectable and IUCD is similar to the NDHS (2008) findings.

### **Conclusion**

The utilization of FP methods tends to increase over time following quality FP service delivery in private health facilities. A systematic review of barriers to the use of long acting contraception at individual, community, policy level in the private health sector and long term interventions to increase the use of long-acting contraceptive methods in Nigeria are recommended.