DYNAMICS OF KNOWLEDGE, USE AND PREFERENCE OF BIRTH CONTROL METHODS AMONG WOMEN OF REPRODUCTIVE AGE IN URBAN AREA

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ABSTRACT: Despite the introduction of birth control methods to mitigate these challenges in reduction of maternal mortality had not been encouraging in Nigeria. This study assessed dynamics of the use, preference and determinant factors of birth control methods among women within reproductive age in an urban metropolis. Previous studies on contraceptive use have focused on the use and in some cases the preference of contraceptive use among women, however little is known about the determinant factors that influence the use and preference of birth control methods among female teachers of reproductive age.

One hundred and seventy three secondary school teachers who are within child bearing age were interviewed through multi-stage random sampling technique. Both descriptive and inferential statistics were used in analyzing the data collected through administration of questionnaires.

Results of analysis shows that majority of the respondents in the study area were between the ages of 30 and 50 years (79.8%), Yoruba (82.1%), Christians (75.1%), married (87.3%) and had university education (56.6%). Respondents had high knowledge of the following birth control methods: abstinence (49.7%), male condom (41.6%), withdrawal (40.5%), IUCD (35.8%), injectables (35.3%), safe period (34.1%) and diaphragm (32.4%). The most common method used among female secondary school teachers was the withdrawal method (34.7%) and condom (34.7%), followed by safe period (28.3%) and then abstinence (21.9%) as their birth control measures. Among respondents, the most preferred method is diaphragm (16.8%), followed by birth control sponge (14.5%), spermicide (13.9%), injectables (13.3%) and vasectomy (13.3%). Respondents stated that these methods were preferred but not used due to cost and affordability. Reasons for their choice of birth control methods include convenience (47.4%), medical advice (36.9%), effectiveness (35.8%) and reversibility (26.6%). Result of analysis shows that relationship exists between educational attainment and use of birth control methods in the study area. (x^2= 6.550, p= 0.014)

The study therefore concludes that female secondary school teachers in urban area had high levels of knowledge and use of birth control methods which their age and educational attainment determined their level of use. However, preference was not same as use due to affordability. More awareness campaign on birth control methods and its advantages should be carried out in the study area and policy on subsidizing the birth control cost should be considered.

KEYWORDS: Knowledge, Use, Preference, Birth Control, Reproductive.

1 INTRODUCTION

Fertility regulation is an essential element of preventive health care, more so as the benefits from fertility regulation relate to the broader issue of the status of women. The ability of a woman to control her own fertility is one of her basic and important rights. It is presumed that a better regulated sexuality and fertility affects the status of the women socially and economically. This is perceived to be reflected in their educational, health, and economic status coupled with independence to take decisions on their role and be responsible for the total well-being.

The relatively high birth rate in Nigeria which has being accompanied by steady declines in death rates has resulted in high rates of population growth (Ebeigbola and Ogunjuyigbe, 1988). Observers believe that high population will ever remain

an impediment to her development until something is done about it. There are several factors that have been stated as responsible for this trend though many have not been tested empirically (Cara and Khan 2004). While some scholars posit that residence, ethnicity, education etc are part of factors responsible for differentials in prevalence and use, others are interested in costs. The central thrust of this study is to identify dynamics in the use, preference and determinant factors of birth control method use among women of reproductive age group.

1.1   STATEMENT OF THE PROBLEM

Total fertility rate (TFR) in Nigeria is as high as 5.7, which makes Nigeria to be considered as fertility stall country i.e. high fertility countries. The implication of this results in uncontrolled population growth that has negative impact on the socioeconomic development of the society. Inadequate use of family planning strategies have continuously exacerbated the vulnerability of developing countries to poverty, culminating into high maternal and infant mortality. Previous studies on contraceptive use have focused on the use and in some cases the preference of contraceptive use among women, however little is known about the dynamics in the use and preference of birth control methods among female teachers of reproductive age.

1.2   OBJECTIVES OF THE STUDY

The general aim of this research is to understand dynamics of the use and preference of birth control method use among female teachers within the reproductive age group. This was achieved through the specific objectives:

1. To document birth control methods knowledge among teachers of reproductive age.
2. To assess the use of birth control methods among teachers of reproductive age.
3. To identify preferences for the use of birth control methods among teachers of reproductive age.
4. To identify factors that contributes to the choice of preferred birth control methods by respondents.

1.3   RESEARCH QUESTIONS

This study seeks to provide the following questions

1. What are the factors that determine birth control methods used among respondents?
2. Are females aware of both traditional and orthodox birth control methods?
3. Which of the birth control techniques are commonly used by respondents?
4. Which of the birth control techniques are preferred by respondents?

1.4   RESEARCH HYPOTHESES

HYPOTHESIS I

H_0: There is no significant relationship between selected socio- economic characteristics and use of birth control methods.
H_1: There is significant relationship between selected socio- economic characteristics and use of birth control methods.

HYPOTHESIS II

H_0: There is no significant relationship between knowledge of birth control methods and birth control use.
H_1: There is significant relationship between knowledge of birth control methods and use.

1.5   SIGNIFICANCE OF THE STUDY

This research work will also add to existing literature and subject matter. This study will be of help to academic researchers as it shed more lights on knowledge of birth control methods, preference and use. Furthermore, this research will help to increase better understanding of birth control methods, preference and use that can empower women between the reproductive age group. It is believed that the research will have impact in population policy making and also provide a ground for further research.

1.6   SCOPE OF THE STUDY

The central concern of the study is to understand the dynamics of birth control method use, knowledge rand preference. It is delimited to female secondary school teachers within the reproductive age group in two local government areas of Ibadan. The research was conducted by randomly selecting female secondary teachers from two local government areas in Ibadan metropolis.

2   BRIEF REVIEW OF LITERATURE

Birth control and family planning are two sides of the same coin that are sometimes used interchangeably (Adetoun,1991). Birth control is a synonym for family planning. There are various meanings and definition of birth control. There are basically two types of modern birth control: Reversible methods and Permanent method of birth control Casterline 2001).

Reversible methods include hormonal method, intrauterine device, barrier method and fertility based awareness method. The hormonal method works by changing a woman's hormonal levels, examples are Birth control pill, Birth control shot, The Nova ring, The patch and The implant. The intrauterine device (IUD) is a T-shaped device, which is inserted into the vagina (uterus) by a health care professional. Other reversible methods include Male condom, Female condom, Diaphragm, Cervical cap: Spermicides, and Sponge. There are fertility awareness based methods like Continuous abstinence, Natural family planning or fertility awareness.

Permanent methods of birth control or irreversible methods are meant for people who want a permanent method of birth control. In other words, they never want to have a child, or they do not want more children. Examples include Female Sterilization (also called Tubal ligation or "tying tubes"), Male Sterilization, Tran cervical Sterilization. (Amercan Psychological Association dictionary, 2014).

There are traditional methods of birth control and practices, which include beliefs or customs handed down from generation to generation mostly by words of mouth in order to assist their users to achieve birth rate regulation. These methods include abstinence from sexual relationships after child birth, a broad range of abortifacients and contraceptive mixtures, withdrawal and various forms of magic (Himes, 1963). While many of these methods may not have been effective in controlling fertility, their use is evidence of acceptance of and a motivation to control fertility. (Frost, Singh and Finer 2010).

Contraceptive use and choices vary widely in Nigeria according to type of health facility, geopolitical zone, and within urban or rural settings. (Nigeria Demographic and Health Survey 2004) Various factors, related to both supply and demand, account for these variations and contribute to the low levels of contraceptive use and choices in Nigeria. On the supply side are issues such as limited availability, quality, and cost of family planning services.

Amazigo, Silva, Kaufman and Obikeze (1997) research on factors associated with demand for contraceptives and family planning services in Nigeria has identified the relative powerlessness of women (especially in northern Nigeria), household poverty, low level of education (especially in northern Nigeria), myths and rumors about modern contraceptive methods, parity, attitudes, and widespread preference for male children, as key influences on contraceptive use. In addition to these factors, especially in northern Nigeria, early marriages and early initiation of sexual activity have contributed significantly to the high fertility and subsequent higher prevalence of maternal and fetal complications.

The use of contraceptive by women is dependent on many factors. These factors range from personal to societal. It has been well documented that demographic, socio economic, cultural and medical factors influence choice of contraceptic use. (National Centre for Educational statistics,(2008), and Castro 1995)

3   METHODOLOGY

The research design adopted for this study is a survey research method which involves conducting a study on specific group or population. Survey research helps to select target population suitable for the study and determine the channel to reach the population (Fawole, Egbokhare, Itiola, Odejide and Olayinka, 2006, Onafowokan (2011).

3.1   STUDY POPULATION

The target population are female secondary school teachers within the reproductive age group selected in Ibadan south west and Ibadan north east in the city of Ibadan. This included both married and unmarried women in both private and public secondary schools.

3.2   STUDY AREA

This study was carried out in Ibadan. Ibadan is the largest indigenous city in sub-Saharan Africa and one of the 36 states in Nigeria. Ibadan, the capital of Oyo state is centrally situated in the south- west sector of the country which gives it transport and economic edge. Ibadan has a population of 1,338,659. The city is located between longitude $7^0 2^1$ and $7^0 40^1$ E and was founded in 1829. (Akinbebije 2011). It is home to the famous University College Hospital (UCH). Ibadan is also close to the historic towns of Oyo, Ogbomosho, Ijebu-ode, Ife, Ilesha and Oshogbo.

3.3   SAMPLING PROCEDURE AND SAMPLE SIZE

The multi- stage sampling technique was adopted because of the homogeneous population of female teachers in Ibadan which makes it difficult if not impossible to develop sample frame for individual element. The first stage was to stratify Ibadan using population density i.e. high, medium and low population density area. In the second stage, purposive sampling technique was used to select high and medium density areas because of the number of public secondary schools in the area. Thus two local governments were purposively selected based on their population density- Ibadan North East (high density) and Ibadan South West (medium density). Proportionate sampling technique was used in the third stage to select 30% of the 663 female public secondary school teachers in the study area. Simple random sampling was adopted in the fourth stage to select any 199 public female secondary school teachers in any of the 37 secondary schools in the selected local government areas.

3.4   RESEARCH INSTRUMENT

Data were collected through 30 item questionnaire designed to elicit the required information to achieve the goals of the study. The questionnaire was divided into four sections based on the set objectives and goals in order for effectiveness and validity to be ensured. The first section contained questions on the personal or socio-economic characteristics of respondents, the second section concentrated on the knowledge and practice of birth control of respondents.

The third section focused on respondents relation of knowledge, use, preference and appropriate effectiveness of various birth control methods while the fourth section paid attention to the reasons that account for respondents preference of birth control methods. Two hundred questionnaires were distributed among female secondary school teachers within the purposively selected two local government areas, but only one hundred and eighty five (185) were recovered of which only one hundred and seventy three were analyzable.

3.5   DATA ANALYSIS

Data collected was analyzed using Pearson's correlation coefficient with the use of Statistical Package for Social Sciences (SPSS) after coding the data. The analysis was done using frequency distribution tables, comparison of frequency and percentages of populations grouped into meaningful categories. Chi-square was also used as a measure of statistical significance to prove the validity of the hypothesis.The significance level used was 0.05 and the degree of freedom

3.6   ETHICAL CONSIDERATIONS

This present study has focuses on humans as elements of investigation and as a result ethics of research were observed. Permission to administer the questionnaire in each public secondary school was sought from relevant authority figures in the schools such as the Principal and Head Teachers before questionnaires were issued out to female teachers. Respondents were duly informed about the research topic and their consent were sought before administering questionnaires to them.

4   RESULTS

4.1   SOCIO DEMOGRAPHIC DESCRIPTION OF RESPONDENTS

Majority of the respondents (78.8.%) are between the ages of 30 and 50 years of age while 13.3% of the respondents are between the ages of 23 and 29 and 6.9% of the respondents are of ages above 50 years, which implies that majority of the respondents are within the reproductive age group i.e. 15 to 49 years of age. A substantial number (82.1%) of the respondents are Yoruba's, while 13.3% are Igbo's and 2.9% are Hausas. Other ethnic groups constitute a paltry 1.7% of the population sample being studied. Christians constitute 75.1% of the population sample while 24.3% are Muslims and 0.6% are of African Traditional beliefs.

Among respondents, majority (87.3%) are married while 11.5% are single and 1.2% are widowed. 56.5% of the respondents reported having university degree (B.sc,M.sc), 24.3% attended College of education while 17.9% attended Polytechnics. Most of the respondents (60.7%) are employed in secondary schools within Ibadan North East while 39.3% are employed in Ibadan South West.

4.2   RESPONDENTS KNOWLEDGE, USE, PREFERENCE AND PERCEIVED EFFECTIVENESS OF BIRTH CONTROL METHODS

About 49.7% of the respondents have knowledge about the abstinence method, 24.3% find it effective while only 21.9% use the method, 12.1% find it ineffective and 8.2% prefer this method. Moreover, for the withdrawal method, 40.5% of the respondents are aware of the method, only 34.7% use it from which 20.2 find it effective and 13.3% prefer the method while 24.3% see it as ineffective.

Also, 34.7% of the respondents have knowledge about the birth control pills out of which 16.2% are using it while from the percentage of respondents that are aware about birth control pills, 21.1% find it effective, and 7.5% prefer the method and 12.1 said it is not an effective method. Depicted from the analysis of the injectable method, 35.3% of the respondents know about it, 17.3% find it effective, 15.0% make use of it, 13.3% prefer it and 8.7% see it as ineffective. Furthermore, 25.4% of the respondents are aware of the birth control sponge from which only 3.5% are using it, 14.5% prefer it, 10.9% see it as ineffective and 7.5% find the method to be effective. Up to 30.1% of the respondents have knowledge about the vaginal ring method, out of which 1.2% uses it, 12.7% prefer it while 13.9% see it as effective, 8.1% find it ineffective. For the breastfeeding method of birth control, 35.8% of the respondents have knowledge of it, 19.1% use it, 5.8% prefer it while 13.9% find it effective and 20.2 find it in effective

For the condom method, 41.6% of the respondents have understanding of it, 34.7% use it which is more than half of respondents with the knowledge, 13.3% prefer the method while 27.7 find the method to be effective, 14.5% says its ineffective. Also from the result of analysis, the above table shows that 32.4% of the respondent have knowledge about the diaphragm method, only 5.2% use it, 16.8% prefer it while 6.4% see it as effective, 10.4% fine it in effective.

In addition,, 27.2% of the respondents in the study area are aware of tubal ligation method, 0.6% are using it, 9.8% prefer it, 7.5% find it effective while 9.3% see the method as in effective. 31.8% of the respondents have knowledge about female condom, of which only7.5% use it, 9.3% prefer it even if they are using it or not, 10.9% find it effective and 10.4% says it is ineffective.

Furthermore, 35.8% of the respondents have knowledge about the intra uterine device (IUCD), 21.9% use it, 11.6% prefer it, 30.1% claim the method is effective while 7.5% claim it is not effective. Also, 27.2% of the respondents are aware of the spermicide method 4.6% are using it, 13.9% prefer it, 10.4% claim it is effective and 6.4% of the respondents claim it is not effective. As regards vasectomy, 30.6% of the respondents have knowledge about vasectomy method, 6.8% make use of it, 13.3% prefer it, 10.9% claim it is effective while 5.2% claim it is not effective.

For the safe period method of birth control, 34.1% of the respondents have knowledge of it, 28.3% use it, 7.5% prefer it, and 20.8% claim it is effective while 13.9% see it not effective. Some of the respondents also claim to be aware and use some traditional methods. 21.9% of the respondents claim to be aware of Teso method, 2.3% use it, 10.9% prefer it, 4.6% find it to be effective and 19.7% claim its ineffectiveness. Results show that 20.2% of the respondents know omolangidi traditional method, 0% are using it(that is none), 8.7% prefer it, 3.5% feel it is effective while 21.9% claim it's not effective. Lastly 19.1% of the respondents have knowledge of Igbadi traditional method, 0.6% is using it, 8.7% prefer it, 2.9% find it to be effective while 23.7% claim it is not effective.

In summary, majority of the respondents are aware of the various methods in other words, knowledge differs from use. This is shown in Table 1 and 2 below.

TABLE 1: DISTRIBUTION OF RESPONDENTS BY KNOWLEDGE, USE, PREFERENCE AND PERCEIVED EFFECTIVENESS OF VARIOUS TYPES OF BIRTH CONTROL METHODS

	METHODS	KNOWLEDGE	USE	PREFERENCE	EFFECTIVE	NOT EFFECTIVE
1	Abstinence	86 (49.7)	38(21.9)	14 (8.2)	42 (24.3)	21 (12.1)
2	Withdrawal method	71 (40.5)	60(34.7)	23 (13.3)	35(20.2)	42 (24.3)
3	Birth control pills	60 (34.7)	28(16.2)	13 (7.5)	38 (21.9)	21(12.1)
4	Injectables (Depo-Provera/ noristerat)	61(35.3)	26(15.0)	23 (13.3)	30 (17.3)	15(8.7)
5	Birth control sponge	44(25.4)	6(3.5)	25(14.5)	13(7.5)	19(10.9)
6	Vaginal ring(Nuva ring)	52(30.1)	2(1.2)	22(12.7)	24(13.9)	14(8.1)
7	Breastfeeding	62(35.8)	33(19.1)	10(5.8)	24(13.9)	35(20.2)
8	Condom	72(41.6)	60(34.7)	23(13.3)	48(27.7)	25(14.5)
9	Diaphragm	56(32.4)	9(5.2)	29(16.8)	11(6.4)	18(10.4)
10	Tuba ligation	47(27.2)	1(0.6)	17(9.8)	13(7.5)	16(9.3)
11	Female condom	55(31.8)	13(7.5)	16(9.3)	19(10.9)	18(10.4)
12	IUCD	62(35.8)	38(21.9)	20(11.6)	52(30.1)	13(7.5)
13	Spermicide	47(27.2)	8(4.6)	24(13.9)	18(10.4)	11(6.4)
14	Vasectomy	53(30.6)	10(5.8)	23(13.3)	19(10.9)	9(5.2)
15	Safe period/ fertility awareness method	59(34.1)	49(28.3)	13(7.5)	36(20.8)	24(13.9)
16	Implants	50(28.9)	11(6.4)	15(8.6)	20(11.6)	18(10.4)
17	Teso	38(21.9)	4(2.3)	19(10.9)	8(4.6)	34(19.7)
18	Omolangidi	35(20.2)	0(0)	15(8.7)	6(3.5)	38(21.9)
19	Igbadi	33(19.1)	1(0.6)	15(8.7)	5(2.9)	41(23.7)

Source: field survey 2014

TABLE 4.2.3: DISRIBUTION OF RESPONDENTS BY THE REASONS THAT ACCOUNT FOR CHOICE OF BIRTH CONTROL METHODS USE IN ORDER OF PREFERENCE

REASONS	YES(%)	NO(%)	RANK IN ORDER OF PREFERENCE
Convenience	82(47.4)	103(59.5)	1st
Medical advice	64(36.9)	120(69.4)	2nd
Effectiveness	62(35.8)	123(71.1)	3rd
Reversible	46(26.6)	138(79.8)	4th
Partner preference	43(24.9)	142(82.1)	5th
Body tolerance	49(23.3)	135(78.0)	6th
Easily accessible	39(22.5)	146(84.4)	7th
Fewer side effects	32(18.5)	158(88.4)	8th
Affordability	32(18.5)	152(87.9)	8th
Less risk	25(14.5)	159(91.9)	9th
Less cumbersome	20(11.6)	164(94.8)	10th
None	10(5.8)	175(101.2)	11th
Others	2(1.2)	183(105.8)	12th

Source: field survey 2014

4.3   HYPOTHESIS TESTING

HYPOTHESIS ONE

H_0: There is no significant relationship between selected socio- economic characteristics (ethnicity, religion, marital status, educational attainment, local government of occupation, age at marriage) and use of birth control methods.

H_1: There is significant relationship between selected socio- economic characteristics and use of birth control methods.

CHI-SQUARE TESTS

	X^2 value	Df	P-value	Decision	H_0: null
Ethnicity	4.135	3	0.247	Not significant	Accepted
Religion	5.457	2	0.065	Not significant	Accepted
Marital Status	1.807	2	0.045	Not significant	Accepted
Education	6.550	3	0.014	Significant	Rejected
LGA	6.544	2	0.038	Significant	Rejected
Age	-0.120	173	0.007	Significant	Rejected

For ethnicity, the p-value 0.247 is > 0.05. Hence H_1 is rejected and H_0 is accepted. **There is no significant relationship between ethnicity and use of birth control method.**

The p-value for religion 0.065 is > 0.05. Hence H_1 is rejected and H_0 is accepted. **There is no significant relationship between religion and use of birth control method.**

The p-value for marital status 0.405 is < 0.05. Hence H_1 is rejected and H_0 is accepted. **This data analysis therefore indicates that marital status does not influence the use of birth control methods.**

The p-value for education 6.550 is > 0.05. Hence H_1 is accepted and H_0 is rejected indicating **that educational attainment of women influences the use of birth control methods.**

The table above shows that the p-value 6.544 for LGA (location) is > 0.05. Hence H_1 is accepted and H_0 is rejected. **This means the local government area of occupation of women influence the use of birth control methods**. This could be as a result of Ibadan north east being a high population density area and Ibadan south west a medium population density area.

As can be seen from the table above, the p-value for age is -0.120 is < 0.05. Hence H_1 is rejected and H_0 is accepted. **This data analysis therefore indicates that age of women does not influence the use of birth control methods**.

HYPOTHESIS TWO

H_0: There is no significant relationship between knowledge and birth control method use

H_1: There is significant relationship between knowledge and birth control method use.

CORRELATIONS

	R	N	P-VALUE	DECISION	H0: NULL
Pearson correlation	0.245	173	0.001	Significant	Rejected

Correlation is significant at the 0.01 level (2-tailed).

4.4   PRESENTATION OF DATA ACCORDING TO RESEARCH OBJECTIVES

Objective 1: To document birth control methods knowledge among teachers of reproductive age.

Respondents were knowledgeable of the following birth control methods in the study area: abstinence (49.7%), male condom (41.6%), withdrawal (40.5%), IUCD (35.8%), injectables (35.3%), safe period (34.1%), diaphragm (32.4%) and vaginal ring (30.1%). This indicates that the level of knowledge of birth control method was high.

Objective 2: To assess the use of birth control methods among teachers of reproductive age.

Female secondary school teachers in the study area mostly make use of the following birth control methods: withdrawal method (34.7%), condom (34.7%), safe period (28.3%), abstinence (21.9%) and breastfeeding (19.1%). Most of the respondents had a high level of use of birth control methods.

Objective 3: To identify preferences for the use of birth control methods among teachers of reproductive age.

Respondents prefer the use of the following birth control methods: diaphragm (16.8%), birth control sponge (14.5%), spermicide (13.9%), injectables (13.3%), withdrawal (13.3%) and vasectomy (13.3%).

Objective 4: To identify factors that contributes to the choice of preferred birth control methods by respondents.

Reasons for the choice of birth control methods among respondents in order of preference were: convenience (47.4%), medical advice (36.9%), effectiveness (35.8%) and reversibility (26.6%). This means that majority of the respondents make use of birth control methods of their choice because it is convenient.

5 SUMMARY AND CONCLUSIONS

This study majorly focuses on the use, preferences and determinant factors of birth control methods among female secondary school teachers in Ibadan metropolis. Population growth in Nigeria has being a huge challenge to the country. Birth control techniques are a means to manage the population increase which indirectly tends to reduce poverty in the country.some people are not aware of some birth control methods because they are not available nad majorly because of cost. Therefore, this study highlights some factors that determine womens use and preference of birth control methods.

Respondents were knowledgeable of several birth control methods such as abstinence (49.7%), male condom (41.6%), withdrawal (40.5%), IUCD (35.8%), injectables (35.3%), safe period (34.1%), diaphragm (32.4%) and vaginal ring (30.1%). This indicates that the level of knowledge of birth control method was high.

Mostly used birth control methods include withdrawal (34.7%), condom (34.7%), safe period (28.3%), abstinence (21.9%) and breastfeeding (19.1%). Most of the respondents had a high level of use of birth control methods.

Preferred birth control methods among respondents are diaphragm (16.8%), birth control sponge (14.5%), spermicide (13.9%), injectables (13.3%), withdrawal (13.3%) and vasectomy (13.3%). Reasons for the choice of birth control methods among respondents in order of preference were: convenience (47.4%), medical advice (36.9%), effectiveness (35.8%) and reversibility (26.6%). This means that majority of the respondents make use of birth control methods of their choice because it is convenient.

Furthermore, significant relationship exists between educational attainment and level of use of birth control methods in the study area. This means that the more educated the female teachers are, the more their level of use of birth control methods. (x^2 =6.550, p= 0.014). Also, relationship exists between local government area where the teachers schools exist and their level of use of birth control methods. This means female teachers in Ibadan north east local government use more birth control methods than their counterparts in south west local government area. (x^2=6.544, p=0.038)

In addition, a positive correlation exists between female teachers knowledge and use of birth control methods in the study area. This means that the more knowledgeable they are about different birth control methods, the more they utilize it. (r=0.247, p=0.001). A negative correlation exists between female teachers age and their use of birth control methods. This means that the older they become, the lesser their utilization or use of birth control methods. (r= -0.120, p=0.007)

6 RECOMMENDATIONS

Based on the conclusions of the study, the following recommendations are hereby made:

1. Government should create more awareness on the different birth control methods and not focusing on one e.g. condom through non- governmental organizations, mass media and government agencies.
2. Sensitization meetings should be conducted for secondary school teachers on birth control methods in the study area.
3. Government should implement the two-child policy in the country, as a means of population control and improving the living standards of people.

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