

Title of Article: Female Autonomy, Use of Family Planning and Maternal Health in Nigeria (Poster Presentation)

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Abstract: Background

There is growing evidence in many parts of the world that women's autonomy and power within households influence couples' childbearing decisions. For developing countries like Nigeria, the scientific base for this claim is weak and further research is needed on the specific conditions under which women's status and childbearing patterns are related. While it is recognized, that family planning, prenatal health services and child health can improve the survival and quality of life for mothers and children in several societies, what vary are the specific determining factors of the levels of fertility to which any survival strategy is hinged. Level of fertility varies from one society to another, not just for differentials associated with biological or social mechanism but also strongly as a result of social pressures affecting individual decision-making in human reproduction. Such decision – making at the family and individual levels influences why pressures may also take the form of prescriptions on who can have children, time limits of commencement and end of childbearing as well as desirable intervals between children. Fertility behavior therefore reflects the values of a society. One of such values that is of interest to this research effort is the use of family planning method.

Research Questions

Researchers have examined the consequences of certain behavioral patterns on the reproductive health of women in many parts of Nigeria. These range from breast feeding patterns to family planning and attitude to the use of maternal and health services. The relationship between child-spacing patterns through family planning and woman's status on the one hand and their implication for woman's reproductive health has not been sufficiently documented in Nigeria. The study answers the following questions;

What is the relationship between women autonomy and birth spacing through the use of family planning?

Does the utilization of family planning affect desired family size?

What implication does the utilization of family planning have on the maternal health?

Hypotheses

A major shift in the women autonomy may likely influence the use of family planning for birth spacing.

There is a relationship between the utilization of family planning and desired family size

There is a direct relationship between birth spacing pattern and women's reproductive health

The paper was based on 2008 Nigeria's Demographic and Health Survey data (NDHS). Representative sampling of 33,385 women aged 15-59 years were interviewed. The data were collected from six geographical regions of the country with women drawn from different cultural backgrounds.

Measures of women's autonomy were based on two categories. The first category was based on direct autonomy indicators which are education, occupation and wealth index. The second category was based on the female participation in decision making. This was based on three questions: Who has the final say on your health?

Who has the final say on household purchases?

Who takes decision on the use of contraceptives?

Those women who indicated that they can take decision were combined with those who indicated joint decision with their husbands. These women were considered as having autonomy. On the maternal health variables used for this study are; ever experienced pregnancy termination, miscarriages, abortion and still birth, experienced constant leaking of urine and stool.

The data was analyzed using Statistical Package and Software Solutions (SPSS 16.0). Three levels of analysis were used in this paper, the univariate analysis is used to explain the socio-demographic variables and fertility behavior while bivariate and multivariate analysis were used to identify autonomy as a decisive factor for using family planning methods and maternal health among women in Nigeria

Methodology:

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Results/key findings:

From the study 37% and 36% of those who have experienced a constant leaking of urine and miscarriages or still births ever used any contraceptives methods respectively. The study reveals a significant relationship between the two categories of the autonomy measured and the use of family planning while the autonomy by the decision making shows an inverse relationship with the maternal health challenges. The result also indicates a negative relationship between the knowledge of the modern methods and maternal health. Spacing of births by apparent use of family planning is greater among women with education above secondary education than women without formal education who adopted contraception for limiting purposes at age 30 years and above. Women's autonomy, use of modern methods, number of living children, knowledge of modern methods are the factors for the likelihood of having maternal health challenges in the study area.

Knowledge contribution:

Prioritize family planning, is one of the most cost-effective investments in reducing maternal death in Nigeria. Since the study has also confirmed the significant relationship between autonomy and contraceptive use, women should be educated up to secondary level. This will give them adequate knowledge about reproductive issues and will reduce maternal and child mortality.