

## **The Use of Intrauterine Device (IUD) among Married Women in Higher Institutions in Ekiti State**

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**Abstract:** The research investigated the use of Intrauterine Device (IUD) as a method of contraceptive among married women in tertiary institutions in Ekiti state. The population was all married women working in the institutions in Ekiti state. The sample was 200 subjects selected randomly from the two institutions that were involved in the study. The research instrument was IUD questionnaire that was used to collect data for the research. The validity of the instrument was 0.77 while reliability was 0.67. Both coefficients were significant at 0.05 level. Two null hypotheses were raised for the study. One was rejected and the other accepted. It was concluded that since the method is effective and easily reversible, it could be used by all the women that are currently not using. It was therefore, recommended that a backup method be used by those who have other sexual partners so as to avoid STD.

**Key words:** Intrauterine Device (IUD), abortion, childspacing, sexual partner, Sexually Transmitted Diseases (STD), married women

### **INTRODUCTION**

Family planning was not a popular idea in the past in many societies, especially, in Nigeria. Then, it was considered and indeed fashionable to have many children because farming was virtually the only source of income and these children would be able to help their parents on the farm (Jones, 1998). Family planning according to Owuamanamm (2004) is a method couples decide themselves to adopt when they begin to have children, how many to have, how far apart to have them and when to stop child birth. The use of family planning allows women to avoid unwanted pregnancies, dangerous and illegal abortions and child bearing under circumstances that will not threaten their infants and their own health (Osakinle, 2003).

It is therefore, necessary for women who are married to have effective family planning aided by the use of birth control so as to stay healthy. There are many family planning methods, but the researcher is interested in the Intrauterine Device of birth control that is usually place in a woman's uterus by a medical doctor or a trained nurse.

Intrauterine Devices (IUDs) have been used throughout the world for more than three decades. Millions of women have found them effective, safe and convenient. The first modern IUDs-the Lippes Loop and the Margulies Spiral appeared in the early 1960s. They were made of polyethylene, a biologically inert plastic (Guttmacher, 1965). They were just as effective in

preventing pregnancy. It was thought that these IUDs would have to be replaced every few years (Tatum and Zipper, 1968).

However, IUDs became a particular target for US lawsuits because research in the mid 1970s linked IUD to spontaneous septic abortions and pelvic inflammatory disease (Cates *et al.*, 1976). Users of IUD like the method. Among those who expressed an opinion, said 96% of IUD users viewed their method of contraception favourable, topped only by users of implants, at 98%.

The IUD is one of the most effective methods of contraception. With most devices, pregnancy rates range from <1-3/100 women/year. Pregnancy rates for all major IUDs are <1/100 women/year (Trieman *et al.*, 1995). They are at least as effective as Norplant implants, injectable contraceptives and voluntary male or female sterilization (Sivin and Schmidt, 1987).

A 1982 survey found that 34% of induced abortion in china followed IUD failures (Trieman *et al.*, 1995). Analysis showed that more effective use of IUDs would reduce health risks and save the Chinese government substantial costs (Kaufman, 1993). In practice, the IUD still remains one of the most effective reversible contraceptive methods. According to data from Demographic and Health Surveys in 15 countries, the pregnancy rate with IUD was 3.4/100 IUD users in the 1st year of use, 5.9/100 oral contraceptive users, 12.5 for withdrawal and 9.9 for rhythm (Moreno and Goldman, 1991).

Increased menstrual bleeding, often with pain, is the most common problem of IUD use and the most common medical reason for removing IUDs. In clinical trials about 4-15% of women stop using IUDs for this reason within a year after insertion. Older women and women with children generally have lower rates of removal due to bleeding and pain. The kind of counseling and support women receive and their attitudes towards using IUDs also influence rates of discontinuation due to bleeding and pain (Trieman *et al.*, 1995). In so far as IUDs prevent pregnancy so effectively, it has saved many lives that otherwise would have been lost due to pregnancy-related causes. In developing countries, the estimated average annual risk of dying from causes related to pregnancy and child birth may be about 185/100,000 women not using contraception; in developed countries the estimated annual risk may be about 11/100,000. To prevent Sexually Transmitted Diseases (STD) women who use IUD tend to use a back-up protection such as condoms particularly when the women suspect her partners of extramarital affairs (Osakinle, 2003). To this end, the researcher intends to find out the influence of IUD among married women in higher institutions in Ekiti State.

#### MATERIALS AND METHODS

The research design for the study was the descriptive design of the survey type. The population of the study consisted of all married women in two out of the three higher institutions in Ekiti state. The sample of 200 subjects were randomly selected from the two institutions. The instrument used to collect data for the study was IUD Questionnaire. The questionnaire had 2 sections: A and B. the A section was on bio-data while B section had 20 item soliciting information on the use of IUD as a method of contraception.

The instrument had the validity of 0.77 while its reliability was 0.67. Both coefficients were significant at 0.05 level, making the instrument suitable for the study.

Four general questions were raised and two null hypotheses were postulated for the study.

#### General questions:

- Are contraceptive methods available for use in the state?
- Do you use any method as contraceptives?
- Do you get pregnant accidentally?
- Do you use IUD as a method?

#### Research hypotheses:

- There is no significant difference between women that use and those that do not use IUD method of contraceptive

- The type of institution will have no significant difference on women that use and those that do not use IUD method of contraceptive

#### RESULTS AND DISCUSSION

General questions raised were answered using frequency and percentages.

The result shows that the samples agreed to that fact that there are contraceptive methods available in the state. The planned parenthood federation of Nigeria has an office in the state capital that is usually opened during office hours. Also, 180 (90%) of the subjects agreed that they use a method of contraceptive while 20 (10%) disagreed. However, 30 (15%) of the subjects agreed that they get pregnant unintendedly, while 170 (85%) said they do not get pregnant unintendedly. Also, 180 (90%) said they use IUD as a method, while 20 (10%) disagreed (Table 1).

**HO<sub>1</sub>:** There is no significant difference between women that use and those that do not use IUD method of contraceptive.

Table 2 shows that 120 academic women with a mean of 27.58 and standard deviation of 2.95. Also, 80 Non Academic women, with a mean of 29.40 and a standard deviation of 3.80. The 2 groups have the degree of freedom of 198. The t-cal (3.84) is higher than the t-table (1.96) therefore the hypothesis is rejected. Hence, there is significant difference between women who use and those that do not use IUD as a method of contraceptive.

**HO<sub>2</sub>:** The type of institution will have no significant difference on women that use IUD and those that do not use.

Table 3 shows that 110 subjects from UNAD had a mean of 19.30 and standard deviation of 0.96, while 90 subjects from Federal Polytechnic, Ado had a mean of 19.29 had standard deviation of 1.17. The group had their degree of freedom to be 198. The t-cal (0.074) is lower than t-table (1.960). Therefore, the hypothesis is accepted. Hence, the type of institution will have no significant difference on women that use IUD and those that do not use.

Contraceptive methods happen to be available in the state through the Planned Parenthood Federation of Nigeria. This is perhaps the reason why all the subject 200 (100%) agreed they use a form of contraceptive but 20 (10%) disagreed. Perhaps this is the reason why some of the respondents 30 (15%) get unintentionally pregnant while 170 (85%) do not. The fact that 180 (90%) of the respondents agreed that they use IUD as form of contraceptive and only 20 (10%) disagreed showed that,

Table 1: Descriptive analysis of general questions

Items	Yes	(%)	No	(%)
Are contraceptives available in Ekiti state?	200	100	-	-
Do you use any contraceptives?	180	90	20	10
Do you get pregnant unintended?	30	15	170	85
Do you use IUD as a method?	180	90	20	10

Table 2: T-test summary of women and IUD method

Group	N	$\bar{X}$	SD	df	t-cal	t-table
Academic	120	27.58	2.95	198	3.814	1.96
Non-academic	80	29.40	3.80			

p<0.05

Table 3: T-test summary of institution and IUD method

Group	N	$\bar{X}$	SD	df	t-cal	t-table
UNAD	110	19.30	0.96	198	0.074	1.960
Fed. Poly. Ado	90	19.29	1.17			

p>0.05

the method is well favoured among women. The hypothesis 1 was rejected which means that there is significant difference between women who use IUD and those that do not use. This is because the method is effective and easily reversible ascertained by Trieman *et al.* (1995) and Moreno and Goldman (1991). It has saved many lives that would have been lost due to pregnancy related issues. The second hypothesis was accepted hence the type of institution will have no difference on women that use IUD and those that do not. Since individuals come to the institution from their different homes and every one has his family, what individuals do to space their children and prevent pregnancies is left for the individuals. The number of married women that use IUD in UNAD is more than that of Federal Polytechnic, Ado-Ekiti. Since the method is effective and easily reversible is good for all married women. At the point of insertion, care must be taken but there is need for a backup method to prevent sexually transmitted disease particularly when one does not have one sexual one sexual partner (Osakinle, 2003). Since, users have no problem with it, removal is not advisable (Trieman *et al.*, 1995).

### CONCLUSION

The research findings showed that there is no significant difference between women who use IUD and those that do not use and also that there is no significant difference in the type of institution among women that use IUD and those that do not use. Therefore, the research can be concluded that the method is effective and easily reversible, there are no problems associated

with the use and it helps and guides against unintended pregnancies that could lead to illegal abortion, perforation of the uterus and deaths.

### RECOMMENDATIONS

It is therefore, recommended that women that are married and intend to space their children could use the method since it is effective and easily reversible. Also, other backup methods could be used to prevent STD.

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