

UTILIZATION OF POST PARTUM FAMILY PLANNING AMONG POST NATAL WOMEN ATTENDING GENERAL HOSPITAL ILORIN KWARA STATE, NIGERIA

MEDINAT BOLANLE BAYERO & OLUFEMI YINYINOLA, MAKINDE

Abstract

Maternal and child health remains a global concern, particularly due to the poor utilization of postpartum family planning (PPFP), which is vital for safe birth spacing and reducing risks associated with short birth intervals. This study examined the utilization of PPFP among postnatal women attending General Hospital Ilorin, Kwara State. A descriptive cross-sectional design was used. 214 women from postnatal and immunization clinics were determined by using Slovene formular and were randomly selected from total population. Data was collected through structured questionnaires, with a reliability index of 0.67, and analyzed using SPSS version 27 was presented in frequencies, tables, percentages and chi-square tests at a 0.05 significance level were employed. Demographic data showed most participants were aged 20–25 years (29.9%), married (47.2%), Muslim (56.1%), had tertiary education (42.9%), were self-employed (40.7%), had one child (33.2%), and had a birth interval of less than 24 months (43.9%). Findings indicates that the level of awareness on post-partum family planning is low (38.5%), but the respondent attitude is positive (52.4%) and level of utilization is high (63.5%). The factors influencing utilization of PPFP include access to healthcare (61.7%), religion (63.1%), cost of services (61.7%), healthcare providers' behaviour (64%), and the desire to maintain a healthy lifestyle (61.2%). Two hypotheses tested and the revealed that there is a significant associations between both awareness and utilization of PPFP (Chi-square = 54.99). Secondly, there is a significant associations between attitude and utilization of PPFP (Chi-square = 44.89) of PPFP. The study concludes that effective use of PPFP can reduce maternal mortality and improve child health outcomes. It recommends enhanced efforts to increase awareness and encourage regular use of PPFP among postnatal women to promote adequate child spacing and maternal well-being.

Keywords: Utilization; Post-partum; Family Planning; Postnatal women.

INTRODUCTION

Globally, maternal health issues continue to raise significant concerns. According to the World Health Organization's Maternal Mortality report (2020) pregnancy and childbirth are the primary factors contributing to illness and death among women of reproductive age. Worldwide, it is reported that more than 90 percent of women during the first year of the postpartum period desire to either delay or avoid future pregnancies (Ross and Winfrey, 2019). Thus, mothers are counselled after delivery and encouraged to initiate a modern contraceptive method within the specified period (Ndugwa *et al.*, 2020).

In Africa according to Ameyaw *et al* (2019), the nations with the lowest rates of contraceptive usage also have the greatest fertility rates, as well as the highest rates of new-born child and maternal death. Postnatal women account for approximately 33 percent of sub-Saharan Africa's population of 973.4 million (Adeoye *et al* 2023). Sub-Saharan Africa has the highest fertility rate in the world, with the highest unmet need for family planning (FP). Yet, there is a lack of knowledge about the determinants for non-utilization of modern contraceptive methods among women of reproductive age (Gahungu *et al.*, 2021). The proportion of postnatal women who are exposed to the risk of pregnancy by having sex without any contraceptive method within 2 years after childbirth is nearly one-third of the population (Ndugwa *et al.*, 2020, Ibrahim 2024). The rate of unintended pregnancies, maternal morbidity, and mortality has increased due to limited knowledge of contraceptive options by post- natal women (Ashebir and Tadesse, 2020).

Nigeria has the highest population in Africa and ranks sixth globally, with a population exceeding 200 million according to the United Nations Population Prospect (2022). In Nigeria, contraceptive use has remained low, 12% for any modern method, despite the huge resources committed to family planning programs by stakeholders (Anate *et al.*, 2021). In Nigeria, ensuring maternal and child health remains a critical public health concern. Despite the recognized benefits of post-partum family planning for maternal and child health, utilization remains below optimal levels. This limited use contributes to unintended pregnancies and increased maternal and child morbidity and mortality (Onwuliri *et al.*, 2021, Owolabi *et al.*, 2022).

The utilization of postpartum family planning is crucial for ensuring the health and well-being of both mother and child. According to the American College of Obstetricians and Gynecologists (ACOG, 2020), several effective contraception methods are recommended for postpartum women, including Progestin-only pills, Intrauterine Devices (IUD), implants, the Depo-Provera shot, barrier methods, and tubal ligation. These methods provide a range of options that accommodate different health needs and preferences of postpartum women. In the context of postnatal women attending General Hospital Ilorin, it is essential to examine the utilization of these contraception options. Effective utilization of these postpartum family planning methods can significantly reduce the risk of unintended pregnancies and allow for better spacing between births, ultimately improving maternal and child health outcomes in the region.

There are several compelling reasons to assess the use of postpartum family planning methods among postnatal women. Postpartum family planning improves health by preventing unintended pregnancies, reducing maternal and child mortality, and promoting child spacing which is crucial for mother and child well-being. Numerous research has shown that there is still a huge gap between the need and

use of postpartum family planning globally despite the advantages. Therefore, this study aimed to assess the utilization of post-partum family planning among postnatal women attending General Hospital Ilorin.

Objectives:

The objectives of this study are:

1. To assess the level awareness of postnatal women on postpartum family planning among postnatal women attending General hospital Ilorin.
2. To determine the attitude of postnatal women on utilization of postpartum family planning among postnatal women attending General hospital Ilorin.
3. To determine the level of utilization of postpartum family planning methods among postnatal women attending General hospital Ilorin.
4. To identify the factors influencing utilization of postpartum family planning among postnatal women attending General hospital Ilorin.

Hypotheses

H₀1: There will be no significant relationship between level of awareness and utilization of postpartum family planning among postnatal women in General hospital Ilorin.

H₀2: There will be no significant relationship between level of utilization and attitude to postpartum family planning among postnatal women in General hospital Ilorin.

RESEARCH METHODOLOGY

The study adopted a descriptive cross-sectional design to assess the utilization of postpartum family planning among postnatal women attending general hospital, Ilorin.

Research Setting: The study was conducted at General Hospital Ilorin, located along Surulere, adjacent to Queens College, in the Ilorin West Local Government Area of Kwara

State, Nigeria. This secondary healthcare facility is equipped with various departments, including the General Outpatient Department (GOPD), Accident and Emergency, Female Surgical Wards, Rehabilitation Unit, Children's Emergency, Maternal and Child Health, among others, staffed by healthcare professionals at all levels.

The General Hospital's infrastructure reflects its dedication to providing comprehensive healthcare services, with modern facilities, state-of-the-art medical equipment, and a team of skilled healthcare professionals. The hospital offers a broad spectrum of medical services, ranging from emergency care to specialized treatment, aimed at promoting health and well-being across all stages of life. Socially, the General Hospital plays an essential role in enhancing community health and resilience, acting as a trusted institution where individuals and families seek care during times of illness and medical emergencies. It serves as a central hub for patients, caregivers, and healthcare providers, fostering a sense of solidarity in addressing health challenges. Economically, the hospital contributes to the local economy by creating employment opportunities for healthcare professionals, support staff, and ancillary service providers. Moreover, its healthcare services help reduce the economic burden of illness on families and communities by ensuring timely access to medical care. Culturally, the General Hospital reflects the diverse population of Kwara State, welcoming patients from a variety of ethnic, religious, and socio-economic backgrounds. The hospital's commitment to cultural competence and patient-centred care ensures that individuals receive treatment that is respectful, dignified, and aligned with their values and beliefs.

This is a state-owned hospital that operates on a 24-hours services. The hospital provides comprehensive maternal, infant services and professional training. The hospital was selected because it serves a big population of women from varying socio-cultural backgrounds. The infant welfare clinic runs on

Monday, Tuesday, Wednesday and Thursday

Target Population: The target population for this study were post-natal women attending the General Hospital in Ilorin, Kwara state. According to the hospital records reviewed by the nurses, about 412 post-natal Women attend the General Hospital Ilorin monthly.

Inclusion Criteria and Exclusion Criteria

Inclusion Criteria

- I. Post-natal women between the ages of 20 – 49 years attending the post-natal unit of General Hospital, Ilorin.
- ii. Post-natal women who gave birth within the last 0 - 8 weeks or in the immediate postpartum period at the time of the study.
- iii. Post-natal women who were willing to participate in the survey was included.

Exclusion Criteria

- i. Post-natal women below 20 and above 49 years was excluded in the study.
- ii. Post-natal women who gave birth after 8 weeks was excluded in the study.
- iii. Post-natal women who were not willing to participate in the survey was excluded in the study.

Sampling Size Determination: The Sample size determined for this study using Slovene formula is approximately 203. 10% attrition rate was added to the sample size to account for the non-response rate and the minimum sample size of 223 was estimated.

Sampling Technique: 203 respondents were selected from the target population using Lottery method of simple random sampling method in which a member of the population was assigned a number after which numbers were selected at random.

Instruments for Data Collection: The instrument for data collection was developed from the literature review and themes of the research title. A pretested questionnaire was

used to collect data from the respondents on the awareness, attitude, and utilization of post-partum contraceptives. The 5 - section instrument was drafted in English language. The questionnaire was developed based on the objectives of the study consisting of four sub-scales and 35 items. The sub-scales include: Section A: The demographic characteristics of the respondents which includes age, marital status, religion, level of education, occupational status, parity, and birth interval and has 7 items. Section B: Assessing awareness of respondents towards post-partum family planning. This has 9 items with Multiple-Choice (Single Selection) responses. Section C: The attitude of respondents towards post-partum family planning. This has 6 items with responses of very important, important, not important, neutral, not at all important, strongly agree, neutral, disagree, and strongly disagree. Section D: Level of utilization of post-partum family planning by respondents. This includes 4 items with Yes/No responses, and Multiple-Choice (Single Selection) responses. Section E: Factors influencing utilization of post-partum family planning of respondents. This has 9 items with 5 points Likert's scale of Strongly Agree, Agree, Neutral, Disagree, Strongly Disagree.

Validity of Instruments: To ensure the face validity of the instrument, the structured questionnaire was given to a reviewer for preview. After the reviewer assessed and confirmed that the instrument could gather the necessary information to achieve the stated objectives, the instrument was then evaluated for content validity. It was reviewed by experts in maternal and child health and a statistician, and their suggestions were incorporated into the final draft of the instrument.

Reliability of the Instrument: Cottage Hospital Ogidi, Ilorin, Kwara State was used for pilot testing. Based on the sample size, which was calculated as 223, 10% was used as the size of the pilot study. The consistency of the research instrument was ascertained when the instrument was pretested by administering study to 22 postnatal women at Cottage Hospital in Ilorin.

There was two weeks' interval between the test and retest to collect the data. The internal consistency was calculated using a Cronbach Alpha reliability coefficient, the result for $R = 0.67$ for test and $R = 0.62$ for retest. The results of the pilot study show that the result is moderate, and the instrument is acceptable in the rule of Cronbach.

Methods of Data Collection: Prior to data collection, the participants were addressed on the purpose of the research, and a verbal consent was sought from each of the participants. A total of 223 questionnaires were administered to the postpartum women attending General Hospital, Ilorin, Kwara State. Of these, 214 were duly completed, but 9 questionnaires were left unfilled. The data were collected by the researcher with the assistance of two research assistants using administered study. The instrument was interpreted to the native language by the research assistants for those who do not understand English. The administration of the study took approximately 10 minutes per participant. The data on postpartum family planning were confirmed from the patient. During each visit to the post-natal unit the assistance of the nurse on duty in the postnatal unit was sought to identify the women who were being discharged, were within 72hours post-delivery, and post-natal women within 6-8weeks post-delivery.

Method of Data Analysis: The questionnaire was sorted manually after they have been properly filled by the respondents. Data was entered, cleaned, and analysed using the 27th version of Statistical Product and Service Solutions (SPSS) and findings was properly represented using descriptive statistics, while the hypotheses generated was tested using chi-square at 0.05 level of significance. In conclusion, the results were organized and presented through tables, graphs, and descriptive text.

Ethical Consideration: Before administering the questionnaire a copy of the research protocol was submitted for a full review to the Research

and Ethics committee of the Faculty of Nursing Science, Ladoke Akintola University of Technology (LAUTECH) and the letter of introduction was obtained. Ethical approval was obtained from the General Hospital, Ilorin, Kwara State with approval No. GHI/IRC/246/VOL.11/20. Permission to carry out the study was sought from the postnatal unit. The Informed consent of the respondents was sought by explaining the purpose of the study; anonymity was maintained by not including their names, and confidentiality was assured.

RESULTS

A total of 214 completed questionnaires were received from postpartum women attending General Hospital, Ilorin, Kwara State, out of 223 administered. The demographic profile of the participants reveals that the largest age group was 30-34 years (39.7%), closely followed by those aged 25-29 (32.7%). The

majority were married (47.2%), with significant proportions being single (24.3%) or divorced (19.1%). Most respondents identified as Muslim (56.1%), with a substantial number being Christian (43.9%). Furthermore, the data indicates that most participants had tertiary education (42.9%), were self-employed (40.7%), and had one child (33.2%). A notable proportion (43.9%) reported a birth interval of less than 24 months. These characteristics provide key contextual information for analyzing the project's outcomes related to this specific population of postpartum women in Ilorin. Findings of this study shows that majority of the respondents are within the age group of 20 -25years (29.9%), married (47.2%) and are of Islamic religion (56.1%). Further findings indicate that majority of the respondents had tertiary education (42.9%), Self-employed (40.7%), with one child (33.2 %) with birth interval (43.9%).

Table 1: Socio-Demographic Data of Respondents

Variable	Frequency (N = 214)	Percentage (%)
Age Group (years)		
20 – 25 years	60	29.9%
25 – 29 years	49	24.4%
30– 34 years	41	20.73%
..	27	13.4%
Marital status		
Single	52	24.3%
Married	101	47.2%
Separated	0	0%
Divorced	41	19.1%
Widowed	20	9.3%
Religion		
Islam	120	56.1%
Christianity	94	43.9%
Level of Education	No of respondents	Percentage (%)
None	25	11.7%
Primary education	27	12.6%
Secondary education	70	32.7%
Tertiary education	92	42.9%
Occupational Status	No of respondents	Percentage (%)
Housewife	25	11.7%
Government employee	39	18.2%
Private employee	49	22.9%
Self-employed	87	40.7%
Student	0	0%
Other	14	6.5%
Number of children	No of respondents	Percentage (%)
1 child	71	33.2%
2 children	52	23.4%
3 children	36	16.8%
4 children	29	13.6%
>5 children	26	12.1%
Birth interval	No of respondents	Percentage (%)
< 24months	94	43.9%
25-35 months	59	27.6%
> 35 months	61	28.5%

Source: Field survey, 2024

Table 2 shows that a substantial majority of respondents (61%) had heard of postpartum family planning, primarily through post-natal clinics (37% combined agreement) and media (27% combined agreement). Most were aware of its benefits (70% combined agreement) and different methods available after birth (55% combined agreement), with injectable being the most recognized method (70% combined agreement) and preventing unwanted

pregnancy being the most understood use (70% combined agreement). A large proportion (62% combined agreement) were also aware of contraceptive side effects, with weight gain being the most frequently reported (54% combined agreement). Finally, a majority (60% combined agreement) understood that fertility resumes after stopping postpartum family planning. Study showed that the level of awareness is low (47%).

Table 2: Assessing Awareness of Respondents on Post-Partum Family Planning

	Strongly Agree (5)	Agree (4)	Neutral (3)	Disagree (2)	Strongly Disagree (1)
Heard of postpartum family planning	30% (64)	31% (67)	10% (21)	15% (32)	14% (30)
Learn about postpartum family planning through					
Media	12% (26)	15% (33)	20% (43)	25% (54)	28% (58)
Family	5% (11)	9% (18)	20% (43)	30% (64)	36% (78)
Health professionals	10% (21)	12% (26)	22% (47)	30% (64)	26% (56)
Post-natal clinic	18% (38)	19% (41)	20% (43)	23% (49)	20% (43)
Aware of benefits of postpartum family planning?	35% (75) 18.3%	35% (75) 20.2%	10% (21) 18.8%	10% (21) 22.2%	10% (22) 22.3%
Aware of different family planning methods after birth?	27% (58)	28% (61)	10% (21)	20% (43)	15% (31)
Awareness of Postpartum Family Planning Methods					
Injectable	40% (85)	30%	15%	10%	5%
Pills	14% (30)	25%	30%	20%	11%
Implants	8% (16)	20%	30%	25%	17%
IUD	8% (18)	18%	28%	25%	21%
LAM	9% (20)	20%	25%	25%	21%
Condom	21% (45)	30%	20%	20%	9%
Perceived Uses of Postpartum Family Planning	18.1%	24.4%	22.6%	20.7%	14.1%
Prevents unwanted pregnancy	45% (98)	25%	15%	10%	5%
Prevents maternal mortality	23% (50)	25%	20%	20%	12%
Helps in limiting the number of children	21% (44)	30%	25%	15%	9%
Supports child spacing	8% (18)	20%	30%	25%	17%
Awareness of Side Effects of Contraceptives	24.3%	25%	22.5%	17.5%	10.6%
Aware of contraceptive side effects	40% (133)	22%	15%	10%	13%

Aware of contraceptive side effects	40% (133)	22%	15%	10%	13%
Common Side Effects of Postpartum Family Planning					
Back pain	8% (18)	20%	30%	25%	17%
Headache	12% (26)	25%	25%	20%	18%
Abdominal pain	9% (19)	22%	28%	25%	16%
Heavy vaginal bleeding	10% (22)	24%	26%	20%	20%
Weight gain	24% (51)	30%	20%	15%	11%
Prolonged vaginal bleeding	15% (32)	28%	25%	20%	12%
Weakness	12% (25)	24%	25%	25%	14%
Discoloration of face	10% (21)	22%	26%	22%	20%
Awareness of Fertility Resumption After Stopping PFP	15.6%	24.1%	24.4%	20.2%	15.7%
Fertility resumes after stopping PFP	35% (115)	25%	15%	10%	15%
	23.3%	23.7%	21.7%	18.1%	15.5%

From Table 3, a significant portion of respondents (32.71%) considered the importance of postpartum family planning as very important. Similarly, the majority (37.38%) strongly agreed that it helps in spacing pregnancies. When asked about the comfort of discussing family planning with healthcare providers, most respondents (32.71%) again indicated it was very important. Regarding the perceived risk of immediate family planning use after childbirth,

the largest group (37.38%) strongly agreed that it carries risks. The most frequently cited factor influencing the choice of postpartum family planning was health implications (37.38%). However, regarding the effect of contraception after childbirth on future fertility, the largest proportion of respondents (37.38%) strongly agreed that it does affect future fertility. Overall, the study indicates a positive attitude towards postpartum family planning among the respondents (52.4%).

Table 3: Attitude Towards Post-Partum Family Planning

S/N	ITEMS	FRQ	SD	(%)	D	(%)	N	%	SA	(%)	A	(%)
1	Postpartum family planning is important for the health of mothers and children	214	14	6.54	30	14.02	40	18.69	70	32.71	60	28.04
2	Do you agree that postpartum family planning helps in spacing pregnancies	214	25	11.68	30	14.02	19	8.88	80	37.38	60	28.04
3	It is comfortable to discuss family planning with a health care provider	214	14	6.54	25	11.68	30	14.02	85	39.72	60	28.04
4	Do you think using family planning immediately after childbirth has any risks	214	30	14.02	33	15.42	21	9.8	78	36.45	21	9.81
5	Do you think using contraception after childbirth affects future fertility	214	34	15.89	37	26.6	17	7.94	80	37.38	46	21.49

Source: Field survey, 2024

From the table 4. Indicates that 127(59.3%) of respondents ticked Yes while 87(40.7%) said No. This means that most of the respondents ticked Yes. Also, the 70 (32.7%) respondents ticked Natural, 26 (12%) respondents ticked Pill, and 39 (18.2%) respondents ticked Injectable, 9(4.2%) respondents ticked Implants, 21(9.8%) respondents ticked IUCD while 49(22.9%) of the respondents ticked Condom. This means most of the respondents ticked Natural. Additionally, 122(57.1%) of respondents ticked Yes while 92(42.9%) said

No. This means that most of the respondents ticked Yes. While, 43 (20.1%) respondents ticked Not necessary, 81 (37.9%) respondents ticked Side effects, and 36 (16.8%) respondents ticked Partner's disapproval, 0 (0%) respondents ticked Too expensive, 30(14.1%) respondents ticked Lack of awareness, while 24 (11.2%) of the respondents ticked Other. This means most of the respondents ticked Side effects. This study indicates that post-partum family planning utilization by respondents is high (63.5%).

Table 4: Post-Partum Family Planning Utilization by Respondents

Variable	Strongly Agree (5)	Agree (4)	Neutral (3)	Disagree (2)	Strongly Disagree (1)
I have used postpartum family planning.	58% (124)	16.8% (36)	14.1% (30)	11.2% (24)	0% (0)
Methods of family planning previously used:					
Natural	42.7% (96)	22.4% (48)	0% (0)	9.8% (21)	22.9% (49)
Pill	32.7% (70)	14% (30)	0% (0)	30% (65)	22.9% (49)
Injectables	12% (26)	22.4% (48)	0% (0)	32.7% (70)	32.7% (70)
Implants	18.2% (39)	14% (30)	0% (0)	55.6% (119)	12% (26)
IUCD	4.2% (9)	32.7% (70)	0% (0)	44.7% (96)	18.2% (39)
Condom	55.6% (119)	12% (26)	0% (0)	18.2% (39)	14% (30)
Reasons for Not Using Postpartum Family Planning					
I believe postpartum family planning is unnecessary.	43 (20.1%)	48 (22.4%)		66 (30.8%)	57 (26.6%)
I am concerned about the side effects of postpartum family planning.	81 (37.9%)	50 (23.4%)		43 (20.1%)	40 (18.6%)
My partner does not support postpartum family planning.	36 (16.8%)	39 (18.2%)		75 (35%)	64 (30%)

Source: Field survey, 2024

From Table 5, several key factors influence respondents' utilization of postpartum family planning. A majority (61.7%) agreed that access to healthcare facilities affects their family planning choices. Similarly, a substantial proportion (63.1%) agreed that religious teachings influence their views. Cost was also a significant factor, with 61.7% agreeing it affects their decisions. Furthermore, a large majority (64%) agreed that healthcare providers listening to their concerns is important. Finally, 61.2% agreed that family planning has helped them maintain a healthier lifestyle. Conversely, most respondents disagreed that counseling and support from healthcare providers significantly impact their confidence, that the availability of

methods influences their timing of children, and that concerns about their and their children's health motivate them. They also largely disagreed that family planning has reduced stress related to unplanned pregnancy. In essence, access, religious beliefs, cost, provider communication, and perceived health benefits appear to be the most influential factors in the utilization of postpartum family planning among the respondents. The factors influencing utilization of postpartum family planning among respondents are accessibility (61.7%), Religious teachings (63.1%), Cost of family planning services (61.7%), Health care provider listen to my concerns regard postpartum family (64%) and Maintenance of a healthier lifestyle (61.2%)

Table 5: Factors Influencing Utilization of Postpartum Family Planning of Respondents

S/ N	ITEMS	FRQ	SD	(%)	D	(%)	N	%	SA	(%)	A	(%)
1	Accessibility	214	29	13.60	27	12.60	26	12.14	55	25.70	77	35.98*
2	Counselling and supports from health care providers	214	79	36.9	56	26.2	23	10.7	36	16.8	20	9.3
3	Religious teachings	214	25	11.7	36	16.8	18	8.4	61	28.5	74	34.6*
4	Cost of family planning services	214	36	16.8	22	10.3	24	11.2	64	29.9	68	31.8*
5	Availability of postpartum family planning methods	214	71	33.2	51	23.8	22	10.3	41	19.2	29	13.6
6	Health care provider listens to my concerns regard postpartum family	214	32	15.0	29	13.6	16	7.5	58	27.1	79	36.9*
7	Concerns about my health and my children health	214	71	33.2	56	26.2	26	12.1	35	16.4	26	12.1
8	Maintenance of a healthier lifestyle	214	37	17.3	25	11.7	21	9.8	46	21.5	85	39.7*
9	Reduced stress	214	76	35.5	57	26.6	22	10.3	35	16.4	24	11.2

Source: Field survey, 2024

Hypotheses Testing

Hypothesis 1

H_0 : There is no significant relationship between level of awareness and utilization of postpartum family planning among postnatal women.

Interpretation: The Chi-square analysis reveals a statistical significance in the relationship between the level of awareness and the utilization of postpartum family planning among postnatal women attending General

Hospital, Ilorin, Kwara State. The calculated Chi-square value of 54.99 exceeds the critical value of 5.99 at a 0.05 significance level with 2 degrees of freedom. This leads to the rejection of the null hypothesis, indicating a significant association between awareness and the utilization of postpartum family planning. The result suggests that increased awareness is likely to improve the utilization of postpartum family planning methods among the women in the study.

Table 6: Chi-square (X^2) analysis of the relationship between the level of awareness and utilization of postpartum family planning among postnatal women attending General Hospital, Ilorin, Kwara State.

Variable	O _i	E _i	O – E _i	$(O_i - E_i)^2$	$\frac{(O_i - E_i)^2}{E_i}$
Yes	120	71.33	48.70	2,371.69	33.47
No	60	71.33	-11.30	127.69	1.79
Not sure	34	71.33	-37.30	1,391.29	19.72
Total	214	213.99	0.10	3890.67	54.99

$$X^2 > X^2_s [(\alpha = 0.05, df = 2) = 5.99]$$

Hypothesis 2

H_0 : There is no significant relationship between level of utilization and attitude to postpartum family planning among postnatal women.

Interpretation: The chi-square analysis reveals a statistically significant association between the level of utilization and attitude towards postpartum family planning among postnatal women attending General Hospital, Ilorin,

Kwara State. With a calculated X^2 value of 44.89 exceeding the critical value of 9.49, we reject the null hypothesis and conclude that attitudes significantly influence the utilization of postpartum family planning. The result indicated that a positive attitude to postpartum family planning can improve the utilization of postpartum family planning among postnatal women.

Table 7 : Chi-square (X^2) analysis of the association between the level of utilization and attitude towards postpartum family planning among postnatal women attending General Hospital, Ilorin, Kwara State.

Variable	O _i	E _i	O – E _i	$(O_i - E_i)^2$	$\frac{(O_i - E_i)^2}{E_i}$
Strongly Agree	80	42.80	37.20	1380.84	32.34
Agree	31	42.80	-11.80	139.24	3.26
Neutral	24	42.80	-18.80	353.44	8.21
Disagree	43	42.80	0.20	0.04	0.00
Strongly Disagree	36	42.80	-6.80	46.24	1.08
Total	214	214.0	0	1922.8	44.89

$$X^2 > X^2_s [(\alpha = 0.05, df = 4) = 9.49]$$

DISCUSSION OF RESULTS

This study determines the utilization level of post-partum family planning among post-natal women attending general hospital, Ilorin, Kwara State. Findings of this study shows that majority of the respondents are within the age group of 20 -25years, married and are of Islamic religion. Further findings indicate that majority of the respondents had tertiary education, Self-employed with one child with birth interval. The socio demographic characteristics of the respondents supports Abiola *et al.*, (2020) who found that the majority of postpartum family planning users fell within this age bracket in Southwestern Nigeria. This study aligns with Uche *et al.*, (2021) who identified marital status as a key factor influencing the uptake of family planning services in southeastern Nigeria. and they are Muslims. This result is in line with research by Yahaya *et al.*, (2022) conducted a study on religion and family planning utilization in a predominantly Muslim community in Nigeria.

Findings of this study revealed that the awareness of respondents on Post-Partum Family Planning is low. This study does not align with research by Onwujekwe *et al.*, (2021), who found that awareness of postpartum family planning has been increasing in Nigeria, especially through maternal health services and educational programs at healthcare facilities. This study is not consistent with findings by Adeyemi *et al.*, (2022), who observed that while many women are aware of postpartum family planning, their depth of knowledge varies. This study does not align with Onwujekwe *et al.*, (2021) who found that awareness of postpartum family planning has been increasing in Nigeria,

this study reveals that respondents' attitude towards post-partum family planning is positive. Conversely, this study is not consistent with Mabekoje *et al.*, (2020) who indicated that many women reported barriers to accessing contraceptive methods due to negative partner attitudes. This study does not concur with Babalola *et al.*, (2020) who found that a significant number of respondents

experienced negative attitudes from their partners, which discouraged them from seeking family planning services.

Furthermore, the study reveals that factors influencing utilization of postpartum family planning of respondents are access to health care facilities, religious teachings, cost of family planning services, Health care and maintaining a healthier lifestyle. This finding is consistent with research by Adeyemi *et al.*, (2020), who noted that societal norms and cultural expectations often limit the acceptance of family planning among unmarried women in many African contexts. This study is not in agreement with Afolayan *et al.*, (2021) who found that the stigma attached to contraceptive use among unmarried women leads to limited access and utilization of family planning services. This study is consistent with Williams, (2021) who observed that in rural areas access to health care by distance from the level of service delivery point, availability of a trained cadre and consistent supply of contraceptive are constraint to utilization of postpartum family planning. In addition, the influence of spouse and family members significantly affect use of postpartum family planning (PPFP). This study does not support Silesh and Lemma, (2022) who discovered that attitudinally supportive or opposing partners could offset the desire to practice contraception felt by women at birth (PPFP) and reciprocally have their effect on its utilization.

The findings of this study confirmed the two tested hypotheses. The first hypothesis, which stated that there is no significant relationship between the level of awareness and utilization of postpartum family planning, was rejected. The results revealed a statistically significant association, indicating that higher awareness levels contribute to greater utilization of family planning services among postnatal women. Similarly, the second hypothesis, which posited no significant relationship between attitude and utilization, was also rejected. The analysis showed that positive attitudes toward family planning significantly influence its uptake. These outcomes reinforce the importance of improving awareness and

fostering positive perceptions to enhance postpartum family planning utilization.

CONCLUSION

The study on the utilization of postpartum family planning among postnatal women attending General Hospital Ilorin revealed important insights. This study found that the level of awareness is low, thus found a gap between awareness and practical utilization. This gap highlights the need for targeted educational interventions that not only raise awareness but also enhance access to services. This indicates that while women are open to family planning, addressing cultural perceptions and involving community leaders and healthcare professionals in educational campaigns can help shift attitudes towards all available methods, empowering women to make informed choices. It is recommended that healthcare providers intensify awareness campaigns, engage community leaders, and improve service accessibility, particularly in rural areas, to promote timely adoption of family planning methods after childbirth.

Further studies are suggested to explore the role of male partners in postpartum family planning decisions, assess healthcare providers' influence on uptake, and examine the long-term impact of community-based interventions on family planning utilization.

Declaration of Conflict of Interest

The Authors declares that there is no conflict of interest.

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