Increasing modern contraceptive use among women in Kebbi State

Breakthrough RESEARCH

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Increasing Modern Contraceptive Use Among Women in Kebbi State

The Breakthrough RESEARCH project conducted a behavioral surveillance survey in September 2019 for health among women who had a pregnancy or birth in the previous two years.

Survey Findings for Kebbi State

The behavioral surveillance survey identified three important factors for increasing modern contraceptive use. The percentages shown below are the averages for all the LGAs sampled. These averages may differ from the median values shown on the next page.

Women have ever talked with their husband or partner about whether to use a method of contraception

Only about 1 out of 6 women have ever talked with their husband or partner about whether to use a method of contraception.

Women personally approve of using contraception for spacing births

Less than half of women personally approve of using contraception for spacing births.

Women with high knowledge† regarding family planning (FP)

Less than half of women have high knowledge regarding FP.

†High knowledge of FP is measured as knowing the benefits of FP for the woman and her children, knowing that contraceptives have limited side effects, the benefit of having childbirth after age 18 and the risks of high fertility.

If these and other factors are improved further, modern contraceptive use may rise in Kebbi State.

Survey Results by Local Government Areas in Kebbi State

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<tr>
<th>Local Government Area</th>
<th>Ever Talked to Spouse About Using Contraception</th>
<th>Approves of Using Contraception for Spacing Births</th>
<th>Has High Knowledge Regarding FP</th>
<th>Uses Modern Contraception</th>
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Percentage of women who answered positively, by LGA:
- 0%-24%
- 25%-49%
- 50%-74%
- 75-100%
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Survey Findings for Kebbi State

The behavioral surveillance survey identified three important factors for increasing current modern contraceptive use. The percentage in each box below is the median (50th percentile). Half of LGAs are below (red) and half above this value (green).

Women have ever talked with their husband or partner about whether to use a method of contraception

Women personally approve of using contraception for spacing births

Women with high knowledge regarding FP

LGAs shaded in red are below 16% of women who have ever talked with their husband or partner about whether to use a method of contraception; green areas are above.

LGAs shaded in red are below 44% of women who personally approve of using contraception for spacing births; green areas are above.

LGAs shaded in red are below 46% of women with high knowledge regarding FP; green areas are above.

Notes: Lightly shaded areas are immediately below or above the median. Darker shaded areas are further away from the median, below the 25th or above the 75th percentile. LGAs in white were not sampled for the survey and information is not available for these areas.

How can this information be used to improve modern contraceptive use in Kebbi State?

Discussion and inquiry into barriers and facilitators of using modern contraception may provide insights on how to enhance efforts in these areas by asking questions such as:

• What is different about the wards in LGAs in green that explain the quality of service delivery in their health facilities? Do LGAs in green receive greater support for supplies, service quality improvement, and social mobilization?

• What is different about the communities that may explain how well an LGA is doing? Do they have stronger leaders, ward development committees, or levels of community engagement in health issues?

• What barriers are present in LGAs in red that influence the outlined factors, i.e., knowledge of FP, personal approval and spousal communication, and how do these inhibit women from using modern contraception? How can these barriers be addressed by community leaders and members of the community?

• Do LGAs in green have facilitators that increase women’s knowledge, approval, agency for spousal communication and their ability to use modern contraception? How can they be adopted in other areas with lower levels of modern contraceptive use?

• How can additional efforts be made or information tailored to reach communities and households in the greatest need of improving these factors related to modern contraceptive use?