Do Contraceptives Fail? Investigating Claims of Contraceptive Failure among Women of Reproductive Age in Nigeria

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Background

- Low contraceptive uptake is often attributed to method failure which discourages potential users.

- Up till now, there is minimal documentation on the incidence of contraceptive failure among users of modern family planning methods in Nigeria.
Background

This paper:

• Investigates claims of contraceptive failure among women of reproductive age in Nigeria (15-49 years)

• Explores possible factors that may be responsible for such failure
Data

• All analyses were based on 2007 national population-based household survey on HIV/AIDS and Reproductive Health (NARHS)

• The survey aimed at:
  - providing information on the situation of reproductive and sexual health in Nigeria;
  - Identifying factors that may be associated with reproductive and sexual health as well as other issues in Nigeria.
Data

- Eligible respondents for the survey were women (15 to 49 years) and men (15 to 64 years). Selection was based on a multi-stage probability sampling technique.

- Analysis was based on the response to the question on whether a respondent experienced pregnancy while using a modern family planning method.
Methodology

- Multiple logistic regression technique was used in exploring possible determinants and factors that may be associated with the outcome variable.
- Variables included in the analysis were: Age at the time of pregnancy, Marital status, Level of education, Place of residence (rural/urban), Geo-political zones and Type of contraceptive used.
Findings

- Of the 5,301 women involved in the analysis, 22.1% (1172) have ever used contraceptives while 26.7% (314) of these had become pregnant during the period they were using it.

- About 66% (206) of women who reported contraceptive failure were using a modern family planning method as at the time of the pregnancy.
Findings

- Contraceptive failure was highest among women below 25 years (about 85%).

- Women with secondary and higher levels of education are about 2 times more likely to experience contraceptive failure than women of lower educational level (p value < 0.001).

- Also women living in urban areas are about 1.4 times more likely to experience contraceptive failure than women living in rural areas.
Findings

- Daily oral pills accounted for about 34% of contraceptive failures, while condoms and Injectables accounted for 30.9% and 22% respectively.

- Significant geographical variation was observed at the level of geopolitical zones with p<0.05
Contraceptive failure by method used

MFP method used

Percent

Cases weighted by Weights

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Conclusion

• It was evident that a significant proportion of the women who were on contraceptives experienced pregnancy during the period they were using it.

• Pills accounted for the highest proportion of reported failure cases; non-adherence to dosage instructions and prescription may be responsible for this.

• Women who rely on condoms alone as means of contraceptive are at a high risk of unplanned pregnancy.
Next steps

• Design special intervention programmes to target young women living in urban areas.

• Design information leaflet to educate on correct and consistence use of pills

• Encourage use of longer term methods as result show that they have the lowest failure rate

• Further analysis at the level of geopolitical zones (spatial) would identify states with high incidence of contraceptive failure, which will guide programming.
We strongly believe that

- Findings from this paper will provide an opportunity to enhance appropriate policy formulation and reprogramming.
Thank you for listening