PREVALENCE OF CONTRACEPTIVE USE AMONG KENYA COAST NATIONAL POLYTECHNIC STUDENTS

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ABSTRACT

The study purpose of the study was to determine the prevalence of emergency contraceptive use among the Kenya Coast National Polytechnic. The objective of the study was to establish the level of contraceptive use, student knowledge on contraceptives and accessibility of contraceptives. A descriptive cross sectional study design was employ to collect both qualitative and quantitative data. Data was collected from sample size of 196 calculated using Fisher's formula. Data was collected using both structured questionnaires and interviews. The collected data was analyzed using SPPS version 20 and presented using tables and pie charts. About 32% of the respondents were using contraceptive, 99% had knowledge on contraceptives and 77% could access contraceptives within their neighborhood. Bivariate analysis findings show that residence (p=0.000), course (P=0.000), usage of contraceptive (p=0.000) and availability at a nearby facility (p=0.009) to statistically significant in contraceptive use. The study recommends that the respondents need more knowledge on various contraceptive options, support from both institution of learning as well as parents on safe sex practices and reliable provision of contraceptives

KEY WORDS: *Contraceptives, teenagers, accessibility*

INTRODUCTION

Emergency contraceptives are medicines taken to reduce the risk of pregnancy within a few days after sexual intercourse during which contraceptives fail or were not used (WHO, 2012). Emergence contraceptives pills are taken after unprotected sexual intercourse or breakage of condom (Sedgh *et al*; 2007). The common forms of emergency contraceptive are levonorgestrel and Birth control pills (WHO, 2004). Globally, emergency contraceptives can prevent up to over 95% of pregnancies when taken within five days after intercourse (WHO, 2012).

In Africa 24% women of reproductive age have the highest unmet need for contraception rates (WHO, 2004). In Uganda, NGOS are trying to make contraceptives more available in rural areas. According to study that was done by Nwachukwu and Obese in Nigeria 2008, modern birth control method were used by 30% respondents in Sub-Saharan Africa (Obi *et al*; 2008).

In Kenya, the prevalence of contraceptive use has increased since 1970s, at which time only7% of married women of reproductive age used any method of family planning (Raymond *et al*; 2011). By 1988, this figure has grown to nearly 40% as contraceptives use had increased, Kenya's total fertility rate has dropped from more than eight children (Singhs *et al*; 2010).

The purpose of this study was to systematically review the prevalence of emergency contraceptive use among college students. Kenya coast national polytechnic is a national polytechnic with over 5000 student population.

OBJECTIVES
Broad objective
To determine the prevalence of emergency contraceptive use among Kenya Coast National Polytechnic students

Specific objectives
a) To establish the level of emergence contraceptive use
b) To know the knowledge of students on contraceptives
c) To determine the accessibility of contraceptives

METHODOLOGY
The study employed a descriptive cross sectional study design to collect both quantitative and qualitative data from the respondents. The target populations were female students who are bonafide students of the college with college identity card

STUDY SITE
The study was conducted at Kenya coast national polytechnic. The college is located in *Majengo* Kisauni road, Mombasa County, Mvita Sub County. The institutions offer variety of courses ranging from certificate, diploma and higher national diploma. The is made up of ten departments, namely; Business management, Secretarial and language, Medical science, Journalism, Catering, Fashion and design, Information technology, Hospitality, Applied science, Mechanical, building and electrical engineering

SAMPLING
The study employed cluster random sampling was used to come up with a sample frame from the ten departments. Then simple random sampling was used to recruit the subjects into the study. Structured questionnaires were administered to the respondents as well as interviews conducted on two selected subjects from each department. All study subjects were taken through the purpose of the study and signed a written informed consent before taking part

SAMPLE SIZE
The sample size was determined using Fisher's formula (Mugenda, 1999)

$$n=\frac{z^2qp}{d^2}$$

n= desire sample size
z= standard normal deviation (1.96)
p= anticipated population proportion (15%)
q= 1 – p
d= allowable error

$$n= \frac{(1.92)^2(0.15)\,(0.85)}{(0.05)^2}$$
$$=196$$

DATA MANAGEMENT
The collected data was edited, transcript, coded and entered into SPSS version 21 software for analysis. The study findings were presented using tables and pie charts
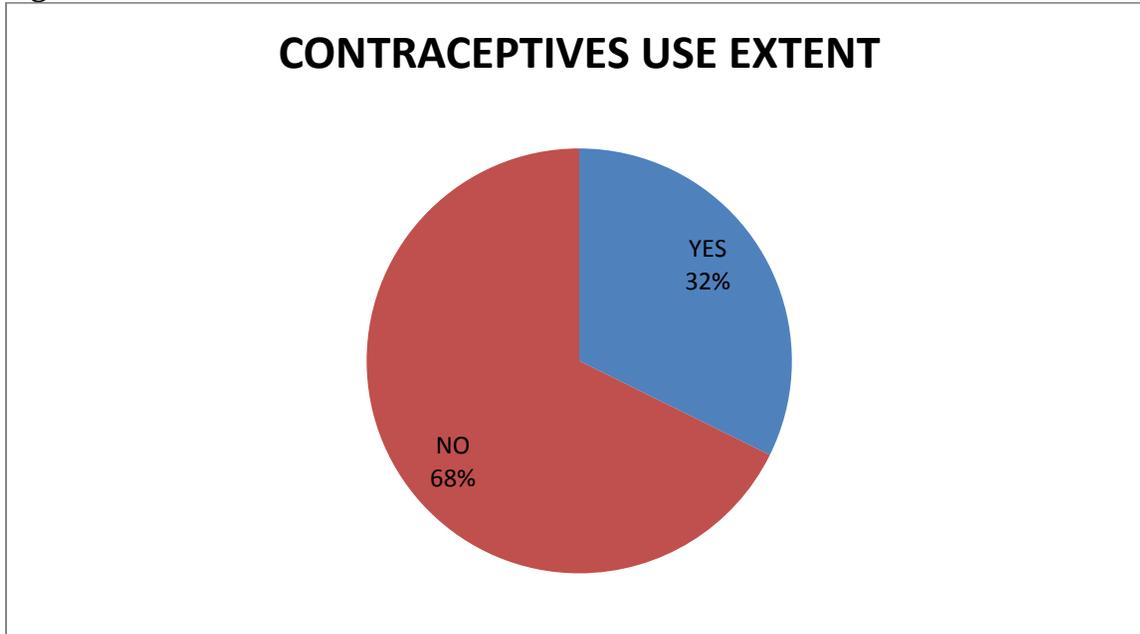
RESULTS
Figures

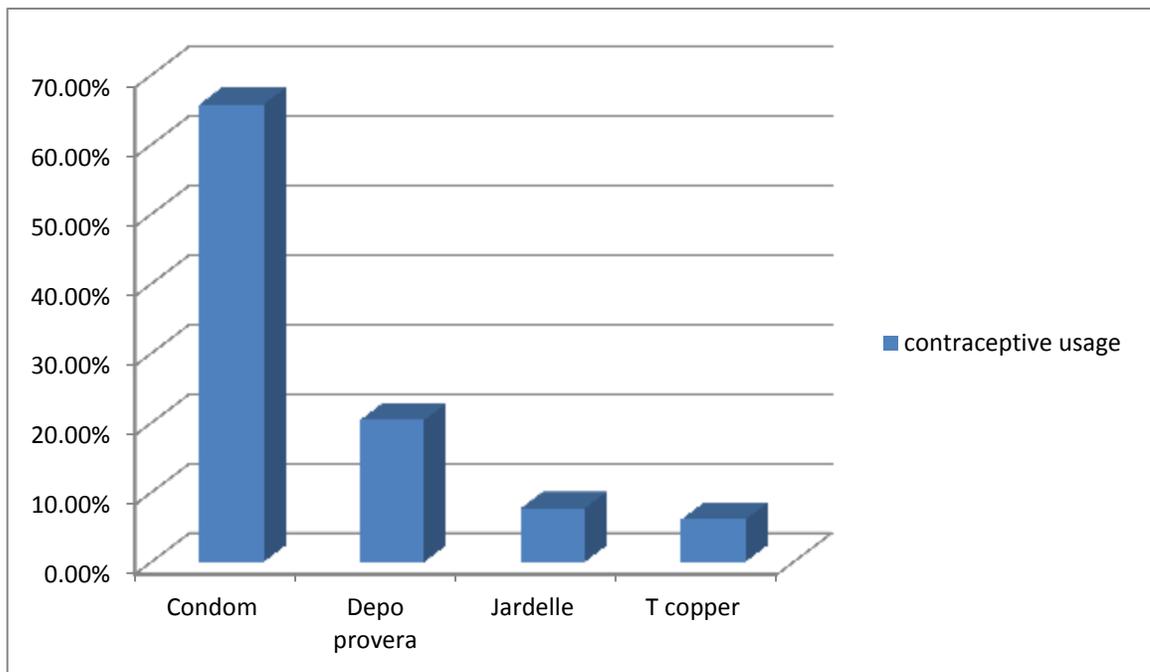
Figure 1: Prevalence of contraceptive use among KCNP students

Figure 2: Preferred contraceptive among KCNP students

TABLES

Table 1: Bivariate analysis on socio demographic factors

Variable	Category	Frequency N=196	Contraceptive use		Df	Chi	P= value
			On (n=124)	Not (n=72)	1	1.906	0.167
Age	18-20 years	142 (72.4%)	94(75.8%)	48(66.7%)			
	21-24 years	54 (27.6%)	30(24.2%)	24(33.3)			
Religion	Christian	144 (73.5%)	95(76.6%)	49(68.1%)	1	2.422	0.120
	Muslim	52 (26.5%)	29(23.4%)	23(31.9%)			
Course	Certificate	68 (34.7%)	60(48.4%)	8(11.1%)	1	35.403	0.000
	Diploma	118 (60.2%)	55(44.4%)	63(87.5%)			
	Higher diploma	10 (5.1%)	9(7.2%)	1(1.4%)			
Level of pocket money (Ksh.)	<2000	34 (17.3%)	20(16.1%)	14(19.4%)	2	6.738	0.034
	2000 – 5000	94 (48%)	68(54.8%)	26(36.1%)			
	>5000	68 (34.7%)	36(29.1%)	32(44.5%)			
Residence	College hostels	45 (23%)	37(29.8%)	8(11.1%)	2	99.521	0.000
	Home with relatives	62 (31.6%)	8(6.5%)	54(75%)			
	Rentals	89 (45.4%)	79(63.7%)	10(13.9%)			

Table 2: Bivariate analysis on student knowledge on contraceptive

Variable	Category (N=196)		Contraceptives use		Df	Chi square	P= value
			On (n=124)	Not (n=72)			
Aware of contraceptive	Yes	194 (99%)	123(99.2%)	71(98.6%)	1	0.153	0.696
	No	2 (1%)	1(0.8%)	1(1.4%)			
Mode of action	Yes	3 (1.5%)	1(0.8%)	2(2.8%)	1	1.174	0.278
	No	193 (98.5%)	123(99.2%)	70(97.2%)			
Indications	Yes	194 (99%)	122(98.4%)	72(100%)	1	1.173	0.279
	No	2 (1%)	2(1.6%)	0(0%)			
Side effects	Yes	80 (40.8%)	52(41.9%)	28(38.9%)	1	0.175	0.676
	No	116 (59.2%)	72(58.1%)	44(61.1%)			
Usage	Yes	112 (57.1%)	94(75.8%)	18(25%)	1	48.012	0.000
	No	84 (42.9%)	30(24.2%)	54(75%)			
Storage	Yes	68 (34.7%)	50(40.3%)	18(25%)	1	4.720	0.030
	No	128 (65.3%)	74(59.7%)	54(75%)			
Effectiveness	Yes	172 (87.8%)	109(87.9%)	63(87.5%)	1	0.007	0.974
	No	24 (12.2%)	15(12.1%)	9(12.5%)			

Table 3: Bivariate analysis on accessibility of contraceptive

Variable	Category	Frequency (N=196)	Contraceptive use		Df	Chi square	P= value
			Yes (n=124)	No (n=72)			
Available at nearby facility	Yes	151 (77%)	103(83.1%)	48(66.7%)	1	6.925	0.009
	No	45 (23%)	21(16.9%)	24(33.3%)			
Issued at college	Yes	65 (33.2%)	35(28.2%)	30(41.7%)	1	3.713	0.054
	No	131 (66.8%)	89(71.8%)	42(58.3%)			
Availability at any time	Yes	58 (29.6%)	37(29.8%)	21(29.2%)	1	0.010	0.921
	No	138 (70.4)	87(70.2%)	51(70.8%)			
Parents support on contraceptive use	Yes	24 (12.2%)	13(10.5%)	11(15.3%)	1	0.974	0.324
	No	172 (87.8%)	111(89.5%)	61(84.7%)			

CONCLUSION

Most college students at KCNP fall at an age range of 18-20 years, at this age most are sexually active and they need support from parents and institution on contraceptive choices. Their residence in college plays a role in sexual and contraceptive use practices

Majority of the respondents can access contraceptive products at a nearby health facility and which is significant to contraceptive uptake

The level of knowledge of on contraceptive use was satisfactory. However, uptake of contraceptive products was low despite the sexually active life by the students

DISCUSSION

The study findings shows that from a sample size of 196 respondents; about 142 (72.4%) to be from an age range of 18-24 years, Christians were the dominant group with 144 (73.5%) respondents and about 48% receive a monthly pocket money of Ksh. 2000 to 5000. About 75% of the respondents are sexually active while prevalence of contraceptive use among the students was 32% and the preferred contraceptive being condom (62%). Bivariate analysis findings shows that residence (p=0.000) of the respondents was statistically significant to contraceptive use

Based on the student knowledge on contraceptives; about 144 (99%) of the respondents are aware of contraceptives and 172(87.8%) understand their effectiveness. However, there was decline in knowledge on side effects (40.8%), storage (34.7%) and mode of action of oral contraceptives (1.5%). Bivariate analysis findings show that the knowledge on storage of contraceptives was statistically significant. Similar study findings have shown increased level of knowledge on use of emergence contraception are those with higher levels of education (Obi SN *et al*;

2008) those living in urban regions (Keeshury *et al*; 2011, Mbizhos and Zaid, 2010 and Chin Quee and Engle, 2000).

About 151(77%) of the respondents access their contraceptives within a nearby facility like a hospital or community pharmacies, 65 (33.2%) receive the contraceptives in college (condoms) and 172(87.8%) of the respondents are using contraceptives without the knowledge of their parents. The bivariate analysis findings show that availability of contraceptives within a nearby facility (p=0.009) was significant to contraceptive use. Other studies show that it is becoming a trend where emergency contraceptives are moving from prescription to over the counter product easily available in a community pharmacy (Raymond *et al*; 2011, Coetaux and Pillsburry, 2000), and sold by pharmacists and pharmaceutical technologists (Brieger WR *et al*; 2004).

RECOMMENDATIONS

The study recommends on the following;

1. The institutions of higher learning and the parents need to support their children on sexual health in order to arrive at an equilibrium between sexual activity and contraceptive use which stands at 75% to 32%
2. Despite the level of knowledge of contraceptives being high (99%), there was need to educate the students on variety of contraceptive products, mode of action and safety
3. Institutions of higher learning should employ an health care worker who can ensure that there is always sustainable contraceptive commodities to students all times

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