



Perception And Barriers To The Use Of Female Condoms Among Female Undergraduates In Ignatius Ajuru University Of Education, Port Harcourt

¹Orukwowa Udo

¹Department of Nursing Science,
Faculty of Basic Medical Sciences,
College of Medical Sciences, Rivers State University, Port Harcourt, Nigeria
(udocd27@gmail.com)

ABSTRACT

Perception and barriers to the use of female condoms among female undergraduate students in Ignatius Ajuru University of Education, Port Harcourt. Two objectives and two research questions were stated to guide the study. The descriptive survey research design was adopted with a study population which consisted of all female undergraduate students in Ignatius Ajuru University of education Port Harcourt, Rivers state, Nigeria. A sample size of 134 was selected using a simple random sampling technique. Data was collected with a structured questionnaire with a reliability coefficient of 0.81. Data collected were analyzed using frequency table, percentage and mean score analysis. The result showed that, 30.0% strongly agreed that abstinence is the most effective way to prevent contracting HIV; 30.0%, strongly agreed that there are practices and behaviours regarding HIV prevention through available communication and health education tools; 15.0% agreed that using female condoms and contraceptives is the effective measure to prevent HIV among female undergraduates; 60.0% strongly agreed that the fear of contracting HIV among female undergraduate students promotes the usage of female condoms; 65.0% strongly agreed, that there are barriers that hinder the use of female condoms by women. The study concluded that, condom use was generally poor among older students and use of alcohol and/or drug was important predictor for inconsistent condom use.

Keywords: Barriers, Condom, Females, Perception, Undergraduates

INTRODUCTION

The female condom (FC) is a polyurethane sheath with a flexible ring at both ends, which fits into the vagina before sexual intercourse, providing the woman with autonomy for protection, both against unwanted pregnancies and sexually transmitted infections (STIs), including HIV-AIDS (Déogratias et al., 2012). Indeed, this is the only means of reciprocal protection put in place at the initiative of women alone (Lytle et al., 2017). However, the rate of unwanted pregnancies remains high, both in the West and in our area, which is 36% in France (Cannasse, 2017) and 40% in Nigeria (Libite et al., 2011). Similarly, young women account for 64% of young people living with HIV globally (Potter & Gerofi, 2012). In Nigeria, the seroprevalence of HIV among women is higher than that of men, with rates of 5.6% and 2.9% respectively a trend also observed in age groups of 15 to 24 years (3.9 and 1.6%) (Alexandra & Donna, 2012).

Consistent and appropriate use of condom is the most effective way of preventing HIV/AIDS transmission and unwanted pregnancies (Holmes et al., 2018). Cecil et al. (2018) suggest that women are more likely to get infected with sexually transmitted diseases (STDs) than men and to bear the consequences associated with unplanned pregnancies, and STDs. Cecil, et.al (2018) the use of the female

condom is seen as a way of providing protection to women against sexually transmitted infections (STIs) and unwanted pregnancies. Indeed, the female condom has emerged as an acceptable alternative barrier method to the male condom. In order to promote the access to the female condom, its awareness, availability and use, mass media campaigns have been undertaken worldwide, and studies aimed at evaluating impact of these campaigns were conducted. Stockman, et al. (2012) and Associates recommend to increase the availability of female condom and to provide the populations with education on their use. Besides, mass media campaigns are likely to contribute to the adoption of the female condom use. Availability and marketing of female condom were launched in Africa since 2006 (Deniaud, 2016)

In Nigeria, like elsewhere, efforts have been undertaken to raise the population's awareness of the female condom but little is still known about it among college undergraduates. To increase access, demand and utilisation of the condom, the Government of Nigeria plans to provide the populations with information on both male and female condoms. To this end, some of the efforts to promote the female condoms include the advertisement posted nationwide through the partnership between public and private sectors; other efforts are made by Population Service International (PSI) by sensitization (Barigye, 2017). Making female condoms available and accessible to all populations is one of the key activities of the Government of Nigeria as highlighted in its 2009 – 2012 National Strategic Plan. (National AIDS Control Commission, June 2018) Through this process, continuous supply, free distribution and social marketing of condom are to be reinforced with special emphasis on female condom. Strengthening initiatives for female condom promotion is a key strategy related to female condom promotion during this period. Also female condoms consumption was due to increase from only 5,500 in 2008 to 214,000 in 2010. (National AIDS Control Commission (June 2018).

In accordance with the National Strategic Plan for the fight against HIV/AIDS in Nigeria for the period 2006-2010 and with the support of a consortium of Netherlands Non-Governmental Organisations (NGOs) grouped under the label of Universal Access to Female Condom (UAFC), the Association Camerounaise pour le Marketing Social (ACMS) launched in January 2009 a three year project (2009-2011) to promote and distribute female condoms in five regions of Nigeria, including Centre, Littoral, Adamawa, Northwest and Southwest regions.

Thus, the female condom has become widely used for HIV prevention in several developing countries with high HIV incidence (Adeokun et al., 2020). Studies around the globe have found positive results from introducing the female condom to women of all ages, including decreased incidence of STIs and unwanted pregnancies, and increased protected sex (Choi et al., 2013). Despite extensive research showing its effectiveness and acceptability with various populations at highest risk, the female condom remains unpopular and underutilized in most communities (Mantell et al., 2018). There are many barriers to accessing and using the female condom, which needs to be unraveled. Hence, this study was conducted to unveil the perception and barriers to the use of female condoms among female undergraduate students in Ignatius Ajuru University of Education, Port Harcourt.

Objectives

The following objectives were stated to guide the study:

1. To determine the perception of risk of contracting HIV among undergraduate students in Ignatius Ajuru University of Education, Port Harcourt
2. To find out the barriers to the use of female condoms by undergraduate students in Ignatius Ajuru University of Education, Port Harcourt

Research Questions

The following research questions were stated to guide the study:

1. What is the perception of risk of contracting HIV among undergraduate students in Ignatius Ajuru University of Education, Port Harcourt?
2. What are the barriers to the use of female condoms by undergraduate students in Ignatius Ajuru University of Education, Port Harcourt?

METHODOLOGY

The descriptive survey research design was adopted with a study population which consisted of all female undergraduate students in Ignatius Ajuru University of education Port Harcourt, Rivers state, Nigeria. A sample size of 100 was selected using a simple random sampling technique. Data for this study was collected from primary and secondary sources. The primary source of data collected was mainly the use of a structured questionnaire with a reliability coefficient of 0.81 which was designed to elicit information on the subject while the secondary source of data collected were textbooks, journals and scholarly materials. Data collected were analyzed using frequency table, percentage and mean score analysis.

RESULTS

The results of this study are presented below:

Table 4: Abstinence is the most effective way to prevent contracting HIV

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	30	30.0	30.0
Agree	42	42.0	72.0
Undecided	10	10.0	82.0
Disagree	10	10.0	92.0
Strongly disagree	8	8.0	100.0
Total	100	100.0	

Table 1 shows the responses of respondents if abstinence is the most effective way to prevent contracting HIV. 30.0% strongly agreed that abstinence is the most effective way to prevent contracting HIV, 42.0% agreed that abstinence is the most effective way, 10.0% disagreed while 8.0% strongly disagreed that abstinence is the most effective way to prevent contracting HIV.

Table 2: There are practices and behaviours regarding HIV prevention through available communication and health education tools

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	30	30.0	30.0
Agree	42	42.0	72.0
Undecided	10	10.0	82.0
Disagree	10	10.0	92.0
Strongly disagree	8	8.0	100.0
Total	100	100.0	

Table 2 shows the responses of respondents if there are practices and behaviours regarding HIV prevention through available communication and health education tools. 30.0%, strongly agreed 42.0% agreed, 10.0% disagreed while 8.0% strongly disagreed that there are practices and behaviours regarding HIV prevention through available communication and health education tools.

Table 3: Using female condoms and contraceptives is the effective measure to prevent HIV among female undergraduates

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	10	10.0	10.0
Agree	15	15.0	25.0
Undecided	5	5.0	30.0
Disagree	40	40.0	70.0
Strongly disagree	30	30.0	100.0
Total	100	100.0	

Table 3 shows the responses of respondents if using female condoms and contraceptives is the effective measure to prevent HIV among female undergraduates. 10.0% strongly agreed, 15.0% agreed, 40.0% disagree while 30.0% strongly disagree that using female condoms and contraceptives is the effective measure to prevent HIV among female undergraduates.

Table 4: The fear of contracting HIV among female undergraduate students promotes the usage of female condoms

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	60	60.0	60.0
Agree	25	25.0	85.0
Undecided	10	10.0	95.0
Disagree	5	5.0	100.0
Total	100	100.0	

Table 4 show the responses of respondents if the fear of contracting HIV among female undergraduate students promotes the usage of female condoms. 60.0% strongly agreed, 25.0% agreed, and 5.0% disagreed that the fear of contracting HIV among female undergraduate students promotes the usage of female condoms.

Table 5: There is a perception of risk of contracting HIV among undergraduate students in Ignatius Ajuru University of Education, Port Harcourt

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	25	25.0	25.0
Agree	32	32.0	57.0
Undecided	13	13.0	70.0
Disagree	15	15.0	85.0
Strongly disagree	15	15.0	100.0
Total	100	100.0	

Table 5 showed the responses of respondents if there is a perception of risk of contracting HIV among undergraduates; 25.0% strongly agreed, 32.0% agreed, 15.0% while 15.0% strongly disagreed that there is a perception of risk of contracting HIV among undergraduate students.

Table 6: There are barriers that hinder the use of female condoms by women

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	65	65.0	65.0
Agree	30	30.0	95.0
Disagree	3	3.0	98.0
Strongly disagree	2	2.0	100.0
Total	100	100.0	

Table 6 show the responses of respondents if there are barriers that hinder the use of female condoms by women. 65.0% strongly agreed, 30.0% agreed, 3.0% disagreed while 2.0% strongly disagreed that there are barriers that hinder the use of female condoms by women.

Table 7: Female condoms triggering latex allergy is one the most factor that hinders women from using it

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	65	65.0	65.0
Agree	30	30.0	95.0
Disagree	3	3.0	98.0
Strongly disagree	2	2.0	100.0
Total	100	100.0	

Table 7 showed the responses of respondents if female condoms triggering latex allergy is one the most factor that hinders women from using it; 65.0% agreed, 30.0% agreed, 3.0% disagreed while 2.0% strongly disagree that female condoms triggering latex allergy is one the most factor that hinders women from using it.

Table 8: Female condoms are slightly less effective at preventing pregnancy and STDs than male condoms

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	30	30.0	30.0
Agree	42	42.0	72.0
Undecided	10	10.0	82.0
Disagree	10	10.0	92.0
Strongly disagree	8	8.0	100.0
Total	100	100.0	

Table 8 shows the responses of respondents if female condoms are slightly less effective at preventing pregnancy and STDs than male condoms; 30.0% strongly agreed, 42.0%, 10.0% disagreed while 8.0% strongly disagreed that female condoms are slightly less effective at preventing pregnancy and STDs than male condoms.

Table 9: Use of drugs prior to sexual intercourse hinders women from using female condoms

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	60	60.0	60.0
Agree	25	25.0	85.0
Undecided	10	10.0	95.0
Disagree	5	5.0	100.0
Total	100	100.0	

Table 9 showed the responses of respondents if use of drugs prior to sexual intercourse hinders women from using female condoms; 60.0% strongly agreed, 25.0% agreed, while 5.0% disagreed that use of drugs prior to sexual intercourse hinders women from using female condoms.

Table 10: The cost of female condom evidently poses a barrier to the use of condoms by the poor

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	25	25.0	25.0
Agree	32	32.0	57.0
Undecided	13	13.0	70.0
Disagree	15	15.0	85.0
Strongly disagree	15	15.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 10 showed the responses of respondents if the cost of female condom evidently poses a barrier to the use of condoms by the poor; 25.0% strongly agreed, 32.0% agreed, 15.0% disagree while 15.0% strongly disagree that the cost of female condom evidently poses a barrier to the use of condoms by the poor.

Table 11: Aversion to the condom, anxiety and depression hinders the use of female condoms by women

Responses	Frequency	Percent	Cumulative Percent
Strongly agree	65	65.0	65.0
Agree	30	30.0	95.0
Disagree	3	3.0	98.0
Strongly disagree	2	2.0	100.0
Total	100	100.0	

Table 11 show the responses of respondents if aversion to the condom, anxiety and depression hinders the use of female condoms by women; 65.0% strongly agreed that aversion to the condom, anxiety and depression hinders the use of female condoms by women, 30.0% agreed while 2.0% strongly disagreed that aversion to the condom, anxiety and depression hinders the use of female condoms by women.

CONCLUSION

The study concluded that, condom use was generally poor among older students and use of alcohol and/or drug was important predictor for inconsistent condom use. Furthermore, we identified poor agreement between engaging in HIV risk sexual behavior and perception of HIV risk among the students.

RECOMMENDATIONS

More research should focus on coping mechanism for those already infected with sexually transmitted disease. ii. Studies should be carried out on the prevalence rate of each of the sexually transmitted diseases dominant in the study area. iii. Further studies on sexually transmitted diseases should focus more on a larger sample size with a wider scope to provide a robust view at state and national level.

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