Condom Use in Nigeria: An Evaluation

Iyaji Adejoh and Ogbuke Martha Uchenna
Department of Sociology, Kogi State University, Anyigba, Kogi State Nigeria

Abstract: The research is mainly aimed at examining the factors militating against the use of condom in Nigeria with particular emphasis on Ankpa town in Kogi East of Kogi State Nigeria. Other objectives of the study includes examining the general reason for condom use as well as making recommendations that will ensure the wide acceptability of the use of condom especially in this era of HIV/AIDS pandemic in Nigeria. In the course of the study, the researcher made use of in-depth interview to gather the required data. Findings revealed that condom is used both for prophylactic and family planning or pregnancy prevention purposes. It was also discovered that encumbering beliefs, adverse experience, gender-related fears and tensions among others militate against the wide usage of condom. The writer recommends increased awareness of the use of condom that will popularize the use of condom, eliminate the belief in its harmful side effect and its association with illicit sex as well as the expansion of the existing range of condom that may be easier and more comfortable to use.

Key words: Contraceptives, couples, evaluation, prevention, prophylactics

INTRODUCTION

Condom use both for family planning and for disease prevention is often thought to increase as contraceptive practice becomes more widespread. In the late 1990s, 4.9% of the world’s married couples used predominantly the male latex condom (UN, 2001). By far, the highest prevalence rate (42%) is found in Japan, the only country in the world where condom is the most commonly used family planning method (Engender Health, 2002). Recent surveys, especially those focused on HIV/AIDS, suggest that condom use has risen in many countries, reflecting an increased awareness of the potential risk of unprotected sexual activity (Andrzej, 2004).

Condom use is strongly differentiated by parity. The method is rarely used by unmarried and even married couples because of the strong desire and social pressure to establish fertility as soon as possible within marriage. Because of this attitude to procreation in Nigeria, condoms are rarely used for long in most marriage. In fact there is inconsistent use of condom and a high discontinuation rate by married couples in Nigeria. According to Smith (2004), this inconsistency and discontinuation stems from misunderstanding about the need for consistent condom use, experimentation with the method and ending use so as to have another child.

Despite the widespread knowledge about HIV/AIDS and its mode of transmission and the high levels of awareness of and access to condoms, many people especially the unmarried think that their own risk of infection is minimal and do not take precautions to protect themselves during sex. Reasons have shown that even those who recognize condom use as a viable made of disease and pregnancy prevention frequently viewed condom use in moral terms. Researches conducted in many developing countries have demonstrated similar disparities between high levels of knowledge of HIV/AIDS and awareness of condom on the one hand and lower use of condoms as a method of disease and pregnancy prevention on the other (Maharaj, 2001; Meekers and Klein, 2001).

The main objectives of this study is the examination of the reasons for condom use as well as the factors militating against the use of condom and recommend ways that will ensure increased acceptance of condom both for prophylactic and family planning or pregnancy prevention purposes.

METHODOLOGY

This study was carried out between 2009 and 2010 in Ankpa, (Kogi East) Kogi State Nigeria. In the course of the research, the researcher employed the use of primary sources of data collection by relying heavily on in-depth interview and related literature from other secondary sources of data such as text books, journals, newspapers, magazines etc. The researcher thus adopted the qualitative technique of data analysis to analyze the responses obtained in the course of the research.

RESULTS AND DISCUSSION

The use of condom in Nigeria varies within marital, pre-marital, and extra-marital relationships. One major
reason why condom is used especially among married couple is the presence of actual or perceived health-related problems related to a woman’s use of hormonal contraception. In fact, the most frequently cited circumstance to condom use arises when a woman cannot use oral contraceptives. In this case, condom is seen as a second choice method when other modern contraceptives are meted out for health-related reasons. Most men it is believed use condom as an act of “sacrifice” in order to prevent pregnancy when no other solution is available. A second, closely related reason for using the condom, frequently articulated by women is that it does not entail any physiological side effects. Several women believe their men’s agreement to use condom is hinged on this factor.

Similarly, the benign nature of condoms underpins the third reason why they are used to let a woman’s body rest between episodes of normal contraceptives use like pills or IUD. This reason however also accounts for much of the inconsistent nature of condom use. Whereas the pill and IUDs are generally well regarded for their contraceptive efficacy, many women are fearful of their possible side effects, and some use them for only a few months at a time. These episodes are interspersed with period of condom use. One other reason for condom use is that it is used as a prophylactic. In Nigerian today, there is to some degree, a considerable level of awareness of sexually transmitted diseases and how it can be prevented. Because of this, condom use is widely embraced today as a means of practicing safe sex since there exists the problem of abstinence or mutual fidelity especially in pre-marital relationship.

One other foremost reason why condom is used in Nigeria either in marital, extra marital and pre-marital relationship is for the prevention of pregnancy. In Nigeria, pre-marital sex is a common phenomenon because most people view it as way of demonstrating “love” and laying good courtship foundation. However, because the society frowns at pregnancy outside marriage, most unmarried people resort to the use of condom for the prevention of pregnancy. Aside this, even among married couples, condom is equally used to prevent pregnancy and ensure good child-spacing.

Obstacles to condom usage: In as much as condom use is to some extent gaining wide acceptability, there exist some major obstacles militating against its widespread usage. The reasons range from encumbering beliefs to adverse experiences reduced sexual pleasure, gender-related fears and tension, to social stigma.

Several kinds of encumbering beliefs about the condom may be distinguished. They include concerns about the method’s perceived fragility and in effectiveness, its potential adverse effects and socio-religious obstacles. The most widely important concern is the widespread belief amongst married couples that condoms are fragile and ineffective as contraceptives and therefore, risky. Most men, in particular have the conviction that condoms break often and offer little protection against unwanted pregnancy and the risk of STIs. This concern with the functional or mechanical aspects of condom performance is often poorly informed and compounded by in-experience with the method and the stigma that many people attach to it. Such perceptions decrease the odds that a condom will be used (UN, 2001).

The second type of encumbering beliefs concerns the adverse effects of condom. Condom it is believed is source of virginal dryness, inflammation and disease. There exist reports that links the blanket assertion of the method’s perceived harmful consequences to men. In fact some men even describe condom as a coffin, arguing that condom has negative effects on women; condoms could cause them a disease. The woman’s womb could become dry after repeated use. For such men, God has sent down dew to cover grass, herbs and trees. So why cover the male sex organ with a nylon tent (Bauni and Obonyo, 2003). As a matter of fact, another vivid metaphor portrays the condom as a “tent”, a man-made covering that impedes a natural process, and by inference, ignore God’s fertility mandate. These are commonly held beliefs especially among some un-informed religious fanatics in Nigeria. Linked to this is the condemnation of condom use by churches. The argument stems from the belief that encouraging condom use provide justification for people to engage in “unlawful” and rampant sexual relationships, especially among unmarried people. This explains why the churches tend to favor abstinence and mutual fidelity to condom use. These perceptions are effective barriers to condom use (Green, 2001).

A second kind of obstacle to condom use consists of adverse experiences with the method. Both men and women often report personal encounters with condom failure which of course hinge on its fragility. Individual’s accounts for such experiences are often focused with and compounded by hear say and second hand knowledge. The cumulative effects are three fold: first, they reinforce prevailing beliefs that condoms are unreliable; second, the decrease the probability that condom will be used; and third, they perpetrate the intermittent nature of much condom use.

A third type of obstacle concerns problematic relational and sensational attributes of condoms, whether actual or perceived. Men feel strongly that condom reduce sexual pleasure, and marital intimacy, and that they are inconvenient to use. Even women also complain that condoms reduce their sexual pleasure as well. Several men have the desire to preserve their sexual pleasure and comfort. The net effect of these objections is to impede the methods adoption and sustained use (Gardener et al., 1999). For some men, condom use...
disrupts the flow of intimate relations and impedes spontaneity. Condom for them, disrupt the natural dynamics of sexual relations by introducing unwanted delays that spoils the mood and may lead to loss of sexual arousal. For such men, it does spoil the mood, because when you are in a situation (sexually aroused), and you go to put the condom on, you move into another state. Your nerves get cooler (Woodsong and Koo, 1999).

There are a host of gender-related fears and tension related to condom use often articulated by both men and women. For example, women’s concern about condom failure and about contraceptive efficacy more generally are conflated with uncertainties about their husbands’ willingness to avoid pregnancy. Such uncertainty may effect spousal disagreement or poor communication about reproductive intentions. This problem is compounded by a deeper set of tension associated with condom use. Issues related to sex are rarely dealt with openly, and the notion of a good, docile wife discourages communication about sexual matters and equitable decision making. Women are reluctant to threaten traditional gender role in the sexual and reproductive arena, where husbands control decision making, and both men and women see contraception as a woman’s responsibility. With regards to condom use, however, responsibility for pregnancy prevention rest with husbands. The inherent conflict posed by this juxtaposition of the normal state of affairs leads to an unknown, but likely substantial member of couples to dispense with trying condoms.

This problem is undoubtedly strengthened by women’s belief that husbands should not have to take responsibility for birth control. Moreover many men feel that accommodating condom use with expectations of masculinity is awkward. Condom use may imply a physical vulnerability, a need to shield oneself against infections or alternatively to protect one’s spouse from impurities that may have infiltrated the body during extra-marital relations. Most men would rather not use a condom than risk having their masculinity questioned or stir up conflict with their wives.

One other notable obstacle to condom use arises from the unease with the method stemming from its occasional association with illicit sex, which for some translates into a social stigma. Although, condom is viewed primarily as contraceptive rather than prophylactic, it is frequently perceived by people of both sexes as an extra-marital contraceptive method (Knodel and Anthony, 1996). According to this view, it symbolizes emotional distance and lack of romantic involvement. In fact men and women may be reluctant to suggest condom use to their spouses or partners for fear of raising suspicion of infidelity or being perceived as untrusting. The equation of condom use with promiscuity seriously limits and discourages men and women from its purchase and actual use. According to a survey carried out by Smith (2004), it was discovered that when a woman request condom use, even for the purpose of preventing pregnancy, she is demonstrating that she is “too experienced.” Such men tend to think that only women who have had many partners would have the confidence to ask a partner to use condom. For such men, girls who have their own supplies of condoms are surely promiscuous and may even be prostitutes (Smith, 2004).

CONCLUSION AND RECOMMENDATION

From the foregoing, numerous advantages associated with condom use are inhibited by so many factors which lack scientific proofs. As a matter of fact, discussing condom as a means of infection prevention can, therefore, be inhibited by a host of stigma associated with it. Condoms although promoted as a means of disease prevention, become infected with the stigma attached to the diseases they can be used to combat (Hillier and Warr, 1998). Though there exist the knowledge of HIV/AIDS and other STIs as well as numerous cases of unwanted pregnancy, the use of condom has still not gained the wide acceptability that it deserves. The reasons for this range from several encumbering beliefs to adverse experience, perceived reduced sexual pleasure and gender related fears and tension.

Certain strategies can however be used to increase and improve condom use, the obstacles notwithstanding. First, awareness of condom use should be increased, and more intensive counseling on their proper use should be offered. This will help reduce the stigma as well as the non-reliability obstacles to its use. These approaches will require out reach efforts directed towards men and women. Secondly, family planning service providers need to reinforce positive messages that condoms preserve women’s health and provide reliable protection against pregnancy when used correctly and consistently. Thirdly, the range of existing condom choices should be expanded to include provision of new and lubricated designs that may be easier and comfortable to use (Gardener et al., 1999). Lastly, there should be increased public awareness through the print and electronic media. This will in no small measure popularize the use of condoms and thus ensure wide usage by both the married and unmarried as a reliable prophylactic and pregnancy prevention method.

REFERENCES


