UNMET NEED FOR FAMILY PLANNING AND DEMOGRAPHIC DIVIDEND IN NIGERIA

INTRODUCTION

The starting point for creating any demographic surplus rests on fertility decline. For most countries, consistent fall in fertility rates always follow effective and efficient family planning policies and actions. Without adequate provision of family planning services, there could be high unmet need for family planning with many unplanned and unwanted pregnancies and childbirths. Several women have diverse reasons for not making use of contraceptives. While some believe that family planning methods have some risks attached and may have side effects after use, others are not encouraged by their partners while some others believe it is a myth.

Unmet need for family planning refers to the condition of wanting to avoid or postpone childbearing but not using any method of contraception. It is the discrepancy between women’s fertility preferences and contraceptive use. Unmet need for family planning causes large number of unplanned pregnancies, it further leads to an increased population, which if not properly controlled may lead to the case of baby boom. Baby boom period can lead to youth bulge with increase in working age population. However, the opportunities offered by baby boom can only lead to demographic dividend if there are policies with dealing facility. The demographic dividend is the accelerated growth in a country’s economy that is associated with a change in the age structure of its population. It is the window of opportunity that opens up for a nation when fertility rates decline, resulting in fewer number of the dependent population and a larger number of the working-age population. The process of harnessing the dividend is therefore dependent on the pace and pattern of fertility decline.

UNMET NEED FOR FAMILY PLANNING AND FERTILITY RATES IN NIGERIA

Unmet need for family planning is prevalent in Nigeria leading to a high rate in fertility. Over the years, unmet need for family planning had not seen consistent decline. Despite initial fall in its rate between 1990 and 2003, it rose again to 20 per cent in 2008, and by 2016, about 28 percent of women still have unmet need for family planning (Figure 1). Furthermore, there is a wide disparity on the level of contraceptive use and unmet need among the different States of the Country. While some states
such as Delta have unmet need for family planning as high as 44.8, others like Imo state has 19 per cent as seen in Figure 2.

There is a slight negative relationship between total fertility rate (TFR) and unmet need for family planning as they exist in many other country (Figure 3). This implies that other factors apart from unmet need might be important in reducing TFR in Nigeria. Furthermore, the North Eastern and North Western regions have a highest proportion of unmet need as compared to South Eastern and South eastern regions with lowest rates of unmet need (Figure 4).

There are evidences that factors that drive high fertility in Nigeria are also responsible for high unmet need for family planning. These include low female education attainment and empowerment, teenage pregnancy as well as cultural factors. These factors must be addressed for the country to speed up her demographic transition which will open up the demographic window of opportunity for economics growth and sustainable development. The implication is that there is the need to invest in voluntary family planning in order to facilitate fertility decline. The nature of demographic dividend is that fertility must decline enough to create a youth bulge and favourable youthful dependency rate. The rate of fertility decline will determine the rate at which a country can create and harness demographic dividend.

A slow transition to low fertility by any country is a slow process towards generating the required demographic dividend that can be harnessed. Thus, it is important that there be an increase in the measures towards meeting the need for family planning in order to reduce the fertility rates. The disparity in fertility rates cross states and geopolitical zones also have implications for pace and pattern of demographic transition and the prospects of benefitting from the demographic dividends. If
demographic dividend is to be harnessed by every section of the country, then fertility must be made to decline substantially across the states. States which have fertility decline before others will have some head-start over states lagging behind in fertility decline.

POLICY OPTIONS AND RECOMMENDATIONS

The process of reducing unmet need in Nigeria should revolve around three preconditions for sustained fertility decline which are that first, fertility regulation must be within the calculus of conscious choice, and second, effective means of family planning must be available. Third, reduced fertility must be perceived as advantageous by the government and individuals.

- The Nigerian government believes in the advantages of family planning which has to be concretized through political and financial commitments. Hence, the Government through the FP 2020 initiative and in collaboration with various development partners and private sector pledges to achieve a modern contraceptive prevalence rate (mCPR) of 27% among all women by 2020. This will be done through sustainable financing and increased partnerships with all stakeholders. Unfortunately, with two years left to reaching the target FP2020 objectives on contraceptives usage, indicators show that Nigeria might be off target. If Nigeria makes good her commitments both to sustainable financing and strategic partnerships, there is the possibility of averting 31,000 maternal deaths and 1.5 million child deaths and saving more than 700,000 mothers from injuries or permanent illness due to childbirth.

- There should be a concerted efforts at reducing the incidence of unmet need for contraceptives. The use of contraceptives is one of the prominent methods of family planning in Nigeria; however, a larger percentage of the population has not been able to meet their need for the use of contraceptives, most especially in the Northern regions. The percentage of women married or in union who are using any method of contraception (or whose partner is using any method) is reported as 13.4% (MICS, 2016) in Nigeria, implying that a greater proportion of married couples do not use contraceptives. Adolescent birth rate is 120 per 1000 women aged 15-19 years (MICS, 2016). Furthermore, young girls with higher level of education have lower age specific fertility rate, and they also have lesser tendencies of getting pregnant at teenage. However, those with no education are at higher risk of getting pregnant at adolescent ages. Girls who stay longer in school tend to get married and start bearing children later, which eventually makes them have fewer children.

- The role of education in solving the problem of unmet need cannot be over-emphasised. Government must therefore be committed to the delivery of quality and relevant education to the citizens. The issue of women and girl child education and women empowerment is critical. Hence, governments must invest in access to free and quality education at all levels. The education must be one that prepares young people — especially girls — to fully participate in the formal labour market. Second chance opportunity should also be made available to those who dropped out of schools.

- There is the need to keep the fertility rate on a decreasing trend through reduction in teenage pregnancy and early marriages in the country, as well as awareness of the dangers inherent on the health of the girl child in early marriage should be publicized to the rural areas where such is prevalent. Many parents are ignorant of this; thus, awareness should be made at all levels from the cities down to the grassroots on the dangers for the child.

- Family planning programmes should be designed for effective and efficient implementation and delivery. The various programmes should be integrated with specific strategies to reduce unmet need. Sensitizations and campaigns should be carried out at all levels on the need for the use of contraceptives.

- There is need for more awareness to be done on the need to embrace contraception in order to keep fertility rate at a level that will foster harnessing of demographic dividend in the country. These sensitizations can further be carried out at hospitals and health care centers where women come for child care and antenatal.
The social media can further be an avenue for such campaigns and awareness. Awareness on the need to increase the use of contraceptives to keep fertility rate at a level that is required to harness demographic dividend in the country must be stirred-up by the government.

- Training and re-training of health care practitioners at hospitals and health care centers on the broad range of family planning methods are to be conducted made at regular intervals. Although, some medical practitioners are aware of the methods, they may not know the functionalities and administration of these methods. Women have different body systems, therefore, there is need for the understanding of which of the family planning methods would be proper per woman. Training and re-training are, therefore, paramount because of the constant improvements in innovations and technologies on the availability and usages of the family planning methods.

- The different states and geopolitical zones in Nigeria have different population characteristics. They also have different levels of unmet need and family planning need, as well as fertility rates disparities. Policies and actions must be state-specific as different states need different approaches.

**CONCLUSION**

For Nigeria to be at the forefront of development and progress, there is the need for fertility. Unequal access to, and utilization of family planning services will not only negatively impact development, but can also lead to widespread inequality within the country (Olaniyan et al., 2016). This is because regions and states with low fertility levels can have head start in development and grow more rapidly than states with high fertility rates. Investment in family planning is therefore necessary in order to ensure that there is a reduction in the unmet need for family planning in the country. States with high fertility rates and high rates of unmet need are to be given more attention in order to change their demographic structure. Investments in family planning does not only reduce fertility rate, it further improves the overall health status of the country at large. It also improves the quality of children through a quality-quantity tradeoff for human capital. Once human capital is improved the prospect of harnessing demographic dividend is assured.

**REFERENCES**


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