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Research Article

Awareness and Utilisation of Intrauterine Devices among Married Female Civil Servants in Onitsha North, Anambra State

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About Article

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ABSTRACT

This study examined awareness and utilisation of intrauterine devices among married female civil servants in Onitsha North Local Government Area, Anambra State, Nigeria. Specifically, the study sought to determine the level of awareness of intrauterine devices, assess the extent of utilisation, and identify factors influencing utilisation among the respondents. The study was anchored on the Diffusion of Innovation theory, which explains how new ideas and health practices spread within a social system. A descriptive survey design was adopted. The population comprised 220 married female civil servants and a census approach was used. A total of 220 copies of the questionnaire were distributed, 214 were retrieved and found usable for analysis. Data were analysed using frequency counts and percentages. Findings revealed varying levels of awareness among respondents, with a considerable proportion indicating relatively high awareness though differences in depth of knowledge existed. Utilisation levels also varied, suggesting that awareness may not necessarily translate into consistent utilisation. Informational factors, interpersonal influences, perceived health concerns, socio cultural considerations, and access to health services appeared relevant in shaping utilisation patterns. The study concludes that awareness exists but varies, while utilisation is influenced by multiple contextual factors. It recommends sustained health education, strengthened counselling services, culturally sensitive communication strategies, and improved access to reproductive health services.

1.0 INTRODUCTION

Family planning remains a critical component of reproductive health and national development, particularly in low and middle income countries where rapid population growth continues to exert pressure on social and economic systems. Access to effective contraceptive methods enables women and couples to make informed decisions about the timing and spacing of births, thereby improving maternal and child health outcomes and contributing to overall societal wellbeing. Among modern contraceptive methods, intrauterine devices are recognised globally as one of the most effective, safe, and cost efficient long acting reversible contraceptives available to women (World Health Organization, 2022).

Intrauterine devices offer several advantages, including long term protection against unintended pregnancy, minimal user dependence, rapid return to fertility upon removal, and suitability for women who may not tolerate hormonal methods. Despite these benefits, utilisation rates of intrauterine devices remain comparatively low in many parts of sub Saharan Africa, including Nigeria. Existing literature suggests that limited awareness, persistent misconceptions, fear of side effects, cultural beliefs, and inadequate counselling by health professionals contribute significantly to the low uptake of this method (Adeyemi et al., 2018; Bongaarts & Bruce, 2019).

Nigeria continues to experience a high fertility rate alongside a relatively low modern contraceptive prevalence rate, particularly among married women. Although awareness of family planning methods has improved over the years, utilisation does not always correspond with knowledge levels. This gap between awareness and actual use underscores the influence of socio cultural, informational, and institutional factors on contraceptive behaviour. Married women, especially those in formal employment such as civil service, occupy a unique position as they are more likely to be educated, economically active, and exposed to health information. However, these attributes do not automatically translate into optimal utilisation of long acting contraceptive methods such as intrauterine devices.

In Onitsha North Local Government Area of Anambra State, rapid urbanisation, changing family structures, and increased participation of women in paid employment have heightened the relevance of effective family planning practices. Married female civil servants often balance professional responsibilities with domestic and reproductive roles, making reliable and low maintenance contraceptive options particularly important. Understanding their level of awareness and utilisation of intrauterine devices is therefore essential for identifying gaps in reproductive health communication and service delivery within this population.

This study is anchored on the premise that awareness alone is insufficient to guarantee utilisation of contraceptive methods. Rather, the quality of information, perception of safety, accessibility of services, and influence of social norms play crucial roles in shaping reproductive health decisions. By examining awareness and utilisation of intrauterine devices among married female civil servants in Onitsha North Local Government Area, this study seeks to contribute empirical evidence that can inform targeted health

communication strategies and policy interventions aimed at improving contraceptive uptake and reproductive health outcomes.

1.2 Statement of the Problem

Despite global recognition of intrauterine devices as one of the most effective and reliable modern contraceptive methods, their utilisation among married women in Nigeria remains persistently low. National reproductive health reports indicate that although awareness of family planning methods has improved over time, the uptake of long acting reversible contraceptives, particularly intrauterine devices, continues to lag behind short term methods such as injectables and oral pills (National Population Commission & ICF, 2019). This disparity suggests the existence of underlying barriers that extend beyond mere knowledge of contraceptive options.

In Nigeria, misconceptions surrounding intrauterine devices, including fears of infertility, infection, discomfort during sexual intercourse, and interference with normal reproductive functions, remain widespread. These misconceptions are often reinforced by inadequate health communication, limited counselling by healthcare providers, and the circulation of unverified information through informal social networks. Consequently, many married women who may benefit most from the long term protection offered by intrauterine devices either avoid the method entirely or discontinue its use prematurely (Adelekan et al., 2020).

Married female civil servants represent a critical demographic in reproductive health research due to their relatively higher educational attainment, economic stability, and exposure to institutional health information. However, evidence suggests that even among this group, utilisation of intrauterine devices is not commensurate with their level of awareness or access to health services. Professional demands, concerns about side effects affecting work productivity, spousal influence, and prevailing socio cultural expectations regarding fertility may further complicate contraceptive decision making within this population (Ajayi et al., 2018).

In Onitsha North Local Government Area of Anambra State, increasing urbanisation and the growing participation of women in formal employment have intensified the need for effective and convenient family planning methods. Yet, there is a noticeable paucity of empirical data focusing specifically on the awareness and utilisation of intrauterine devices among married female civil servants in this locality. The absence of context specific evidence limits the ability of health authorities, policymakers, and communication practitioners to design targeted interventions that address the unique informational and perceptual challenges faced by this group.

Therefore, the problem this study addresses, is the apparent gap between awareness and actual utilisation of intrauterine devices among married female civil servants in Onitsha North Local Government Area. Without a clear understanding of the level of awareness, patterns of use, and factors influencing utilisation, efforts aimed at improving contraceptive uptake and reproductive health outcomes may remain ineffective. This study seeks to bridge this gap by providing empirical insights that can support evidence based health

communication strategies and family planning programmes.

2.0 OBJECTIVES OF THE STUDY

The main objective of the study is the awareness and utilisation of Intrauterine devices among married female civil servants in Onitsha North, Anambra State. However, Specific Objectives are to:

1. determine the level of awareness of intrauterine devices among married female civil servants in Onitsha North Local Government Area.
2. assess the extent of utilisation of intrauterine devices among married female civil servants in Onitsha North Local Government Area.
3. identify factors influencing the utilisation of intrauterine devices among married female civil servants in Onitsha North Local Government Area.
4. identify the sources of information on intrauterine devices among married female civil servants in Onitsha North Local Government Area.

3.0 THEORETICAL FRAMEWORK

This study is grounded in Diffusion of Innovations Theory, which explains how new ideas, practices, and technologies are communicated through social systems over time and subsequently adopted or rejected by individuals. The theory was developed by Rogers and has been widely applied in health communication research to explain patterns of awareness, acceptance, and utilisation of health innovations, including contraceptive technologies (Rogers, 2003). Diffusion of Innovations Theory posits that the adoption of an innovation is influenced by the manner in which information about it is communicated, the characteristics of the innovation itself, and the social context within which potential adopters operate. In the context of this study, intrauterine devices are conceptualised as health innovations whose utilisation depends not only on awareness but also on perceptions formed through interpersonal communication, institutional messaging, and cultural norms.

According to the theory, awareness represents the initial stage of the innovation decision process. At this stage, individuals become exposed to information about intrauterine devices through health facilities, media messages, peer interactions, and workplace discussions. However, awareness alone does not guarantee utilisation, as individuals must progress through stages of persuasion, decision, and implementation before adoption occurs. This progression is particularly relevant in examining married female civil servants, who may have access to information yet remain hesitant to utilise intrauterine devices due to competing influences. The perceived attributes of the innovation significantly shape adoption decisions. Relative advantage refers to the degree to which intrauterine devices are perceived as better than alternative contraceptive methods. Compatibility reflects the extent to which intrauterine devices align with users' values, reproductive intentions, marital expectations, and work schedules. Complexity relates to perceptions of difficulty associated with insertion, use, or removal, while trialability and observability influence willingness to adopt based on opportunities to observe or discuss experiences with others. The social system within which diffusion occurs also plays a critical role. Married female civil servants

operate within interconnected systems comprising the workplace, family structures, healthcare institutions, and broader socio cultural environments. Interpersonal networks, spousal influence, professional peer groups, and healthcare providers serve as important communication channels that can either facilitate or hinder the utilisation of intrauterine devices. The theory recognises that adoption decisions are often socially negotiated rather than purely individual.

Diffusion of Innovations Theory is relevant to this study because it provides a theoretical basis for understanding the observed gap between awareness and utilisation of intrauterine devices. By applying this framework, the study is able to examine how communication processes, social influence, and perceived attributes of intrauterine devices shape utilisation among married female civil servants in Onitsha North Local Government Area. The theory therefore offers a useful lens for analysing reproductive health communication and identifying strategies for improving the uptake of effective contraceptive methods.

4.0 LITERATURE REVIEW

4.1 Concept of Intrauterine Devices

Intrauterine devices are modern contraceptive technologies designed for long term pregnancy prevention through placement within the uterine cavity. They are classified as long acting reversible contraceptives due to their extended duration of effectiveness and the rapid return to fertility following removal. Intrauterine devices are medically recognised as one of the most reliable contraceptive methods, with efficacy rates exceeding 99 percent when correctly inserted and maintained (World Health Organization, 2022). There are two major types of intrauterine devices in contemporary use, copper bearing intrauterine devices and hormonal intrauterine devices. Copper bearing devices function primarily by releasing copper ions, which create a hostile uterine environment for sperm, thereby preventing fertilisation. Hormonal intrauterine devices release progestin, which thickens cervical mucus, inhibits sperm motility, and alters the endometrial lining to prevent implantation. Both types are approved for use among married women of reproductive age, subject to medical eligibility criteria (Cleland et al., 2019).

One of the defining characteristics of intrauterine devices is their minimal dependence on user compliance. Unlike oral contraceptives or injectables, intrauterine devices do not require daily, weekly, or monthly action from the user. This feature makes them particularly suitable for women engaged in demanding professional roles, such as civil servants, who may prefer contraceptive methods that do not interfere with daily routines. Additionally, intrauterine devices are cost effective over time, as a single insertion provides protection for several years, depending on the type used. Despite their clinical advantages, intrauterine devices have historically been surrounded by misconceptions, particularly in developing countries. Concerns regarding pain during insertion, risk of infection, infertility, and interference with sexual activity have contributed to negative perceptions among potential users. However, empirical evidence demonstrates that serious complications associated with intrauterine devices are rare

when insertion is performed by trained health professionals under appropriate conditions (Hubacher & Spector, 2020). The persistence of misconceptions is therefore largely attributable to inadequate reproductive health communication rather than medical risk.

In the Nigerian context, awareness of intrauterine devices exists but is often characterised by incomplete or inaccurate information. Studies indicate that many women are familiar with the name of the method but lack adequate understanding of its mechanism of action, duration, reversibility, and safety profile. This knowledge gap has significant implications for utilisation, as uncertainty and fear tend to discourage adoption even among educated and economically active women (Adeyemi et al., 2018). Conceptually, intrauterine devices represent not only a medical intervention but also a communication dependent health innovation. Their acceptance and utilisation are shaped by the quality of information disseminated through healthcare providers, media platforms, peer networks, and spousal communication. Understanding the concept of intrauterine devices within this broader informational and social context is essential for analysing awareness and utilisation patterns among married female civil servants in Onitsha North Local Government Area.

4.1.1 Awareness of Intrauterine Devices among Married Women

Awareness of contraceptive methods is a fundamental determinant of reproductive health behaviour, as it represents the initial stage in the adoption process of any family planning intervention. Among married women, awareness is particularly significant because decisions regarding contraceptive use are often influenced by spousal discussions, social norms, and reproductive intentions. Intrauterine devices, as long acting reversible contraceptives, require adequate knowledge for effective uptake, yet evidence suggests that awareness levels among married women are uneven and often superficial (Adeyemi, Olugbenga Bello, & Adeoye, 2018). Studies in Nigeria indicate that while general knowledge of modern contraceptives is relatively widespread, specific understanding of intrauterine devices remains limited. For instance, Adeyemi et al. (2018) reported that although a majority of women had heard of intrauterine devices, fewer understood their mechanism of action, duration of efficacy, potential side effects, and conditions for safe use. This gap in knowledge contributes to hesitation or outright avoidance, even among women who are otherwise receptive to family planning.

Education and socioeconomic status have been consistently linked to awareness (Ezeaka, et. al, 2025;. Married women with higher educational attainment or formal employment are more likely to encounter reproductive health information through media campaigns, workplace health initiatives, and interactions with healthcare professionals. However, the depth of understanding varies, and misconceptions persist. Common myths include fears that intrauterine devices cause infertility, infections, or interfere with sexual intercourse. Such misconceptions often outweigh factual information, demonstrating that mere exposure to the term “intrauterine device” does not necessarily equate to informed awareness (Ajaero, Odimegwu, Ajaero, & Nwachukwu, 2021). Furthermore, interpersonal communication plays a

significant role in shaping awareness (Ezeoke, et.al, 2020; Ezeaka, 2024). Peer networks, spousal influence, and advice from healthcare providers can either enhance or diminish comprehension. Studies have shown that women are more likely to consider using an intrauterine device if they receive positive reinforcement from peers who have used the method successfully or from trusted health professionals who provide detailed explanations about its benefits and potential side effects (Ajayi, Adeniyi, & Akpan, 2018).

In urban settings, such as Onitsha North Local Government Area, increased access to media and healthcare services has improved exposure to contraceptive information. Nevertheless, awareness alone does not guarantee utilisation, particularly when cultural beliefs, fears, or inadequate counselling persist. The available literature suggests that enhancing awareness must go beyond superficial knowledge and include interventions that clarify misconceptions, emphasise benefits, and provide accessible, reliable information about intrauterine devices. Awareness among married women is a prerequisite for adoption of intrauterine devices, but it is insufficient when not accompanied by accurate knowledge, supportive social networks, and effective communication strategies. Understanding the extent and depth of awareness is therefore critical for informing health communication and reproductive health interventions targeted at married female civil servants in Onitsha North Local Government Area.

4.1.2 Knowledge and Practices of Intrauterine Device Use among Married Female Civil Servants in Onitsha

Married female civil servants represent a population with potential exposure to reproductive health information through formal education, workplace health programmes, media, and healthcare services. Literature suggests that formal education and employment may influence access to information on contraceptive methods, including intrauterine devices (Ajayi, Adeniyi, & Akpan, 2018). Studies conducted in Southeastern Nigeria indicate that general awareness of contraceptive methods among married women is relatively high. However, knowledge specific to intrauterine devices, including their mechanism of action, duration of effectiveness, and safety, is reported to vary across different populations (Adeyemi, Olugbenga Bello, & Adeoye, 2018). Information about intrauterine devices is obtained from multiple sources, including healthcare providers, media campaigns, and social networks, though misconceptions regarding side effects and reproductive consequences have been documented.

Research also identifies socio-cultural and interpersonal factors as potential influences on the adoption of intrauterine devices. Factors such as spousal communication, cultural expectations regarding fertility, and personal perceptions of contraceptive methods have been highlighted in previous studies (Nwankwo, Eze, & Okeke, 2019). Education and employment may contribute to exposure to information, but literature indicates that these factors do not consistently predict contraceptive practices. Communication within professional and social networks has been noted as a factor that may shape knowledge and perceptions of intrauterine devices. Discussions with colleagues, spouses, and healthcare providers have been reported as sources of information and

clarification regarding contraceptive methods (Umeora, Egwuatu, & Onah, 2020).

Several studies further indicate that occupational context may influence considerations regarding contraceptive use. Long acting reversible methods, such as intrauterine devices, are discussed in the literature as being suitable for populations balancing professional and domestic responsibilities. Reported concerns in some studies include procedure-related discomfort, potential side effects, and access to follow-up support (Ajayi et al., 2018). Overall, existing literature provides information on knowledge and practices regarding intrauterine devices among married women in urban Nigerian contexts. These studies highlight potential factors influencing awareness and utilisation, but evidence specific to married female civil servants in Onitsha remains limited. This gap underscores the need for empirical research within the population to examine patterns of knowledge, attitudes, and practices.

5.0 METHODOLOGY

The study adopted a descriptive survey design to examine the awareness and utilisation of intrauterine devices among married female civil servants in Onitsha North Local Government Area. This design is appropriate for collecting data on the current state of knowledge, perceptions, and practices within a defined population (Creswell & Creswell, 2018). The population of this study consists of 220 married female civil servants working in ministries, departments, and government agencies within Onitsha North Local Government Area, Anambra State, Nigeria, as indicated in official administrative records. Because the population was considered manageable, a census approach was adopted, and copies of the questionnaire were distributed to all 220 eligible respondents.

Out of the 220 copies of the questionnaire administered, 214 were retrieved and found usable, representing a high response rate. Consequently, data analysis for the study was based on the 214 valid responses obtained from the respondents. This high retrieval rate enhances the reliability of the findings and supports adequate representation of the target population in assessing awareness and utilisation of intrauterine devices among the respondents. Data were collected using a structured questionnaire developed for the study. Collected data were analysed using descriptive statistics, including frequency counts, percentages, and mean scores. This approach facilitates summarising respondents' levels of awareness, patterns of utilisation, and factors influencing the use of intrauterine devices.

5.1 Answers to Research Questions

Research Question One: Level of Awareness of Intrauterine Devices among Married Female Civil Servants in Onitsha North Local Government Area, Anambra State, Nigeria.

This research question examined respondents' level of awareness of intrauterine devices using scaled response categories ranging from very high awareness to very low awareness. Analysis was based on the 214 copies of questionnaire retrieved and found usable from the total population studied.

Table 1: Level of Awareness of Intrauterine Devices

Level of Awareness	Frequency	Percentage(%)
Very High	58	27.1
High	72	33.6
Moderate	46	21.5
Low	24	11.2
Not aware	14	6.5
Total	214	100

Field Survey, 2025

The results indicate varying levels of awareness of intrauterine devices among the respondents. A combined proportion of 60.7% reported high or very high awareness, suggesting substantial exposure to information on intrauterine devices among married female civil servants in the study area. Moderate awareness accounted for 21.5%, while 17.7% reported low or very low awareness. These findings suggest that awareness of intrauterine devices exists among the respondents, although the degree of awareness differs. Further analysis is required to establish how this level of awareness relates to utilisation and other relevant factors examined in subsequent research questions.

Research Question Two: Extent of Utilisation of Intrauterine Devices among Married Female Civil Servants in Onitsha North Local Government Area, Anambra State, Nigeria. This research question examined the extent to which respondents reported utilisation of intrauterine devices using scaled response categories ranging from very high utilisation to very low utilisation.

Table 2: Extent of Utilisation of Intrauterine Devices

Level of Utilisation	Frequency	Percentage(%)
Very High	40	18.7
High	55	25.7
Moderate	48	22.4
Low	42	19.6
Not aware	29	13.6
Total	214	100

Field Survey, 2025

The table shows that 40 respondents (18.7%) reported very high utilisation of intrauterine devices, while 55 respondents (25.7%) indicated high utilisation. Together, this represents 95 respondents (44.4%) with relatively high utilisation levels. Furthermore, 48 respondents (22.4%) reported moderate utilisation. In contrast, 42 respondents (19.6%) indicated low utilisation, and 29 respondents (13.6%) reported having no

knowledge of utilisation, giving a combined 71 respondents (33.2%) with low levels of utilisation. These results indicate variation in the extent of intrauterine device utilisation among married female civil servants in the study area. The pattern suggests that while some respondents report notable utilisation, others indicate limited use, thereby warranting further examination of factors associated with utilisation.

Research Question Three: Factors Influencing Utilisation of Intrauterine Devices among Married Female Civil Servants in Onitsha North Local Government Area, Anambra State, Nigeria

This research question examined factors that may influence the utilisation of intrauterine devices among respondents. Analysis was based on the 214 questionnaires retrieved and found usable.

Table 3: Factors Influencing Utilisation of Intrauterine Devices

Influencing Factor	Frequency	Percentage(%)
Knowledge and Information level	56	26.2
Spousal support	48	22.4
Perceived health concerns	40	18.7
Cultural or religious considerations	36	16.8
Access to health services	34	5.9
Total	214	100

Field Survey, 2025

The results indicate that several factors are associated with the utilisation of intrauterine devices among the respondents. Knowledge and information level accounted for 56 respondents (26.2%), suggesting that awareness and understanding may play an important role in utilisation decisions. Spousal support was reported by 48 respondents (22.4%), indicating the relevance of interpersonal dynamics in reproductive health choices. Perceived health concerns were identified by 40 respondents (18.7%), while 36 respondents (16.8%) indicated cultural or religious considerations. Access to health services accounted for 34 respondents (15.9%), reflecting the possible role of availability and accessibility of family planning services.

Overall, the findings suggest that utilisation of intrauterine devices among married female civil servants in the study area may be influenced by informational, interpersonal, socio cultural, and service related factors. Further interpretation should be made cautiously pending broader contextual analysis and comparison with related empirical studies.

Research Question Four: What are the sources of information on intrauterine devices among married female civil servants in Onitsha North Local Government Area?

This research question examined the sources through which respondents obtained information about intrauterine devices. Analysis was based on the 214 questionnaires retrieved and found usable.

Table 4: Sources of Information on Intrauterine Devices

Sources of Information	Frequency	Percentage(%)
Healthcare providers	62	29.0
Mass Media	48	22.4
Friends and colleagues	40	18.7
Social media platforms	36	16.8
Family members and relatives	28	13.1
Total	214	100

Source: Field Survey, 2025

The results indicate that healthcare providers constituted the major source of information on intrauterine devices, as reported by 62 respondents (29.0%). This was followed by mass media, which accounted for 48 respondents (22.4%). Friends and colleagues were identified by 40 respondents (18.7%), while social media platforms were reported by 36 respondents (16.8%). Family members and relatives constituted the least reported source, accounting for 28 respondents (13.1%). The findings suggest that respondents obtained information on intrauterine devices from diverse communication channels, with healthcare providers and mass media accounting for a substantial proportion of information sources. This pattern reflects the role of both interpersonal and mass communication channels in the dissemination of reproductive health information among married female civil servants in the study area.

5.2 Discussion of Findings

This section discusses the major findings of the study on awareness and utilisation of intrauterine devices among married female civil servants in Onitsha North Local Government Area, Anambra State, in relation to the Diffusion of Innovation Theory and existing empirical literature. The findings revealed varying levels of awareness of intrauterine devices among the respondents, with a considerable proportion reporting high and very high awareness. This finding supports the assumptions of the Diffusion of Innovation Theory developed by Everett Rogers, which posits that awareness constitutes the first stage in the adoption process of an innovation. According to the theory, individuals must first become aware of an innovation before progressing to subsequent stages of interest, evaluation, trial, and adoption. The relatively high awareness recorded in this study suggests that information regarding intrauterine devices

has diffused to a significant proportion of married female civil servants through various communication channels. This finding is consistent with Adeyemi, Olugbenga Bello, and Adeoye (2018), who reported that awareness of modern contraceptive methods was relatively widespread among women in Nigeria, although levels of detailed knowledge differed.

The study further found variations in the extent of utilisation of intrauterine devices among the respondents. While some respondents reported high utilisation, others indicated moderate or low utilisation. This finding also aligns with the Diffusion of Innovation Theory, which explains that awareness of an innovation does not automatically lead to its adoption. Rogers argues that individuals often evaluate innovations based on perceived advantages, compatibility with existing values, complexity, trialability, and observability before deciding whether to adopt them. The variation in utilisation observed in this study may therefore reflect differences in how respondents perceive intrauterine devices and the benefits associated with their use. This finding corroborates Ajayi, Adeniyi, and Akpan (2018), who observed that awareness of contraceptive methods does not necessarily translate into utilisation among women of reproductive age in Nigeria.

The findings also revealed that factors such as knowledge level, spousal support, perceived health concerns, cultural or religious considerations, and access to healthcare services influenced utilisation of intrauterine devices. These factors are consistent with the propositions of the Diffusion of Innovation Theory, which recognises that adoption decisions are influenced by both individual and social system characteristics. Rogers maintains that interpersonal relationships and social structures play important roles in determining whether an innovation is accepted or rejected. The influence of spousal support identified in this study is in agreement with Nwankwo, Eze, and Okeke (2019), who found that family and partner approval significantly affected contraceptive adoption among married women. Similarly, the influence of perceived health concerns and socio cultural considerations supports the observations of Umeora, Egwuatu, and Onah (2020), who reported that social and cultural factors shape attitudes towards contraceptive use in Southeastern Nigeria.

The study further found that respondents obtained information on intrauterine devices from healthcare providers, mass media, friends and colleagues, social media platforms, and family members. This finding strongly supports the Diffusion of Innovation Theory, which identifies communication channels as central to the diffusion process. Rogers explains that both mass media channels and interpersonal channels facilitate the spread of information about innovations within a social system. The prominence of healthcare providers and mass media as information sources in this study suggests that these channels play important roles in creating awareness and disseminating information on intrauterine devices among married female civil servants. This finding is consistent with previous studies which identified healthcare professionals and media platforms as major sources of reproductive health information among women.

Overall, the findings of this study support the central assumptions of the Diffusion of

Innovation Theory that awareness, communication channels, social influences, and individual perceptions are important elements in the adoption of innovations. The findings suggest that although awareness of intrauterine devices exists among married female civil servants in Onitsha North Local Government Area, utilisation may be influenced by multiple factors operating within the respondents' social and cultural environment.

6.0 CONCLUSION

This study examined awareness and utilisation of intrauterine devices among married female civil servants in Onitsha North Local Government Area, Anambra State, Nigeria. The findings indicate varying levels of awareness and utilisation among respondents, suggesting that exposure to information does not always correspond with consistent utilisation. The results further imply that informational, interpersonal, socio cultural, and service related factors may influence utilisation patterns. Overall, the study provides insight into awareness and utilisation trends while highlighting the need for further investigation into factors shaping reproductive health decisions.

7.0 RECOMMENDATIONS

Based on the findings of this study conducted among married female civil servants in Onitsha North Local Government Area, Anambra State, Nigeria, the following recommendations are proposed:

1. Health education programmes should be strengthened to provide accurate and comprehensive information on intrauterine devices, particularly within workplace settings.
2. Healthcare providers should intensify counselling services to address concerns, misconceptions, and informational gaps relating to intrauterine device utilisation.
3. Awareness campaigns should adopt culturally sensitive communication approaches that recognise social and interpersonal influences on reproductive health decisions.
4. Access to family planning services should be enhanced through improved availability of trained personnel, accessible clinics, and supportive workplace health initiatives.

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