ABSTRACT

FACTORS ASSOCIATED WITH REPRODUCTIVE BEHAVIOUR OF LOW INCOME MOTHERS IN KIANDUTU SLUM IN THIKA DISTRICT, KENYA

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The low income mothers are characterized by limited education, chronic low incomes, recurring health problems, unreliable employment yet they tend to have large family size. Hence there was a need for a research concerning aspects related to their reproductive behaviour where crucial gaps still seem to exist. Thus the purpose of this study was to investigate selected factors associated with reproductive behaviour of low income mothers in Kiandutu slum in Thika district, Kenya. The study was guided by the following objectives: to assess the influence of low income mother’s demographic characteristics on their reproductive behaviour; to investigate the influence of low income mother’s contraceptive knowledge on their reproductive behaviour; to examine the influence of contraceptive use on reproductive behaviour of low income mothers; to establish the influence of low income mother’s attitude towards contraceptives on their reproductive behaviour and to analyze the relationship between low income mother’s decision-making patterns and their reproductive behaviour. The study was based on the safe motherhood theoretical framework by McCarthy and Main. A conceptual framework was used which outlined the contextual, intermediate and proximate causes that determine the reproductive behaviour of low income mothers. The study employed a descriptive survey research design and used a sample size of 120 respondents (mothers) to provide the required data through the use of interview schedule guides. Both qualitative and quantitative data analyses were used. Chi-square results revealed that some of the mother’s demographic characteristics, that is, education (p=0.000), occupation (p=0.037), income levels (p=0.040) and religion affiliation (p=0.007) had a significant relationship with reproductive behaviour of low income mothers. Moreover attitude towards contraceptives (p=0.000) was found to have a significant relationship with reproductive behaviour. However knowledge on contraceptive, use of contraceptives and mother’s decision-making patterns did not have significant relationship with reproductive behaviour of low income mothers. In conclusion, it was noted that mother’s reproductive behaviour in the study location was influenced by education, occupation, income levels, religion affiliation and attitude towards contraceptives. The study recommended that women and teenage girls should be educated on their reproductive health by health practitioners as majority of the slum respondents were found to drop out of school at the primary level. Religious leaders within the slum should address the issue of reproduction health behaviour with the emphasis on plight of children. Men should be sensitized on contraceptives and allow their partners on matters dealing with sexuality and number of children a couple should have. The non-governmental organizations such as Family Options, Kenya through local women self-help groups should provide free contraceptives to the slum women as the majority of them are the poorest of the poor earning below Kshs.1000 per month. This will enable them to space and limit births. Health workers and family planning designers and implementers from Thika Family Planning Clinic should address misconceptions that result in negative attitude towards contraceptives. It is hoped that this recommendations will enable the low income mothers to delay age at first birth, age at first marriage and space and limit births so that they can be able to have children they are able to care for.