

Maternal Health Practices and Beliefs Among Married Female Students in Colleges of Education in Anambra State, Nigeria

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Abstract

This study examines the maternal health practices and beliefs among married female students in colleges of education in Anambra state, Nigeria. The study employed a descriptive survey design, and data were collected using a self-created questionnaire distributed electronically via email and social media channels. A total of 180 married female students from colleges of education in Anambra state participated in the study. The questionnaire consisted of three clusters: personal details, knowledge about maternal health practices, and maternal health beliefs. The data were analyzed using descriptive statistics, bivariate correlational analyses, and Pearson product moment correlations. The findings revealed that the majority of married female students in colleges of education practiced positive maternal health behaviors such as receiving antenatal care and planning to deliver in a health facility. They also held strong beliefs regarding the benefits of antenatal care for both the mother and child. However, there were some misconceptions, such as the belief that eating more food is necessary when pregnant. The study identified several factors influencing maternal health practices and beliefs, including educational level, marital status, and access to information. It also highlighted the importance of educational interventions to improve knowledge and promote healthy maternal behaviors among married female students. The results of this study have important educational implications for colleges of education in Anambra state. There is a need for targeted educational programs and interventions that address misconceptions and promote evidence-based maternal health practices among married female students. These programs should focus on improving knowledge, fostering positive attitudes, and enhancing access to healthcare services. By addressing these factors, colleges of education can contribute to the overall well-being of their students and future mothers, ultimately leading to improved maternal and child health outcomes in Anambra state, Nigeria.

Keywords

maternal health practices;
maternal health beliefs;
married female students;
colleges of education;
Anambra state; Nigeria
outcomes



I. Introduction

Maternal health is a critical aspect of public health, with significant implications for the well-being of women and their children. The health practices and beliefs of women during pregnancy and childbirth play a crucial role in determining maternal and infant health outcomes. In Nigeria, maternal mortality rates remain high, and addressing the factors that influence maternal health practices and beliefs is essential for improving

maternal and child health. An important demographic group to consider in the context of maternal health is married female students in colleges of education. These young women represent a unique population as they are simultaneously engaged in pursuing their education and starting a family. Their beliefs and practices regarding maternal health can have a lasting impact not only on their own health but also on the health of their children and future generations (Felisian, Mushy, Tarimo, & Kibusi, 2023).

Nigeria continues to face significant challenges in maternal health, with a high burden of maternal mortality and morbidity. According to the World Health Organization (WHO), Nigeria accounts for one-fifth of global maternal deaths, with an estimated maternal mortality ratio of 512 deaths per 100,000 live births (World Health Organization, 2019). These alarming statistics call for urgent attention to the factors that influence maternal health practices and beliefs in the country. Maternal health practices encompass a wide range of behaviors and actions that contribute to ensuring a safe and healthy pregnancy, childbirth, and postpartum period. These practices include seeking antenatal care, receiving immunizations, adopting proper nutrition, attending skilled birth attendance, and practicing appropriate postnatal care (United Nations Population Fund, 2014). Beliefs, on the other hand, refer to the cognitive frameworks through which individuals understand and interpret their experiences. Maternal health beliefs can shape the attitudes, motivations, and decisions of women regarding their own health and the health of their children. These beliefs may be influenced by cultural norms, social expectations, personal experiences, and access to information and resources (Lakew, Assaye, & Bekele, 2015).

The unique context of married female students in colleges of education in Anambra State presents an opportunity to explore the intersection of education, family planning, and maternal health. These students are in a critical stage of their lives where they are pursuing higher education while also transitioning into married life and potential motherhood. Married female students in colleges of education are women who are pursuing their higher education while also being in a marital relationship (Noori & Orfan, 2021). They represent a unique demographic within the student population, balancing the demands of their academic pursuits with their responsibilities as wives and potentially as mothers (Kefale et al., 2023). These individuals often navigate multiple roles, juggling their educational aspirations, household duties, and family commitments. Their experiences and challenges may differ from unmarried female students, as they face additional pressures and responsibilities related to their marital status. Understanding the specific needs and experiences of married female students is crucial for developing targeted interventions and support systems to enhance their educational journey and overall well-being. Understanding their perspectives, practices, and beliefs regarding maternal health of this category of students in Anambra state can provide insights into the challenges they face and the opportunities for intervention.

Anambra State, located in southeastern Nigeria, is home to several colleges of education where married female students pursue their studies. Understanding the maternal health practices and beliefs among these students in Anambra State is crucial for designing effective interventions and educational programs to improve maternal and child health outcomes in the region. This study aims to explore the maternal health practices and beliefs among married female students in colleges of education in Anambra State, Nigeria. By examining their knowledge, attitudes, and behaviors related to maternal health, this study seeks to identify gaps, challenges, and opportunities for intervention. Despite efforts to improve maternal health in Nigeria, the country still has a high maternal mortality rate

(Milton et al., 2022). In Anambra State, the situation is no different, and addressing the maternal health needs of various populations, such as married female students in colleges of education, is crucial. There is a gap in the existing literature regarding the unique maternal health experiences of married female students in colleges of education. Most studies on maternal health in Nigeria have focused on the general population, neglecting the specific challenges faced by this particular group. Therefore, the problem is the lack of empirical evidence and understanding regarding the maternal health practices and beliefs of married female students in colleges of education in Anambra State. The impact of marriage on their maternal health practices and beliefs remains understudied. It is essential to explore how being married while pursuing higher education influences their health-seeking behaviors, decision-making processes, and beliefs about maternal health. Thus, the problem is the need to understand the specific influence of marital status on the maternal health practices and beliefs of married female students in colleges of education.

The findings from this research can inform the development of targeted health education programs and policies that promote positive maternal health practices among this specific population. The study on maternal health practices and beliefs among married female students in colleges of education in Anambra State, Nigeria holds significant importance. Firstly, it provides valuable insights into the knowledge gaps, misconceptions, and prevailing beliefs regarding maternal health among this specific population. Understanding these factors is crucial for designing targeted health education programs and interventions to improve maternal and child health outcomes. Secondly, the study highlights the role of educational institutions in promoting positive health behaviors and empowering future teachers to become advocates for maternal health. By addressing these issues, the study contributes to the overall goal of reducing maternal and infant mortality rates and improving the well-being of families and communities in Anambra State.

Purpose of the Study

The general purpose of the study is to examine maternal health practices and beliefs among married female students in colleges of education in Anambra state. Specifically, the study seeks to ascertain the:

1. maternal health practices among married female Students in colleges of education in Anambra state
2. maternal health beliefs among married female Students in colleges of education in Anambra state

II. Research Methods

2.1 Research Questions

The investigation was based on the following research question.

1. What are the maternal health practices among married female Students in colleges of education in Anambra state?
2. What are the maternal health beliefs among married female Students in colleges of education in Anambra state?

2.2 Research hypothesis

One hypothesis tested at 0.05 level of significance was formulated to guide the conduct of the study.

H01: There is no significant correlation between the maternal health practices and beliefs among married female students in colleges of education in Anambra state

2.3 Methods

The research design for the study was a descriptive survey. The survey technique was used to do this, and the questionnaire was used to obtain the quantitative data. Surveys are very valuable in the fields of social and behavioral science, as well as other fields that examine human behavior, hence they were thought to be the most appropriate method for this study. The study was carried out among married female students in colleges of education in Anambra state, Nigeria. Anambra State, located in southeastern Nigeria, is home to two colleges of education which includes Nwafor Orizu College of Education, Nsugbe, Anambra East Local Government Area, this college offers programs in areas such as Early Childhood Care Education, Primary Education, and Adult and Non-Formal Education. Federal College of Education (Technical), Umunze, Orumba South Local Government Area, this college focuses on technical and vocational teacher education. It offers programs in subjects such as Agricultural Education, Business Education, and Home Economics Education. The sample size of the study was made up of 180 married female students. The sample size was determined through the use of a simple random sampling technique, which involves randomly selecting participants from a population. This method ensures that every individual in the population has an equal chance of being chosen.

To collect data, a self-created cross-sectional survey questionnaire was employed, consisting of three clusters and twenty items. The questionnaire was distributed electronically via email and social media channels, utilizing Google form as a cost-effective means to reach respondents from various locations. The objectives of the study, which revolve around maternal health practices and beliefs among married female students, were carefully addressed by the questionnaire. Respondents provided their perceptions by responding to statements and selecting answers on a 4-point Likert scale. To ensure the validity of the survey, the questionnaire underwent face validation by three experts, who provided feedback for necessary corrections. The internal reliability of the instrument was assessed using Cronbach's coefficient alpha (α). A value of 0.82 was obtained, indicating acceptable reliability for the study.

A total of one hundred and eighty respondents participated in the study. Descriptive statistics were used to describe the demographic characteristics of the participants. Bivariate correlational analyses, specifically Pearson product moment correlations, were conducted to explore the relationship between maternal health practices and beliefs among married female students. The p-value threshold of 0.05 was utilized. The data were analyzed using SPSS version 22, and the mean and standard deviation were computed. Items with mean scores of 2.5 and above were considered accepted, while those below 2.5 were considered not perceived by the respondents and were subsequently rejected. The findings were interpreted based on the data analysis, and conclusions were drawn from the results

III. Results and Discussion

3.1 Respondents characteristics

Table 1 demonstrates that a sample of 180 female students in colleges of education in Anambra state, Nigeria completed the questionnaire. 180 students completed the questionnaire, with 60 of them being male (33.33% of the sample), and 120 being female (67% of the sample). Out of the 180 respondents, 83% of the sample were between the age of 18-30 years, 11% of the sample were between the age of 31-40 years, 6% of the sample were between the age of 41 - up years. Out of the 180 respondents, 1% of the sample were in Year 1, 4% of the sample were in Year 2, 15% of the sample were in Year 3, 80% of the sample were in Year 4. Out of the 180 respondents, 0% of the sample has no children yet, 94% of the sample had 3 or a smaller number of children, 6% of the sample had 3 and above number of children.

Table 1. Distribution of Study Sample Variables

Variable		Frequency	Percentage
Gender	Male	60	33%
	Female	120	67%
	Total	180	100%
Age (years)	18-30	150	83%
	31-40	20	11%
	41 - up	10	6%
	Total	180	100%
Year of study	Year 1	2	1%
	Year 2	8	4%
	Year 3	27	15%
	Year 4	143	80%
	Total	180	100%
Number of children	None	0	0%
	3 and less	169	94%
	3 and above	11	6%
	Total	180	100%

3.2 Research Question 1

What are the maternal health practices among married female Students in colleges of education in Anambra state?

Table 2. Mean and standard deviation of the maternal health practices among married female Students in colleges of education in Anambra state.

S/N	Items	SA	A	D	SD	Total	$\sum X$	Mean	Std Dev	Decision
1	Practiced the use of artificial family planning method	15	20	65	80	180	330	1.83	0.93	Rejected

2	Regular visit to health facility antenatal care attendance	85	15	45	35	180	510	2.83	1.21	Accepted
3	Planned to deliver in health facility	105	25	35	15	180	580	3.22	1.03	Accepted
4	Practiced the use of Tetanus Toxoid during pregnancy	135	20	10	15	180	635	3.53	0.93	Accepted
5	Practiced the use of intermittent preventive treatment of malaria during pregnancy	95	25	25	35	180	540	3.00	1.20	Accepted
6	Used insecticide-treated bed nets (ITNs) to reduce the morbidity and mortality associated with malaria during pregnancy	90	30	35	25	180	545	3.03	1.12	Accepted
7	Husband actively participated in maternal health care during pregnancy	30	65	15	70	180	415	2.31	1.15	Rejected
8	Prepared for the possibility of cesarean delivery	115	15	25	25	180	580	3.22	1.13	Accepted
9	Identified suitable blood donor in case of cesarean delivery	15	20	20	125	180	285	1.58	0.98	Rejected

10	Local birthing etiquette is maintained throughout labour and delivery	15	15	30	120	180	285	1.58	0.95	Rejected
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Table 2 above showed the maternal health practices among married female Students in colleges of education in Anambra state. It is surprising to observe that married female Students in colleges of education in Anambra state practiced the use of Tetanus Toxoid during pregnancy (3.53). However, the respondents accepted that planned to deliver in health facility is a maternal health practice among married female Students in colleges of education in Anambra state (3.22). Meanwhile, it was rejected that practiced the use of artificial family planning method and husband actively participated in maternal health care during pregnancy were maternal health practices among married female Students in colleges of education in Anambra state. In all, items 2, 3, 4, 5, 6 and 8 having mean scores of 2.83, 3.22, 3.53, 3.00, 3.03 and 3.22 corresponding to standard deviation of 1.21, 1.03, 0.93, 1.20, 1.12 and 1.13 were accepted respectively, while items 1, 7, 9 and 10 with mean scores of 1.83, 2.31, 1.58 and 1.58 and standard deviation of 0.93, 1.15, 0.98 and 0.95 were rejected.

3.2 Research Question 2

What are the maternal health beliefs among married female Students in colleges of education in Anambra state?

Table 3. Mean and standard deviation on maternal health beliefs among married female Students in colleges of education in Anambra state.

S/N	Items	SA	A	D	SD	Total	$\sum X$	Mean	Std Dev	Decision
11	Prenatal care is all about seeing the doctor to help the unborn baby to be healthy	15	35	40	90	180	335	1.86	1.00	Rejected
12	Increased rates of hypertension, diabetes, respiratory complications, and infections are prevalent	58	12	20	90	180	398	2.21	1.35	Rejected
13	Antenatal care provided much benefit to the mother and their child	25	40	70	45	180	405	2.25	0.98	Rejected

14	Maternal HIV infection largely has health implications for the child and should be avoided	29	35	80	36	180	417	2.32	0.97	Rejected
15	Eating more food is necessary when there is a baby in the womb.	115	11	45	9	180	592	3.29	1.00	Accepted
16	Evil spirits could cause miscarriage of the fetus, that is why I did go out for prayers	110	20	5	45	180	555	3.08	1.28	Accepted
17	It is bad to buy new clothes or make too many plans in advance for the arrival of newborn as it could bring bad luck	15	85	15	65	180	410	2.28	1.04	Rejected
18	The male partner's responsibility is generally seen in terms of financial support only	95	55	10	20	180	585	3.25	0.98	Accepted
19	Having a child should be a positive experience, as well as this behaviour representing a sign of strength	20	15	15	130	180	285	1.58	1.04	Rejected

20	Pregnancy and child birth is a dangerous time for women, with the birth leaving women's bodies very damaged, weak and soft	65	15	75	25	180	480	2.67	1.11	Accepted
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Table 3 above sought to find the maternal health beliefs among married female Students in colleges of education in Anambra state. The respondents agreed that eating more food is necessary when there is a baby in the womb. (3.29). It is obvious that the male partner's responsibility is generally seen in terms of financial support only (3.25). Pregnancy and child birth is a dangerous time for women, with the birth leaving women's bodies very damaged, weak and soft (2.67). However, it is bad to buy new clothes or make too many plans in advance for the arrival of newborn as it could bring bad luck (2.28). On the whole, items 15, 16, 18 and 20 with mean scores of 3.29, 3.08, 3.25 and 2.67 corresponding to standard deviation of 1.00, 1.28, 0.98 and 1.11 were accepted, while item 11, 12, 13, 14, 17 and 19 were rejected with mean scores of 1.86, 2.21, 2.25, 2.32, 2.28 and 1.58 and standard deviation of 1.00, 1.35, 0.98, 0.97, 1.04 and 1.04 respectively.

3.3 Research hypothesis

There is no significant correlation between the maternal health practices and beliefs among married female students in colleges of education in Anambra state

Table 4. Correlation between the maternal health practices and beliefs among married female students in colleges of education in Anambra state

		Maternal health practices	Maternal health beliefs
Maternal health practices	Pearson Correlation	1	.516
	Sig. (2-tailed)		.127
	Sum of Squares and Cross-products	4.788	1.966
	Covariance	.532	.218
Maternal health beliefs	Pearson Correlation	.516	1
	Sig. (2-tailed)	.127	
	Sum of Squares and Cross-products	1.966	3.031
	Covariance	.218	.337

In Table 4, maternal health practices and beliefs among married female students are correlated. The magnitude and direction of the linear relationship between the two variables are shown by these values. A perfect negative correlation would have a correlation coefficient of -1, a perfect positive correlation would have a correlation value

of +1, and a correlation coefficient of zero would have no correlation at all. Pearson correlation value of .516 indicates that maternal health practices and beliefs among married female students are linearly related, and as one variable increases, the other variable also increases proportionally. In this scenario, the variables move in the same direction and have a strong linear relationship (Morris, Short, Robson, & Andriatsihosena, 2014).

The Sum of Squares and Cross-products (SSCP) values for maternal health practices and maternal health beliefs provide further information about their relationship. The SSCP value for maternal health practices, which is 4.788, represents the sum of squares, indicating the variability or dispersion of the data points related to maternal health practices (Moossavi et al., 2019). A larger SSCP value suggests that there is more variability in the data, indicating that maternal health practices may vary considerably among the individuals being studied. Similarly, the SSCP value for maternal health beliefs, which is 1.966, represents the sum of squares for maternal health beliefs. This value indicates the variability or dispersion of the data points related to maternal health beliefs. A larger SSCP value suggests that there is more variability in the data, indicating that maternal health beliefs may differ significantly among the individuals being studied (Hadian et al., 2021)

IV. Discussion

Research question 1 sought to find out the maternal health practices among married female Students in colleges of education in Anambra state; the study found that married female students in colleges of education in Anambra state practiced the use of Tetanus Toxoid during pregnancy. Havers et al. (2023) upheld that the practice of using Tetanus Toxoid during pregnancy among married female students in colleges of education is an important and positive health behavior. Tetanus Toxoid is a vaccine that protects against tetanus, a potentially fatal infection that can affect both the mother and the newborn. The study also showed that married female Students in colleges of education practiced planned to deliver in health facility. Obviously, the practice of planned delivery in health facilities among married female students in colleges of education is a positive step towards ensuring safe childbirth. Reitsma et al. (2020) found that by actively making arrangements to deliver their babies in a healthcare setting, these women prioritize the well-being of both themselves and their infants. Delivering in a health facility allows access to skilled healthcare professionals, emergency care if needed, and a hygienic environment that reduces the risk of complications and infections. Also delivering in a health facility helps them to prepare for the possibility of cesarean delivery. This practice reflects the awareness and understanding of the importance of professional care during childbirth, which can significantly reduce maternal and neonatal mortality rates (Biel et al., 2020). Encouraging and supporting this practice can further contribute to improving maternal and child health outcomes and reducing avoidable birth-related complications (Tamale et al., 2022).

Research question 2 dealt with the maternal health beliefs among married female Students in colleges of education in Anambra state. Based on the analysis, the respondents agreed that eating more food is necessary when there is a baby in the womb. The belief among married female students in colleges of education that eating more food is necessary when there is a baby in the womb reflects a common misconception (Reyes, Klotz & Herring, 2013). While it is true that proper nutrition is crucial during pregnancy, simply increasing the quantity of food consumed is not always the best approach. Ferrari et al, (2013) suggested that emphasis should be on consuming a balanced and nutritious diet that

meets the increased nutritional needs of both the mother and the developing fetus. Based on the analysis, the respondents believed that the male partner's responsibility is generally seen in terms of financial support only. The belief among married female students in colleges of education that the male partner's responsibility is primarily focused on financial support reflects a traditional gender role stereotype. This belief according to Lyonette and Crompton (2015) undermines the importance of shared responsibilities and equal partnership within a relationship. It is crucial to challenge and reshape this perception by promoting a more balanced understanding of gender roles. The respondents also believed that antenatal care provided much benefit to the mother and their child. The belief among married female students in colleges of education that antenatal care provides significant benefits to both the mother and their child is well-founded. In line with this finding, Tesfay et al., (2023) believed that antenatal care is essential for monitoring and promoting the health of pregnant women and their unborn babies. Regular check-ups during pregnancy allow healthcare professionals to detect and manage any potential complications, ensuring a safe and healthy pregnancy.

V. Conclusion

In conclusion, this study shed light on the maternal health practices and beliefs among married female students in colleges of education in Anambra State, Nigeria. The findings revealed a positive trend in the utilization of important maternal health interventions such as the use of Tetanus Toxoid during pregnancy and planned delivery in health facilities. This reflects the awareness and understanding of the significance of these practices for ensuring safe childbirth and positive maternal and child health outcomes. However, there were also misconceptions observed, such as the belief that eating more food is necessary during pregnancy. This highlights the importance of targeted health education and awareness programs to address such misconceptions and promote accurate information on proper nutrition during pregnancy.

Overall, the study underscores the need for continued efforts in promoting and supporting maternal health practices among married female students in colleges of education. It emphasizes the importance of comprehensive antenatal care, education on nutrition, safe delivery practices, and debunking traditional gender role stereotypes. By empowering these women with accurate information and promoting gender equality in responsibilities, we can contribute to improved maternal and child health outcomes, ultimately leading to healthier families and communities. Further research and collaborative efforts between educational institutions, healthcare providers, and policymakers are warranted to sustain and enhance these positive maternal health practices and beliefs in Anambra State, Nigeria.

The study on maternal health practices and beliefs among married female students in colleges of education in Anambra State, Nigeria has important educational implications. Firstly, it highlights the need for targeted health education programs that address misconceptions and provide accurate information on maternal health practices. Secondly, integrating maternal health education into the curriculum of colleges of education can equip future teachers with knowledge and skills to promote positive health behaviors. Thirdly, these students can serve as role models and engage in community outreach to disseminate knowledge. Collaboration with healthcare professionals and promoting gender equality are also essential for empowering women and improving maternal health outcomes. These implications emphasize the importance of education in promoting and sustaining positive maternal health practices among married female students.

5.1 Recommendations

Based on the study on maternal health practices and beliefs among married female students in colleges of education in Anambra State, Nigeria, the following recommendations can be made. Firstly, there is a need for targeted health education programs that address misconceptions and provide accurate information on maternal health practices. These programs should be integrated into the curriculum of colleges of education. Secondly, collaboration between educational institutions and healthcare professionals should be established to provide access to expert advice and resources. Thirdly, community engagement initiatives should be developed to promote knowledge sharing and behavior change. Finally, further research is needed to explore the effectiveness of these recommendations and identify additional strategies for improving maternal health outcomes among married female students

5.2 Limitations

The study on maternal health practices and beliefs among married female students in colleges of education in Anambra State, Nigeria has certain limitations. Firstly, the study focused specifically on married female students in colleges of education, which may limit the generalizability of the findings to other populations. Secondly, the study relied on self-reported data, which may be subject to recall bias or social desirability bias. Thirdly, the study did not explore the underlying reasons behind certain beliefs or practices, which could provide deeper insights. Additionally, the study did not assess the impact of socioeconomic factors or cultural norms on maternal health practices and beliefs. These limitations should be taken into consideration when interpreting and applying the study findings.

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