Nigeria is a multi-ethnic (250), multi-lingual (521) and multi religious society. Contraceptive prevalent rate is less than 15%. About 215 million women in developing countries are estimated to have an unmet need for family planning and estimates for Nigeria at 2010 is 21.2 million with unintended pregnancies up to 760,000 induced abortions annually. Unsafe abortions account for 20%–40% of about 60,000 maternal deaths.

This study sought to determine the association between socio-demographic and cultural determinants of knowledge and utilization of Modern Contraceptive Methods (MCM) among Nigeria women accessing ante natal care.

The cross sectional hospital based study was conducted in 12 centers spread across Nigeria. A standardized structured questionnaire was self administered. The determinants of knowledge and usage of MCMs has been tested by univariate and multivariate logistic regression. The odds ratios with 95% confidence intervals were calculated.

1418 women participated in the study; average age was 27.70±5.39 years with 75.03% response rate. Factors found to positively influence knowledge of MCMs: health services availability (doctor for regular gynaecological check OR=1.43; 1.03-2.00 and access to skilled health workers OR=1.55; 1.14-2.12), family status (single compared to monogamic OR=2.38; 1.03-5.50), educational level (secondary OR=2.59; 1.57-4.28 and tertiary OR=2.89; 1.70-4.93 compared to none educated) as well as urban residence (OR=1.72; 1.07-2.75). Attributable risk (AR) for knowledge of modern contraceptive method explained by the studied socio-cultural determinants was 69.68%.

Factors associated with use of modern contraceptive methods were family status (single compared to monogamic OR=2.23; 1.04-4.77), religion (Christian religion compared to Muslims OR=1.50; 1.01-2.24) and education (secondary OR= 1.96; 1.17-3.27 and tertiary OR=1.86; 1.08-3.20 compared to none educated). AR for use of modern contraceptive methods explained by the investigated factors was 55.55%.

These findings are to support policy framework, the design and implementation of family planning programs that are culturally adapted and accepted, achieving increased use of contraception and striving towards achieving the Millennium Development Goals 4 and 5 by 2015 as well as “Family planning 2020” initiative.