

Determinants of Clothing Selection among Aged Retirees (65 years and above) in Makurdi, Benue State

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Abstract

The study focused on clothing selection among aged retirees in Makurdi, Benue-State. Specifically, the study identified the factors that guide the aged retirees in clothing selection, determined challenges encountered by the aged retirees in clothing selection. The population consisted of 7623 male and female aged retirees who registered with the Bureau of Pension, Makurdi between January 2014 and January 2017. A sample of 330 aged retiree was randomly selected for the study. Questionnaire was used for data collection. Data were analyzed using means. Findings revealed that durability, occasion, good fit and clothing style are among the factors that determine clothing selection of the aged retirees. Also income, lack of knowledge on right clothing and difficulty in selecting trendy garments were among the challenges encountered by the aged retirees. Based on the findings of the study, it was recommended that aged retirees should select clothing that has good fit with suitable allowance, select trendy garments that gives comfort.

Keywords: Determinants, Clothing, Selection, Aged, Retirees

Introduction

Aging is associated with gradual physical, psychological and emotional changes that reflect on the total appearance of the individual. Aging sometimes is dreaded like a disease that has no cure. Three of the larger challenges of aging identified by sociologists are retirement, ageism and social isolation (Clark, 2018). Ageism refers to prejudice and /or discrimination against other persons. Other problems associated with aging are depression, stress, anxiety and

other later-in life disorders. Some these problems may arise or are heightened by negative stereotyping of the aged such as: slowness, helplessness, resistance to change. Cultural and ethnic factors also influence aging. Cultural perspectives that value youth and discard old age do not help the problem of aging.

Aging and retirement are natural, inevitable phenomenon that all individuals must pass through in life. One of the issues disturbing the world today and presenting formidable

challenge is ageing and the problems of the elderly. For instance, statutory retirement for different institutions and professions differ in Nigeria. Retirement age for civil servants is based on number of years in service or the age of the civil servant, government policies, disciplinary measures, type of profession and institutions (Lawboy 2017). Teachers retire at 60-65 years. Retirement for Judges is pegged at 70 years irrespective of the number of years worked in civil service. This variation may hamper smooth transition from active service to retirement especially where information dissemination is poor. Some aged retirees on the street look really pathetic; they look unkempt and dress haggard with torn clothes, worn-out sandals especially when they queue for their pension at the bank. The social security benefits in developed nations like UK particularly for those disadvantaged in the labor market by virtue of gender, disability and low-paid, unstable work histories are operational (Clark, 2018). This seems to be none existent Nigeria.

The experience of loneliness, neglect, suffering, none payment of pension, unavailability of right clothing for the aged may lead to emotional dissatisfaction, seeming unhappy state, lack of fulfillment affecting their overall appearance. In this state, Ekot (2015) asserted that the aged retirees' social and psychological relations and perception decrease.

Clothing is generally accepted as one of the fundamental needs of individuals and families all over the world owing to its functional and aesthetic roles. Through clothing, basic human needs are satisfied, both physical and socio-psychological (Nchekwube, 2014). Aged people who have retired will probably find that their clothing needs have changed since they now have more leisure time and are less active. Their clothing will probably reflect this change in lifestyle as casual clothing may replace official clothing (Mohammed 2010). Aguiar, and Hurst (2013) opined that people out- of- work need fewer or less expensive clothing. Clothing selection are very personal and emotional issue to an individual and a very important means to define, refine or enhance one's self esteem (Kwon, 1994). Selection of clothing and clothing articles for the aged retirees are guided by series of factors that must fulfill the following characteristics: aesthetics, functionality, and accessibility (Agbo and Dada, 2015). Some of the factors that guide the aged particularly women in selecting their clothing documented by Nwabude (2009), Kalunde (2014) are: 1. Physical / Environmental factors (weather condition, texture, colour and safety of clothing) 2. Economic factors (income, cost, care and maintenance of clothing. 3. Social factors (marital status, and opinion of spouse, group membership, religious belief. 4. Personal / wearer factors (health condition, age, personal

values, life style. 5. Emotional factors (comfort, religious beliefs, values).

Good clothing selection is not devoid of challenges. The aged retirees are vulnerable to multiple ageing challenges and health complications that affect their lives. Decline in functioning of some body parts, discomfort from constant use of certain clothing articles such as head tie, transmission of moisture from the skin and heat flushes from menopausal reactions can be very uncomfortable for the aging. All these problems need clothing attention. Difficulty in appearance management and use of correct clothing item could hamper good interaction with other colleges. Some challenges encountered by aged persons while selecting their clothes include: poor knowledge of relationship between clothing and body shape, lack of finances, poor knowledge of clothing characteristics and quality, cultural influence, poor health conditions, ignorance of activities of fashion designers, availability of right clothing for the aged and lack of public awareness on clothing needs, sex-role stereotyping (Nwabude, 2009; Broverman, Vogel, Broverman, Clarkson and Rosenkrantz, 2018). Fitting problem and garment alteration form part of challenges faced by elderly while purchasing clothes (Hodge and Bear 2018).

The clothing need of the aged retirees is imperative. The quality of life for elderly people can greatly be improved by good selection of

clothing items (Harriet & Minna, 2002). The aged retiree in Makurdi need admiration of their outlook. However, specific needs for fit, comfort among others in their clothing selection pose challenges. The need for aged retirees to clothe properly and conveniently is a matter of concern. Some of the researches conducted on clothing the elderly are particularly devoid of focus on retirees and their peculiar the challenges with regards to clothing. This research therefore is poised to bridge the gaps that exist in the researches about clothing the elderly.

Objectives of the study

The main objective was to determine the factors that guides clothing selection among aged retirees in Makurdi. Specifically, the study:

1. Identified the factors that guide the aged retirees in clothing selection.
2. Determined challenges encountered by the aged retirees in their clothing selection.

Research questions

1. What are the factors that guide aged retirees during the selection of their clothing?
2. What challenges are encountered by aged retirees while using and selecting clothing?

Methodology

Area of study: The study was carried out in Makurdi, the capital of Benue State. River Benue passes through Makurdi. As a result, Makurdi is characterized an extreme contrasting

weather; it is always very cold between the month of November to February and in the other months. This makes clothing usage quite challenging especially for the aged retirees.

Research Design: Survey research design was employed to seek the opinions of the respondents.

Population for the Study: The study population comprised all 7623 persons from 2010-2015 (Bureau of Pension). Makurdi, Benue State. Population consists of males and females above 60 years who are fully registered in the pension payroll. Some of these were retired compulsorily while some undertook voluntary retirement all from Benue State civil service between 2010 and 2015.

Sample for the study: A random sampling technique was used to draw 30 respondents from each of the eleven (11) council wards that make up the study area. Thus, the sample size for the study was 330 respondents.

Instrument for Data Collection: The instrument for data collection were a

structured questionnaire. It was tagged "Clothing Selection among Aged Retirees Questionnaire (CSARQ)" It had 39 items. It was developed based on the objective and literature review. It had 4-point rating scale of strongly agree -4, agree -3, disagree -2 and strongly disagree -1. It was validated by three (3) experts. The reliability determined using Cronbach alpha. A reliability coefficient of 0.797 was obtained.

Method of Data collection: A total of 330 copies of the questionnaire were administered personally (with the help of a research assistant). All the 330 were collected in a period of three weeks. It was 100 per cent return.

Data Analysis Techniques: Data were analysed using means (\bar{X}) and grand Mean (G_m). The mean rating of 2.50 was the cut off value taking decision; values 2.50 or above were regarded as agreed while items with mean rating below 2.50 were considered as disagreed.

Findings of the Study

Table 1: Mean Responses on Factors that Guide Aged Retirees in Clothing Selection

S/N	Factors	\bar{X}_m	\bar{X}_f	\bar{X}_g	Remarks
1	Aged retirees consider clothes that are durable and of good quality	2.85	2.98	2.92	Agreed
2	Clothes easily maintained	2.77	2.60	2.68	Agreed
3	Weather/climate determine clothing choice	2.63	2.86	2.75	Agreed
4	Income determine what aged retirees will buy	2.71	2.71	2.71	Agreed
5	Availability of clothing items	2.63	2.62	2.63	Agreed
6	Occasion guides clothing selection	2.79	2.89	2.84	Agreed

7	Age consideration of retirees	2.62	2.77	2.69	Agreed
8	Good fit guides clothing selection	3.00	2.61	2.81	Agreed
9	Attractiveness (aesthetics) determine clothing selection	2.63	2.73	2.68	Agreed
10	Culture is a determining factor	2.70	2.92	2.81	Agreed
11	Clothing style influence selection	2.64	2.95	2.80	Agreed
12	Psychological comfort of aged retirees	2.69	2.65	2.67	Agreed
13	Tactile comfort of aged retirees	2.87	2.83	2.85	Agreed
14	Thermal comfort of aged retirees	2.67	2.52	2.59	Agreed
15	Stain resistant of some clothing item	2.70	2.83	2.76	Agreed
16	Weight of fabric is considered during clothing selection	2.61	2.86	2.74	Agreed
17	Simple design cloth gives aged retirees comfort	2.58	2.65	2.62	Agreed
18	Cool colored cloth are good choices	2.51	2.70	2.61	Agreed
19	Friends choice influences aged retirees clothing choice	2.41	2.94	2.67	Agreed
20	Wife/husbands choice influences selection	2.25	2.87	2.56	Agreed
21	Large buttons/button hole are preferred	2.46	2.83	2.65	Agreed
22	Religion affect aged retirees clothing choice	2.47	2.87	2.67	Agreed
23	physique or body structure determine clothing choice	2.78	2.95	2.86	Agreed
24	Prefers clothing items that aids mobility	2.53	2.58	2.56	Agreed

Cut-off mean=2.50, \bar{X}_m =Mean of Males, \bar{X}_f = Mean of females, Gm=grand mean of males+females, A=Agreed

Table 1 reveals that out of the twenty four items suggested all were rated above the cutoff points by the respondent which implies that the respondents all agreed to the factors that determined clothing selection.

Table 2: Mean Responses on the Challenges Encountered by Aged Retirees during Clothing Selection

S/N	Challenges Encountered by Aged	\bar{X}_m	\bar{X}_f	Xg	Remarks
1	Income/non- payment of pension	2.75	2.90	2.83	Agreed
2	Difficulty in selecting clothing styles that fit properly	2.68	2.91	2.79	Agreed
3	Difficulty in selecting comfortable/fashionable footwear	2.33	2.15	2.24	Disagreed
4	Difficulty in selecting trendy styles/garment	2.90	2.94	2.92	Agreed

5	Difficulty in selecting garment fully accepted for aged retirees in my culture	2.62	2.94	2.78	Agreed
6	Difficulty in selecting garments that have openings/closures appropriately	2.67	2.63	2.65	Agreed
7	Difficulty in selecting garments that fit shape	2.89	2.62	2.76	Agreed
8	Knowledge on right clothing	2.88	3.11	2.99	Agreed
9	Difficulty in Clothing maintenance such as laundry	2.77	2.62	2.69	Agreed
10	Difficulty in arranging articles of clothing	2.58	2.52	2.55	Agreed
11	Difficulty in selecting easy to wash clothing	2.88	2.61	2.75	Agreed
12	Garments with no care label seems difficult during clothing selection	2.59	2.58	2.85	Agreed
13	Difficulty in bending /stretching during clothing selection	2.71	2.67	2.69	Agreed
14	Fastening/ unfastening clothing items becomes difficult	2.73	2.77	2.75	Agreed
15	Difficulty in selecting good textile material	2.67	2.64	2.66	Agreed

Cut-off mean=2.50, \bar{X}_m =Mean of Males, \bar{X}_f = Mean of females, \bar{X}_g =grand mean of males+females, A=Agreed

Table 2 reveals fourteen challenges encountered by aged retirees during clothing selection. The grand mean of the fourteen items ranges from (2.99-2.55) which are above the bench mark of 2.50 set for the study. The Grand mean of item 3 was below cut off point of 2.50 set for the study. The respondents did not accept they experience challenges in selecting their foot wears (2.15)

Discussion of Findings

Findings in Table 1 reveal that durability, body shape, good fit, clothing style, comfort among others are the determinants of clothing selection among the aged retirees. Physique or body structure determine

clothing choice (\bar{X}_g =2.86) being the second highest mean is also an indication that the aged care about the fit of their garments. This finding is in congruent with findings by Ofori, Adu, Tawaih, Akwaboa and Agbovie (2014) who report that size, length and fit of clothing form major determining physical factor that influence clothing selection by students in University of Ghana. The implication is that fit is a common factor influencing both young and aged in garment selection (\bar{X}_g =2.92). Shah and Villareal (2010) observe that change in body shape affect balance as the posture may become more stooped, knees and hips are more flexed due to aging. Aged

retirees experience a lot of changes on their body that can bring discomfort to their clothing and many of these discomforts occur when they put on some clothing items. James (2011), claims that these disorders are as a result of physiological and biological changes in the body. Some of these disorders include weak bones, depression, stress and some diseases such as high blood pressure, diabetes, and cancer. Ogunwa (2000) also states that because the structure and functions of the body are altered in old age, the elderly or ageing have more severe problems than other age groups in the family. The present study confirms the assertion by Lee (2012) that women experience difficulty in selecting clothing that fits their body shapes and styles that are appropriate for their ageing body. This study however also reveals that this problem is common to both males and females as shown in table two ($\bar{X}_m = 2.68$, $\bar{X}_f = 2.91$). (Nchekwube & Chigbu, 2014) opined that aging women are generally seen with the deposit of flabby flesh at the upper arm. These figure defects resulting from the aging process create serious fitting problems and make clothing usage difficult task for aging women.

Durability and good quality clothes ($\bar{X}_g = 2.92$), is one of the factors that guide aged retirees in clothing selection. Some aged retirees have limited resources to spend on clothing and other textiles, and therefore they try to optimize purchases to get highest possible value

for money. Purchasing low quality products can make clothing more expensive in the long term. For example cheap socks may be worn out after two days of use and have to be replaced with new ones; this becomes more expensive (Harriet and Minna 2002). Marc, (2016) expressed that "If we want to buy better clothes that last longer, we have to know what to look for when we are shopping".

The finding of this research also show that all forms of comfort very much influence clothing selection by the aged. This finding agrees with earlier assertions by Twigg (2007), Thomas and Peters (2009) that aged retiree desire comfort, fit, aesthetics, style, value, good price and function in their clothing selection. Thiry (2009) supports this by stating that the aged are not willing to sacrifice comfort for fashion and that they also prefer protective clothing in extreme environment condition. Manwa, Ndamba, & Lokadhia, (2010) recommends that while selecting clothing one should ensure appropriate size, shape and color. Culture ($\bar{X}_g = 2.81$) is also a factor considered during clothing selection by aged retirees. In line with this finding, Asare, Ibrahim and Kwesi (2016) indicate that people's selection of clothes is influenced to a great extent by what is worn by other persons. An individual's clothing is a symbolic aspect of people's culture which gives them identity. For instance in Benue State, the ethnic groups differ in their mode of dressing

particularly signified by colour differentiation.

Findings also reveal several challenges confronting the aged while selecting their clothes; the highest, poor knowledge of right clothing ($\bar{X}g = 2.99$), difficulty in choosing trendy styles of garments agrees with report by (Nwabude 2009). Clothing selection requires knowledge, knowledge about the right clothing to wear by the aged retirees especially clothing that brings warmth during harmattan for example caps, socks. Oniye (2012) stated that there is the need to recommend certain clothing for the elderly such as warm clothes and clothes that fit all occasion such as flat shoes and caps. The aged have no difficulty selecting comfortable or fashionable footwares ($\bar{X}g = 2.24$). Fastening/unfastening clothing items for example boot/shoe is a challenge to the aged retirees as palm sandals or simple wear is preferable for easy mobility and comfort ability. Irregular payment of pension can hamper clothing selection. Income is a determining factor in order to select clothing intelligently and efficiently. All these challenges outlined as problems hides clothing from performing its varied functions thereby, making the aged retirees not to enjoy clothing.

Conclusion

The most important consideration for clothing use and selection should be what makes one comfortable and gives the wearer confidence. A good fit allows the joyous senses of motion

and freedom, giving both comfort and grace (Salami &Uko-Aviomoh, 2004). Some clothing selection determinants are highlighted as durability and quality, body shape/physique, good fit, clothing style, occasion and comfort among others. The aged retiree should consider all these factors when they are making selections for their clothing's. Some challenges encountered during aged retirees clothing selection are income, lack of knowledge on what to wear, difficulty in selecting comfortable and trendy garments, difficulty in selecting garments that fit shape among others. It was concluded that for the aged retirees in Makurdi to enjoy their clothing, they have to select clothes that has good fit, durable, comfortable, available, with easy care quality garments for easy maintenance. Finally conclusion was drawn that aged retiree should dress neat and always look good both in aesthetics and functionality.

Recommendations

Based on the findings from the study, the following recommendations were made;

- ❖ Aged retiree should select clothing that are durable, clothing with opening and closures to facilitate ease of wearing, cloth that have good fit and brings comfort
- ❖ Due to delay in payment of pension, the aged retirees should select affordable and easily maintained clothing items
- ❖ Due to aging and it challenges it is recommended that the aged

- retirees should put on clothing style with simple designs
- ❖ It is also recommended that the aged retirees should put into consideration weather/season/climate when they are selecting clothing items so as to keep their body temperature normal and to avoid ill-health.

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Causes of Maternal Mortality among Women in Mangu Local Government Area of Plateau State, Nigeria

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Abstract

This study examined the causes of maternal mortality of Women in Mangu Local Government Area of Plateau State, Nigeria. Four research questions were formulated and answered using simple percentage, mean and standard deviation. The results revealed that some major causes of maternal mortality in the study area in ranking order include; high blood pressure, HIV/AIDS, lack of family planning and malaria. The most challenged by maternal mortality in Mangu LGA were: children, husbands, government, community and society. It was also found that maternal mortality could be reduced through: media influence, prompt antenatal care and sex education for the adolescents, among others. Some recommendations made for reducing maternal mortality comprise provision of more government health centers, facilities to assist the more vulnerable groups in the community.

Keywords: Maternal, Mortality, Clinic, Early marriage, Antenatal.

Introduction

Maternal mortality has been a major health challenge in developing countries of the world. Maternal mortality has been defined as the death of mothers caused by diseases and other health conditions related to pregnancy, labour and childbirth and as deaths due to complications from pregnancy or childbirth (Mutihir &

Golit, 2010; Zozulya, 2010; CIA World Fact Book, 2018). Maternal mortality has been and still remains a public health challenge especially in developing nations. It is more heartbreaking because young women die in the course of carrying out this vital biological function of child bearing (Mutihir & Golit, 2010). Child bearing age is a critical period in life,

especially with respect for healthy family survival. It is the age period between 15-24 years.

The World Health Organization (WHO), has categorized young women between the ages of 15-25 years as Adolescents and teenagers (WHO, 2013). Adolescence is a process of growing to maturity, a time period between the beginning of childhood and adulthood when hormonal changes transform girls into young women who will be able to have children of their own (National Research Council & Institute of Medicine, 2005; WHO, 2013). To prevent maternal mortality consequently, the health of the mother must be put into serious consideration, likewise her physical and structural maturity. When a pregnant young woman is not in good health, either before, during or after delivery, it can be a predisposing cause of maternal mortality.

There are certain factors that can affect the health of a woman who is within the child bearing age. Some of them include: the physical development of the woman at the time of marriage, accessibility to health care before, during and after delivery, child spacing, nutritional knowledge and application. These factors are often classified as direct or indirect. Direct factors include: hemorrhage, eclampsia, obstructed labour and unsafe abortion. While indirect factors are: obstetric deaths which result from previously existing disease arising during pregnancy, which are

aggravated by the physiological effects of pregnancy such as: high fever, malaria, anemia, HIV/AIDs, tuberculosis, cancer, cardiovascular diseases, renal diseases (Adesokan, 2011; Care Quality Commission, 2013; Demographic Surveillance System, 2014).

A young woman under 16 years who is expecting delivery will be at risk of obstructed labour due to pelvic inadequacy and other health conditions due to early age in which many Nigerian girls begin child bearing. Maternal mortality is reported to be very high, especially in the Northern parts of Nigeria, among women living in urban, rural and poorer communities (Chinelo, Okigbo & Ahizechkwu, 2015; Sharma, Brown, Kainuwa, Leight & Nyqvist, 2017), in which Mangu Local government Area is not an exception. It is reported that, 44% of young women aged 20-24 had given birth before they were 20 years old, 27% before they were 18 years old and 8.5% before they were 15 years old. The report further suggested that early pregnancy is likely to be one of the main reasons for the higher maternal mortality rate among young women in northern Nigeria because many of the women are married by age 18 years (WHO, 2013; Morgan & Eastwood, 2014; Sharma, 2017). A study on maternal mortality among adolescent women in Jos, Plateau State was conducted to determine the extent, characteristics and risk factors of maternal deaths in the adolescent women in Jos, Plateau State. The

results of the study revealed high incidences of complicated induced abortion (37%), eclampsia and sepsis each accounting for 26.3% as leading sources of maternal mortality ((Ujah, Aisien, Mutihir, Vanderjagt, Glew & Uguru, 2005).

The study revealed that adolescent women dwelling in Jos are at high risk of maternal mortality. One of the ethnic groups of their study was the Mwaghavul women from Mangu L.G.A. of Plateau State. Thus, in Mangu L.G.A, adolescent women were found to be at a high risk of maternal mortality. Furthermore, a study by Samson (2015), revealed a very high risk of mortality from the obstetric case files of women registered from 2015-2016 in Kerang community of Mangu LGA. Also, preliminary data collected at the beginning of this study from five major clinics in Mangu town revealed that 14 out of 159 women that attended antenatal clinic died during child birth. This is why the researchers wish to examine the causes of maternal mortality among women in Mangu LGA of Plateau State-Nigeria.

It is known that when there is good availability of health care services especially with good knowledge of maternal and child bearing issues by women of child bearing age, the users are likely to experience less mother and child mortality. However, experience has shown that maternal mortality among young women has been a key health concern despite efforts of both

government and non-governmental organizations in creating consciousness both nationally and internationally. Despite the establishment of the institution of safe motherhood initiative in the health sector, maternal mortality is still very high in Mangu LGA of Plateau State. If the situation is allowed to continue, the area may end up having a lot of motherless children and unhealthy mothers, hence, the reason why this study on the causes of maternal mortality among young women in Mangu LGA of Plateau State is undertaken.

Purpose of the Study

The purpose of this study was to investigate the causes of maternal mortality among young women in Mangu Local Government Area of Plateau State. Specifically, the study determined:

- (1) causes of maternal mortality among young women in Mangu LGA.
- (2) individuals mostly challenged as a result of maternal mortality in Mangu LGA.
- (3) ways of reducing maternal mortality among young women in Mangu LGA.

Research Questions

- (1) What are the causes of maternal mortality among young women in Mangu LGA?
- (2) Which individuals are mostly challenged by maternal mortality in Mangu LGA?

(3). In what ways can maternal mortality be reduced among young women in Mangu LGA?

Methodology

Design of the Study: The study employed descriptive survey research design to examine the causes of maternal mortality among young women in Mangu community of Plateau State.

Area of Study: The area of the study was Mangu LGA of Plateau State. It is one of the 17 Local Government areas making up the three senatorial zones of the State (National Demographic and Health Survey, 2013). Women of reproductive age, especially the educated ones usually use the available health facilities in Mangu community. However, the less educated ones mostly show a laissez-faire attitude except in cases of emergencies where they are rushed to health centers.

Population of the Study: The estimated population for this study consists of 3,200 women of child bearing age, who attend various health centers in Mangu community of Plateau State. It is a community whose occupations are predominantly farming, trading/small business and animal rearing. There are also educated civil servants. There are five health facilities owned by the government, two private clinics and ten patient chemists, where members of the LGAs receive health care, with an average of four women in attendance in each health center per

week. Some of these health facilities are either poorly or hardly equipped.

Sample for the Study: A sample of 159 young women was used. These were those who came for antenatal care and delivery during the time of the study. The distribution of young women sampled for the study from the five coded centers comprises: center A 40, B 52, C 28, D 21 and E 18 respectively.

Instrument for Data Collection: A structured questionnaire of four sections was used. Section A contained questions on respondents' personal information such as age and marital status. Section B contained 20 items which are related research question one on the causes of death among young women during pregnancy and child birth. Section C contained 6 categories of people most challenged by maternal mortality, while Section D contained 11 items on possible ways of reducing maternal mortality among young women in Mangu LGA. The questionnaire was subjected to the scrutiny of three experts: one in Test and Measurement from the University of Jos and two from Plateau State Department of Public Health, Jos. They read through the questionnaire items and made very useful suggestions of which the researchers collated and effected the corrections. The instrument was pre-tested using 20 young women in Kerang community of Mangu LGA who were not part of the sample for the study. Cronbach Alpha reliability index was used which showed a reliability index

of 0.76 indicating that the questionnaire was reliable.

Data Collection and Analysis

Methods: The questionnaire was administered personally by the researchers within the period of the study. The method of administration was a face to face direct delivery. One hundred and fifty nine women visited the health centers at the period of study and 102 (65%), responded to the questionnaires appropriately. The data were collated and analyzed.

Findings

Demographic Data

The age group distribution of the respondents comprised of 5.88%

teenagers, 55.88% adults, 18.63% between the ages of 24 -29years and 19.61% between ages 30 years and above. Based on the marital status, majority of the respondents were not married but pregnant (62.75%). 16.67% of the respondents were married 1.76% of the respondents were widows and 8.82% them were divorced.

Based on occupation, majority of the (50%) of the respondents who were pregnant, were house wives, 23.53% agriculture/business based, 17.65% civil servants and 8.82% were students.

Table 1: Causes of maternal mortality in Mangu LGA

S/N	Causes of Maternal Mortality	Agreed F (%)	Disagreed F (%)	$\bar{X} \pm SD$	Ranking
1	Swollen legs	96 (94.12)	6 (5.88)	3.64±0.77	1
2	High Blood Pressure	89(87.25)	13(12.75)	3.63±0.70	2
3	HIV/AIDs	89(87.25)	13(12.75)	3.63±0.70	2
4	Lack of Family Planning	90 (88.20)	12 (11.80)	3.63±0.69	2
5	Malaria	90 (88.20)	12 (11.80)	3.63±0.69	2
6	Diseases/ Infection	96 (94.12)	6 (5.88)	3.57±0.78	3
7	Distance from the Health Facilities	89 (87.30)	13 (12.70)	3.51±0.71	4
8	Prolonged Labour	90 (88.24)	12 (11.76)	3.45±0.85	5
9	Act of God	90 (88.24)	12 (11.76)	3.45±0.85	5
10	Poverty	90 (88.20)	12 (11.80)	3.45±0.85	5
11	Unsafe Abortion	90 (88.20)	12 (11.80)	3.45±0.85	5
12	Lack of Antenatal care	90 (88.20)	12 (11.80)	3.39±0.85	6
13	Lack of good food	89 (87.30)	13 (12.70)	3.38±1.01	6
14	Socio-cultural beliefs	89 (87.30)	13 (12.70)	3.38±1.01	6
15	Witchcraft	90 (88.24)	12 (11.76)	3.33±0.84	7
16	Lack of healthcare facilities	90 (88.20)	12 (11.80)	3.28±0.96	8
17	Early Marriage	90 (88.20)	12 (11.80)	3.27±0.96	9
18	Sepsis	57 (55.88)	45(44.12)	2.79±1.18	10

19	Bleeding (Hemorrhage) before and after delivery	44 (43.14)	58 (56.86)	2.43±1.11	11
20	Blood loss during pregnancy	44 (43.14)	58 (56.86)	2.31±1.10	12

Source: field data (2017), **NB:** percentages in parenthesis (%), Mean ± Standard Deviation

Table 2 reveals the causes of maternal mortality among young women in Mangu local Government Area as follows: 96 of the responses representing 94.12% of the respondents ranked swollen legs as the first major cause of maternal mortality. 87.25% of the responses ranked High Blood Pressure, HIV/AIDs, Lack of Family Planning, Malaria with mean and standard deviation of 3.63±0.69 as second, 94.12 of responses ranked Disease/Infection as third, 87.30% of responses ranked Distance from the Health Facilities 3.51±0.71 as fourth, 88.24% of the respondents ranked Prolong labour, Act of God, Poverty and Unsafe Abortion with mean and standard deviation of 3.45±0.85 as fifth, 87.30% of the respondents ranked Lack of Antenatal care, Lack of good food and Socio-cultural beliefs with mean and

standard deviation of 3.38±1.01 as sixth, 88.24% of the respondent ranked Witchcraft with mean and standard deviation of 3.33±0.84 as seventh, 88.20% of the respondent ranked Lack of healthcare facilities with mean and standard deviation of 3.28±0.96 as eight, 88.20% of the respondent ranked Early marriage below 18years with mean and standard deviation of 3.27±0.96 as ninth, 55.88% of the respondents ranked Sepsis with mean and standard deviation of 2.79±1.18 as tenth, 43.14% of responses bleeding before and after delivery with mean and standard deviation of 2.43±1.11 was ranked eleventh and 43.14 Blood loss during pregnancy with mean and standard deviation of 2.31±1.10 as twelfth cause of maternal mortality in Mangu Local Government area of Plateau State.

Table 2: Persons mostly challenged by Maternal Mortality in Mangu LGA

S/N	mostly challenged as a Result of death of Women during childbirth	$\bar{x} \pm SD$	Ranking
1	Children	3.75±0.55	1
2	Husbands	3.63±0.69	2
3	Relations/Friends	3.27±0.96	3
4	Religious organizations	2.91±1.09	4
5	Community	2.85±1.16	5
6	Government	2.79±1.18	6

Source: Field data (2017), **NB:** Mean ± Standard Deviation

Table 2 shows that the most challenged people by maternal mortality in Mangu LGA by ranking were the children with 3.75 ± 0.55 , Husbands with 3.63 ± 0.69 , Government with 2.91 ± 1.09 , Community with 2.85 ± 1.16 and Society, 2.79 ± 1.18 respectively.

Table 3: Possible ways of Reducing Maternal Mortality among young people in Mangu LGA

S/N	Suggestions on Ways to Reduce Maternal Mortality	$\bar{x} \pm SD$	Ranking
1	Use of social media for sensitization	3.75 ± 0.55	1
2	Prompt antenatal care	3.75 ± 0.55	1
3	Prompt identification and treatment of diseases, including malaria.	3.75 ± 0.55	1
4	Provision of more health centres	3.75 ± 0.55	1
5	Sex education for the adolescents	3.75 ± 0.55	1
6	Proper use of family planning	3.70 ± 0.58	2
7	Good nutrition during pregnancy	3.70 ± 0.58	2
8	Provision of trained health personnel	3.57 ± 0.78	3
9	Safe abortion education	3.38 ± 1.01	4
10	Ensure safe blood transfusion	3.38 ± 1.01	4
11	Health Education/Awareness campaign on health, hygiene and good nutrition	1.89 ± 0.70	5

Source: Field data (2017), **NB:** Mean \pm Standard Deviation

Table 3 reveals respondents' opinions on how maternal mortality can be reduced among young women in Mangu LGA. Media influence, Prompt Antenatal care, Prompt identification and treatment of diseases, Provision of more health centres and sex education for the adolescents with mean and standard deviation of 3.75 ± 0.55 were ranked first, Proper use of family planning and Good nutrition during pregnancy with mean and standard deviation of 3.70 ± 0.58 were ranked second, Provision of Trained staff with mean and standard deviation of 3.57 ± 0.78 was ranked third, Safe abortion education and Safe blood supply with mean and standard deviations of

3.38 ± 1.01 were ranked fourth, and Health Education/Awareness campaign with mean and standard deviation of 1.89 ± 0.70 was ranked fifth.

Discussion of Finding

The purpose of the study was to identify the causes of maternal mortality for healthy survival of women in Mangu Local Government Area of Plateau State. The results of data analysis in the study area showed that respondents agreed with most of the items listed as causes of maternal mortality in order of ranking, which included: swollen legs, high blood pressure, HIV/AIDs, lack of family planning, malaria diseases,

infection/diseases, distance from health facilities, prolonged labour, act of God, poverty and unsafe labour. The ranking of these items mentioned above (1-5) was quite high (high of 89% and low of 96%) respectively. This is not surprising because the majority of the respondents (63%) in this study were adolescents who were not married but were pregnant. Thus their lack of knowledge and experience on maternal health care could have contributed to the reasons for the causes of maternal mortality. This is similar to the works of some researchers (Zozulya, 2010; 2005; Adesokan, 2011; WHO, 2013; Sharma et al, 2017). In their studies, they listed causes such as: unsafe abortion, hemorrhage, cancer, obstructed labour and socio-cultural believes. Also, the results of analysis in Plateau State and specifically, among the Mwaghavul tribe in Mangu LGA by Ujah et al (2005) showed that, there were other indirect causes of maternal mortality such as sickle cell anemia, meningitis, hepatitis, cardiovascular diseases and pulmonary tuberculosis, among women in the LGA. The number of women in the present research work who went for antenatal care on a weekly or monthly basis were quite few (an average of four). It is therefore possible that the majority of the women perhaps, only attended antenatal clinics when they had challenges, complications or difficult labour.

The results of this study also identified Persons mostly challenged

by Maternal Mortality in Mangu LGA. They include children, husbands, relations/friends, religious organizations, community and government in ranking order. Maternal mortality among young women has many implications not only to individuals, family members and community but also to the nation and the world at large. Another study by Mutihur, (2010) and Morgan & Eastwood (2014) reported that the government, the society and other agencies could be challenged as a result of the effect of maternal mortality.

Also, this study has shown clearly that, maternal mortality could be reduced. Some of the ways to reduce maternal mortality in Mangu LGA according to ranking included: use of the social media for sensitization of the populace, prompt antenatal care, prompt identification and treatment of diseases, provision of more government health centers and sex education for adolescents. Home Economists and other health workers can assist in educating adolescents, young and older women by mounting up educational campaigns and making good use of the social media in this era of Information Communication Technology, especially to reduce the menace. This is why the MDG target aimed to reduce the number of young women who die in pregnancy and childbirth by three quarter by 2015 (Mutihir & Golit, 2010; United Nations Population Fund, 2016; CIA World fact book (2018). This however is yet to be fully achieved in Nigeria, as

young women are still at high risk of maternal mortality. Furthermore, the results of the analysis reveal that, maternal mortality could be reduced when there are provision of trained staff, proper use of family planning, provision of more health centres and good nutrition during pregnancy. That also confirmed the reports of Ujah et al, (2005) and Adesokan (2011). They found out that abortion related maternal deaths were high because of unplanned and unwanted pregnancies. Again, from the present research work, age was found to be one of the risk factors of maternal mortality in Mangu LGA. The studies by Morgan & Eastwood (2014) and Care Quality Commission (2013), posited that young women were at risk of maternal mortality because some of them were still developing and had not attained full maturity. Furthermore, Sharma et al (2017), in their study on maternal mortality in Jigawa State, Nigeria, reported higher risks among young adults in the Northern parts of the country. This factor may be more obvious in places where younger women are given to early marriage or exposed to child bearing, especially between the ages of 11 to 13. It is therefore the opinion of the researchers that maternal mortality issues should be treated properly by health practitioners with greatest concern to reduce the rate of maternal mortality in Mangu local government area of Plateau State. It is important to note however that the process of data collection during national surveys

may not be as perfect as it is with other developed countries. In developing countries it could be difficult to reach some of the remote villages during some seasons of the year meaning that such data representation may not be absolutely precise.

Conclusion

Based on the findings and discussions, the following conclusions were reached in the study; there are many causes of maternal mortality in Mangu LGA. The cases of maternal mortality are more common among unmarried adolescents who may not be fully prepared for the responsibilities of child bearing and rearing. The reasons for these maternal mortality rates could include poverty, poor health care facilities as well as other socio-cultural challenges.

Recommendations

The following are some of the recommendations drawn for policy formulation

- ❖ Community health education programmes should be carried out to encourage most, if not all pregnant women to attend antenatal clinic which will aid early identification and management of diseases to prevent mortality. Besides, family planning services should be accessible for couples, likewise the single adolescents to prevent unwanted pregnancies and unsafe abortion.
- ❖ Safe motherhood initiative programmes should be propagated

and made accessible to all women of child bearing age. There is also the need for government to enforce programmes for the rural women economic empowerment. This will help improve their health status during pregnancy to advocate through mass media.

- ❖ The women, children, husbands (households) and communities can all get involved in poverty alleviation activities, health and environmental education and application and use of available family resources wisely.
- ❖ Government should enact a law in order to discourage and prevent early marriage and also create awareness on the danger of early marriage and teenage pregnancy. There should be health education during antenatal sessions by health personnel on the factors responsible for maternal mortality and how to prevent them.
- ❖ Government and other non-governmental organizations should encourage and sponsor seminars and workshops in order to train traditional birth attendants on the modern techniques used in deliveries.

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