

## **Effects of Cashless Policy on Reproductive Activity among Married Women in Urban Areas of South-South Nigeria**

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### **ABSTRACT**

Availability of physical cash is a vehicle for reproductive activity because its availability and accessibility determines reproductive activity in terms of conception among married couples. Stable economic is a panacea for reproductive activity to take place. The study is aim to investigate the Effects of Cashless Policy on Reproductive Activity among Married Women in Urban Areas of South-South Nigeria. The study involves 260 married women between 18 to 37 years of age. The study was a cross sectional study and questionnaires were given to participants after seeking their consent to fill independently and return it to the researcher. The study lasted for a period of 4 months. The study revealed that 82.3% of the participants did not have urge to sex during the period of Cashless policy while 17.7 do and 69.2% of the participants do not want to be pregnant during the season. 86.6% of the participants do not use protective devise during sex for several reasons. 95.4% have sex during the policy's season and 98.5% of the participants were pregnant. 81.5% said the pregnancy was not timely. 82.3% of the participants terminates their pregnancy and 82.3% used herbal medicine, 17.7% used tablets to terminate their pregnancy. 94.6% have complications from terminating the pregnancy. 69.2% of the participants said that, the policy brought hardship.

**KEY WORDS:** Effects, Cashless Policy, Reproductive, Activity, Married, Women.

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### **INTRODUCTION**

Cashless economy is an economy where transaction can be done without necessarily carrying physical cash as a means of exchange of transaction but rather with the use of credit or debit card payment for goods and services (Muyiwa *et al*, 2013). Cashless economy is not the complete absence of cash, it is an economic setting in which goods and services are bought and paid for through electronic media. Roth, (2010), revealed that, in cashless economy, you can pay for your purchases by any one of a plethora of credit cards or bank transfer. Cashless economy is enhanced by e-finance, e-

money, e-brokering and e-exchanges and these are referring to how transactions and payments are effected in a cashless economy (Moses-Ashike, 2011). Akhalumeh and Ohioka (2011) revealed some challenges with the introduction of cashless policy and their findings show that 34.0% of the

respondents cited problem of internet fraud, 15.5% cited problem of limited POS/ATM, 19.6% cited problem of illiteracy and 30.9% stayed neutral - the respondent not been sure of problem been expected or experienced.

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Electronic banking, online transactions and mobile banking are cashless policy introduced in Nigeria by Central Bank of Nigeria and this has resulted in decrease in handling physical cash (Gbaranor *et al*, 2023). Also, the introduction of this policy has reduced incessant armed robbery on the high ways among travelers. However, the timing and poor implementation of the cashless policy by Central Bank of Nigeria at a critical period between Christmas celebration and 2023 general elections brought in so many difficulties like hunger, sexual exploitation, unwanted pregnancy and poor participation in the election (Gbaranor *et al*, 2023).

Reproduction is an important aspect of African culture with the aim to maintain continuity in the family circle (Gbaranor *et al*, 2020). This however can only be actualized when a mature male and female agree to be couple with the desire to have children. Desired conception is when both couple agree based on favourable conditions to have a child or children and delayed could be any factor that may impede or delay this conception process in the female (Gbaranor *et al*, 2020). In African culture, the desire of a woman of reproductive age is to give birth or have children, especially among married women. However, when this desire is delayed, it becomes a concern to the woman and to the entire family. Every woman is important as far as reproduction or conception is concerned. The happiness of every husband is to see their wives conceiving at their desired time. Also, married women will be comfortable in their matrimonial homes when conception is not delayed to avoid hate speeches or maltreatment from their in-laws (Gbaranor *et al*, 2020).

During the season of Cashless Policy, women were eager to get pregnant and put to bed but the situation were they find it

difficult to access their money denied them of such opportunity to plan and get pregnant.

### MATERIALS AND METHOD

The study was a cross-sectional study involving 260 females who are within the age of 18 to 37 years and reside in the urban areas across the six (6) South-South States, in Nigeria. The study lasted for a period of four months, from February 2023 to May, 2023. Consent was sorted from the participants before giving them the questionnaires. Questionnaires were given to the participants. Each participant had one questionnaire to fill appropriately and independently after instructions were given to them by the researchers. Data were obtained and analyzed using SPSS version 23 and P value < 0.05 was said to be significant

### RESULTS

The findings revealed that 61.1% of the participants had tertiary level of education, 32.7% had secondary level and 5.8% had primary levels of education (Table 1). 69.2% said the policy brought hardship to them (Table 2). 82.3% of the participants said no urge for sex with reasons (Tables 3 & 4). 84.6% do not use protective device during sex with reasons (Tables 5 & 6). 95.4% of the participants have sex and 69.2% insist they will not be pregnant during the cashless season (Tables 7 & 8). 98.5% got pregnant and 81.5% said pregnancy was untimely (Tables 9 & 10). 82.3% terminated their pregnancy and 82.3 used herbal medicine in terminating the pregnancy (Tables 11 & 12). 94.6% had complications from terminating the pregnancy (Table 13).

**Table 1: Educational Distribution of Respondents**

Age	Frequency	Percentage (%)
PRIMARY	15	5.8
SECONDARY	85	32.7
TERTIARY	160	61.1
<b>Total</b>	<b>260</b>	<b>100.0</b>

**Table 2: Participants who said the policy brought hardship**

Item	Frequency	Percent (%)
YES	180	69.2
NO	80	30.8
Total	260	100.0

**Table 3: Urge for sexual intercourse**

Response	Frequency	Percentage (%)
YES	46	17.7
NO	214	82.3
Total	260	100.0

**Table 4: Reasons for not having urge for sex**

Item	Frequency	Percent (%)
Fear of becoming pregnant	160	61.5

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The atmosphere not conducive	10	3.8
No money to start antenatal in case I got pregnant	90	34.6
Total	260	100

**Table 5: Use of protective device during sexual intercourse**

	Frequency	Percentage (%)
NO	220	84.6
YES	40	15.4
Total	260	100

**Table 6: Reasons for not using protective device during sex**

	Frequency	Percentage
No Money For Protective Device	154	59.2
Chemist And Pharmacist Were Not Operating	106	40.8
Total	260	100.0

**Table 7: Participants who have sex during the season**

Item	Frequency	Percentage (%)
YES	248	95.4
NO	12	4.6
Total	260	100.0

**Table 8: Getting pregnant during the cashless policy's season**

Item	Frequency	Percentage (%)
YES	80	30.8
NO	180	69.2
Total	260	100.0

**Table 9: Participants who got pregnant during the season**

Item	Frequency	Percentage (%)
YES	256	98.5
NO	4	1.5
Total	260	100.0

**Table 10: Whether pregnancy was timely or not**

Item	Frequency	Percentage (%)
YES	48	18.5
NO	212	81.5
Total	260	100.0

**Table 11: Termination of pregnancy**

Item	Frequency	Percentage (%)
YES	214	82.3
NO	46	17.7
Total	260	100.0

**Table 12: Method employed for termination of pregnancy**

Item	Frequency	Percentage (%)
Herb	214	82.3
Tablet	46	17.7
Total	260	100.0

Table 13: Complications

Item	Frequency	Percentage (%)
YES	246	94.6
NO	14	5.4
Total	260	100.0

Table 14: Type of complications

Item	Frequency	Percentage (%)
BLEEDING	110	42.3
SEVERE ABDOMINAL PAIN	82	31.5
DIZZINESS	24	9.2
NONE	44	16.9
Total	260	100.0

**DISCUSSION**

Reproductive process or activity is a process that a person must consent to, or take personal decision to participate. And for a person to involve or participate in reproductive activity, certain conditions are taken into consideration and such conditions include planning, timely and favourable conditions. For a married couple to agree to have children, they must decide, plan and ensure that the atmosphere is favourable for them to start the process.

It is important that every reproductive active is enhance by stable economy with availability of physical cash. Cashless Policy at the peak of its introduction in Nigeria, brought in a lot of hardship and preventing the normal flow of business and reproductive activity across the country. People were afraid of their usual activity due to lack of circulating money. It was a policy introduced by Central Bank of Nigeria and brought untold hardships to Nigerians during the Christian’s festive period to February General Elections period.

The study revealed that most of the participants were highly educated with 61.1% of them have tertiary level of education, 32.7% had secondary education and 5.8% had primary level of education (Table 1). This could be due to the facts that this study was carried out in the urban centres of the six (6) states of the South-South, Nigeria. It is important to find out their level of education because this will be a vehicle of driving the information’s needed by the researchers. Also, with their level of education, they can take decision on their own without some body interfering. 69.2% of the participants said the Cashless Policy brought hardship to them during the period and this Policy affected their regular activities including reproductive activity. When there is hardship, there will be lost of interest in any activity. 82.35% of the participants said they do not have the urge for sexual intercourse with their spouse and only 17.7 do. This loss of interest in having sexual intercourse could be due to the untold hardship brought by Cashless Policy. This could be that the participants could not get access to money and psychologically, they could be affected leading to loss of sexual urge or libido. Also, the participants gave several reasons why they loss urge for sexual intercourse: 61.5% of the participants said fear of becoming pregnant is the reason,

3.8% said the atmosphere is not conducive and 34.6% said no money to start antenatal in case pregnancy occur. Thinking about these reasons may automatically send signal to the higher centre (the brain) and them to loss of sexual urge. The participants may be afraid of getting pregnant due lack of circulating money and therefore, they could not afford anything. Again, antenatal is an important process that if pregnant you must undergo to ensure a safe delivery, and if there is no availability of fund the process will be truncated

the expectant mothers may be classify as mothers with high risk pregnancy. The atmosphere was not conducive during the Cashless Policy’s period and women and men were afraid with high cost of goods and increase criminal activities due to hunger.

The study also shows that majority of the participants (84.6%) did not use protective device during sexual intercourse and this was attributed to the fact that, there is no money in buying the protective device following unavailability of money and 59.2% acknowledged this reason. However, 40.8% attested that Chemist and Pharmacist’s store were not opening due to poor network for transfer of money through bank app and physical cash. 69.2% of the women said they would not want to be pregnant following the difficulties encountered during Cashless Policy period and 30.8% said the reverse is the case. The study revealed that 94.5% of the married women have sexual intercourse during this period under review and 98.5% got pregnant. This could be due to the fact that there was no availability of money to buy protective device and to put it on during the period having sexual intercourse. It is noted that majority of them wouldn’t want to get pregnant but because there was no availability of protective device and this could be one of the reason they got pregnant. However, 81.1% of the participants said the pregnancy was not timely and due to their earlier statement that they wouldn’t want to be pregnant because of the difficulties induced by Cashless Policy. Again, participants said no money to start antenatal clinics, no money to buy baby’s wears, transportation to clinics, and no money to get food items and drugs for themselves.

Again, the research findings shows that 82.3% of the participants terminated their pregnancy. This termination

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could be due to unfavourable conditions and the fact that the pregnancy was not desired and planned following difficulties encountered during Cashless Policy. However, because the pregnancy was not desired and planned for, the participants employed different methods such as herbal medicine and synthetic drugs to terminate the pregnancy. 82.3% of the participants employed herbal medicine to terminate their pregnancy and this because herbs were available, accessible and cheaper than the orthodox drugs during this period under review. Despite the high level of education, the participants have attained and their location –urban centres, the participants went ahead to employ the herbal drugs to terminate the pregnancy as they said this was the best option they could carry out during this turbulent season. 94.6% of the participants have complications as a result of termination of the pregnancy through traditional means. Those complications the participants faced after the termination of pregnancy include: Bleeding, Severe abdominal, Dizziness and Hypotension among others.

### CONCLUSION

The study revealed that, during Cashless Policy in Nigeria, reproductive activities were affected such that the participants could not afford protective device for sexual intercourse, having sex that leads to undesired and unplanned pregnancy and this paved way to majority of the participants to employ herbal medicine for the termination of the unwanted pregnancy that led to different degrees of complications.

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### REFERENCES

- I. Akhalumeh, P.B., and Ohiokha, F. (2011): Nigeria's Cashless Economy; The Imperatives. *International Journal of Management & Business Studies*. vol.2 pp. 12 – 17.
- II. Barinua K. Gbaranor, Nazor P. Barinua-Gbaranor, Clinton D. Orupabo, Kalio DGB, Peace E. Okpara (2020). Determinants of Delayed Desired Conception among Reproductive Women of Port Harcourt. *IOSR Journal of Dental and Medical Sciences*. Volume 19, Issue 3 Ser.1
- III. Moses-Ashike, H. (2011), "Cashless Economic can Reduce Risk of Carrying Huge Cash", [Online]

Available:

<http://www.businessdayonline.com/.../22217>.

- IV. Omotunde Muyiwa, Sunday Tunmibi, and John-Dewole A.T(2013). Impact of Cashless Economy in Nigeria. *Greener Journal of Internet, Information and Communication Systems*. Vol. 1 (2), pp. 040-043
- V. Roth, B. L. (2010). "The Future of Money: The Cashless Economy – Part 1". [Online] Available: <https://www.x.com/.../future-money-cashless-economy—part-i>.