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Knowledge, Attitude and Perception of Students Towards Abortion in Chrisland University

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Abstract

Abortion is regarded as a public and maternal health problem. In contemporary society, abortion remains a deeply divisive and complex issue, with implications for individual autonomy, reproductive rights, and public health. Among students, exploring knowledge, attitudes, and perceptions towards abortion is imperative given the lack of comprehensive understanding within this demographic. Despite being a demographic characterized by diversity in beliefs, values, and experiences, there exists a significant gap in research regarding how students perceive and navigate the multifaceted landscape of abortion. The aim of the study was to assess knowledge, attitude and perception of students towards abortion in Chrisland university. This is a quantitative research study using a cross-sectional design, selecting 310 undergraduate students from Chrisland university, Abeokuta, through a multi-stage sampling technique. Data collection involved structured questionnaires, with analysis carried out using SPSS version 23. More than half of the students (58.1%) of the participants fell in between the age group 16–19 years; in terms of gender, females accounted for a majority of the respondents (81.3%); majority of the participants had an average knowledge of abortion (91.3%); majority of the students (89.3%) had a negative attitude towards induced abortion; and most of the students (84.2%) agreed that inadequate sex education has affected abortion directly/indirectly. In conclusion, there were gaps in understanding abortion laws and safe practices, underscoring the need for better reproductive health education. Attitudes were varied by age, study department and education level.

Keywords: Abortion, attitude, induced abortion, knowledge, perception

INTRODUCTION

In today's world, abortion is a widespread problem. Attempting to induce your own abortion is illegal. Abortion evidence is readily apparent in towns and villages in developing countries, particularly in Nigeria, where underdeveloped neonates have been found beside public borrow-pits, behind maternity facilities, and along bush paths [1]. Abortion is also regarded as a historical practice that has been prevalent in human communities [2]. The World Health Organization estimates that 73 million induced abortions occur annually worldwide. Induced abortions result in about 29% of all pregnancies and 61% of all unintended pregnancies. A pregnancy can end naturally (a miscarriage) or purposely (an induced abortion). However, in the context of this work, Abortion refers to induced abortion [2]. Abortion is defined differently in many countries based on their legal systems [3]. The World Health Organization (WHO) describes an

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abortion as the removal of a fetus or embryo weighing less than 500 g from its mother. According to estimates, between 2010 and 2014, 5.7 million of the estimated 19 million pregnancies that result in unsafe abortions worldwide took place in low- and middle-income countries (LMICs) [4]. 90% of women in Africa reside in nations with restrictive abortion laws, and women under the age of 25 years account for 59% of all unsafe abortions performed in the continent [5, 6]. Contrarily, abortion is a frequent medical procedure. When performed by a skilled individual, according to the WHO's recommended protocol, and for the appropriate duration of pregnancy, it is safe. One of the main, though avoidable, causes of maternal deaths and morbidities is unsafe abortion, making abortion a maternal and public health concern [7].

In 12 of the 54 African countries, abortion is illegal in all situations. As demonstrated by the Center of Reproductive Life's classification of nations into five categories based on how permissive their laws and policies are towards abortion, different countries have different abortion policies. Nigeria is one of the most conservative countries in Africa and South America according to this classification, with laws that forbid abortion under all circumstances. Unsafe abortion is a serious problem in Nigeria that does not receive the attention it deserves [8]. In Nigeria, unsafe abortion is a major problem that contributes between 30 and 40% of maternal deaths [8], notwithstanding the fact that abortion is illegal and therefore not subject to official statistics. A criminal act in Nigeria, abortion is not permitted unless it is done to preserve the mother's life. In Nigeria, there are two laws pertaining to abortion that vary based on the state. According to the sections of the penal and criminal codes in Nigeria, abortion is prohibited in Northern Nigeria by sections 232, 233, 234, 235, and 236 of the Penal Code and in Southern Nigeria by sections 228, 229, 230, 297, and 328 of the Criminal Code. In Nigeria, an abortion is only permissible if the mother's life would be in jeopardy as a result of giving birth [9].

The term "abortion" describes the process of ending a fetus's conception in a pregnant woman's womb by removing the placenta, fetal tissues, and fetal membranes [10]. According to a study by Kortsmit *et al*., 49 areas reported 629,898 abortions to the CDC [11]. 48 of these reporting areas provided data annually between 2010 and 2019, giving the data required to report trends consistently. In these 48 areas, the abortion ratio was 195 abortions per 1,000 live births in 2019 and the abortion rate was 11.4 abortions per 1,000 women aged 15 to 44 years. The number of abortions increased by 2%, the abortion rate by 0.9%, and the abortion ratio by 3% between 2018 and 2019. After hitting a record low in 2017, the overall rate of reported abortions decreased from 2010 to 2019, but between 2017 and 2019, the rate of reported abortions increased. In the US, induced abortion results from about 18% of pregnancies. It is impossible to decide whether or not abortion should be legalized without taking into account how complicated the problems involved are. The term "abortion" describes the process of ending a fetus's conception in a pregnant woman's womb by removing the placenta, fetal tissues, and fetal membranes [10]. It is a long-standing practice that is recognized by courts and society in many parts of the world.

According to a study on Jordanian medical and health science students' attitudes toward abortion, these students held a variety of opinions. The majority of students, however, showed a conservative stance on abortion. The mother was threatened by her pregnancy or she became pregnant after being raped, according to the two justifications for abortion that the students saw fit. Students in the same study also believed that abortion amounted to the murder of an unborn child. Nonetheless, they believed that the danger posed to the mother's life during her pregnancy was even greater [12].

A number of studies have looked at women's attitudes, behaviors, and knowledge regarding the prevalence of abortion in Sub-Saharan Africa as well as the causes and effects of induced abortion among women of reproductive age. Few studies have been conducted in Nigeria to investigate students' attitudes, knowledge, and perceptions regarding induced abortion in Nigerian universities. This study aims to close this gap.

Abortion is still a highly contentious and complicated topic in modern society, with ramifications for public health, reproductive rights, and individual autonomy. Examining students' knowledge, attitudes,

and perceptions regarding abortion is crucial because this group lacks a thorough understanding of the topic. Although this demographic is marked by a diversity of experiences, values, and beliefs, there is still a substantial research vacuum concerning the ways in which students understand and negotiate the complex terrain of abortion.

The key to solving this problem is realizing how students view abortion in relation to their own personal convictions, social norms, and educational settings. Although academic institutions are centers for critical thinking and intellectual exchange, little research has been done to systematically investigate students' knowledge of induced abortion, attitudes toward the subject, and perceptions of its underlying causes. This knowledge gap creates major obstacles to meeting students' needs for reproductive health and developing focused interventions and policies that promote their wellbeing.

Furthermore, a wide range of factors, such as socioeconomic, religious, cultural, and educational influences, shape students' attitudes and perceptions regarding abortion. There is little research that examines the complex interactions between these variables and how they affect students' attitudes and beliefs regarding abortion, despite the diversity of student populations. Therefore, in order to create specialized interventions that cater to each student's individual needs and viewpoints, it is still imperative to look into the ways in which these contextual factors interact with students' knowledge levels and opinions regarding abortion.

In order to address the root causes of abortion's stigma and prevalence, it is imperative to comprehend the attitudes of students toward the procedure. Few studies explicitly investigate students' perceptions of the underlying causes of abortion within their own contexts, despite the fact that the literature currently in publication sheds light on larger societal factors that influence abortion rates, such as socioeconomic inequality and access to reproductive health care. Researchers can pinpoint areas for focused advocacy and intervention aimed at removing structural barriers to reproductive health services and encouraging students to make educated decisions by clarifying these perceived causes.

OBJECTIVES

Broad Objectives of the Study

- To assess the knowledge, attitude and perception of students towards abortion in Chrisland university [13].

Specific Objectives of the Study

- To determine the level of knowledge of Chrisland students towards abortion.
- To determine the level of attitudes of Chrisland students towards abortion.
- To assess the perception of Chrisland students towards abortion.
- To assess the socio demographic characteristics associated with knowledge, attitude and perception of abortion among students in Chrisland University.

Research Questions

- What is the level of Knowledge of Chrisland students towards abortion?
- What is the level of attitudes of Chrisland students towards abortion?
- What is the perception of Chrisland students towards Abortion?
- What are the socio demographic characteristics associated with knowledge, attitude and perception of abortion among students in Chrisland University?

Research Hypothesis

- There is no significant association between the sociodemographic characteristics and the level of knowledge on abortion.
- There is no association between level of knowledge of abortion and the level of attitude towards abortion.

- There is no significant association between the sociodemographic characteristics and the level of attitude towards abortion.

Operational Definition of Terms

- *Abortion:* Abortion is the termination of a pregnancy by removal or expulsion of an embryo or fetus.
- *Attitude:* a feeling or opinion about something or someone, or a way of behaving that is caused by this.
- *Knowledge:* Knowledge refers to a theoretical or practical understanding of a subject.
- *Perception:* Perception refers to the process by which individuals become aware and process the stimuli around them.
- *Students:* a person following a course of study, as in a school, college, university.

METHODOLOGY

This section explores the research methodology used for the research study under the following sub headings: Design, Setting, Target population, Sampling and sampling technique, Inclusion criteria, Exclusion criteria, Instrument for data collection, Validity of instrument, Reliability of instrument, Method of data collection, Method of data analysis, and Ethical consideration.

Design

A cross-sectional study design was employed for this study.

Setting

Chrisland University is one of the higher institutions located in Abeokuta, Ogun state and is owned and run by a private sector in Nigeria. It was founded in September 17, 2015 and is accredited by the national Universities commission. Chrisland University has over 1500 students. Today, Chrisland University hosts the following colleges; College of Arts, Management and social sciences, College of Natural and applied Sciences, College of Basic Medical sciences and college of Law.

Target Population

The study population comprised of students in Chrisland University only.

Sampling and Sampling Technique

This research was a cross-sectional study conducted among Chrisland University students in Nigeria. A multi-stage sampling technique was used to select participants.

- *Stage 1:* Colleges to be used were selected using a purposive sampling technique.
- *Stage 2:* Simple random sampling was used to select the department to be used.
- *Stage 3:* Simple random sampling technique was then used in distributing questionnaires to eligible and consenting participants.

The samples were taken from four colleges: College of Arts and management sciences, College of basic medical sciences, College of Natural and applied sciences, and College of Law. Three departments, each were selected from college of basic medical science, college of natural and applied sciences, college of arts and management sciences and one department from the college of law using simple random technique (Table 1).

The sample size for this study was determined using Yamane's sample size formula.

The estimated population size is 905 students.

Using Yamane's formula,
$n=N\div(1+N(e)2)$

Where,
n is the sample size,
N= the total population size, and
e= level of precision (5%=0.05).

n={905÷(1+905(0.5)2)}
n=(905÷1+905(0.05)2
n=(905÷1+905(0.0.0025)
N=(905÷1+2.263)
277.4

Adding 10% attrition rate will give {(10/100)×277.4}=27.74
Total =277.4+27.74=305.1
Approximately 305 students.

The proportional allocation for each department was calculated as follows (Table 2):

Inclusion Criteria

- Participant must be currently enrolled as a student in Chrisland University.
- Participants must be able to understand and respond to the survey questions of the study.
- Participant who volunteered to participate in the study after receiving information about the research objectives.

Table 1. The estimated population of students in each department.

S.N.	Department	Population
1.	Faculty of nursing	400
2.	Medical laboratory science	100
3.	Public health	50
4.	Mass communication	40
5.	Psychology	60
6.	Criminology	50
7.	Computer science	50
8.	Biochemistry	40
9.	Microbiology	65
10.	Law	50
	Total	905

Table 2. The sample size calculation.

S.N.	Departments	Estimated Population	Proportional Allocation	Sample Size
1.	Faculty of Nursing	400	(400×305) ÷905	135
2.	Medical laboratory science	100	(100×305) ÷905	33
3.	Public health	50	(50×305)÷905	17
4.	Mass communication	40	(40×305)÷905	14
5.	Psychology	60	(60×305)÷905	20
6.	Criminology	50	(50×305)÷905	17
7.	Computer science	40	(40×305)÷905	14
8.	Biochemistry	65	(65×305)÷905	22
9.	Microbiology	65	(65×305)÷905	22
10	Law	50	(50×305)÷905	17
	Total	905		311

A total of 311 participants were selected.

Exclusion Criteria

- Participants who are unable to provide informed consent.
- Participants who decline to participate in the study.

INSTRUMENT FOR DATA COLLECTION

All data were collected using a mixed questionnaire consisting of adapted questions from existing research studies and self-developed questions. The interviewer-administered questionnaire consisted of 39 questions, including closed-ended, Yes and No and 3-point scale response options. The questionnaire was divided into four sections: Section A consisted of 7 questions assessing participants socio-demographic information; Section B consisted of 12 questions exploring Knowledge of Abortion among the students with a Yes or No option; Section C was adapted from the attitude section of the questionnaire used in a study titled Attitudes of medical and health sciences students towards abortion in Jordan [14]. It consisted of an array of 10 questions with a three-point Likert scale answer to assess the attitude of students towards Abortion, this section was adapted from a study on Attitudes of medical and health sciences students towards abortion in Jordan [14]. Section D consisted of 10 questions with a three-point Likert scale answer assessing students' perception of abortion.

Validity of Instrument

Content validity was done to assess the instruments content validity by evaluating if it accurately covers the key aspects of knowledge, attitude and perception of abortion amongst Chrisland university students. Face validity was done to consider if the instrument measures what it intends to measure at face level. The questionnaire was also assessed by the supervisor and other experts in nursing research.

Reliability of Instrument

Pre-test was carried out on the instrument for data collection among Crescent University students to evaluate the validity of the questions before actual data collection. Reliability of the test was done using Cronbach's α. A value of 0.86 was gotten which indicated acceptable internal consistency.

Method of Data Collection

A self-administered questionnaire was used in this survey to gather information from a predetermined number of randomly selected samples that were dispersed throughout the university's four colleges and randomly chosen departments within those colleges. The researcher also approached and distributed the questionnaire to students in the chosen departments after importing the questionnaire into Google Form and making it available as a link to the departmental offices. The purpose of the questionnaire was to evaluate the knowledge, attitudes, and perceptions of the students regarding abortion. A 4-section questionnaire with standardized questions about respondents' demographics, knowledge, attitudes, and perceptions of abortion was completed by each participant. A total number of 311 students was covered. Confidentiality of the findings was strictly maintained on all collected data.

Method of Data Analysis

Data was analyzed with the use of both descriptive and inferential statistics. Hypotheses were tested using inferential statistics. Data analysis was done using SPSS software. Data was analyzed using descriptive statistics such as frequencies, percentage and means. Chi-square test was used to determine the association between the independent variables and abortion. To determine the Level of Knowledge, out of the 12 knowledge questions, 8 and above indicated good level of knowledge, 4–7 indicated average, and less than 4 indicated low level of Knowledge.

Ethical Consideration

Informed consent was sought from all the participants of the study and confidentiality of the information provided by all participants of the study was maintained. Ethical approval for this study was sought from the Ethical Committee of Ogun State Ministry of health, Abeokuta. And also, an approval letter was sought from Chrisland University, before administering the questionnaire to the participants.

RESULTS

Introduction

This section discusses the various investigations and explorations of the data collected, the analytical methods employed and the resulting findings of the study. The objectives of this section include data description and preparation, descriptive statistics, inferential statistics, data presentation, interpretation and implication.

The Socio-Demographic Characteristics of the Participants

The Socio demographic characteristics of the respondents included their Age, gender, religion, Family education, residence, Department, and year of study. Table 3 shows the Socio-demographic characteristics of a total of 310 students from Chrisland University.

Table 3. The Socio-demographic characteristics of the participants.

Socio-demographic data	Frequency	Percentage (%)
Age (years)		
16–19	180	58.1
20–24	123	39.7
25 and above	7	2.3
Gender		
Male	58	18.7
Female	252	81.3
Religion		
Islam	27	8.7
Christianity	283	91.3
Family education		
Both illiterate	12	3.9
Both literate	279	90
One literate and the other illiterate	19	6.1
Residence		
Rural	32	10.4
Urban	233	75.4
Semi urban	44	14.2
Department		
Mass communication	23	7.4
Nursing	138	44.5
Law	13	4.2
Medical laboratory science	25	8.1
Physiotherapy	13	4.2
Criminology	12	3.9
Public health	8	2.6
Political science	18	5.8
Microbiology	19	6.1
Computer	17	5.5
Accounting	24	7.7
Year of study		
100 level	113	36.5
200 level	50	16.1
300 level	73	23.5
400 level	62	20
500 level	12	3.9

More than half of the students (58.1%) of the participants fell in between the age group 16–19 years; in terms of gender, females accounted for a majority of the respondents (81.3%); with regards to Religion, most of the students recorded Christianity as their religion. In terms of family education, 90% of the participants reported that both parents were literate. Almost half of the respondents (44.5%) were from the department of nursing with more than one third of the participants (36.5%) coming from 100 level.

Knowledge of Abortion Among Chrisland University students

Table 4 reveals the participants' knowledge on abortion. Among the 310 respondents, almost all the students (94.8%) had heard about abortion with less than a two third (61.6%) of the students having heard of induced abortion. Most of the participants (80.6%) responded that Nigeria has an abortion law, with more than half (59.4%) believing that Abortion is not allowed for any reason in Nigeria. Almost all the participants know that people die from the complications of a poorly carried out abortion (98.7%), abortion refers to the termination of live fetus prior to 20 weeks (92.9%), abortion carried out either by self-medication or with untrained staff (98.1%), abortion is a public and maternal health issue (86.5%), abortion cannot be done anytime during pregnancy (86.1%), with only 29% of the participants reported that they know of abortion medication or substance a lady can use. Figure 1 reveals that almost all the participants had an average knowledge of Induced abortion (91.3%).

Table 4. The knowledge of induced abortion of the participants.

Knowledge questions	Yes	No
Have You ever heard about abortion?	294 (94.8%)	16 (5.2%)
Have You heard of induced abortion?	191 (61.6%)	119 (38.4%)
Nigeria has abortion law	250 (80.6%)	60 (19.4%)
Abortion is not allowed for any reason in Nigeria	184 (59.4%)	126 (40.6%)
People die from the complications of a poorly carried out abortion	306 (98.7%)	4 (1.3%)
Abortion refers to the termination of live fetus prior to 20 weeks	288 (92.9%)	22 (7.1%)
The current law allows abortion If the pregnancy endangers life of the woman or fetus	248 (80%)	62 (20%)
The current law doesn't allow abortion if the mother is financially unable to raise the child	232 (74.8%)	78 (25.2%)
Abortion carried out either by self-medication or with untrained staff	304 (98.1%)	6 (1.9%)
Do you know of any abortion medication or substance a lady can use?	90 (29%)	220 (71%)
Abortion is a public and maternal health issue	268 (86.5%)	42 (13.5%)
Abortion cannot be done any time during pregnancy	267 (86.1%)	43 (13.9%)

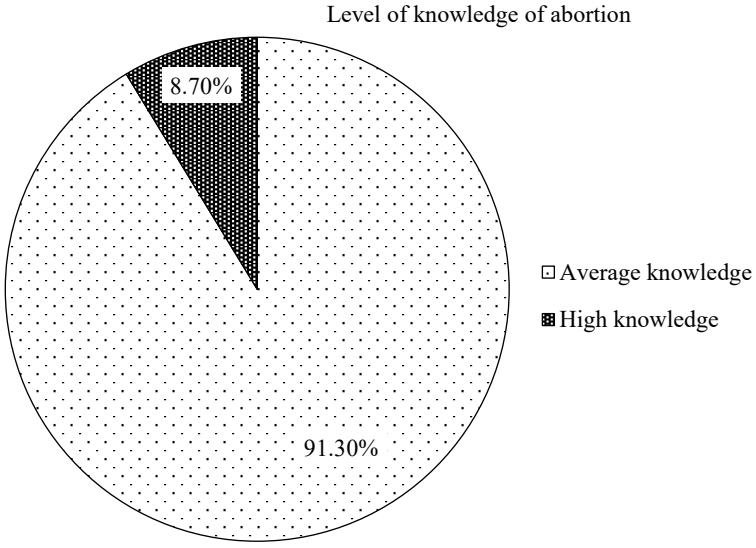

Figure 1. The level of knowledge on abortion.

Figure 2 reveals that in terms of level of Knowledge; in relations age, those who were within the age bracket 16–19 years had the highest prevalence of average and higher Knowledge of abortion, 166 and 14 participants respectively. Figure 3 reveals that in terms of gender, females had a higher level of knowledge. Figure 4 reveals that in terms of religion, those who were Christians had a higher level of knowledge on abortion.

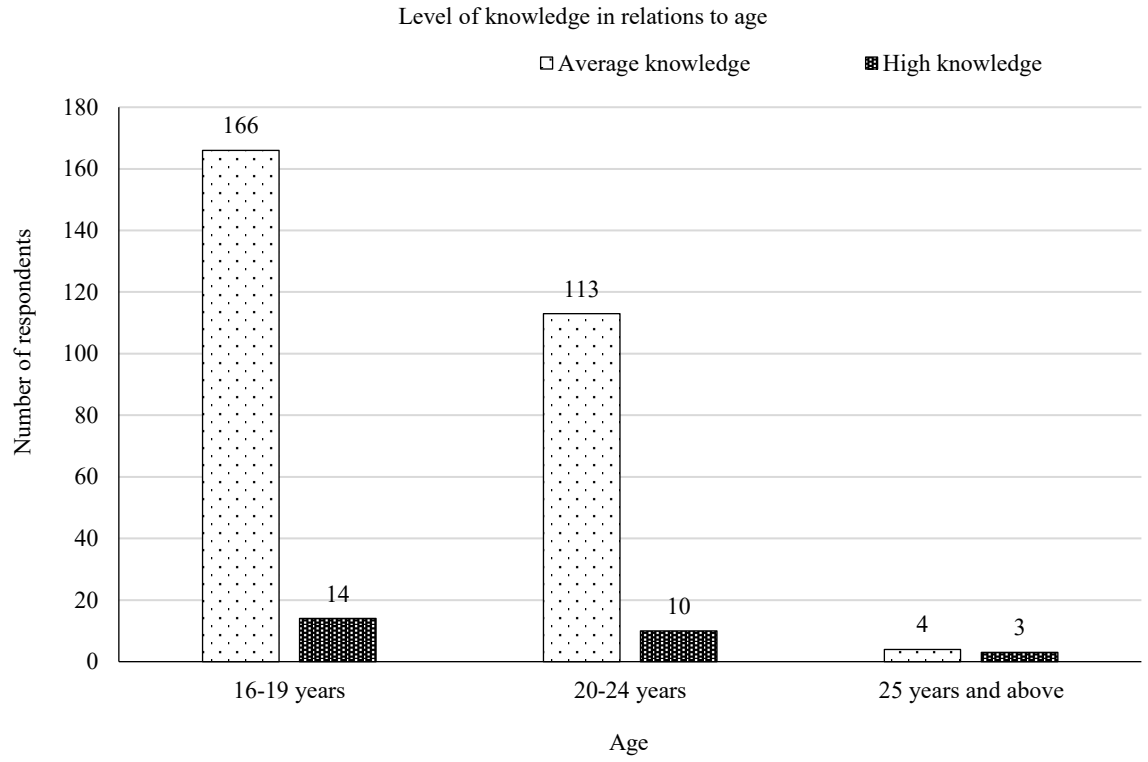

Figure 2. The level of knowledge of abortion in relations to age.

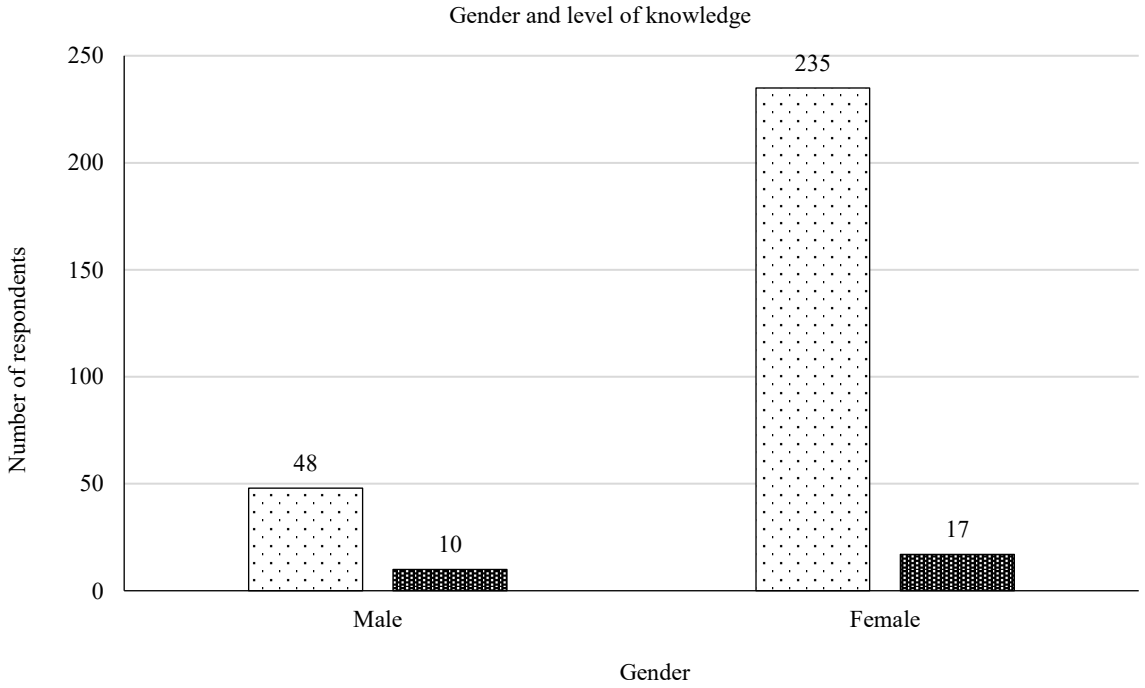

Figure 3. The level of knowledge in relations to gender.

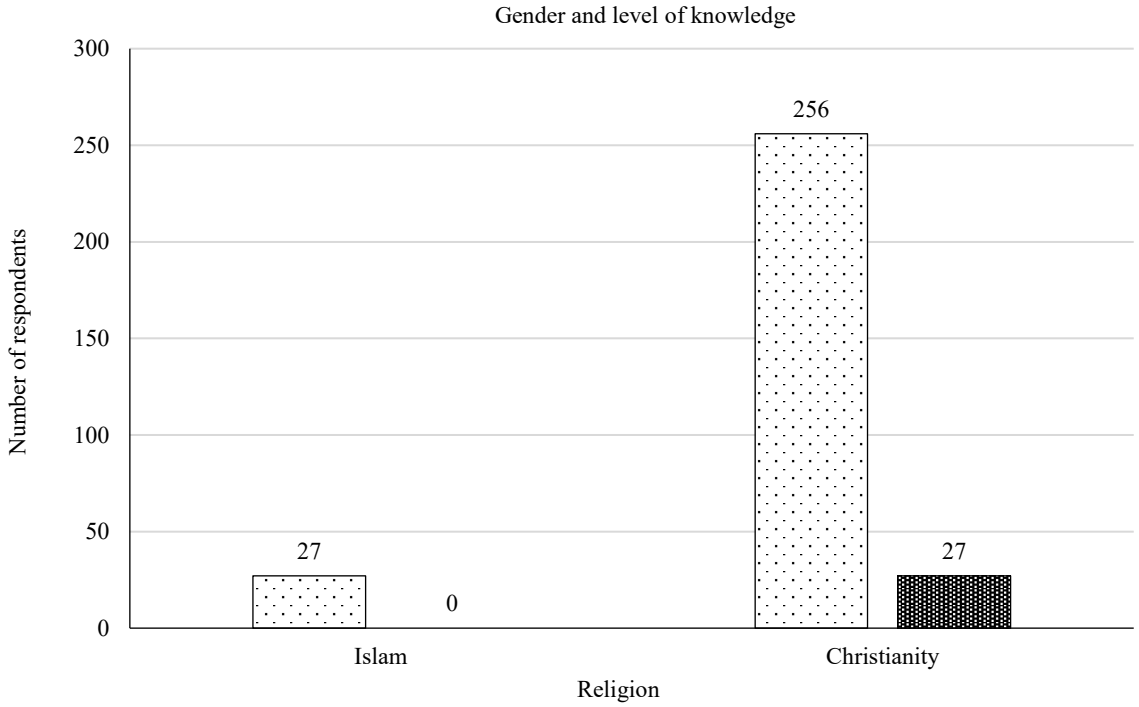

Figure 4. The Level of knowledge in relations to religion.

Table 5. The attitude of Chrisland students towards abortion.

Attitude questions	Agree	Neutral	Disagree
Abortion is an accepted way to solve unwanted pregnancy	40 (12.9%)	103 (33.2%)	167 (53.9%)
A mother should feel obligated to bear a child she has conceived	229 (74.4%)	54 (17.5%)	25 (8.1%)
Every conceived child has the right to be born	247 (79.7%)	47 (15.2%)	16 (5.2%)
Abortion is permissible if pregnancy is a threat to a mother's life	228 (73.5%)	70 (22.6%)	12 (3.9%)
Abortion must not be considered murder	154 (49.7%)	104 (35.5%)	52 (16.8%)
People should not look inferior to women who choose to have an abortion	216 (69.7%)	78 (25.2%)	16 (5.2%)
Abortion should be an option available to unmarried pregnant adolescents	43 (13.9%)	84 (2.1%)	183 (59%)
Discussion with people about abortion is a social flaw	143 (46.1%)	72 (23.2%)	95 (30.6%)
Laws and legislation will support abortion in the future because	123 (39.7%)	108 (34.8%)	79 (25.5%)

Attitude of Chrisland Students Towards Abortion

Table 5 shows the distribution of the participants' responses on their attitudes towards abortion. More than half of the participants (53.9%) disagreed against the statement 'Abortion is an accepted way to solve unwanted pregnancy', more than two third of the participants (74.4 and 79.7%) agreed that a mother should feel obligated to bear a child she has conceived and also every conceived child has the right to be born respectively. Most of the students (73.5%) agree that abortion is permissible if the pregnancy is a threat to the mother's life, more than half of the participants disagreed that abortion should be made accessible for unmarried pregnant adolescents. Almost half (46.1%) of the participants regard discussion with people about abortion as a social flaw. About 51.9% of the participants agreed that abortion should be prevented because it is murder while a quarter of the participants agreed abortion should be prevented because it is against their religion. Surprisingly, only less than a quarter (19.4%) of the participants not reported that they were not against abortion. Figure 5 reveals that majority of the students (89.3%) had a negative attitude towards induced abortion. Figure 6 reveals that those within the age bracket 16–19 years had the highest negative attitude towards abortion, Figures 7 and 8 reveal that the female participants had the highest level of negative attitude towards abortion. Figure 9 also reveals that the respondents who were Christians had the highest level of negative attitude towards abortion.

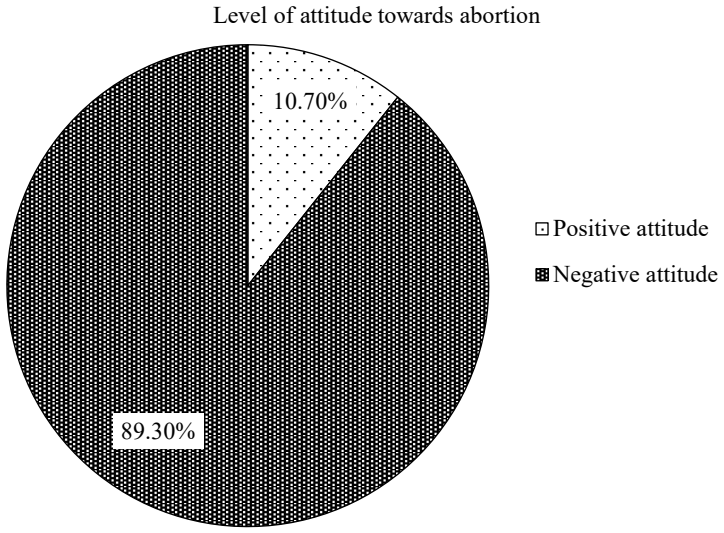

Figure 5. The level of attitude towards abortion.

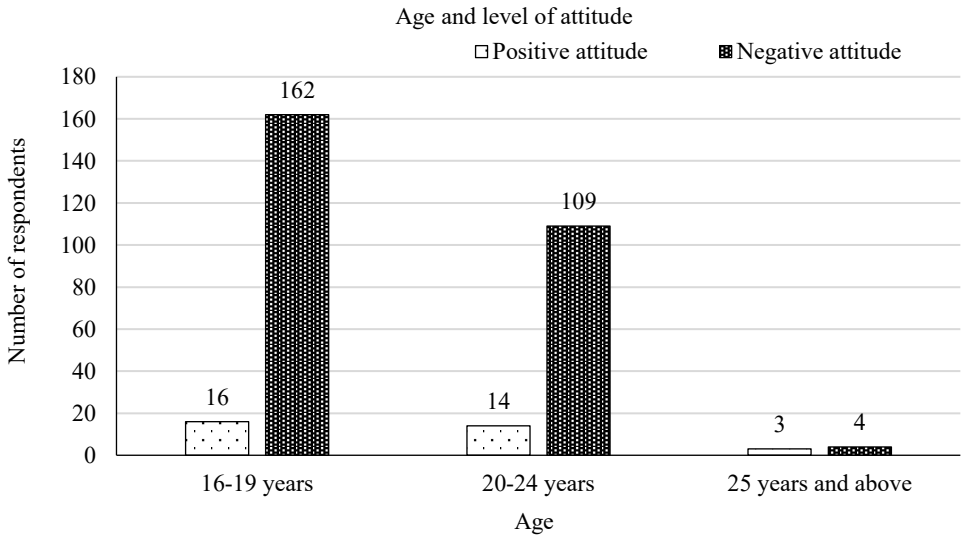

Figure 6. The level of attitude towards abortion in relations to the age of the participants.

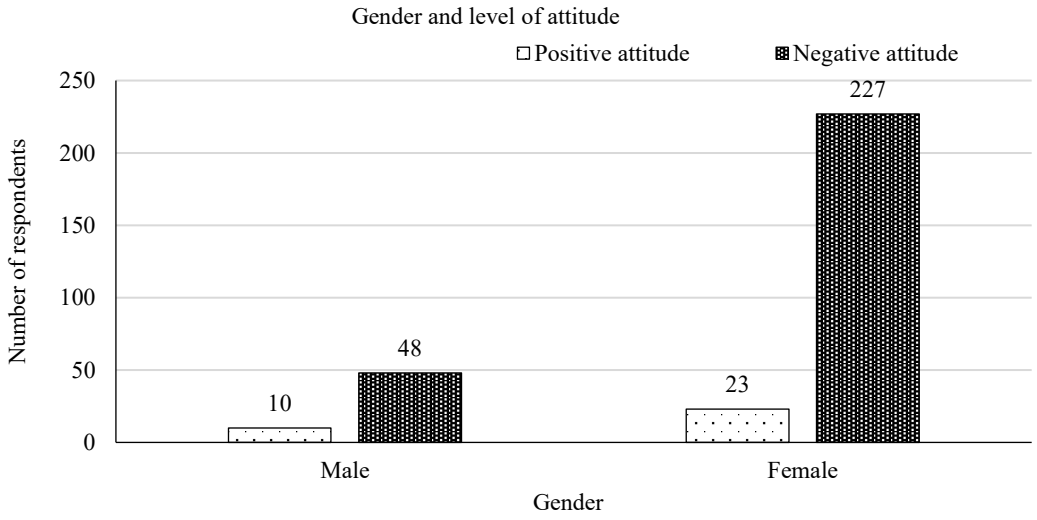

Figure 7. The level of attitude towards abortion in relations to the gender of the participants.

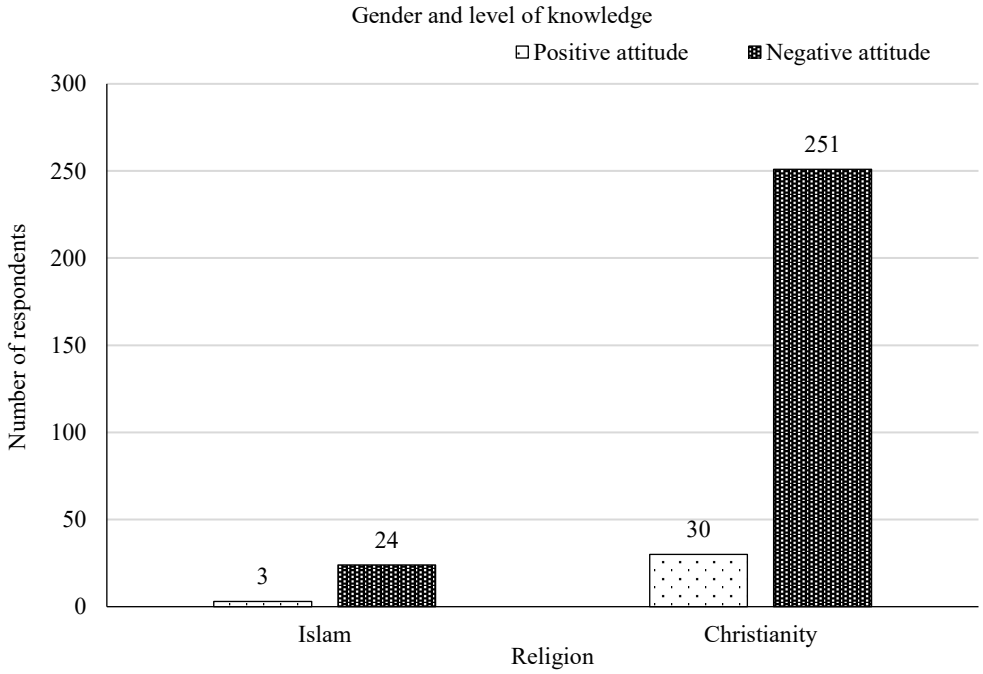

Figure 8. The level of attitude towards abortion in relations to the religion of the participants.

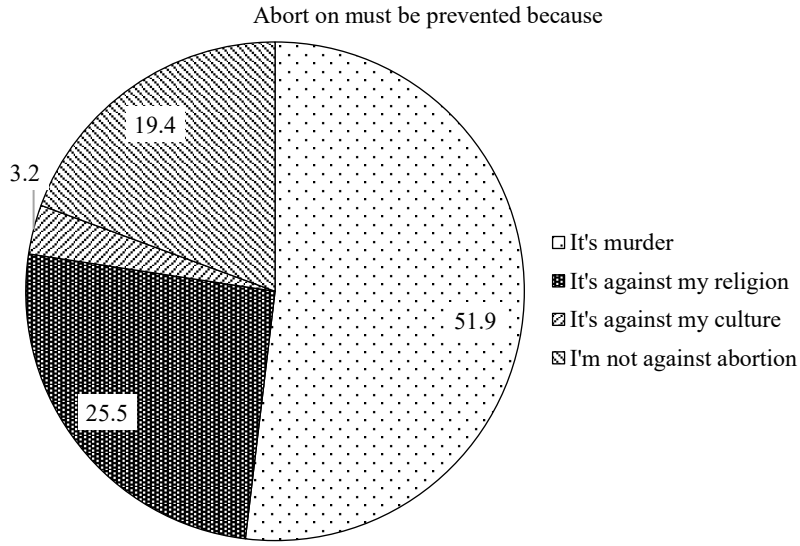

Figure 9. Reasons for why abortion must be prevented.

The Perception of Chrisland Students Towards Abortion

Table 6 shows the distribution of the participants' responses on their perception of Abortion. More than half of the participants (55.5%) disagreed to the legalization of abortion in every part of the country. When asked for the possibility of its non-legalization, about one third (36.1%) of the participants agreed that legalization of abortion is not possible in Nigeria. When asked if it will encourage pre-marital sex and promiscuity, quite a large proportion of the participants (76.5%) agreed that legalization of abortion will encourage pre-marital sex and promiscuity. More than half of the participants (54.2%) also disagreed that married pregnant women to be free to have an abortion. Though around a half of the participants (51.9%) agreed that people should not discriminate against women who choose to have abortion, 59% of the participants disagree to abortion as a good way of solving unwanted pregnancies. Lastly, most of the students (84.2%) agreed that inadequate sex education has affected abortion directly/indirectly.

Table 6. The perception of Chrisland students towards abortion.

Perception questions	Agree	Neutral	Disagree
Abortion should be legalized in every part of the Country	58 (18.7%)	80 (25.8%)	172 (55.5%)
The married pregnant women should be free to have an abortion	63 (20.3%)	79 (25.5%)	168 (54.2%)
People should not discriminate against women who choose to have abortion	161 (51.9%)	120 (38.7%)	29 (9.4%)
Abortion is a good way of solving unwanted pregnancy	52 (16.8%)	75 (24.2%)	183 (59%)
Abortion is wrong no matter the circumstances	115 (37.1%)	115 (37.1%)	80 (25.8%)
Abortion is done to avoid stigma	123 (39.7%)	118 (38.1%)	69 (22.3%)
Legalization of abortion will encourage pre-marital sex and promiscuity	237 (76.5%)	51 (16.5%)	22 (7.1%)
Abortion is done due to desire to finish school	73 (23.5%)	116 (37.4%)	121 (39%)
Inadequate sex education has affected abortion directly/ indirectly	261 (84.2%)	46 (14.8%)	3 (1%)
Legalization of abortion is not possible in Nigeria	112 (36.1%)	147 (47.4%)	51 (16.5%)

Table 7. The association between the socio-demographics characteristics and the level of knowledge of abortion among Chrisland students.

Variable	Value	df	p-value
Age	10.514[a]	2	0.005
Gender	6.532[a]	1	0.11
Religion	2.822[a]	1	0.093
Family education	2.347[a]	2	0.309
Residence	12.189[a]	2	0.002
Department	61.448[a]	10	0.000
Year of study	54.186[a]	4	.000

Hypothesis 1

H_0: There is no significant association between the socio demographics characteristics and the level of knowledge of abortion among Chrisland students.

Table 7 reveals the results of Chi-square test conducted to test the significant relationship between the socio demographics characteristics (Age, Gender, Religion, family education, residence, department and year of study) and the knowledge of abortion among 310 students in Chrisland University.

When analyzed, the Chi-square revealed that there was no significant association between gender, Religion, Family education and level of knowledge of abortion ($p>0.05$), there was a significant association between Age, Area of residence, department of study, level of study and the level of knowledge of abortion ($p<0.05$).

Hypothesis 2

H_0: There is no association between the level of attitude towards abortion and the sociodemographic characteristics.

Table 8 reveals the results of Chi-square test conducted to test the significant relationship between the level of attitude of abortion and the sociodemographic characteristics among 310 students in Chrisland University.

The result of the Chi-square revealed that there was no significant association between Age, religion, family education, residence and the level of attitude ($p>0.05$). It also revealed that there is a significant association between Gender, department, year of study and level of attitude ($p<0.05$).

Hypothesis 3

H_0: There is no association between level of knowledge of abortion and the level of attitude towards induced abortion.

Table 8. The association between the level of attitude and the sociodemographic characteristics.

Variable	Value	df	p-value
Age	8.171[a]	2	0.17
Gender	3.182[a]	1	.074
Religion	.005[a]	1	.944
Family education	1.955[a]	2	.376
Residence	3.043[a]	2	.218
Department	16.762[a]	10	.080
Year of study	9.675[a]	4	.046

Table 9. Relationship between level of knowledge and level of attitude.

Variable	Value	Df	p-value
Level of knowledge and level of attitude	.520[a]	1	.471

Table 9 reveals the results of Chi-square test conducted to test the significant relationship between the level of knowledge of abortion and the level of attitude among 310 students in Chrisland University.

The result of the Chi-square revealed that there is no significant association between the level of knowledge and the level of attitude of abortion ($p>0.05$).

DISCUSSION

The aim of this study was to assess the knowledge, attitude and perception of abortion among Chrisland students. This section consists of discussions on knowledge of sociodemographic characteristics, Knowledge on abortion, attitude towards abortion, perception towards abortion, and the hypothesis.

Socio Demographic Characteristics of the Respondents

The majority of the students (58.1%) fell within the age range of 16–19 years, indicating that the students are mostly in their early to mid-teens. This age group is significant because it is during this period that students are likely to be exposed to various influences and information about abortion. In terms of gender, females accounted for the majority of the respondents (81.3%), which is consistent with the general trend in many societies where women are more likely to be involved in reproductive health issues. This gender imbalance could be due to various factors such as gender roles, social norms, and educational opportunities. Regarding religion, most students were identified as Christians, which is also consistent with the general religious demographics in Nigeria. This could influence the students' attitudes and beliefs about abortion, as religious beliefs often play a significant role in shaping individuals' perspectives on reproductive health issues. In terms of family education, almost all (90%) of the participants reported that both parents were literate. This suggests that the students come from families where education is highly valued and that both parents have a good level of educational attainment. This could have an impact on the students' educational aspirations and career choices. The department of nursing accounted for almost half (44.5%) of the respondents, which is not surprising given the university's focus on healthcare education. Additionally, more than one third (36.5%) of the participants were from the 100 level, indicating that the majority of the students are in their first year of study.

The Knowledge of Abortion Among Chrisland Students

In terms of the level of knowledge, the results show that 91.3% of the students had an average level of knowledge about induced abortion. This indicates that the students have a generally good understanding of the basics of induced abortion. This was consistent to a study which revealed that the overall knowledge of students regarding safe abortion was 68.4% [15]. Also, females in this study had a higher level of knowledge scores than males. This finding is similar to the findings from a study on knowledge of and attitude towards abortion among adolescents in PDR LOA in which females had a

higher level of knowledge [16]. This may be due to various factors such as gender roles, social norms, and educational opportunities. The results also reveal that younger students aged 16–19 years had the highest prevalence of average and higher knowledge of abortion compared to older age groups. This suggests that younger students may be more informed about abortion due to their age and stage of education. Lastly, Christian students had a higher level of knowledge on abortion compared to students of other religions. This could be attributed to religious beliefs and values that influence the students' understanding of abortion. Almost all the students (94.8%) had heard about abortion, although only 61.6% had heard of induced abortion specifically. These findings were in contrast to a study on knowledge of and attitudes towards abortion among adolescents in Lao PDR which revealed that one-third of respondents (31.5%) were aware of the concept induced abortion [16]. Furthermore, of the participants who had heard of abortion, female students demonstrated a higher level of knowledge on abortion compared to male students. This suggests that while the students are familiar with the concept of abortion, there may be some confusion about the different types of abortion. The research study indicates that a significant majority of students (80.6%) are aware that Nigeria has an abortion law. This indicates that the students are generally aware of the legal framework surrounding abortion in Nigeria. However, despite almost all the respondents having an average knowledge on Abortion, there is a prevalent misconception, as 59.4% believe that abortion is completely prohibited. In reality, Nigerian law allows abortion under specific circumstances, such as to save the life of the mother. This prevalent misconception highlights a gap in knowledge that could influence students' perceptions and decisions regarding reproductive health, underscoring the need for improved education and accurate information dissemination on this sensitive issue. This study also revealed that nearly all students (98.7%) are aware that poorly performed abortions can lead to fatal complications, and a significant majority (92.9%) correctly understand that abortion involves the termination of a live fetus before 20 weeks of gestation. These findings suggest that students possess a substantial awareness of the medical risks associated with unsafe abortions, reflecting a good understanding of the potential dangers. Additionally, their knowledge of the legal definition of abortion indicates a solid grasp of the technical and legal aspects. This level of awareness is crucial for informed decision-making and underscores the importance of comprehensive reproductive health education, which can contribute to reducing the incidence of unsafe abortions and their associated risks [5].

The study highlights that an overwhelming majority of students (98.1%) recognize the dangers associated with self-medication or abortions performed by untrained providers. Additionally, 86.5% of students understand that abortion is a significant public and maternal health issue. These findings suggest that students are aware of the critical importance of accessing proper medical care and trained professionals for abortions. Recognizing the risks of unsafe abortion practices indicates a strong comprehension of the need for safe and regulated medical procedures. Furthermore, acknowledging abortion as a public and maternal health issue reflects an understanding of its broader implications on society and the healthcare system [6].

Despite the fact that most of the participants had heard of abortion, it was revealed that only 29% of the participants reported that they know of abortion medication or substance a lady can use. This finding is similar to the findings from a study on knowledge of and attitude towards abortion among adolescents in PDR LOA in which only a few participants knew substances to be taken to induce abortion [16]. Despite a high awareness of the legal and health implications of abortion, this gap indicates that many students lack detailed information about how abortions are actually performed, particularly through medication. The lack of knowledge about specific methods and substances might make students more susceptible to misinformation or myths about abortion, which can further perpetuate unsafe practices.

Attitude Towards Abortion Among Chrisland Students

Of the adolescents who had average knowledge of abortion, most held negative attitudes towards abortion (89.3%), with a major difference between the male and female gender. The attitude findings were similar to a study on knowledge of and attitudes towards abortion among adolescents in Lao PDR,

which revealed that most participants held negative attitudes towards abortion but was in contrast with the difference between males and females' attitude towards abortion [16]. Students in this study varied in their views on abortion. Overall, more than half of the participants (53.9%) disagreed with the statement "Abortion is an accepted way to solve unwanted pregnancy", indicating a predominant rejection of abortion as a solution for unwanted pregnancies. A substantial majority (74.4%) agreed that a mother should feel obligated to bear a child she has conceived, and an even higher percentage (79.7%) agreed that every conceived child has the right to be born. These responses reflect a strong belief in the moral duty of carrying a pregnancy to term and a significant pro-life stance among the participants. Despite the general opposition to abortion, there is some recognition of exceptions. A large majority (73.5%) agreed that abortion is permissible if the pregnancy poses a threat to the mother's life, indicating a conditional acceptance of abortion in cases where the mother's health is at risk. Conversely, more than half of the participants disagreed that abortion should be made accessible for unmarried pregnant adolescents, reflecting a conservative stance on the issue of accessibility based on marital status. Social perceptions of abortion also reveal considerable stigma. These findings were in correlation to a study on Attitudes towards abortion and decision-making capacity of pregnant adolescents: perspectives of medicine, midwifery and law students in Accra, Ghana which reported that a large majority of respondents (89.0%) were not in favor of legislation that made abortion available on request to adolescents [17].

Nearly half (46.1%) of the participants regarded discussing abortion as a social flaw, highlighting the topic's sensitive and stigmatized nature within the community. Additionally, moral and religious objections play a significant role in shaping attitudes towards abortion. These findings were consistent with a study that revealed that open discussion of sexuality is still taboo and abortion remains a sensitive topic in Vietnam [4]. About 51.9% of participants agreed that abortion should be prevented because it is considered murder, emphasizing a strong moral opposition. A quarter of the participants cited religious reasons for preventing abortion, underscoring the influence of religious beliefs. Surprisingly, only a small fraction (19.4%) of the participants reported that they were not against abortion, indicating minimal support for abortion among the participants. Most of these findings are consistent with the findings from a study on attitudes of medical and health sciences students towards abortion in Jordan, where there was also a conservative attitude towards abortion [14]. The findings on the attitude towards abortion in this study was contrary to the findings from a study done in Ghana to assess attitudes towards abortion and decision-making capacity of pregnant adolescents: perspectives of medicine, midwifery and law students in Accra that found that most students generally held positive views towards abortion [17]. This may be due to the fact that there were differences among the academic disciplines used in the two studies.

Perception of Abortion Among Chrisland Students

More than half of the participants (55.5%) disagreed with the idea of legalizing abortion throughout the country, indicating a significant opposition to nationwide legalization. Additionally, about one-third of the participants (36.1%) expressed skepticism about the possibility of legalizing abortion in Nigeria, suggesting a prevalent belief that such a change in law is unlikely. The participants also expressed concerns about the social consequences of legalizing abortion. A substantial majority (76.5%) agreed that legalizing abortion would encourage pre-marital sex and promiscuity, reflecting a fear of potential moral decline. This concern extends to married women as well, with more than half of the participants (54.2%) disagreeing that married pregnant women should have the freedom to choose abortion, indicating a conservative stance on reproductive rights within marriage. Despite these strong reservations, there is some recognition of the need for empathy and non-discrimination. Around half of the participants (51.9%) agreed that people should not discriminate against women who choose to have an abortion, suggesting a level of support for the personal autonomy of women, even among those who oppose abortion. However, this is contrasted by the fact that 59% of the participants disagreed with the notion that abortion is a good way to solve unwanted pregnancies, indicating that, overall, abortion is still viewed negatively as a solution. This finding was in contrast to a study on Contraception practices among young unmarried women seeking abortion following unintended pregnancy in Ho Chi Minh

City, Vietnam, which revealed seeking an abortion was the solution for the women who had an unwanted pregnancy. The reasons given for seeking an abortion included the necessity to earn money and advance their careers and as they could not keep their pregnancy. It was also considered a solution because they could not get pregnant when they were not married without going against the tenets of Vietnamese culture. A significant concern highlighted by the participants is the impact of inadequate sex education. An overwhelming majority (84.2%) agreed that insufficient sex education has directly or indirectly affected abortion rates. This suggests a broad consensus that better sex education could play a crucial role in addressing the issue of unwanted pregnancies and potentially reducing the number of abortions.

Hypothesis 1

The null hypothesis states that there is no significant association between socio-demographic characteristics and the level of knowledge of abortion among Chrisland University students. The Chi-square test results, were used to evaluate this hypothesis by examining various socio-demographic factors such as age, gender, religion, family education, residence, department, and year of study among 310 students. Upon analysis, the Chi-square test results indicated that there was no significant association between certain socio-demographic characteristics (gender, religion, and family education) and the level of knowledge of abortion among the students. This finding is supported by $p>0.05$, suggesting that differences in gender, religious affiliation, and family education background do not significantly influence students' knowledge about abortion. In other words, male and female students, students from different religious backgrounds, and students from families with varying levels of education displayed similar levels of knowledge about abortion. However, the Chi-square test revealed significant associations between other socio-demographic characteristics (age, area of residence, department of study, and level of study) and the level of knowledge of abortion. This was evidenced by p-values less than 0.05. These findings suggest that:

There is a significant variation in knowledge levels about abortion across different age groups. Older students might have more exposure to information or more academic discussions surrounding abortion compared to younger students. Students' knowledge of abortion varies significantly depending on their area of residence. This could reflect differences in access to information, cultural attitudes, or educational resources between urban and rural areas or among different communities. The department or field of study significantly influences students' knowledge levels about abortion. For instance, students in health-related or social sciences departments might receive more comprehensive education on reproductive health, including abortion, compared to those in other fields. The level of study also shows a significant association with abortion knowledge. As students' progress in their academic journey, they may encounter more detailed and nuanced information about abortion through their coursework, research, and discussions, leading to greater knowledge.

The Chi-square test results partially support the null hypothesis. While no significant associations were found between gender, religion, and family education, significant associations were identified between age, area of residence, department of study, and level of study with the level of knowledge of abortion among Chrisland University students.

Hypothesis 2

The null hypothesis posits that there is no association between the level of attitude towards induced abortion and the sociodemographic characteristics of students at Chrisland University. The results of the Chi-square test, provide insights into the relationship between students' attitudes towards induced abortion and various sociodemographic factors, including age, religion, family education, residence, gender, department, and year of study. Upon analyzing the data, it was found that there is no significant association between several sociodemographic characteristics and students' attitudes towards induced abortion. Specifically, age was not significantly associated with attitudes towards abortion, suggesting that students' views on this issue do not vary substantially across different age groups. Similarly, religious affiliation did not show a significant influence on attitudes towards abortion, indicating that

despite the strong moral and ethical positions often associated with different religions, these did not translate into significant differences in attitudes among the students.

The level of education within the family also did not show a significant association with students' attitudes towards induced abortion. This implies that the educational background of students' families does not play a significant role in shaping their views on abortion. Additionally, the area of residence, whether urban or rural, did not significantly impact students' attitudes towards abortion, indicating that geographical differences do not influence students' perspectives on this issue. However, the analysis revealed significant associations between other sociodemographic characteristics and attitudes towards induced abortion. Gender was significantly associated with attitudes towards abortion, suggesting that male and female students hold different views on this issue. This finding reflects broader societal and cultural norms that influence men and women differently regarding reproductive rights and abortion. The department of study also showed a significant association with attitudes towards induced abortion. Students from different academic disciplines likely receive varied exposure to topics related to abortion, with those in health sciences or social sciences possibly having more comprehensive education and discussions on the subject. This educational exposure influences their attitudes differently compared to students in other fields. Furthermore, the level of study, or year of study, was significantly associated with attitudes towards induced abortion. This indicates that as students' progress through their academic careers, their attitudes towards abortion may change. This shift could be due to increased exposure to diverse perspectives, academic discussions, and the development of critical thinking skills over time.

Hypothesis 3

The null hypothesis (H0) posits that there is no association between the level of knowledge of abortion and the level of attitude towards induced abortion among students at Chrisland University. The analysis revealed that there is no significant association between the level of knowledge about abortion and the level of attitude towards induced abortion among the students, as indicated by a p-value greater than 0.05. This finding suggests that the amount of information or knowledge that students have about abortion does not significantly influence their attitudes towards the practice. In other words, students with higher levels of knowledge about abortion do not necessarily have more positive or negative attitudes towards it compared to those with lower levels of knowledge. This lack of significant association implies that other factors beyond knowledge might be more influential in shaping students' attitudes towards induced abortion. These factors could include cultural, religious, moral, and personal beliefs that are not directly linked to the factual knowledge of the topic. This result is intriguing as it challenges the common assumption that increasing knowledge and awareness about a topic automatically leads to more informed and potentially more favorable attitudes. In the case of induced abortion, it appears that students' attitudes are complex and influenced by a broader array of factors beyond just their level of knowledge.

Implication of Findings to Nursing

The findings from this study have several important implications for nursing, particularly in the realms of education, patient care, policy advocacy, and community outreach. The socio-demographic characteristics, knowledge levels, and attitudes towards abortion among Chrisland University students highlight areas where nursing professionals can have a significant impact.

Firstly, the data indicates a high awareness of abortion but gaps in specific knowledge about abortion methods. This suggests the need for more detailed and comprehensive sex education programs. Nursing curricula should include modules that cover all aspects of reproductive health, including safe abortion practices and legal aspects, to fill these knowledge gaps. Additionally, given that students aged 16–19 years showed higher levels of knowledge about abortion, educational initiatives could be tailored to reinforce and expand this knowledge early in their academic journey.

Interdisciplinary training is also crucial. The significant influence of religious and cultural factors on attitudes towards abortion underscores the need for nursing education to include training on ethical

decision-making and cultural sensitivity. This will help nurses navigate the complex moral and cultural landscape surrounding abortion.

In terms of patient care, the finding that a significant proportion of students believe in not discriminating against women who choose abortion suggests a foundation for fostering non-judgmental and empathetic patient care. Nurses should be trained to provide supportive counseling that respects patient autonomy and addresses their emotional and psychological needs. Given the high awareness of the risks associated with poorly performed abortions, nurses should prioritize educating patients about the importance of seeking safe, medically supervised abortion services to prevent complications.

Community engagement is also essential. Nurses can lead public health campaigns to raise awareness about reproductive health, including the importance of safe abortion practices and the risks of self-medication or untrained providers. These campaigns should aim to reduce stigma and promote informed decision-making. Engaging with communities to address misconceptions about abortion and providing accurate information can help reduce stigma and promote healthier attitudes towards reproductive health.

Limitation of the Study

A limitation of this study is that only one institution was used and it limits it generalization. Also, these findings were based on self-report and it might be subject to social desirability bias, where respondents present views consistent with expectations in the society.

CONCLUSION

The majority of participants were young adults aged 16–19 years, predominantly female, and predominantly Christian. These demographic factors have significant tendency of influencing their perspectives on abortion, reflecting broader societal norms and religious teachings. While there was a high awareness of abortion among the students, there were notable gaps in understanding, particularly regarding induced abortion laws and safe practices. This highlights the importance of accurate and comprehensive reproductive health education to dispel misconceptions and promote informed decision-making. Attitudes towards abortion were predominantly negative, grounded in moral and ethical beliefs that emphasize the sanctity of life and societal obligations towards pregnancies. However, there was some conditional acceptance in cases of maternal health risks, indicating a nuanced perspective influenced by medical considerations. Perceptions of abortion were shaped by concerns about its potential social repercussions, such as increased promiscuity, and stigmatization of women who undergo the procedure. There was also recognition of the need for improved sex education to address underlying issues contributing to unintended pregnancies and unsafe abortion practices.

The study's hypotheses revealed complex relationships between socio-demographic factors, knowledge levels, and attitudes towards abortion. While certain factors like gender and religious affiliation did not significantly influence attitudes, age, department of study, and level of education did, suggesting varied influences that shape individual perspectives on reproductive health.

Recommendations

Based on the findings of the study on induced abortion among Chrisland University students, few recommendations can be made to address the issues identified and improve reproductive health outcomes among young adults:

Enhanced Reproductive Health Education

Implementing comprehensive and age-appropriate reproductive health education programs within universities. These programs should cover accurate information about abortion laws, safe abortion practices, contraceptive methods, and the rights of individuals regarding reproductive choices. Education should be culturally sensitive and inclusive of diverse religious perspectives.

Promotion of Open Dialogue

Fostering an open and non-judgmental environment for discussions about reproductive health issues, including abortion. Encouraging dialogue that respects diverse beliefs and experiences while providing factual information. This can be facilitated through workshops, seminars, peer support groups, and campus health services.

Access to Counseling Services

Ensuring access to confidential counseling services for students who may be facing unintended pregnancies or considering abortion. Counseling should be provided by trained professionals who can offer emotional support, unbiased information, and guidance on available resources.

Policy Advocacy

Advocate for policies that support reproductive rights, access to safe abortion services, and comprehensive reproductive health care. Collaborating with policymakers, advocacy groups, and healthcare organizations to address legislative barriers and promote policies that prioritize reproductive health equity.

Suggestions for Further Studies

A longitudinal study would be beneficial to track changes in knowledge, attitudes, and behaviors regarding abortion among university students over an extended period.

Comparative studies across different universities in Nigeria or various regions could shed light on regional variations, cultural influences, and differences in educational curricula that impact students' attitudes towards abortion. Such comparative approaches would allow for broader generalizations and targeted interventions tailored to specific regional contexts.

Qualitative research methods, such as focus groups and in-depth interviews, would complement quantitative findings by exploring the socio-cultural, religious, and personal beliefs that shape attitudes towards abortion among young adults. Qualitative insights could uncover nuances and complexities that quantitative surveys might overlook, providing richer context to the findings.

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