Awareness on abortion legality among undergraduate students in Nigerian Universities

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Abstract: The aim of this work is to measure and determine the awareness on abortion and its legality amongst youths in Nigerian Universities. The undergraduate students of some selected universities in Nigeria constituted the study population. These were male and female undergraduate students across the faculties and departments of the schools. The study made use of questionnaire as the source of data collection. A total of 587 questionnaires were administered and analysed. Findings from this study supported literature on the knowledge of undergraduates on abortion. It further revealed that awareness of legal provisions guiding abortion in Nigeria was low, as only 28.3% of the respondents were aware of the criminal and penal code laws relating to abortion. It is recommended that the schools should include education of legal stance on abortion in the curriculum. Also, the undergraduate students should be educated on mortality resulting from abortion to boost the development rate of the country.

Subjects: Criminal Law & Practice; Family, Child & Social Welfare Law; Health & Safety Law; Public Law

Keywords: abortion; abortion in Nigeria; legal issues relating to abortion; self-interest; penal code; criminal code

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PUBLIC INTEREST STATEMENT

Abortion is one of the well pronounced social phenomenon in this present society. It has accounted for number of mortality among women due to complications during the process of extraction. Despite that both penal and criminal codes specified the conditions for abortion, majority of women are not aware of the codes as well as its contents. The study confirms that majority of the women are not aware of the provision for penal and criminal codes and the content there in. The codes specified the alternative of abortion to women who are certified not able to carry the pregnancy. Any other reason outside the safety of the life of the mother is liable to imprisonment. Women adopt the practice as an alternative to their perceived consequences of the unwanted pregnancy such as societal shame, education disruption, emotional disgrace and many more even at the expense of the law.
1. Introduction

Around the world, both the young ladies and women experience unintended pregnancy due to unprotected sex and some of them search for ways to get rid of the pregnancy at any possible cost (Arisukwu, Igbolekwu, Efugha, Nwogu, Osuke, & Oyeyipo, 2019). The termination of such pregnancies mostly referred to as “abortion” is a universal phenomenon that occurs among women especially the adolescents. Abortion is the separation or extraction, by therapeutic or clinical means, the process of removal before the 24th week of pregnancy (Osinachi Ilobinso, 2007). It can also be the abstraction or eviction of an embryo or foetus from the uterus, resulting in or causing its death. This thus, occurs naturally as a miscarriage or self-induced prompted by chemical substance, surgical or other means (Olaitan, 2011). Legal provision has been made known on the stance on abortion and which sit in the penal and criminal codes. The two legal provision emphasis the position of the country on the phenomenon abortion. This study was therefore designed to determine the level of knowledge of undergraduates on abortion related issues as well as the legal conditions for abortion. The findings of this study are potentially useful as baseline programme for the designing of educational intervention aimed at preventing and/or controlling early pregnancies which may be termed unintended and practice of unsafe abortion among the study population.

2. Abortion

Abortion is a controversial issue worldwide and in many countries it is either illicit, treated like the slaying of a mortal, or remains a lawful option accessible to all women because it is intricately linked up with morbidity and mortality among young and old women in the society. According to World Health Organization report, 2004, nearly all abortion cases (92%) are safe in developed countries, whereas in some countries seen as developing, a larger percentage which is above average (55%) are not safe. The burden of unsafe abortion is thus more common in developing countries (Adetoun & Adesola, 2011).

3. Abortion in Nigeria

In Nigeria, abortion remains restricted and in most cases unsafe. It is a prominent root of maternal deaths amounting to an average of 13% of pregnancy-related fatalities globally (Igbolekwu et al., 2019). About 760,000 abortions occur on a yearly basis in Nigeria regardless of the restrictive abortion laws of the country (Sedgh et al., 2006). Specialists say “precarious abortion is a leading and prominent roots of maternal death in the world with ratio of 1 death to every 100 live births” (Okonofua, 2002). Findings stressed that young adults have more tendency to seek abortion, employ the use of inexperienced persons and also use chancy approaches to conducting abortion (World Health Organization, 1992). Annually, an estimated 20–24 million unsafe abortion have one fourth of it within adolescents of 15–19 years worldwide (UNFPA, 2003). It has also been estimated that unsafe abortion in the African region among the youth aged between 15 and 24 years sum up for 50% which is more than half of all abortion related mortality (Cadmus & Owoaje, 2011; WHO, 2004).

The Centre for Human Development, Ile-Ife in collaboration with UNICEF reported that a larger percentage, more than half of women in Nigeria have fallen victims of unwanted pregnancy at the age of 20 and in some part of the country it is as high as 80%. Out of this number, 21–28% have given birth between the ages of 15 and 17 years while 40% are likely to be mothers by the age of 18 years. A large number of the adolescents who experienced unintended pregnancy resort to abortion to save them from stigmatization. Abortion or termination of unwanted pregnancy and its complications among youths is due to so different reasons such as poverty, illiteracy to inability on the part of the abortion service provider among others (Aziken et al., 2003).

In Nigeria almost one-third (28%) of women of reproductive age have had an unintended pregnancy at one point. Amidst women in Nigeria within procreative age, 1 in 7 (14%) had attempted abortion, and 1 in 10 (10%) had terminated an unintended pregnancy (Bankole, 2004). One of the reasons given by women for disposing an unintended pregnancy suggests that women of two groups seek abortion: young but not married teenagers or youths, and married women with children who want to suspend or discontinue making babies (Sedgh et al., 2006).
Over 21.6 million abortions categorized as unsafe were recorded globally (WHO, 2004). The highest prevalence of 36 per every 1,000 women was cited in Eastern and Middle Africa (WHO, 2004). A study in Nigeria shows that more young women who are yet to start raising families align with the group of people who seek abortion (Aziken et al., 2003). The majority of women who had gone through abortion were younger than 25 years, nevertheless, the practice of prompted abortion is not restricted to women with these features. Forty-five percent of women who went through abortion were aged 25 years or older at the period of the abortion, 37% were or had never been married while 40% had at least one living child (Sedgh et al., 2006). In another study to determine the prevalence of abortion, majority of abortion seekers were found to be young, single girls, with over 90% having first carnal encounter before they clocked 20 (Ujah, 2000).

4. Legal issues relating to abortion
Abortion has been controversial ever since. Some societies see termination of unintended pregnancy as feasible, while some societies place highly restrictive laws on the intent or attempt at inducing abortion (Ujah, 2000). About 21.6 million unsafe abortions take place yearly, mostly in regions where abortion is unlawful (WHO, 2004). According to WHO (2004), abortion is safe in regions where it is lawful, but harmful in regions where it is proscribed and executed surreptitiously. According to WHO 2008, nearly all abortions (92%) are harmless in developed countries, however in developing countries, more than half (55%) are dangerous. Nigeria is counted as part of the countries with the utmost restraining Lawson abortion in the world; in Nigeria, abortion is allowed solely when the life of the woman is threatened and violators of such laws are open to protracted jail terms-up to 7 years for a woman aborting for other motives and 14 years for any medical practitioner convicted of execution of an unlawful extraction (Okonofua et al., 2009; Omo-Aghoja, Omo-Aghoja, Okonofua, Aghedo, Umueri, Otayohwo, Feyi-Waboso, & Esume, 2009).

Abortion in Nigeria is overseen by two diverse laws. In the predominantly Muslim states of the far Northern Nigeria, the Penal Code, Law No. 18 of 1959, is in effect while the criminal code of 1916 is in effect in the southern part of the country. Though, both Codes unanimously prohibit the performance of abortion, differences in the wording of the Codes as well as in their interpretation, have resulted in two slightly different handlings of abortion offences (Osinachi Ilobinso, 2007). Abortion in Nigeria is also administered by both the criminal Code and the penal code, which relates to both the southern states and the northern states, respectively. Pertinent provisions of the criminal Code are built considerably upon Section 58 of the offences against the person Act 1861 (of England). The penal code that regulates abortion is built upon Scottish Common law. The major variance between the two is that where the former is applicable to whosoever is acting with the intention of attaining the miscarriage “whether she is with child or not” the latter applies to the cases of women who in fact are “with child” (WHO, 2002).

The Law prohibits abortions and prescribes penalties for any person that procures a miscarriage of a woman or supplies anything intended to be used for the procurement of miscarriages of a woman or any woman who procures her own miscarriage (Criminal Code Act, 2004). The act makes exceptions in section 297 making operation on an unborn child excusable if it is carried out to rescue the life of the woman. The consequence is that it becomes an offence when the clinical operation is not performed to rescue or spare life. The penal code which is applicable in the north also prohibits abortion unless it is aimed at rescuing the life of the woman.

The relevant provisions which relates to abortion are as follows:

Any person who, with intent to procure miscarriage of a woman whether she is or is not with child, unlawfully administer to her or causes her to take any poison or other noxious thing, or uses any force of any kind, or uses any other means whatever, is guilty of felony, and is liable to imprisonment for fourteen years. (Section 228, Criminal Code Act, 2004)
Any woman who, with intent to procure her own miscarriage, whether she is or is not with child, unlawfully administers to herself any poison or other noxious thing or uses any force of any kind, or uses any other means whatever, or permits any such thing or means to be administered or used to her, is guilty of felony, and is liable to imprisonment for seven years. (Section 229, Criminal Code Act, 2004)

Any person who unlawfully supplies to or procures for any person anything whatever, knowing that it is intended to be unlawfully used to procure the miscarriage of a woman, whether she is or is not with child, is guilty of a felony, and is liable to imprisonment for three years. (Section 230, Criminal Code Act, 2004)

A person is not criminally responsible for performing in good faith and with reasonable skill a surgical operation upon unborn child for the preservation of the mother’s life, if the performance of the operation is reasonable, having regard to the patient’s state at the time and to all the circumstances of the cases. (Section 297, Criminal Code Act, 2004)

Any person who, when a woman is about to be delivered of a child, prevents the child from being born alive by any act or omission of such a nature that, if the child had been born alive and had then died, he would be deemed to have unlawfully killed the child, is guilty of a felony, and is liable to imprisonment for life. (Section 328, Criminal Code Act, 2004)

However Northern Nigeria law stipulates that:

Whoever voluntarily causes a woman with child to miscarry shall, if such miscarriage be not caused in good faith for the purpose of saving the life of the woman, be punished with imprisonment for a term which may extend to 14 years or with fine or with both. (Penal Code of Northern Nigeria, 2004)

Abortion mortality and morbidity tend to be higher in regions where abortion rules are most thwarting or restrictive. Many of such laws are of the old in origin and are no longer in use in the countries where they originated from. Such laws permit abortion solely when a woman is seen as a victim of situations, i.e. in cases of medical emergency, foetal abnormality, rape or incest (Smyth, 1998).

Legal position of abortion in Africa ranges from highly restrictive (permitted only to save a woman's life) to freely available upon request. Abortion is acceptable by law to rescue the life of women in all African countries. Some other region also approve abortion to safeguard the physical health or in cases of forceful sexual intercourse (rape) or incest. Six countries (Botswana, Gambia, Ghana, Liberia, Namibia and Sierra Leone) allow abortion on the wider basis of protecting mental health. In Zambia, abortion is also allowed on socio-economic theme. Cape Verde, South Africa and Tunisia permit first trimester abortion upon request and without constraints (Okonofua et al., 2009).

Some regions with laws that relates simply to “health” or “healing” indications, which may be construed generally than physical health also permits abortion in cases of (a) rape or incest, (b) foetal impairment or (c) other grounds. Some curb abortion through necessitating parental or spousal authorization. Countries that permit abortion on the socio-economic level or with no restraint as to reason include gestational age limits (generally the first trimester); abortions may be permitted after the stated gestational age, but only on approved grounds.

5. Theoretical framework
This study made use of rational choice theory which highlighted that persons adopt rational calculations to make rational choices and achieve results that are united with their own personal aims. According to McCarthy and Chaudhary (2014), rational choice theory is seen as a set of ideas about the relationship between people’s preferences and the choices they make. This theory relatedly explains that women seek abortion just to satisfy a particular desire. Despite the legal provisions to when abortion is permitted in Nigeria, individual approach abortion not from the legal
perspective but rather on the perceived benefit derived from abortion by the woman. The theory further explains why men convince spouses to seek abortion, which is basically to serve a beneficial purpose just to the man or the woman. These results are also related to an individual’s best, self-interest. The use of rational choice theory is expected to culminate in outcomes that provide persons with perceived greatest benefit and satisfaction given the choices they have available.

6. Methodology
Systematic and simple random sampling techniques were employed to administer questionnaire to a total population of 587 respondents randomly selected for the study. Five hundred and eighty seven respondents were carefully selected from faculties and departments in University located in Kwara State ranging from 100 to 500 levels. The respondents were selected randomly based on the availability of respondents. Most of students leave off-campus and selection of respondents from the hall of residence would not give a representation of the students. Ilorin, a city in Kwara State, was chosen for this study because of high concentration of hotels and other recreational facilities even though the social activities is minimal when compared with some other states such as Lagos and Ibadan. The high concentration of hotels and other recreational activities in the state increase the chances of unintended pregnancies which could in a very large extent induce abortion. Five hundred and eighty seven respondents participated in the study and returned the questionnaire. A coding guide was developed to facilitate coding and data entry. The data were subjected to descriptive (i.e. percentage, mean, median and mode) and inferential (i.e. T-Test and Chi-square) statistical analyses. Data entry and analysis was done using SPSS statistical package (SPSS version 16). Every activity in these studies involving human participants were in accordance with the ethical approval obtained from Landmark University Ethical Review Committee. Oral permission was sought from the principal of the chosen schools before commencement of data collection. Informed voluntary consent was gotten from all respondents with a reassurance of the anonymity and confidentiality of the research.

7. Result
The socio-demographic characteristics of the respondents are presented in Table 1. About half (49.1%) of the respondents were aged 16–20 years while those within the age bracket of 21–25 years were (42.1%). The overall mean age of the respondents was 21.1 ± 3.2; with an age range of 16–31 years. The proportion of respondents who were aged ≤ 19 years (adolescents) was 49.1%; those aged 15–24 years (youth) constituted 91.2% while young persons aged ≤ 24 years accounted for 91.2%. Over half (59.1%) of the respondents were males, majority (86.2%) were Christian and nearly half (48.7%) of the Christians belonged to the indigenous Christian denomination. About one-third (27.9%) were from Faculty of Arts; the details of the faculty affiliation of the respondents are shown in the Table 1. Students in the first (100 level), second (200 level), third (300 level), fourth (400 level) and fifth (500 level) year of study were interviewed; over one-quarter of the respondents were in the 100 and 400 levels. Majority (71.6%) of the respondents were of the Yoruba ethnic group followed by the Igbos (18.1%). Most of the respondents (97.3) were single; few (2.3%) were married. Presented below is the socio demographic data representing Table 1

Table 2 highlights respondent’s knowledge on abortion and conditions where abortion is accepted in Nigeria. Majority of the respondents where knowledgeable about the actual concept of abortion as the termination of pregnancy or taking life of the foetus. Only 19 of the respondents (3.7%) knew that the correct condition under which abortion is legal as when the life of a woman is at risk. Almost one third (30.0%) of the respondents stated that abortion is legal in a case of rape. About 17.4% of the respondents believes that abortion could be resulted to at any circumstance once it is with the consent of the woman. Similarly, 27.8% of the respondents also responded that abortion could be resulted to once the woman is unable to care for the pregnancy or the intending baby (see the Table 2 below for details).

Table 3 below gave a picture on awareness of abortion related laws among the respondents. Majority of the respondents 71.7% had no idea on the Nigerian laws surrounding abortion. Minority of the respondents 28.3% gave a positive response confirming their awareness of the various laws on
### Table 1. Socio-demographic data

| Characteristics          | Response = N = 587 |
|--------------------------|--------------------|
|                          | Frequency | Percentage |
| Age                      |           |            |
| 16–20                    | 287       | 49.0       |
| 21–25                    | 247       | 42.0       |
| 26–31                    | 53        | 9.0        |
| Sex:                     |           |            |
| Male                     | 347       | 59.1       |
| Female                   | 240       | 40.9       |
| Religion:                |           |            |
| Christianity             | 506       | 86.2       |
| Islam                    | 81        | 13.8       |
| Denomination (n = 506)   |           |            |
| Indigenous church        | 286       | 48.7       |
| Non indigenous church    | 220       | 37.5       |
| Faculty Affiliation      |           |            |
| Arts                     | 164       | 27.9       |
| Education                | 83        | 14.1       |
| Social Science           | 80        | 13.6       |
| Science                  | 74        | 12.6       |
| College of Medicine      | 57        | 9.7        |
| Technology               | 47        | 8.0        |
| Agriculture and Forestry Science | 25 | 7.0 |
| Law                      | 41        | 4.3        |
| Pharmacy                 | 7         | 1.2        |
| Veterinary Medicine      | 9         | 1.5        |
| Level of study           |           |            |
| 100 level                | 168       | 28.6       |
| 200 level                | 131       | 22.3       |
| 300 level                | 83        | 14.1       |
| 400 level                | 168       | 28.6       |
| 500 level                | 37        | 6.3        |
| Ethnicity                |           |            |
| Yoruba                   | 420       | 71.6       |
| Igbo                     | 106       | 18.1       |
| Edo                      | 18        | 3.1        |
| Middle belt ethnic Minorities | 14       | 2.4        |
| Core Niger Delta ethnic minorities | 11     | 1.9        |
| Hausa                    | 9         | 1.5        |
| Delta state ethnic groups | 9        | 1.5        |
| Marital Status           |           |            |
| Single                   | 571       | 97.3       |
| Married                  | 16        | 2.7        |

Source: Researcher’s data
abortion in Nigeria. A major revelation from Table 3 below shows that despite the response of 28.3% of the respondent to have known about the laws on abortion, over 40% of those who claim to know about the abortion laws do not actually know the content of the law. Majority know of the various legal procedures accommodating abortion such as the penal, and criminal law/codes, but the actual provisions and content of the codes are not known to almost half of the respondents. Despite the knowledge about the different types proceeding of abortion laws, majority 60.8% of the respondents believes abortion is legal in Nigeria on the account of rape or incest. This is against the provision of the law on circumstances where abortion is legally permitted in Nigeria.

Figure 1 above shows that 72% of the respondents are not aware of the legal provision on abortion. It shows a very high level of ignorance and a very low level of awareness on abortion related laws. Table 3 above also shows that out of the 28% who have heard about abortion related laws, 17.9% have the understanding of the penal and criminal codes. Others which account for 11.1% are aware but without knowing the content of the laws. Invariably, it can be said that 81.9% of the respondents were not aware of what the legal stance on abortion states.

| Knowledge/Conditions | Number | Percentage |
|----------------------|--------|------------|
| Concepts/definition of abortion (N = 587) | | |
| Abortion is the termination of unwanted pregnancy/taking life of a foetus | 518 | 88.2 |
| I don't know | 69 | 11.8 |
| Condition(s) for abortion (518) | | |
| It is legal to abort in all circumstances | 90 | 17.4 |
| Rape | 156 | 30 |
| When life of the woman is at risk | 19 | 3.7 |
| If the woman cannot care for the child | 144 | 27.8 |
| Stigmatisation | 66 | 12.7 |
| No response | 43 | 8.3 |

Source: Researcher's data

8. Discussion of findings and recommendation

Findings from this study revealed that awareness of legal provisions guiding abortion in Nigeria was low, as only a few were aware of the criminal and penal code law on abortion. About 71.7% of the total respondents were ignorant of the legal provision on abortion and especially as contained in the penal and criminal codes. This depicts a high level of ignorance which is responsible for the general opinion on abortion as a product of will and not as what the law provided. A study earlier conducted by Adetori et al. (1999) however revealed that doctors and nurses in Kwara state were aware of Nigeria legal provision on abortion although only few of them could mention the two legal provisions guiding abortion in southern and northern part of Nigeria.

This finding could be attached to the fact that majority of the students do not see it as being mandatory to read these laws in order to get acquainted. Also, many of the respondents believe it is the responsibility of the lawyers to read and understand the legal provision guiding abortion. Other authors or authorities have likewise reported poor awareness and understanding of the legal provision relating to abortion among persons studied (Berer, 2002; Billings et al., 2002; Cook et al., 2003; Mundigo, 2006; Warriner, 2006).

There was lack of sufficient knowledge among respondents on the condition under which abortion can be conducted in Nigeria. Majority of them were not able to correctly state the
condition. Only a few who were aware of abortion related law in the country knew abortion is permissible only “when the life of a woman is at risk/threatened”. Many respondents erroneously believed that abortion is only acceptable in Nigeria in the case of incest or rape; a finding which clearly shows a knowledge deficit on abortion related issues among the respondents in this study. Abortion is therefore carried out based on assumption i.e. what individuals see as good and not what the law pronounce good or bad. Individual sees abortion as a personal decision which could only involve the two parties which are the man and the woman or the families of the two parties included. The findings also shows that the legality or otherwise of abortion is not usually taken into consideration in the process of seeking for abortion services. Due to the low awareness of women and men on the provisions for abortion, people seek out abortion based on personal grounds. The study revealed that women seek out abortion due to stigmatization. The societal perspective of a woman pregnant as a spinster (seen as a product of wayward lifestyle) also induces women to seek abortion. Also, the economic status of the woman is a factor in why women see abortion. This is anchored on the premise that having a baby will disrupt the schooling process of the woman and therefore abortion to her seems the best alternative.

### Table 3. Awareness of abortion related laws among the respondents

| Awareness of abortion related laws                                      | NUMBER | PERCENTAGE |
|------------------------------------------------------------------------|--------|------------|
| Ever heard about abortion related laws in Nigeria (N = 587)             |        |            |
| YES                                                                    | 166    | 28.3       |
| NO                                                                     | 421    | 71.7       |
| Types of abortion related laws in Nigeria known to the respondents (N = 166) |        |            |
| Penal code                                                             | 19     | 11.5       |
| Criminal law/code                                                      | 51     | 30.7       |
| Penal code and criminal law                                            | 36     | 21.7       |
| Abortion decree                                                        | 22     | 13.3       |
| None                                                                   | 38     | 22.9       |
| Sources of information about abortion related laws (N = 166)            |        |            |
| Radio                                                                  | 29     | 17.5       |
| Television                                                             | 71     | 42.8       |
| Journal                                                                | 5      | 3.0        |
| Peer group                                                             | 8      | 4.8        |
| School                                                                 | 12     | 7.2        |
| Internet                                                               | 41     | 24.7       |
| In Nigeria abortion is legal irrespective of the state of a woman or girl provided it is her wish (N = 166) |        |            |
| True                                                                   | 68     | 41         |
| False                                                                  | 98     | 59         |
| Abortion is legal provided it is done by qualified doctor for any reason (N = 166) |        |            |
| True                                                                   | 81     | 48.8       |
| False                                                                  | 85     | 51.2       |
| Abortion is allowed in Nigeria if a pregnancy is as a result of rape or incest (N = 166) |        |            |
| True                                                                   | 101    | 60.8       |
| False                                                                  | 65     | 39.2       |

Source: Researcher’s data
9. Conclusion

Among adolescents, its use is significantly low. This often results in high prevalence of unplanned pregnancies, which may have negative implications on female sexuality, reproductive health and the girl-child education. There is therefore the need to sustain the awareness and use of ECs among adolescents to promote good health and prevent exposure to sexually transmitted complications and death associated with ignorance and risky sexual behavior among adolescents. Increased use of ECs will help reduce unplanned pregnancies which often result in an increase in the rate of school dropouts. Girl-child education and empowerment will be enhanced through effective knowledge and use of emergency contraceptives by adolescents in Nigeria. It should be noted that this study focused only on knowledge, perception, and use of ECs among adolescents in Owerri, Imo State, Nigeria. Further research is recommended on knowledge and perception of ECs among adolescent boys and the influence of family background on sexual behavior among adolescents in other states of Nigeria. We conclude that although there is high knowledge of emergency contraceptives among adolescents, its use is significantly low. This often results in high prevalence of unplanned pregnancies, which may have negative implications on female sexuality, reproductive health and the girl-child education. There is therefore the need to sustain the awareness and use of ECs among adolescents to promote good health and prevent exposure to sexually transmitted complications and death associated with ignorance and risky sexual behavior among adolescents. Increased use of ECs will help reduce unplanned pregnancies which often result in an increase in the rate of school dropouts. Girl-child education and empowerment will be enhanced through effective knowledge and use of emergency contraceptives by adolescents in Nigeria. It should be noted that this study focused only on knowledge, perception, and use of ECs among adolescents in Owerri, Imo State, Nigeria. Further research is recommended on knowledge and perception of ECs among adolescent boys and the influence of family background on sexual behavior among adolescents in other states of Nigeria.

Our conclusion is that although abortion is a well-known phenomenon, awareness on the legality of abortion is very low. Also, for some reasons, youths contract so many means of aborting unwanted pregnancies which in turn endangers lives and causes severe damage to woman's health and possibly result into mortality. Little do women know about the conditions provided by law under which abortion could be permitted, the little awareness could result in serious punishment as ignorance is never an excuse in the law court. There is therefore, the need for improved awareness on the conditions for women to result to abortion. Sanctions and punishment for illegal abortion should be made public to women in Nigeria to reduce the level of ignorance and further reduce the level of mortality arising from abortion in Nigeria. Family is the first point of contact and
the early stage of socialization. Therefore, the family should make it a drive to educate female children on the dangers surrounding illegal abortion and the sanctions attached to it.

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Correction
This article has been republished with minor changes. These changes do not impact the academic content of the article.

Recommendation
Based on the findings from this study, the following recommendations are made:

(1) It becomes very important and essential to improve awareness on the conditions for women to result to abortion. Non-Governmental Organization should not just concentrate on prevention of pregnancies arising from sexual intercourse

(2) Sanctions and punishment for illegal abortion should be made public to women in Nigeria to reduce the level of ignorance and further reduce the level of mortality arising from abortion in Nigeria.

(3) Parents and other agents for local parenting should make it a point of duty to educate female children on abortion, its legalities and illegalities, and the sanctions behind illegal abortion. This drive will spread the campaign against illegal abortion and reduce the level of mortality.

Compliance with ethical standards
Every activity in these studies involving human participants were in accordance with the ethical approval obtained from Landmark University Ethical Review Committee. Oral permission was sought from the principal of the chosen schools before commencement of data collection. Informed voluntary consent was gotten from all respondents with a reassurance of the anonymity and confidentiality of the research.

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