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Research Paper

A Study of Socio Economic Factors Affecting Family Planning Services in An Urban Area

Medical Science

KEYWORDS : Contraceptive prevalence, socio economic factors, awareness.

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ABSTRACT

Introduction: Socio economic factors play most crucial role in not only deciding the choice of family planning method to be used but also whether to use any method at all. This study therefore attempts to understand the relationship between socio economic factors and utilization of family planning services. Material & methods: This study was community based descriptive cross sectional study, conducted in an urban area. Total 600 married women were interviewed. Data were analyzed by SPSS software. Chi-square test was applied. Result: 558(93%) were aware about at least one method of contraceptives and contraceptive prevalence was found to be 56.8%.Conclusion: Socioeconomic factors like education, occupation, socioeconomic class, age, number of living children significantly affected use of contraceptive. Due to more emphasis on permanent methods, adoptions of temporary methods did not get desired importance. Therefore intensive efforts are needed to popularize spacing methods.

INTRODUCTION

Family planning is a process of thinking and a life style. Attitude is an important factor in choosing suitable contraceptive methods.[1]

India launched National Family Welfare Programme in 1951 with the objective of reducing the birth rate to the extent necessary to stabilize the population at a level consistent with the requirement of the National economy. The Family Welfare Programme in India is recognized as a priority area and is being implemented as a 100% centrally sponsored programme.[2]

According to NFHS-3, the current contraceptive prevalence rate in urban India is 55.8% and in Chhattisgarh, it is 58.9%.The contraceptive prevalence rate, one of the important proximate determinants of fertility, also varies substantially across the states, from a low of 24 percent in Meghalaya to a high of 73 percent in Himachal Prades.[3]

The year 2010-11 ended with 34.9 million total family planning acceptors at national level.[4]

Despite sustained efforts by the government since last decade high growth of population growth continues to be one of the most critical problem phases by the nation. Despite availability of services utilization of this services remain low.

Socio economic factors play most crucial role in not only deciding the choice of family planning method to be used but also whether to use any method at all or not.

Socio economic factors that influence utilization of family planning methods are overpopulation, poverty, corruption, education, religion, caste related violence, cost, partner involvement etc.

Any effort by the government will not succeed unless there socio economic factors are understood and effective measures taken.

This study therefore attempts to understand the relationship between socio economic factors and utilization of family planning services. So that an important bottle neck in utilization of family planning services can be effectively dealt with.

OBJECTIVES

1. To know the level of awareness regarding contraception among married women.

2. To find out the factors affecting utilization of contraceptive method.

3. To study association between various socio economic factors and utilization of contraceptive methods.

MATERIAL AND METHOD

This study was community based descriptive cross sectional study, conducted in urban health training center attached to department of community medicine, CIMS Bilaspur (C.G.) Total 600 married women were interviewed by house to house survey.

Predesigned and pretested questionnaire was used to collect information regarding the socio demographic profile of women. The proforma entails the information about the age of women, education level, occupation, socio economic status, awareness about contraception and their practices etc.

Statistical analysis was done with the help of SPSS 11.5 for Windows. Chi-square test was applied to know the association among various socioeconomic factors and utilization of contraceptives.

OBSERVATION AND RESULT

This was community based cross sectional study conducted to find out prevalence of contraceptive practices and socio economic factors that affect contraceptive practices of study population.

Table 1 shows that out of 600 married women

	Yes (%)	No (%)	Total (%)
Contraceptive Awareness	558 (93%)	42 (7%)	600 (100%)
Contraceptive use	341 (56.8%)	259 (43.2%)	600 (100%)

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Table 2 Currently using contraceptives

Methods	Frequency	Percentage
Condom	86	14.3%
IUCD	44	7.3%
OCP	38	6.3%
Injectable	1	.2%
Post coital contraception	0	0%
Sterilization	172	28.7%
Contraceptive use	341	56.8%

Table 3 Association between various factors and contraceptive use

Parameters	Users (341)	Nonusers (249)	Chi square	P value
Age (years)				
15-19 20-24 25-29 30-34 35-39 40-45	2 (33.3) 51 (36.4) 82 (51.3) 83 (68) 67 (72) 56 (70.9)	4 (66.7) 89 (63.6) 78 (48.8) 39 (32) 26 (28) 23 (28.1)	48.50	<.01
Education of subject				
Professional Graduate & PG Intermediate HSC Middle School Primary School Illiterate	2 (100) 66 (70.2) 28 (57.1) 83 (53.9) 91 (57.2) 47 (56) 24 (41.4)	0 (0) 28 (29.8) 21 (42.9) 71 (46.1) 68 (42.8) 37 (44) 34 (58.6)	14.66	<.05
Education of husband				
Professional Graduate & PG Intermediate HSC Middle School Primary School Illiterate	7 (87.5) 129 (69.4) 33 (56.9) 92 (53.5) 56 (50) 16 (35.6) 8 (42.1)	1 (12.5) 57 (30.6) 25 (43.1) 80 (46.5) 56 (50) 29 (64.4) 11 (57.9)	27.85	<.01
Occupation of husband				
Professionals Semi Professionals Clerk/Farmer/ shop keeper Skilled worker Semi-skilled workers Unskilled workers Unemployed	62 (76.5) 35 (63.6) 83 (64.8) 70 (50.4) 51 (51.5) 39 (41.5) 1 (25)	19 (23.5) 20 (36.4) 45 (35.2) 69 (49 6) 48 (48.5) 55 (58.5) 3 (75)	31.40	<.01
Socio economic class				
Upper Upper Middle Lower Middle Upper Lower Lower	13 (86.7) 51 (62.4) 73 (61.53) 195 (52.4) 9 (64.3)	2 (13.3) 31 (37.8) 44 (37.6) 177 (47.6) 5 (35.7)	11.14	<.05
Number of living children				
Nulliparous One children two children three children four children > 4 children	7 (14.90) 67 (42.7) 155 (65.4) 82 (72.6) 26 (70.3) 4 (44.4)	40 (85.10) 90 (57.3) 82 (34.6) 31 (27.4) 11 (29.7) 5 (55.6)	68.30	<.01

DISCUSSION

The present study was community based cross sectional study conducted at urban area of Bilaspur (c.g.), to find out prevalence of contraceptives, awareness level and various socio economic factors that affect the contraceptive practices.

In this study, among married women prevalence of contraceptives was found 56.8%, which is similar to **NHFS-3**[5] for urban area, but is considerably higher than that of India as a whole (48.5%). Contraceptive prevalence in Chhattisgarh is 59% in urban and 42% in rural areas and at national level the figure are 55.8% and 45.3% respectively.

Rajinder Singh Balgir et al (2011)[6], in their study found that that prevalence of contraceptive was 53.84% which was similar to present study.

In this study, it was observed that huge gap between awareness of contraceptive (93%) and contraceptive practices (56.8%). **Shweta Tiwari**[8] conducted a study in year 2012 among married women 99.9% were aware about contraceptives methods, however only 66.5% of them were using any type of contraceptive methods. The remaining 33.5% of the women do not use any form of family planning methods.

The phenomena of high knowledge and low practice has also been observed in multiple studies conducted in various parts of India and abroad like, in study conducted by **Onwuzuriken BK et al in Nigeria**[9].

The **NFHS-3 in India**[5] found that 37.8% were using female sterilization followed by condom (9.8%), OCP (3.8%) and IUCD (3.2%) for urban area. However according to **NFHS 3 in C.G**[5]. for urban area female sterilization was 43.9% and condom user was (7.8%), 2.9% and 2.7 % user was OCP and IUCD respectively.

B.K. Patro et al[10] have been conducted a study contraceptive practice among married women in a resetttement colony of Delhi and found that 53.9% were practicing female sterilization, (25.73%) condom, (13.01%) IUCD, (10.94%) OCP users. This was found similar to present study. While state figure are differ from present study. The discrepancy could be due to the difference in socio-economic status, and study populations belong to urban area so purpose of contraception is to space the birth.

Rajinder Singh Balgir et al[6], in their study found that71.79% of the couples aged between 30 -34 years and 65% contraceptive coverage in age group of 35-39 year. This was similar to current study.

S.M. Pandey[11] conducted a study among married couples in rural area of hisar, (haryana), found that 45.55% women have used contraceptive. The percentage is the highest (57.38%) in the age group 0f 30-34. A significant association was found between age group and use of contraceptives.

In the present study it was observed that as the age of respondent increased contraceptive acceptance was also increased. So age is influencing factor for contraceptive practices. Highly significant association ($p<0.01$) was found between the age of respondent and contraceptive practices.

The current study revealed significant association ($p<0.05$) between literacy level and acceptance of contraceptive practices. Similar results were obtained from **S M Pandey et al**[11] **Banerjee et al,**[13] **Saini et al**[14]**, Girdhar et al**[15]**, Kansal et al** [16] and **Shah et al** [17] but it differs from **Gaur et al** [7] because the respondents were illiterate.

Female education has positive relation with intention to use contraception, which is in fact, a strong predictor of subsequent use.

S S Prateek et al[19] conducted a study contraceptive practices adopted by women attending an urban health center was found significant association between contraceptive acceptance and so-

cioeconomic status, similar to present study. Similar results were obtained from **B.K. Patro et al [10], Rajinder Singh Balgir et al[6], Haldar A et al[12].**

But this was differ from **S Seema et all[18]**, contraceptive prevalence was found to decrease with the increase of socio-economic status as the prevalence was 72.6% in class V (Lower Class) and progressively declined to 47.6% in the class I (Upper Class) ($p < 0.05$).

CONCLUSION

The present study revealed that the socioeconomic profile of respondent have significantly associated with contraceptive practices. Socioeconomic factors like education, socioeconomic class, age, number of living children were significantly affect uses of contraceptive.

So level of education is influencing factor for adaptation contraception. Female education has positive relation with intention to use contraception, which is in fact, a strong predictor of subsequent use

In this study it was found that the female sterilization means permanent contraceptive practices were more popular than spacing method. Due to more emphasis on permanent methods, adoptions of temporary methods are neglected. So, intensive efforts are needed to popularize spacing methods among younger couples, as this is a more fertile group.

There is a tremendous need of incorporating IEC activities as a part of National Family Welfare Programme. These IEC activities should not be for a specific occasion rather a sincere effort should be taken by the entire health team.

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