



Trends of Contraception-A Three Year Study of Contraceptive Use Among Married Women in A Medical College Hospital

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ABSTRACT

Objectives: To study awareness, practices and preferred method of contraception. 2) Awareness of family planning services in the vicinity. 3) Decision making regarding contraceptive use.

Methods: The study is a retrospective community based cross sectional observational study. The study was conducted among married women in reproductive age group. 3000 married women were interviewed in the local language using a pre-tested validity assured questionnaire. Data was analyzed using SPSS version 17.

Results: - 97% of women were aware of at least one method of contraception. 56.0% women were using single contraception method. 9.2% women were unaware of any health care facility providing contraceptives in the vicinity. Knowledge and practice of emergency contraceptive was very low.

Conclusions: Although there is high level of awareness, but contraceptive use is not very high. New methods of motivating people to adopt and sustain Family Planning methods should be considered.

KEYWORDS : Contraceptive use, OCP, contraception, Unmet need

INTRODUCTION

Studies have shown that about 17% of all married women would prefer to avoid pregnancy but are not using any form of contraception. This is referred as “unmet need” for family planning by demographers. [1], [2] In some countries including ours, the unmet need remains persistently high indicating that greater effort is needed to understand and address the causes of unmet need. Since the introduction of family planning services, increasing literacy rate and rising awareness among people, smaller families are slowly becoming the norm in India too. Fertility in India has declined to 2.7 children, mainly due to increased use of contraception in women. In spite of this, India is yet above the replacement level, with contraceptive prevalence rate for married women being only 56 % and total unmet need being 12.8 % [3]. As per NFHS III data, messages about family planning are not reaching all. Many have not heard of available modern contraceptive spacing methods in spite most of the people desiring a small family and having a positive attitude towards contraception [4].

Considering the above factors the following study was carried out in an medical college OPD to assess the knowledge about various family planning techniques and current trends in usage of contraceptive methods so that the unmet needs of the population can be targeted. High level of knowledge and awareness does not match with contraceptive usage rate. Converting knowledge into practice is the real challenge for India as far as family planning is concerned. Awareness about the various family planning centres in the nearby residential area and services provided by them should be created.

METHODS

The study is a community based retrospective cross sectional observational study, conducted in medical college OPD. The study was conducted among married women in reproductive age group. Appropriate sample size (3000) was calculated and data was collected by using simple random sampling technique. A pre tested questionnaire was administered to the women in local language. Questionnaire was provided with utmost care and privacy. Illiterate females were helped by volunteers. Data was carefully collected and inferences derived. Address was also taken to follow the families still lacking in contraceptive practices.

PRE TEST QUESTIONNAIRE

Name..... W/o..... Age..... No. of Children..... No of Years of Marriage..... Address.....

Q1. Are you aware about contraceptive services (Y/N)

Q2. Do you use any method of contraception (Y/N)

Q3. If Yes then which method:

OCPs

Cu T

Tubectomy

Condoms

Others

Q4. Do you know about male sterilization Y/N

& if yes, is your husband willing Y/N

Q5. How do you came to know about Family Planning Services in your area & their incentives ?

Q6 Who takes the decision about family planning in the family?

Statistics

Data was analyzed using SPSS 17 software package and using Excel spreadsheet. Z- Test of standard error of difference between proportions was applied. Percentages were calculated and various aspects analyzed using the study data and the questionnaire. 95% Confidence Intervals for different proportions were calculated.

Total No. of Patients=3000			
S.No.		Number	Percentage %
1.	No Knowledge of contraception	90	3%
2.	Knowledge but not using	1100	36.67%
3.	Knowledge & using any method of contraception	1810	60.33%
	a. OCP	858	28.6%
	b. Condoms	200	6.67%
	c. CuT	190	6.33%
	d. TT	410	13.67%
	e. Others	30	1.0%
	f.(male vasectomy)	2	0.007%
	g.Natural contraception (Eg. With drawal)	120	4%

RESULTS

Table 1 shows that out of 3000 couples, 1810 (60.3%) were currently practicing any one of contraceptive methods available. 28.63% were using OCP's, 6.67% use condoms, 6.63% use copper T, 13.67% have had permanent sterilization in form of tubectomies. 1.67% used natural methods of contraception like withdrawal, cycle accor to month etc.. Out of 1810 couples who were using contraceptives, the practice was maximum for OCP (28.63%),

followed by female sterilization (13.67%), then copper T (6.67%) and condoms (6.63%). Therefore OCP's were used by only 28.63 % women in the study group but was the most preferred method of contraception. When we take into consideration the other aspects asked in the questionnaire, we also infer that there is still an unmet need for family planning. Males are still the dominant decision makers about using a contraception, but vasectomies are still not popular.

DISCUSSION

Medical college OPD is a tertiary center and people come via ANM workers, aanganwadi's, villages and various primary and secondary centers. We have a separate counselling room and a very comprehensive set up for family planning practices. Contraceptive prevalence rate calculated in other studies in urban as well as rural and tribal areas in India, is around the National Contraceptive Prevalence Rate which is 56%. [4] Susheela Singh, Gilda and Rubina stressed the importance of unintended pregnancies and their huge and disastrous outcome on the success of family planning services. [5]. 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 Onwuzurike BK et al in Nigeria [6-7]. Observations similar to the current study, with respect to IUD were found in studies conducted in various urban areas of the country. [7] A five year study by Mukhopadhyay Ashish Kumar et al in Calcutta also found similar results. They studied age and contraceptive use. Newly wed young females prefer O.C.P.'s middle age women prefer Cu T and IUCD's for spacing and females who have completed their family go for permanent methods. We also found similar trends of contraceptives with age [8]. Tubectomy was practised by only 13.67% of females in the our study. The current study indicates that vasectomy is very minimally practised in the current study population, though 49.12% were aware and 0.07% even preferred it as a terminal method of contraception. In a study conducted by Chopra S et al, it has been observed that, the decision for contraception was taken together by the husband and wife in 71%, by the husband alone in 24.3%, but the woman alone decided in only 4.2% cases [9]. This indicates that the role of women is secondary to the husband in the matters of family planning even in urban India. Very low awareness of emergency contraception has also been observed in other studies. [6] The total fertility rate (TFR) in rural areas has declined from 5.2 to 4.5 during 1971-1981 and from 3.6-2.4 during 1991-2012 in urban areas the decline is 4.1 to 1.8 during the same period. In 2012 and 73% deliveries were institutional with includes Govt. as well as private hosp. (urban 92) an agent 67.9 in rural areas. [10]

M.P. (CBR) = Total Rural Urban
26.6 28.5 19.8

These results clearly indicate that awareness about contraceptives is not sufficient for its actual use in this community and extended efforts will be needed after making people aware about these methods for practical use of these methods. Our results are in consensus with the study of contraceptive use among married women in a slum in Mumbai. [11] High level of knowledge and awareness does not match with contraceptive usage rate. Converting knowledge into practice is the real challenge for India as far as family planning is concerned. Awareness about the various family planning centres in the nearby residential area and services provided by them should be created. Special emphasis should be given on IUD, vasectomy and emergency contraceptives. Not far from now, we will outnumber China if our growth rate does not come down. [12] Involvement of men in not only decision making but also practising family planning methods should be stressed. New ways of motivating people to adopt and sustain family planning methods should be considered. Understanding how choices regarding family planning are made, will help in accelerating the process of fertility decline. Finally improving the status of women in the society and increasing their role in decision making about

family planning issues will help India to achieve its long term family planning goals.

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