

**KNOWLEDGE ON FAMILY PLANNING METHODS AMONG YOUNG MARRIED WOMEN RESIDING IN THE URBAN SLUMS OF BELAGAVI, KARNATAKA- A CROSS-SECTIONAL STUDY.****Dr. Manjari Sutradhar**

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ABSTRACT

Background The knowledge about family planning remains a major public health concern in developing countries. Knowledge gap is highest among young married women (15-24 years). Currently few data is available regarding knowledge about Family Planning among young married women living in the urban slums. **Objectives:** This study intended to assess the knowledge about family planning services among young married women (18-24 years) residing in urban slums of Belagavi city, Karnataka. **Methodology:** This cross-sectional study was carried out between 1st April 2023 and 31st March 2024 among 380 young married women residing in the urban slums of Belagavi city using a predesigned pre-structured pre-tested validated questionnaire through interview method after obtaining written informed consent of the participant. Collected data was entered using Microsoft Excel software and analysed in SPSS software. **Results:** Most of the participants were Muslim (63.42%). 45% had completed secondary school, 89.21% were home-maker, 68.16% belonged to Class III based on Modified B.G. Prasad's Socio-economic status classification. 83.42% had knowledge about at least one family planning method and 16.58% had no knowledge regarding family planning method. Majority of the study participants were aware of Intra- uterine devices (26.58%). **Conclusions:** The results highlight the critical need for focused interventions, especially for vulnerable groups like young women living in urban slums, such as raising awareness, clearing up misconceptions.

KEYWORDS : Knowledge, Young married women, Family planning, Urban slum**INTRODUCTION**

Due to its rapidly expanding population, India was the first country in the world to implement a nationwide family planning program in 1952.¹ With its expansion over the years, the program has spread to every corner of the country, from primary health centers, sub-centers to metropolitan family welfare centers and postpartum centers.

Despite tremendous efforts by the Indian government, the demand for contraception remains. India accounts for more than one in seven of all unintended pregnancies that occur worldwide each year.²

According to the Indian Demographic and Health Survey 2015-2016, 11.9% of pregnancies in India were unplanned, which may have an effect on the general well-being and reproductive health of Indian women³

By 2030, there will be two billion people living in urban slums, worldwide.⁴ According to the UN, slums are densely populated regions that lack one or more of the following: enough living space, access to better sanitation and water, long-lasting housing and security of tenure.⁵ Factors such as unemployment, overcrowded living conditions, limited access to healthcare, gender-based violence, and restricted decision-making for women contribute to challenges.⁶

In slums, there is poor contraceptive usage among women in this age range (15–24 years), living in unfavourable conditions make them the most prevalent group in need of family planning services from a public health standpoint. It is crucial for policy makers to comprehend this young population's demand for family planning services and the variables impacting that need. In this nation, no such information is currently accessible for this age range, particularly for young married women living in urban slums. The dearth of precise statistics on this susceptible population, however, emphasises the pressing need for study to close this knowledge gap which would eventually lower the rate of unwanted pregnancies, unsafe abortions, and maternal deaths.

The study was conducted to evaluate the knowledge regarding family planning among the young married women living in urban slums of Belagavi city, Karnataka, India.

Methodology

This study was a community-based, cross-sectional study conducted in the urban slums of Belagavi city, Karnataka among 380 young married women. The study was conducted for a period of 12 months between 1st April 2023 and 31st March 2024. Ethical clearance was obtained from the Institutional Ethics Committee (Ref No. MDC/JNMCIEC/42). Young married females residing in urban slums of Belagavi city for at

least one year were included in the study and women who are currently pregnant or had undergone hysterectomy/bilateral oophorectomy or are divorced /separated/disserted from their husband are excluded from the study. While visiting the slums, tracing was done for the young married women who met the inclusion criteria.

Data on socio-demographic characteristics of the participants such as age, literacy level, occupation, socio-economic status, knowledge regarding family planning methods were obtained by a predesigned pre-structured pre- tested validated questionnaire through interview method after obtaining written informed consent of the participant.

Collected data was entered using Microsoft Excel software and analysed in SPSS software. Frequencies and percentage were calculated for categorical data.

RESULTS**Table 1: Socio- Demographic Details**

Socio-demographic details	Frequency	Percentages
Religion		
Hindu	139	36.58%
Muslim	241	63.42%
Education		
No formal schooling	4	1.05%
Less than primary school	6	1.58%
Primary school completed	22	5.79%
Secondary school completed	171	45.00%
High school completed	166	43.68%
Degree/Postgraduation completed	11	2.89%
Occupation		
Self-employed	25	6.58%
Private Employee	16	4.21%
Home- maker	339	89.21%
Socio-economic status		
I	4	1.05%
II	27	7.10%
III	259	68.16%
IV	73	19.21%
V	17	4.47%

Table 2: Distribution Of Participants Based On Their Knowledge On Family Planning Method

Knowledge on family planning method	Frequency	Percentages
Yes	317	83.42%
No	63	16.58%

Table 3: Distribution Of Participants Based On Knowledge On Types Of On Family Planning Methods

Knowledge on types of contraceptive methods	Frequency	Percentages
Oral contraceptive pills	64	16.84%
Male condoms	59	15.53%
Injectable contraceptives	30	7.89%
Intra- uterine devices	101	26.58%
Permanent sterilization method (Vasectomy / Tubectomy)	63	16.58%
None	63	16.58%

Table 1 depicts the socio-demographic profile of the participants. Most of the participants belong to Muslim community 63.42%. 45% completed secondary school. Most of the participants were home-maker (89.21%). Majority of the study participants belonged to Class III (259,68.16%), based on Modified B.G. Prasad's Socio-economic status classification.

Table 2 depicts, out of 380 participants from the urban slums of Belagavi city, 83.42% had knowledge about at least one family planning method and 16.58% had no knowledge regarding family planning method.

Table 3 showing that out of total participants, 16.84% had knowledge about Oral contraceptive pills, 15.53% had knowledge about male condoms, 7.89% had knowledge about Injectable contraceptives, 26.58% had knowledge about Intra- uterine devices, 16.58% had knowledge about Permanent sterilization method, 16.58% had no knowledge about any of the contraceptive methods. Overall, most of the study participants were aware of Intra- uterine devices (26.58%).

DISCUSSIONS

The present cross-sectional study carried out between April 2023 and March 2024 among 380 young married women residing in the urban slums of Belagavi city, to assess the knowledge on family planning methods among young married women.

In the present study, most of the participants had knowledge on family planning method (83.42%).

This finding is in accordance with the study done by Singh et al.⁸ where majority of respondents (88.8%) were aware of at least one family planning method.

Srivastav A et al.⁹ in his study, reported that 71.22% women knew about contraception. In a study by Devaru JS et al.¹⁰, the knowledge of contraception was 88.7% among women, which was like the present study.

In this study, most of the study population had knowledge about intra-uterine devices (26.58%), followed by oral contraceptive pills (16.84%), permanent sterilization method (16.58%), male condoms (15.53%), injectable contraceptives (7.89%).

This finding is consistent with the study done by Daya A et al.¹¹ where among the participants, the most known method of contraception was IUD (56%)

A study carried out by Singh et al.⁸ found that the majority of participants were aware of condoms (82%) followed by sterilization (80.7%), oral contraceptive pills (OCPs) (79.3%), intra-uterine contraceptive devices (68.7%), safe period method (47.3%), injection depot medroxyprogesterone acetate (42.7%).

CONCLUSION

The impact of knowledge on health behaviours has been validated in many public health areas based on the idea that the public can make "informed decisions" about health behaviours by utilising their knowledge of pertinent health issues. To increase family planning options and close the knowledge-practice gap in urban slum areas, government and non-government organisations should organise health education and awareness campaigns in addition to information, education, and communication (IEC) and behaviour change communication (BCC). From the time a person reaches puberty, both formal and informal education regarding family planning methods must be provided. The media can significantly contribute to raising public knowledge of family planning options. Health care professionals, must play a vital role in educating the public.

Conflict Of Interest: None

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