



USE OF EMERGENCY CONTRACEPTION AMONGST RURAL WOMEN

Obstetrics & Gynaecology

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ABSTRACT

Objective – To study the use of emergency contraception amongst rural women

Material and methods – it was a prospective observational study where 500 females attending the out patient department were interviewed to know their knowledge and use of emergency contraception.

Result - Of the 500 women, only 14 % knew about EC, 6.4 % had used EC ever. The educated and the married females had better knowledge of EC.

KEYWORDS

rural women, emergency contraception

INTRODUCTION

The risk of pregnancy due to an act of unprotected intercourse could as high as one in three depending on the day of ovulation. Each year an estimated 2.4 million women worldwide use emergency contraception.¹ Even so, there may be many more who need to use it but do not because of various reasons and so it continues to be an underutilized method of preventing unplanned pregnancies.

Emergency contraceptive (EC) pills if administered within 72 hours of intercourse can prevent 75% to 85% of unintended pregnancies. Mechanical EC in the form of intra uterine device (IUD) can be used upto five days of intercourse and has been found to have 100% efficacy².

A meta-analysis by WHO, 19 retrospective studies of post coital insertion of IUD revealed that this method may be 15 times more effective than the Yuzpe regimen.³ Emergency contraceptives are a safe, effective and low cost primary emergency care intervention.⁴

METHODOLOGY

The present study was conducted in the out patient area of a rural health care medical educational institute. A cross section of 500 women between the age of 15 years to 45 years coming to the out patient department were interviewed. Information regarding age parity education and use of emergency contraception if ever, were recorded.

RESULTS

Of the 500 women interviewed 70 (14 %) had knowledge of emergency contraception. Of this group 18 (25.7%) were in the age group <19 yrs, 26 (37.1%) in the age group 20-24 yrs, 16 (22.8%) in the age group 25-29 yrs and 10 (14.3%) were more than 30 yrs age.

Of the 70 who had knowledge of EC, 16 (22.85%) were educated less than 8th standard. 35 (50%) had education between 9-12th standard. 6 (8.57%) were graduates and 8 (11.42%) were post graduates.

Of these 70, 17 (24.28%) were unmarried and 53 (75.71%) were married.

430 (86%) women had never heard of or used emergency contraception ever.

Of the 500 women emergency contraceptive was used by 32 (6.4%) women. None of them ever used or had the knowledge that an Intra Uterine Device could be used for EC.

Of the 32 women who used EC, 26 (81.25%) had used it on one occasion while the other 6 (18.75%) had used it on several occasions. Only 2 (6.25%) of these 32 had taken medical advice from a specialist in the field of gynecology before taking the pills. Eight (25%) of the 32

had knowledge of EC through Television media. Five (15.62%) of the 32 got knowledge from their peers. Seventeen (53.12%) of the 32 got to know of EC through their male partners.

Table 1 Sociodemographic characteristics of women and knowledge of emergency contraception

Age in years	Aware of EC (70)		Not aware of EC (430)		Total (500)
	Number	percentage	Number	percentage	
<19	18 (1)	25.6	52	74.4	70
20-24	26 (16)	8.38	284	91.6	310
25-29	16 (10)	19.27	67	80.73	83
30+	10 (5)	27.01	27	72.99	37

In the () above are the number of women who used EC, most being in the age group 20-24 yrs.

Table 2 Education status and knowledge of emergency contraception

education	Aware of EC (70)		Not aware of EC (430)		Total (500)
	Number	percentage	Number	percentage	
illiterate	0	0	31	100	31
1-4	5	3.9	123	96.1	128
5-8	16 (3)	13	107	87	123
9-12	35 (20)	19.44	145	80.56	180
undergraduate	6 (4)	28.57	15	71.43	21
Post graduate	8 (5)	47.05	9	52.05	17

In the () above are the number of women who used EC, most having secondary high school education.

DISCUSSION

Emergency contraception needs to be an option easily available to all women in the event of unprotected sexual intercourse. Awareness needs be spread regarding the same. A multicentric study was conducted in Brazil, Chile and Mexico to identify factors that facilitated or hindered the introduction of emergency contraception (EC). The facilitating factors were found to be: perception of EC as a method that would prevent abortions and prevent pregnancy amongst rape victims and adolescents. It is possible to remove barriers through support from society committed to improving sexual and reproductive health and adequate training of health care providers⁵

In a study conducted in California wherein 6198 women between the age group 18-24 were interviewed, 38% women were aware of EC, 37% said nothing could be done in case of an unprotected sexual intercourse to prevent a pregnancy while 11% said that they didn't

know if anything could be done⁶. In the present study 44 (out of 311) women in the age group 18-24 yrs knew about EC. Also of the 70 women who knew about EC in the current study 22 (31.42%) didn't know how to use them. The knowledge of how to use EC also needs to be spread. None of the women in the present study knew that an Intra Uterine Device could be used as an EC.

In a study conducted by Foster et al⁶, it was found that women with no high school education had less knowledge of EC (11%). The present study also none of the illiterate women had knowledge of EC compared to 47.05% of those who completed post graduation. This data reiterates the need for educating women.

In the current study 25.6% women in the teenage had knowledge of EC compared to 8.38% in the age group 20-24 yrs and 27.01% In the age group 30-34yrs and above. The younger population is more likely to get knowledge through sex education programmes conducted in schools.

Emergency contraception can be used as a vehicle to support the use of regular contraception. This may be in the form of product pamphlet or counseling by the service provider. Health education at schools is also an effective way to impart knowledge.

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