



Awareness Regarding Contraceptive use in Rural India

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Abstract

Background: Increase in population growth is one of the biggest problems faced by many developing countries including India. Contraception plays an important role to halt population growth. Even after India being the first country to launch the family planning programme still the prevalence of contraceptive use is low which in turn increases the maternal and infant mortality rate. A high level of unmet need for contraception persists among currently married women in the country. The study was conducted with the aim to assess knowledge, attitude and practices about contraceptive methods among married women of rural population.

Methods: A cross-sectional study was conducted in the outpatient department of civil hospital Dalhousie, a rural hospital, for a period of six months from January 2020 to June 2020. A total of 412 participants aged 18-45 years were surveyed in that six month duration. Information was collected using pretested and predesigned questionnaire

Results: 51% of the study participants were in the age group of 26-35 years. Awareness about contraception was seen in 84% of the participants. Health workers were the source of information in 56%. 51% were practicing some kind of contraceptive method with condom being most common method. Only 26% were aware of side effects.

Conclusions: Increase in knowledge regarding contraceptives will increase the usage. This can be done by counselling for both husband and wife and providing proper information regarding contraceptive by removing their blind beliefs.

Keywords: Awareness, Contraception, Rural.

Introduction

The world is in the middle of a dramatic expansion in population and it may be overburdened by its success: the decline in death rates and the continued high birth rates in developing countries has resulted in rapid population growth.¹ India accounts for 2.4% of the world's surface area yet it supports more than 17.5 % of the world's population.² The single most

threat of India's development is uncontrolled population growth. Family planning has crucial strategy to halt the fast population growth, to reduce child mortality rate and to improve maternal health in developing countries. World Health Organization defined Family planning as "A way of thinking and living that is adopted voluntarily, upon the basis of knowledge, attitudes and responsible decisions by individuals and

couples, in order to promote the health and welfare of the family group and thus contribute effectively to the social development of the country".³ India became the first country in the world to formulate a National Family Planning Programme in 1952, with the objective of "reducing birth rate to the extent necessary to stabilize the population at a level consistent with requirement of national economy."⁴

It has been estimated that meeting women's need for modern contraceptives would prevent about one quarter to one-third of all maternal deaths.^{5,6} Even though there is wide availability of various types of contraceptives, the rate of population growth and unplanned pregnancies is still high. Use of contraceptives can prevent at least 25% of all maternal deaths by allowing women to prevent unintended pregnancies and unsafe abortions, and protect themselves from sexually transmitting diseases including HIV.⁷ Considering all these factors this study was conducted to assess knowledge, attitude and practices among rural married women.

Methods

A cross-sectional study was conducted in the outpatient department of civil hospital Dalhousie, a rural hospital, for a period of six months from January 2020 to June 2020. A total of 412 participants were surveyed in that duration. The selection criterion was married women between the ages of 18-45 years, living with their husbands at the time of interview. Pregnant women, having a child younger than 2 years and who had any medical disorder were excluded from the study. Informed consent was taken from every participant. At the end of the interview participants were given health education regarding family planning.

Methodology

All married women who fulfilled the inclusion criterion, were interviewed with a pre-designed, pre-tested, structured questionnaire. The data on age, educational status, knowledge and source of

contraceptive methods, attitude towards contraception, practices towards contraception, and reasons for not using contraceptives was collected.

The data was entered in MS Excel and analysed.

Results

Table 1 shows that 51% of the study participants were in the age group of 26-35 years. 90% of women were from Hindu religion. 12% were illiterate and 60% of the women were housewives.

Table 1: Socio-demographic profile of the study subjects

Variable	Number	Percentage
Age(years)		
18-25	157	38
26-35	210	51
36-45	45	11
Religion		
Hindu	372	90
Muslim	12	3
Christian	16	4
Others	12	3
Education		
Illiterate	50	12
Primary school	41	10
Middle school	16	4
High school	210	51
Graduate	83	20
Post graduate	12	3
Occupation		
Housewife	247	60
Unskilled	83	20
Skilled	49	12
Semi-professional	21	5
Professional	12	3

Table 2 shows that awareness about contraceptive methods was good in our population with 84% women being aware of these methods. When enquired about source of information, health worker (56%) was the main source of information followed by health centre (22%), newspaper (12%) and TV (10%). 56% of the participants were aware that use of contraceptives will be helpful in spacing between two children and 21% said unwanted pregnancy can be prevented. 18% said its use for limiting and 5% said STD's can be prevented. The awareness about side effects in rural area was poor, only 26% were aware about it.

Table 2 Awareness about contraceptive methods among study subjects

Variable	Number	Percentage
Awareness about contraception		
Yes	346	84
No	66	16
Source of information		
Healthy workers	230	56
Health centre	91	22
News paper	50	12
TV	41	10
Merits of using Contraceptives		
Spacing	230	56
Prevention of unwanted pregnancy	87	21
Limiting	74	18
Preventing STDs	21	5
Awareness about side effects		
Yes		26
No		74

Table 3 shows more than 51% of the participants were using contraceptive methods. The method commonly used was condom by 80% followed by copper T in 12% and oral contraceptive pills in 8%. Husband was the main decision making person in using the contraceptives. 40% participants said husband only decides about the use, followed by wife 34% and 26% by both of them.

Table 3: Practices about contraceptive methods among study subjects.

Variable	Number	Percentage
Use of contraceptive Method		
Yes	210	51
No	202	49
Type of contraceptive method being used		
Condom	330	80
Cu-T	50	12
Oral contraceptive pills	32	8
Injectable	00	00
Decision making in contraceptive use		
Husband	165	40
Wife	140	34
Both	107	26

Table 4 shows reasons for not using contraceptives. 45% said that they don't use contraception because of the fear of side effects, 29% said they will lose fertility, 18% want a child, 5% said their husband's doesn't allow them to use and 3% said religion doesn't allow them to use.

Table 4: Reasons for not using the contraceptives

Reasons	Number	Percentage
Fear of side effects	91	45
Loose fertility	59	29
Want child	36	18
Husband doesn't allow	10	5
Religion will not allow	6	3
Total		202

Discussion

This study shows majority of the study participants in the age group of 26-35 contributing to 51%. In another study maximum study subjects were in the age group of 25-29 years contributing to 25.3%.⁷ In a study done by Zangmu S et al 48.5% belong to the age group of 26-35 years.⁸ In this study majority of the women were from Hindhu religion catering to 90%. In a similar study majority of the subjects belonged to the Hindhu religion (92%).⁸ The literacy rate was good our study, only 12% were illiterate. which was similar with another study.⁸ In another study done by Lwelamira J et al the illiteracy rate was found to be 4%.⁹ In this study, 60% of the women were housewives where as in one study 41.2% were housewives.⁸

The study finding shows that 84% of women were aware of contraceptives. In another study the awareness was found to be 95.2%.¹⁰ In another study done by Mustafa R et al in rural area, 81% were aware about contraceptive methods.¹¹ Health worker was the main source of information in 56% of cases. In another study source of information was health personnel contributing to 52.6% were as in another study 98.5% of the subjects got information from the health worker which is similar to our study.^{7,8}

The findings showed that 56% of the participants were aware that use of contraceptives will be helpful in spacing between two children and 21% said that it will prevent unwanted pregnancy. In another study 48.5% said contraceptives will prevent unwanted pregnancies and 25.6% said it will be helpful in spacing between two children.⁷

The awareness about side effects was noted in 26%. In another study the awareness about side effects is much poorer than our study were only

10.5% knew about side effects due to contraceptive methods.⁷ Regarding practices the study showed that 51% of the participants were using contraceptive methods. The method commonly used was condom, seen in 80%. In another study 15.6% used condom where as in a similar study done by Mustafa R et al 33.9% used condom and in another oral contraceptives pills were most commonly used contributing to 94.3%.⁹⁻¹¹

40% participants said that husband's were the main decision making person in using the contraceptives. In one study 37.4% decision by husband, 21.4% by wife and 41.2% by wife.⁷ In another study done by Kiran G et al 41.45% is by both, 30.77% husband and 26.07 by wife.¹²

When asked for not using the contraceptive methods they came out with many reasons such 45% said they have fear of side effects, 29% said they will lose fertility, 18% wanted a child, 5% said their husband's does not allow and 3% said religion doesn't allow them to use. In a study done in rural area near about 60% said because of husband's disapproval they don't use. Whereas in another study 48% said lack of knowledge was the main reason for not using contraceptive method.¹⁰

Conclusion

To increase the prevalence of contraceptive method it would be very much important to speed up social welfare programmes in order to uplift the person sitting on the lowest stair of the social hierarchy. In conclusion, the findings suggest that there is still a need to intensify information, education, communication activities and motivate the population to practice contraception. In order to be effective, programme must include counselling, motivation and education to help women disentangle fact from fiction regarding health and side effects of various contraceptive methods. The mass media should also be encouraged in community to the benefits of modern contraceptive methods. Promotion of contraceptive usage should be done by intense awareness campaigns.

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