



OPEN ACCESS

Key Words

Women, reproductive age groups, contraceptive practices

Corresponding Author

M. Raksha, Department of OBG, BMCRI, Bangalore, Karnataka, India

Author Designation

^{1,2,3}Assistant Professor ⁴Junior Resident

Received: 20 June 2024 Accepted: 19 July 2024 Published: 29 July 2024

Citation: Sharadini Naveen Kumar, M. Raksha, Shashikala B. Patil and Kople Shreya Kamlakar, 2024. Women in the reproductive age groups: contraceptive practices. Res. J. Med. Sci., 18: 436-439, doi: 10.36478/makrjms.2024.8.436.439

Copy Right: MAK HILL Publications

Women in the Reproductive Age Groups: Contraceptive Practices

¹Sharadini Naveen Kumar, ²M. Raksha, ³Shashikala B. Patil and ⁴Kople Shreya Kamlakar

¹⁻⁴Department of OBG, BMCRI, Bangalore, Karnataka, India

Abstract

Family planning deals with reproductive health of the mother, having adequate birth spacing, avoiding undesired pregnancies and abortions, preventing sexually transmitted diseases and improving the quality of life of mother, fetus and family as a whole. This is a cross-sectional study conducted at department of OBG at Vani Vilas Hospital, attached to Bangalore medical college and research institute, a tertiary care center. After obtaining approval and clearance from institutional ethical committee and written informed consent. The patient fulfilling the inclusion criteria were enrolled for the study. Among 250 women, 71.2% had ever used family planning methods, 65.6% had used contraception to prevent unwanted pregnancy. 82.6% had used on their own and 86% wanted to use in future. Among the various reasons for not using contraception were, 31.2% had lack of information, 28% had prohibition from husband and 21.2% for the prohibition from family and fear of side effects were seen in 9.2%. the type of family planning method which was used maximum was pills seen in 63.2% followed by condoms in 30.4%, 4.4% used intrauterine device and 2% used injectables.

INTRODUCTION

India is projected to be the most populous country according to United Nations report, the knowledge and awareness of contraceptive methods is of utmost important for small family norms and to increase inter-pregnancy interval, so that we can achieve optimum maternal and child outcomes. Many woman who are in reproductive age group have either less idea or wrong information regarding the contraceptives available hence a channel should be made such that they get information regarding the contraceptives and how they are available and how they should be used. Family planning deals with reproductive health of the mother, having adequate birth spacing, avoiding undesired pregnancies and abortions, preventing sexually transmitted diseases, and improving the quality of life of mother, fetus and family as a whole^[1].

A woman can get pregnant if one of man's sperm reaches her egg (ovum). Contraception tries to stop this either by stopping egg production or by keeping the egg and the sperm apart or by stopping the implantation of the fertilized egg into the uterus. Contraception in the simplest terms is the prevention of pregnancy and contraceptive methods, by definition, are the preventive methods to help women avoid unwanted pregnancies. National Family planning program has been started in India since 1952 at the primary care level and major efforts have been taken from time to time to improve its coverage and accessibility by involving the primary care level workers and ground level workers such that it reaches the target population^[2].

Nearly half of all pregnancies, totaling 121 million each year throughout the world, are unintended. The United Nations Fund for Population Activities (UNFPA) notes that future population trends will hinge on the fertility decisions of today's men and women aged 15-24 years and on their ability and freedom to act on those decisions. Hence family planning helps families regulate their fertility by limiting the number of children and widening the interval between their gravidities by using diverse contraceptive methods.3 By precluding unintended gravidity, maternal mortality and morbidities decrease. Contraception also helps reduce unsafe abortions, fetal infections and fetal deaths^[4].

MATERIALS AND METHODS

This is a cross-sectional study conducted at department of OBG at Vani Vilas Hospital, attached to Bangalore medical college and research institute, a tertiary care center. After obtaining approval and clearance from institutional ethical committee and written informed consent. The patient fulfilling the inclusion criteria were enrolled for the study. The questionnaire elicited information regarding their

demographic details, knowledge and source of contraception. The attitude of female towards contraception and practice of contraception in reproductive age women. Patients are questioned regarding the knowledge about oral contraceptive pills, injectables, IUCDs, condoms, tubectomy, vasectomy and other contraceptive methods. The results were represented as graphs and charts.

Sample Size: Sample size was calculated by taking prevalence of 80% (0.80) on positive attitude towards contraceptive usage as per the study by Qazi M *et al.* (Reference: Qazi M, Saqib N, Gupta S. Knowledge, attitude and practice of family planning among women of reproductive age group attending outpatient department in a tertiary centre of Northern India. Int J Reprod Contracept Obstet Gynecol 2019., 8:1775-83). The other parameters considered for sample size calculation were 5% (0.05) two-sided alpha error and 5% (0.05) margin of error. The following formula was used to calculate the sample size:

$$N = \frac{(Z_{I-a/2})^{2} P (1-P)}{d^{2}}$$

Where,

- $Z_{1-a/2} = Z_{1-0.05/2} = 1.96$ (From Z table) at 5% two-sided alpha error.
- P = Expected prevalence based on previous study.
- d = Margin of error.

$$N = \frac{1.96^{2} \times 0.80(1 - 0.80)}{0.05}$$

$$=\frac{0.6147}{0.0025}$$

= 245.88 ~ 246

As per the above calculation, the minimum sample size required was 246. We collected total sample of 250.

RESULTS AND DISCUSSION

Among 250 women, 71.2% had ever used family planning methods, 65.6% had used contraception to prevent unwanted pregnancy. 82.6% had used on their own and 86% wanted to use in future. Among the various reasons for not using contraception were, 31.2% had lack of information, 28% had prohibition from husband and 21.2% for the prohibition from

Table 1: Practice of contraceptive use in the study population (N=250)

Variables		Frequency	Percentage
Ever used family planning before	Yes	178	71.2%
	No	72	28.8%
Used contraceptive to improve your own			
and child health	Yes	28	11.2%
	No	222	88.8%
Used contraceptive to prevent unwanted			
pregnancy	Yes	164	65.6%
	No	86	34.4%
Used contraceptive for socioeconomic			
reason	Yes	33	13.2%
	No	217	86.8%
Used contraceptive as recommended			
by health professionals	Yes	43	17.2%
	No	207	82.8%
Want to use contraceptives in the future	Yes	215	86.0%
	No	35	14.0%
Reason not wanting to use contraceptive	Still want to have a children	26	10.4%
	Lack of information of contraceptive methods	78	31.2%
	Fear of side effects	23	9.2%
	Prohibition of husband	70	28.0%
	Prohibition of family/parents	53	21.2%
Contraceptive method used in the past	Intrauterine device	11	4.4%
	Pills	158	63.2%
	Condoms	76	30.4%
	Injectables	5	2.0%

family and fear of side effects were seen in 9.2%. the type of family planning method which was used maximum was pills seen in 63.2% followed by condoms in 30.4%, 4.4% used intrauterine device and 2% used injectables.

World health organization has 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, to promote the health and welfare of family groups and thus contribute effectively to the social development of a country.

Although India has a National Family planning program since 1952 at the primary care level and major efforts have been taken from time to time to improve its coverage and accessibility by involving the primary care level workers, but increasing program coverage is not enough unless all eligible women have adequate awareness as well as favorable attitude and a correct and consistent practicing of family planning methods as per their need. Increase of awareness, knowledge and favorable attitude for family planning activities of eligible women are recommended. In this study, the total sample consisted of 250 participants. The mean age of the participants was 32.76±4.6 years and more than half the number of the participants belonged to 25-34 years of age group. It was noticed that, with the advance in age, adoption of family planning increases, and it was statistically significant. Among the study participants, >three-fourth have gone to primary school or above to seek education and it was statistically significant that the contraception use was higher among the participants those having literacy status as matriculation or above., similar findings were observed in the study done by Srivastav^[5]

In our study 84.8% of the women had heard of

birth contraceptives and 79.2% had used a method of contraception. Majority of the women learnt about the family planning method through family and friends (75.6%). Majority of the women were getting current family planning services from government health facility (58.4%). The visit of family planning centre was only once per month for 88.4% of the women, 1-3 times per month for 10.8% of the women and >3 times per month or 0.8% of the women. 96% of the women spent below Rs. 500 per month on family planning method and 4% spent between Rs. 500-Rs. 1000 per month on family planning method. 28.8% of the women were explained the advantages and disadvantages of the currently using method of family planning by someone. 8.8% of the women had received health education about family planning. 31.2% (n=78) noticed side effect/s as a result of using the family planning method., among those 78 women, 23.1% (n=18) had consulted a health worker about these side effects and 15.4% (n=12) told these side effects will affect their use of contraception in the future.

In a cross-sectional study of predictors of Knowledge, Attitude and Practice (KAP) towards Family Planning by Imtisha M et al. among 240 pregnant Fijian women, 44.2 % were in age group of 25-29 years of age and very few were 40-44 years of age (0.4%). More than one-third of the participants followed Christianity (38.3%), whilst the remainder followed Islam (31.3%), Hinduism (28.3%) and others 2.1%. The knowledge score was based on 12 questions, with a maximum possible score of 24. The mean knowledge score was 15.0 (±3.2), High level (>20) was seen in 30.4%, Medium Level (15-19) in 67.1% and low level in 2.5%. The attitude score was based on five questions, with a maximum possible score of 30. The mean attitude score was 20.56 (±5.68), Positive attitude (>25) was in

56.7%, Neutral Attitude in 35.8% and Negative attitude in 7.5%. the practice score was based on six questions, with a maximum possible score of six. The mean practice score was 5.0 (± 1.7). Good (High Level) Practice in 79.6% and Poor (Low Level) Practice 20.4% [6].

CONCLUSION

Reason for inadequate practice of family planning methods are prohibition from husband and family. This study shows lack of health education and knowledge regarding advantages and disadvantages about contraception. To fill this gap awareness programs, advertisements, posters, sex education, preconceptional counselling could be implemented. Ignorance regarding use and side effects of various contraceptive methods is another reason for inadequate practice of family planning methods. Most of them were interested to know about family planning and are willing to use contraception.

REFERENCES

 Bamniya, J., D. Patel, P. Singh and N. Chakravarti, 2021. A study of knowledge, awareness, and acceptance of contraception among reproductive age women at tertiary care hospital, ahmedabad. Int. J. Reprod., Contraception, Obstet. Gynecol., 11: 206-210.

- Wani, R., I. Rashid, S. Nabi and H. Dar, 2019. Knowledge, attitude, and practice of family planning services among healthcare workers in kashmir-a cross-sectional study. J. Family Med. Primary Care, Vol. 8.10.4103/jfmpc.jfmpc 96 19.
- 3. Jain, R. and S. Muralidhar, 2011. Contraceptive methods: Needs, options and utilization. The J. Obstet. Gynecol. India, 61: 626-634.
- Renjhen, P., A. Kumar, S. Pattanshetty, A. Sagir and C.M. Samarasinghe, 2010. A study on knowledge, attitude and practice of contraception among college students in sikkim, India. J. Turk. German Gynecological Assoc., 11: 78-81.
- Gupta, V., D. Mohapatra and V. Kumar, 2016. Family planning knowledge, attitude, and practices among the currently married women (aged 15-45 years) in an urban area of rohtak district, haryana. Int. J. Med. Sci. Public Health, 5: 627-632.