



Research Article

A STUDY OF CONTRACEPTIVE UTILIZATION PRACTICES AMONG MARRIED COUPLE FROM RURAL AREA OF SATARA DISTRICT: A COMMUNITY BASED OBSERVATIONAL STUDY

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ABSTRACT

Background: This is a rural and community based study designed to know the gap and understanding level of rural people in accepting such measure in adopting the family planning.

Objectives: To assess the knowledge about various methods of contraception, spacing methods and its reasons and problems faced in contraceptives uses by the rural population.

Methodology: It is a cross sectional and community based observational study was conducted among 200 married couples of rural area of two block from Satara District (Maharashtra), using a pretested and predesigned questionnaire.

Results: Majority of couples 94.5% understand the need of spacing is important for their child as well as self health. When the question about willingness of permanent family planning operation (vasectomy/tubectomy) most 59.5% population were ready after two issues, 12% after one issue while 21.5% were depend on parent's approval for the family planning. 89.5 % were aware about the previous knowledge of various contraceptive methods So far as choice of permanent method of contraception- Tubal ligation v/s Vasectomy is concerned, 91% preferred tubal ligation as compared to 7% who opted for vasectomy. Condom use as a method of birth spacing was seen better accepted and 71.5% population knew that condom can prevent sexually transmitted disease including HIV. However the knowledge about reducing the failure rate of Condom use was not known to the study population.

Conclusion: There is a knowledge-practice gap, lack of motivation as well as awareness of Mother-in laws and husbands and it should be target groups for IEC or any intervention.

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INTRODUCTION

In India, rural population is not having too much awareness and knowledge about contraceptives methods. It is also needs to disseminate these methods among the rural population for implementing the family planning methods to control the population. In India, the various religious customs becomes a problem in the knowledge, communication about this. This is a rural and community based study designed to know the gap and understanding level of rural people in accepting such measure in adopting the family planning. Basically, the poor knowledge, lack of information sources, access to health care centre, low awareness, literacy etc. affects the family planning acceptance in the rural community. This study would also help in drawing some myths and facts about the practices among the married people in rural area. It would also include the knowledge about spread of sexually transmitted infection among this population. Further, it would add the strategies which have to be adopted for increasing the awareness and knowledge about the various contraceptive methods. India launched the National Family Welfare Programme in 1951 with the objective of reducing the birth rate to for stabilizing the population, In India as a whole, current contraceptive rate of currently married women is 56%.

Female sterilization, with prevalence of 37%, accounted for 71% of all contraceptive use in India (International Institute for Population Sciences and ORC Macro, 2007). Still there is need to change the scenario of contraception use in rural area. In this context, the present study reports the attitude of married couple on practice of family planning in a rural population of two blocks i.e. Karad and Patan of Satara District, India.

Rationale of the study

This is a rural and community based study designed to know the gap and understanding level of rural people in accepting such measure in adopting the family planning. Basically, due to poor knowledge, lack of information sources, access at the health care centre, low awareness, literacy etc. more affect on the family planning in the rural community. This study will also help in drawing some myths and facts about the practices among the married people in rural area. It will also conclude the reason for spreading sexually transmitted infection among this population. Further, it will also add the strategies which have to be adopted for increasing the awareness and knowledge about the various contraceptive methods. Even in the rural community there are many problems before choosing a birth control method, that how well each method works to prevent

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pregnancy, possible side effects of each methods, one's comfort level with using these method so, they may have several problems and finding their answer. Thus this study will help in identifying these problems and will also be useful for further implementation of health program or policy.

Aims and objectives:

Aims

- To study the Utilization of various contraceptive methods in rural area for family planning.
- Objectives:
- To assess the knowledge about various methods of contraception - temporary and permanent.
- To find out the preferred choices of the couple for a spacing methods and its reasons.
- To find out the problems faced in contraceptives uses by the rural population.
- To study the knowledge of prevention of sexually transmitted infection by using these methods.

sampling from the updated list of the residents of the area. Sample size was drawn on the formula $4pq/12$. Thus, minimum number of women to be studied was taking as non response rate of 10%, and the estimated sample size became 100 per block. The study population was then selected by simple random sampling from the updated list of the residents of the area.

RESULTS AND DISCUSSION

The study analysis reveals that the age group of the study population was 29% for 18-23 yrs of age and 46% for 24-29 yrs age. Rests were from 30-35 yrs age. Age at marriage was seen as between 18-23 yrs for 71% of population and nearly 22.5% were between 24-29 yrs of age. Religion wise majority were Hindu and only 7% were Muslims. Nearly 66.5% of women were housewife and 19% were engaged in some part time job. Education level was up to middle school level in 57.5%. Most couples were from joint family (87%) and only 13% had nuclear family. Source of information was said to be primary health centers (ASHA and Anganwadi Workers) in 74.5% and

Table 1. Distribution of respondents based on the attitude regarding socio- demographic characteristics Demography of Total Participants (n=200) in the study

Factors	PATAN		KARAD		Total	%	
	Male	Female	Male	Female			
Age	18-23	0	38	1	19	29	
	24-29	2	39	4	47	46	
	30-35	10	8	12	13	21.5	
	>35	2	1	4	0	7	3.5
Age @marriage	18-23	1	78	3	60	142	71
	24-29	6	8	15	16	45	22.5
	30-35	6	0	3	3	12	6
	>35	1	0	0	0	1	0.5
Religion	Hindu	14	80	16	70	180	90
	Muslim	0	1	5	8	14	7
	Buddha	0	5	0	1	6	3
Economic status	Rich	1	6	3	6	16	8
	Medium	13	78	17	72	180	90
	Poor	0	2	1	1	4	2
	Housewife	0	71	0	62	133	66.5
	Servant	9	7	14	8	38	19
Occupation	Agee labor	3	3	0	6	12	6
	Tailor	0	0	1	3	4	2
	Driver	1	0	4	0	5	2.5
	Business	1	1	2	0	4	2
	Parlor	0	2	0	0	2	1
	Education	0	2	0	0	2	1
	Illiterate	0	4	0	1	5	2.5
	Primary	3	3	3	15	24	12
	Secondary	7	50	11	47	115	57.5
	Higher sec.	1	10	2	3	16	8
Education	UG	3	15	4	11	33	16.5
	PG	0	4	1	2	7	3.5
	Total	14	86	21	79	200	100

MATERIALS AND METHODS

NARRIM team was trained in order to build rapport with rural married couples prior to initiation of study. A specific questionnaire was employed to collect the information regarding the knowledge, practice and attitude towards the various contraceptive methods among the rural married couples. Questionnaire was prepared in local language (Marathi) for better understanding by the participants, and was retranslated in English before its use. Before every interview a fully well informed consent was obtained from the participant. The study population was then selected by simple random

rest of them received the information from TV and Radio. On assessing the opinion about need for family planning program as many as 93.5% said that it aims at small and happy family and so is welcomed. 16% of the population accepted the family size of only one child and 67% accepted two child normirrespective of gender of the issue. Rest 17% wanted more than two because of insistence on male progeny.

Need and choice of contraception

When assessed for knowledge and awareness about the need of contraception, 89.5% were found aware about the various methods and at adequate knowledge about the methods of

Table 2. Distribution of Respondents towards the Various Attitudes Regarding Family Planning Methods

Question	n (200)	%
1.Marriage Type		
A.Love marriage	15	7.5 %
B.Arrange marriage	184	92 %
C.Other	01	0.5 %
2.Family type		
A.Unit/Joint	174	87 %
B.Separate	26	13 %
3.Opinion about family program		
A.Only population control	15	7.5 %
B.For happy family	56	28 %
C.Both A & B	116	58 %
D.General option with all considered	13	6.5 %
4.Information sources about Family Planning-		
A.PHC	154	77 %
B.AWW/ASHA only	149	74.5 %
C.From other sources	46	23 %
5.Desire about issue		
A.Only 1 female child	15	7.5 %
B.Only 1 male child	17	8.5 %
C.1 male – 1 female	134	67 %
D.Other than above	34	17 %
6.Spacing opinion between two issues?		
A. Needed	189	94.5 %
B. No need	4	2 %
C. Not confirm	7	3.5 %
7.Willing of family planning operation		
A.Never	3	1.5 %
B.After one issue	24	12 %
C.After two issue	119	59.5 %
D.Parents approval	43	21.5 %
E.other	11	5.5 %
8.Previous knowledge about Methods-		
A.Yes	179	89.5 %
B.No	11	5.5 %
C.Not confirm	10	5 %
9.Use of contraceptive method earlier-		
A.Yes	122	61 %
B.No	74	37 %
C.Not know	4	2 %
10.Which sterilization you would be preferred?		
A.Vasectomy	14	7
B.Tubectomy	182	91
C. Other	4	2
11.Can we avoid STIs by using any of this method?	143	71.5
A.Yes	25	12.5
B.No	32	16
C.Not known/can't say		

Table 3. Distribution of users according to different methods of contraception

No.	Methods	Patan	Karad	TOTAL	Percentage
1	Condom	23	31	54	27
2	Cu-T	15	19	34	17
3	MALA-D	4	12	16	8
4	Safe period	7	3	10	5
5	Condom & MALA-D	0	2	2	1
6	Cu-T & MALA-D	0	2	2	1
7	Not answered	4	0	4	2
	TOTAL	52	70	122	61
8	Non users	44	30	74	37

Table 4. Distribution of users according to different methods of contraception³

No.	Contraceptive Methods	DLHS-2 2002-2004	DLHS-3 2007-2008	Current study 2014
1.	Any methods	62.1	63.8	61
2.	Female sterilisation	52.8	54.6	91*
3.	Male sterilisation	2.7	3.2	7*
4.	Oral Pills	1.8	1.4	8
5.	IUD(Cu-T)	1.0	1.4	17
6.	Condom	2.4	2.8	27
7.	Safe periods	0.8	0.6	5

Table 5. Showing the no. of respondents according to Age at Marriage³

No.	Marriage	DLHS-2 2002-2004	DLHS-3 2007-2008	Current study 2014
1	Mean age at marriage for boys	24	24	28
2	Mean age at marriage for girls	18.5	18.9	20.8

Percentage of total DLHS-2 is adjusted according to rural distribution of population as per 2001 Census.

contraception, their utility and likely problems. So far as choice of permanent method of contraception- Tubal ligation v/s Vasectomy is concerned, 91% preferred tubal ligation as compared to 7% who opted for vasectomy. Rest 2% did not opt. This is probably due to reluctance of male partner to shoulder the responsibility of family planning himself. However, he does agree for wife's tubal ligation option. Awareness about the need of birth spacing methods was seen in as many as 94.5% of couple and they were aware about its beneficial impact on maternal and child health. In this (122/200) 61% of the study population was currently using one of the contraceptive methods.

Condom (27%) was the most commonly used contraceptive method followed by Cu-T (17%) and Oral pills (8%), Safe period (5%). And 2% were using combination methods like Condom and oral pills, Safe periods and oral pills. 37% population were non users of any methods because they needed addition to their family Table 3. Condom use as a method of birth spacing was seen better accepted and 71.5% population knew that condom can prevent sexually transmitted disease including HIV. However the knowledge about reducing the failure rate of Condom use was not known to the study population, which may have an adverse impact in HIV prevention and these needs to be emphasised in prevention of STI/HIV program.

First two columns (DLHS 2 and 3) refer to the female and male sterilization number carried out and the present study reveals the willingness shown by respondents. Condom practice is seen to be on rise probably because of HIV awareness program. Above findings are compared with District Level Household Surveys (DLHS) which was carried out in rural as well as urban Maharashtra in the year 2002-2004,2007-2008. This fact sheet presents information on the key indicators and trends for marriage occurred at the age in the rural part in the state of Maharashtra. The mean age at marriage for boys in DLHS-2 and 3 was 24 years while in current study it seen 28 years. The average age of marriage for girls was 18.9 and 18.5 in DLHS 3 and 2 while 20.8 in this study. It happens over the 6 -10 years of period due to education, family and economic conditions and other factor like migration etc.

Summary

The study analysis reveals that most couples having age at marriage was seen as between 18-23 yrs for 71% of population and nearly 22.5% were between 24-29 yrs of age On assessing the opinion about need for family planning program as many as 93.5% said that it aims at small and happy family and so is welcomed.

16% of the population accepted the family size of only one child and 67% accepted two child norms irrespective of gender of the issue.

Rest 17% wanted more than two because of insistence on male progeny.89.5 % peoples were aware about the various methods of family planning among them 61% people were using one of the method while 37 not using any method and they need well counseling about of family planning methods.

Conflict of Interest: NA

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