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CORRELATES OF USE OF FAMILY PLANNING METHODS AMONG MARRIED WOMEN OF REPRODUCTIVE AGE GROUP IN BAREILLY, INDIA

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ABSTRACT

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INTRODUCTION

Globally around 84 million unwanted pregnancies occur in a year. Approximately 46 million abortions take place annually and of these 20 million are done under unsafe and unhygienic environment. Almost, Seventy thousand females worldwide die in a year because of unsafe abortion.¹ The major brunt of these unsafe abortions that lead to about 13% pregnancy related deaths world wide, is borne

Background: In India more than 75% of pregnancies are unplanned and a quarter of them are undesired. In spite of availability of many contraceptive techniques, the couple protection rate (41%) continues to be inadequate. Most couples in India do not want to use a contraceptive method on a long-term basis for the fear of side-effects. Hence, unwanted and unplanned pregnancies are quite common. With this background the present study was carried out to assess the pattern of utilization of family planning services provided to married women of reproductive age group in Bareilly.

Materials and methods: The cross sectional, community based study involved a survey amongst married women of reproductive age group residing in rural and urban areas of Bareilly district. A structured pretested schedule was used. Chi- square test and ANOVA were used to analyze data.

Results: A total of 62.9 % females were currently using family planning methods. A higher proportion of them had undergone sterilization (30.5%) and used condoms (28.2%). The most common reason found for not using any method was lack of awareness (18.3%). 28.7% of females had obtained the family planning method at last use from a private institute. Contraceptive use was significantly higher among the females aged 24 years and above, those who were illiterate, parity 3 or more and belonged to joint families.

Conclusion: Only 62.9 % females were currently using family planning methods. Awareness programs regarding the use of family planning methods to avoid unwanted pregnancies need to be strengthened.

Key words: Contraception, females, urban and rural areas

by developing countries only.²

In India, too, more than 75% of pregnancies are unplanned and a quarter of them are undesired.³ Annually almost 11 million abortions take place in the country, and more than half of these are unsafe, accounting to high maternal morbidity and mortality rates. ⁴ The irony of fact is many of these abortions can be averted by simply generating awareness in females about various contraceptive measures.⁵ But in India, in spite of availability of many contraceptive techniques, the couple protection rate (41%) continues to be inadequate.⁶ Most couples in India do not want to use a contraceptive method on a long-term basis for the fear of side-effects. Hence, unwanted and unplanned pregnancies are quite common.⁷

With this background the present study was carried out to assess the pattern of utilization of family planning services provided to married women of reproductive age group in field practice areas of the Department of Community Medicine, Rohilkhand Medical College and Hospital, District Bareilly.

MATERIALS AND METHOD

The cross sectional three month study was carried out in purposively selected villages and mohallas of District Bareilly, Uttar Pradesh. These 5 villages from rural areas and 5 mohallas from urban areas were selected by convenience. All married women of reproductive age group aged between 15-45 years in the selected households were surveyed and comprised the study unit. A medical social worker first visited the selected villages and mohallas and identified those households in which currently married females were residing by house to house survey. Serial numbers were allotted by sequence to the identified households. The information was collected by the investigator himself by interview technique. All married women aged <15 years or >45 years were excluded from the study. Those women who were non cooperative or refuse to provide the necessary information were not included in the study.

Ethical clearance was obtained from institutional review board. The study involved the use of a structured pretested and predesigned questionnaire to assess study subjects' pattern of utilization of health care services. The questionnaire was pretested on 20 subjects in the study area. Necessary modification will be made to overcome the difficulties encountered during pretesting.

Dependent variables: Contraceptive usage

Independent variables: Age, sex, religion, caste, marital status, type of family, education, occupation, income, socioeconomic status

Table 1: Use of family planning methods among currently married women in urban and rural areas of Bareilly

Characteristics	Urban area	Rural area	Total	χ2(df)	P-value
Family planning method being cu	rrently used (n=51	5)			
Users	155 (30.1)	169 (32.8)	324 (62.9%)	1.781 (1)	0.182
Non users	103 (20.0)	88 (17.1%)	191(37.1)		
Type of family planning method	being used (n=324)			-	-
Condom	65 (12.6%)	80 (15.5%)	145 (28.2%)		
IUD	1 (0.2%)	4 (0.8%)	5 (1.0%)		
OCPs	7 (1.4%)	1 (0.2%)	8 (1.6%)		
Injectable	1 (0.2%)	0 (0.0%)	1 (0.2%)		
Safe period	1 (0.2%)	3 (0.6%)	4 (0.8%)		
Sterilised	76 (14.8%)	81 (15.7%)	157 (30.5%)		
Coitus interuptus	1 (0.2%)	1 (0.2%)	2 (0.4%)		
Abstinence	0 (0.0%)	2 (0.4%)	2 (0.4%)		
Reason for not using any method	(n=191)				
Fear of side effect	0 (0.0%)	1 (0.2%)	1 (0.2%)	-	-
Husband not willing	1 (0.2%)	4 (0.8%)	5 (1.0%)		
Want more children	46 (8.9%)	30 (5.8%)	76 (14.8%)		
Lack of awareness	49 (9.5%)	45 (8.7%)	94 (18.3%)		
Pregnant	4 (0.8%)	4 (0.8%)	8 (1.6%)		
Not living with husband	1 (0.2%)	0 (0.0%)	1 (0.2%)		
Young infant is breastfeeding	2 (0.4%)	4 (0.8%)	6 (1.2%)		
Place from where Family plannin	g method was obta	ined at last use (n=274)		
Government institute	68 (13.2%)	58 (11.3%)	126 (24.5%)	0.19 (1)	0.66
Private institute	76 (14.8%)	72 (14.0%)	148 (28.7%)		

Data	rega	rding	socio-demographic				
characteris	tics	(Age,	gender,	religion,	caste,		

marital status, type of family, education, occupation, income and socioeconomic status

using modified Prasad's classification was collected.⁸ Specific questions related to reproductive history (parity) and family planning method used were asked.

Data entry and statistical analysis was performed using the Microsoft Excel and SPSS windows version 14.0 software.

RESULTS

Socio-demographic characteristics

Out of 515 female respondents in this study, 258 (50.1%) were from the urban region and 257 (49.9%) were from the rural region. A higher proportion of females was aged < 30 yrs (43.9%) and was married after 18 years of age (57.3%). Majority of respondents belonged to low socioeconomic status (95.7%) and were Hindus (82.7%). Most were illiterates (64.5%). A higher proportion of females had literate husbands (57.3%). Most participants were multiparous (80.2%) and belonged to joint families (60.2%). (Table 2)

Use of family planning methods

A total of 62.9 % females were currently using family planning methods. A higher proportion of them had undergone sterilization (30.5%) and used condoms (28.2%). The most common reason found for not using any method was lack of awareness (18.3%). 28.7% of females had obtained the family planning method at last use from a private institute. (Table 1)

Contraceptive use was significantly higher among the females aged less than 30 years, those with parity 3 or more and those belonging to joint families. Husband's education was significantly associated with contraceptive use. Adjusted OR for FP method after adjusting other factors has been shown. The adjusted OR are calculated for adjusting all the significant factors associated with the dependent variable (FP method).

Age, parity and type of family were found significant. (Table 2)

Table 2: U	Jnadjusted	(crude)	and	Adjusted	associations	with	contraceptive	use	among	the
respondents	S									

Characteristics	Using FP*	Not using FP*	Total*	P-value	Crude	P-value	Adjusted		
	method (n=324)	method (n=191)	(n=515)	(unadjusted)	OR (CI)	(adjusted)	OR# (CI)		
Place									
Urban	155 (30.1)	103 (20.0)	258 (50.1)	0.182	0.78	0.355	0.85		
Rural	169 (32.8)	88 (17.1)	257 (49.9)		(0.55 - 1.12)		(0.60 - 1.22)		
Age									
< 30 yrs	226 (43.9)	155 (30.1)	381 (74.0)	0.005	0.73	0.004	0.64		
>= 30yrs	98 (19.0)	36 (7.0)	134 (26.0)		(0.59-0.91)		(0.42 - 0.99)		
Socioeconomic stat	us								
Lower middle class	13 (2.5)	9 (1.7)	22 (4.3)	0.704	0.84	0.481	0.70		
Lower class	311 (60.4)	182 (35.3)	493 (95.7)		(0.35-2.02)		(0.29-1.66)		
Religion									
Hindu	274 (53.2)	152 (29.5)	426 (82.7)	0.149	1.41	0.324	0.97		
Muslim	50 (9.7)	39 (7.6)	89 (17.3)		(0.88-2.23)		(0.61-1.55)		
Education of wome									
Illiterate	205 (39.8)	127 (24.7)	332 (64.5)	0.461	0.87	0.143	2.14		
Literate	119 (23.1)	64 (12.4)	183 (35.5)		(0.60-1.26)		(1.47-3.12)		
Education of husba	nd								
Illiterate	139 (27.0)	81 (15.7)	220 (42.7)	0.913	1.02	0.749	0.10		
Literate	185 (35.9)	110 (21.4)	295 (57.3)		(0.71-1.46)		(0.07-0.15)		
Parity									
Primiparous	39 (7.6)	63 (12.2)	102 (19.8)	0.000	0.28	0.003	2.26		
Multiparous	285 (55.3)	128 (24.9)	413 (80.2)		(0.18 - 0.44)		(1.44-3.55)		
Type of family									
Nuclear	100 (19.4)	92 (17.9)	192 (37.3)		0.48	0.004	1.71		
Joint	224 (43.5)	99 (19.2)	323 (62.7)		(0.33-0.69)		(1.18 - 2.48)		
*Figure in parantheis indicate percentage; #The adjusted OR are calculated for adjusting all the significant factors associated									

*Figure in parantheis indicate percentage; #The adjusted OR are calculated for adjusting all the significant factors associated with the dependent variable (FP method)

DISCUSSION

A total of 62.9 % females were currently using family planning methods in this study. Similar

findings were reported in the studies conducted in urban slums of Lucknow (66.5%) and Mumbai (68.4%) ^{9,10}. According to **National Family Health**

Survey overall 56.0% of currently married women aged between 15-49 years used a family planning method.11 A higher proportion of contraceptive users had undergone sterilization (30.5%) and used (28.2%) in our condoms study. Similar observations regarding permanent contraceptive method (45.67%) have been reported in a study conducted in rural areas of Belgaum.12 In the study conducted in urban slums of Mumbai the practice was maximum for OCP (28.07%) and condoms (18.42%) while only 11.98% of females practiced tubectomy.10

The most common reason found for not using any method was lack of awareness (18.3%) in the current study. According to Population Report many women who are sexually active would prefer to avoid becoming pregnant but are not using any method of contraception. These women are considered to have an unmet need for family planning. Among the common reasons for unmet need for family planning are inconvenient, unsatisfactory services, lack of information, fears about contraceptive side effects and opposition from husbands, relatives or others.¹³

Our study revealed that 28.7% of females had obtained the family planning method at last use from a private institute. Similar findings have been reported in the Lucknow study.⁹ Contraceptive use was higher among the illiterate females in this study. This is contrary to the findings reported by the study from Nigeria.¹⁴ Mohanan et al observed that educational status of women was not an influencing factor of acceptance of family planning.¹⁵

Contraceptive use was significantly higher among the females aged less than 30 years and among those with high parity. NFHS-3 reported higher use of family planning methods by females of higher age and parity¹¹. Chandhick et al also noted that the use of contraceptive measures was least among age group 15-19 years.¹⁶ In the current study contraceptive use was significantly higher among those belonging to joint families. This is contrary to the observations made by the Belgaum study.¹²

Husband's education was significantly associated with contraceptive use in our study. Illiterate women are more likely to adopt modern contraceptive methods if they have access to a literate person in the household particularly the husband.¹⁷

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