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Original Research Article

## Knowledge, attitude and practices of contraception amongst married women

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### ABSTRACT

**Background:** Aim of current study was to assess the knowledge, attitude and practices of contraceptives amongst married women of reproductive age group.

**Methods:** A cross sectional study was conducted in obstetrics and gynaecology out door patient department (OPD) of SMGS hospital Jammu. 100 married women aged between 15-45 years were included in this study. Along with the sociodemographic characteristics of the women, their knowledge, attitude /86\*and practices on contraception were evaluated with the help of predesigned questionnaire.

**Results:** It was observed that out of 100 women, majority of them were Hindu (58%), higher secondary educated (21%), housewives (45%) and belonged to low socio economic status (36%). 88% females had knowledge about contraceptive methods that was mainly obtained from health workers (59%) followed by media (23.8%) and social circle (14.7%). 38% women were practicing contraceptive methods, out of which most of them were using condom (39.4%) followed by Oral Contraceptive Pills (OCPs) (21.05%), intra uterine contraceptive device (15.7%) etc. Though most of the women had knowledge about contraceptive methods majority (62%) had negative attitude towards family planning.

**Conclusions:** In spite of having good knowledge, utilization of contraceptives was less because of religious myths and beliefs, fear of side effects, cultural and political barriers.

**Keywords:** Attitude, Contraception, Knowledge, Practice

### INTRODUCTION

Fertility control is an important and substantive discipline with a developing scholarly scientific foundation and a burgeoning clinical application. The world population will likely to increase by 2.5 billion over the next 43 years, passing from the current 6.7 billion to 9.2 billion in 2050.<sup>1</sup> India's 2019 population is estimated at 1.37 billion based on the most recent UN data. India's Family planning 2020 goals aim to drive access, choice, and quality of family planning services. In 2015, the total fertility rate of India was 2.40 births per women<sup>2</sup> and 15.6 million abortions performed, with an abortion rate of 47.0

abortions per 1000 women aged between 15-49 years.<sup>3</sup> On the Demographic Transition Model, India falls in the third stage due to decreased birth rates and death rates. In 2026, it is projected to be in stage four once the Total Fertility Rate maximum.<sup>4</sup>

Contraceptive usage has been rising gradually in India. In 1970, 13% of married women used modern contraceptive methods, which rose to 35% by 1997 and 48% by 2009.<sup>5</sup> Awareness of contraception is near-universal among married women in India but vast majority of married Indians reported significant problems in accessing a choice of contraceptive methods.<sup>6</sup>

According to Family Planning 2020, in 2017 there were 136,569,000 women using modern method contraception which prevented: 39,170,000 unintended pregnancies, 11,966,000 unsafe abortions, and 42,000 maternal deaths due to family planning.<sup>7</sup> In 2012, India's modern contraception prevalence rate among all women was 39.2, in 2017 it was 39.57, and in 2020 is predicted to rise to 40.87.<sup>7</sup> Measuring the level of awareness of contraception provides a useful measure of the success of information, education and communication activities and help to identify the areas that need to be strengthened.

The following study was carried out in an urban area to assess the knowledge about various family planning techniques and current trends in usage of contraceptive methods so that the unmet needs of the population can be targeted.

## METHODS

This cross-sectional study was conducted in the department of obstetrics and gynecology OPD SMGS hospital Jammu during the month of March 2019 .100 married women aged between 15-45 years were interviewed.

### Inclusion criteria

- All currently married women who are in a stable sexual relationship and had not attained menopause yet.

### Exclusion criteria

- Pregnant women, infertile females, patients having any medical disorder and patients who refused to take part in the study.

After taking informed consent, women were enrolled in the study and were interviewed according to a detailed pre-structured questionnaire which included demographic details like age, educational status, area of residence, along with years of marriage, parity, family size, number of children, unwanted pregnancy and fate of those unwanted pregnancies, knowledge about various contraception methods, the knowledge, attitude and practices of contraception usage and reasons for not practicing contraceptive.

### Statistical analysis

Analysis of data was done and results were tabulated.

## RESULTS

The study shows, mean age of respondent was  $29.8 \pm 7.28$ . All the socio-demographic characteristics of responders were described in Table 1. Majority of women belonged to age group of 20-30 years. Maximum women were

Hindu, house-wives and had completed higher secondary education.

**Table 1: Sociodemographic characteristics of respondent (100).**

Age (years)	Number
15-19	8
20-30	50
31-40	26
>40	16
<b>Religion</b>	
Hindu	58
Muslim	32
Christian	5
Others	5
<b>Education</b>	
Illiterate	24
Primary	20
High school	21
Higher secondary	25
Graduate	10
<b>Education (Husband)</b>	
Illiterate	11
Primary	23
High school	26
Higher secondary	28
Graduate	12
<b>Occupation (Women)</b>	
Government employee	22
Private employee	13
Daily wage earner	20
Housewife	45
<b>Family income</b>	
<5000	36
5000-10000	13
10000-15000	30
>15000	21
<b>Number of children</b>	
1	12
2	26
3	37
>4	25

Table 2 shows knowledge regarding different contraceptive methods. Out of 100 women, 88 (88%) had knowledge about family planning. Majority of them (43.1%) knew about condom, followed by OCPs and other methods.

The women who had knowledge about contraceptive methods mainly obtained it from health workers (59 %), followed by media and social circle. Distribution of source of knowledge regarding different methods is shown in Table 3.

**Table 2: Knowledge regarding different contraceptive measures.**

Knowledge (n=88)	N (%)
Condom	38 (43.1)
Oral contraceptives	18 (20.45)
IUCD	13 (14.77)
Injectable	8 (9.09)
Tubectomy	11 (12.5)

**Table 3: Source of knowledge.**

Source of Knowledge	N (%)
Health worker	52 (59)
Media	21 (23.8)
Social circle	13 (14.7)
Others	2 (2.27)

Table 4 shows attitude of participating females regarding contraceptives. Though majority of women had knowledge about family planning methods most of them had negative attitude towards contraceptives. Out of all the different methods of contraception commonly practicing method was condom followed by OCPs and others. Table 5 shows practices of different contraceptive methods. Majority of couples used condoms followed by oral contraceptives and IUCD. In spite of being educated, only 4% couples used injectable contraception fearing its side effects.

**Table 4: Attitudes towards contraception.**

	Users (n=38)	Non users (n=64)	Total
Positive	26 (68.4)	20 (32.2)	46
Negative	12 (31.5)	42 (67.7)	54

**Table 5: Practices of contraception.**

Method	(N=38)
Condom	15 (39.4)
Oral contraception	8 (21.05)
IUCD	6 (15.7)
Tubectomy	5 (13.1)
Injectable	4 (10.5)

## DISCUSSION

In the present study, information on knowledge of contraception was collected by asking respondents whether or not they had heard about different contraceptive methods including traditional as well as modern methods. Increasing program coverage and access of family planning will not be enough unless all eligible women have adequate awareness for favorable attitude and correctly and consistently practicing as per their need.

Increasing awareness/knowledge and favorable attitude for practicing family planning activities at, all levels of eligible women are strongly recommended.<sup>8</sup> Strategies to increase contraceptive use must include improving delivery of correct and adequate information about the availability of contraceptive methods. Education of women is considered to be a most important factor in decision making.<sup>9</sup>

In this study, result showed that 88% women had knowledge about contraception similar to study conducted by Pegu B et al, (87%)<sup>10</sup> while 92.3%, 97.4%, 99% was seen in other studies.<sup>11-13</sup>

The findings are contradicting with the study conducted in 2011 at Bhopal by Mahawar P et al.<sup>14</sup> In 2009, another study conducted in Andhra Pradesh in which 81% females had knowledge on different contraceptive methods.<sup>15</sup>

Major source of knowledge regarding contraceptives were health worker (59%) followed by media 23.8%, social circle 14.7% and others. Similar results were seen in the study conducted by Pegu B et al.<sup>10</sup> A study conducted by Senbeto E showed that 80.3% of health workers contributed in disseminating information regarding contraception.<sup>16</sup> Another study conducted by Srivastava et al. from India in 2005, social circle was found to be the main source of knowledge and followed by health workers.<sup>17</sup>

In present study, 62% of women were not using any method of contraception similar to Pegu B et al 10 whereas 55% had never used contraceptives in study conducted by Srivastava et al. in 2005, India.<sup>17</sup>

In the study conducted by Thapa et al, 70.8% of the women used different types of contraceptives, showing the positive awareness amongst them.<sup>11</sup> It depicts high promotion but low utilization of contraceptives in our set up, making this situation a serious challenge in developing countries like ours. It might be linked to the fear of side effects of contraceptives due to lack of proper knowledge amongst females in our settings. Informed choice is an important tool for assessing, monitoring and evaluating the quality of family planning services. Informing about the side effects that might have with a method, what to do if they experienced side effect and informing about the other methods they could use are the components of informed choice.

In this study, condom was the most common method (39.4%) which correlated with findings in other study as well.<sup>10,18-20</sup> In contrast, study conducted by Musarrat Jabeen et al, commonly used methods were traditional, injectable and female sterilization.<sup>21</sup> In the study conducted by Thapa et al, Injectable (Inj. Depo) (35.6%), female sterilization (18.5%) were the main methods used.<sup>11</sup>

Though majority of women had knowledge about contraceptives only 46% females had positive attitude towards contraception whereas study conducted by Sherpa Z et al, 87.5% had positive attitude.<sup>22</sup> This may be due to inadequate dissemination of information regarding contraception among the respondents in our settings. Family planning services need to provide a range of quality method that can allow women to either limit or space birth and to fulfill the need of women with differing socio-demographic characteristics.

In this study, though majority of interviewer women had knowledge about family planning methods but practicing is still low because of lack of education, cultural, religion, economical and political barriers. These observations imply that campaign to empower women such emphasis on their education and encouraging gender balance by changing community attitude towards position/status of women in a household and in a society as a whole, as currently they are given lower position, specifically in patriarchal society could improve use of contraceptives in a study population.

## CONCLUSION

Though females gave a good knowledge about family planning methods from social media and health workers there are some factors like desire for large family, pressure from husband, religious concern etc. that lead to non-use of contraceptives. So this is important to improve educational status of the female to overcome these barriers and increase the uptake of modern contraceptive methods. Hence if knowledge is improved then attitude will also be good and if there is improved knowledge and good attitude, practice will be good eventually.

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