

A Study on Contraceptive Use among Married Women of Reproductive Age Group in Rural Areas of Gazipur District

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Abstract

Family planning services have the potential to improve the quality of lives of people and their economic welfare. The objective of the study was to assess the level of awareness and current practice of different family planning methods and to elicit reasons for couples not using any method. A cross sectional study was conducted from December 2009 to January 2010 in Tongi upazila under Gazipur district. The study group included 300 married women of reproductive age group of 15 - 49 years and sexually active. Study was interview based. Non-probability purposive sampling was used. The women were interviewed by means of predesigned semi-structured questionnaire. The age of maximum women (27.33%) were 25-29 years. Formal education was received by 93.15% women. Majority were Muslims (94.76%). Among the respondents 29.4% and 52.61% get married at the age of 15 to 19 years and 20-25 years respectively. All women were aware of contraceptive methods. Almost 100% thought that contraceptive use was beneficial. Three-fourth of the respondents (76.6%) were using contraceptive methods. Among those who used contraceptives, OCP was the most commonly used method (73.4%) followed by 44.3% used condoms. Only 19.8% preferred IUCD. Awareness about female sterilization (63.4%) was more than male sterilization (36.6%). But a few of them (16.3%) chose sterilization. About 23.46% were not using any method. The main reasons were fear of side effects (52%), develop infertility (19%) and religious beliefs (9%). Majority of women were aware of contraception and even though a high number of them used any one of family planning methods, still there is need to educate and motivate married women of reproductive age to improve family planning services.

Key words: Awareness, Contraceptive method, Family planning.

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Introduction

In health sector, maternal and child mortality are major problems of a developing country

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because of higher fertility rates so that reducing fertility means the decline of mortality and fertility can be controlled by using contraceptive.¹ Higher number of using contraceptive among younger women resulted low fertility rates and the percentage of married women in reproductive ages using contraception has been rising steadily not only in Bangladesh but also all over the world.^{2,3}

Family planning can reduce maternal mortality by reducing the number of pregnancies, number of abortions and the proportion of births at high risks. It can help to reduce infant mortality, slow the spread of HIV/ AIDS, promote gender equality, reduce poverty, accelerate socio-economic development, women empowerment and promote the environment.⁴ The selection of contraceptive methods depends on psychological, social and cultural factors (i.e.

perceptions of contraception and existing social norms about this culture).⁵ Most of the married women want to use the contraceptive methods but are unable to use because of lack of knowledge, economical problem, fear of side effects, religious cause, uncooperative husband and limited supply and high cost.⁶ Researchers estimate that the lives of 150,000 women could be saved each year worldwide with access to sufficient family planning.⁷

In Bangladesh, CPR among currently married non-pregnant women was 61% and the prevalence of modern methods was 49%. Oral pill and periodic abstinence were the most preferred modern and traditional methods, respectively. Contraceptive using; especially condom use would need to be increased by 4 times from 2.2 million to 8.9 million in 10 years in order to reduce the TFR by 1 child. Oral pill use would have to be tripled to 6.9 million users by 2001. IUD and injection use or female sterilization would need to be tripled.²

Bangladesh is a small country in Asia with a large population (149 million, 1035 people/sq. km) and is ranked the seventh most populous country in the world. However, national family planning programs and non-government organizations in Bangladesh are playing an important role in the effort to lower the fertility rate and to increase prevalence of contraceptive use.⁸ Family planning programs in Bangladesh provide their services to households and not only provide information about modern contraceptive methods, but also distributes various forms of contraception in a house to house basis.⁹

Even though various active programmes on family planning are running but considerate number of people not yet motivated to adopt the family planning in their practical life. The study was conducted to explore the current situation of contraceptive using trends in Bangladesh and to know the interest of using temporary and permanent methods of modern contraceptive.

Methodology:

This was a cross-sectional type of descriptive study. The study was conducted at selected villages of Sataish and Boro deora in Tongji upazila under Gazipur district. The duration of the study was from December 2009 to January 2010. All the married women of reproductive age group of 15 - 49 years, residing in selected villages of Tongji

upazila, were selected as the study subject. Sample size was 300. Sample was taken purposively. Data were collected by face to face interview of the respondents by using interviewer administered questionnaire. After taking consent from the subject, confidentiality of the data were ensured to the study participants. The questionnaire consisted of demographic characteristics including age, level of education, socio-economic status, age at marriage, etc, and regarding family planning conception questions were focused on importance of family planning, its various types of (temporary and permanent) methods, source of information, which family planning methods they used. Factors responsible for non-use of contraception were also asked. Descriptive analysis was done and result was expressed into percentage.

Results

Table-I

Socio-demographic characteristics of the respondents. (n=300)

Socio-demographic variable	Respondents (%)
Age range of fertile women	
15-19	19 (6.3%)
20-24	74 (24.66%)
25-29	82(27.33 %)
30-34	69(23 %)
35-39	36(12%)
40-44	12(4 %)
45-49	8(2.6 %)
Educational status	
Illiterate	21(6.85%)
primary	199(59.83%)
SSC	68(22.62%)
> SSC	32(10.7%)
Occupational status	
House wife	210(73.00%)
Farmer	37(12.16%)
Service holder	15(4.84%)
Student	30(10%)
Economical status	
Average	185 (61.67%)
More than average	76(25.23%)
Below average	39(13%)
Age at marriage	
15-19	88(29.4%)
20-25	158(52.6%)
>25	54 (18%)

Table-II

Awareness of contraception among women. (n=300)

Awareness of contraception		
Yes	300	100%
Family planning means		
Pregnancy prevention	222	74%
Birth limiting	205	68.3%
Planning for better future	185	61.6%
Birth spacing	159	52.9%
Others	4	1.2%
Methods (temporary) known		
Oral pills	278	92.7%
Condom	253	84.2%
IUCD	216	71.7%
Injectable	187	62.3%
Emergency contraception	142	47.4%
Implants	105	34.4%
Natural methods	88	29.1%
Methods (permanent) known		
Tubectomy	192	63.4%
Vasectomy	108	36.6%
Source of information		
Health personnel	236	78.5%
Mass media	209	69.7%
Husband	182	60.8%
From hospitals/NGOs	127	42.38%
Relatives/ neighbours	83	27.5%
Others	8	2.6%
Places of providing family planning services		
Govt. hospital	178	59.32%
Dispensaries/pharmacies	125	41.1%
Private clinic/hospital	91	20.59%

Table-III

Practice of family planning methods.

Total number of fertile couple	Couple practicing family planning	Couple not practicing family planning
300	230 (76.6%)	70 (23.46%)

Table-IV

Methods of contraception used by the respondents (n=230)

Family planning methods	Respondents	(%)
Oral pills	169	73.4%
Condom	102	44.3%
IUCDs	46	19.8%
Sterilization	37	16.3%
Injectable	30	13.2%
Emergency contraception	22	9.7%
Natural methods	11	4.7%

* Total is not 100% as there were multiple responses

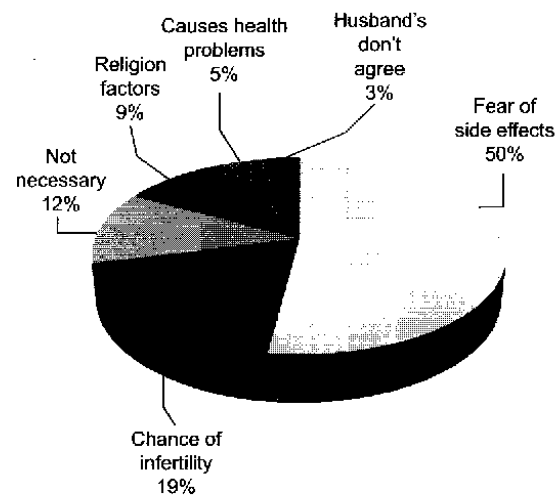


Fig.-1: *Factors of not practicing family planning methods. (n=70).*

Total 300 married women in age 15 - 49 years were studied. Among the 300 women in the study group, most common age group was 20-29 years 159 (53%). Almost all were Muslims 284(94.76%). The largest number of women had primary level of education 199 (60%). Most of them were housewives 210 (73%). Among the participants majority were belonging to lower socio economical class 185(61.67%). About half of the respondents 158 (52.6%) got married at the age of 20-25 years. (Table-1)

All respondents (100%) had heard about family planning and thought that it was beneficial. Among the participants common source of information were health professionals 236(78.5%) followed by 209 (69.7%) and 182 (60.8%) came to know about these methods through mass media and from their husbands

respectively. Most of them knew that contraceptives were available in Government hospital 178(59.32%). According to most of the women, family planning meant for pregnancy prevention 222(74%) and 205(68.3%) said for limitation of births. All study women were aware of various methods of contraception. Among temporary methods oral contraceptive pills (OCP) 278 (92.7%) and condom 253 (84.2%) seemed to be most well-known followed by intrauterine contraceptive device (IUCD) 216(71.7%) and injectables 187(62.3%). They were also informed about emergency contraception 142(47.4%) and natural family planning methods 87(29.1%). Though all women were aware of sterilization but majority 192(63.4%) preferred tubectomy and less of them said vasectomy 108(36.6%). (Table-2) The overall percentage exceeded 100% because one woman was aware of more than one method, information source, importance of family planning, etc.

Table-3 shows that out of 300 women, 230 (76.6%) were currently practicing any one of contraceptive methods at the time of study. Among temporary method users majority 169(73.4%) were using OCP followed by condom 102(44.3%). CuT 46(19.8%) and injectable method 30(13.2%) users were comparatively very less in the present study. Very few of them (4.7%) used natural family planning methods. Only (20.3%) women had undergone sterilization which was shown in Table-4. 70(23.46%) women refused to accept any method, because of fear of side effects 36(52%) or infertility 13(19%), prohibition by their religion was only 6(9%) and 2(3%) were not able to decide as their husbands' do not want to use.(Fig-1).

Discussion:

This descriptive cross sectional study was aimed at finding out the awareness and use of contraceptive methods among 300 married women of reproductive age group (15-49 years) of the villages Sataish and Boro Deora under Tongi upazilla of Gazipur district in Bangladesh. The respondents were mainly house wives (73%) and 60% were completed primary level. Half of the respondents (52.6%) of this study got

married at the age of 20-25 years. Majority of the respondents (61.67%) monthly family income was average. This was similar to the study of Miah MN et al.¹⁰

Present study revealed a high percentage of awareness of family planning methods, all the respondents of this study had some knowledge at least one modern contraceptive methods. In BDHS 2007, it was revealed that almost all (99.8%) woman of reproductive age of Bangladesh knew about Family planning methods.¹¹ the percentage of awareness was up to 100% in a study done in Bangladesh.¹² So, it is obvious from various studies that, nearly all married woman of our country had knowledge about contraceptive methods.^{13, 14, 15}

In the study main source of information was from health personnels (78.5%) followed by mass media and their husbands 69.7% and 60.8% respectively. only 27.5% had gained knowledge from friends and relatives. This findings supported KHAN NR's study where among 265 respondents, majority 105 (39.61%) were informed from family welfare visitors and from health workers at community level, 90 (33.96%) had heard from either relative or from neighbors, 60 (22.64%) from their husbands, 20 (7.54%) were known from mass media (radio, TV, bill board, hand bill, poster etc.).¹⁶

Among spacing methods awareness was higher for OCP (92.7%) which corroborates with the Uruj Jahan's study followed by condom (84.2%), IUCD (71.7%), injectable method (62.3%) and natural methods (29.1%) respectively.¹⁷ Similarly in a study maximum awareness was seen for oral contraceptive pills (95.8%) followed by condom (74.2%) and IUCD (72.0%).¹⁸ Among permanent methods, our results showed that most of the women (63%) had heard about female sterilization as compared to only 37% about male sterilization. In Sikkim also tubectomy was more well known (67.0%) than vasectomy (34%).¹⁰ Study done in Bangladesh similarly reported 99% of the women having knowledge of female sterilization and only 83.0% for male sterilisation.¹⁹ This disparity may be because of general concept of laymen that reproduction is mainly the function of women. Also in our male dominant society, husbands'

opinion had a great influence on use of contraceptives. Out of 300 respondents, 59.32% knew that care is given in government hospitals followed by (20.59%) mentioned in private hospitals or clinics. Similar study was done by Regional Institute of Medical Sciences, India and found that 57% of the respondents preferred government health facilities for the contraceptive advice and information.²⁰

In the study contraceptive use rate was 76.6%. Study carried out by Syeda Khaleda Ferdousi found that 72.1% practiced any method of contraception which is similar to the study.²¹ In a study at Dhamrai thana, Bangladesh the contraceptive acceptance rate was (69%) which is nearer to this study finding.²² But According to BDHS 2007, use of contraceptive was overall (55.8%) in Bangladesh.¹¹ The study rate was higher than the rate given by BDHS 2007. it because, in rural area of Bangladesh health information and facilities is provided by HA (health assistant), FWA (family welfare assistant) who are the grassroots level employee of the health wing of Ministry of Health and Family Welfare (MOHFW).²³ Also doorstep-delivery system initiated by the International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B) has risen markedly utilization of family planning in rural Bangladesh.²⁴ As the data were collected from rural places, so the health workers may conduct home visits and motivate the women for using of contraceptive methods, that is why contraceptive use rate might be high.

The awareness regarding sterilization was highest but only 16.3% practiced the method in present study. Similarly among spacing methods most widely used method was oral contraceptive pills (73.4%); similar finding was observed in Hanif et al's study.²⁵ This may be due to easy availability and popularity of these methods. even though all females were aware of others methods but less than half (44.3%) had used condom, only 19.8% had used IUCD, 13.2% got injectable methods 9.7% used emergency contraception and strikingly few 4.7% had used natural methods. This suggest gap between awareness and practice. Similar findings are seen in various studies in Bangladesh and other countries.^{2, 26}

Several factors remained responsible for this gap between awareness and practices that include low compliance, lack of knowledge, religious beliefs and fear of side effects of contraception, low decision making power of women. In The study one of the commonest reason for not acceptance was fear of side effects by half of the (52%) women, followed by other causes such as secondary infertility (19%), did not feel the need of use (12%), religious beliefs (9%), hypertension or diabetes or other diseases (5%), not agree of husband (3%) etc. These finding were similar to other studies.^{26, 27, 28}

Conclusion:

The study reveals good awareness and favourable attitude of rural married women towards contraception. Though majority of the respondents were using contraceptive methods, but a significant number of women were in the group of unmet need. Contraceptive knowledge and practice was influenced by exposure to family planning messages. Women education and counseling of couples can play an important role to adopt family planning methods. Electronic media, health personnel and government's organizations can play a positive role to provide information and overcome the concept and practice gap.

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