

AWARENESS AND PRACTICE OF FAMILY PLANNING METHOD AMONG MARRIED
WOMEN IN AN URBAN SLUM AREA OF MUMBAI, MAHARASHTRADr. Landge Jyoti A*¹ and Dr. Armaity Dehmubed²¹(M. D. Community Medicine, Assist. Professor Dept of Community Medicine, Dr. D.Y. Patil Medical College, Pimpri, Pune)²(M. D. Community Medicine, Associate professor, Dept of Community Medicine, TNMC, Mumbai)

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ABSTRACT

India was the first country to adopt family planning as a National programme during 1951-52, the demographic situation in the country is still a matter of grave concern. The present study was undertaken to know the extent of awareness and practice of various contraceptive methods among married women. **Material and methods:** A total of 250 women in age group 15-45 years were selected by systemic random sampling from 50 plots of urban slum of Mumbai, Maharashtra. Data was collected through pretested structured questioners. Data was entered in Microsoft excel and analysis done using SPSS 16. **Results:** Most of married women i.e. 72.4% subject had knowledge of various FP methods. Most common method used was condom (21%), followed by Cu T (18%) and female sterilization by 12% subject only. Because of cultural constraint Permanent method of contraception acceptance was very poor. Socio-economic class and educational status of participants have no significant relation regarding use of contraceptive measures.

KEYWORDS: Awareness; family planning; Practice; slum; women contraceptives

INTRODUCTION

India was the first country to adopt family planning as a National programme during 1951-52, the demographic situation in the country is still a matter of grave concern.^[1]

The World Health Organization (2001) defined family planning as the practice that helps individuals or couples to attain certain objectives such as avoiding unwanted pregnancies, bringing about unwanted babies at the right time, regulating the interval between pregnancies, controlling the time at which birth occurs in relation to the ages of the parents and determining the number of children in the family. Contraception as a method of family planning promotes survival of infants as it supports birth spacing and reduces high-risk pregnancies.^[2]

Majority of women are aware of family planning, but very few of them make use of it for birth control. Different factors such as culture, low education, poverty and poor access among other numerous factors have been identified to militate against the use of family planning methods.^[3]

Considering all these factors, present study was conducted with an objective to study awareness and practice of family planning method among married

women in age group of 15-45 years in an urban slum area of Mumbai, Maharashtra.

MATERIAL AND METHODS

Community based cross sectional study was conducted for a period of one year in 2012, at Shivaji Nagar, urban slum of Mumbai, Maharashtra, is the field practice area of parent Medical College. The population of Shivaji Nagar consists of people who have migrated from different parts of India, mostly Muslim, mainly from Uttar Pradesh, Bihar, West Bengal, Madhya Pradesh, Andhra Pradesh and Tamil Nadu. It is a typical Mumbai slum with overcrowding, lack of sanitary services and with abundance of quack practitioners. They have migrated to Mumbai in search of job. Study population was selected from married women between age group 15yrs to 45yrs. A total of 250 females were selected by systemic random sampling. The data was collected by personal interview method using pre tested semi-structured proforma by visiting each household. Data was analysed by using SPSS 16.

Inclusion criteria: Women in the age group of 15-45yrs who have delivered in the last six months before the study and who are willing to participate in the study.

Exclusion criteria: women not willing to participate in the study.

RESULTS

Age wise distribution of participants (table 1): less than 20years 65(26%), 21-25 years 71(28.4%), 26-30 years 35(14%) and >30years 35(14%) mean age of the participant was 20years.

Out of 250 women 88(35.2%) were illiterate, 61(24.4%) were educated up to primary, 101(40.4%) were educated secondary and above.

In present study 107(42.8%) had joint family, 113(45.2%) had nuclear family, 30(12%) had 3rd generation family. As study population is mostly migrants spatially 45.2% were nuclear one. Regarding parity of subjects primi were 58(23.2%), second para 68(27.2%), third para 58(23.2%), multi para 66(26.4%). Out of 250 female 181(72.4%) had knowledge of different contraceptive methods. Regarding current use

of contraception condom 53(21.2%) was the most widely used method of contraception.

Not acceptance by husband or family member was the response of majority 39(47%) out of 83 for not using any kind of contraceptive followed by religious belief in 32 (38%) and rest include fear of side effect, incomplete family and no need in 12(15%).

The association between education of subject and family planning method using currently was not found to be statistically significant. (p value 0.119, test of significance- chi square test, test value 4.26). There was no association between socio-economic class of subject and family planning method using currently (p value>0.05).

Table 1: Socio-demographic features of study group

Variables	n=250	%
Religion		
Hindu	41	16.4
Muslim	209	83.6
Age Group		
<20	65	26
21 – 25	71	28.4
26 – 30	79	31.6
>30	35	14
Age At Marriage		
<18	55	22
>18	195	78
Husband Education		
Illiterate	45	18
Primary	65	26
Secondary	104	41.6
Higher Secondary	18	7.2
Graduate	18	7.2
Occupation of Participants		
House wife	247	98.8
Skilled worker	3	1.2
Husband occupation		
Skilled worker	168	67.6
Unskilled worker	81	32.4

Table 2: Source of Knowledge

Source Of Knowledge	n=250	%
Family Member	129	51.6
Doctor	72	28.8
Health Staff	19	7.6
Mass Media	14	5.6
Neighbour	16	6.4

Table 3: Awareness about various family planning

Awareness about various family planning	n=250	%
Cu T	169	67.6
Condom	138	55.2
OC Pill	89	35.6
Others	38	15.2
Don't know	69	27.6

(Cu T- Copper T, OC pill- Oral Contraceptive pill)

Table 4: Family Planning method using currently

Family Planning method using currently	n=250	%
Condom	53	21.2
Cu T	44	17.6
OC pill	39	15.6
Female Sterilisation	31	12.4
Not using any method	83	33.2

(Cu T- Copper T, OC pill- Oral Contraceptive pill)

Table 5: Reasons for not using contraceptives

Reasons for not using contraceptives	n=83	%
No acceptance by husband or family member	39	47
Religious belief	32	38.5
Fear of side effect	7	8.4
Incomplete family	4	4.8
No need	1	1.3

DISCUSSION

In this study, majority of subjects were of Muslim religion 209(83.6%) and rest were of Hindu by religion 41(16.4%). As most of the people were Muslim in the community where study was conducted it is imperative to have majority of participants from Muslim community.

Source of information: Information on the source of family planning awareness (table 2) revealed that majority of the women in the area was aware of the usage of family planning (72.4%). It further showed that 52% had the knowledge of family planning through family members; for 29% of the women source of knowledge was doctor.7% had it through health care staff. The media source added to women's knowledge as 6% got the information from the radio/television, 6% had it through the neighbour, there was leading role of family member for the information reveals the role of family in family planning.

Study by Miriam N et al revealed that about 55% of the women were exposed to media sources of family planning messages within the six months preceding TKAPS 94 .Radio was the most widespread source of family planning information, reaching 49% of respondents. Roughly half of those identifying radio as a source of family planning messages, or 23% of all respondents, recalled hearing Zinduka! Almost as many respondents reported seeing family planning messages in

newspapers. Posters reached 18% of respondents and leaflets reached 8%. Only 4% of women reported seeing family planning messages on television.^[4]

Knowledge and awareness of contraception

Awareness plays an important role in motivating females to have a favourable attitude towards family planning and to adopt family planning methods. In the present study (table 3) majority i.e. Out of 250 female 181(72.4%) had knowledge of different contraceptive methods. 169(67.6%) had Knowledge about cu T, 138(55.2%) had Knowledge about condom, 89(35.6%) had Knowledge about OC Pills, 38(15.2%) had Knowledge about other family planning methods which include male and female sterilization, injectable contraceptive and natural family planning methods.

A study by Bhawan Sharma et al showed that majority of the respondents were aware about the mechanical method of family planning (loop and condoms) followed by chemical method (oral pills). The reason might be that the respondents were influenced by the effect of mass media (Television and Radio).^[1]

A study by H Tuladhar and R Marahatta (Khanal) revealed that the best known method of temporary contraception was depopovera (78.0%) followed by oral contraceptive pills (74.0%) and condom (71.0%) and least known methods were vaginal foam tablets/jelly (34.0%) and natural methods (16.0%). among permanent

family planning methods, awareness about female sterilization (81.0%) was more than male sterilization (77.0%) which was in accordance with studies done in other countries.^[5]

Current use of contraception: Regarding current use of contraception (table 4) condom 53(21.2%) was the most widely used followed by Cu T 44(17.6%), OC Pills 39(15.6%), and female sterilisation 31(12.4%) permanent method of contraception, no one was using male contraceptive measures for family planning.

However, despite, the campaign on the usefulness of family planning in having smaller and healthier family, studies by NPC (2009) and Adeleye *et al.*, (2010) indicate that contraceptive use is still low in many developing countries, including India where 23.7% of currently married women had ever used one.^[6,7]

In a study by H Tuladhar and R Marahatta depoprovera (11.0%) was the most widely method of contraception followed by oral contraceptive pills (4.5%) and condom (4.5%), 5.5% had undergone female sterilization while only 2.5% of male partner had sterilization.^[5] Another study by Sujata K. Murarkar *et al* revealed that 249(48.63%) were contraceptive acceptors and 263 (51.37%) were non acceptors. Out of 249 acceptors, 88(35.34%) married women were accepted temporary methods and 161(64.66%) accepted permanent method of Contraception. Among the temporary method, IUD was the most commonly accepted i.e., 48 (19.28%). Among the permanent method, Tubectomy was accepted by 160 (64.26%) married women and only 1 (0.40%) couple had undergone vasectomy.^[8]

Reason for not using contraceptives: Among various reasons (Table 5), not acceptance by husband or family member was the major one 39(47%) out of 83, followed by religious belief in 32 (38%) and rest include fear of side effect, incomplete family and no need in 12(15%). This finding revealed cultural influence on use of contraceptive methods. Another study by Chandhick N *et al* showed that the most common reason given for not using any family planning method was “family not complete” (34.6%).^[9] A study by Mubita Ngoma C *et al* revealed reasons for non use of contraceptive methods were religious beliefs (50%), partner disapproval (30%) and side effects (20%).^[10]

CONCLUSION

Most of the subject had knowledge of various FP methods.

Most common method used was condom (21%), followed by Cu T (18%) and female sterilization by 12% subject only. Because of cultural constraint Permanent method of contraception acceptance was very poor. Socio-economic class and educational status of participants have no significant relation regarding use of contraceptive measures.

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