

Awareness and Practice of Family Planning Services among Married Couples in Shahdrah Bahawalpur.

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ABSTRACT

Introduction

A way of thinking and living that is adopted voluntarily upon the basis of knowledge, attitudes and responsible decisions by individuals and couples in order to promote health and welfare of the family group and thus contribute to the social development of WHO (1971). Family planning is not only focused on the planning of when to have children and use of birth control. Rather, in a broad view, it includes sex education, prevention and management of STI's, preconception, counseling and management and infertility management. Contraception is as old as mankind, whether rich or poor, old or young, in all countries. Women want to avoid unwanted pregnancies to enjoy their sexuality without obstacles. Birth control includes barrier method, hormonal contraception, IUD's, sterilization and behavioral method.

Objectives

The objective of study was: to assess the awareness and practice of family planning services among married couples in Shahdrah Bahawalpur.

Study design

This was a cross sectional (observational descriptive) study.

Setting

The study was carried out in Shahdrah, Bahawalpur.

Period of study

The study was conducted from 10th March 2016 to 11 May 2016.

Material and Methods

Data was analyzed manually. Percentages and frequencies of knowledge, practice, side effects and male component were calculated.

Conclusion

Most of the married couples living in shahdrah have the knowledge of family planning services. Almost half of the couples were practicing them. The factors responsible for use of contraceptives were female education, female occupation, more number of children and more duration of married life.

Introduction

“A way of thinking and living that is adopted voluntarily upon the basis of knowledge, attitudes and responsible decisions by individuals and couples in order to promote health and welfare of the family group and thus contribute to the social development of WHO (1971).

Family planning allows individuals and couples to anticipate and attain their desired number of children in addition to the spacing and timing of their births. It is achieved through the use of contraceptive methods. Family planning is not only focused on the planning of when to have children and use of birth control. Rather, in a broad view, it includes sex education, prevention and management of STI's,

preconception, counseling and management and infertility management. Family planning after a positive view of reproductive life enables people to make informed choices about their reproduction and wellbeing.

Family planning is 4th pillar of safe motherhood initiative.

1- Maternal and infant mortality rates can be decreased by reducing unwanted pregnancies which is the outcome of family planning. A successful family planning program prevents unwanted pregnancies and thus saves and improves life of women.

2- It becomes very important to successfully launch a family planning in cost effective intervention in under developed countries. It improves weight, BMI, vaccination status and overall being of target population.

3- Contraception is as old as mankind, whether rich or poor, old or young, in all countries. Women want to avoid unwanted pregnancies to enjoy their sexuality without obstacles. Birth control includes barrier method, hormonal contraception, IUD's, sterilization and behavioral method.

Hormones can be delivered by injections, by mouth, by placing in vagina or implanted under the skin. The most common type of oral contraception includes the OCP and progesterone only pill. Methods are typically used before sex but emergency contraception is effective shortly after intercourse.

Family planning can also be practiced by awareness of fertility method among population. FAM is based on identification of fertile time. This knowledge can be used to plan or avoid pregnancy. FAM depend on two key variables, the accurate identification of fertile days of woman's menstrual cycle and the modification of sexual behavior either to target the intercourse of plan or to avoid pregnancy.

(FAM of family planning for achieving or avoiding pregnancy).

FPA's present in different countries aim to improve the public knowledge of sexual health. The organization runs training courses and projects for professional, grandparents, parents, cares, young people and provides an information and press service to communicate sexual health information. FPA runs an enquiry service providing confidential information and advises on contraception, STI's, pregnancy choices, abortion and planning a pregnancy.

The purpose of the study was to assess the awareness and practice of contraception and the factors that are responsible for using and not using them.

LITERATURE REVIEW

In 2006-2010 a research was conducted in USA with a sample size of 53475 on contraceptive methods women have ever used. Virtually all women of reproductive age in 2006-2010 who had ever had sexual intercourse have used at least one contraceptive method at some point in their life. The most common methods that women or their partners had ever used were the male condom (93%), pill(82%), withdrawal(60%) and the injectable Depo-provera(23%). Side effects were most common reason for discontinuing use of the pill, depo-provera and the patch among women who had ever discontinued using these methods due to dissatisfaction. The most common side effects were nausea, headache, lethargy and menstrual irregularity.^{3,5}

In 2010 an article was published on contraceptive practices having sample size 15000 in Nigeria. This literature review has highlighted several important issues concerning contraception practices in Nigeria. The methods mostly known by respondents were the

condoms (69%), OCP (38%), IUCD(29%) and periodic abstinence(33%). Weight gain, acne and hirsutism are minor side effects. In surgical procedure bleeding, hematomas were side effects.

In 2012, a research with sample size 150 was conducted on study of knowledge, attitude and practice regarding various methods of contraception in several setup of HOSKOTE INDIA, that knowledge about contraception is more in males, knowledge is better perceived among literate group. Most common methods of contraception practiced were barrier method(46%), followed by sterilization procedure(20%), IUCD(19%), OCP(12%), coitus interruption(9%), emergency contraception(1%). There has been considerable improvement among people in rural set-up about contraception use, but still exists lack of awareness, knowledge about contraceptive method in some people.6,7,10,14.

In Oct 2010, a research was conducted with sample size of 113 in Peshawar on choice of contraception methods female attending family planning centers, that 47%, women were using injectable, 17% pills 17% I.U.C.D , 10% tubal ligation and 9% condom. Respondent from lower socioeconomic and illiterate group choose injectable in high proportion due to their effectiveness and easily availability. Side effects of methods and health concerns were less considered while cost factors were least considered. 82% were satisfied and 14% were using current methods despite of side effects.1,2

From April 1st- July 2010 in tehsil Gojjar Khan of Rawalpindi Punjab, a research was conducted with a sample size 200 of perceived individuals and community barrier in provision of Family Planning services by LHW's that LHW's still face barrier at individual, family, community and system level in delivery of family planning services. The main reason for

not visiting the field were socioeconomic barriers (58%) ,religious barrier (69%)and transport problems (54%). Though the OCP are available in abundance with LHW's, the clients did not take it because of side effects which were nausea, weight gain, and headache.1,2

OBJECTIVE OF THE STUDY

The objective of study was: to assess the awareness and practice of family planning services among married couples in Shahdrah Bahawalpur.

RESEARCH METHODOLOGY

Setting

The study was carried out in Shahdrah ,Bahawalpur.

Duration of study

The study was conducted from 10th March 2016 to 11 May 2016.

Study population

Married couples of shahdrah Bahawalpur.

Study design

This was a cross sectional (observational descriptive) study.

Sample size

Depending upon the available resources, a sample of 100 couples was taken from shahdrah.

Sampling technique

Convenient sampling techniques.

Inclusion criterion

Married couples were included.

Exclusion criterion

Unwilling couples.

Tools of Data collection

Pre-designed Questionnaire regarding knowledge and practices of family planning was used.

Data analysis

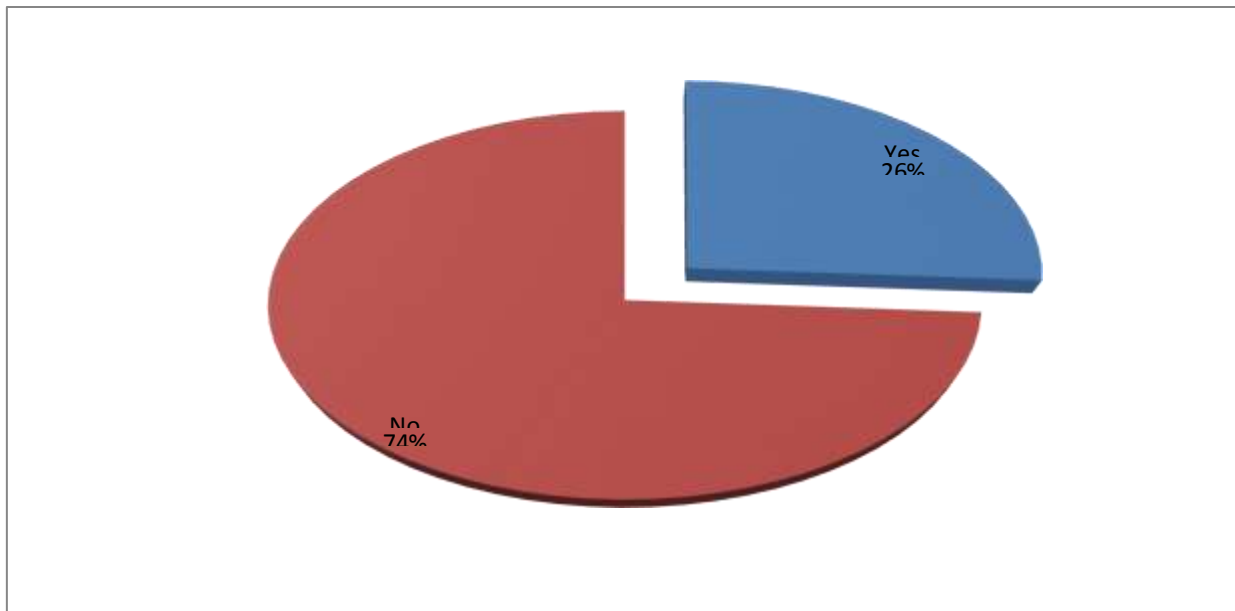
Data was analyzed manually. Percentages and frequencies of knowledge,

practice, side effects and male component were calculated. Figures were made.

Table no 1

Source of information for women using contraception.

Sr.no.	Source of information	percentage
1	Media	20%
2	LHV	24.7%
3	Family planning center (nurses, seminars, pamphlets etc.)	3.5%
4	Family/Friends	27%
5	Husband	22.4%
6	Mother in law	2.4%



Mother in law 2.4% Figure: showing percentage of women who ever visited family planning center.

Table no 2

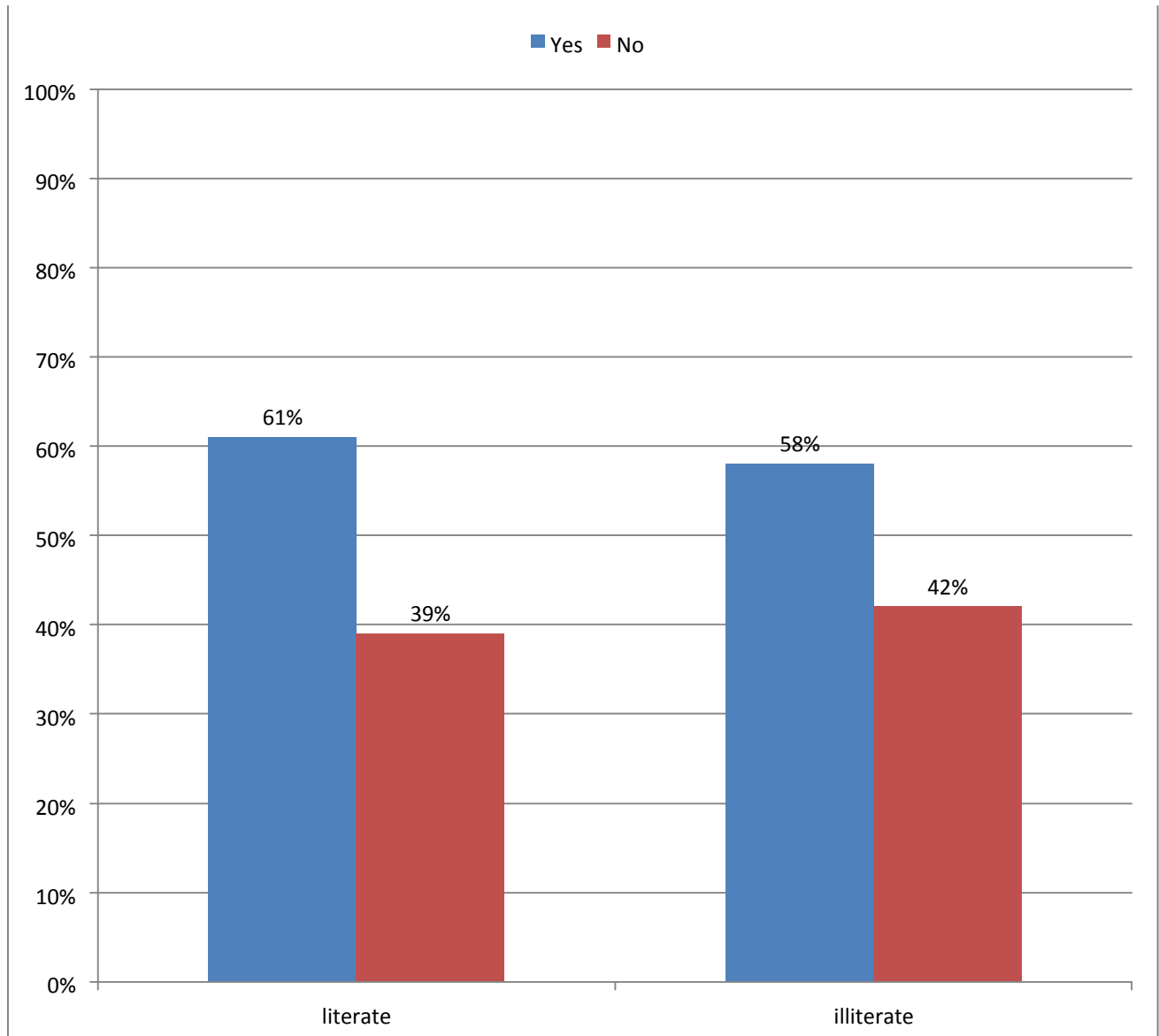
On whom Advice you visited Family planning center

Sr.no	Source of advice	percentage
1	Husband	23%
2	Mother in Law	4%
3	Self	27%
4	Friends	23%
5	Any other	23%

Table no 3
Factors for not using contraceptives.

Sr.no	Factors	Percentage
1	Husband opposition	17%
2	Religious	8.6%
3	Fear of complication	10.6%
4	Perceived insufficient knowledge	21%
5	Anxiety	0%
6	Mother in Law opposition	22%
7	Stigma	0%
8	Previous bad experience (HTN, bleeding, headache, nausea)	12.8%
9	Desire for more children	25.6%
10	Any other	2.2%

Figure: Percentage of contraception use among literate and illiterate wives.



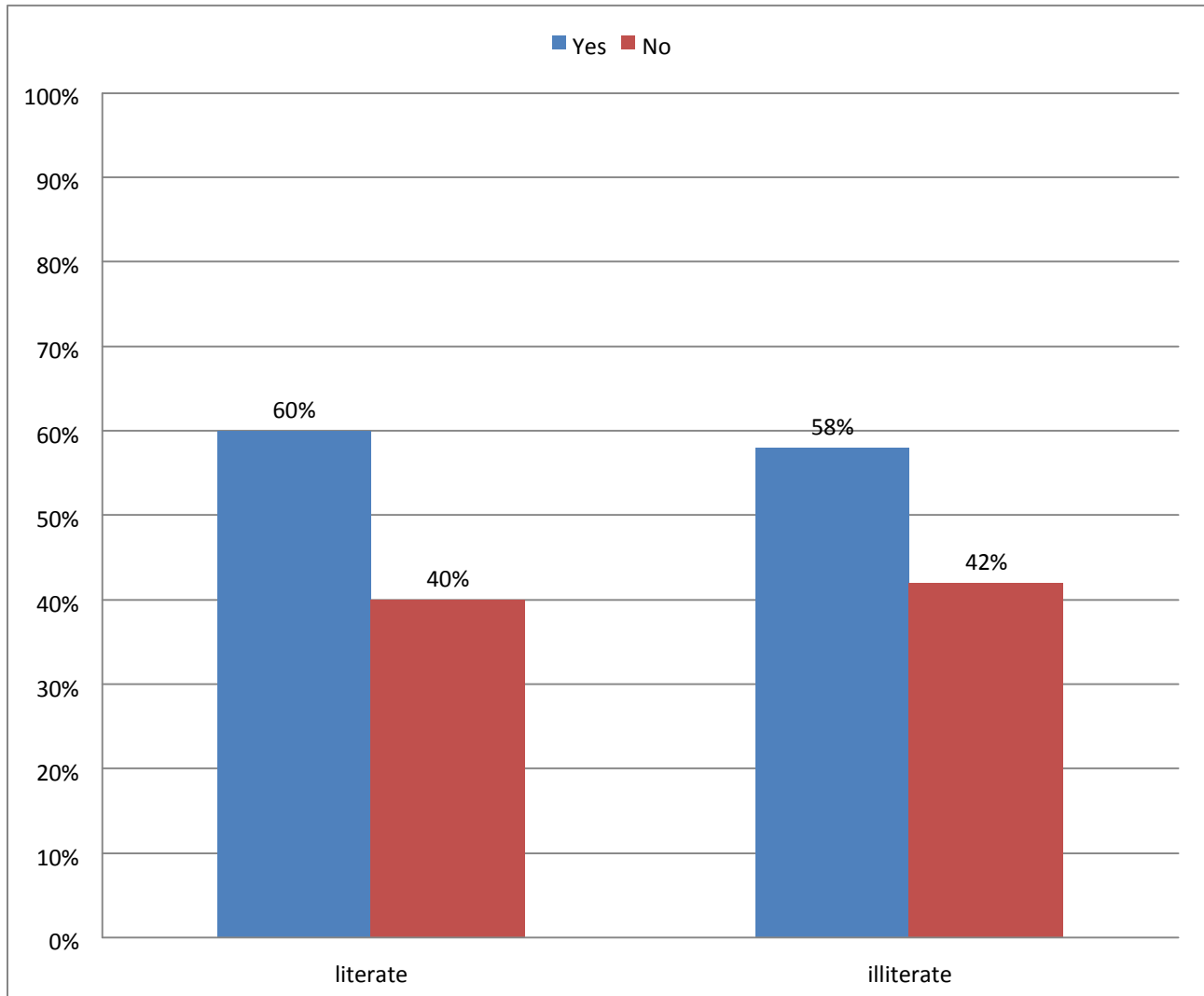


Figure:Percentage of contraception use among literate and illiterate husbands.

RESULTS

In our study, 100 couples were taken as a sample. 85% couples have knowledge about contraception and out of which 53% couples were using contraceptive methods and their source of knowledge about contraception were family and friends (27%), LHV (25%), husbands (22%) and media (20%) (Table 2).

34% couple experienced side effects after using contraceptives and common side effects were lethargy (20%), weight gain(17%), nausea(13%), headache(17%) and change in sex drive(17%)

60% literate husbands were using contraceptives whereas 58% illiterate husbands were using contraceptives

61% literate women were using contraceptives and 58% illiterate women were using contraceptives.

Among 7 working women, 71% were using contraceptive methods and out of 93 housewives, 60% were using contraceptives.

56% of women have the knowledge about Family planning center in their locality whereas 26% of them have ever visited family planning center.

38% husband accompanied their wives to family planning center, out of which 80% were motivated.

26% married couple were not using because of desire for more children ,17% because of husband opposition,22% because of mother in law opposition and 13% because of bad experience (Table 3).

72% of females were satisfied after using contraceptive methods.

25% couples were using contraceptive methods who have been married less than 5 years and,

65% couples were those who have duration of married life more than 16 years.

38% couples who were using contraceptive methods having number of children less than 2 and 83% couples were using contraceptive methods having number of children more than 7.

DISCUSSION

Among married couples of Shahdrah Bahawalpur , the most common method used was condom 49% ,as the women of our society are quite comfortable while using this method due to less side effects , easy to use , easy availability and less chances of getting infection. In USA as the use of latest methods are increasing for last two decades. However use of birth control pills, available since 1960, has gained popularity for last fifteen years despite increased availability of highly effective hormonal alternatives. Couples prefer the barrier methods because in addition of contraceptive benefits, they provide protection against sexually transmitted infections and diseases.

In our Shahdrah Bahawalpur research, among 100 couples 61% literate and working women, IUCD's and condom were most preferred and in 58% illiterate , the condom is only preferred. Compared to USA research, female sterilization is more common among high school females as compared to bachelor degree holders. The use of inject able is nearly three times as common to females of high school as compared to bachelor degree holders. In India tubal ligation is more preferred method (42%).

In our research at shahdrah Bahawalpur, the source of knowledge about contraception was mainly through relatives , friends , and

families(27%) and LHV(25%) as compared to various studies in Nigeria was friends , families, media, school lectures, workshops and health workers. Poor contribution of health workers to dissemination of contraceptive knowledge is worrisome because family planning clinics are not focusing at young women of fertile age. In Nigeria people were not using contraceptives because of change in sex drive and side effects.

In research at Shahdrah, married couples experienced the side effects after the use of contraceptives were lethargy, weight gain and headache whereas in USA observed side effect was menstrual cycle changes. They had more concerns about side effects of using contraceptives more as compared to our society.

In the research study at Shahdrah Bahawalpur, literacy rate of male and female are almost equal 60% and the almost all women were aware of using family planning services and they visited the family planning Centre themselves or along with their husbands. In the Indian setup , the male knowledge about contraceptives was more, due to increased social communication between men and women in choosing any methods.

CONCLUSION

Most of the married couples living in shahdrah have the knowledge of family planning services. Almost half of the couples were practicing them. The factors responsible for use of contraceptives were female education, female occupation, more number of children and more duration of married life.

The factors responsible for not using contraceptives were side effects, desire for more children, bad experience, husband opposition,

mother in law opposition and fear of complications.

RECOMENDATIONS

Family planning services should focus on 18-30 age groups. Because contraceptives methods are used by this age group.

- Provision of effective high quality pre-natal and post-partum contraceptive counseling.
- MCH services should be strengthened.
- Awareness about contraception should be strengthened.
- Female literacy rate should be increased.
- Women empowerment should be increased.
- Husbands and mother in law should be targeted.

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