Effective Contraceptive Practices

ZOHRA KHANUM, AMNA KHANUM, NOREEN RASUL

ABSTRACT

A study was conducted at Gynae Unit III at Services Hospital, Lahore. The study period was January 2009 to December 2010. The women included in the study were multi gravida, grandmultigravida, multipara and grand multipara. Total 1000 women were interviewed both from urban and rural area. The aim of study was to know the awareness of the married women about the contraceptive methods, their practical use and the main reasons for non practicing of contraceptive methods. The study showed that most of the women are aware of the family planning methods available. The most practiced method was withdrawal method. About half of the pregnancies were unplanned. Most of the clients had used the different effective methods (pills, Injection or IUCD) but discontinued for related effects of these methods. The study concluded that there is a wide gap between the awareness & use of the contraceptive methods due to variety of reasons. Effective counseling of the couple with providing literature of contraceptive methods can be effective.

Key words: Contraceptive practices, family planning methods

INTRODUCTION

The subject of future reproductive preference is of fundamental importance for population policy and family planning programs. Insight into the fertility desires in a population is crucial, both for estimating potential unmet need for family planning and for predicting for future fertility. Currently all over the world contraceptive practices prevalence is high. There has been a worldwide rise in the knowledge and use of contraception during the last thirty years. It has been estimated by World Health Organization that some 120 million women in developing countries, who do not wish to become pregnant, are unable to use contraception for a variety of reasons1. It is also estimated that there are about 150,000 unwanted pregnancies terminated every day and 20 to 25% of the pregnancy-related deaths in Asia are the result of induced abortion2. Contraceptive choices varies with the age, ethnicity, marital status, fertility intentions and education. The effectiveness of contraceptive depends on certain factors like how it works and how easy it is to use. Many couples use method inconsistently and /or incorrectly. Some methods are easier to use than others. Compliance with oral contraceptive pills is not easy. In one study, 47% of women reported missing one or more pills and 22% two or more pills per cycle. Depo-Provera lasts for 12 weeks but correct use demands the motivation and expertise and it gives couples the choice of a planned pregnancy.

Pakistan has a high population growth rate. The desire to stop child bearing depends on total number of children as well as the sex composition like desire for the male child. The expected ever-use of contraception among urban women is 56.5% as reported by Pakistan Reproductive Health and Family Planning Survey. The prevalence of contraception practice is 27.6%, being 39.7% in urban areas and 26.7% in rural areas3.

The study was conducted to look for the attitude of the multipara /multigravida and grand multiparas/ grandmultigravida towards the contraceptive practices, methods and affecting factors for decision of child bearing.

SUBJECTS AND METHODS

This study was conducted at Services hospital Lahore. Services hospital is in the centre of city and the patient comes from urban areas and as well as from rural areas. The study period was January 2009 to December 2010. The women included in the study were multi gravida, grandmultigravida, multipara and grand multipara. Total 1000 women were interviewed on designed performa. These women who were interviewed were from both urban and rural area. It included women attending the out patient department, labour room, Gynae ward either as the patient or the attending relatives of the patients. The study was conducted by mixed method approach. The data was collected by interviewing and then was converted into quantitative. The main focus of study was to know the knowledge of the clients regarding the different contraceptive methods and to explore the different reasons for the low prevalence for the family planning practices. The questionare included the age of the client, education, social status, parity,
questions regarding knowledge about the available medical and surgical methods of family. Inquires were also made about the methods practiced by them in the past. Various reasons resulting in large family size were also explored. It also included the family influence on the choice for family planning.

RESULTS

Table I shows the parity of the women. Table II shows the education level. Table III shows the knowledge of these women about contraceptive methods. The most commonly known method was tubal ligation, 98% of the women being aware of the method. The family planning methods every practiced by these women are shown in Table-IV. The most common method used was tubal ligation. Most respondents had used various methods for birth spacing in the past. Majority (64.5%) of women used different methods, either between two pregnancies or at different occasions in the past. The commonest practiced method was withdrawal, practiced by 33% couples followed by the tubal ligation 8% while 7% couples used condom. Thirty six percent females did not practice any of the method and relied on the myth that the interval between two pregnancies is naturally determined. Exclusive practice of effective contraceptive methods like IUCD, pills and injections was low, i.e. 2%, 1.8% & 1.6% respectively. However, a significant number of women used them for short period of time.

A large number of conceptions were unplanned (58%). The reasons for repeated childbirth and large family size are desire to pair a male baby and at least one male child (16.5%). Failure of a particular method with repeated miscarriages, neonatal and infantile deaths was also a reason for repeated pregnancy.

In spite of knowledge about the availability of various contraceptive methods, these were not wildly used. The reasons for non-use were concerns about the associated effects of different contraceptive methods like menstrual irregularities, weight gain, vaginal infection, and husband’s disapproval, fear of cancer and religious taboo.

Table I: Parity

<table>
<thead>
<tr>
<th>Parity</th>
<th>=n</th>
<th>%age</th>
</tr>
</thead>
<tbody>
<tr>
<td>P1</td>
<td>200</td>
<td>20</td>
</tr>
<tr>
<td>P2-P4</td>
<td>600</td>
<td>60</td>
</tr>
</tbody>
</table>

Table II: Education level of women

<table>
<thead>
<tr>
<th>Education level</th>
<th>=n</th>
<th>%age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Un educated</td>
<td>380</td>
<td>38</td>
</tr>
<tr>
<td>Primary</td>
<td>510</td>
<td>51</td>
</tr>
<tr>
<td>Higher secondary</td>
<td>66</td>
<td>6.6</td>
</tr>
<tr>
<td>Graduate</td>
<td>44</td>
<td>4.4</td>
</tr>
</tbody>
</table>

Table III: Awareness about family planning methods

<table>
<thead>
<tr>
<th>Aware</th>
<th>976</th>
<th>97.6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unaware</td>
<td>24</td>
<td>2.4%</td>
</tr>
</tbody>
</table>

Table IV: Practice of contraceptive methods

<table>
<thead>
<tr>
<th>Method</th>
<th>=n</th>
<th>%age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Withdrawl method</td>
<td>330</td>
<td>33</td>
</tr>
<tr>
<td>Condoms</td>
<td>80</td>
<td>8</td>
</tr>
<tr>
<td>Tubal Ligation</td>
<td>70</td>
<td>7</td>
</tr>
<tr>
<td>IUCD</td>
<td>20</td>
<td>2</td>
</tr>
<tr>
<td>Pills</td>
<td>18</td>
<td>1.8</td>
</tr>
<tr>
<td>Injections</td>
<td>15</td>
<td>1.5</td>
</tr>
</tbody>
</table>

DISCUSSION

The global population expansion has become a major topic of concern with important medical, social and political implications. The Planned Parenthood with small family size can limit the rapid population growth especially in countries with higher growth rate. The contraceptive usage is the integral part of family planning. In our country future fertility preferences depends not only on the total number of living children, but also on the sex composition of the children. There is stronger preference for sons over daughter. In spite of the efforts of Government of Pakistan the family planning program has not met with the same success as in some other neighboring countries. The overall contraceptive prevalence is only 27.6% as compared to 35% in India, 25% in Bangladesh, 50% in Indonesia and 69% in China.

The present study was aimed to investigate the awareness, practice and attitude of married women towards the practice of contraceptives methods. The results revealed an awareness rate of about 98%, which is very close to the figure of 97.4% reported for major urban areas like Lahore by Pakistan Reproductive Health and Family Planning Survey3 2000-2001. There was no significant difference (P>0.05) between our findings and that of national survey referred above. This reflects the positive impact of family planning program in urban areas. The same was observed in a study in Nigeria. The present study indicates that 60% couples rely on traditional and less effective methods like withdrawal and condom. This contrast with the other study in which high percentage of women rely on pill and IUCD, which are effective methods of contraception.

In our study, only 40% women have used effective methods but most of them admitted the irregular use of these methods. These methods were used partially and occasionally these methods were added in combination with other methods like withdrawal and condom. This contrast with the developed world like a survey conducted in UK has shown that over 95% of sexually active women, who wish to avoid pregnancy, are using at least one
method of contraception. Approximately one quarter of the couples rely on very effective method i.e. female and male sterilization, one-third rely on effective methods. But despite the apparently high prevalence of contraceptive use in UK, it has been estimated that 30% of the babies delivered are the result of unplanned pregnancies. Although ineffective use of contraceptives and failure of the methods account for a large fraction of unplanned pregnancies, couples who do not use contraceptives account for a higher proportion of unplanned pregnancies than those who use them. In our study more than 60% pregnancies were unplanned, because of reliance on less effective methods or no contraception practices.

In our study, the reason for large family size revealed desire for a living son and preferably two sons as an important socially derived determinant. Male child being a symbol of social and cultural pride is a dominant factor in determining the family size in Asian society. Number of living children, followed by number of living sons and attitude of husbands were found to be the important predictor for contraceptive use in a study carried out in Bangladesh. Same trend has been observed in Turkey Vietnam. The rate of contraceptive use is seen to be directly proportional to the Women's education and socioeconomic status. The women included in present study were from lower social class with little education, which itself explains the poor use of effective contraceptive methods.

Husband's approval in selection of contraceptive method is an important factor. Moreover, menstrual irregularities, fear of cancer, religious taboos and cultural attitude of society towards the contraception also regulate the contraceptive use.

It is noticed that Tubal ligation is fear with weight gain, weakness and generalized aches and pains. The rate of contraceptive use is seen to be directly proportional to the Women's education and socioeconomic status.

**CONCLUSION**

We conclude that there is a knowledge/practice gap in the use of family planning methods. Awareness about contraceptive methods is high but multiple factors like religious, cultural and social factors affect the practice and compliance.

**REFERENCES**


