KNOWLEDGE, ATTITUDE AND PRACTICE OF CONTRACEPTIVES IN MOTHERS ATTENDING THE URBAN HEALTH CENTER: A CROSS SECTIONAL STUDY

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ABSTRACT: BACKGROUND: Rapid increase of population due to unregulated fertility is related to increased maternal, perinatal and infant deaths. By using contraceptives, fertility can be regulated. This study was conducted to investigate the knowledge, attitude and practices of contraceptive in women attending urban health center (UHC). **OBJECTIVES:** To study the knowledge, attitude and practice of contraceptive in mothers attending the UHC. **MATERIALS AND METHODS:** A cross sectional study was conducted at UHC. All mothers in reproductive age group attending UHC for health check-up were included in the study, which was 109 mothers. Data was collected on preformed questionnaire and analysis was done. **RESULTS:** Among 109 women, 61 (56%) women were in age group 26-30 years. 84 (77%) women were Hindu by religion.68 (62%) women belonged to socioeconomic class III. 73 (66.97%) women were having knowledge of tubectomy. 64 (58.72%) women felt that contraceptives should be used after having 2 children. 59 (54.13%) women had undergone tubectomy. **CONCLUSIONS:** Knowledge of barrier and hormonal methods of contraceptives was poor among mothers. Positive attitude was seen towards use of contraceptive. **KEYWORDS:** Contraceptive, Family planning, Tubectomy.

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INTRODUCTION: India is the pioneer country in the world to launch a nationwide family planning program in the year 1952, and during the third 5-year plan it was declared "The very centre of planned development". In April 1976, the country framed its first "National population policy" which is now running under RCH (Reproductive and child Health) program, so that each and every couple of India get aware of the need of the family planning methods.¹

The contraceptive methods are broadly categorized into barrier, chemical, natural or surgical. Surgical method that includes vasectomy and tubectomy which are permanent method of birth control while others are temporary methods.²

Attitudes towards fertility regulation, knowledge of birth control methods, access to the means of fertility regulation and communication between husband and wife about desired family size are essential for effective family planning.³

Rapid increase of population due to unregulated fertility is related to increased maternal, perinatal and infant deaths, by using contraceptives, fertility can be regulated.⁴

This study was conducted to investigate the knowledge, attitude and practices of contraceptives in women attending urban health center (UHC).

METHODS: A cross sectional study was conducted at UHC from 1/9/2013 to 30/9/2013. All mothers in reproductive age group attending the UHC for health check-up were included in the study, which were 109 mothers.

Informed consent was obtained from all the participants and confidentiality of the subjects was totally assured. Data was collected on preformed questionnaire and analysis was done.

RESULTS:

Socio-Demographic Profile: Among 109 women, 61 (56%) women were in age group 26-30 years. 84 (77%) women were Hindu, 19 (17.43%) women were Muslim and 6 (5.51%) women were of other religion. 68 (62%) women belonged to socioeconomic class III, 19 (17.43%) women to socioeconomic class IV, only 3 (2.75%) women belonged to socioeconomic class I. 72 (66.05%) women were literate and 37 (33.95%) were illiterate as given in Table 1.

Knowledge of different Methods of Contraception: Most of the women i.e. 73 were having knowledge of tubectomy and only 2 women were having knowledge of emergency contraceptives. 9 women were not having any knowledge of different methods of contraception as shown in Table 2.

For most of the women (46) common source of knowledge of contraceptives was audiovisuals (TV/ Radio) and only 8 women got the knowledge about contraceptives from their husband as described in Table 3.

Attitude: 64 (58.72%) women felt that contraceptives should be used after having 2 children. 53 women felt that use of contraceptive is necessary for control of population growth.

Practice of contraceptives: 74 women used the different contraceptive methods; out of them most of the women 59 had undergone tubectomy, 9 were using IUCDs, 6 were using OC pills and no one had used emergency contraceptives as in Table 4.

35 women were not using contraceptives, fear of side effects, husband not agree for use of contraceptives, pressure from in laws and lack of knowledge of contraceptives were the reasons for non-use of contraceptives as shown in Table 5.

DISCUSSION: Family planning is defined by WHO as, "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 the health and welfare of family groups and thus contribute effectively to the social development of a country".

Most of the women in the present study were from the age group 26-30 years which is comparable to a study carried out in Pakistan.⁵

Majority of the women (66.05%) were literate in the present study which was comparable to crude female literacy rate 56.99%.

Knowledge of tubectomy was found to be more than knowledge of other contraceptive methods which was comparable to a study done among Hindu Gujjars residing in Delhi.³

For most of the women common source of knowledge of contraceptives was audiovisuals (TV/ Radio). Electronic media play an important role in a society where literacy level is low.⁶

Most of the women undergone tubectomy which was comparable to a study done among Hindu Gujjars residing in Delhi. $^{\rm 3}$

CONCLUSIONS: Knowledge of barrier and hormonal methods of contraceptives was poor among mothers. Positive attitude was seen towards use of contraceptive. Knowledge of various family planning methods should be provided to all the females coming to health center. We promote use of various contraceptives among mothers of reproductive age group. Increasing the role of women in decision making about family planning issues will help India to achieve its long term family planning goals.

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AGE (IN YEARS)	NUMBER (N=109)	PERCENTAGE
15-20	6	05.51
21-25	27	24.77
26-30	61	55.96
>30	15	13.76
RELIGION		
Hindu	84	77.06
Muslim	19	17.43
Other	6	05.51
SCOCIOECONOMIC CLASS		
I	3	02.75
II	8	07.34
III	68	62.39
IV	19	17.43
V	11	10.09
EDUCATION		
Illiterate	37	33.95
Literate	72	66.05

Table 1: Distribution of participants according to socio-demographic profile

METHODS	NUMBER (N=100)
Tubectomy	73
Intra-Uterine Contraceptive Devices	11
Oral Contraceptive pill	8
Vasectomy	6
Emergency Contraceptives	2

Table 2: Distribution of participants according to knowledge of different Methods of contraception

^{*9} women were not having any knowledge of different methods of contraception

SOURCE OF KNOWLEDGE	NUMBER
OF CONTRACEPTIVES	(N=100)
Audiovisuals (TV/Radio)	46
Friends	34
Newspaper	12
Husband	8

Table 3: Distribution of participants according to source of knowledge of contraceptives

^{*9} women were not having any knowledge of different methods of contraception

PRACTICE OF CONTRACEPTIVES	NUMBER (N=74)
Tubectomy	59
Intra-Uterine Contraceptive Devices	9
Oral Contraceptive pill	6
Vasectomy	0
Emergency Contraceptives	0

Table 4: Distribution of participants according to practice of contraceptives

^{* 35} participants were not using contraceptives

REASONS FOR NOT USING	NUMBER
CONTRACEPTIVES	(N=35)
Fear of side effects	13
Husband not agree for use of contraceptives	8
Pressure from in laws	5
Lack of knowledge of contraceptives	9

Table 5: Distribution of participants according to reasons for not using contraceptives

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