



## A study on contraceptive knowledge, attitude and practice among reproductive age group women in a tertiary institute

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#### Abstract:

**Aim and Objective:** To assess the knowledge, attitude regarding family planning methods and contraceptive practices among reproductive age group women. **Methodology:** 500 women in the reproductive age group 15-45years attending Government General Hospital, Kakinada, Andhra Pradesh, India were interviewed with predesigned questionnaire after taking informed consent. **Results:** Most of the women interviewed fall in the age group of 21-30years (48%). 91% are married for 5years. 46% are illiterates and only 17.6% had primary education. Out of 500 women interviewed 484 (96.8%) had heard/aware of family planning method (permanent/temporary). Out of 484 women, who had knowledge and awareness of family planning methods about 328 (67.77%) got information from social circle (husband, mother/ in laws). The importance of and use of contraception has been explained by health personnel to 68 (14%) and 88 (18.18%) got it through mass media. Out of 500 women interviewed, 269 (53.8%) were practicing different contraceptive methods. Most of them 135 (50.18%), resort to tubal ligation as a contraceptive method of choice and the reason being completion of their family in 178 (66.17%). Only 66 (24.5%) women used various methods for spacing. Only 11(4%) women used OCP as a contraceptive method as against 106(21.9%) women having knowledge about them. **Conclusions:** Lack of knowledge regarding the various methods of contraception is the reason for not practicing family planning methods. There is need for focused awareness program based on the knowledge gaps reported among women in reproductive age group.

**Key words:** Attitude; Condom; Knowledge of contraception; Practice of contraception; Tubectomy

#### Introduction

Contraceptive advice is a component of good preventive health care. It is very much necessary to stabilize the population and to conserve the natural resources to future generations. An ideal contraceptive should suit an individual's personal,

social, and medical characteristics and requirements. Socio-economic factors, education are few of the factors that play vital role in family planning acceptance [1]. To provide this, understanding the attitude and knowledge of the patient towards

contraception is very much necessary. There are nearly 40million women in India who would prefer to avoid becoming pregnant but not practicing contraception [2]. In India women virtually have no role to play or allowed to play very limited role in making of reproductive decisions [3]. According to NFHS-3, about 30% of the fertility in India was unwanted, indicating a huge gap between the demand and supply of family planning and the unmet need for the country as a whole is about 13% and this is high among married women aged 15-19 years (25% for spacing and 2% for limiting) and among those aged 20-24 years (15% for spacing and over 6% for limiting).

## Materials and Methods

It is a facility based cross sectional study done in Department of Obstetrics and Gynecology, Government General Hospital, Kakinada, Andhra Pradesh. A total of 500 women in reproductive age group attending Government General Hospital, Kakinada, Andhra Pradesh were evaluated with predesigned questionnaire. The study was aimed to (1) study of socio-demographic parameters (2) study of knowledge and awareness regarding contraception (3) study of contraceptive practices.

### Inclusion criteria

- Women in reproductive age group
- Women living with their husbands

### Exclusion criteria

- Women who have had medical disorders

Descriptive analysis conducted to obtain percentage. After taking informed consent, women who fulfilled the inclusion criteria were interviewed. The questionnaire elicited information regarding their age, educational status, occupation, number of children, knowledge and source of contraceptive methods, practicing of family planning methods, the attitude of female towards contraception was assessed.

To assess the knowledge, the following parameters were considered and knowledge about oral contraceptive pills, injectables, IUCD, condoms, tubectomy, vasectomy and safe period was assessed. The practice defines usage of contraceptive methods by either partner.

## Results

The socio-demographic characters

**Table 1:** Age in years

Age in years	n	percentage
<20years	140	28
21-30	240	48
31-40	80	16
41-45	40	8

**Table 2:** Parity

Parity	n	percentage
Primi	172	34.4
< 3	302	60.4
3-5	22	4.4
>5	4	0.8

**Table 3:** Years of marriage

Years of marriage	n	percentage
5	456	91.2
5-14	36	7.2
>14	8	1.6

**Table 4:** Educational status

Educational status	n	percentage
Illiterate	230	46
Till primary school	104	20.8
Primary school completed	88	17.6
High school	48	9.6
Graduate and above	30	6

**Table 5:** Occupation

Occupation	n	percentage
Agricultural laborer	84	16.8
Working	20	4
Not working	396	79.2

Out of 500 women interviewed 240 (48%) were in the age group of 21-30 years. 172 (34.4%) women were primipara and 302 (60.4%) women having <3 children. 456 (91.2%) women were within 5years of marital life. Regarding literacy level 230 (46%) were illiterate and 396 (79.2%) were non - working and home makers.

**Table 6:** Knowledge

Knowledge	n	percentage
Heard or aware of contraceptives	484	96.8%
Tubectomy & vasectomy	484	96.8%
Barrier methods (condoms)	411	84.9
Oral pills	106	21.9
IUCD	84	17.3
Safe period	17	3.5
Injectables	nil	

**Table 7:** Source of awareness

Source of awareness	n	percentage
Media	88	18.18
Social circle	328	67.7
Health personnel	68	14

Out of the 500 women 484 (96.8%) were aware of contraception and with full knowledge of permanent contraception (both tubectomy & vasectomy). Regarding contraception 411 (84.9%) were aware of barrier methods (male condoms), 106 (21.9%) know about oral contraceptive pills and only 84 (17.3%) know about IUCD. 17 (3.5%) women were aware safe period. The source of knowledge is mostly thorough social circle in 328 (67.7%) and only 68 (14%) got awareness through health personnel and 88 (18.18%) through media. 16 women (3.2%) does not know about any type of contraception (either permanent or temporary). Few of the women know more than one method of contraception.

**Table 8:** Type of contraceptive using

Type of contraceptive using	n	percentage
Male condoms	42	15.6
Tubal ligation	135	50.18
Vasectomy	45	16.7
Safe period	17	6.3
IUCD	19	7.06
Oral pills	11	4

**Table 9:** Reasons for using contraceptives

Reasons for using contraceptives	n	percentage
Completed their family	178	66.17
Spacing	66	24.5
Financial problems	20	7.4
Improvement of health/Physicians advise	5	1.8

**Table 10:** Reasons for not using contraceptives

Reasons for not using contraceptives	n	percentage
Not reliable	16	7.44
Lack of knowledge	119	55.5
Partner opposition	4	1.8
Willing to have more children	12	5.5
Health problems in future	64	29.7

Of the 500 women interviewed and of the 484 women with a knowledge of contraceptives 180 (66.9%) resorted for permanent sterilization. Out of all these women majority 135 (50.18%) expressed their willingness to undergo tubectomy and 45 (16.7%) were in favour of vasectomy and the reason for this decision being completion of family in 178 (66.17%). 89 (33%) women were using temporary contraceptives of which male condoms 42( 15.6%) occupy the major part. Even though 106 (21.9%) women were aware of oral contraceptive pills and 84 (17.3%) about IUCD only a minority 11 (4%) and 19 (7%) were actually using OCP and IUCD respectively. Most of the women 66 (24.5%) were using contraceptives for spacing and 20 (7.4%) for financial problems. Out of 215 (44.4%) women who are not practicing contraception 119 (55.3%) were not having knowledge about contraception. In those who had knowledge 16 (7.4%) think they are not reliable and 4 (1.8%) were not using due to partner opposition.

**Table 11:** Attitude

Attitude	n	percentage
Approval	268	53.6
Disapproval	232	46.4
Positive	290	38
Neutral	78	15.6
Negative	232	46.4

Out of 500 women interviewed and counseled 268 (53.6%) approved the use of contraceptive methods. Of these 190 (38%) had positive attitude towards practice of family planning methods. 78 (15.6%) were neutral in their responsiveness.

## Discussion

85% of contraceptive users in India are women. In our study most of the women fall in the age group of 21-30 years; the time for the settlement of both career and family. Evidence from a number

of small scale studies in various parts of the country indicates that inadequate knowledge of contraceptive methods is a reason for not accepting family planning [4,5]. In our study 96.8% were aware of one or more methods of contraception. In two other Indian studies the awareness rate was 82.8% [6] and 100% [7]. But in practice only 55% of women are using contraception methods. 55.5% women are not using them due to lack of knowledge about their usage. Other Indian studies showed similar results 52% [7], 55%, 46% [8] of non-users. 29.7% expressed concerns about the side effects as the reason for not using. Emphasis should be made on communication and good counseling to the women giving correct information about availability, source, side effects of contraceptive methods. The major source of knowledge is social circle 67.7% and media in 18.18% similar results were found in other study 42% & 15% respectively [7]. Mass media plays an important role in promotion and acceptability of contraception [9]. The need to advertise through media is to be enhanced as 46% of the women interviewed are illiterates. The health personnel especially MPHW (F) and ASHA workers who closely monitor health parameters and also a part of the community should discuss the need of contraception especially spacing methods to bridge the gap between knowledge and practice of contraception. Childhood marriages and unplanned pregnancies are still more common in India. There is no doubt that we can reduce maternal mortality and morbidity by creating awareness regarding temporary contraception among teenagers and primipara. Promoting injectables and PPIUCD insertion have their own role in improving maternal health.

**Source of funding:** nil

**Source of conflicts:** nil

### Conclusions

Practicing family planning and to choose the correct contraceptives is very much essential. The health care personnel have to spread the knowledge widely. Motivation of the males towards the usage of male contraceptive measures (both temporary and permanent) is very much necessary. Encouraging the use of male condoms in the era of HIV infection for both spacing and also as a measure against spreading of STI is to be promoted.

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