

Knowledge Regarding Contraceptives in Women with Unmet Need.

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Abstract

Background: To study knowledge about contraceptive methods in women with unmet need. **Subjects and Methods:** A cross sectional study was conducted in the Immunization Clinic, Govt. Rajindra Hospital, Patiala (Punjab) among 1000 married women of reproductive age group using questionnaire method. Analysis was carried out using EpiInfo 3.2. **Results:** 16% of women of reproductive age had unmet need. 98.2% of the women knew of at least one method of contraception. Knowledge about the number of different types of contraceptives was more in urban population as compared to rural population. But even in rural areas, 96.9% of the women knew about at least one method. 8.75% knew nothing about the availability of the contraceptive methods. Knowledge of availability of contraceptives was more in urban (98.5%) as compared to rural population (86.2%). In rural area, 13 women did not have any knowledge about the availability of contraceptive methods while in urban areas only one (1.515%) woman did not know about the same. **Conclusion:** In spite of high level of knowledge on contraception, unmet need still exists. Knowledge may be deficient or there could be other reasons for unmet need. There is a need to study in more detail the social and cultural factors that determine contraceptive use.

Keywords: Knowledge, Unmet need, Contraceptives.

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Introduction

More than one-fourth of the births world-wide are unplanned.^[1] Millions of women would prefer to avoid becoming pregnant either right away or ever, but are not using contraception. These women have an unmet need for family planning.^[2] Unmet need points to a gap between women's reproductive intentions and contraceptive behaviour. In 1999, government set a new bench-mark, reducing unmet need by half by 2005 and entirely by 2015.^[3] Meeting unmet need for contraception is one of the components of RCH programmes. Keeping this in view, the present study was undertaken, to study knowledge about contraceptive methods in women with unmet need.

Subjects and Methods

This cross sectional study was undertaken in the immunization clinic, run by the Deptt. Of Community Medicine, Govt. Medical College, Patiala among the mothers of reproductive age group who were attending the immunisation clinic with their children for vaccination. The study continued for about ten months. On an average 30-40 new cases attend the immunisation clinic every day. Every tenth woman attending the immunization clinic was included for the study purposes and in all 1000 married women of reproductive age group were interviewed to determine the unmet need group.^[2] A detailed, precoded,

pre-tested, structured, closed questionnaire was used to collect the data after informed consent was obtained. By interviewing the women of the unmet need group, information was collected regarding knowledge about contraceptives. Data analysis was done using Epi Info3.2.

Results

Table 1: Socio- demographic characteristics of the participants (n=1000).

Socio- demographic characteristics	(%)
Age Distribution (In years)	
<20	10.8
21-25	37.3
26-30	36.4
31-35	9.1
36-40	5.6
>40	0.8
No. of Children	
1	28.1
2	48.4
3	22.3
4	1.2
Participants education	
Illiterate	9.9
Literate--	
< matric	53.1
Intermediate	10.7
Graduates and above	26.3
Residence	
Rural	49.4
Urban	50.6

Table 2: Knowledge about the number of contraceptive methods in women having unmet need(n=160)

No. of contraceptive methods known	No.	(%)
0	3	1.875
1	51	31.875
2	54	33.750
3	21	13.125
4	19	11.875
5	8	5.000
6	4	2.500

Table 3: Knowledge about the number of contraceptive methods in relation to residence

No. of contraceptive methods known	Rural		Urban		Total	
	No.	%	No.	%	No.	%
0	3	3.191	0	0	3	1.875
1	37	39.362	14	21.212	51	31.875
2	31	32.979	23	34.848	54	33.750
3	10	10.638	11	16.667	21	13.125
4	8	8.511	11	16.667	19	11.875
5	2	2.128	6	9.091	8	5.000
6	3	3.191	1	1.515	4	2.500
TOTAL	94	100.0	66	100.0	160	100.0

Table 4: Knowledge Of The Availability Of Contraceptive Methods In Women With Unmet Need(N=160)

Knowledge of the availability of contraceptive methods	No.	%
FHW	10	6.250
G.H	5	3.125
Chemist	82	51.250
Chemist, FHW	2	1.250
Chemist, G.H	32	20.000
Chemist, G.H, FHW	2	1.250
Dispensary	13	8.125
No knowledge	14	8.750

Table 5: Knowledge Of The Availability Of Contraceptive Methods In Relation To Residence In Females With Unmet Need

Knowledge of the availability of contraceptive methods	Rural		Urban		Total	
	No.	%	No.	%	No.	%
FHW	10	10.638	0	0	10	6.250
G.H	4	4.255	1	1.515	5	3.125
Chemist	51	54.255	31	46.970	82	51.250
Chemist, FHW	2	2.128	0	0	2	1.250
Chemist, G.H	4	4.255	28	42.424	32	20.000
Chemist, G.H, FHW	2	2.128	0	0	2	1.250
Dispensary	8	8.511	5	7.576	13	8.125
No Knowledge	13	13.830	1	1.515	14	8.750
TOTAL	94	100.0	66	100.00	160	100.00

The above table [Table 2] shows that 98.2% of the women knew of at least one method of contraception. About one-third (31.875%) of the women knew only about one method and most common out of these were oral pills and another one-third (33.750) knew about two methods and these were mainly condoms and oral pills. Only three women (1.8%) did not know anything about contraceptive methods.

The above table [Table 3] shows that the knowledge of

women about the number of different types of contraceptives was more in urban population as compared to rural population. But even in rural areas, 96.9% of the women knew about at least one method.

The above table [Table 4] shows that maximum number of women (51.25%) had the knowledge that the contraceptive methods were available from the chemists. 8.125% of the women told that these were available from the dispensary and 6.25% told that these were available from the female health workers. 8.75% knew nothing about the availability of the contraceptive methods.

Knowledge of availability of contraceptives as shown in the above table [Table 5], was more in urban as compared to rural population. In rural area, 13 women did not have any knowledge about the availability of contraceptive methods while in urban areas only one (1.515%) woman did not know about the same.

Discussion

In the present study, 16% of women had unmet need.

In the study under discussion, 98.2% of the women knew of at least one method of contraception. Results were similar to survey done by Akakpo,^[4] where 95% of married women knew of at least one contraceptive method. About one-third (31.875%) of the women knew only about one method and most common out of these were oral pills and another one-third (33.750) knew about two methods and these were mainly condoms and oral pills. Only three women (1.8%) did not know anything about contraceptive methods. Management sciences for family planning management development reported that 99-100% of clients had knowledge of family planning methods.^[5] Althaus also observed that 99% of all currently married women knew of at least 1 contraceptive method.^[6] Westinghouse health system,^[7] observed that women of all ages, educational levels, and geographical regions knew of at least 1 contraceptive method.

In the present study, knowledge of women about the number of different types of contraceptives was more in urban population as compared to rural population. But even in rural areas, 96.9% of the women knew about at least one method. Similar findings were observed by Akakpo where more than 70% of the women even in rural areas knew of at least one method.^[4] Hakim et al also reported that 75% of rural women were aware of at least one contraceptive method.^[8]

The above study shows that maximum number of women (51.25%) had the knowledge that the contraceptive methods were available from the chemists. 8.75% knew nothing about the availability of the contraceptive methods. Knowledge of availability of contraceptives was more in urban as compared to rural population.

Conclusion

In spite of high level of knowledge on contraception, unmet need still exists. Knowledge may be deficient or there

could be other reasons for unmet need. There is a need to study in more detail the social and cultural factors that determine contraceptive use. Investing in women's education helps women believe in being able to control their own life and gives the ability to do so. Involvement of grass root level workers should be expanded and proper training should be ensured. A critical mass of IEC expertise should be there providing complete information on all the available methods. Media should be engaged in increasing community mobilization through communication, raising public awareness of expanded contraceptive choices, implementing creative strategy through electronic and printed media.

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