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Original Research Article

Contraceptive awareness in post-natal patients in KIMS, Bangalore

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ABSTRACT

Background: Family planning can avert more than 30% of maternal deaths and 10% of child mortality if couples spaced their pregnancies more than two years apart. India was the first country in the world to launch the family planning programme in 1951. There exists a KAP gap i.e. a gap between knowledge, attitude, and practices regarding contraception. Healthcare workers have an important role to play to acknowledge the importance and right concept of contraception among married couples. This study aimed to assess the knowledge, awareness, and perception of contraception among postnatal women.

Methods: A questionnaire-based study was conducted among postnatal inpatients and outpatients from September 2021 to November 2021. All postnatal patients in this hospital, willing to participate in the study, after a thorough written informed consent, patients were given pre decided questions for answering. Answers were noted, counselling was done.

Results: Out of 200 women, 97% of the women were aware of at least 1 contraceptive method, the highest being of female sterilization (91%). The 22% of women have used contraception before. The 78% of women had never used contraception before, main reason was that they wanted to conceive (46%) followed by fear of side effects (29%). Regarding willingness to use the contraception after counselling, female sterilization (32%) was the preferred method followed by copper-T (22%). The most common source of information was by relatives was 33%.

Conclusions: There is a large gap between the awareness and practice of contraception. Proper education of both partners, increasing female literacy, socio economic upliftment, effective health care system is needed. After delivery, during immediate postpartum period, maximum women wish for contraception Hence these women can be served by family planning services before discharge from hospital to ensure the acceptance of contraceptive practices among them. This would curb unwanted pregnancies and its future consequences.

Keywords: Awareness, Contraceptive methods, Practice, Postnatal women, Source of information

INTRODUCTION

Contraceptive use during postpartum period is critical for maternal and child health. Family planning can avert more than 30% of maternal deaths and 10% of child mortality if couples spaced their pregnancies more than two years apart. India was the first country in the world to launch the family planning programme in 1952. Rise in contraceptive practices however did not match the significant fall in estimated birth rate.¹ The ability of women to control their own fertility is absolutely fundamental to women's empowerment and equality.

Woman must have the fundamental freedom of choosing whether or not she shall be a mother and how many children she will have. That right to decide imposes upon her the duty of clearing the way to knowledge by which she may make and carry out the decision.² It has been found most of the women of reproductive age who do not want to have a child soon or ever, are not using any contraception.³

Post-partum period is important time to initiate contraception because women are accessing the health-care system and might have increased motivation to avoid another pregnancy. According to Bongaarts, there is no

complete correspondence between knowledge and attitudes and between attitude and practice of family planning methods.⁴ There exists KAP gap i.e., gap between knowledge, attitude and practices regarding contraception. Lack of knowledge and awareness could be contributing factor toward malpractice of contraception in society.

Hence there is still need to educate and motivate couples and improve family planning services to achieve more effective and appropriate use of contraceptives and to arrest the trend towards increase in population.⁵

Post-partum women are more likely to have an unmet need for family planning than women in general. Also, studies have shown that postpartum and post-abortal periods are crucial for a woman as for many patients who belong to rural areas, this may be the only time she comes in contact with the health personnel. Hence counselling done at this period is very crucial and effective too.⁶

Choice of post-partum contraceptive method and timing of its initiation depend on whether woman is breast feeding. For normal non-breast-feeding women, 1st ovulation occurs, on average, at 45 days post-partum, indicating need for an effective (even if temporary) contraceptive method by 4 weeks after delivery. Condoms, spermicides, male and female sterilization, IUDs, progestin-only pills, injections and implants are all appropriate options for post-partum women who are not breast feeding. For breast feeding women, contraceptive methods can be organized into hierarchy of clinical appropriateness: Non hormonal methods that do not interfere with lactation-lactational amenorrhea method, post-partum tubal sterilization, IUDs and barrier/spermicide methods. Progestin-only hormonal methods. Hormonal methods-combined estrogen-progestin formulations should be avoided by all women for at least 3 weeks post-partum to avoid elevating risk of thromboembolism.⁷

Aim

Aim of study was to assess contraceptive awareness in postnatal patients.

Objective

Objectives of study were to assess knowledge, awareness, and perception of contraception among postnatal patients in Kempegowda institute of medical sciences.

METHODS

Study type

The study was of observational study.

Study place

The study conducted as Kempegowda institute of medical sciences.

Study period

The study conducted for 3 months (July 2021 to September 2021).

Inclusion criteria

All postnatal patients who have delivered live full-term babies in this hospital were included in the study.

Exclusion criteria

Women in post-abortal period, women who have delivered an intrauterine dead fetus and patient delivered babies with congenital anomalies were excluded from the study.

Procedure

A cross-sectional, questionnaire-based study was conducted among postnatal inpatients and outpatients of Kempegowda Institute of Medical Sciences.

The pretested questionnaire was used to collect data from the participants over the period of 3 months.

This is a KAP study regarding socio-demographic profile, awareness and acceptance of contraceptive method in postnatal period.

The questionnaire will be used for gathering the information about patient's demographic data, and their knowledge, attitudes, and perception toward contraception. Data will then be statistically analyzed.

Data was entered into Microsoft excel data sheet and was analyzed using SPSS 22 version software. Chi-square test was used as test of significance for qualitative data. Continuous data was represented as mean and standard deviation. P value probability that the result is true.

RESULT

Mean age of subjects was 23.46±3.3 years.

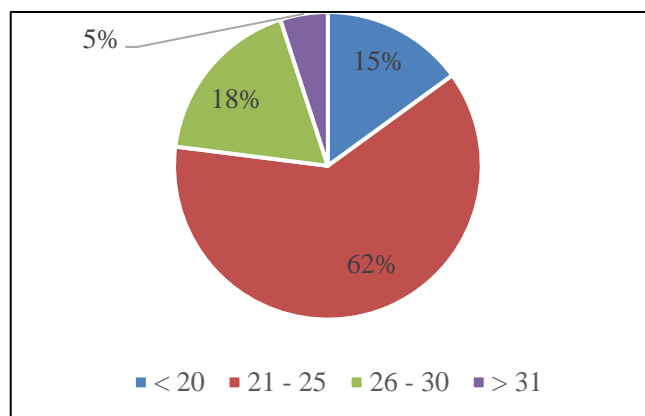


Figure 1: Distribution of subjects by age.

Table 1: Distribution of subjects by qualification.

Educational qualification	Count	Percentage (%)
Illiterate	6	3
Primary	20	10
Secondary	82	41
Higher secondary	54	27
Degree and others	38	19
Total	200	100

There were 41% of women had secondary education, 10% had primary education, 27% had education till higher secondary, 19% had degree and 3% were illiterates.

Table 2: Distribution of subjects by socioeconomic status.

Socioeconomic status	Number	Percentage (%)
Lower class	66	33
Middle class	102	51
Upper class	32	16

The 33% of women were from lower class, 51% were from middle class and 16% were from upper class.

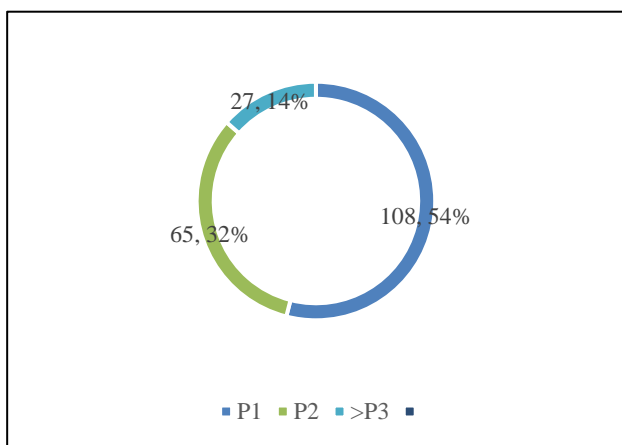


Figure 2: Parity distribution.

The 54% were primipara and 46% were multipara.

Table 3: Distribution according to occupation.

Occupation	Count	Percentage (%)
Housewife	168	84
Nurse	4	2
Bank employee	3	1.5
Teacher	2	1
Software engineer	2	1
Cook	5	2.5
Maid	13	6.5
ASHA worker	1	0.5
Tailor	2	1

There were 94% of women were house wives while 6% were self-employed or had job.

Table 4: Previous history of contraceptive use.

History of contraception use	Number	Percentage (%)
No	156	78
Yes	44	22

The 78% of them had never used any method of contraception previously. 22% had used atleast 1 type of contraception previously.

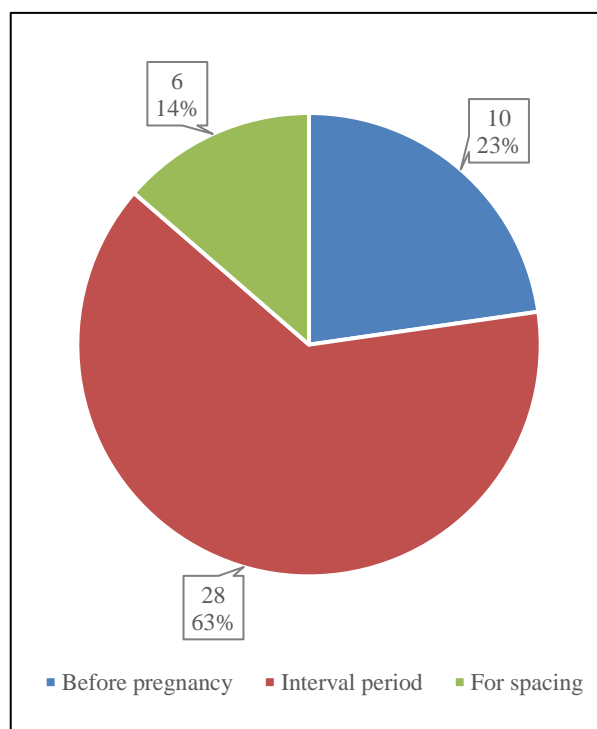


Figure 3: Timing of contraceptive use.

The 63% patients used contraception in between pregnancies, 28% used before pregnancy, 14% used contraception as spacing and not to have pregnancy.

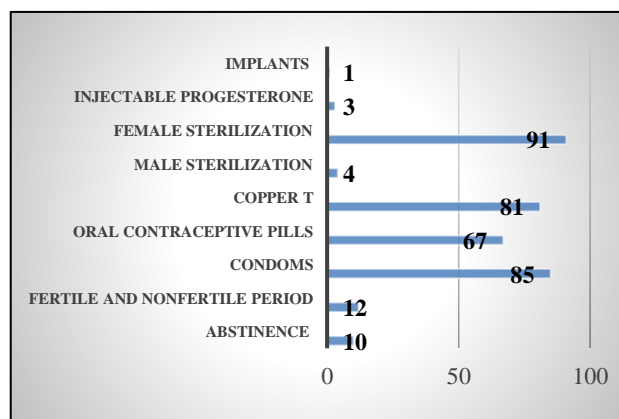


Figure 4: Awareness about contraception.

Table 5: Willing for contraceptive use after counselling.

Contraceptive method	N	Percentage (%)
Abstinence	12	6
Oral contraceptive pills	26	13
Copper T	44	22
Female sterilization	64	32
Injectable progesterone	16	8
Implants	2	1
Male sterilization	0	0
Condoms	36	18

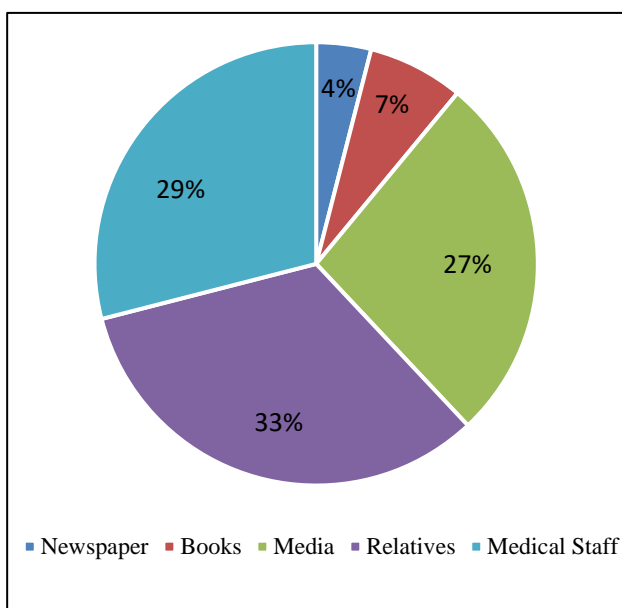


Figure 5: Source of information.

Majority of them learned about contraception from either relative 33%, medical staff 29% or media 27%.

DISCUSSION

Post-partum women are more likely to have an unmet need for family planning due to lack of awareness. Demographic and health surveys (DHS) in 27 developing countries conducted between 1993 and 1996 have demonstrated that during the extended post-partum period, up to a year after delivery, most women wished to delay the subsequent pregnancy for 2-3 years or prevent any further pregnancies altogether. Women with an unmet need for family planning were defined as those who have had a recent delivery, thus presumed to be fecund, and report not wanting any more children at all or wanting to delay the birth of their next child; but not using any method of contraception. It has been suggested that such women should adopt a contraceptive method as early as possible after delivery and before resumption of sexual activity.⁸ Also studies have shown that postpartum and post abortal periods are crucial for a woman as for many patients who

belong to rural areas, this may be the only time she comes in contact with the health personnel. Hence counselling done at this period is very crucial and effective too.

In KIMS hospital, Bangalore mean age of subjects was 26 years. The mean age in present study is 23 years. In the Italian study conducted by Di Giacomo et al, at university of Genova, the mean age is 33 years.⁹ This is comparable to study conducted by Jyotsna Sharma et al at JIMPER, Puducherry, where the mean age is 23.86 years.⁸

The 36% of women were from rural areas and 64% were from urban areas. The key barriers for unmet need in rural areas could be poor spousal communication, sociocultural norms (especially the husband's role as primary decision-maker and the desire for a large family), fear of side effects.

The 41% of women had secondary education, 10% had primary education, 27% had education till higher secondary, 19% had degree and 3% were illiterates.

The 33% of women were from lower class, 51% were from middle class and 16% were from upper class.

The 44% were multipara and 56% were primipara.

There were 84% of women were house wives while 16% were self-employed or had job.

There were 22% of subjects had used contraceptive methods earlier and 78% had not used any contraceptive methods earlier.

Main reason for not using contraception, they wanted to conceive (47%) followed by fears of side effects (29%), no information regarding contraceptive methods (8%), decision of family (5%) and husband staying away (4%).

The 97% of women were aware of at least 1 contraceptive methods, the highest awareness being for female sterilization (91%) followed by Condom (85%), IUCD (81%), OCP's (67%), DMPA (3%), 10% of abstinence and 4% male sterilization

Regarding preferred method of contraception for future use, female sterilization (32%) was the preferred method followed by copper-T (22%). 18% of women preferred condoms. Only 13% preferred OCPs as there is chance of pregnancy if pills are missed and fear of side effects in some. The 6% preferred abstinence, mainly in postpartum period and shift to any above methods as soon as possible or before resuming intercourse. The 8% of women opined their willingness to use 3 monthly progesterone injections. None of the women chose male sterilization as contraception.

Regarding source of information, present study shows 33% from relatives, 29% from medical staff, % from

relatives and 27% from media, 11% from books and newspaper.

In this study there was significant association between patient's education and awareness about contraceptive methods. i.e., Subjects with higher education had better awareness. Highest awareness was seen among subjects with degree and above as education status.¹¹⁻¹⁵

Limitations of the study was short duration of study.

CONCLUSION

Women are aware of contraceptive methods and have knowledge and positive attitude towards use of contraceptive methods, but still women are not practicing contraception. There is wide gap between knowledge and practice of contraception.

After delivery, during immediate post-partum period, maximum women wish for contraception Hence these women can be served by family planning services before discharge from hospital to ensure the acceptance of contraceptive practices among them.

This would curb unwanted pregnancies and its future consequences.

As ours is a male dominant society, many decisions are taken by husband and his parents regarding number of children and spacing in between them. So, there is need to educate both husband and wife together.

Fear of side effects of contraception is the main reason for non-usage. This can be reduced by proper selection of contraception before starting its use and adequate follow up of women using contraception by family planning services

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Ethical approval: The study was approved by the Institutional Ethics Committee

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ANNEXURE

Proforma for collection of data

Demographic data:

Name: Age:
Religion: IP/OP:
Education: S.E.S:
Address:

Obstetric history:

Married life:
Total no. of pregnancies:
Total no. of living children:
Antenatal period / Postnatal period

Assessment tools

1. Is the pregnancy: Planned / Unplanned
2. Are you aware about contraception for child planning: Yes / No
3. If yes-methods of contraception you are aware about: a) Natural method, b) Condom, c) Copper T, d) Intrauterine device, e) Oral contraceptive pills, f) Injection DMPA, g) Emergency contraceptive pill, h) Sterilization
4. Have you ever used contraception: Yes / No
5. Did you use contraception after you last menstrual period: Yes / No
 - a) If yes, was it used regularly: Yes / No
Contraception method used: Natural method, Condom/ Copper T, IUCD, OCP, Inj. DMPA, Emergency contraceptive pill, sterilization, any other
 - b) if no, reason for non usage of contraception:
 - i. Fear of side effects
 - ii. Family related
 - iii. Planning to conceive
 - iv. Partner related
 - v. Any other
6. Was there any side effects from previous use of contraception: Yes / No
 - a) If yes, previous contraception used: Natural method, Condom/ Copper T, IUCD, OCP, Inj. DMPA, emergency contraceptive pill, sterilization
 - b) Nature of adverse effect:
 - i. Pain
 - ii. Increased bleeding
 - iii. Increased white discharge
 - iv. Infection
 - v. Any other
8. Are you willing to use contraception now: Yes / No
 - a) if yes, method of contraception preferred:
9. Which way do you obtain knowledge of contraception?
 - a) News paper
 - b) Books
 - c) Media
 - d) Family
 - e) Friends
 - f) Medical staff