

ASSESSMENT OF AWARENESS AND UTILIZATION OF FAMILY PLANNING METHODS AMONG ELIGIBLE COUPLES OF RURAL FIELD PRACTICE AREA, KORWAR, KALABURAGICHANDRASHEKHAR¹, SANTOSH BIRADAR¹, VINOD S KAMBLE¹, PRATIBHA RAO K^{2*}¹Department of Community Medicine, ESIC Medical College and Hospital, Kalaburagi, Karnataka, India. ²Department of Community Medicine, Mahadevappa Rampure Medical College, Kalaburagi, Karnataka, India.

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ABSTRACT

Objective: The present study was conducted to assess the awareness about the family planning methods and to estimate the utilization of various family planning methods among rural population in Korwar, Kalaburagi.

Methods: This was a community based cross-sectional study conducted in Korwar, a rural field practice area of ESIC Medical College, Kalaburagi district, Karnataka. The data were collected from 210 eligible couples using predesigned semi-structured questionnaire by house-to-house visit. The data collected were entered in MS Excel and analyzed using Statistical Package for the Social Sciences software.

Results: The majority (80%) of the men and women were aware about family planning methods in our study and its utilization was 75.2%. There was a significant association between gender, education, number of living children, and awareness of family planning methods, whereas association between religion, education, and utilization of methods was found to be statistically significant.

Conclusion: Although the awareness regarding family planning is on positive side there is definitely hesitancy noted for the utilization of the same. Awareness activities and practices should be promoted at individual and family level in the community.

Keywords: Awareness, Eligible couples, Family planning, Utilization.

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INTRODUCTION

The World Health Organization defines family planning as "a way of thinking and living that is adopted voluntarily, on the basis of knowledge, attitudes, and responsible decisions by individuals and couples, to promote the health and welfare of family groups and thus contribute effectively to the social development of a country" [1].

Following the International Conference on Population and Development in 1994, there has been an increase in the contraceptive use among almost all countries with initially low levels [2]. India was the first country to launch the national family planning programme in the year 1952; however, according to the recent data in National Family Health Survey (NFHS)-5, the contraceptive prevalence rate among currently married women in India is 66.7% [3,4].

High fertility, early, and repeated childbearing have an adverse effect on the maternal and child health [5]. Thus, family planning not only contributes for the population control, but also has a role in reducing maternal mortality and bringing positive newborn and infant outcomes [6].

The contraceptive prevalence rate in Karnataka among currently married women of reproductive age is 68.2%, much higher than its level in NFHS-4 (52%). However, few methods are still less well known like female condoms, emergency contraceptives and lactational amenorrhoea [7].

As majority of Indian population lives in rural area, there is a need to increase the utilization of family planning methods in such settings. Hence, this study was conducted to assess the awareness of family planning methods and its utilization among eligible couples in Korwar.

METHODS

This was a community-based cross-sectional study conducted in Korwar, a rural field practice area of ESIC Medical College, Kalaburagi district, Karnataka. The contraceptive prevalence rate in Karnataka according to NFHS-5 was 69% [7]; hence, the sample size was calculated using $4pq/d^2$, where

P is prevalence, in our study P is taken as 69%,

Q is $(100-P) = 100 - 69 = 31$

d (Relative precision) as 10%,

Thus, $4 * 69 * 31 / (6.9)^2 = 179$

By considering a non-response rate of 20%, the sample size was rounded off to 210.

After obtaining clearance from the Institutional Ethics Committee, the data were collected using a pre tested, semi-structured questionnaire, around 210 men and women were interviewed by doing a house-to-house visit over a period of 2 months from August to September 2022.

The information was collected regarding sociodemographic details, awareness of various family planning methods, and its utilization. Informed consent was obtained from the participants before the interview. Anonymity and confidentiality of the participants were maintained. The data collected were entered in Microsoft excel and analyzed using Statistical Package for the Social Sciences software version 21, for descriptive statistics and Chi-square test.

RESULTS

The present study was conducted among 210 eligible couples. Nearly half (48.10%) of the study participants belonged to age group of

25–29 years and majority (64%) belonged to Hindu religion. The literacy rate was around 68% and the major occupation was agriculture (52.85%). Nearly 70.40% of the participants belonged to class III and IV of Modified BG prasad classification of socioeconomic status 2022. Around 53% of the couples were married for more than 10 years and majority (87%) of them had either two or more living children (Table 1).

The current study revealed that 172 (82%) eligible couples were aware of contraception and 158 (75.2%) of the study participants were currently using some form of contraceptives. Tubectomy was the most (58%) used method of contraception among the couples, while condoms were used by 26% of them (Table 2). The participants revealed

Table 1: Sociodemographic details of the respondents

Sociodemographic characteristics	Frequency (n=210)	Percentage
Age group (years)		
20–24	21	10.00
25–29	101	48.10
30–34	63	30.00
≥35	25	11.90
Gender		
Male	109	51.90
Female	101	48.10
Religion		
Hindu	134	63.80
Muslim	76	36.20
Education		
Illiterate	67	31.90
Primary	34	16.30
High school	74	35.20
PUC and above	35	16.60
Occupation		
Unemployed	71	33.80
Agriculture	111	52.85
Business	28	13.35
Socioeconomic status		
Class I	21	10.00
Class II	23	11.00
Class III	95	45.20
Class IV	53	25.20
Class V	18	8.60
Duration of marriage		
≤10 years	99	47.00
More than 10 years	111	53.00
No of living children		
1	27	13.00
2	80	38.00
≥3	103	49.00

Table 2: Utilization, sources of information, and access to contraceptive methods among study participants

Contraceptive method (n=158)	Frequency	Percentage
Temporary method		
Condom	41	26
Oral contraceptives	11	7
IUCD	14	9
Permanent method		
Tubectomy	92	58
B. Source of information* (n=210)		
Health personnel (ASHAs, AWWs)	126	60
Family and friends	111	53
C. Access to contraceptive methods* (n=158)		
Govt. Hospital	134	85
Private sources (Private hospital, Over the counter, etc.)	24	15

ASHA: Accredited social health activist, AWW: Anganawadi worker. *Multiple options were allowed

that the ease of availability and cost effectiveness (35%) were the major reasons for selecting their choice of contraceptives. Health personnel such as accredited social health activist and Anganwadi workers (60%), followed by family friends (53%), were the major sources of information regarding contraceptive methods. While majority (85%) of the couples have accessed the contraceptive methods from government hospital, 15% of them have accessed through private sources. While most (98%) of the participants believed that both the husband and wife are responsible for family planning, only 2% felt that males are mainly responsible.

The awareness about family planning methods was higher (88.9%) among participants aged 30–34 years when compared to other age groups. The awareness was also higher among males (88.1%), those belonging to Hindu religion (82.1%) and who had education of high school (91.9%) and above. Couples having 3 or more living children also had higher (93.2%) awareness as compared to those with single or two children. Association between awareness and gender, education, and number of children were found to be statistically significant (Table 3).

The present study shows that utilization of family planning methods was highest (80%) among those aged 35 years and above and it was least (62%) among the age group of 20–24 years. The utilization of contraceptive measures was also higher among Hindus (86.6%) as compared to Muslims, among couples who were married for more than 10 years and who had three or more living children. The association found between utilization of contraceptive methods and religion, education, duration of marriage, and number of children were statistically significant (Table 4).

DISCUSSION

The present study revealed that awareness among 210 eligible couples regarding contraception and family planning methods was 82%. Similar finding was reported in a study by Ramaiah and Jayarama [8], where 81% of rural women had awareness regarding family planning methods. The major source of information regarding contraception were health workers like AHSA and ANMs (60%), which is similar to the findings by Saxena *et al.* [9], where health workers (90.83%) were

Table 3: Association of awareness about the family planning methods with sociodemographic variables

Sociodemographic	Awareness about family planning methods		p-value
	Yes (%)	No (%)	
Age group (years)			
20–24	16 (76.2)	5 (23.8)	0.238
24–29	82 (81.2)	19 (18.8)	
30–34	56 (88.9)	7 (11.1)	
≥35	18 (72)	7 (28)	
Gender			
Male	96 (88.1)	13 (11.9)	0.015
Female	76 (75.2)	25 (24.8)	
Religion			
Hindu	110 (82.1)	24 (17.9)	0.926
Muslim	62 (81.6)	14 (18.4)	
Education			
Illiterate	48 (71.6)	19 (28.4)	0.013
Primary	26 (76.4)	8 (23.6)	
High school	68 (91.9)	6 (8.1)	
PUC and above	30 (85.7)	5 (14.3)	
Number of living children			
1	16 (59.3)	11 (40.7)	<0.001
2	60 (75)	20 (25)	
Equal or >3	96 (93.2)	7 (6.8)	
Total	182	38	

Table 4: Association of utilization of family planning methods with sociodemographic variables

Sociodemographic	Utilization of family planning methods		p-value
	Yes	No	
Age group (years)			
20–24	13 (62)	8 (38)	0.398
24–29	79 (78.2)	22 (21.8)	
30–34	46 (73)	17 (27)	
≥35	20 (80)	5 (20)	
Religion			
Hindu	116 (86.6)	18 (13.4)	<0.001
Muslim	42 (55.3)	34 (44.7)	
Education			
Illiterate	40 (59.7)	27 (40.3)	0.0043
Primary	27 (79.4)	7 (20.6)	
High school	61 (82.4)	13 (17.6)	
PUC and above	30 (85.7)	5 (14.3)	
Duration of marriage (years)			
0–5	21 (58.4)	15 (41.6)	<0.001
5–10	48 (64.9)	26 (35.1)	
10–20	89 (89)	11 (11)	
Number of living children			
1	21 (77.8)	6 (22.2)	0.0085
2	51 (63.8)	29 (36.2)	
Equal or >3	86 (83.5)	17 (16.5)	
Total	158 (75.2)	52 (24.8)	

the main source of information, followed by mass media (75.33%). Other studies have showed that mass media plays a major source of information followed by health workers and social circle like family and friends [10].

The overall contraceptive usage was 75.2% in this study, which is concurrent with the findings in the study conducted by Gupta *et al.* [11], where the prevalence of contraceptive usage was 71.11% among 270 eligible couples. The finding is higher than the contraceptive usage reported in Karnataka in NFHS-5 [3], where 69% of the married women were using any of the contraceptive method.

In the present study, tubectomy was the most used method of contraception followed by condoms, copper T, and oral pills, whereas a study by Vincent and Selvarajan [12] shows that condom (43.4%) was the most used contraceptive method followed by oral contraceptive pill (20.76%), CuT (18.87%), postpartum sterilization (15.09%), and vasectomy (1.89%). Another study showed that intrauterine device was used by majority (33.9%) women, followed by tubectomy and oral pills [8].

According to NFHS-5, in Karnataka, the most common modern spacing methods used by currently married women are condom (4%), followed by the IUD or PPIUD (3%) and pill (2%), similar to the results seen in the present study [3].

The present study shows that awareness about family planning methods was significantly high among males, those who had an education of high school and above and among those who had three or more children. Similar findings were seen in a study by Sherpa *et al.*, [13] where there was a significant association between educational status, occupation, family monthly income, and duration of marriage with the knowledge regarding contraception.

In this study, the utilization of contraceptives was significantly higher among Hindus as compared to Muslims similar to the findings of NFHS-5 [7]. The usage was also higher among those married for more than 10 years, who had three or more children and had an education of high school and above. Similar results were reported by Gupta *et al.*, [11]

where the contraceptive usage was higher among educated women as compared to the uneducated ones. However, contradictory findings were seen in NFHS-5, where contraceptive prevalence decreases with increasing schooling of women [7].

In this study, majority (65%) of the couples accessed the contraceptive methods through government hospital, which is similar to the findings in Karnataka NFHS-5 where a majority (67%) of pill users and more than two-fifths (45%) of condom/Nirodh users get their supply from the public health sector [7].

CONCLUSION

The present study gives an insight into the recent trends of contraceptive awareness and usage among the rural population. As sterilization is the major method used for family planning, there is a need to educate men and women in rural areas regarding spacing methods. Although the awareness regarding family planning is on positive side, there is definitely hesitancy noted for the utilization of the same. Awareness activities and practices should be promoted at individual and family level in the community.

AUTHORS CONTRIBUTION

Study conception and design: Vinod S Kamble, Santosh Biradar, and Pratibha Rao K. Data collection – Pratibha Rao K and Chandrashekhar. Analysis and Interpretation of results: Santosh Biradar and Pratibha Rao K. Draft and manuscript preparation: Pratibha Rao K and Chandrashekhar.

CONFLICTS OF INTEREST

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