

## Study of Awareness of Contraception in Post Partum Women in a Tertiary Care Hospital

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### ABSTRACT

**INTRODUCTION:** India is second most populous country of the world and in next few decades it will cross china if it will keep on increase by this exponential growth. This calls for steps to stabilize India's population. India was the first country in the world to launch the Family Planning Programme in 1951. Despite this fact, India still lags behind in practicing contraception and limiting their family size.

**MATERIALS AND METHODS:** A prospective interview based study was conducted on a sample of 300 post partum women who underwent their deliveries in this hospital in six months duration in the department of Obstetrics and Gynecology, MGM Medical College and Hospital, Jamshedpur. The women were counseled regarding post-partum contraception after assessment of their knowledge and practices. The interview included socio demographic profile of the participants, their awareness for contraceptive methods and reasons for its acceptance/refusal.

**RESULTS:** In our study we observed that only 68 % of the ladies had heard about various methods of contraception. Most patients knew about IUCD & OCPs. Most patients came to know about contraception from television & doctors and other healthcare givers. After proper counseling, 95% patients opted for IUCDs, barrier method ( male condom ) and injection DepoProvera. Only 25 % patients knew about emergency contraceptive pill and 36 % patients had knowledge about MTPill.

**CONCLUSION:** There is a great lacuna in the awareness of contraception, emergency contraception and medical abortion in the women under study. Regular detailed and proper counselling is a must to all postpartum and post-abortal women . Women should be given the cafeteria approach for contraception by providing detailed and comprehensive information about the various methods available and they should be given a choice to choose the method of contraception best suited to their needs, which will help improve the general health of the women and their children.

**KEY WORDS:** contraception, emergency contraception, knowledge, MTPill, post-abortal women, post-partum women

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### I. Introduction

Urological injuries which involve damage to the urinary Current population of India is 1.27 billion according to World Population Datasheet 2013, 17.64% growth rate of India in last decade.<sup>1,2</sup> India is the second most populous country of the world after China.<sup>3</sup> In next few decades India will cross China if this growth rate will keep on increase by exponential growth. Effective contraceptive use during postpartum period can prevent unintended pregnancies and help in birth spacing. Inter pregnancy interval should be more than 24 months according to WHO Guidelines 2005.<sup>2</sup> In India prevalence of contraceptive use is 73%, out of which effective methods used in 46% in the age group of 15-49 years.<sup>7</sup>

Family Planning Programme first launched by India in 1952.<sup>3</sup> India is the first country in the world to launch family planning programmes. Despite of this fact, India is still lag behind in limiting family size and practicing contraception. This was first step taken by India to stabilize population. By this programme India yielded excellent results by decreasing total fertility rate.

Contraception usage in 1965-2009 increased by 48% and total fertility rate decreased by 5.7% to 2.6%.<sup>3</sup> 55 million unintended pregnancies occur every year in developing countries due to no contraception use. 25 million pregnancies occur due to inconsistent or incorrect use of contraception method and contraception failure. Maternal mortality rate would significantly decline by 25-30% by consistent and correct usage of contraceptive method by preventing unintended pregnancies.<sup>8</sup> Evidence shows that short inter-pregnancy interval (<6 months) and increases health risk to mother and newborns and increased maternal morbidity and mortality.

Recent studies shows maternal and infant survival increased by 2-5 times as high, if inter pregnancy level increases. Use of contraceptive method decrease TFR by 2.7% according to national family health survey-3 survey (2005-2006) which corresponds to contraceptive usage (56%) among married women.<sup>9</sup>

## II. Materials And Methods

The present study was a hospital based prospective, observational study. A total of 300 postpartum women (postnatal or post-cesarean) were enrolled for the study and delivered in Department of Obstetrics & Gynaecology at MGM Medical College, Jamshedpur, India. 300 postpartum women were interviewed after taking informed verbal consent, on the basis of prestructured questionnaire. Women were counselled regarding need of postpartum contraception according to cafeteria approach by using interpersonal communication.

## III. Results

A total of 300 eligible postpartum women were included in the study. Mean age of postpartum women was 34.5 years. Majority of them (58.33%) belongs to 25-34 years. Out of them 16336% were illiterate. Family income of majority of women (59%) was <1000 and most of them (75%) belongs to Jamshedpur. Majority of women (73%) had living issues and most of them (63%) were housewives. The main reasons for non-acceptance of contraceptive use were faith or religion (47.2%) followed by desire of more children (38.8%). Frequency of contraceptive use was highest amongst 25-34 years age group. 84.6% women were not discussed with husband (Table 1).

Contraceptive use was significant more in 25-34 years age group compared to 15-24 years and 35-45 years age group (p=0.000) (Figure 1).

There was significant difference in contraceptive use between religions (p=0.000) (Figure 2).

Characteristics		N=300	Percentage
Age in years	18-24	65	21.66
	25-34	175	58.33
	35-44	60	20
Parity	One live issue	111	37
	More than one live issue	189	63
Socio- economic class	Upper (I)	55	18.33
	Upper Middle (II)	59	19.66
	Lowe Middle (III)	125	41.66
	Upper Lower (IV)	45	15
	Lower (V)	16	5.33
Education	Professional or Honours	23	7.66
	Graduate or Post graduate	24	8
	Intermediate or post high school diploma	38	12.66
	High School certificate	45	15
	Middle school Certificate	85	28.33
	Primary school Certificate	35	11.66
	Illeterate	50	16.66
Occupation	House wife	189	63
	Employed	111	37

**Table 1: Sociodemographic profile of Participants**

Method of Contraception	N=300 (Percentage)
IUCD	245 (81.66)
Barrier method	230 (76.66)
Oral contraception pills (POP)	156 (52)
DMP	145 (48.33)
Lactational amenorrhea	7 (2.33)
Safe method	4 (1.33)
Sterilization	257 (85.66)
More than contraception	110 (36.66)

**Table 2: Distribution of various methods of contraception among aware participants.**

Method of Contraception	N=300 (Percentage)
IUCD	120 (40)
Barrier method	50 (16.66)
Oral contraception pills (POP)	47 (15.66)
DMP	45 (15)
Sterilization	56 (18.66)
No Method	46 (15.33)

Table 3: Distribution according to post counseling choice of contraception.

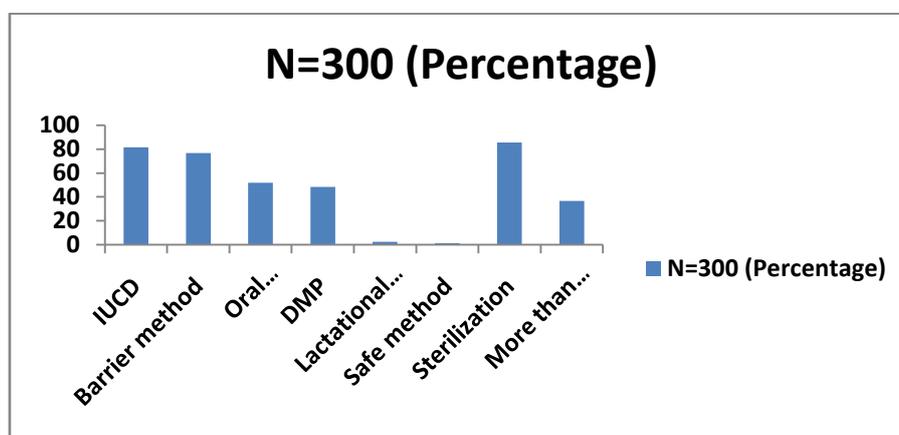


Figure 1: Contraceptive use in various age groups

#### IV. Discussion

The 300 women enrolled in our study 55.69% were aware about various methods of contraception compared to 69% from Thapa S et al and 70% Sharma J et al.9,10

In present study, the higher educational status of the women and Upper socioeconomic class were significant predictors of higher level of knowledge about spacing contraception. Association of higher education status with knowledge of spacing contraception has been observed by other Hayat et al and Patro BK et al in their studies.11,12 Among the aware women, IUCD was known to 81%, sterilization to 91%, Oral contraceptive pills to 30%, barrier method to 42%, lactational amenorrhea to 1%, Depo-Provera to 17% and safe method was known to 1%. Kaushal SK et al showed awareness around 92.5% for IUCD, 97.1% for pills OC, 8.6% for DMPA.13 Brahm et al observed 76% for barrier,53% for IUCD,63% for O. C. pills.14

In present study, main source of information was noted to be health care system (45%) and mass media (36%), family members (22%) and ASHA (7%) which is in contrast to Hayat et al where, media was found to be the most common source of information.

#### V. Conclusion

Thus, in conclusion, there is lack of awareness of contraception in post-partum women. Our study reveals that education level and socioeconomic status are the major limiting factors in accepting family planning methods. There is a need for proper promotion of spacing methods by policy makers and field workers and motivation of couples to accept them.

The present study recommends to strengthen IEC activities and Family planning services to be provided in Antenatal counseling specially in presence of husband for making decision of contraception in post-partum period and implementing it in immediate post-partum period before discharge of women from the hospital so as ensure the contraceptive acceptance and its use among them.

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