

SHORT ARTICLE

Contraceptive usage and awareness among postpartum mothers in urban field practice area of a tertiary hospitalTanvir Kaur Sidhu¹, PPS Coonar²¹Associate Professor, ²Professor & HOD, Department of Community Medicine, Adesh Institute of Medical Sciences & Research, Bathinda[Abstract](#)[Introduction](#)[Methodology](#)[Results](#)[Conclusion](#)[References](#)[Citation](#)[Tables / Figures](#)**Corresponding Author**

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Abstract

Background: To study contraceptive usage and awareness among postpartum mothers. **Objective:** To assess prevalence of postpartum contraception and factors affecting the usage of contraceptives in Urban area. **Material and Methods:** A cross-sectional descriptive study was carried out in the Urban Field practice area of Adesh Institute of Medical Sciences & Research, Bathinda. All females who delivered within last one year were included in the study. A pre-structured questionnaire was used to collect socio-demographic and other details. A total of 92 females were included. The appropriate statistical analysis was done to present the results. **Results:** 30.4% females had adopted one or the other postpartum contraceptive measure. Condom was the most common method used. Usage of postpartum contraception was significantly associated with women's and husband's education, type of delivery and availing of antenatal and postnatal visits. The main reason for not using postpartum contraception was lack of knowledge and access. 16.3% females had unmet need of postpartum contraception. **Conclusions:** Overall usage of postpartum contraception was low and mainly related to lack of awareness and knowledge.

Key Words

Postpartum contraception; prevalence; unmet need; factors; urban area; usage

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. (1) Closely spaced pregnancies within first year postpartum are the riskiest for both mother and baby and lead to poor outcomes for both. (2) According to an analysis of Demographic and Health Survey data from 27 countries, 65% of women who are 0-12 months postpartum want to avoid pregnancy in the next 12 months but are not using contraception. (3) According to NFHS-2005-06 in India, the unmet need

for family planning in currently married women of reproductive age group is 13%.⁽⁴⁾

Many reasons like unsatisfactory services, lack of information, fears about contraceptive side effects, non-support from spouses and family etc. are cited as reasons for non-use of contraceptives in postpartum period.⁽⁴⁾

Aims & Objectives

1. To estimate prevalence of contraceptive usage among postpartum females in the urban field practice area.
2. To assess the level of awareness and reasons for non-usage of contraception.

Material and Methods

A cross-sectional, observational study was conducted in the Urban Field Practice Area of AIMSRS, i.e. situated in Bhucho Mandi. This study is a part of larger study to assess the maternal and child health care utilization in this area. Ethical approval was taken from the institution before the start of the study. (*IEC certificate attached*)

A house to house survey was conducted and all currently married women aged 15-49 years who had delivered a child within Jan 2013-Dec 2013 were interviewed. A pre-tested structured questionnaire was used for data collection. An informed consent was obtained from all females before filling the questionnaire.

A total of 92 mothers were interviewed. The proforma included the socio-demographic profile of the family, age, caste, income, education, type of family, occupation and postpartum contraceptive prevalence, awareness, source of information and reasons for not using any method. Postpartum contraception was defined as use of any family planning method by a woman within one year of delivery.

Statistical analysis was performed using Microsoft excel. Frequencies and Percentages were calculated. Tests of significance (chi-square) was applied to find association. $p < 0.05$ was considered as significant.

Results

A total of 92 mothers were included in the study and interviewed. Mean age of study sample was 29.93 years.

Out of 92 women who were interviewed only 28(30.4%) used postpartum contraception.

Significant association was found among contraceptive use and educational status of mothers and husbands, institutional deliveries and antenatal and postnatal visits.

Out of 64 not using contraceptives 15 wanted to use but due to one or the other above stated reasons were unable to use, therefore can be assumed as having unmet need for family planning(16.3%).

Discussion

The postpartum contraceptive use observed in the study was 30.4%. Singh *et al* reported postpartum contraceptive usage to 33% in urban areas. (5) Mahmood *et al* reported 13.8% for rural Baraieilly (6) and Goel *et al* reported 28% for rural UP.(7) The current use of different methods of Family planning

among currently married women and sexually active unmarried women has been given by NFHS-3 (2005-06) as 56% for India and 61.7% for Urban Punjab.(4) CPR is 11% pts higher in urban than in rural India. This difference is probably due to more availability of health services and knowledge through mass media in Urban areas.

Among those using contraceptives 71.4% used condoms while 10.6% had got permanent sterilization. Few used other modern methods and natural ones. Condom use was maximum as also reported in the studies by Singh KK, Mahmood and Goel *et al*. (5, 6, 7). The reasons for not using contraceptives were mainly lack of knowledge, breastfeeding, lack of access to services and fear of side effects. Similar reasons were also cited by Singh and Mahmood. (5, 6)

Maternal age, SES, type of family, caste, birth order and age of marriage were not significantly associated with acceptance or non-acceptance of contraceptives. However knowledge increases with increase in age i.e. less in <18 yrs. Similar observations were reported by Agampodi *et al* (2009) (8) and Mahmood *et al*. (6)

It was observed in this study that education of mother and of husband significantly affected the usage of contraceptives. The finding was supported by earlier studies. (9, 10)

If the delivery was institutional and antenatal visits and postnatal visits were received by the female, it was more likely that she is a postpartum contraceptive user as compared to those delivered at home and not receiving any AN or PN visits by health workers. Highly significant association was reported with use of health care services and postpartum contraceptive use. This can be attributed to family planning advice given by health workers to the females during antenatal, natal and postnatal period. Similar association was reported by Singh, Mahmood, Barber and Ekabua. (5, 6, 11, 12) Antenatal period is more appropriate to motivate a female to accept postpartum contraception than postnatal period. So this period should be adequately utilized for postpartum contraceptive counselling. (12, 13)

Those females who were not using contraceptive methods but were willing to use was calculated at 16.3%. The unmet need for family planning for India has been reported at 13 % in the currently married women of reproductive age group according to NFHS-3 and for Punjab is 7.3%. (4) These were mostly

those females who had minimal contact with the health system and mostly had home deliveries. According to Ross and Winfrey (2001), "Prenatal visits, delivery services and subsequent health system contacts are promising avenues for reaching postpartum women with an unmet need for and a desire to use family planning services." (3)

The need of the day is to improve the knowledge, awareness and access to postpartum contraception among females. Although it is affected by a multitude of socio-demographic factors but the burden of improvement lays on the health sector. This can be achieved only by increased utilization of maternal and child health services through primary health care.

Conclusion

The usage of postpartum contraception was low and was significantly affected by the education of the mother and the husband and the usage of the antenatal and postnatal services availed.

Recommendation

Increase in prenatal visits, delivery services and subsequent health system contacts shall improve awareness and thus decrease the unmet needs of postpartum contraception and increase family planning usage.

Limitation of the study

Limited to urban set up.

Relevance of the study

Earlier studies assess the unmet needs of contraception only in married couples. Here we have attempted to exclusively measure it for postpartum period which is commonly neglected.

Authors Contribution

Both the authors were involved in conceptualization and carrying out the study as well as the writing part.

Acknowledgement

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Tables

TABLE 1 FACTORS AFFECTING USAGE OF POSTPARTUM CONTRACEPTIVES

Characteristics		No. of mothers (92)	Users (28)	Non-users (64)	Chi-square value	df	p-
Age of mother	18-24	35	10	25	2.21 (2)	0.331	ns
	25-34	30	12	18			
	35-49	27	6	21			

SES	Upper	10	3	7	0.154 (2)	0.992	ns
	Middle	50	15	35			
	Lower	32	10	22			
Type of family	Nuclear	50	18	32	1.60 (1)	0.206	ns
	Joint	42	10	32			
Caste	General	62	20	42	0.299(1)	0.585	ns
	SC/ST/OBC	30	8	22			
Birth order	Upto 2	70	18	52	3.08 (1)	0.079	ns
	3 and above	22	10	12			
Age at marriage	<18 yrs	10	2	8	0.577(1)	0.447	ns
	>18 yrs	82	26	56			
Education of mother	Illiterate	60	5	55	39.8(1)	0.00	hs
	Literate	32	23	9			
Education of husband	Illiterate	52	10	42	7.09(1)	0.008	hs
	Literate	40	18	22			
Type of delivery	Home	42	5	37	12.5(1)	0.000	hs
	Institutional	50	23	27			
Antenatal health visits	No	30	3	27	8.78(1)	0.003	hs
	Yes	62	25	37			
Postnatal health visits	No	36	4	32	10.4(1)	0.001	hs
	Yes	56	24	32			

TABLE 2 TYPES OF CONTRACEPTIVES USED

Type of contraceptive used	n =28(100%)
Condoms	20 (71.4%)
Permanent	3 (10.6%)
Pills	2 (7.2%)
IUCD	2 (7.2%)
Natural	1 (3.6%)
Inj./implants	0 (0%)

TABLE 3 REASONS FOR NON USAGE

Reasons for not using any method	n =64 (100%)
Lack of knowledge	22(34.4%)
Is breast feeding	11(17.2%)
Lack of access	10(15.6%)
Fear of side effects	7(10.9%)
Want more children	5(7.8%)
Lack of money	1(1.6%)
Any other	5(7.8%)