

## ORIGINAL ARTICLE

## Study of family planning practices with special reference to unmet need among married women in rural area of Amravati district of Maharashtra

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### Article Cycle

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### Abstract

**Background:** At present various active programmes on family planning are running over the few decades but considerate number of people yet not motivated to adopt the family planning in their practical life. The study was conducted to find out the unmet need of family planning among the married woman of reproductive age in a rural area. **Methods:** Study design: Cross-sectional type of descriptive study. **Settings:** The study was conducted at Rajurwadi village under Primary Health Unit. **Subjects:** All the married women of reproductive age, residing in a selected village of Primary Health Unit were selected as the study subject. **Results:** It was revealed from the present study that 27.7% of the respondents had unmet need for family planning. The reasons for unmet need were lack of knowledge, health concerns & Religious belief. **Conclusion:** Social correlates like age, religion & literacy sta-tus influenced the unmet needs of family planning. Good quality services and access to convenient methods are important to meet unmet need.

### Key Words

Family Planning; Contraceptive Methods; Unmet Needs; Married Women; Rural

### Introduction

Many of the women of reproductive age and their partners are sexually active and prefer to avoid becoming pregnant, but they are not using any contraceptive method. These women are considered to have unmet need of family planning (1) Though the fertility rate has decreased to 2.76 from six since 1960, it is still above the replacement level but this still leaves fertility about 50 percent above the replacement level. These further fertility declines will almost certainly be achieved by

additional increases in the practice of contraception.

It poses a challenge to family planning programme of reaching and serving millions of women whose reproductive attitudes resemble those of contraceptive users but who, for some reason or combination of reasons, are not using contraception. (2)

The National Family Health Survey-3 data showed contraceptive prevalence in India as

56.3% and unmet need as high as 12.8% including 6% for spacing. (3)

Socio-cultural and behavioral factors are associated with decision to use and continuation of contraceptive methods and reasons for discontinuation of contraceptives. (4) The concept of unmet need was developed by Westoff in 1978 and has been refined several times. (5)

Unmet need is a valuable indicator for national family planning programmes because it shows how well they are achieving a key mission: meeting the population's felt need for family planning. (6) Researchers estimate that the lives of 150,000 women could be saved each year worldwide with access to sufficient family planning. An estimated 150 million women worldwide want to delay or avoid pregnancy but are not using family planning methods. (7) Most of the married women want to use the contraceptive methods but are unable to use because of lack of knowledge, economical problem, fear of side effects, religious cause, and insufficiency of family planning worker, uncooperative husband and limited supply and high cost. (8)

In 2006, unmet need for family planning was added to the 5th millennium development goal (MDG) as an indicator for tracing process on improving maternal health. (9) Family planning can reduce maternal mortality by reducing the number of pregnancies, number of abortions and the proportion of births at high risks. It can help to reduce infant mortality, slow the spread of HIV/ AIDS, promote gender equality, reduce poverty, accelerate socio-economic development, women empowerment and promote the environment. (10)

At present various active programmes on family planning are running over the few decades but considerable number of people yet not motivated to adopt the family planning in

their practical life. The study was conducted to explore the determinants and proportion of unmet need among married women of a selected rural area.

### Aims and Objectives

1. To find out the unmet need of family planning among the rural women.
2. To explore the obstacles to use of family planning methods.

### Methods

This is a cross-sectional type of descriptive study. The study was conducted at a selected village of Rajurwadi Primary Health Unit (PHU) under Rural Health & Training Centre (RHTC) Ner Pinglai of Amravati district. The duration of the study was from July 2012 to November 2012.

The married women of reproductive age, residing in a selected village of Primary Health Unit were selected as the study subject. Sample size was 238. Sample was taken as per the total population of selected Primary Health unit were 6300 out of that 19% was selected as per population under reproductive age group (Text book of preventive and social medicine 22nd edition) it comes 1197 out of that 20% were selected i.e. 238. (for representative sample size ideally it should be at least 10 % of total so we have taken 20% )

Data were collected by face to face interview of the respondents by using interviewer administered questionnaire. It was duly pre-tested among married women of reproductive age. Considering the objectives, questionnaire was formed consisting both open and close ended questions.

### Definition of unmet need:

In this formulation the unmet need group included all fecund women who are married or

living in union— and thus presumed to be sexually active—who were not using any method of contraception and who either did not want to have any more children or wanted to postpone their next birth for at least two more years. Those who wanted to have no more children are considered to have an unmet need for limiting births, while those who wanted more children but not for at least two more years are considered to have an unmet need for spacing births. (11)

Selected married women were interviewed through house to house survey method. To ensure active support & participation of the subject, the objectives of the study were explained to them and verbal consent was sought out. The data was collected regarding socio-demographic profile, age of marriage, number of children ever born,

Child loss etc. The subjects were also interviewed about their knowledge of contraceptive methods, past and current use of contraceptives and their intention to use contraceptives in future. Lastly the reasons for current nonuse of family planning methods were collected. The data collected was analyzed using SPSS 16.0 version.

Chi-square test were applied to interpret the result.

## Result

A total of 238 married women of reproductive age were included in this study. About half of the respondents (53.8%) were in the age group of 21-25 years with mean 28.6 years (SD± 7.02 years). About a quarter (26.1%) of the respondent had completed primary education, (31.1) % had completed middle & Secondary education while 8.4% were illiterate. About (65.6%) were Hindu, (19.3%) were Muslim and (15.1%) They were from other religion. ([Table-1](#)).

Most of them (95.8%) had knowledge about contraceptive methods. 45.5 % respondents were used one or more contraceptive methods. Nearly three quarter (72.3%) of the respondents was using contraceptives and rest was not using any method. Most commonly used contraceptive methods were oral contraceptive pills 43% and condom 31% ([Table 2](#)).

The reasons for unmet need were 12.1% health concerns & side effect, 15.2% inadequate information about family planning methods, 18.2% Religious belief & Opposition from husbands, families and communities. ([Table 3](#))

[Table-4](#) showed that use of contraceptive was higher among respondents with increase level of education .It was found to be statistically significant ( $p < 0.001$ ).

## Discussion

This descriptive cross sectional study was done to find out the unmet need of family planning among the married woman of reproductive age living in a rural area.

Overall unmet need for family planning was 27.7% in the present study. This showed that there was greater demand for family planning, which has to be targeted to achieve a higher contraceptive usage to decrease the net reproduction rate to less than 1.

The findings of National Family Health Survey-3 (2005–2006) indicate the overall unmet need for family planning in India is 12.8%. (12) which is less than the findings of the present study. But the findings of the present study did not corroborate with the findings of Bhattacharya et al (13) where unmet need was quite high (41.67%), such difference may be due to the fact that present study was community based compared to earlier one was clinic based study.

Study by Srivastava Dhiraj Kumar found that unmet needs for family planning were more among residents of rural area (30.45%) (14)

According to the NFHS-3 reports, 4.1 % of the currently married women in India reported fear of side effects and health concerns as the reason for not using contraceptive methods and 1.7 % are not using any contraceptives because of their husband's opposition. In case of 26% of the mothers, the reason of unmet need was lack of information.

In case of 25.25% of mothers, concerns about health and contraceptive side effects were responsible for the unmet need. In 12% of mothers, the reason for unmet need was opposition from husband, families and communities. Same findings had been found by Cleland et al (15) & Trusell James (16).

This showed the influence of husbands in decision making regarding the fertility of their wives. 9.25% of the mothers thought that they were uncertain about child bearing. (17)

## Conclusion

Majority of the respondents were using contraceptive methods, but a significant number of women were in the group of unmet needs. Social correlates like literacy status influenced the unmet needs of family planning. The reasons for unmet needs as identified were lack of awareness/information, fear of side effects, unwillingness from husband & other family members, inconvenient time and irregular supply of contraceptives which can be looked into in order to reduce the unmet needs for family planning.

## Recommendation

1. Family planning programme should emphasize on communication and good counseling to the women.

2. Focusing on men as well as women is crucial to meet unmet need as husband often influences his wife's reproductive attitudes and determines whether she is to use contraceptives or not.

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## Tables

**TABLE - 1 DISTRIBUTION OF WOMEN ACCORDING TO SOCIO-DEMOGRAPHIC FACTORS**

Age In Years:	No. n-238
15---20	40 (16.8)
21---25	128 (53.8)
26---30	54 (22.7)
31---35	10 (4.2)
36 & ABOVE	6 (2.5)
Religion:	
Hindu	156 (65.6)
Muslim	46 (19.3)
Others (Buddhist And Christian)	36 (15.1)
Educational Status:	
Illiterate	20 (8.3)
Primary (1st to 4th standard)	62 (26.1)
Middle (5th to 7th Standard)	74 (31.1)
Secondary (8 to 10th Standard)	74 (31.1)
College & above ( 11th standard and above)	8 (3.4)

Figures in parenthesis indicates percentage

**TABLE - 2: DISTRIBUTION OF RESPONDENTS ACCORDING TO CURRENTLY USING ANY CONTRACEPTIVE METHODS**

Types of Contraceptive Method using	No.
Oral contraceptive pills	74 (43)
Cu-T	44 (25.6)
Condom	54 (31.4)
Total	172 (100)
Unmet need	%
Unmet need for spacing	12.6%

Unmet need for limiting	15.1%
Total unmet need	27.7%

**TABLE - 3: REASONS FOR UNMET NEED**

Reasons for unmet need:	No
Religious belief	12 (18.2)
Opposition from husband & family members	12 (18.2)
Inadequate information	10 (15.2)
Inconvenient	8 (12.1)
Side effects	8 (12.1)
Lack of Knowledge	6 (9.1)
Uncertainty about child bearing	6 (9.1)
Difficult access methods	4 (6)
Total	66 (100)

**TABLE - 4: RELATION OF CURRENT USE OF CONTRACEPTIVE METHOD WITH EDUCATION OF STUDY WOMEN**

Education Status	Currently using contraceptive method		Total
	Yes	No	
Illiterate	6 (3.48)	14 (21.2)	20 (8.40)
Primary	38 (22)	24 (36.3)	62 (26.05)
Middle	56 (32.55)	18 (27.2)	74 (31.09)
Secondary and above	72 (41.8)	10 (15.15)	82 (34.45)
Total	172 (72.26)	66 (27.74)	238 (100)

Figures in parenthesis indicates percentage