Original Research Article

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Attitude of couples towards family planning practices in the field practice area of Prathima Institute of Medical Sciences, Karimnagar

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ABSTRACT

Background: Uncontrolled population growth has been a problematic issue all over the world. Knowing the women's and their husband's awareness and attitude towards family planning may help us to intervene so that the practice can be increased. This might ensure the right of women to have child as they wish and later reduce unwanted pregnancies and abortions. Hence the present study is concerned with evaluation of attitude of couples towards family planning.

Methods: A cross - sectional study was conducted during February 2013 - January 2014 among the couples residing in the field practice study areas. A semi-structured questionnaire consisting attitude of respondents regarding various aspects of family planning was administered to 406 couples of the study area.

Results: It has been observed that the females had higher positive attitude scores (16.04 ± 3.641) than males (13.85 ± 4.605) and was statistically significant (p=0.000). Urban residents showed higher positive attitude scores (17.75 ± 2.873) compared with rural (12.14 ± 3.582) and difference was statistically significant (p=0.000).

Conclusions: One of the promising findings of the study is, the majority of respondents showed a positive attitude towards contraceptive use. Female respondents and urban population showed more favorable attitude as compared to males and rural population respectively. There is need to target these population for health education interventions in order to achieve the desirable practices.

Keywords: Attitude, Family planning, Rural, Urban, Male, Female

INTRODUCTION

Uncontrolled population growth has been a world -wide problematic issue, hence family planning is necessary to check such high unprecedented population growth. According to the United Nations Population Funds Activities, family planning is a recognized basic human right and enables individuals and couples to determine the number and spacing of their children. WHO defined that family planning allows individuals and couples to anticipate and attain their desired number of children and the spacing and timing of their births which can be achieved through the consistent use of contraceptive methods. A woman's ability to space and limit her pregnancies has a direct impact on her health and well-

being as well as on the outcome of each pregnancy. Child bearing and contraceptive use are among the most important reproductive health decisions that many have to make.³ Family planning has been applied to solve the problem of these unwanted pregnancies, thereby contributes to reducing maternal and newborn morbidity and mortality and transmission of HIV.⁴

The term attitude means a psychologically held understanding, premise or proposition about the world that are felt to be true which implies that a belief is an individual's perception of what s/he considers true, it does not need to be supported by other people.⁵ It is essential for effective family planning regarding the attitudes of couples towards fertility regulation, access to

the means of fertility regulation and spousal communication about desired family size and timing of pregnancy. Women attitude towards family planning are likely to differ as they develop this attitude through different sources. Studies have suggested a strong relationship between the woman attitude and actions. Furthermore, their attitudes have a significant influence on the behavior, concept, understanding and acceptance of family planning.

However, there has been a growing recognition of men's involvement in family planning and contraceptive usage in the recent years, given the fact that fertility decisions should be conjointly taken by men and women together. Men's attitude is much more important in the adoption of temporary methods of contraception and also in limiting the family size. Hence, there is an urgent need to understand the level of knowledge, attitude and practice of couples towards family planning and the extent they feel any responsibility in family formation and reproductive health. Knowing the women's and their husband's awareness and attitude towards family planning may help us to intervene so that the practice can be increased. Hence the present study is concerned with evaluation of attitude of couples towards family planning in the field practice areas.

METHODS

A community based cross-sectional study was conducted during February 2013 - January 2014 among the couples residing in both urban and rural field practice areas of the Department of Community Medicine. The Rural Health Training Center (RHTC) is located at Vutoor and the serving area includes four villages (Vutoor, Pachnoor, Veldhi and Vegurapally) of total population 11,258. As per the village health survey, conducted by RHTC, a list of all eligible couple (1980) in the area was prepared and by using systematic random sampling, every 4th couple was selected for study. Urban Health Training Center (UHTC) of the department (Total population 12,200), located in Katta Rampur was selected for the study of urban participants. As per the previous survey, a list of about 2,168 eligible couples were obtained and based on the sample size by using systematic random sampling, every 5th couple was selected for the study. The sample size for this study was calculated to be 812 (203 couples) each were selected from both areas, using the formula n=z $\alpha 2$ p (100-p)/ $\epsilon 2$ considering the estimated prevalence of use of contraceptive methods (60%) and the margin of error on p (put at 5%) with 10% nonresponse rate. A semi-structured questionnaire was used to gather data. The study protocol was approved by the institutional ethics committee of the institute. Data was analyzed by using Epi Info Version 7 and statistical measures obtained were numbers, percentages, mean values and standard deviation. The unpaired t test was used to evaluate the difference in the mean attitude scores in the context of gender and place of residence among the respondents in the study area.

RESULTS

In the present study, Table 1 shows the attitude of respondents towards family planning. Among 812 respondents studied, majority 710 (87.4%) of them have a positive attitude towards small family as a happy family, while 431 (53.1%) agreed that family planning helps to become responsible parents. A total of 485 (59.7%) have a favorable attitude that family planning helps in improving the standard of living and 535 (65.9%) said that practicing family planning allows the couple to prepare for children. Regarding pregnancy, about 479 (59%) and 574 (70.7%) have a positive attitude that pregnancy must be properly planned and pregnancy too closely spaced should be avoided respectively. Regarding the health of mother and children majority of them, i.e., 527 (64.9%) and 495 (61.0%) were in favorable attitude towards child spacing. A maximum of 448 (55.2%) of respondents were having a positive attitude and belief that practicing family planning will create a better society. Similarly 497 (61.2%) said that religious doctrine shouldn't be linked with family planning and 419 (51.6%) agreed to encourage other community members to use contraceptives. The majority of them 641 (78.9%) were in a favorable attitude that modern contraceptives are more effective than traditional methods, while 484 (59.6%) said that use of contraceptives will not interfere with sexual relationship. Only 119 (14.7%) said that fertility return after IUDs removal and majority 586 (72.2%) agreed that couples should undergo permanent family planning method after 2nd child. A total of 456 (56.2%) said that Family planning should be planned and discussed by both husband and wife and 427 (52.6%) agreed that support from husband is important to determine the importance of the family planning program. A total of 411 (50.6%) said that family planning practices will help in gaining confidence between husband and wife and spouses who care for each other will practice family planning was told by 397 (48.9%) (Table 1).

The Table 2 revealed the mean attitude scores of the respondents towards family planning in the context of gender. In general, females showed higher positive attitude scores in most of the domain compared with males. The mean attitude score in the domain of family wellbeing and family planning among females was 2.91±0.956 and in males it was 2.42±1.0340. The difference in the mean score is statistically significant (p=0.007). Similarly, in attitude towards health benefits of family planning, mean score was 3.69±1.128 in females and 2.71±1.369 in males with significant difference (p=0.000), attitude towards societal values $(1.85\pm1.021 \text{ vs. } 1.50\pm1.086, p=0.002)$, attitude towards Men's involvement (2.32±1.195 vs. 1.89±1.347, p=0.003). The total attitude score towards family planning among females was 16.04±3.641 and in males it was 13.85±4.605, the difference in the mean score was statistically significant (p=0.000).

Table 1: Attitude of respondents towards family planning.

	Variables		Number	Percentage (%)
	Small family is the homey family	Yes	710	87.4
Towards family well-being and	Small family is the happy family	No	102	12.6
	Family planning helps to become responsible parents	Yes	431	53.1
		No	381	46.9
	Comile planning halps in improving standard of living	Yes	485	59.7
family planning	Family planning helps in improving standard of living	No	327	40.3
ranniy pianining	Practicing family planning allows the couples to	Yes	535	65.9
	prepare for children	No	277	34.1
	Pregnancy must be properly planned	Yes	479	59.0
		No	333	41.0
	Pregnancy too closely spaced should be avoided by	Yes	574	70.7
	family planning methods	No	238	29.3
	Emile de de la deservata de la dela dela dela dela dela dela de	Yes	524	64.5
Towards health	Family planning helps the mother to regain strength	No	288	35.5
benefits of family	Child spacing protects the health of the mother	Yes	527	64.9
planning	Cliffd spacing protects the health of the mother	No	285	35.1
1 6	Child spacing protects the health of children	Yes	495	61.0
	Clind spacing protects the health of clindren	No	317	39.0
	Practicing family planning will create a	Yes	448	55.2
	better society	No	364	44.8
	Religious doctrine shouldn't be linked	Yes	497	61.2
Towards societal	with family planning	No	315	38.8
values	I encourage other community	Yes	419	51.6
	members to use contraceptives	No	393	48.4
	Modern contraceptive methods are more	Yes	641	78.9
	effective than traditional methods	No	171	21.1
	Use of contraceptive method will not	Yes	484	59.6
	interfere sexual relationship	No	328	40.4
	Oral pills are easy to consume	Yes	362	44.6
	Oral pills are easy to consume	No	450	55.4
	IUDS follow–up is important after insertion Fertility return after IUDS removal	Yes	124	15.3
		No	688	84.7
		Yes	119	14.7
Towards various		No	693	85.3
methods	Condoms are easy to use and discard	Yes	454	55.9
		No	358	44.1
	A permanent method of family planning is safe	Yes	568	70.0
		No	244	30.0
	Couples should undergo permanent family planning	Yes	586	72.2
	method after 2nd child	No	226	27.8
	After tubectomy women can perform her daily activity	Yes	488	60.1
		No	324	39.9
	It is common misbelieve that vasectomy causes	Yes	478	58.9
	impotency. Family planning should planned and discussed both husband and wife	No	334	41.1
		Yes	456	56.2
Towards men's involvement		No	356	43.8
	Support from a husband is important in family planning	Yes	427	52.6
	programs Family planning practices will help in coining	No	385	47.4
	Family planning practices will help in gaining confidence between husband and wife	Yes No	411 401	50.6 49.4
			415	51.1
	Spouses who care for each other will practice	Yes No	397	48.9
Total	family planning	INO	812	100
Tual			012	100

Table 2: Mean attitude scores of respondents towards family planning in the context of gender.

Variables	Gender	Mean±S.D	P value
Attitude towards femily wellbeing and femily planning	Female	2.91±0.956	0.007
Attitude towards family wellbeing and family planning	Male	2.42±1.034	0.007
Attitude towards health honofits of femily planning	Female	3.69±1.128	0.000
Attitude towards health benefits of family planning	Male	2.71±1.369	0.000
Attitude towards societal values	Female	1.85±1.021	0.002
Attitude towards societal values	Male	1.50±1.086	0.002
Attitude towards method related	Female	5.27±1.602	0.271
Attitude towards method related	Male	5.33±1.622	0.271
Attitude towards men's involvement	Female	2.32±1.195	0.003
Attitude towards men s involvement	Male	1.89±1.347	0.003
Total attitude scores towards family planning	Female	16.04±3.641	0.000
Total attitude scores towards family planning	Male	13.85±4.605	0.000

Unpaired t test=45.753; p=0.000.

Table 3: Mean attitude scores of respondents towards family planning in the context of place of residence.

Variables	Place of residence	Mean±S.D	P value
Attitude towards femily wellhoing and femily planning	Urban	2.98±0.873	0.000
Attitude towards family wellbeing and family planning	Rural	2.34±1.065	0.000
Attitude towards health honofits of family planning	Urban	3.86±1.037	0.000
Attitude towards health benefits of family planning	Rural	2.54±1.289	0.000
Attitude towards societal values	Urban	2.12±0.827	0.000
Attitude towards societai values	Rural	1.24±1.100	0.000
Attitude tomoude meethed veleted	Urban	6.13±1.307	0.011
Attitude towards method related	Rural	4.47±1.453	0.011
Additurda damanda manija imrahamand	Urban	2.65±1.259	0.000
Attitude towards men's involvement	Rural	1.56±1.073	0.000
Total attitude seems towards family planning	Urban	17.75±2.873	0.000
Total attitude scores towards family planning	Rural	12.14±3.582	0.000

Unpaired t test=19.388 p=0.000.

It has been observed from the Table 3 that in general, there was a marked difference in attitude scores in urban and rural areas. Urban residents showed higher positive attitude scores in most of the domains compared to rural. The mean attitude score in the domain of family wellbeing and family planning among urban residents was 2.98±0.873 and in rural it was 2.34±1.065. The difference in the mean score is statistically significant (p=0.000). Similarly, in attitude towards health benefits of family planning mean score was 3.86±1.037 in urban and 2.54±1.289 in rural with significant difference (p=0.000), attitude towards societal values (2.12±0.827) vs. 1.24±1.100, p=0.000), Attitude towards method related (6.13±1.307 vs. 4.47±1.453 p=0.01), attitude towards Men's involvement (2.65±1.259 vs. 1.56±1.073, p=0.000). The total attitude score towards family planning among urban resident was 17.75±2.873 and in rural resident it was 12.14±3.582. The difference in the mean score was statistically significant (p=0.000).

DISCUSSION

The study 'attitude of couples towards family planning' was carried with an aim to assess and compare the attitude of respondents toward family planning measures, in the two ecological settings of Karimnagar district. Awareness about contraception can be an important predictor of its intended use. Oni et al found that increase in knowledge of contraceptives has been accompanied by the increased use of contraception especially an increase in current use.8 In present study subjects unaware of contraceptives were less likely to use contraception.

The majority, 87.4% of the respondents have a positive attitude towards small family as a happy family while a total of 59.7% have a favorable attitude that family planning helps in improving standard of living. In a study conducted by Odimegwu et al family planning will help to improve one's standard of living was told by 67.1% of respondents and a couple that practice family planning has a happy family was told by 62.8%.

Around 59% have a positive attitude that pregnancy must be properly planned and regarding health of the mother 64.9% were in favorable attitude towards child spacing. Shafei et al in his study observed that only 37.2% males and 29.1% female responded correctly about pregnancy, that it must be properly planned and not just allow it to happen on its own. Similarly, only 33.7% replied that pregnancy, which is too closely spaced, should be avoided by using family planning methods. ¹⁰ The positive attitude in our study may be attributed to adequate level of knowledge among the respondents.

A maximum, 55.2% of respondents were having a positive attitude and belief that practicing family planning will create a better society. Similarly, 61.2% said that religious doctrine shouldn't be linked to family planning and 51.6% agreed to encourage other community members to use contraceptives and were consistent with the findings of Odimegwu et al who observed around 68% of respondents believed that practicing family planning will create a better society.

Around, 78.9% were in a favorable attitude that modern contraceptives are more effective than traditional methods while 59.65% said that the use of contraceptive method will not interfere with sexual relationship. Only 14.7% said that fertility return after IUDs removal and majority, 72.2% agreed that couples should undergo permanent family planning method after 2nd child. In a study conducted by Shafei et al only 23.3% of wives and 20.9% of husbands told that modern contraceptive method is more effective than traditional methods and 22.1% said that the use of contraceptive method will not interfere with sexual relationship. 10

A total 56.2% said that family planning should be planned and discussed by both husband and wife and 52.6% agreed that support from husband is important to determine the importance of the family planning program. A total of 50.6% said that family planning practices will help in gaining confidence between husband and wife and spouses who care for each other will practice family planning was told by 51.1% of the respondents. In a study conducted by Odimegwu et al 65.4% of respondents said that men should share the responsibility for family planning and 64.1% said that spouses who care for each other will practice family planning.

The mean attitude scores of the respondents towards family planning in the context of gender showed that females had higher positive attitude scores in most of the domain compared with male. The total attitude score towards family planning among females was 16.04 ± 3.641 and in males it was 13.85 ± 4.605 . The difference in the mean score was statistically significant (p=0.000). Our findings are inconsistent with the findings of Jammeh et al who observed higher attitude score 7.26 ± 3.230 among males compared with the females 6.55 ± 2.92956 . The difference in the mean score was statistically significant (p=0.000).

knowledge is an important precursor of positive attitude and may be attributed to this difference.

In general, there was a marked difference in attitude scores in urban and rural areas. Urban residents showed higher positive attitude scores (17.75±2.873) in most of the domains compared with rural residents (12.14±3.582). The difference in the mean score was statistically significant (p=0.000) and was consistent with the findings of Jammeh et al who showed high scores of attitude among urban population 7.54±2.767 compared with rural 6.22±3.21856. In the urban area, accessibility and availability of health services leads to the frequent contact with the health professionals, getting exposed to more health education compared with rural counterparts.

CONCLUSION

The findings of this study revealed the important information on married men and women on attitudes of couples towards contraceptive practice in Karimnagar district, Telangana. One of the promising findings of the study is, the majority of respondents showed a positive attitude towards contraceptive use. Female respondents and urban population showed more favorable attitude as compared to males and rural population respectively. There is need to target these population for health education interventions in order to achieve the desirable practices. Intervention such as health education on family planning and recommended strategies like duration of birth spacing is vital to improve the attitude and practices towards family planning.

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Ethical approval: The study was approved by the

Institutional Ethics Committee

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