Original Research Article

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A study to assess the contraceptive use among married women of urban slums: a cross-sectional study

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ABSTRACT

Background: Family planning services like use of modern contraceptives help the couples to delay pregnancy and avoid the unwanted pregnancies. So, understanding the choice of contraceptives for the underserved couples is a key for provision of family planning services. Objective was to assess the contraceptive use among married women of urban slums using semi-structured questionnaire.

Methods: The present observational cross-sectional study was conducted over a period of one month i.e. November 2019 in urban slums of Trikuta Nagar, which is a field practice area of Department of Community Medicine, GMC Jammu. Information was gathered from married females of reproductive age group. 50% of the population was selected randomly by lottery method i.e. 90 females. But at the time of study, only 85 married females could be interviewed.

Results: The results show that the maximum females belonged to the 15-25 years age group followed by 26-30 years age group. More than 50% were literate, 42.35% had education upto primary level. More than 50% females were self-employed as they were labourers and rests were home-makers. The duration of marriage of most of the respondent women was 0-5 years and 44.70% of women had three living children. 65.88% women had one year gap between the first two pregnancies.

Conclusions: The information, education and communication activities about the advantages of using contraceptives and its side-effects while using these contraceptives need to be increased so as to promote the awareness among females of the urban slums.

Keywords: Contraception methods, Family planning, Urban slums

INTRODUCTION

The meaning of contraception is to prevent the sperm to unite with the ovum, which results in failure in implantation of fertilized ovum with uterus. Annually 60,000 women died globally due to pregnancy related causes and about 75,000 died due to unsafe abortion. Out of these, 20000 women died due to lack or failure of contraceptive devices. As a result of these unintended births, women suffered many physical and mental health problems. One of the study done by population action international in developing countries that due to increase

in spacing between births, there was a decrease in twothird infant mortality rate. So, to increase the spacing between the births, Family Planning methods should be made accessible and available to all reproductive population so that they responsibly decide about when and how many children they have (by choice and not by chance).

The Family Welfare Programme in India is a centrally sponsored programme/scheme to reduce the unwanted pregnancies with the introduction of contraceptives. As a result, it can reduce the maternal mortality because of

reduction in high risk pregnancies as well as abortions.⁸ It has been observed that with the use of modern contraceptives, we can prevent one-third of maternal deaths.⁹

METHODS

Present community based cross-sectional study was conducted in the eligible couples of slums in the Trikuta Nagar area. District Jammu which is a field practice area of Department of Community Medicine, GMC Jammu, J and K. Trikuta Nagar consists of sectors 1 to 9 and extension with population of 16000 (Census 2011) and 14 scattered urban slums are under the centre and urban slum population consists of 900 (survey). According to recent data, number of eligible couples (which are in the age group of 15-44 years) are 180. Information was gathered from the married females of reproductive age group. 50% of the population was selected randomly by lottery method i.e. 90 females. But at the time of study, only 85 married females could be interviewed because of the nonavailability of females at the time of interview and some households were locked during the interview schedule. Except for the absence of married females/locked households, there were no other exclusion criteria in this study. After taking clearance, all the staff members as well as Anganwadi workers of Urban Health and Training Centre, Trikuta Nagar were sensitized about the objective of the study. They were then asked to inform the urban slum population during the Urban Health and Nutrition Days (UHND's) and through Anganwadi workers so that adequate cooperation of the families can be met because they are mostly Labour class. A semi-structured questionnaire was administered to the study participants.

The data was entered in Microsoft excel and analyzed in terms of number and percentages.

RESULTS

Table 1 shows the demographic characteristics of the respondents with numbers and percentages. The results showed that the maximum females were in the age group of 15-25 years followed by 26-30 years age group. More than 50% were literate, 42.35% had education upto primary level. More than 50% females were self-employed as they were labourers and rests were homemakers. The duration of marriage of most of the respondent women was 0-5 years and 44.70% of women had three living children. 65.88% women had one year gap between the first two pregnancies.

Table 2 depicts that majority of females got the information about the contraceptive methods from media followed by health workers. Most of the females used Barrier method (male condom) as a choice of contraceptive followed by pill and IUD. Table 3 shows the level of awareness about the contraceptives among the married females.

Table 1: Demographic variables among respondents.

Variables	N (%)	
Age group (in years)	21 (70)	
15-20	23 (27.05)	
21-25	29 (34.11)	
26-30	19 (22.35)	
31-35	8 (9.41)	
36-40	6 (7.05)	
40-45	- ` ′	
Educational status		
Primary	36 (42.35)	
Secondary	15 (17.64)	
Senior secondary	2 (2.35)	
Graduate	-	
Illiterate	32 (37.64)	
Occupation		
Home maker	30 (35.29)	
Self employed	55 (64.70)	
Govt. employee	-	
Private employee	-	
Duration of marriage		
0-5 years	52 (61.17)	
6-10 years	20 (23.52)	
11-15 years	10 (11.76)	
>15 years	3 (3.52)	
Number of children		
One	27 (31.76)	
Two	17 (20)	
Three	38 (44.70)	
>three	3 (3.52)	
Gap between first and second child		
One year	56 (65.88)	
Two years	23 (27.05)	
Three years	6 (7.05)	
>Three years	-	
Information source about contraceptives		
Health workers	39 (45.88)	
Media	51 (60)	
Family friends	4 (4.70)	

Table 2: Contraceptive method used among married females of urban slums.

Contraceptive methods	N (%)
Female sterilization	4 (4.70)
Male sterilization	-
Implant	-
IUD	11 (12.94)
Injectable	7 (8.23)
Pill	22 (25.88)
Emergency contraception	4 (4.70)
Male Condom	32 (37.64)
Female Condom	-
Diaphragm	-
Withdrawal	-
No response	5 (5.88)

Table 3: Awareness of using contraceptives among respondents.

Awareness variables	N (%)	
Advantages of using contraceptives		
Preventing unwanted pregnancies	47 (55.29)	
To increase gap between the pregnancies	25 (29.41)	
Preventing sexually transmitted infections	5 (5.88)	
Don't know	8 (9.41)	
Whether aware about the side-effects of using		
contraceptives		
Yes	65 (76.47)	
No	20 (23.52)	
Having any side-effects while using contraceptives		
Pain	39 (45.88)	
Bleeding	10 (11.76)	
Weight gain	8 (9.41)	
Other	8 (9.41)	
Don't know	20 (23.52)	

DISCUSSION

The present study participants were mostly in the age group of 15-25 years which was more younger age group as compared to the another study where mostly females were in the age group of 25-29 years. 10 37.64% of females were illiterate and majority were literate upto secondary level. But some studies showed the contradictory results, wherein only 4-5% were illiterate. 11,12 Most of the females in urban slums were self-employed (64.70%), rest were homemakers (35.29%). They were mostly labourers by occupation working in various areas. But in one study done in Karnataka, majority of the females were housewives. 11

The source of information about the contraceptive methods was mostly from the media followed by health workers and similar findings were observed from the other study as well but some studies shows the contradictory results, as the maximum information about the contraceptives received by the females was from the health workers. 10,11 The present study revealed that they had 55.29% of awareness that the use of contraceptives prevent unwanted pregnancies followed by 29.41% females who had awareness that the usage of contraceptives increases the gap between the pregnancies and similar results were observed in another studies as well. 10,11 76,47% females were aware about the side-effects of the contraceptives.

The contraceptive method used by married females of urban slums were mostly barrier method like male condom followed by pill and IUD and the similar results were reported by other studies as well. 12-14 Those females who were using the contraceptives, the commonest side-effects were pain (45.88%) followed by bleeding (11.76%).

Limitation

Limitation of the study was small sample size.

CONCLUSION

Information, education and communication activities are needed to be increased to promote awareness among the females residing in urban slums, about the advantages of using contraceptives and its side-effects as well. The access of these contraceptive services is very problematic in urban slum population, as these are mostly labourer class and migrant population.

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Institutional Ethics Committee

REFERENCES

- 1. Park K. Textbook of preventive and social medicine. 19th ed. M/s Banarsidas Bhanot 2008: 389-391.
- Skiles MP, Cunningham M, Inglis A, Wilkes B, Hatch B, Bock A, Barden-O'Fallon J. The effect of access to contraceptive services on injectable use and demand for family planning in Malawi. Int Perspect Sexual Reprod Health. 2015;41(1):20-30.
- 3. Grimes DA (ed). The contraception report. 2000;10:1-30.
- 4. Hernandez ND. An exploration of the meaning and consequences of unintended pregnancy among latina cultural subgroups: social, cultural, structural, historical and political influences in college of public health. University of South Florida; 2013.
- 5. Izugbara C. Household characteristics and unintended pregnancy among ever- married women in Nigeria. Soc Med. 2014;8:1.
- 6. Centres for disease control and prevention, Achievements in public health 1900-1999, Family Planning MMWR Morbidity Mortality Weekly Report. 1999;48:1073-80.
- 7. State of World Population 2012 (By Choice and not by Chance). Available at: https://www.unfpa.org/sites/default/files/pub-pdf/EN_SWOP2012_Report. pdf. Accessed on 3 November 2019.
- 8. Levine R, Langar A, Birdsall N, Matheny G, Wright, M, Bayer A. Disease control. Priorities in developing countries. New York. Oxford University Press: 2006:1075-1090.
- Collumbein M, Gerressu M, Cleland J. Non-use and use of ineffective methods of contraception, comparative quantification of health risks: global and regional burden of disease attributable to selected major risk factors. Geneva WHO; 2004:1255-1320.
- 10. Olugbenga BAI, Abodunrin OL, Adeomi AA. Contraceptive practices among women in rural communities in south-western Nigeria. Global J Med Sci. 2011;11(2):1-8.

- 11. Sonam ZS, Melita S, Asha N. Knowledge, attitude, practice and preferences of contraceptive methods in Udupi district, Karnataka. J Family Reprod Health. 2013;7(3):115-20.
- 12. Lwelamira J, Mnyamagola G, Msaki MM. Knowledge, attitude and Practice towards modern contraceptives among married women of reproductive age in Mpwapwa district, Central Tanzania. Cur Res J Soc Sci. 2012;4(3):235-45.
- Lakshmi MM, Neetha, Rai S. Contraceptive practices among reproductive age group of women in Justice K.S. Hegde Medical College Hospital,

- Mangalore. Int J Reprod Contracept Obstet Gynaecol. 2013;2(1):39-46.
- Mustafa R, Afreen U, Hashmi HA. Contraceptive knowledge, attitude and practice among rural women. J College Physic Surg Pak. 2008;18(9):542-45.

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