

**Original Article**

# STUDY OF KNOWLEDGE, ATTITUDE & PRACTICE REGARDING THE VARIOUS METHODS OF CONTRACEPTION IN A RURAL SETUP OF HOSKOTE

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## ABSTRACT

**Background:** Contraception is as old as mankind. In view of increasing population there's need for awareness regarding the use of various contraceptive methods.

**Aims and Objectives:** To assess the Knowledge, Attitude & Practice regarding the various contraceptive methods in a rural setup of Hoskote.

**Materials & Methods:** A cross sectional study was carried out at MVJ, UHC & PHC of Hoskote Taluk on OPD basis. Data was collected by a pre-designed questionnaire at the OPD. Statistical analysis was done using SPSS software. People were simultaneously educated regarding the various contraceptive methods.

**Results:** Total sample size was 150 of which 75 were males and 75 females. Knowledge about contraceptives was seen more in males (93.3%) when compared to females (72%). 95.2% of graduates had knowledge regarding the methods of contraception. This suggests that the knowledge about contraception is better perceived and understood among the literate group. Most common method of contraceptive practiced was barrier methods (40%), followed by sterilization procedure (20%), IUCD (18.67%), OCP (12%), coitus interruptus (8.67%) and emergency contraception (0.67%).

**Conclusion:** There has been a considerable improvement among the people even in rural setup regarding the contraceptive use, but there still exists lack of awareness and knowledge regarding the use of contraceptive methods in some small groups of people. IEC activities have to be increased especially for females of this rural setup.

**Keywords:** Contraception, Barrier methods, IUCD, OCP, Emergency contraception, Sterilization procedures

## INTRODUCTION

Contraception is as old as mankind. Whether rich or poor, old or young, in all culture women want to avoid unwanted pregnancies and to enjoy their sexuality without obstacles. Birth control includes barrier methods, hormonal contraception, intrauterine devices (IUDs),

sterilization, and behavioral methods. Hormones can be delivered by injection, by mouth (orally), placed in the vagina, or implanted under the skin. The most common types of oral contraception include the combined oral contraceptive pill and the progestogen-only pill. <sup>1</sup> Methods are typically

used before sex but emergency contraception is effective shortly after intercourse.

India, with 1.22 billion people is the second most populous country in the world, while China is on the top with over 1.35 billion people. The figures show that India represents almost 17.31% of the world's population.<sup>2</sup> India was the first country in the world to launch a National Family Planning Programme with aim to reduce the birth rate to stabilize population.<sup>3</sup> This alarming figure proves the inefficiency of our Family Planning program being implemented. One of the main reasons of population explosion in our country is postulated to be illiteracy. To improve the effectiveness of the program, there is need to know awareness, practice & various other factors affecting the use of various contraceptive methods in the different segments of our population because of the vast socio-cultural variation. Spacing methods not only decrease total fertility but also improve the health of mother by the delaying next child birth.<sup>4</sup>

#### AIMS AND OBJECTIVES

To assess the Knowledge, Attitude & Practice regarding the various contraceptive methods in a rural setup of Hoskote.

#### MATERIALS AND METHODS

A cross sectional study of people was carried out at MVJ Medical & Research Hospital, Urban Health Centre (UHC) and Primary Health Centre, Hoskote Taluk on OPD basis. All the patients who came to the OPD were taken for the questionnaire type of study. Females of reproductive age groups i.e., 15-45yrs were included in the study. Males between 15 to 60 years were included in the study. Males included in the study were patients attending medicine OPD & a few were males accompanying females, but were not their husband, to remove the selection bias. The study was done over a 2 months period extending from 15<sup>th</sup> May, 2012 to 14<sup>th</sup> July, 2012. Prior consent of the patients was taken. Data was collected by a pre-designed questionnaire at the OPD. The questionnaire highlighting age, sex, age of marriage, educational status, religion, knowledge and opinion of contraception, number of contraceptive methods known, contraceptive method practiced, number of

children and failure of any contraceptive methods in past. Statistical analysis of data was done using SPSS statistics-17 software, to associate various findings. People in the study were educated simultaneously after completion of their questionnaire regarding the various contraceptive methods -its uses, efficacy, technique of usage & complications.

#### RESULTS

Total sample size was 150 of which 75 were males and 75 females.

**Table 1: Showing the correlation between knowledge about Contraception and factors like Age, Gender, Religion and Educational Status.**

Variable	Knowledge about Contraception		Total
	Not known	Known	
<b>Age*</b>			
<20	2	4	6
21-25	18	51	69
26-30	2	36	38
31-35	1	16	17
36-40	1	11	12
>40	2	6	8
<b>Gender#</b>			
Male	5	70 (93.3)	75
Female	21	54 (72.0)	75
<b>Religion®</b>			
Hindu	21	95 (81.9)	116
Muslim	4	22 (84.6)	26
Christian	1	04 (80.0)	5
Others	0	03	3
<b>Educational Status<sup>§</sup></b>			
Illiterate	5	04 (44.4)	9
Primary	8	15 (65.2)	23
High School	9	45 (83.3)	54
PUC	3	40 (93.0)	43
Graduate	1	20 (95.2)	21

\*P value 0.048 signifying older age groups have lesser knowledge of contraception; #P value 0.01 signifies males have more knowledge regarding contraception; ®P value 0.85 signifying that there is no difference between religion and knowledge about contraception; §P value 0.01 signifying Graduates have more knowledge about contraception)

Knowledge about contraceptives is seen to be maximum in the age group of 21-30 and tapering slowly at extremes of ages. And this finding was found to be statistically significant (p value <0.05). 93.3% of Males had some

knowledge regarding contraception when compared to females which accounted for 72%. P value is 0.01 stating that it's statistically significant. The educational status of people and knowledge was directly proportional i.e.; 83.3% of high school, 93.0 of PUC and 95.2% of Graduate. p value is 0.001. Thus, statistically highly significant. Knowledge about contraception among Hindu was found to be 81.8%, Muslims 84.6% and Christians 80%, the

difference is not statistically significant. Thus pointing to the fact that knowledge regarding contraception is almost the same among all the religion. (Table 1)

It was observed that 3 of 5 methods (mentioned in questionnaire) were known in the age group of 21-25 and the extremes of age groups knew lesser methods. Similarly the knowledge regarding various methods were more as the educational status increased. (Table 2)

**Table 2: Depicting the association of Age & Educational status with Number of contraceptive methods known.**

Methods known	Age (in yrs)						Educational Status				
	<20	21-25	26-30	31-35	36-40	>40	Illiterate	Primary	High School	PUC	Graduate
0	3	12	1	1	1	0	2	5	9	1	1
1	1	16	16	1	0	3	4	8	18	3	4
2	1	13	12	4	4	3	0	4	13	12	8
3	1	19	8	7	3	1	3	6	7	18	5
4	0	4	0	3	0	0	0	0	3	2	2
5	0	5	1	1	4	1	0	0	4	7	1
<b>Total</b>	<b>6</b>	<b>69</b>	<b>38</b>	<b>17</b>	<b>12</b>	<b>8</b>	<b>9</b>	<b>23</b>	<b>54</b>	<b>43</b>	<b>21</b>

Contraceptives use was acceptable to 74.67% of people in our study. There was no significant difference about opinion is regard to age, gender or religion. However the acceptability and non-acceptability was seen in equal ratio among people whose educational status was less than high school. (Table 3)

Most common method of contraceptive practiced was barrier methods (40%), followed by sterilization procedure (20%), IUCD (18.67%), OCP (12%), coitus interruptus (8.67%) and emergency contraception (0.67%). Barrier methods were the most popular method practiced in the age group of 21-30. IUCD use was more in age group of 30-40. Sterilization procedures were common in age group of >40. Barrier method was the common method of practice in males. Whereas in females the use of

OCP, IUCD and Barrier methods were almost equal (Table 4).

**Table 3: Showing the relation between Opinion about Contraception and Educational Status**

Educational Status	Opinion about Contraception		Total
	Not acceptable	Acceptable	
Illiterate	4	5	9
Primary	12	11	23
High School	17	37	54
PUC	4	39	43
Graduate	1	20	21
<b>Total</b>	<b>38</b>	<b>112</b>	<b>150</b>

**Table 4: Depicting the contraceptive method practiced in relation to Age & Gender.**

Contraceptive mode Practiced	Age						Gender	
	<20	21-25	26-30	31-35	36-40	>40	Male	Female
Barrier methods	0	30	24	3	1	2	43	17
IUCD	0	11	6	7	3	1	11	17
OCP	3	14	0	1	0	0	2	16
Emergency contraception	0	0	1	0	0	0	0	1
Sterilization procedure	0	9	5	5	7	4	15	15
Coitus interruptus	3	5	2	1	1	1	4	9
<b>Total</b>	<b>6</b>	<b>69</b>	<b>38</b>	<b>17</b>	<b>12</b>	<b>8</b>	<b>75</b>	<b>75</b>

In our study it was observed that in 62.67% of people, husbands used to decide on the mode of contraception practiced. 34.67% of women decide and the rest i.e. 2.67% was decided by others which included in-laws, family & friends. 30% of the people in the study considered MTP as a method of contraception. There was no age or educational status correlation associated with this. 42.67% of people recommend barrier methods to others, followed by 18% IUCD and sterilization procedures, 13.33% recommend OCP's.

## DISCUSSION

A study by Mitali G. Patel et al showed the maximum number of people using contraceptive methods was in the age group of 25-35 years. Use was low in younger age group. Most of people knew at least about 1 method of contraception.<sup>5</sup> This view was supported by yet another study by Singh et al<sup>6</sup> and Alagh et al.<sup>7</sup> However in our study the use of contraceptive methods was seen maximum in the age group of 21-25 years indicating those younger age groups are now aware of the various methods of contraception and its effectiveness. It was also observed that most of the people regardless of age, gender or educational status knew at least about 1 method of contraception. People between 21-25 years & higher educational status, knew 3 out of 5 methods mentioned in questionnaire. This could probably be due to increased media advertisements, increasing literacy among people and loss of cultural taboos.

In our study it was observed that knowledge about contraception was more in males (93.3%) when compared to females (72%). This being statistically significant, shows that the females in our setup are ignorant about contraceptive methods and they need to be educated regarding contraception. However our search across literature did not show any studies which could correlate these figures. Many of this kind of studies have been done with women as a study group. This increased knowledge in men could possibly be due to increased social communication of men when compared to women, especially in this rural setup.

Our study showed a high association between the educational status and knowledge about contraception i.e., higher the educational status,

the knowledge about contraception was better. This was statistically significant with a p value of 0.001. Our study correlates well with the study by Mitali G. Patel et al which also showed the association between literacy and use of contraception statistically significant with p value of 0.0001.<sup>5</sup>

In ancient Indian history, it was believed that use of contraception was a sin, and child birth was the gift of God, by Hindu, Muslim or Christians.<sup>1</sup> However this notion slowly started blunting out among Christianity & Hindu's, but persisted in Muslims. A study by Mittal S et al did not show any such religion differences and use of contraception.<sup>8</sup> In concordance to the above studies we also did not observe any statistically significant difference between religion and the knowledge & practice of contraceptive methods in our study.

Bajwa SK et al study shows that the most common method of contraception was surgical sterilization (42.3%) followed by condoms (36.4%), traditional methods (8.3%), OCP (7.4%) & IUCD (5.5%).<sup>9</sup> This study was published in July 31, 2011. However the time of study has not been mentioned in the methodology. The reason for popularity of surgical sterilization in this study is stated to be due to the negative perception of the study group in regard to modern methods of contraception. A study by Kumar M et al also stated the most common method was tubal ligation.<sup>10</sup> This study was done in 2010-2011 and the reason stated for popularity of tubal ligation was that the people in study group belonged to lower educational strata and they were ignorant about the other methods of contraception. Khanal V et al showed the knowledge of modern contraception was high (98.27%) & emergency contraception was low (25.9%).<sup>11</sup> In contrary, our study showed that barrier methods were most common method (40%), followed by sterilization procedure (20%), IUCD (18.67%), OCP (12%), coitus interruptus (8.67%) and emergency contraception (0.67%). It is also evident that the knowledge and usage of emergency contraception is far low in our study.

Barrier methods were the most popular method practiced in the age group of 21-30. IUCD use was more in age group of 30-40. Sterilization procedures were common in age group of >40. Condoms was popularly used among males and reason being easy availability and cost effective.

It could be postulated that newly married couples belonged to the age group of 21-30 and hence barrier methods were more popular, as IUCD is not used in a female without children for fear or infertility. Sterilization procedures were more common >40 i.e. in females who have completed their family. However our literature search did not reveal any study which could correlate the age & gender with method of practice of contraception.

In study of Berhane A et al 33% of men was the decision makers regarding the use of contraception & 75% of women decided regarding the methods of contraception and remaining were influenced by others.<sup>12</sup> Our study showed that in 62.67% of people, husbands used to decide on the mode of contraception practiced. 34.67% of women decide and the rest i.e. 2.67% was decided by others which included in-laws, family & friends. This is due to the fact that in a rural setup men are the sole decision makers regarding any aspect of family or family planning.

A study by Khanal V et al has showed that 20.68% of their study group had a previous history of MTP.<sup>11</sup> 30% of people in our study believed that MTP was a method of contraception, pointing to the fact that the females in our setup are still ignorant about the other methods of contraception and they are resorting to a more life threatening method. We could not find any direct evidence of a similar belief in literature. However some studies have stated that due to the lack of knowledge of emergency contraception women have undergone MTP's.<sup>8</sup> Barrier methods are still a choice of recommendation in our study followed by IUCD, OCP & sterilization procedures.

In conclusion, there has been a considerable improvement among the people even in rural setup regarding the contraceptive use, but there still exists lack of awareness and knowledge regarding the use of contraceptive methods in a small group of people. Females are still not aware of their rights of decision making regarding the choice of contraception and limiting their family size. IEC activities should be increased targeting the female group so that they use the other scientific methods of spacing instead of resorting to life threatening method of MTP, as a primary method of contraception. The knowledge regarding emergency contraception is extremely low in this setup and the people

need to be educated regarding this. However this study being done for a short duration of 2 months and was done on OPD basis and hence follow up could not be done to reassess the knowledge, attitude & practice regarding various methods of contraception.

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