

A study of unmet needs of family planning in field practice area of urban health training center

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Abstract

Introduction: India is supporting about 16% of world's population, with only 2.4 percent of world's land area and is placed as the second most populous country in the world, next to China. **Aims and Objectives:** To study unmet needs of family planning in field practice area of urban health training center. **Methodology:** This was a cross-sectional study carried out at the OPD of Urban health training center during one year period from June 2015 to June 2016 in all pregnant women for ANC care with the written consent participated into study. During one year period, total 625 pregnant women participated into study. **Result:** 58.72% were aware about planning methods, Family planning methods used were 14.15%. In Contraceptive methods, Male condoms was 49.23% followed by IUCD-27.69%, Oral contraceptive Pills-23.07%, Multiple methods were in 15.38%. The prevalence of unmet needs for family planning was 24%. The most common reasons for unmet need for family planning were Opposition by family members-43.33%, Lack of awareness-21.33%, Fear of side effects-16.67%, Fear of not conceiving in future-10.00%, Fear of sterilization operation-8.67%, Against religion -8%, Inconvenience in usage-6.00%, Perception of high cost-4.67%. **Conclusion:** It can be concluded from the study that The prevalence of unmet needs for family planning was 24% and the most common reasons for unmet need for family planning were Opposition by family members, Lack of awareness, Fear of side effects, Fear of not conceiving in future, Fear of sterilization operation, Against religion, Inconvenience in usage, Perception of high cost.

Key Words: Unmet needs of family planning, Contraceptive methods, Un-wanted pregnancy.

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INTRODUCTION

India is supporting about 16% of world's population, with only 2.4 percent of world's land area and is placed as the second most populous country in the world, next to China¹. The last decade has seen India's population growth by 21.34 percent which means 180 million persons were added to the population. The large

momentum for continued growth of population is because 45 percent of women in India are in the reproductive age group of 15-45 years. Nearly 44 percent of them get married between 15-18 years of age.² The National Population Policy 2000 envisages universal access to various methods of contraception and fertility regulation. India is undergoing a fertility transition and an important feature is that contraceptive use has also increased among uneducated women.³ The extent of acceptance of contraceptive methods varies within societies and also among different castes and religious groups. The factors responsible variation are at the individual, family, and community levels, embedded in the socio-economic and cultural milieu of Indian Society.⁴ Yet there are at least 35 million people who are not using any method of contraception despite wanting to stop or space child bearing. These women are considered to have an unmet need for contraception. In developing countries, the average level of unmet need is about 20 percent.⁵ Family

planning is one of the fundamental pillars of safe motherhood and a reproductive right. Over the past 40 years, there have been significant advances in contraceptive methods, its approaches and services. However contraceptive practices are no longer in wide use. Many factors contribute for this under-utilization of contraceptives and this makes contraception as unfelt need of millions of women today. Many women who are sexually active would prefer to avoid becoming pregnant but nevertheless are not using any method of contraception. These women are considered to have an unmet need for contraception.⁶ Emergence of unmet need can be seen from two aspects. One is the absence of explicit demand for contraception from within family and the other is the lack of availability of appropriate services to those who need them. A society exhibiting norms of gender bias may show higher unmet need levels.^{7,8} The perception of side effects might be more accurately regarded as reflecting the social and cultural unacceptability of contraception rather than the fear of health effects. Development of appropriate policy tools in order to reduce unmet need for family planning requires knowledge of the causes of unmet need, that is, the factors that must be the target of Governmental and Non-Governmental interventions.⁹

MATERIAL AND METHODS

This was a cross-sectional study carried out at the OPD of Urban health training center during one year period from June 2015 to June 2016 in all pregnant women for ANC care with the written consent participated into study. During one year period, total 625 pregnant women participated into study. All of them interviewed about the Family planning methods also is the current pregnancy is wanted or at improper time or as a consequence of not using contraceptive or failure of contraceptive is termed as unmet needs of contraception.

RESULT

Table 1: Distribution of pregnant women according to awareness of family planning methods and its usage

Variables	Number	Percentage
Awareness of family planning methods (n=625)		
Aware	367	58.72
Not aware	156	24.96
Family planning methods usage (n=450)		
Users	65	14.15
Non-users	385	85.55
Contraceptive methods (n=65)		
Male condoms	32	49.23
IUCD	18	27.69
Oral contraceptive Pills	15	23.07
Multiple methods	10	15.38

Aware about planning methods were 58.72%, Family planning methods used were 14.15%. In Contraceptive methods, Male condoms was 49.23% followed by IUCD-27.69%, Oral contraceptive Pills-23.07%, Multiple methods were in 15.38%.

Table 2: Reasons for unmet need for family planning (n=150)

Reasons	Number	Percentage (%)
Opposition by family members	65	43.33
Lack of awareness	32	21.33
Fear of side effects	25	16.67
Fear of not conceiving in future	15	10.00
Fear of sterilization operation	13	8.67
Against religion	12	8.00
Inconvenience in usage	9	6.00
Perception of high cost	7	4.67

The prevalence of unmet needs for family planning was 24%. The most common reasons for unmet need for family planning were Opposition by family members-43.33%, Lack of awareness-21.33%, Fear of side effects-16.67%, Fear of not conceiving in future-10.00%, Fear of sterilization operation-8.67%, Against religion -8%, Inconvenience in usage-6.00%, Perception of high cost-4.67%.

DISCUSSION

Globally, the prevalence of contraceptive use has been increasing, but the unmet need for contraception still remains a problem¹. The contraceptive and noncontraceptive benefits of modern contraceptives outweigh the risks². In our study Awareness about planning methods were 58.72%, Family planning methods used were 14.15%. In Contraceptive methods, Male condoms was 49.23% followed by IUCD-27.69%, Oral contraceptive Pills-23.07%, Multiple methods were in 15.38%. This is in confirmation with Veena V *et al*¹². The prevalence of unmet needs for family planning was 24%. The most common reasons for unmet need for family planning were Opposition by family members-43.33%, Lack of awareness-21.33%, Fear of side effects-16.67%, Fear of not conceiving in future-10.00%, Fear of sterilization operation-8.67%, Against religion -8%, Inconvenience in usage-6.00%, Perception of high cost-4.67%. This was in confirmation with Bahiya Sulthana¹⁴ *et al*. According to the National Family Health Survey-3 (NFHS-3)¹⁵, the national figure for unmet need is 13 per cent. According to the District Level Household and Facility Survey-3 (DLHS-3)⁴ unmet need of contraception in India is 21.3 per cent, with 7.9 per cent for spacing and 13.4 per cent for limiting. Also, Veena V *et al*¹² found unmet need was found to be 23.3%.

CONCLUSION

It can be concluded from the study that The prevalence of unmet needs for family planning was 24% and the most common reasons for unmet need for family planning were Opposition by family members, Lack of awareness, Fear of side effects, Fear of not conceiving in future, Fear of sterilization operation, Against religion, Inconvenience in usage, Perception of high cost.

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