# Knowledge, attitude and determinants of contraceptive use among nursing mothers – a cross-sectional study

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## **Abstract**

**Background**: The acceptance of contraceptive methods varies within societies and also among different castes and religious groups. The factors responsible operate at the individual, family and community level with their roots in the socio-economic and cultural milieu of Indian society.

Aim: To know the prevailing contraceptive awareness and the various sociodemographic factors affecting it.

**Methods:** This was a cross-sectional study, conducted in the post natal wards among 200 nursing mothers using the pretested structured questionnaire between 2nd and 7th postpartum day. The questionnaire was based on Socio economic and demographic variables. Information was collected regarding her age, education, husband's education, religion, socio economic status, age at marriage, number of living children, husband wife discussions, sex of living children, desire for more children, influence by elders and religious decisions. Descriptive statistics like percentages were applied for qualitative data. Chi square test was applied to find significance. p-value <0.05 was considered statistically significant.

**Results:** 36.5% of study population had knowledge regarding family planning methods. Among literate mothers 40.6% had poor knowledge and 59.4% no knowledge. 78% of mothers opted to limit family size as 67.5% had already 2 children, 25.5% had 3 children and 25.5% had 1 male child. Among 22% of mothers who did not want to limit family size, 75% had no male child. Among mothers who had knowledge regarding of contraceptive methods, all of them were aware of female sterilisation (100%), OCP's (75.3%), Cu-T devices (79.5%) condom (67.1%). There was a significant association between religion, rural/urban background, socio economic status, couple's literacy status, age at the time of marriage and type of family with knowledge scores.

**Conclusion:** Knowledge regarding contraceptive methods was poor even in literate women, suggesting, not only formal education but also proper education regarding various contraceptive methods is essential.

**Keywords:** Contraceptive methods; post natal; nursing mothers

## Introduction

The rapid increase of population has got adverse effect on national economy [1]. Although the Total Fertility Rate has dropped from 3.6% (1991) to 2.2% (NFHS 4)[2], there are still miles to reach the replacement level of 2.1 set by National Population Policy, 2000[3]. The acceptance of contraceptive methods varies within societies and also among different castes and religious groups. The factors responsible operate at the individual, family and community level with their roots in the socio-economic and cultural milieu of

Indian society [4]. Many of the nursing mothers who prefer to delay next pregnancy are unaware of family planning practices. Use of contraceptives can prevent at least 25% of all maternal deaths by allowing women to prevent unintended pregnancies and unsafe abortions [5]. This study also enabled in reaching out to mothers at a time when they are most receptive to contraceptive advice. The aim of the present study was to know the prevailing contraceptive awareness and the various sociodemographic factors affecting it.

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#### **Materials and Methods**

This was a cross-sectional study, conducted in the post natal wards among 200 nursing mothers who delivered at S Nijalingappa Medical College and HSK Hospital, Bagalkot in the month of July 2017 to September 2017.

All healthy breast feeding mothers were included. Women with bad obstetric history, psychiatric disorders, no living issues, not breast feeding due to various reasons, who have undergone concurrent puerperal sterilization, were excluded from the study. After taking written informed consent from the mothers, they were interviewed using the pretested structured questionnaire in the post natal wards between 2nd and 7th postpartum day. The questionnaire was based on Socio economic and demographic variables. Considering the sentimental issue of contraception and sensitivity of the topic the interview was conducted on individual basis. Information was collected regarding her age, education, husband's education, religion, socio economic status, age at marriage, number of living children, husband wife discussions, sex of living children, desire for more children, influence by elders and religious decisions. The data collected were entered in MS excel and analysed in SPSS V22. Descriptive statistics like percentages were applied for qualitative data. Chi square test was applied to find significance. p-value < 0.05 was considered statistically significant.

#### **Results**

A total of 200 eligible married women in the reproductive age group were interviewed. Most of the women in the study were in the age group below 24 years (66.5% of study). 85.5% of husbands and 87.5% mothers were literate.78% of mothers were from lower socioeconomic status according to Modified B.G. Prasad's classification. Out of total, 59% of mothers were from rural area and 42% from urban area.87% of women were Hindus, 13% Muslims.

Table 1: Frequency and percentage distribution of sample characteristics

Variable	Category	Frequency	Percent	
	≤ 24	133	66.5	
Age	> 24	67	33.5	
	Hindu	174	87.0	
Religion	Muslim	26	13.0	
	Rural	117	58.5	
Place	Urban	83	41.5	
	Lower middle			
Socio-economic	class	156	78.0	
class	Middle class	44	22.0	
Mothers literacy	Illiterate	25	12.5	
status	Literate	175	87.5	
Husband's	Illiterate	29	14.5	
literacy status	Literate	171	85.5	
Age at the time of	>20	78	39.0	
marriage	≤ 20	122	61.0	
Type of family  Knowledge	Joint	110	55.0	
	Nuclear	90	45.0	
	No	127	63.5	
	Poor	73	36.5	
	Female	13	30.3	
Knowlodgo	sterilization	73	100	
Knowledge	OCP	54	75.3	
regarding contraceptives	Cu – T	58	79.5	
contraceptives	Condom	49	67.1	
Danima da Ilimid	No	49		
Desire to limit		156	22.0	
family size Attitude about	Yes		78.0	
	No	36	18.0	
contraceptive methods	Yes 164		82.0	
No of Children	One	55	27.5	
	Two	105	52.5	
	Three	40	20	
Already having	Yes	51	25.5	
one male child	No	149	74.5	
Reasons for not limiting size	No male child	33	75.0	
	No Female Child	6	13.6	
	Want one more children	5	11.4	
	Yes	86	43.0	
family planning,	163	00	43.0	
gapping etc with	No	114	57.0	
Final decision about family planning, gapping etc taken by	Elders and husband	156	78.0	
	Husband and Wife	4	2	
	Elders Husband and wife	40	20	

Table 2: Significance between knowledge scores on contraceptive methods and variables

		Knowledge				Ch:		
Variable	Category	No		Poor		df	Chi-	P-value
		Count	%	Count	%		square	
Age	≤24	79	59.4%	54	40.6%	1	2.89	0.09
	>24	48	71.6%	19	28.4%			
Religion	Hindu	101	58.0%	73	42.0%	1	17.18	<0.001
	Muslim	26	100.0%	0	0.00%			
Place	Rural	94	80.3%	23	19.7%	1	34.5	<0.001
	Urban	33	39.8%	50	60.2%			
SES	LMC	117	75.0%	39	25.0%	1	40.46	<0.001
	MC	10	22.7%	34	77.3%			
Mothers literacy status	Illiterate	23	92.0%	2	8.0%	1	10.01	0.001
	Literate	104	59.4%	71	40.6%			
Husband's literacy status	Illiterate	27	93.1%	2	6.9%	1	12.83	<0.001
	Literate	100	58.5%	71	41.5%			
Age at the time of marriage	> 20	9	11.5%	69	88.5%	1	148.96	<0.001
	≤ 20	118	96.7%	4	3.3%	1		
Type of family	Joint	108	98.2%	2	1.8%	1	126.86	<0.001
	Nuclear	19	21.1%	71	78.9%			

45% of mothers were from nuclear family and 55% from joint family. The total number of living children in the families was predominantly conforming to the 2 child norm currently practiced in India. 36.5% of study population had knowledge regarding family planning methods. Among literate mothers 40.6% had poor knowledge and 59.4% no knowledge. This implies that apart from formal education separate education regarding family planning is needed. 78% of mothers opted to limit family size as 67.5% had already 2 children, 25.5% had 3 children and 25.5% had 1 male child. Among 22% of mothers who did not want to limit family size, 75% had no male child. This is still one of the major determinants in using family planning methods even after having healthy children. In most of the families, final decision regarding family planning method was taken by husband alone or by elders. Among mothers who had knowledge regarding of contraceptive methods, all of them were aware of female sterilisation (100%), OCP's (75.3%), Cu-T devices (79.5%) condom (67.1%).

There was a significant association between religion, rural/urban background, socio economic status, couple's literacy status, age at the time of marriage and type of family with knowledge scores. Hence it is inferred that knowledge regarding contraceptive methods is dependent of all those variables.

#### **Discussion**

In the present study, 66.5% of the women are below 25 years of age group. This corresponds with the peak reproductive age group in which most pregnancies occur. Similarly in studies by Padma mohanan et al., Christian Ewhrudjakpor the peak reproductive age group was between 20-24 years and most of the study population were in this age group [6,7].

Average number of children per woman as per our study population is 2.2. According to NFHS – 4 [2], at current fertility levels, a woman in India will have an average of 2.2children in her lifetime.

A 43% of the couples had discussions regarding limiting and spacing of family. Most couples do not discuss with each other when to have their first child, birth spacing or contraception.

Regarding limiting and spacing methods of family planning, the final decision was taken by elders and husband in 78%. Husband and wife both together took decision in only 2% of families. In most of the families, mother alone is not allowed to take decision regarding family size. As elders interfere in the decisions of the couple in these matters, educating elders also and counselling them about family planning practices and the advantages of adopting small family norm is needed.

Overall 37.5%, among literate mothers 41.7% and 92% among illiterate mothers, had poor knowledge regarding contraceptive methods which is supported

by study conducted in 2011 at Bhopal by Mahawar[8], suggesting not only formal education but, proper education regarding various contraceptive methods and offering the cafeteria approach.

Improvement in female empowerment will help in giving mothers more freedom to take decisions and spreading awareness by health workers and by health professionals during antenatal visits regarding harms associated with unplanned pregnancy and how easefully it can be prevented, harms associated with pregnancies with short inter pregnancy interval.

Literacy is a weapon that not only breaks social barriers, superstition, gender bias & wrong faiths in the context of accepting family planning methods but also brings equal opportunity to grow up that develops a sense of co-existence [4].

Spreading awareness by health workers and by health professionals during antenatal visits regarding harms associated with unplanned pregnancy and how easefully it can be prevented, harms associated with pregnancies with short inter pregnancy interval helps in motivating mothers.

#### Conclusion

Post partum women form a key audience who will be receptive to contraceptive advice. Imparting correct knowledge at correct time can easily motivate them for adoption of proper family planning method.

Unfortunately still the decision of using a contraceptive method is in the hands of elders or on husbands. Thus it is good that a combined family approach should be followed by authorities to counsel people.

Female empowerment will also have significant role in helping women to take their own decision. It can be improved by improving literacy status and making them economically independent.

Incentives should be increased to couples who follow temporary methods and delay future pregnancies.

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