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EXPLORING CONTRACEPTIVE KNOWLEDGE, AWARENESS, AND PRACTICES AMONG ANTENATAL WOMEN: A STUDY AT SLN MEDICAL COLLEGE AND HOSPITAL, KORAPUT, ODISHA

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Abstract

Background: Fertility control is a critical facet of medical science, marked by a robust scholarly foundation and increasing clinical applications. Over the last 25 years, the management of women's procreative potential has evolved significantly, addressing the pressing global need to curb population growth. India, in particular, faces substantial challenges in population control, as reflected in the National Population Policy (NPP) of 2000. Despite awareness, the adoption of contraceptive measures is hindered by prevalent myths and misperceptions. This study focuses on antenatal women, a crucial demographic for family planning interventions. Materials and Methods: A descriptive prospective study was conducted at SLN Medical College and Hospital, Koraput, Odisha, employing a questionnaire-based approach. Ethical approval was obtained, and face-to-face interviews were conducted by trained medical practitioners. The sample size of 180 antenatal women was determined using established formulas. Data on biosocial characteristics, awareness, and contraceptive practices were collected and analyzed over an 8-week period. Result: Among the 180 participants, the majority were in the 26-30 age group, with 45.6% having attained high school education. Awareness about contraception was high (90.4%), yet only 50.6% practiced contraception. Condoms (63.3%) and Copper-T (27.8%) were commonly used methods. Fear of side effects and lack of awareness about benefits were major reasons for nonusage. Friends and neighbors were primary sources of information, emphasizing the need for diversified information dissemination. Discussion is comparing with national surveys, the study population exhibited robust knowledge (90%) but lower utilization rates (50.6%). Age, education, and positive attitudes significantly influenced contraceptive use. The study underscores the importance of targeted education, dispelling myths, and involving male partners for successful family planning interventions. Conclusion: Despite high contraceptive awareness, challenges persist in translating knowledge into practice among antenatal women. Addressing fears, enhancing education, and involving male partners are vital for improving contraceptive utilization. This study advocates for targeted interventions to bridge the gap between awareness and adoption, ensuring effective family planning strategies.

INTRODUCTION

Fertility control is a crucial and well-established medical discipline characterized by a growing scholarly foundation and expanding clinical applications. The management of a woman's procreative potential has progressed significantly in the last 25 years. There has never been a greater imperative to curb population growth in the history of mankind on Earth. It has been forecasted that, unless current growth trends are halted and reversed, the global population will surpass available resources sometime after the turn of the century. Nowhere is this immediate need more evident than in India, where collective efforts are conspicuous and widespread.^[1]

India initiated its inaugural family planning program in 1951, focusing on mitigating the escalating and alarming population growth. Global statistics indicate that two out of every five pregnancies are unintended. The National Population Policy (NPP) of 2000 aims to stabilize the population by 2045, intending to reduce the Total Fertility Rate (TFR) to 2.1 by 2010. However, TFR persists at 2.6 and 3 in some states.^[2] The predominant challenge encountered in adopting contraceptive measures is the prevalence of myths and misperceptions transmitted from one person to another. These myths often revolve around perceived side effects, misconceptions about future infertility, spousal miscommunications, and opposition from various sources, including family members, friends, and religious leaders, which curtail the utilization of birth control methods. Unintended pregnancies are linked to adverse health, social, and economic outcomes for both women and children. It is estimated that preventing unintended pregnancies could avert between one-fourth and two-fifths of maternal deaths. Addressing the unmet need for modern contraception in developing countries could prevent 67 million unintended pregnancies, 23 million unplanned births, 36 million abortions, and 76 thousand maternal deaths annually.

The antenatal period is a crucial aspect of family planning awareness, as pregnant women are most likely to be receptive to contraception during the postpartum period. The antenatal outpatient department provides an optimal environment within the hospital to engage women in the reproductive age group. It serves as a platform for disseminating family planning information, correcting misconceptions, and facilitating the exchange of ideas among mothers.

Objective

The study aims to assess the knowledge, awareness, and practice of various contraceptive methods among antenatal women attending the outpatient department in the Obstetrics and Gynaecology department at SLN Medical College and Hospital, Koraput, Odisha.

MATERIALS AND METHODS

This descriptive prospective study employed a questionnaire-based approach to gather information from antenatal women attending the outpatient department of our hospital. Prior to conducting the study, approval was obtained from the institutional research committee, and ethical clearance was secured. The interviews were conducted face-to-face by a trained medical practitioner, utilizing a pretested structured questionnaire. Informed consent was obtained from all participating women after counseling, and those who did not provide consent were excluded from the study. The sample size was determined using the formula $(N=Z^2PQ/D^2)$, considering a current contraceptive prevalence of 36.3%, a desired precision of 20%, resulting in a calculated sample size of 180.

The study was conducted over an 8-week period starting from September 1, 2019, at the antenatal outpatient department of SLN Medical College and Hospital, Koraput, Odisha. This tertiary care hospital, situated in Koraput, boasts a monthly delivery rate of approximately 300. A systematic random sampling technique was employed to select participants for the interviews. For every 10 antenatal women, a questionnaire was administered following consent and an interview. A total of 180 questionnaires were filled out by the authors during interactions in the antenatal clinic.

The questionnaire covered biosocial characteristics, including age, occupation, educational status, number of previous pregnancies and deliveries, awareness of contraception, contraceptive usage, source of information, types of contraception ever used, and reasons for not using contraception. The collected data was organized in a purpose-designed worksheet created for this study. The results were analyzed and presented as percentages, tables, and charts.

RESULTS

A total of 190 antenatal women were randomly chosen for interviews, and 180 of them consented to participate in the study. Figure 1 and Table 1 depict the age structure of the study, with the majority falling in the 26-30 years group, aligning with the predominant age group of women attending the antenatal clinic.



Figure 1 Employment distribution



[Table 1] presents the educational status of the sample population, indicating that 45.6% had attained high school education, while only 3.9% were postgraduates. Additionally, 61.1% of the participants in the study identified as Hindu, in accordance with the predominant religion in the area. [Figure 1] highlights that only 7% of the sample size were employed. [Figure 2] illustrates the parity distribution, with 51.9% being primigravidas, 35.9% second gravidas, and 12.2% having higher parity. [Table 2] outlines awareness about contraception, revealing that condoms and Copper T were the most recognized contraceptives. Interestingly, awareness of the safe period was notably high at 76%. Friends and neighbors served as the primary sources of information on contraception, with less influence from print media, TV, and radio [Table 2]. Some participants were not using contraception, primarily due to fears of side effects and misconceptions, with a significant proportion being unaware of the need and benefits of contraception.

While contraceptive awareness stood at 90.4%, actual contraceptive practice was 50.6%. Condoms emerged as the most commonly used method (63.3%), followed by Copper-T (27.8%). The study revealed that 90.4% of participants were aware of the need for birth spacing and timing childbirth. [Figure 2] shows that among those who decided on postpartum contraception, 38.1% relied on I pill (emergency contraception), while 35.1% considered sterilization.

Table 1: Socio-demo	ographic characteristics of st	udy participants		
Socio-demographic Characteristics		Frequency	Percent	
Age	18-20	29	16.1	
	21-25	60	33.3	
	26-30	64	35.6	
	31-35	27	15.0	
Education	Primary	67	37.2	
	High school	82	45.6	
	Graduate	24	13.3	
	Post graduate	7	3.9	
Religion	Hindu	110	61.1	
	Muslim	20	11.1	
	Christian	50	27.8	
	Total	180	100.0	

Awareness		Frequency	Percent
Awareness about contraceptives	Heard of Condom	166	92.0
	Heard of IUCD/	146	81.0
	Copper T		
	Heard of I pill	52	29.0
	Heard of Injectable	41	23.0
	contraception		
	Heard of Vaginal	11	
	ring		
Awareness about safe period	Yes	137	76.0
	No	43	23.9
Source of information	Radio	23	13.0
	TV	32	18.0
	Parents and	41	23.0
	relatives		
	Newspaper	25	14.0
	Friends and	86	48.0
	Neighbour		
Reasons for not using Contraceptives	Fear of side effects,	66	36.5
8 1	nyths in mind		
	Unaware about the	58	32.1
	need and benefits of		
	Contraception		
	Religious reason	14	7.7
	Feeling MTP can be	7	3.8
	used as		
	contraceptive		
	Family pressure	5	2.5
	from		
	husband/inlaws		
Ever Used Contraceptives	Yes	91	50.6
-	No	89	49.4
Methods adopted	Condom	114	63.3
•	I Pill	14	7.6
	Copper T	50	27.8
	Injection	2	1.1
Awareness about need of birth spacing and timing child birth	Yes	163	90.4

	No	17	9.4
Awareness about benefits of birth spacing	Yes	163	90.4
	No	17	9.4
Whether decided on the method of postpartum contraception	Yes	109	60.3
	No	71	39.4
Opted postpartum contraception methods	Sterilisation	63	35.1
	Condom	31	17.0
	Injectables	12	6.4
	Cu T	4	2.1
	I Pill	70	38.9

DISCUSSION

Comparing with the national family health survey NFHS-3, where knowledge about various temporary and permanent methods of contraception ranged from 45% to 99% in India, the present study found that the study population exhibited very good knowledge of contraception (90%). This falls below the reported knowledge by Takkar et al. and exceeds that reported by Sajid et al., emphasizing the influence of counselling.^[3,4]

The socio-demographic characteristics indicated that the majority of the age group fell between 26 and 30 years, representing the peak reproductive age group attending antenatal clinics. While awareness of contraception was high, actual usage remained relatively low, consistent with findings in prior studies. Friends and neighbors played a significant role as sources of contraceptive information, suggesting the need for diversified and sustained information dissemination efforts.^[5,6]

The study highlighted that fear of side effects and lack of awareness about the benefits of contraception were the main reasons for non-usage. Addressing these concerns requires comprehensive education on various contraceptive methods, dispelling myths, and emphasizing the positive aspects of contraception.^[7] The findings indicated a significant gap between awareness and utilization, reinforcing the need for targeted education and support. Factors influencing contraceptive use included older age, higher education status, and a positive attitude toward contraception, emphasizing the pivotal role of education, particularly for women. The involvement and support of male partners were also underscored as crucial contributors to successful female reproductive health.^[8]

Commonly used contraceptives were condoms (63%) and Copper-T (27%), aligning with the prevalence noted in other studies. Awareness about birth spacing and its benefits was high, with 60% of respondents having decided on postpartum contraception, mainly opting for sterilization. The prominence of I pill (emergency contraception) in choices reflected the impact of educational campaigns and media exposure.^[9,10]

CONCLUSION

The majority of women in the study fell between 26 to 30 years, with a high level of knowledge about

contraception (90%). However, only 50% followed temporary methods of contraception. Fear of side effects and myths emerged as the main barriers to contraceptive usage. The lack of detailed education about contraception and reproduction in secondary schools contributes to ignorance, with information often distorted when obtained from peer groups. Targeted interventions are essential to improve understanding, dispel myths, and enhance awareness about modern contraceptive methods, ultimately increasing access and utilization.

REFERENCES

- Chaudhury, S. K. (Ed.). (n.d.). Practice of fertility control: A comprehensive manual (7th ed.). Reed Elsevier India Private Limited.
- DiveDi, P., Rawat, R., Vishwakarma, S., Mittal, N., & Dwivedi, D. (2018). Cross-sectional study for contraceptive practices in antenatal women at a tertiary rural institute. International Journal of Research in Medical Sciences, 6(2), 618-622.
- Takkar, N., Goel, P., & Dua, D. (2005). Contraceptive practices and awareness of emergency contraception in educated working women. Indian Journal of Medical Sciences, 59, 143-149.
- Sajid, A., & Malikk, S. (2010). Knowledge, attitude, and practice of contraception among multiparous women at Lady Aitchison Hospital, Lahore. Annals of KEMU, 16, 266-268.
- Adinma, J. I., Agbai, A. O., & Nwosu, B. O. (1999). Contraceptive choices amongst Nigerian women attending antenatal clinic. Advances in Contraception, 15(4), 283-291.
- National Population Commission, Abuja Nigeria. (2009). Nigeria Demographic and Health Survey 2008: Fertility levels and differentials (p. 52).
- Brabin, L., Kemp, J., Obunge, O. K., Ikimalo, J. I., Doll, M. N., Odu, N. N., & Hart, C. A. (1995). Adolescent girls in rural Nigeria. Lancet, 345, 300-304.
- Onwuzurike, B. K., & Uzochukwwu, B. S. (2001). Knowledge, attitude, and practice of family planning amongst women in a high-density low-income urban area of Enugu, Nigeria. African Journal of Reproductive Health, 5(2), 83-89.
- Allagoa, D. O., & Nyengidiki, T. K. (2011). Knowledge, attitude, and practice of contraception among antenatal patients at the University of Port Harcourt Teaching Hospital, Port Harcourt. The Nigerian Health Journal, 11(3), July– September.
- Murugesan, A., Sundaram, R., & Muthuswamy, M. (2016). Awareness, attitude, and practice of contraception among antenatal women in a tertiary care hospital: A cross-sectional study. International Journal of Reproduction, Contraception, Obstetrics, and Gynecology, 5, 507-510.