

Knowledge Attitude & Practices about Oral Contraceptive Pills among Urban Women in Chhattisgarh- A Study Conducted in Urban Areas of Raipur

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Abstract

The paper presents the findings of a qualitative assessment which was conducted with the aim of exploring the practices, knowledge & attitude of married young women about oral contraceptive pills. The study also aimed to understand the factors which influence the uptake of OCP among married females. A quantitative study was conducted among females belonging to age group of 19-29 years. The data was collected through on ground activations conducted at beauty parlors located at urban areas by asking pre structured questions with females. The findings reveal that females had many myths & misconceptions related to use of OCP as a method of contraception. These myths & misconceptions were major reasons for low uptake of OCP as a chosen method of contraception. Reasons of not using OCP included problems of abnormal weight gain, failure to further conception, and deposition of pills in the stomach, lethargy & general illness due to consumption. The study concluded that there is a need to do innovative & focused IEC/BCC about oral contraceptive pills. There is also a need to address issues specific to myths on OCP, ensuring its ready availability & to popularize the positive impact that the OCP can have on females to increase the uptake of OCP as a preferred method of contraception so that females can fulfill their child bearing & reproductive health goals.

Keywords: Contraception; Sexually transmitted diseases; Family planning

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Background

As per census 2011 the population of India is 1.33 billion [1]. The growth of population of India is on a higher pace & it is estimated that with the current rate of growth it may easily surpass China by 2028. India's family planning interventions dates back to 1952. Being the world's first Country to adopt population policy, it has seen steady growth in terms of achievement of targets. Initially, these efforts were organized under the National Family Planning Programme which was renamed in 1977 as the National Family Welfare Programme. Since 2005, these efforts constitute an integral component of the National Rural Health Mission which has been lately renamed as National health Mission [2]. The pace of growth in terms of achievement of FP goals had been relatively low which can be correlated with total unmet need for contraception at national level being 20.5% (DLHS -3 2007,08) [1].

Limiting population's growth is important aspects of a country's program as it will help in improving the overall growth &

development by impacting on the living standards & quality of life of people. To ensure that people have different choices to control or manage their fertility, strategies for ensuring availability of effective contraceptive choices are being made available. This resulted the focus of family planning programs in India from being just as a driver of population control to improving the overall health of mothers & newborn. This had been achieved by giving choices to females on reversible methods of contraception which can be used for limiting pregnancies, dealing with unwanted pregnancies & also to create space between children [3]. The availability of spacing methods have also helped in reducing unwanted abortions, protection from sexually transmitted diseases including HIV [4]. Although there are so many choices available to females on family planning methods but still the uptake of these methods have been relatively low. A report published in WHO suggests that the contribution of India in maternal deaths is of 20% [5]. If family planning specially spacing methods can be implemented properly it can help in averting 30% of maternal deaths [5] Of all the methods which are available for

females for spacing, it has been noticed that oral contraceptive usage has been relatively low due to the myths & misconceptions associated with it [6]. Aims & Objective of the study is to find out the current levels of knowledge, awareness & attitude towards the use of oral contraceptive pills among females of reproductive age group & also to identify the reasons for not using it.

Method

Data Source

The study is based on the primary data collected from ten beauty Parlors located in urban areas of Raipur. The length of study was of 7 days & all the clients belonging to age group of 19-29 years were given a questionnaire to fill. In order to have a thorough representation of entire Raipur, the Parlors were selected from all the corners of Raipur city. The selection of parlors were based on the criteria that they should be in the catchment of slums of people who have a earning quintile of 6 lakhs per annum. The study was based on collecting information from married young females of age group 19-29 years through a prestructured questionnaire.

Total Respondents

The study was conducted in 10 Beauty Parlors located in urban locations of Raipur city which had proximity with slums. The activity was continued for 7 days in all 10 parlors with an average footfall of 20 clients per day. A total of 900 respondent's data was captured. The clients who were unmarried or those above age of 29 years were excluded from the study.

Study Design

The study is primarily a qualitative study in which the data has been collected on the basis of pre designed questionnaire. The questions were based on the current knowledge, myths & misconceptions & potential external barriers which are hampering the uptake of OCP among married females. The clients coming to urban beauty parlors were targeted for the study & were shared with a simple questionnaire in which they had to choose from the available options. The study is specifically designed for urban poor, married young females of age group 19-29 years.

Results

Awareness about OCP as a method of contraception: (Table 1).

Of the total respondents, 83% of married females had knowledge about OCP being a method of contraception (Table 2).

Table 1. Awareness of OCP as a method of contraception.

Awareness of OCP as a method of contraception		
Yes	1800	83.3
No	300	16.7

Table 2. Source of information about OCP.

Source of Information about OCP		
Health Care Provider	500	55.6
Peer (family & friends)	300	33.3
Media	100	11.1

Of the total respondents 500 (55%) had awareness about OCP's through health care provider, 300 (33%) through peers which included their family and friends & 100 (11%) got the information through social, print & audio media (Table 3).

Out of the total females only 5.6% responded of using OCP as a method of contraception. 61% had been using other methods which included both permanent & temporary methods of contraception & 33% were not using any methods (Table 4).

The responses of females for not using OCP were analyzed. 800 out of the 900 respondents had myths of getting obese & face multiple side effects due to the use of OCP. Almost 700 females had myth of being unable to conceive after its prolonged use. A total of 500 females complained of having general lethargic feeling & unable to contribute productively in household chores after using OCP's. Almost 200 females had myth of the pills getting deposited at their stomach (Table 5).

Table 3. Practice of OCP as a preferred method of contraception.

Practice of OCP As A Preferred Method of Contraception		
Not practicing any method	300	33.3
Pills	50	5.6
Other method	500	61.1

Table 4. Reasons for not using OCP as a method of contraception.

Reasons for not using OCP as a method of contraception		
Obesity	800	88.9
Pills getting collected in stomach	200	22.2
General lethargy	500	55.6
Unable to conceive after prolonged use	700	77.8
Other side effects	800	88.9

Table 5. Support from Home/Peers on use of contraceptive.

Support from Home/Peers on use of contraceptive		
Obesity	800	88.9
Husbands Opposing	275	30.6
MIL / other elders Opposing	350	38.9
Supportive	170	18.9
Neutral	105	11.7

The respondents upon asking whether they will face any kind of resistance from their family & peers on use of contraception revealed that 30% of them were opposed by husbands upon use of OCP in general or any kind of FP methods. 38% of Mother in Laws & other elders opposed upon use of family planning methods. There were 18% of peers & elders who were supportive & almost 11 % had no opinion about it.

Discussion

Family Planning is defined by WHO as, "a way of thinking and living that is adopted voluntarily upon the basis of knowledge, attitudes and responsible decisions by individuals and couples, in order to promote the health and welfare of family groups and thus contribute effectively to the social development of a country"⁹.

The growth of a nation can be ensured only if its population growth can be managed & controlled. The current study was carried out to understand what are the barriers specific to uptake of OCP as a method of family planning choices among married females. It revealed that there is enough awareness of OCP as a method of contraception. Health workers, social media & peers have been the source of information for getting knowledge about OCP, however due to these multiple channels of information it has also added to raising many myths & confusion about the use of pills. The myths on use of OCP as a method of contraception are many. The most common myth being its use causes obesity &

other multiple side effects. There was also a very common myth about OCP's that its prolonged use creates problems in further conception. As there are many myths associated with OCP's there is an urgent need to use multiple platforms and innovative approaches to target people to make them understand about OCP's & make it a preferred choice of contraception.

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