

A study of the awareness of of family planning among the rural population in Tamil Nadu

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Abstract— Objectives :

To assess the knowledge and attitude regarding family planning and the practice of contraceptives among the population of reproductive age group in rural parts of Kancheepuram Districts and to determine the barriers for contraceptive use among them. The study highlights that knowledge and awareness alone does not help in the use of does not. The need to educate and motivate the couples and improve family planning services to achieve more effective and appropriate use of contraceptives and to arrest the trend towards growth of population

Index Terms— Attitude, Awareness, Contraceptives, Family planning, Policies, Reproduction, Respondents.



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1 Introduction

India is second to China in being the most populous country of the world. India has the credit of launching the idea of Planned Family. The Govt of India launched a family welfare program in 1950's to accelerate the economic and social development by reducing the population growth. But this program has met with only marginal success. This is because people of India being multi linguistic, multi religious and multiethnic, have different levels of awareness and acceptance of methods of family planning. It is thus, necessary to develop special program to tackle the needs of different groups. Before launching a special program, a thorough understanding of the different set of people is of utmost importance.

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".

In recent years, the need for such studies to understand the factors determining the fertility, acceptance of the concept of family planning, has been on the upbeat. acceptance and practices by the people has been felt so strong, that gaining of more specific knowledge about factors determining family planning, its acceptance by mass has facilitated the developing of a suitable program for them. This study has been made to find the reasons for these unmet needs and factors affecting the outcome of family planning program and to have a better understanding of the situation in order help the Government in formulation of policies and modify its approach in this field. In rural Tamil Nadu, subjective efficacy and openness to change were related essentially to family planning attitudes, whereas in urban Tamil Nadu they were strongly related to adoption. In the latter area, the best linear association between the modernity variables (predictor set) and the family planning variables (criterion set) resulted when the criterion set was so weighted that it involved a large amount of adoption and a moderate amount of contraceptive knowledge and attitudes

2 PROCEDURE

A cross sectional descriptive study was done in the 3-4 villages along the cross section of the kancheepuram district. The study group included all the 438 men and women of reproductive age group (15-54 years), for the past 5 decades. The pattern of literacy rate and religious wise distribution of respondents residing in the villages is similar to the inclusion criteria: men and women of reproductive age group, living in the selected villages, and married and living together and who were willing to participate in our study. The exclusion criteria: men and women below or above reproductive age group those who were, not willing to participate in our study purpose sampling with snowball technique was used. A well-structured questionnaire was used for data collection on general information, knowledge and attitude regarding family planning methods, and contraceptive practices. Data were collected through questionnaire by interview technique. The dependent variables were knowledge, attitude, and practice of men and women regarding family planning. Independent variables were age of the women of reproductive age group, age at menarche, age at marriage, duration of married life, consultation of family planning and nature of family. Descriptive statistics was used for data analysis. All the collected data were analyzed with regard to the information given by the subjects in the set questionnaire

Results

Among the 438 men and women in the study group more than 80% were in the age group of 15 to 34. SC & STs were (27.8%) followed by MBC (36.1%), others as 20.1% and 16.4% respectively. 21.7% percent of the people were literate. almost all (73.1%) were married and majority (80.1%) of were housewives (table 1). Table 1. Socio demographic correlates (n=438).

Characteristics

Knowledge

Characteristics -		Number	Percentage
Age			
	15-18 years	198	44.7
	25-34	211	47.63
	34-54	34	7.7
Religion			
	SC & ST	340	76

	MBC	15	3
	BC	25	5
	Others	63	14
Literacy			
	Literate	360	83
	illiterate	83	18.7
Occupation			
	Homebased	355	80.1
	Unskilled	32	11.1
	skilled	36	8.1
Marital Status			
	Married	420	
	Unmarried	18	95.86
	Widowed/seperated	36	4.14

Knowledge

Eighty eight percent of the men and women had heard about family planning methods and only very few (12%) were unaware. About 54.4% of them got information about contraceptives form mass media (Table 2)

According to most of the people, family planning meant having small and happy family and only 29.8% said it was for birth spacing. Almost all (95.8%) of them had heard about oral contraceptive pills. 74.2% of them had heard about condoms and 72% were aware about Copper-T, and over half (67%) of them had heard about tubectomy and nearly one third (34%) were aware about vasectomy. Most of them knew that contraceptive were available in Government Hospital (62.8%) and Medical shops (52.5%) (Table 2)

Table 2. Knowledge and awareness regarding contraception (n=438).

Source	Number	Percentage
Heard about family planning	410	90
Aware of contraceptives	378	82
Know where to get contraceptives from	409	89
T.V/Radio/Newspaper/Magazine	239	52
Health personnel	35	7.9

Concept regarding small family norm * N=434

Spacing/Avoiding unwanted pregnancy and happy family	Small	64
4pregnancy	Small and happy family	374

. Methods of contraception *N=417

Oral pill	309	85.2
Tubectomy	98	39.1
Vasectomy	14	5.18
Conventional	51	12.9
others	112	27.2

Source of availability * N=413

Government hospital	259	62
Health Centre	128	30.9
Medical shop	68	16.4
Pharmacy	217	52.5

Reason for using contraceptive *

Having a child when required	81	19.5
Prevention of unwanted births	348	83
Prevention Sexually transmitted disease	348	
Spacing of birth	124	29.5
Improvement of health	34	8.2

* Multiple responses

83.5% of women knew that contraceptives were used for preventing unwanted births and only 8.2% knew that condom can be used to prevent sexually transmitted diseases. 44.6% women were not using contraception, but were willing to adopt family planning in future and over 98% women thought that family planning was beneficial and 93.2% said that they would like to encourage their friends and relatives to use family planning (Table 3).

Practice

Of 185 women who had used contraceptives, 85% were satisfied with contraceptives that they had used in the past and 62% were still using contraceptives and were satisfied with the contraceptives they were presently using. Among the user of contraceptives 37.9% of had oral pills and 31% the barrier method (condom). Twenty seven percent had undergone tubectomy and 24% had used IUD. 55.5% of the women chose the methods because they found it comfortable, and easy to use. In 41.6% of the women the choice of methods used was decided by their husbands (Table 4).

Barriers to using contraceptions

30.8% of women did not disclose the reason for not using contraceptives. 25.5% were not using any contraceptive because they were planning pregnancy, while 14.8% because they did not have knowledge about contraception. 10.6 were currently pregnant (Table 5).

Table 3. Attitude towards family planning (n=434).

Attitude	n=434	% age
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Use of contraceptives	194	415	98
would practice family planning/encourage friend to	196	394	92.1
never adopted FP	198	44	
Willing to adopt			

Table 4. Contraceptives in the past used ** (n=215) Oral

Contraceptive used	Number	Percentage
Pill	181	37.9
Condom	66	31
IUD	52	24.3
Tubectomy	58	27
Others	18	8.6

Reason for using them

Reason	Number	Percentage
Easily available	78	36.1
Comfortable and easy to use	119	55.5
Inexpensive	66	30.5
Husband's choice	89	41.6
others	30	13.8

Table 5. Barriers to using contraceptives * (n=198)

Barrier of contraceptive method	Number	Percentage
Currently Pregnant	87	47
Desire for a child	48	32
Lactation period	52	4.2
Religious faith restricts	8	8.5
Lack of knowledge	29	14
Fear of side effects	17	8.5
No response	51	30

Discussion

During the course of reference work, books, newspapers, articles, journals and web sources were searched. The literature about family planning in the context of Kancheepuram (Tamil Nadu) is found to be limited.

Findings:

In the present study, more than 80% were in the age group of 15 and 34 years and were literate. The age group characteristics were similar to the study conducted by Shrivastava et al¹ in Ghorakhpur but in their study nearly half of the respondents were illiterate and from rural background. Mohanan et al in a study from Dakshina Kannada concluded that majority (52.4%) of the women using contraception were in the age group of 15-34 years.

A survey conducted in Manipur by Donati et al concluded that the use of modern family planning methods increases with education, while female sterilization prevalence decline

sharply with women's education level. Muslims used lower rates of contraceptive use (17%) than Hindu (62%) even after controlling for education. This is also corroborated by our study wherein majority of users were Hindus 76% compared to only 3% Muslims.

In our study 54.4% had gained information from T.V / Radio, Newspapers and Magazines, 37% from friends and relatives, and only 7.9% from health personnel, whereas in Srivastava et al's¹ study 70% had gained knowledge of contraceptives from friends and family and 39% from television and radio. 95.8% of our subjects knew about the oral contraceptive pills, 74.2% about condoms, 72% about copper T, 67% about tubectomy and 34% about vasectomy while in Srivastava et al's study 82% were aware about female sterilization, 50% were aware of vasectomy, and IUCD was the most known (61%) temporary method followed by OC pills (60%) and condoms (50%). In their study 17% were not aware of any form of contraception as against 6% in our study. In our study 44.6% had never used any contraceptive compared to 55% in Srivastava et al's¹ study and 8% in Young et al's study done in New Zealand. In our study among the users of contraceptives 37.9% had taken oral contraceptive pills and 31% had used condoms while in Srivastava et al's¹ study 34% had used condoms, 26% natural methods and only 18% oral pills.

In a study done in fishermen in Tamil Nadu² almost two-fifths of the respondents had ever used some type of contraception during their married life and sterilization was the most accepted method. Singh³ et al in a study from Manipur conclude that 70% of the couples had adopted permanent family planning methods. In our study 27% of the used had accepted tubectomy. India being multi linguistic, multi religious and multi ethnic population, it is necessary to develop special program to tackle the needs of different groups.

Conclusion

Knowledge and awareness always do not lead one, to the use of contraceptives. One needs to understand the level of awareness and practices in the community before implementing the family planning program. There is a need to educate and motivate the couples along with improvement in family planning services to promote the contraceptives

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