

Unmet Need for Planned Family in the Women of Union Territory of Chandigarh

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Summary

A study sample of 429 patients (both from rural and urban areas of Chandigarh) shows that 41.7% of the patients are having their pregnancies totally unplanned. Of this 75.4% are before time and 24% are never wanted. In spite of literacy rate of 90% in urban area of Chandigarh 21.7% of patients had unplanned pregnancy suggesting that it is not the school and college education which prepares them for planned family but they need proper family life education in which they are taught about reproductive health and contraception. Their misconception and unfounded fears need to be removed by giving them in depth knowledge of effects, side effects and contraindication of various contraceptives. Participation of male and involving the men as audience and clientele will help solve this problem to a great extent. Husband often influence their wife's reproductive attitude both in positive and negative way.

Introduction

Millions of women around the world would prefer to avoid becoming pregnant either right away or forever but are not able to do so. These women are considered to have an 'unmet need' for family planning. The magnitude and reasons for unmet need vary in different regions and communities depending on the socio cultural back ground and literacy rate of these areas.

Union Territory of Chandigarh is one of better developed Territory with average female literacy rate of 72.34% (1991 census) which is much higher than the average national figures for female literacy. The aim of the present study had been to find out the extent and reasons for this unmet need for planned family in a sample of women of this area. All programmes related to family welfare can reach more people and serve them better if they respond directly to the concerns of the women.

Material and Methods

The data was collected at two set-ups, Gynae O.P.D. of Govt. Medical College, Chandigarh and dispensaries of Rural areas. Out of total 27 U.T. villages comprising 66, 186 population three villages namely Karsan, Maloya and Dadumajra were selected at random for the study purpose. All the 2nd Gravida onwards-antenatal women who came in Gynae O.P.D. or village dispensaries were interviewed. A pretested questionnaire containing both open as well as close ended questions were administered to acquire information from respondents. Total 429 women were interviewed for the study purpose out of which 170 were from urban and 259 from Rural Area.

Results

Out of total of 429 patients 259 (60.3%) belonged to rural area & 170 (39.6%) belonged to urban area.

Literacy rate in women of urban area was 90% while it was 45% in women of rural area giving an average literacy rate of 62.9% in the present study sample. As a whole 179 (41.7%) of the patients had their present pregnancy unplanned, of this 43 (24%) were those pregnancies which were never wanted and patient continued with these pregnancy thereby adding additional birth in the family, in society and country. One hundred thirty five (75.4%) pregnancies were before time. There were more unplanned pregnancy in rural area 142 (54.8%) as compared to urban area 37 (21.7%) and this difference in pregnancies which were before time or never wanted in both rural and urban area (Table I).

Out of total 179 patients with unplanned pregnancies 107 (59.7%) patients were those who never used any contraceptive. In rest pregnancies occurred because of the patients inconsistent use of contraceptive. While analyzing the reason for non use of contraceptive in these 107 patients we observed that 41 (38.3%) of the patients did not use contraceptive for fear of side effects with almost equal distribution in rural as well as in urban

area (35.7% Vs 38.3%). Unfortunately in majority 36 (87.8%) these fears were unfounded and based on mere hear say, only very small percentage of patients 5 (12.1%) patients had personal experience of side effects in the past. Opposition from family was second important reason for non-use of contraceptive in 37 (34.5%) of the patients. Opposition from husband was significantly more in women of rural origin 30 (93.7%) as compared to women from urban area 3 (60%) ($P < 0.05$). Lack of information and non-availability of contraception were cited as reason for non-use of contraceptive in small percentage of women of urban and rural area respectively (1.8% and 5.6%). Twenty one (19.6%) of the patients did not use contraceptive as they had misconception that they were not likely to conceive because they had infrequent sex (10 patients) of which 9 belonged to rural area, eleven patients had the misconception that pregnancy does not occur during breast feeding and lactational amenorrhoea (Table II).

On the other hand out of 250 patients who had their pregnancy as planned 126 (50.5%) of patients attributed their success for planning the pregnancy to

Table I
Shows Literacy Rate & Unplanned Pregnancy in Rural LVS Urban Area

	Rural N=259	Urban N=170	Total N=429
Literacy Rate	117 (45%)	153 (90%)	62.9%
1. Unplanned Pregnancy	142 (54.8%)*	37 (21.7%)	179 (41.7%)
a. Never Wanted	31 (21.8%)	12 (32.4%)	43 (24%)
b. Before time	110 (77.4%)	25 (67.5%)	135 (75.4%)
c. After time	1 (0.7%)	0	01 (0.5%)

* $P < 0.05$

Table II
Distribution of Reasons in Rural and Urban Areas for not using any Contraceptive Method among Unplanned Pregnancies

Reasons	Rural N=93	Urban N=14	Total N=107
1. Fear of Side Effects	36 (38.7%)	05 (35.7%)	41 (38.3%)
a. Hear say	32 (88.8%)	04 (80%)	36 (87.8%)
b. Personal Experience	04 (11.1%)	01 (20%)	05 (12.1%)
2. Opposition from family	32 (34.4%)	05 (35.7%)	37 (34.5%)
a. Husband	30 (93.7%)*	03 (60%)	33 (89.1%)
b. Mother-in-law	02 (6.2%)*	02 (40%)	04 (10.8%)
3. Lack of Information	02 (2.1%)	0	02 (1.8%)
4. Non Availability	04 (4.3%)	02 (14.2%)	06 (5.6%)
5. Misconception	19 (20.4%)	02 (14.2%)	21 (19.6%)
Infrequent sex	09 (47.3%)	01 (50%)	10 (47.6%)
Breast Feeding and Lactational amenorrhoea	10 (52.6%)	01 (50%)	11 (52.3%)

* $P < 0.05$

their husband either by using condoms very regularly or by encouraging the women to use contraceptive.

Discussion

In developing countries over 100 million women of reproductive age have unmet need for spacing or limiting their pregnancies. India has almost 31 million of women whose need for contraception is unmet (Population reports 1997). In present study sample of 129 pregnant mothers, 41.7% of patients had unmet need for contraception and they landed up having unplanned pregnancies which were either never wanted (24%) or were before time (75.4%). Even with literacy rate of 90% in urban women of Chandigarh 21.7% of the patients had unplanned pregnancy suggesting thereby that mere school, college education does not equip them with the knowledge of planning the family. Family life education which help young girls to plan their productive life is integral part of education in many of the developing countries. This education includes discussion on reproductive physiology, sexuality and contraception. Unfortunately this type of education is under gross neglect in our country. Out of 107 patients who did not use contraceptive it was observed 41 (38.3%) of the patients did not use contraceptive for the fear of side effects. The fears are based on mere hear say in 36 (87.8%) of patients and are equally prevalent in rural and urban area. Various studies from different parts of the world have shown that women have heard fantastic rumors and alarming stories about the harmful side effects of contraception [Shrestha et al (1988), Schuler et al (1994)]. Poor quality service or method lead to real health problem that in turn becomes the basis for exaggerated rumors.

Opposition from family especially husband had been other important factor for non-use of contraceptive. With the concept of nuclear family the women today is dictated more by the husband than by mother-in-law. Studies from different countries have shown that many women do not use contraceptive because their husbands are opposed [Cornelius (1986), Schuler et al (1994)]. Husbands often influence their wife's reproductive attitude. A study from Indonesia showed that unmet need for planned family can be reduced to one half if all husbands approved of contraception Joesoef et al (1988).

Focussing on men and involving men and involving men as audience or clientele is crucial. In the present study itself in 250 patients where pregnancy was planned 50.5% of the patients attributed the success of their planned pregnancy to their husband either by very regular use of condom or by encouraging the women for contraception in the form of CuT or pills.

Although total lack of information (1.8%) and non availability of contraceptive (5.6%) was found in very small percentage of this study sample still the contraceptives usage was very poor. This is because they lack sufficient and proper knowledge about these contraceptive. In depth studies show that many women may be aware of at least one method but they do not know how the method works? What are side effects? How to obtain them? [Bongaarts and Bruce (1995)].

Twenty-one (21) 19.6% of the women did not use contraception as they felt that they were not likely to become pregnant due to various misconceptions. They felt they were not likely to become pregnant because their sexual activity was infrequent or they were breast feeding and had lactational amenorrhoea. Imparting proper and thorough knowledge on family life in school and colleges will remove their misconception.

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