www.jmscr.igmpublication.org Index Copernicus Value: 79.54

ISSN (e)-2347-176x ISSN (p) 2455-0450

crossrefDOI: https://dx.doi.org/10.18535/jmscr/v7i3.28



Original Article

Assessment of Unmet Need for Family Planning among Married Women in A Rural Area of Katihar District

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Abstract

Introduction: Unintended fertility fuels a rate of population growth that is outpacing the country's effort to meet the social needs of its citizens and achieve national development goals. The quality of life of large population of humanity during the coming century and future size of global population depend on how quickly the world can satisfy the current unmet need for family planning.

Aims & Objectives (1) To assess the magnitude and composition of unmet need for family planning among married women. (2) To know the reason for unmet need and to develop strategies to address the unmet need for family planning.

Methodology: The present study was conducted in rural field practice area, Hazipur, of Katihar Medical College during January to June 2018. According to Annual health Survey 2011-12, the unmet need for family planning in rural area of Katihar was 48.6%. Therefore taking prevalence 48%, the sample size came to 433 married women aged between 15-49 years age group. Using systematic random sampling technique, every third married women included in the study. Data was collected using a questionnaire and analyzed by epi info 7 version of statistical software.

Results: in present study out of 433 married women, 38.57% were using contraceptives, 28.41% were non users of contraceptives, 25.87% were ANC and PNC, and 7.16% were infaecund. Prevalence of unmet need for family planning was 30.49%. More Muslim women had unmet need (95.45%) as compared to Hindu (3.79%). More number of married women with unmet need was illiterate (76.52%). The main reasons for unmet need were unaware of methods (67.42%), objection to use contraceptives (12.88%). 14.39% said that they came to know recently and 3.03% said about desire for more children by husband/family members.

Conclusion: The factors associated with unmet need for family planning in our study were poor literacy status of married women, unawareness about methods and desire of family members for more children. **Keywords:** Unmet Need, family Planning, Married women.

Introduction

Unintended fertility fuels a rate of population growth that is outpacing the country's effort to

meet the social needs of its citizens and achieve national development goals. The quality of life of large population of humanity during the coming

century and future size of global population depend on how quickly the world can satisfy the current unmet need for family planning.

Millions of women worldwide would prefer to avoid becoming pregnant either right away or never get pregnant, but are not using any contraception. These women are said to have an "unmet need" for family planning¹. The concept of unmet need points to the gap between some women's reproductive intentions and contraceptive behavior². Unmet need can be a powerful concept for family planning programs because it is based on the women's own statement in answer to survey questions, and it identifies the likely to be interested group most contraception, but who do not use it. The challenge is for family planning to reach and serve these women.

According to National Family health Survey 2015-16 (NFHS-4), the unmet need for family planning in India was 12.9% with 5.9% for spacing and 7.2 % for limiting. The unmet need for family planning in Bihar was 21.2% with 9.4% for spacing and 11.8% for limiting.³

Unmet need has received an unprecedented level of scrutiny since it is included in Millennium Development Goals as target 5.6 i.e. Achieve, by 2015, universal access to reproductive health.⁴ Recently the Sustainable Development Goals have also focused on reproductive health issues and gender equity in its target 3.7 and 5.6.⁵

This study was carried out among the eligible couples of urban area of Katihar district, India with the objective to assess the prevalence of Contraceptive use and asses the unmet need for contraception, as also to identify factors related with unmet needs for contraception.

Methodology

Study setting- The present study was conducted in the rural field practice area, Hazipur of Department of Community Medicine, Katihar Medical College. The population of village Hazipur is approximately 10,000 and there was approximately 1500 registered eligible couples.

Most of women were housewives or involved in farming. Very few were either in Government or Private Job.

Study Design- Cross- sectional Study **Study Period**- June 2017 to June 2018

Study participants- Married women (15-49 Years)

Sample Size- Considering the 48 % prevalence of Unmet need for family planning in rural area of Katihar (AHS 2011-12), the sample size calculated as-

Minimum sample size (n) = 4pq d^2

- Taking "Estimated prevalence" (p) =48%.
- q=(100-p)=52 (women without unmet need)
- d=error (10% of p), i.e. 4.8

(n)=
$$4 \times 48 \times 52 = 433$$

 4.8×4.8

By using systematic random sampling method every 3rd women included in study among 1500 registered married women. First, each house marked in serial number. Then first number was picked randomly and afterward every third house was included in study. If the married woman was not available then next house was included.

Inclusion Criteria

- Married women who are neither pregnant nor amenorrheic, who either didn't want any more children or wanted to postpone their pregnancy for at least two years but not using contraceptives.
- Married women who were pregnant, whose pregnancy was mistimed or unwanted.
- Married women who were amenorrheic (postnatal who had given birth to a child in past 6 months), whose previous child birth was mistimed or unwanted)
- Married women who were using natural methods of contraception.

Exclusion Criteria

• Married women (15-49 years), who were using modern contraceptive methods.

- Married women whose present pregnancy was intended/ wanted.
- Married women who were amenorrheic (postnatal) whose recent birth was intended/ wanted.
- Married women who were not using contraceptives, who wished to have children (within 2 years)
- Married women with primary and secondary infertility.
- Married women in whom pregnancy occurred due to contraceptive failure.

Data Collection and Analysis

A pre designed, pre tested questionnaire was used for data collection regarding socio- demographic and other information. Around 25% (100 married women) of data had been collected by researcher and rest by Interns and PG students after explaining the questionnaire. Data was compiled

and analyzed by using epi info 7 statistical software.

Observations and Results

Table 1 Distribution of married women according to fecundity

Fecundity	No	%
Fecund (402)		
User of contraceptive (Met Need)	167	38.57
Non-user of contraceptive	123	28.41
ANC & PNC	112	25.87
Infecund (31)		
Primary Sterility	9	2.08
Secondary Sterility	22	5.08
Total	433	100.00

In the present study, out of 433 married women 38.57% were using contraceptives, 25.87% were ANCs & PNCs, 7.16% were infecund. Out of them primary sterility were 2.08% and secondary sterility 5.08%.

Table-2 Distribution of Married women depending on their need for family planning

S/No	Married Women	No.	%	Total (No.)	Total (%)
1	Met Need			167	38.57
2	Fecund with UMN Spacing	26	6.00	83	19.17
3	ANC with UMN spacing	45	10.39		
4	PNC with UMN spacing	12	2.77		
5	Fecund with UMN Limiting	24	5.54	49	11.32
6	ANC with UMN Limiting	14	3.23		
7	PNC with UMN Limiting	11	2.54		
8	No Need (<2 children)			62	14.32
9	No Need (>2 children)			41	9.47
10	Sterile (Primary+ Secondary)			31	7.16
	Total			433	100.00

In our study out of 433, 167 (38.57%) married women's contraceptive needs were met, 132 (30.49%) had unmet need for family planning, 19.17% had unmet need for spacing and 11.32% for limiting. Out of 134 married women who were

not having unmet need for family planning, 103 (23.79%) were fecund and 31 (7.16%) were having either primary and secondary sterility hence did not require contraceptive.

Table 3 Association between literacy status of women and Unmet need

Literacy Status	With UMN		Withou	ut UMN	Total		
	No.	%	No.	%	No	%	
Illiterate	101	76.52	33	12.22	134	33.33	
Primary Education	21	15.91	163	60.37	184	45.77	
Secondary Education	9	6.82	51	18.89	60	14.93	
High School & Above	1	0.76	23	8.52	24	5.97	
Total	132	100.00	270	100.00	402	100.00	

 χ 2 = 165.83, df = 3, p < .0001

More number of illiterates (76.52%) were having unmet need for family planning as comparison to 12.22 % married women who don't have unmet

need for family planning. The difference was statistically significant.

Table 4 Association between Religion of women and UMN

Religion	With UMN		Withou	ut UMN	Total		
	No.	%	No. %		No	%	
Hindu	5	3.79	24	8.89	29	7.21	
Muslim	126	95.45	242	89.63	368	91.54	
Other	1	0.76	4	1.48	5	1.24	
Total	132	100.00	270	100.00	402	100.00	

 $\chi 2 = 3.9$, df = 2, p > 0.05

Though about 95 % of married women with unmet need belongs to Muslim religion as compared to 3.79% of women with Hindu Religion, there was no association between unmet

need and religion. Due to less representation from Hindu and Other religion it is difficult to comment on association.

Table 5 Association between Type of family and UMN

Type Of family	With UMN		Withou	ıt UMN	Total		
	No.	%	No.	%	No	%	
Nuclear	60	45.45	167	61.85	227	56.47	
Joint	72	54.55	103	38.15	175	43.53	
Total	132	100.00	270	100.00	402	100.00	

 χ 2 = 9.04, df = 1, p < 0.05

More number of married women (54.55%) with unmet need for family planning belongs to joint family as compared to women without unmet need (38.15%). 45.45% of married women with unmet

need and 61.85% without unmet need living in nuclear family. The difference was statistically significant.

Table 6 Reason for UMN for family planning among women

Reason	With UMN		Without UMN		Total	
	No.	%	No.	%	No	%
Unaware	89	67.42	137	50.74	226	56.22
Objection to use	17	12.88	32	11.85	49	12.19
Came to know recently	19	14.39	60	22.22	79	19.65
Desire of more child by Family Members	4	3.03	11	4.07	15	3.73
Fear of side effects	3	2.27	30	11.11	33	8.21
Total	132	100.00	270	100.00	402	100.00

 $\chi 2 = 15.93$, df = 4, p < .01

In our study, 67.42 % of married women with unmet need said that they were unaware of family planning methods, 12.88% said objection from family members and 14.39% said they came to know about contraceptives recently. Among 3.03% of married women, family member or husband wanted more children and 2.28% said about fear of side effects.

Conclusion & Discussion

Out of the 433 married women interviewed, 132 (30.49%) had an unmet need for FP, 19.17% for spacing and 11.32% for limiting. A study done by Malini M. Bhattathiry⁶, in Tamilnadu, the prevalence of unmet need was 39%, similar to our study. There was significant association between educational status, type of family and UMN.

These findings are in accordance with those of various other studies conducted elsewhere^{4, 5, 6, 7}. Our study found that the commonest reason for non-usage of contraceptive methods was lack of knowledge (37.5%) followed by in-laws disapproval (12.19%). Patel et al⁸ in their study found that lack of knowledge (55%) and ignorance (25%) as the common reasons. Wasnik et al⁹ had also reported similar findings.

Recommendations

In our study about 67.42 % of married women with unmet need not heard about family planning methods. The role of Health workers should be major in motivating MW to use contraception for regulation of fertility.

Motivating men to come forward to use both temporary and permanent methods of contraception, and to support their wives in keeping the family small and also support them in using contraceptives.

Policy makers and program managers can strengthen family planning programs by understanding and using data on unmet need, considering the characteristics of women and couples who have unmet need, and working to remove obstacles that prevent individuals from choosing and using a family planning method.

Acknowledgement:

Authors thank all Intern Doctors who participated in this study. Authors also thank all faculty members of Department Of Community Medicine for their kind support and valuable suggestions for preparing this manuscript.

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