

Who are the women wishing to opt for contraception?

Khudija Mushtaq¹, Mariam Ashraf², Inayat Hussain Thaver³

Abstract

This descriptive cross-sectional research study was conducted to determine the characteristics of the women who intend to use a modern family planning method. For this 154 women were selected in a small village and face-to-face interviews were conducted. The findings indicate that 86 (56%) women intended to use a contraceptive method. The regression model showed that women who had the knowledge about different methods, those who had previously ever used family planning method and those who had never used any traditional method are more likely to adopt modern contraceptive methods.

Keywords: contraception, practices, family planning

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Introduction

According to the World Health Organisation, there are 214 million women of reproductive age in developing countries who want to avoid pregnancy but are not using a modern contraceptive method.¹ Contraceptive methods are classified as modern or traditional. Modern methods include female sterilisation, intrauterine contraceptive device (IUD), implants, injectable, the pill, condoms, and lactation amenorrhoea method (LAM). Methods such as rhythm, withdrawal, and folk methods are grouped as traditional.² For this research, modern methods refer to condoms, oral contraceptive pills, injections, implants, intrauterine device and tubal ligation. In Pakistan, there are an estimated 31 million married women of reproductive age (MWRA), out of which 35.4 percent are using contraceptive methods, with 26.1 percent using modern contraceptives and 9.3 percent are on traditional methods. A further 20.1 percent women, have or have never used contraceptives in the past and are living with unmet FP need.³ Among the modern methods, female sterilisation/tubal ligation is the most common method — around 45% of the modern methods — and is often chosen late, i.e. after 31.5 years of age, and usually after four or more children. The short-term methods, such as condoms,

accounted for around 23%.⁴

The optimal use of modern contraceptive methods can help prevent unintended pregnancies and induced abortions in low- and middle-income countries (LMICs), and will directly contribute to improved maternal and child health outcomes.⁵ Family planning also has the potential to reduce poverty worldwide by improving educational and economic outcomes for women.⁶ According to a study that applies to about one-third of the world's population, 15 million out of 16.7 million unwanted pregnancies a year could be avoided in 35 low- and middle-income countries if women had the opportunity to use modern methods of contraception.⁷ According to the latest Pakistan Demographic and Health Survey (PDHS), contraceptive prevalence rate (CPR) has not significantly increased for the last decade; the current rate is 34% in PDHS 2017-18 and was 35% in PDHS 2012-13.²

Limited research has been conducted in Pakistan to explore the characteristics of the women who are willing to use any family planning method in the future. Therefore, this study aimed at identifying the characteristics of the woman who are willing to adopt a modern method.

Methods and Results

This cross-sectional, descriptive study was conducted from March 2018 to May 2018. Data was collected from a small rural village near Lahore. The sample size was calculated using Slovin's formula⁸ $n = N/(1+Ne^2)$ at a confidence level of 95%. N is the population and was taken as 250 — an estimated MWRA living in the village. A nonprobability convenient sampling technique was used. A total of 154 women were selected, and the participants were interviewed, following written informed consent. Ethical approval was sought from the ethical committee of Department of Public Health, Hazara University, Pakistan. The selection criteria included married women of reproductive age group (18-49 years) and who were resident of the village. A self-administered questionnaire was adapted for data collection. The questionnaire consisted of two sections; section one inquired about the socio-demographic characteristic of the women, while section two related to knowledge, attitude, and practices towards family planning and intention to adopt a method.

The mean age of the participants was 26±6 years with

¹Department of Nursing, Postgraduate College of Nursing Punjab, Lahore, Pakistan; ²Department of Community Health. University Kebangsaan Malaysia, Malaysia; ³Department of Community Health Sciences, Bahria University Medical and Dental College, Karachi, Pakistan.

Correspondence: Mariam Ashraf. e-mail: maryamashraf@hotmail.com

Table 1: Demographic characteristics of the participants (n=154)

Age in Years	Mean age 26+6 years	n (%)
18-25		82 (53)
26-30		29 (25)
31-40		26 (17)
>41		7 (5)
Number of years married		
>5 years		12 (8)
6-10		85 (55)
11-15		29 (19)
16-20		14 (9)
21-25		14 (9)
Educational Status		
None		104 (67)
Less than and up to primary		37 (24)
Secondary		10 (7)
Intermediate		2 (1)
Higher		1 (1)
Working status		
Working		2 (1)
Not working/Housewives		152 (99)
Number of children		
1-2		30 (20)
3-5		100 (65)
6-8		21 (14)
>8		3 (1)
Desire for more Children		
Yes		59 (38)
No		95 (62)

majority, i.e. 104 (67%), having no formal education and were housewives. Majority 124 (80%) had more than two children out of which 95 (62%) women had no further desire for more children. (Table 1).

Regarding the knowledge of family planning, 100 (65%) women reported having some knowledge about family planning and 80 (52%) acknowledged having knowledge about various family planning methods. The most common source for seeking information, as reported by 58 (58%) women, was a health facility (private clinic) or a pharmacy, whereas only a small number of women, 31 (48%) reported having knowledge about family planning centres. Most of the women, 110 (71%), considered family planning important, while others, 44 (29%), did not consider family planning important due to religious reasons and because of side effects. More than half, 84 (55%), reported having ever used any kind of method. The most common method used included short-term methods (condoms 65%, followed by oral contraceptive pills 18%). Only a small number of women, 36 (23%), reported visiting a health facility for their supplies. Sixty-one percent of these women also accepted having used traditional family planning methods, which included breastfeeding and withdrawal method. When asked about their intention to use any

Table 2: Knowledge, attitude and practice towards Family Planning

Knowledge about family planning	n (%)
Yes	100 (65)
No	54 (35)
Knowledge about different methods	
Yes	80 (52)
No	74 (48)
Source of Knowledge	
Television/Radio	12 (12)
Family/friends	30 (30)
Facility/pharmacy	58 (58)
Total	100
Knowledge about family planning centres	
Yes	48 (31)
No	106 (69)
Consider family planning important	
Yes	110 (71)
No	21 (14)
Not sure	23 (15)
Reason for not considering FP (n=44)	
Religion	18 (41)
Fear of side effects	26 (59)
Ever used	
Yes	84 (55)
No	70 (45)
Type of method used	
Intrauterine device	6 (7)
Implant	1 (1)
Contraceptive injection	7 (8)
Oral pills	15 (18)
Condoms	55 (65)
Total	84 (100)
Visited health facility/FP clinic for using method	
Yes	36 (23)
No	118 (77)
Type of facility visited	
Private local clinic	25 (69)
Government tertiary care facility	11 (31)
Total	36 (100)
Ever used traditional method	
Yes	94 (61)
No	60 (39)
Intention to use contraceptives	
Yes	86 (56)
No	68 (44)

modern method of family planning, only 86 (56%) women reported that they intend to use a modern contraceptive method and out of these 21 (31%) had the intention to use it within six months while others wanted to use it after one year or more. (Table 2)

The main outcome of this study was the intention of the women to adopt/use a modern method. Chi-square test was run to study the association of various characteristics with outcome variable. Significant association was found between intention to use or adopt a modern method with

Table 3. Intention to use family planning methods depending on various characteristics

Characteristics of the women		Intention to use FP method		p-value
		Yes [n (%)]	No [n (%)]	
Age groups	<29 years	67 (78)	41 (60)	0.022
	≥29 years	19 (12)	27 (40)	
Duration of marriage	Less than 10 years	59 (69)	38 (56)	0.131
	More than 10 years	27 (31)	30 (44)	
Education	No education	63 (73)	41 (60)	0.020
	Less than and up to primary	13 (15)	24 (35)	
	Secondary	7 (8)	3 (4)	
	Intermediate	2 (0)	0	
Working status of women	Housewives	73 (85)	62 (91)	0.325
	Working	13 (15)	6 (9)	
	More than 5	8 (9)	16 (23)	
Number of children presently	Less than 5	78 (91)	52 (77)	0.024
	More than 5	8 (9)	16 (23)	
Knowledge about FP	Yes	70 (82)	30 (43)	0.000
	No	15 (18)	39 (57)	
Knowledge about FP methods	Yes	63 (73)	17 (25)	0.000
	No	23 (27)	51 (75)	
Knowledge about FP centres	Yes	36 (42)	12 (18)	0.002
	No	49 (58)	55 (82)	
Think FP is important	Yes	82 (95)	28 (41)	0.000
	No	1 (1)	20 (29)	
	Not sure	3 (4)	20 (29)	
Ever used FP methods	Yes	68 (80)	14 (21)	0.000
	No	17 (20)	54 (79)	
Use traditional methods	Yes	66 (78)	28 (41)	0.000
	No	19 (22)	40 (59)	

Table 4: Predictors of the wish to opt for family planning

S No.	Characteristic	Category	β	OR - Adj	95% CI of OR	p-value
1.	Education	Educated primary and more	-1.00	0.36	0.13 – 0.98	0.04
		No formal education	1			
2.	Number of children	Less than 5	-1.06	0.34	0.09 – 1.30	0.11
		More than 5	1			
3.	Knowledge about Family Planning	Yes	-0.19	0.82	0.20 – 3.35	0.79
		No	1			
4.	Knowledge about Methods	Yes	1.09	2.98	0.88 – 10.1	0.05
		No	1			
5.	Consider FP important	Yes	1.38	3.99	0.31 – 50.8	0.28
		Not sure	-1.75	0.173	0.37 – 0.81	0.02
6.	Ever User	Yes	1.20	3.34	1.12 – 10.0	0.03
		No	1			
7.	Traditional method user	Yes	-1.32	0.26	0.10 – 0.69	0.00
		No	1			

* Hosmer and Lemeshow Goodness of Fit test p-value < 0.76

sociodemographic characteristic of the women ($p < 0.05$). Similarly, significant association was found between knowledge of family planning, knowledge of methods, having used in the past, number of children and intention to use any method with a p -value < 0.05 (Table 3). Multivariate logistic regression analysis was conducted to identify associated factors for intention to use a modern

method with the approach of parsimonious model building and screening criteria of p -value < 0.20 at the univariate level and < 0.05 at the multivariate level. The model preparation was subjected to Hosmer and Lemeshow goodness of fit test. The final derived multivariate model was found to be good fit ($p < 0.76$).

It was revealed that the women who were formally educated (primary or more) were 0.36 times less likely to use any method compared to those without any formal education; this was statistically significant with a p -value of 0.04. Women who had knowledge about family planning methods were 2.98 times more likely to adopt a method compared to those who had no knowledge about different methods ($p = 0.05$). Similarly, women who were not sure that family planning is beneficial were 0.17 times less likely to adopt it. However, those women who had ever used family planning were 3.34 times more likely to use or had the intention to adopt a method compared to non-users. Similarly, those women who have been using traditional methods were 0.26 times less likely to adopt any method ($p = 0.00$).

From the above it may be derived that women with knowledge about different methods, who had previously ever used a family planning method and non-user of traditional methods are more likely to adopt contraceptive methods. (Table 4)

Discussion

The results of our study show that only 84 (55%) women were using contraceptives and the most common method reported was condoms, whereas 65 (55%) were on pills. Long-term methods such as IUCDs and implants were the least common methods used. These findings are similar to overall findings related to Pakistan which shows very little use of

long-acting reversible contraceptive methods, while short-term and permanent methods have greater utilisation.⁴ Another study carried out by Pakistan Bureau of Statistics also reports condoms as the most common method adopted in Pakistan.^{2,9,10} However, 61% of the women also reported using traditional methods. These are similar to the

findings where the use of traditional methods was one of the major contributors among the use of mixed methods.⁷

In this study, it was found that women having knowledge about family planning methods were 2.98 times more likely to adopt family planning as compared to those who had no knowledge about different methods. This study also indicates that majority of the women buy their contraceptives from a pharmacy instead of consulting a healthcare provider. These findings are similar to another study¹¹ which indicates that women tend to buy their supplies from pharmacies and are therefore, not counselled on the correct use of contraceptives and do not have the recourse when they experience side effects. In our study, one of the main reasons for not using family planning was fear of side effects reported by 26 out of 44 women who did not consider family planning important. Fears about the side effects are well-documented barriers¹⁰ and this may improve if women are asked to consult a healthcare provider for use of any method.

Conclusion

From this research we can conclude that women who intend to use a modern method are those who are past users, do not rely on traditional methods and have knowledge about various family planning methods. Therefore, increasing knowledge about various methods and adding new users will support in improving the overall contraceptive prevalence rate. One of the key limitation of this study was that it was carried out in a small rural district with a limited sample size, and therefore the findings of this study cannot be generalised.

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