

Unmet Needs of Contraception in an Urban Area of Manipur: A Cross-Sectional Study

Gitashree Dutta¹, Shantibala Konjengbam², Cherubie M Sangma¹, Brogen Singh Akoijam³, Kh Sonarjit Singh¹, A. Mercy¹

PGT¹, Associate Professor² Department of Community Medicine, Regional Institute of Medical Sciences, Imphal, Manipur, India

Professor & Head³ Department of Community Medicine, Regional Institute of Medical Sciences, Imphal, Manipur, India

Corresponding author: Shantibala Konjengbam

Abstract:

Introduction: Women with unmet need are those who are fecund and sexually active but are not using any method of contraception, and report not wanting any more children or wanting to delay the next child. Around 215 million women are said to have an unmet need for modern contraception. Women with unmet needs account for a large majority (82%) of unintended pregnancies. Abortion is a major consequence of unintended pregnancy, and in many developing countries that restrict abortion, terminations often are performed under unsafe conditions and result in women dying or suffering serious injuries. Unintended pregnancies can lead to delayed or no antenatal care, which can pose health risks to both mothers and infants. Keeping this in background, the study was conducted to determine the prevalence and factors associated with unmet needs among married women of an urban area of Manipur.

Methods: A cross sectional study was done on 178 participants by doing face to face interview using a structured questionnaire. The data was analyzed using software IBM SPSS Statistics for Windows, Version 21.0. Armonk, NY.

Results: 74.2% of the participants were having unmet needs of contraception. The participants whose husbands' did not approve of using contraception and those participants who did not use contraception even once in their lifetime were significantly associated with unmet needs.

Conclusion: 7 out of 10 women were found to have unmet needs. Women who did not used any methods of contraception ever in her life and those whose husbands did not approve of using contraception were significantly associated with unmet needs.

Keywords: Unmet needs, contraception.

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I. Introduction

Women with unmet need are those who are fecund and sexually active but are not using any method of contraception, and report not wanting any more children or wanting to delay the next child. The concept of unmet need points to the gap between women's reproductive intentions and their contraceptive behaviour [1]. Around 215 million women are said to have an unmet need for modern contraception [2]. According to the NFHS-4, the national figure for unmet need is 12.9% [3]. Women who want to avoid pregnancy but are not using an effective method of contraception, account for a large majority (82%) of unintended pregnancies [4, 5]. Abortion is a major consequence of unintended pregnancy, and in many developing countries that restrict abortion, terminations often are performed under unsafe conditions and result in women dying or suffering serious injuries. Unintended pregnancies can also lead to delayed or no antenatal care, which can pose health risks to both mothers and infants. A better use of family planning could reduce many of these mistimed and unplanned pregnancies, while at the same time it could reduce the number of unsafe abortions as well as the mortality related with child birth [6, 7, 8, 9]. Keeping this in background, the study was conducted to determine the prevalence and factors associated with unmet needs among married women of an urban area of Manipur.

II. Material and Methods

Study Design: Cross sectional study.

Study Location: Athokpam area in Thoubal district of Manipur. The district occupies an area of 519 km². The population as of 2011 is 422,168.

Study Duration: 9th Oct to 4th Nov, 2017.

Sample size: 178 participants.

Sample size calculation: The sample size was estimated on the basis of prevalence of 27.3% from a previous study done in Puducherry, India [11]. An absolute allowable error of 7%, non-response rate of 10%, 95% confidence interval was considered.

Study population: Currently married women of reproductive age group (15-49 yrs) was considered.

Exclusion criteria:

1. Those who refused to participate
2. Those who were not available on the day of visit
3. Those who are infertile
4. Those who have attained menopause

Sampling: Consecutive sampling was done. 1st house was selected by standing in front of a community hall and spinning a bottle. The house which faced the tip of the bottle was selected and from there data collection was started.

Study tool: A pre tested, structured questionnaire was used which consisted of two parts i.e Part A which had questions on socio-demographic characteristics and Part B with questions on unmet needs of contraception.

Outcome variable: Unmet needs of contraception.

Operational definition: Women was said to have unmet needs if she fulfills any of the following criteria:

1. If her current pregnancy was mistimed or unwanted.
2. If she was not using any contraceptives even though she was not planning for any child soon or wish to limit childbirth.
3. If her last pregnancy was mistimed or unwanted.

Data collection: Prior to the study initiation, an informed verbal consent was taken from the women. The participants were briefly explained about the study. The participants were reassured about their anonymity. Data were collected by face to face interview method using a structured questionnaire.

Statistical analysis: Data was collected and checked for consistency and completeness. Data were entered in IBM SPSS Statistics for Windows, Version 21.0. Armonk, NY. Descriptive statistics like mean, SD and percentage were used. Chi square was used to assess association between unmet needs and the socio-demographic factors. A probability value of < 0.05 was taken as significant.

Ethical issues: Approval was obtained from the Research Ethics Board, RIMS, Imphal. Informed verbal consent was taken from the participants before data collection. Data collected were kept secured under lock and key. Data collected were made accessible only to the investigators. Identifiers like name, house numbers, etc were not collected to maintain the confidentiality.

III. Results

There were 178 participants enrolled in the study. Response rate was 100%. Median age of participants was 30.5years. Median age of marriage of wife was 23 years. Mean duration of marriage was 8.27±6.13 years. Majority of the participants (68.5%) did not use any contraception ever in her lifetime. Majority of the husbands of the participants did not approve of using contraception (Table 1)

Among all the participants, 35 out of 178 were using methods of contraception (Figure 1). Among those who are not using any methods of contraception, the reasons of not using it was inconvenient to use, sometimes use natural methods, scared of side-effects like bleeding, pain, etc (Table 2)

Table 3 shows the characteristics of the pregnant women among the participants. 16 out of 178 participants were pregnant out of which 2 were unplanned.

Table 4 shows the characteristics of the 162 non-pregnant women, out of which 127 women did not use any contraceptions. Among the non-contraceptive users, 114 did not want any child soon or not at all. Only 11 out of them wanted a child soon.

Figure 2 shows the distribution of participants by unmet needs of contraception. Total unmet needs for contraception= Present unplanned pregnancy+ non-contraceptive users who did not want child soon or at all+ (women with last pregnancy unplanned)* = 2+116+14= 132

*Women with last pregnancy unplanned are from present contraceptive users, non- contraceptive users who wants child soon, presently planned pregnant women.

Table 5 shows that women who did not used any methods of contraception ever in her life and those whose husbands did not approve of using contraception were significantly associated with unmet needs.

Table no 1: Socio-demographic characteristics of the study participants (N=178).

Characteristics	n(%)
Type of family	
Nuclear	79(44.4)
Joint	99(55.6)
Monthly income (Rs)	
<10000	61(34.3)
10000-18500	24(13.5)
18501-28500	48(27)
>28500	45(25.3)
Religion	
Hindu	89(50)
Meitei	83(46.6)
Christian	2.2(4)
Islam	2(1.1)
Education of husband	
Illiterate	0
Upto Class X	74(41.6)
Upto Class XII	46(25.8)
Graduate and above	58(32.6)
Education of wife	
Illiterate	12(6.7)
Upto Class X	95(53.5)
Upto Class XII	45(25.3)
Graduate and above	26(14.6)
Use of contraception ever in lifetime?	
Yes	124(69.66%)
No	54(30.34%)
Does her husband approve of using contraception?	
Yes	65(36.5)
No	113(63.5)

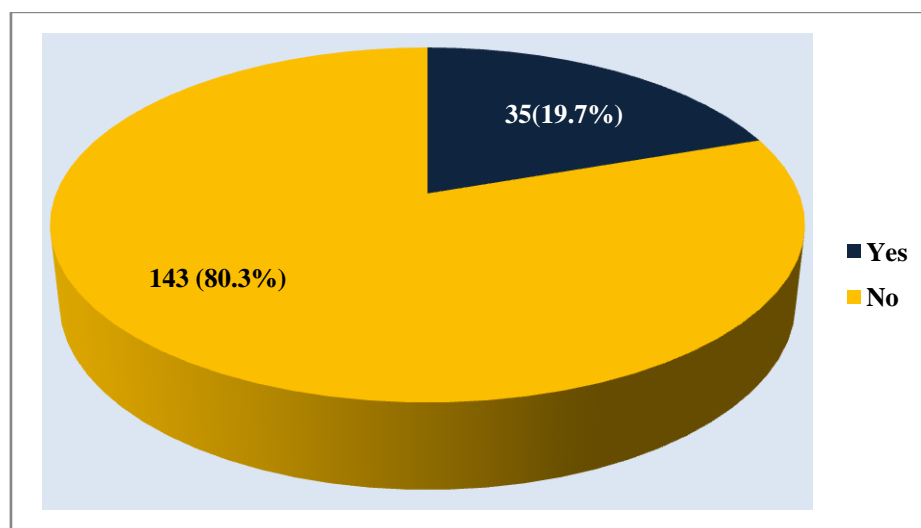


Fig 1: Distribution of participants according to use of contraception at present? (N=178)

Table 2: Reasons for not using contraception (N=143)

Reasons	n(%)
Fear of side effects (pain, bleeding, etc)	51(35.6)
Sometimes use natural methods	40(27.9)
Want more child	11(7.7)
Inconvenient to use	18(12.6)
Others*	23(16.1)

Others* : no approval from husband, pregnant currently, scared of infertility, etc

Table 3: Distribution of participants by pregnancy status and type of pregnancy

Whether pregnant?	n(%)
Yes	16(9)
No	162(91)
Type of pregnancy	
Planned	14(87.5)
Unplanned (mistimed)	2(12.5)

Table 4: Characteristics of non-pregnant women (N=162)

Use of contraception	n(%)
Yes	35
No	127
If no, why?	
Want child soon	11
Does not want child soon/at all	116

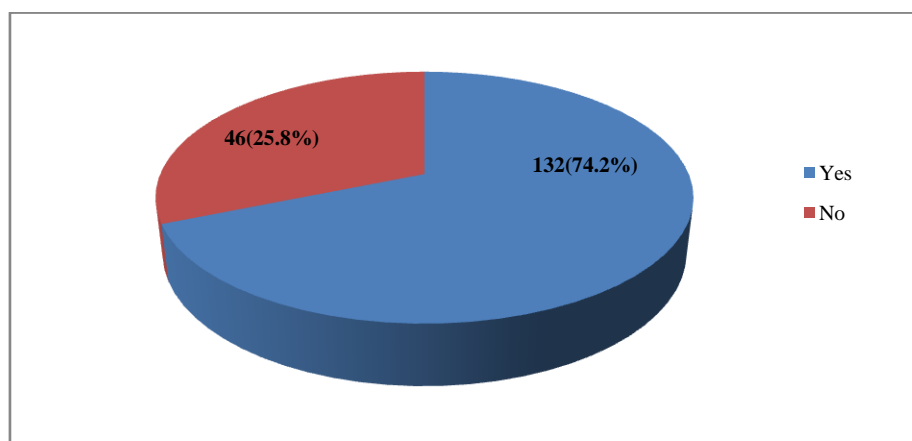


Fig 2: Distribution of participants by unmet needs of contraception (N=178)

Table 5: Association of socio-demographic characteristics with unmet needs

Characteristics	Unmet needs		p-value*
	Yes n(%)	No n(%)	
Age(years)			
≤30	62(69.7)	27(30.3)	.171
>30	70(78.7)	19(21.3)	
Type of family			
Nuclear	56(70.9)	23(29.1)	.373
Joint	76(76.8)	23(23.2)	
Religion			
Hindu	61(68.5)	28(31.5)	.52
Meitei	68(81.9)	15(18.1)	
Others**	3(50)	3(50)	
Education of husband			
Upto Class X	60(81.1)	14(18.9)	.191
Upto Class XII	31(67.4)	15(32.6)	
Graduate and above	41(70.7)	17(29.3)	
Education of wife			
Illiterate	10(83.3)	2(16.7)	.064
Upto Class X	77(81.1)	18(18.9)	
Upto Class XII	28(62.2)	17(37.8)	
Graduate and above	17(65.4)	9(34.6)	

Monthly income(Rs)			
<10000	51(83.6)	10(16.4)	.099
10000-18500	14(58.3)	10(41.7)	
18501-28500	34(70.8)	14(29.2)	
>28500	33(73.3)	12(26.7)	
Use of any method of contraception			
Yes	24(42.9)	32(57.1)	.000
No	108(88.5)	14(11.5)	
Husband approval of using contraception			
Yes	32(49.2)	33(50.8)	.000
No	100(88.5)	13(11.5)	

* chi-square test ** others include Islam, Christian

IV. Discussion

Out of 178 participants studied, 132 had unmet needs of contraception. The overall prevalence of unmet needs of contraception in this study was 74.2%. In a similar study conducted by Rathod M et al. in Gujarat in 2014, the prevalence was 42.8% [12]. Similarly another study conducted by Ali AA et al. in 2013 [13] showed a prevalence of 44.8. Prateek SS et al. reported a prevalence of 51.6% in his study which was conducted in 2012[8]. This difference in the prevalence may be because in this study the participants with history of unplanned pregnancy in her last pregnancy were also included who may be using contraception or having planned pregnancy now. In this study, the reasons of not using contraception presently were fear of side effects, sometimes use natural methods, want more children, inconvenient to use, no approval from husband, etc. Similar results were found in studies conducted by Anthony et al. [10], Paudel IS et al. [9], Prateek SS et al [8], Ali AA et al [13] and Rathod M et al [12]. In the present study husband's approval of using contraception was significantly associated with unmet needs which was similar to the findings of Ajong AB et al [14]. This may be because husbands play an important role in decision making for use of contraception. In this study, women who have not used any methods of contraception ever in her lifetime was significantly associated with unmet needs which is similar to the study done by Gebre G et al [15].

V. Conclusion

7 out of 10 women were found to have unmet needs. Women who did not use any methods of contraception ever in her lifetime and those whose husbands did not approve of using contraception were significantly associated with unmet needs.

VI. Recommendations

Awareness programs regarding importance of family planning among the public should be conducted from time to time. The major role played by men in family planning decision making should be emphasised and appropriate strategies should be designed to increase their active involvement in the effective use of planning methods. Further studies in rural areas may be needed to understand the prevalence and the determinants of unmet needs in this part of the country.

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