

Perception and Practices regarding Fertility and Family Planning among Slum Dwelling Working Women of Khulna District

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Abstract

Fertility and family planning are the most remarkable demographic issues particularly in the south-western region of Bangladesh as fertility rate looks higher than any other parts of the country. The study chiefly aims to explain the perception as well as practices concerning fertility and family planning behavior of married working women in the three slum areas, Khalispur, Mujguni and New Market, of Khulna City Corporation. 220 working women (15-49) were interviewed as stratified random samples by using both open ended and close ended questions. The findings of the study demonstrated that majority of the women (39.5%) were day-laborers by profession as well as 19.5 percent women were found illiterate and their average duration of conjugality was 12.88 years. Majority of the respondents was Muslim (76.2%) and lived in nuclear families (60.4%), headed by the husbands (78.2%). As the highest portion (45.5%) of respondent was married before 18 years, among which (52.7%) had conceived within the time. Having knowledge about family planning methods, 86.7 percent women were found to use different types of contraceptives, especially oral pill (56.3%) and more than 64 percent women were found to use these to avoid unwanted pregnancy. In most of the cases, husband (43.7%) wanted their wives to use contraceptive and majority of the respondents (49.8%) had low perception toward family planning methods. The study, however, also identified relationship between monthly income and perception towards family planning methods ($p < .031$); length of marriage with age at last conception ($p < .000$) and year of schooling and perception towards family planning methods ($p < .012$). In case of correlation of the socio-demographic variables e.g. age composition, year of schooling, religious status, length of marriage, knowledge about contraceptives, the data found had positive correlation with family planning methods.

Keywords: Fertility, family planning behavior, family planning methods, working women.

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I. Introduction

The population dynamics of Bangladesh is not fundamentally different from those of other countries in the Asia Pacific region but Government of Bangladesh viewed rapid population growth as a serious and top priority issue (Islam et al., 2012). Additionally, by recognizing National Family Planning Program, Bangladesh has established a success story of reducing fertility rate in the contemporary third world countries (Greenspan, 2010). Since the reliable family planning methods became available in 1960s, the use of modern contraception has risen steadily to 64 percent of all currently married women or in sexual intercourse in recent years (Jain, 2011). Kumssa et al. (2013) found that the wealthiest Bangladeshi women are four times more likely to use contraception than poorest women due to traditional patriarchal family system or extended families and respect for the opinion of the family head or husband. Moreover, several factors have been influencing to adopt family planning methods in Bangladesh like socio-demographic issues, husband's attitude, mother-in-law's attitude, son preference, religion and the culture (Kaur, 2010).

Due to introduction of family planning methods the total fertility rate has been reducing in Bangladesh since the last 20 years and the rate of contraceptive use among married couples of reproductive age increased from a mere 13.8 percent in 1983 to 67.3 percent in 2012 (NIPORT, 2012). Moreover, Family planning services has been playing a vital role not only in reducing fertility rate but also reducing the mortality rate of pregnant women and their babies, besides the benefits of family services is more than its costs (Das & Das, 2011). In the past 50 years, family-planning programs have been heavily promoted in Bangladesh though it was a matter of debate at the beginning and Jensen (2015) found the women are more likely to use contraception supplied by public clinics than their counterparts who receive services from the private sector (Joshi, 2015).

The population living in the urban slums of Bangladesh are considered to be disadvantaged from basic amenities and the population density in the urban slums is roughly two hundred times greater than that of the rest of Bangladesh (Ahmed, 2014). Lack of consciousness about family planning services, indifference to use contraceptives during intercourse and lack of men's desire to use contraceptive are mainly responsible for population growth in urban slums (Hasan&Sabiruzzaman, 2012). But at present in urban slums, women of reproductive age (15-49 years), who are working in informal sectors to earn money, have become conscious about the benefits of using contraceptives and having one or two children to provide them quality life (Tawiah, 2016). They also know that women who have unintended births tend to suffer post-partum depression, feelings of powerlessness, increased time pressures and a degradation in overall physical health (Amin, 2011). Initiatives of Government of Bangladesh as well as non-government organizations through family planning programs and services have encouraged these working poor women to use contraceptive for reducing the challenges of overpopulation from their families and nation also (Rahman, 2013).

II. Objectives

This study was carried out to understand the working women's knowledge, practice and perception towards family planning behavior and find out the relationship between their socioeconomic characteristics and family planning behavior in three slum areas of Khulna city.

III. Methods and Materials

The study was explanatory in nature, and therefore, the quantitative method was used to analyze the perception and practices regarding fertility and family planning among slum dwelling working women of Khulna district. This study was carried out following survey research design on working married women who belonged to reproductive age (15 to 49 years). Three slums of Khulna City Corporation in Bangladesh named *Khalishpur*, *Mujguni* and *New Market* under the word no. 15, 11 and 17 were purposively selected to conduct the study. An inventory list of 442 working women (Table 1) from the study areas, following specific criteria e.g. the respondents being reproductive age (15 to 49 years); length of marriage at least five years; having at least two alive children and had been using contraceptive regularly after marriage, were decided as the sample population.

Table 1: Population of the study at a glance

Name of the Slum	Word No.	Female
<i>Khalishpur</i>	15	247
<i>Mujguni</i>	11	106
<i>New Market</i>	17	89
Total		442

Among the population 220 women were selected to be interviewed using proportionate stratified random sampling. The survey was carried out from February 10 to May 26, 2020. The respondents were interviewed through a semi-structured interview schedule containing both open and close ended questions that revealed detailed information on women's fertility behavior as well as their knowledge, attitude, practices and perception regarding family planning methods. At last, the chi square analysis and Pearson's correlation coefficient were used to assess the bivariate relationships between independent and dependent variables in addition to the extent of relationship among the variables.

Table 2: Sample Size of the Study

Name of the Slum	Word No.	Female
<i>Khalishpur</i>	15	131
<i>Mujguni</i>	11	63
<i>New Market</i>	17	26
Total		220

Key Findings

Socio- Demographic Information of the Respondents

The findings (Table 3) represents that majority of the respondents (43.0%) belonged to age group 26 to 36 years while the lowest portion of respondents (20.2%) belonged to age group above-35 years and thus, constituted the average age of the respondents around 28.45 years with the standard deviation of 6.77. In case of education, the education qualification of working women were not satisfactory (average years of schooling were 4.73). Concerning the occupation of women majority of the respondents were labor (39.5%) while the second largest portion (30.4%) of women were domestic maid. Regarding the monthly income of the women, the study revealed that majority (53.6%) of the respondents had income below 3000 BDT where the mean income was BDT 3032.12 with standard deviation 2158.23. In this study, the respondents were predominantly Muslim (76.2%) and 78.2 percent respondent's family head were their husband. Subsequently, mostly (75.5%) women's mode of mate selection was arranged and in case of duration of marriage the mean duration 12.88 years with standard deviation 8.25 years. Although the respondents mostly had nuclear families (60.4%), nevertheless, a considerable percent of them (39.6%) had extended families with average family members 4.68 and Standard Deviation 1.21. Though above 73 percent of the respondents had normal body mass index, a significant part of them had overweight (21.8%) but only 1.6 percent respondents had obesity.

Table 3. Socio demographic information of the respondents

Variables	Percent (%)	Average & Standard Deviation
Age Composition (In Years)		
15-25	36.8	28.45 & 6.77
26-36	43.0	
Above-36	20.2	
Year of Schooling		
Illiterate	19.5	4.73 & 3.23
Primary (i-v)	39.8	
Secondary and above (vi ≥)	40.7	
Occupational Status		
Day labor	39.5	-
Domestic maid	31.4	
Self employed	29.1	
Monthly Income (In BDT)		
Below- 3000	53.6	3032.12 & 2158.23
3001-5000	30.2	
Above- 5001	16.1	
Types of Religion		
Islam	76.2	-
Hinduism	20.8	
Christianity	3.0	
Type of Marriage		
Arranged	75.5	-
Affair	16.8	
Forced	7.7	
Length of Marriage		
≤12	55.9	12.88 & 8.25
13-24	31.1	
Above 25	13.0	
Head of the Family		
Self	5.9	-
Husband	78.2	
Father- in- law	13.4	
Mother-in -law	2.5	
Family Types		
Nuclear family	60.4	-

Extended family	39.6	
Family Size (in Number)		
≤3	12.8	4.68 & 1.21
4-6	66.1	
7≥	21.1	
Body Mass Index (BMI)		
Underweight (≤17)	2.7	22.86& 2.68
Normal (18-24.9)	73.9	
Overweight (25-29.5)	21.8	
Obese (30-34.9)	1.6	

Fertility Behavior of the Respondent

The results from the study (Table 4) reveal that above 45 percent respondents were married of at 15 to 18 years while a considerable number of women (31.4%) were married before reaching 15 years old. It also exposed the age composition of the spouse of the respondents which presented that highest 47.5 percent of the spouse belonged to the age category of 21 to 25 years, whereas above 43 percent and 9 percent were found between above 25 years and 16 to 20 years respectively. Furthermore, 54.6 percent respondents had their first conception below 18 years while the major portion (56.2%) of the respondents had their last conception between 26 to 30 years. The percentage of women who had 1 to 2 alive children whereas the average alive children of the respondents were 2.08.

Table 4. Fertility Behavior of the Respondent

Variables	Percent (%)	Average &Standard Deviation
Age at First Marriage(Respondent)		
Below-15	31.4	15.38 & 2.76
15-18	45.5	
Above-18	23.2	
Age at First Marriage (Husband)		
≤20	9.1	24.21 & 3.67
21-25	47.5	
Above-25	43.4	
Age First Contraception		
≤18	54.6	18.78& 2.88
19-26	36.2	
Above-27	9.2	
Age at Last Contraception		
≤25	32.6	22.28 &4.48
26-30	56.2	
Above 30	11.2	
Number ofChildren (Alive)		
2-3	73.1	2.08 & 1.06
4-5	25.3	
Above 5	2.6	
Birth Spacing between 1st and 2nd child (Years) (N=153)		
1-4	78.7	3.43 & 1.78
5-8	20.3	
9-12	1.0	
Birth Spacing between 2nd and 3rd Child(Years) (N=138)		
1-4	76.8	3.67 & 2.11
5-8	18.1	
9-12	5.1	
Birth Spacing between 3rd and 4th Child(Years) (N=58)		
1-4	72.4	3.14 & 2.08
5-8	25.9	
9-12	1.7	
Birth Spacing between 4th and 5th Child(Years)(N=24)		
1-4	91.7	2.46 & 1.35
5-8	8.3	

Decision of Sexual Intercourse	
Husband	41.6
Self	3.5
Both	54.9
Feelings of sexual intercourse without consent	
Annoying	34.7
Painful	15.0
Fear	13.5
Disappointing	16.6
Feel nothing	20.2

It is also depicted from table 4 that most of the respondents (76.8%) had 1 to 4 years of birth spacing between first to second child and the average year was 3.43 with standard deviation of 1.78. Furthermore, The average birth spacing of second with third, third with fourth and fourth with fifth children were 3.67 years, 3.14 years and 2.46 years with standard deviation 2.11, 2.08 and 1.35 respectively. In case of sexual inter course majority of the respondents (54.9%) took decision combined but a considerable percentage of women (41.6%) had to accept their husband’s decision. Additionally, the occurrence of sexual intercourse without consent of the respondents causes feeling annoyed (34.7%) as well as a considerable number of respondents (13.5%) feel fear.

Practice and Perception about Family Planning Methods

Concerning the meaning of family planning in table 5 it exposed that majority of the respondents (79.4%) were strongly agreed about the knowledge of family planning methods and only. Regarding the knowledge about contraceptive methods 62.2 percent cases were well known about pill and a considerable number of women were aware of condom (56.5%). The study also represents that the highest portion of the respondents (46.8%) had known about contraceptives from their husbands and only 8.6 percent of the respondents leant about this from advertisement on television. Moreover, 54.8 percent respondents could avail contraceptive at first time of intercourse and most of the respondents (68.9%) respondents used oral pill as contraceptive. At present 86.7 percent respondents were using contraceptives where as 13.3 percent women were not using contraceptives. Consequently, 56.3 percent respondents were using oral pill and only 2.8 percent respondents did not use any contraceptive currently. Regarding causes of using contraceptives 64.2 percent women revealed that they did not want babies as well as only 4.2 percent respondents had been using contraceptives to serve medical purpose. Concerning the priority of contraceptive decision 43.7 percent respondents were dependent on their husband as well as 26.6 percent were self-reliant while 29.7 percent women took decision by both. The highest portion of the respondent (88.6%) were aware about the place of contraceptive collections while 49.6 percent women collected contraceptive from health workers and only 14.2 percent women collected it from government hospital/clinic. But major portion of women (61.8%) did not consult with medical assistants regarding use of contraceptives while the rest who consulted with medical assistants used to go family planning assistant mostly (58.7%). The perception towards family planning of women revealed in table 5 had been clarified on the basis of result of perception which exposes that 49.8 percent women had low perception while 23.9 percent and 26.4 percent respondents had medium and high perception respectively regarding family planning methods.

Table 5. Practice and Perception about Family Planning Methods of the Respondent

Variables	Percent (%)
Knowledge about Family Planning Methods	
Yes	79.4
No	20.6
Informed about Family Planning Methods (Multiple Responses)	
Pill	62.2
Condom	56.5
Ligation	12.8
safe period	11.2
Injection	37.1
Primary Source of Information Regarding Contraceptives	
Husband	46.8
Health workers	23.6
Mother/Mother-in-law	9.2
Friends	11.8
Advertisement on television	8.6

Availability of Contraceptive after Marriage	
Yes	54.8
No	45.2
Type of Contraceptives Used after Marriage	
Oral Pill	68.9
Injection	13.2
Condom	8.2
Safe period	1.3
Cannot remember	8.5
Using Contraceptive at Present	
Yes	86.7
No	13.3
Types of Contraceptive Using at Present	
Oral Pill	56.3
Condom	23.1
Safe period	11.6
Injection	6.2
Don not use	2.8
Reasons for Using Contraceptive	
Avoid Pregnancy	64.2
Medical purpose	4.2
Forced by husband	12.2
To avoid pregnancy related complications	19.4
Priority over your decision while using contraceptive	
Self	26.6
Husband	43.7
Both	29.7
Knowledge regarding the Place of getting Contraceptive Service	
Yes	88.6
No	11.4
Source of Collecting Contraceptive at Present	
Government hospital/ Clinic	14.2
Dispensary	19.19
Health Workers	49.6
Pharmacy	16.3
Take Contraceptive Consultancy at Present	
Yes	38.2
No	61.8
Sources of Consultancy	
MBBS Doctor	22.7
Quack	18.6
Family Planning Assistant	58.7
Perception Regarding Family Planning Methods	
Low (5-12)	49.8
Medium (13-19)	23.9
High (20-26)	26.4

Bivariate analysis of Fertility and Family Planning Behavior

The relations between different variables were tested to understand the fertility and family planning behavior of working women. The findings (Table 6) represent that age of the respondent was highly associated with Body Mass Index (BMI) of the respondent and the differences were statistically significant ($\chi^2= 27.292$; $p < .000$). Besides, age of the respondent was not statistically significant with perception toward family planning methods and there was no significant relationship between these two variables. The findings further represent that duration of marriage was highly associated with age at last conception and the differences were statistically significant ($p < .000$). In the study, age at first marriage and age at last conception were highly associated and statistically significant ($\chi^2= 195.608$; $p < .000$). Furthermore, Significant association between age at first marriage and age at last conception could be observed which revealed moderate relationship between them ($\chi^2= 10.386$; $p < .034$). Here, the findings further strengthen that monthly income was highly associated with BMI of

the respondent ($\chi^2= 28.924$; $p <.001$), but moderately significant with perception toward family planning methods ($\chi^2= 13.899$; $p <.031$). Moreover, perception toward family planning methods was dependent on year of schooling, which was statistically significant ($\chi^2= 16.291$; $p <.012$), found in the study.

Table 6. Relationship between Different Variables Related to Fertility and Family Planning Behavior

Independent Variable	Dependent Variable	Test Conducted	Calculated Value (Degree of freedom)	Asymmetrical Significance*
Age of the Respondent	BMI of the Respondent	Pearson's χ^2	27.292 ₍₆₎	.000**
Age of the Respondent	Perception Toward Family Planning Methods	Pearson's χ^2	5.919 ₍₄₎	.205
Duration of Marriage	Age at Last Conception	Pearson's χ^2	106.327 ₍₄₎	.000**
Age at First Marriage	Age at First Conception	Pearson's χ^2	195.608 ₍₄₎	.000**
Age at first Marriage	Age at Last Conception	Pearson's χ^2	10.386 ₍₄₎	.034*
Monthly Income	Perception Toward Family Planning Methods	Pearson's χ^2	13.899 ₍₆₎	.031*
Monthly Income	BMI of the Respondent	Pearson's χ^2	28.924 ₍₉₎	.001**
Year of Schooling	Perception Toward Family Planning Methods	Pearson's χ^2	16.291 ₍₆₎	.012*

**At 1% level of Significance

* At 5% level of Significance

Correlation between Perception about Family Planning Methods and Its Covariates

Data in Table 7 represents that lower the age of the respondents have positive perception about family planning methods whereas year of schooling has positive correlation with the higher use of family planning methods. Additionally, higher monthly income confirms higher use of contraceptives while lower religious rigidity assures positive perception about family planning methods. Knowledge about family planning and perception regarding family planning methods are positively correlated. Furthermore, lower duration of marriage ensures positive perception regarding contraceptives as well as age at first contraception and age at last contraception are highly correlated with family planning methods.

Table 7: Correlation between Perception about Family Planning Methods and Its Covariates

Independent Variables	Perception	
	Pearson Correlation (r)	p value
Age of the respondents	-0.178 ^{***}	0.000
Year of Schooling of the respondents	0.285 ^{***}	0.000
Monthly income of the respondents (in BDT)	0.212 ^{***}	0.002
Religious status	-0.109 ^{***}	0.000
Knowledge about family planning methods	0.130 ^{**}	0.071
Duration of Marriage	-0.145 ^{**}	0.001
Age at first conception	0.137 ^{***}	0.001
Age at last conception	0.201 ^{***}	0.000

*** Significant level- 1% (2-tailed)

** Significant level- 5%(2-tailed)

IV. Discussion

The findings of the study derived from data analysis leave some scope for discussion to arrive at a conclusion. The present study was conducted with the objective of explaining the fertility behavior and knowledge, attitude as well as perception toward family planning practice of working women at slums in Khulna City Corporation. The study also looked for relationship between various variables of fertility and family planning behavior of working women. In the present study the mean age at marriage for the girls was 15.38 years and that for the males was around 24.21 years as Bangladesh fertility survey (BFS, 2009) data suggested that 96% of ever married women were married when they were teenagers. According to the data of NIPORT (2011) primary level of education was completed by 29.3 percent females and secondary level education was completed by 47 percent females. In the present study it has been found that found that the percentage of girls having primary level education was much higher (39.8%) than the national statistics. Basu (2006) illustrated that if the women has a greater share of the income than the men, they enjoy more decision-making power in the family planning methods as it had been found in the study. Amin (2011) explored that male

headed households in the rural areas are found more because of the prevailing traditional, cultural restrictions on women and here it was found that 78.2 percent household of the study was headed by husband of the respondents. Among the respondents 60.4 percent of the totals possessed the nuclear type of family and 39.6 percent respondents were come from extended family.

Analysis of birth intervals for women the average space between first and second child was 3.42 which is much common in our country but in the study it had been found that mean alive children of women was 2.08. Alike this study, Kumssa et.al. (2013) also found that considerable percentage (27.0%) of births to women were not adequately spaced to protect maternal and newborn health and 78 percent of unwanted pregnancies were attributable to contraceptive nonuse, incorrect use, or method failure in Bangladesh

Participating in family planning decision-making is the second most important factor influencing the current use contraceptive methods. The Contraceptive prevalence (women ages 15-49) in Bangladesh was reported at 52.64 in 2004 (Zackariah, 2008) but the study revealed that 86.7 percent respondents were currently using family planning methods. From the study it has been found that 56.3 percent respondents used oral pill as contraceptive at present and 64.2 percent respondents identified using it as a way to avoid unwanted pregnancy but Kaur (2010) found that by family planning 80 percent women supported to be limiting family size, spacing children (53.3%) and preventing conception of children (53.3%). Along with Kaur(2010), Khan *et.al*(2009) also determined that 40 percent women of his study used contraceptives to space their children, 33.3 percent to limit family size and 26.7 percent to cease child bearing.

Sharply contrasting to this study, findings demonstrated by Islam and Mahmud (2012) revealed that women who discussed matters relating to family size with their husband were likely to be current contraceptive users. Couples who made joint decisions regarding family planning were found 1.8 times more likely to be current users of any contraceptive methods for those couples for which the husband alone makes such decisions. The highest portion of the respondents (88.6%) had knowledge about the place of contraceptives but only 38.2 percent women used to consult about using contraceptives. From the study it is depicts that 26.4 percent women had high perception about family planning methods whereas Mozumder (2016) found that 68 percent women had positive attitude toward family planning methods but this result does not match up with present study.

The findings from relationship between different variables were measured by chi-square tests. Among the respondents, who could avail contraceptives had comparatively low number of children in her duration of marital life. BMI of the respondent was highly dependent on age ($p < .000$) and monthly income ($p < .001$) of the respondent as stated by Malhotra *et al.*, (2002) income of the respondents also affects the BMI of them. Those have higher monthly income; they have low possibility of being underweight. Furthermore, the study revealed that age at first marriage was significantly associated with age at first conception ($p < .000$) and age at last conception ($p < .034$). The educated women have a high level perception toward family planning methods (Parveen, 1980). Perception toward family planning methods was statistically significant ($p < .012$) with year of schooling of the respondent but no significant association ($p < .205$) was found between age of the respondent and perception toward family planning methods. Moreover, socio-demographic factors live age, monthly income, year of schooling, duration of marriage, age at first and last contraception have positive correlation with perception regarding family planning methods of the respondents.

V. Conclusion

Population growth as global concerns especially for the developing countries like Bangladesh has been subjected to be lessened. Though family planning program has made substantial improvement in acceptance of family planning methods but still the progress is not worthy. The three selected variables of women status namely education, occupation and income are strongly associated with access to family planning methods, ever use or current use of contraception and control over fertility behavior. Since, women are still illiterate, employment level is not satisfactory and they do not discuss about family planning with their partners the attempt of reducing fertility rate is becoming failure to some extent. Moreover, the socio cultural structure especially religious parochialism of Bangladesh has a bad impact on the contraceptive prevalence as well as use of contraceptive. The study in spite of various limitations and constraints shed light on the knowledge, attitude and practice of using contraceptive with the fertility behavior of working women of Bangladesh. From the study it has been exposed that working women had low perception about family planning as they cannot choose the family planning methods freely and husband's decision influenced them severely. Furthermore, all the elements of family planning and fertility behavior of women were intricately related with each other which could not be proved as a holistic approach in case of free choice of family planning methods. The findings from such a study would be valuable for policy and decision making process relating women health and increased rate of contraceptive prevalence to improve the present condition. In this situation, Government and Non-government organizations must be active to motivate women to control on fertility behavior and maximum use of contraceptives which will be helpful for their better condition as well as better life.

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