

**RESEARCH ARTICLE** 

# Contraceptive Knowledge Attitude and Practice (KAP) among Women who were seeking for **Termination of Pregnancy**

Nataraja H G<sup>1</sup>, Harshini V<sup>2</sup>

<sup>1.</sup> Department of Obstetrics and Gynecology, ESIC-MC PGIMSR, Bangalore, India. <sup>2.</sup> Department of Obstetrics and Gynecology, ESIC-MC PGIMSR, Bangalore, India.



# ABSTRACT

# **Objective:**

To determine the knowledge, awareness and the practice of various contraceptive methods in the women who wanted termination of pregnancy during I trimester.

Materials and Methods: The study is a descriptive, questionnaire-based prospective study, conducted amongst 50 consecutive termination-ofpregnancy seekers during their first trimester who attended our hospital. The interview for this study was conducted by a trained medical practitioner and involved a face-to-face interview using pre-tested, structured questionnaire.

Results: Out of 42 women who had been included in the study, maximum of them 14 (33.3%) were of 23-25 years age group, while 8 (19%) of 26-28yrs,8 (19%) of >32 yrs, 6 (14.2%) 19-22yrs and 2 of them were of less than 18yrs. Among all these women 10 (23.8%) had no knowledge regarding any method of contraception while 32(76.1%) women had knowledge and awareness about contraceptive methods.

Conclusion: This study concludes that there is considerable level of knowledge and awareness about contraception in the women working in small scale industries but actual practice of those methods is low.

Keywords: medical termination of pregnancy, contraception,

# **1. INTRODUCTION:**

India is still a developing and is still among overly populated countries in the world. Though many methods The of contraception are available to all the people, many women are yet to take the intiative to implement in termination-of-pregnancy seekers during their first practice for mainly two reasons - social and family background. In India, the women opting for over the counter drugs for abortion are much more than for contraception.

We plan to study the knowledge, attitude and awareness about contraception methods among women who have visited to our hospital for termination of I trimester pregnancy.

# **1.1 Objective of the study**

To determine the knowledge, awareness and the practice of various contraceptive methods in the women who wanted termination of pregnancy during I trimester.

# 2. MATERIALS AND METHODS

study is a descriptive, questionnaire-based prospective study, conducted amongst 50 consecutive trimester who attended our hospital.

The interview for this study was conducted by a trained medical practitioner and involved a face-to-face interview using pre-tested, structured questionnaire. The women under the study were counseled and had given their informed consent prior to the interview. The questionnaire schedule elicited information on the biosocial characteristics of the women-age, occupation, educational status, and gestational age at time of study; number of previous pregnancies, and deliveries; number of previous miscarriages; awareness of contraceptives, usage of contraception, type of contraception ever used.

Page'

\*Corresponding author: Dr.V.Harshini | no – 36. III cross, I main, Lalji nagar, Lakkasandra, Bangalore, India 560030 E mail: vharshini84@gmail.com | Phone: +91 9986356016

The obtained data were entered into the computer and analyzed using SPSS 13.0 for windows software.

# 3. RESULTS

Out of 42 women who had been included in the study, maximum of them 14 (33.3%) were of 23-25 years age group ,while 8 (19%) of 26-28yrs,8 (19%) of >32 yrs, 6 (14.2%) 19-22yrs and 2 of them were of less than 18yrs as shown in table no 1.

AGE [YEARS]	GROUP	NUMBER WOMEN	OF	%	
<18		2		4.7	
19-22		6		14.2	
23-25		14		33.3	
26-28		8		19.04	
29-31		4		9.5	
>32		8		19.04	
TOTAL		42			

Table 1 : Age group of the women in study

All of them belonged to low socio economic status and were working in small scale industries and all of them were literates.30 [71.42%] of them were educated till or less than X standard while rest of them till XII as shown in table 2.

NUMBER OF PATIENTS	%
6	14.28
24	57.14
12	28.57
12	20.37
	NUMBER OF PATIENTS       6       24       12       42

#### TABLE 2: Education status of women in the study

Among the women we have interviewed 4 were primigravida, 34[80.95%] were multi gravida and 4 [9.5%] were grand multigravida as shown in table 3.

GRAVIDA	NUMBER OF PATIENTS	%
1	4	9.52
2	16	38.09
3	12	28.57
4	6	14.28
>5	4	9.52
TOTAL	42	

#### TABLE 3: Obstetric score of the women in the study

Among all these women 10 (23.8%)had no knowledge regarding any method of contraception while 32(76.1%) women had knowledge and awareness about methods [permanent sterlisation contraceptive 32, Barrier-22 (52.3%), OCP-12(28.5%), IUCD-24(57.14%)].Though 76.1% of women had knowledge about contraception 27 [64.3%] were not using any of the above methods of contraception. All of the 42 women had

consumed oral drugs for termination of pregnancy while they reported to us,but only 24 [57.14%] were prescribed by qualified medical personnel .18 women i.e., 42.85% of women had consumed the medication over the counter. We had to do instrumental evacuation of products of conception for 36 [85.7%] as they were diagnosed to have incomplete abortion.

# 4. DISCUSSION

Contraception is an important aspect of reproductive health and plays a major role in the prevention of unwanted pregnancy. It is therefore a significant factor in reduction of induced abortion rates and improvement in maternal health care. <sup>1</sup>Majority of the abortion seekers, in our study are young persons aged below 24 years with most of them being employed under small scale industries. This represents a highly sexually vulnerable segment of the society. As high as 28.57% of the women have been educated for more than X standard and are therefore expected to have a reasonable knowledge of contraception. This is evident in this study from the high level of awareness, 76.1%, of contraceptives elicited from the respondents. Inspite of awareness Contraceptive usage in women of our study was low 35.71%.

The high contraceptive awareness and low usage observed in this study is similar to that reported by Adinma et al.<sup>1</sup> Nigerian studies have also made similar observation.<sup>2,3,4,5</sup>

It is not clear as to the reason for the wide disparity between contraceptive awareness and usage which seems to cut across age, parity, and social class. To our surprise usage of first trimester termination methods by medication over counter is quite prevalent in these women. They don't seek qualified personnel advise before consuming medication but present with after effects and complications like incomplete abortion, retained products of conception , anemia to tertiary care centres. Due to such improper practices, there is increase in the number of instrumental evacuation of pregnancies (85.71% in our study), blood transfusion (2.38%) and other complications of termination of pregnancy in tertiary care centers.

Education about contraception and reproduction are not elaborated in secondary schools in India which contributes to the ignorance. Information for young people on sexuality and contraception are therefore mostly from peer groups which are often distorted or out rightly wrong.<sup>6</sup> Furthermore, adolescent health clinics are very few in India thereby exposing these young people to the ravaging effects of unsafe sexuality. In India, factors like the role of religion, culture, and accessibility of contraceptives also has wide disparity. There are varieties of reasons while women will seek for termination of pregnancy.

© Asian Journal of Biomedical and Pharmaceutical Sciences, all rights reserved.

# V.Harshini, et al.: Asian Journal of Biomedical and Pharmaceutical Sciences; 3(23) 2013, 4-6.

Induced abortion of whatever form, legal or illegal, is generally believed to be a consequence of an unmet need for contraception.<sup>7</sup>

Post abortion contraception and family planning has been identified as a major tool towards the reduction of abortion related maternal morbidity and mortality for its cost effectiveness in preventing repeat unwanted pregnancy and induced unsafe abortion.<sup>8,9</sup>

In this study, the commonest method of contraception used by the respondents was permanent sterlisation method.

Counseling on contraception will undoubtedly dispel ignorance and improve contraceptiveacceptability.<sup>10</sup>

# **5. CONCLUSION**

This study concludes that there is considerable level of knowledge and awareness about contraception in the women working in small scale industries but actual practice of those methods is low. This attitude towards contraception can be improved by better family planning services, better education, motivation and improving the availability of contraception methods.

# 6. ACKNOWLEDGEMENTS

We are grateful to all the women who have taken part in the study. We thank ESIC model hospital and especially staff of the department of obstetrics and gynecology who had been cooperative and supportive throughout the study period.

Conflicts of interest

There are no conflicts of interest among the autors.

# 7. REFERENCES

1. Adinma JIB, Nwosu BO. Family planning knowledge and practice among Nigerian women attending an antenatal clinic. Adv Contracept 1995; 11: 335-344.

2. Bobzom DN, Mai AM, Chama CM, Muna DM. Maternal mortality in Maiduguri, Nigeria. J Obstet Gynecol 1998; 18(2): 139-140.

3. Oye-Adeniran BA, Adewole IF, Umoh AV, Fapohunda OR, Iwere N. Characteristics of abortion care seekers in South-Western Nigeria. Afr J Reprod Health 2004; 8(3): 81-91.

4. Abiodun OMA, Balogun ORA. Sexual activity and contraceptive use among young female students of tertiary educational institutions in Ilorin, Nigeria. J Contracept 2008; 79(2): 146-149.

Oye-Adeniran BA, Adewole IF, Umoh AV, Ekanem EE, Gbadegesin A, Iwere N. Community-based survey of unwanted pregnancy in Southwestern Nigeria. Afr J Reprod Health 2004; 8(3): 103-115.
Adinma JIB, Okeke AO. The pill: perceptions and usage among Nigerian students. Adv Contracept 1993; 9: 341-349.

7. Smith R, Ashford L, Gribble J, Clifton D. Family planning saving lives. 4th ed. Washington: Population Reference Bureau; 2009.

8. Vlassoff M, Shearer J, Walker D, Lucas H. IDS research rept 59: economic impact of unsafe abortion-related morbidity and mortality: evidence and estimation challenges. Brighton: Institute of Development Studies at the University of Sussex; BNI 9RE.

9. Lule E, Singh S, Chowdhury SA. Fertility regulation behaviours and their cost: contraception and unintended pregnancies in Africa, Eastern Europe, and Central Asia. Washington: The International Bank for Reconstruction and Development/The World Bank; 2007

10. Adinma JIB, Ikeako L, Adinma ED, Ezeama C, Eke NO. Post abortion care counseling practiced by health professionals in southeastern Nigeria. Int J Gynecol Obstet 2010; 111: 53-56.

# **Conflict of Interest: None Declared**

#### Cite this article as:

Nataraja H G, Harshini V. Contraceptive knowledge attitude and practice (kap) among women who were seeking for termination of pregnancy. Asian Journal of Biomedical and Pharmaceutical Sciences, 2013, 3: (23), 4-6.