Original Research Article

Awareness regarding emergency contraception among married women attending urban health centre, Berhampur, Odisha, India

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ABSTRACT

Background: In India unplanned pregnancy and illegal abortions still remains a problem. Unintended early pregnancy and frequent childbearing contribute to high pregnancy related morbidity and mortality which can be prevented by use of suitable contraceptives. In circumstances where women are unable to exercise sexual and reproductive decision making, introduction of emergency contraceptive pills may provide important back up option to enable women to control their fertility.

Methods: A cross-sectional study was conducted between August- October 2016 among 215 married women of reproductive age group attending the Urban Health Center, Berhampur, to study the awareness about most common methods of contraception, decision-making regarding contraceptive and knowledge and practice of emergency contraceptive pills.

Results: This study concludes that most commonly used method was Oral contraceptive pills (28.3%) and major source of information regarding different methods of contraception were through friends and relatives (44.6%). Awareness about emergency contraception mostly came through television. Of those aware of ECPs (14.4%) only 16.1% had used it in their lifetime.

Conclusions: Although there is awareness about contraceptives methods, knowledge and practice of emergency contraception is low.

Keywords: Abortion, Emergency contraception, Family planning, Knowledge, Practice

INTRODUCTION

In India unplanned pregnancy and illegal abortions still remains a problem. According to the NFHS (2005-2006), 21% of pregnancies are either unwanted or mistimed despite a National family welfare Programme and widespread efforts by government.1 The number of unsafe abortions are also high despite legalization of abortion in India through MTP act in 1972. Higher fertility rate is due to various socioeconomic and sociocultural factors.2,3 Unintended pregnancy, early and frequent child-bearing contribute to high pregnancy related morbidity and mortality which can hinder young women’s ability to pursue educational and vocational opportunities. This can be prevented to a great extent through use of suitable contraceptives. Emergency contraceptive pills (ECPs) also called as Morning after pills/Post-coital pills contains high dose of same hormones used in Oral Contraceptive pills (OCPs) and acts primarily by preventing ovulation.4 If used effectively i.e. first pill within 72 hours of unprotected sex and the second taken 12 hours after the first, can
reduce the risk of pregnancy not only in unprotected sex
but also in contraception failures, in sexual assault cases
and among inconsistent contraceptive users thereby
decreasing the abortion rates.4 ECPs were made legal in
India in 2003 and available over-the-counter and
peripheral health institutions. However awareness and
use of this method remains low. In circumstances where
women are unable to exercise sexual and reproductive
decision-making powers, introduction of emergency
contraceptive pills may provide important back-up option
to enable women to control their fertility.

Considering above factors the present study was carried
out among married women in reproductive age group
attending an urban health centre with objectives to study
knowledge and practice of emergency contraceptive pills(ECPs) among them, to assess their awareness and
use of temporary methods of contraception and to know
about decision-making regarding contraceptive use in the
family.

METHODS

A cross-sectional study was conducted between August-
October 2016 among married women in reproductive age
group attending an urban health centre which comes
under the field practice area of Department of community
medicine, MKCG Medical College and Hospital, Berhampur , Odisha.

The number of patients per day attending the Urban
Health Centre is about 30-35 of which one sixth are
female patients. The monthly patient load is about 750
(excluding the holidays ). So, nearly 125 female patients
attend the UHC per month. So all the women in the
reproductive age group who gave their consent to
participate in the study were included. Hence during the
study period 215 women were selected.

Exclusion criteria

Women who did not give consent or had undergone
permanent sterilization were excluded from the study.

Eligible participants were interviewed in local language
using a predesigned and pretested questionnaire after
taking their informed consent.

Statistical analysis

The participants’ responses to the questions were
analyzed using SPSS version 20. Data were expressed as
proportions and percentages.

RESULTS

Of the total 215 participants, 99% were Hindu by
religion. More than half of them belonged to younger age
groups i.e. between 20-30 years (61.8%) and lived in
nuclear families (64.6%), 19% of the women were
illiterate. Majority of them were housewives (95.8%) and
belonged to lower middle socio-economic status (75.3%) as
calculated by Modified Kuppuswami Scale (Table 1).

Total 44.6% of the women had 2 or more unplanned
pregnancies.43.2% had previous history of abortion of
which 28.3% were induced (Table 2).

| Socio-demographic variables | Numbers | Percentage (%) |
|-----------------------------|---------|----------------|
| Age                         |         |                |
| 20-30                       | 133     | 61.8           |
| 31-40                       | 69      | 32.1           |
| >40                         | 13      | 6.1            |
| Religion                    |         |                |
| Hindu                       | 213     | 99             |
| Muslim                      | 2       | 0.9            |
| Christian                   | --      | --             |
| Type of family              |         |                |
| Nuclear                     | 139     | 64.6           |
| Joint                       | 76      | 35.3           |
| Literacy rate               |         |                |
| Illiterate                  | 41      | 19             |
| Primary                     | 52      | 24.1           |
| Secondary                   | 65      | 30.2           |
| Higher secondary            | 30      | 13.9           |
| Graduate and above          | 27      | 12.5           |
| Occupational status         |         |                |
| Housewife                   | 206     | 95.9           |
| Working                     | 09      | 4.1            |
| Socioeconomic status        |         |                |
| Lower middle                | 162     | 75.3           |
| Upper lower                 | 47      | 21.9           |
| Lower lower                 | 6       | 2.8            |
Most of the women (92.5%) were aware of availability of temporary methods of family planning in health institutions. Though majority of the women knew about OCPs (96.7%) and Condom (89.7%) as temporary methods of contraception but their usage were only 28.3% and 8.8% respectively. 18 out of 61 (29.5%) OCPs users used it inconsistently. Regarding Emergency contraception, 14.4% of them had heard about it of which only 2.3% had used it. 4.1% of the study participants used abstinence, coitus interruptus and safe period as natural methods of contraception. (Table 3).

Table 2: Previous obstetric history of the study participants.

| Obstetric history       | Responses * N | %    |
|------------------------|---------------|------|
| Number of unplanned pregnancies | 1             | 66   | 30.7 |
|                        | 2-3           | 71   | 33   |
|                        | >3            | 25   | 11.6 |
| Abortion History       | Spontaneous   | 32   | 14.8 |
|                        | Induced       | 61   | 28.3 |

Table 3: Awareness and practice of temporary methods of contraception.

| Temporary methods of contraception | Awareness % | Practice |
|------------------------------------|-------------|----------|
| Condom                             | 193 (89.7%) | 19 (8.8%)|
| OCP                                | 208 (96.7%) | 61 (28.3%) |
| ECP                                | 31 (14.4%)  | 05 (2.3%) |
| IUCD                               | 98 (45.5%)  | 03 (1.39%)|
| Injectable                          | 33 (15.3%)  | --       |
| Natural Methods                     | 24 (11.1%)  | 9 (4.1%)  |

Table 4: Source of information on different methods of contraception (N=215).

| Source                          | No. of responses *N | %    |
|---------------------------------|---------------------|------|
| Husband                         | 88                  | 40.9 |
| Doctor                          | 12                  | 5.5  |
| Health worker                   | 51                  | 23.7 |
| Friend and relatives            | 96                  | 44.6 |
| Magazines and newspapers        | 32                  | 14.8 |
| Media - television and radio    | 42                  | 19.5 |

Table 5: Decision making regarding use of contraceptives.

| Decision maker | No. of responses N | %    |
|----------------|-------------------|------|
| Self           | 1                 | 1.03 |
| Husband        | --                | --   |
| Mutual         | 96                | 98.96|
| Any other family member | -- | -- |

Table 6: Source of awareness about use of emergency contraceptive pills (N=31).

| Emergency contraception | Number of responses | Percentages |
|-------------------------|---------------------|-------------|
| Source of awareness on EC | Husband | -- | -- |
|                        | Doctor | 5 | 16.1 |
|                        | Health worker | -- | -- |
|                        | Friend and relatives | -- | -- |
|                        | Magazines and Newspapers | 7 | 16.1 |
|                        | Media - Television and Radio | 31 | 100 |
| Usage                  | Yes | 5 | 16.2 |
|                        | No | 26 | 83.8 |
| Awareness regarding correct time of use of EC | Yes | 5 | 16.2 |
|                        | No | 26 | 83.8 |
| Any knowledge on EC having side-effects | Yes | 14 | 45.2 |
|                        | No | 17 | 54.8 |
| Purpose of use of EC (N=5 ) | Unprotected Sex | 4 | 80 |
|                        | Contraceptive failure | 1 | 20 |
| Decision regarding use of EC | Self | -- | -- |
|                        | Husband | -- | -- |
|                        | Mutual | 05 | 100 |
| Source of acquiring EC | Govt. supply | -- | -- |
|                        | Purchase | 05 | 100 |
| If Purchase            | Self-purchase | -- | -- |
|                        | Medical prescription | 05 | 100 |
| Any side effects reported after use | Yes | -- | -- |
|                        | No | 05 | 100 |
Major source of information regarding different methods of contraception were through friends and relatives (44.6%) followed by husband (40.9%). Contribution by mass media was very low (Table 4). Statistically 98.96% of the couples mutually decided to adopt any one form of contraceptive methods (Table 5).

Awareness about emergency contraception mostly came through television. Of those aware of ECPs (14.4%) only 16.1% had used it in their lifetime and hence knew about the correct time of its use. 45.1% of the women said that ECPs might have side-effects after its use. Regarding different aspects of use of Emergency contraceptive pills, it was found that the main reason of its use was for unprotected sex. All ECPs users were between 25–35 years old, literate belonging to lower middle class family and were either working or students. All them had mutual decision with husband after being prescribed by a doctor. i pill was the most commonly used ECP and was purchased from nearby medical store. None reported any side-effects after its use (Table 6).

DISCUSSION

The current study was conducted to assess awareness about emergency and regular temporary contraceptive methods among married women of reproductive age group attending UHC. More than half of them were between 20-30 years (61.8%) and lived in nuclear families (64.6%), 19% of the women were illiterate. Majority of the women knew about OCPs (96.7%) and Condom (89.7%) but their usage were only 28.3% and 8.8% respectively.

In a similar study conducted in a slum in Mumbai had found out that awareness about availability of family planning services among married women was 85.96 % of which 87.71% were aware of Oral Contraceptive Pills (OCP) and Cu-T, followed by female sterilization (80.4%) and condoms (77.5%). For couples who were using contraceptives, the practice was maximum for OCP (28.07%) followed by condoms (18%). Cu-T was used by only 9.94% women but was the most preferred method of contraception in contrast to present study where majority were afraid of using Cu-T. However, in both the studies a gap was observed between knowledge regarding contraceptives and their usage.

In the present study it was observed that 63.69% of the women had at least one unintended pregnancy and 28.3% had a history of induced abortion. In a hospital based in north India has reported out of total induced abortions, 47.87% were medical abortions; 37.23% were medical termination of pregnancies (MTP) done by surgical methods and in 14.89% cases, women procured medicines directly from chemist or quacks without any medical supervision. This reflects high unmet need of contraception. So, there is a need in our society to encourage women to adopt suitable method of contraception so that unwanted pregnancy can be avoided safely and conveniently.6

Suneeta Mittal et al, in her study on socio-demographic picture of Emergency contraceptive users found that 77% of the users were less than 30 years, literate (89%), low (41%) to middle income (53%) groups, multiparous (57%) and inconsistent contraceptive users (44%).7 Similar findings were noted in this study where all the five ECPs users were between 25-35 years old , literate belonging to lower -middle class family and were either working or students. Two of them were nulliparous. The main purpose of use was unprotected sex. This reflects ECPs are more acceptable among younger age groups.

In the present study it was heartening to notice that with mutual decision emergency contraceptive was used by all the couples. Also for 98.9% couples the decision to use any temporary methods of contraception was mutually taken in contrary to Chopra S et al, who had observed that, the decision for contraception was taken together by the husband and wife in 71% followed by the husband alone in 24.3% cases.8

Awareness, knowledge regarding use and practice of Emergency contraception were very low in this study. Similar findings were reported by various studies regarding knowledge about ECPs in different age and working groups of women.9,10

None of the ECPs users complained about any side-effects after its use .The high acceptability of ECPs among women were observed by Corinne H Rocca et al in a follow up study which showed that out of 14.1% of women who agreed to use ECPs, 97.3% felt glad and 83.8% felt relieved after taking ECPs. Only 16.2% fell sick or not well and fatigue (24.3%) was the major adverse event reported.11

CONCLUSION

The present scenario reflects high level of knowledge and awareness that does not match with contraceptive usage rate. Converting knowledge into practice is the real challenge for India as far as family planning is concerned. A definite place of Emergency contraception cannot be denied in the basket of Family Planning Cafeteria.

Rigorous campaign should be undertaken in the community to spread awareness about use of contraceptives and also regarding information about emergency contraceptives.

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