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A Study of Unmet Need for Family Planning Among Married Women of Reproductive Age Group Attending Immunization Clinic in Selected Urban Hospital, West Bengal

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Abstract: ***Descriptive study on unmet need for family planning among married women of reproductive age group (15-49 years) attending immunization clinic in selected urban hospital, West Bengal. Objectives were-1) To estimate the magnitude of unmet need for family planning. 2) To find out the reasons behind unmet need. 3)To determine the association between unmet need and selected factors.***

Sample size was 100, setting- immunization clinic of N.R.S medical college and Hospital, Kolkata. Purposive sampling technique and semi structured interview schedule was used. unmet need for family planning was 23% (need for spacing 7% and need for limiting 16%). It includes pregnancy mistimed (1%), pregnancy unwanted (2%), non-pregnant fecund women (want later 6%), want no more (14%).

The main reasons were opposition of husband for not using any family planning method, 19 out of 23 (82.3%) and 10 out of 23 (43.48%) expressed as fear about side effects of contraceptive and least responses given on religious concept about family planning and expressed as costly. Significant Chi- square association present among age of first pregnancy, number of occurrences of pregnancy, number of living child with unmet need at 0.05 level of significance. The study findings were applicable in health administration, health services and nursing education by emphasizing family planning programme .and motivation for family planning.

Keywords: Unmet need for family planning, Reproductive age group of married woman, Fecund, Need for spacing, Need for limiting

I. INTRODUCTION

Family planning is a basic human right, linked with the women empowerment. It reduces the maternal deaths, improve the health of mother and babies, eliminate poverty, population explosion. India is second most populous country in the world, next to China. Current population in India 2012 is 1.22 billion. Out of this, male 628.8 million and female 591.4 million. Sex ratio 940 females per 1000 males. Population growth rate is 1.58 per cent. In 2012, West Bengal population is 91,347,736 (Population Census 2011). Unmet need for family planning in West Bengal 8.8% (according to Third National Family Health Survey Report), out of this need for spacing 4.4% and 4.4% need for limiting. India is predicted to have more than 1.53 billion people by the end of 2030. Rapid growing population is due to high fertility rate, inadequate use of contraceptive methods, rapid decline in death rate or mortality rate.

A. Problem Statement

A study of unmet need for family planning among married women of reproductive age group attending immunization clinic in selected urban hospital, West Bengal.

B. Objectives

1) To estimate the magnitude of unmet need for family planning among married women of reproductive age group.
2) To find out the reasons behind unmet need as cited by study population.
3) To find out the association, between unmet need and socio-demographic factors and obstetric factors and health service utilization parameters.

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II. METHODOLOGY

A. Research Design
Cross sectional design

B. Research Approach
Descriptive survey approach

C. Setting of the study
Immunization Clinic in N.R.S Medical College & Hospital, West Bengal

D. Sampling technique
Purposive sampling technique

E. Population
Married women of reproductive age group (15 - 49 years)

F. Sample size
100

G. Inclusion criteria
1) Women who were married and fecund, willing to participate in the study
2) Women who lived in Union with her husband
3) Women who understood Bengali

H. Exclusion criteria
Women beyond the reproductive age group (15-49 years) were not enlisted to our study

I. Research tool
1) Part A: It is the semi-structured interview schedule for collect the information about socio-demographic data
2) Part B: It is the semi-structured interview schedule for collect the information about obstetric data and health service utilization parameter
3) Part C: It is also semi-structured interview schedule for collect the information about pattern and reasons of unmet need for family planning

J. Techniques
Interviewing

K. Findings
1) Section 1: Socio-demographic variables

Sample Characteristics

Table 1: Sample Characteristics

		n=100	
Age	15-19 years	11	11%
	20-24 years	49	49%
	25-29 years	26	26%
	30-34 years	11	11%
	35-39 years	3	3%
	40-44 years	-	NIL
	45-49 years	-	NIL
Religion	Hindu	97	97%
	Muslim	3	3%
	Christian	-	NIL
	Others	-	NIL

Educational Qualification	Illiterate	19	19%
	Literate	2	2%
	I-IV	3	3%
	V-VIII	30	30%
	IX-H.S.	34	34%
	Graduate	10	10%
	Post-Graduate	2	2%
Family income	1000-3000	24	24%
	Above 3000-6000	48	48%
	Above 6000-9000	12	12%
	Above 9000	16	16%
Residence	Urban	94	94%
	Rural	6	6%
Family pattern	Joint	58	58%
	Nuclear	42	42%
Total family member	Up to 5	58	58%
	Above 5-10	38	38%
	Above 10	4	4%
Occupation	Housewife	97	97%
	Service holder	3	3%

2) Section 2: Obstetrical characteristics of sample

Table 2: Sample Characteristics

n=100

Age of marriage	Less than 18 years	30	30%
	18-30 years	70	70%
	More than 30 years	-	NIL
Age of first pregnancy	Less than 18 years	20	20%
	18-30 years	79	79%
	More than 30 years	1	1%
Number of occurrences of pregnancy	One	45	45%
	Two	38	38%
	More than 2	17	17%

3) Section 3: Health Service Utilization Parameters

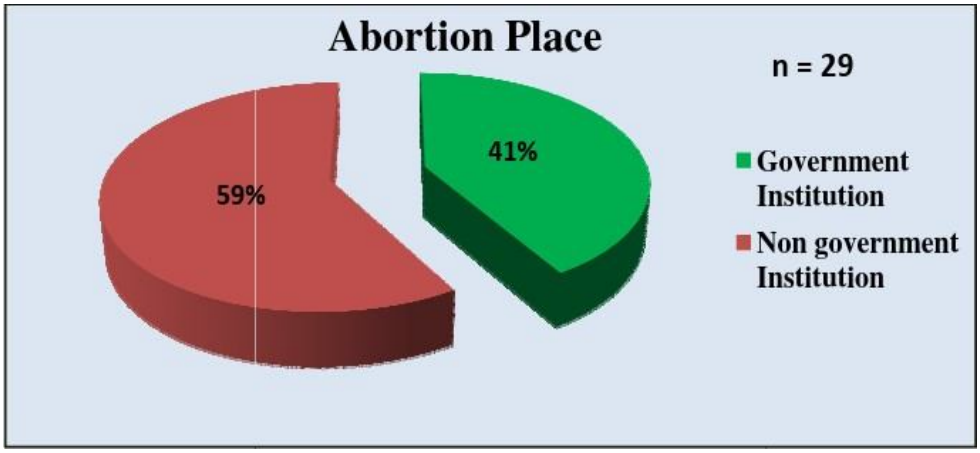

Figure 1: Pie diagram shows the percentage distribution of reproductive age group of married women had according to their abortion place

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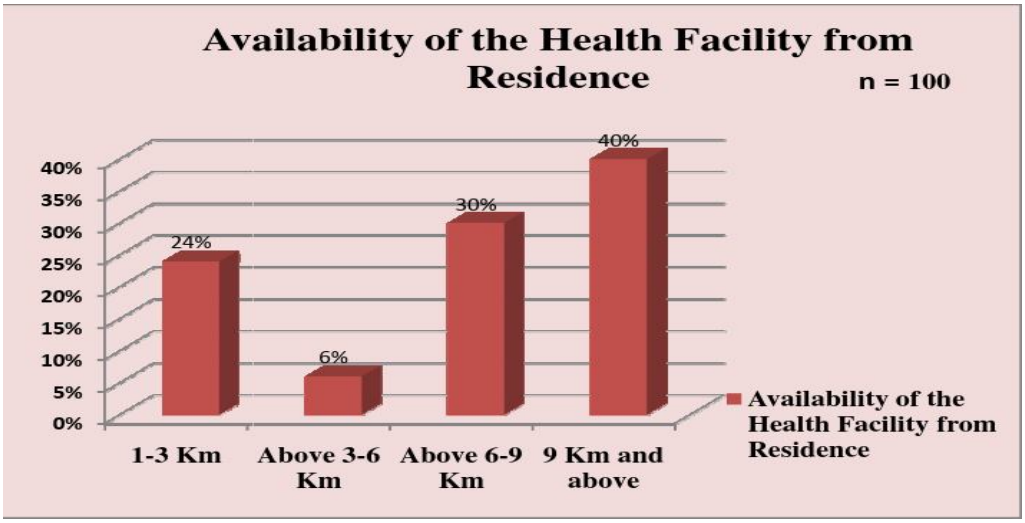

Figure 2: Bar diagram shows the percentage distribution of reproductive age group of married women had according to their availability of the health facility from residence

4) Section 4: Magnitude and Pattern of Unmet Need

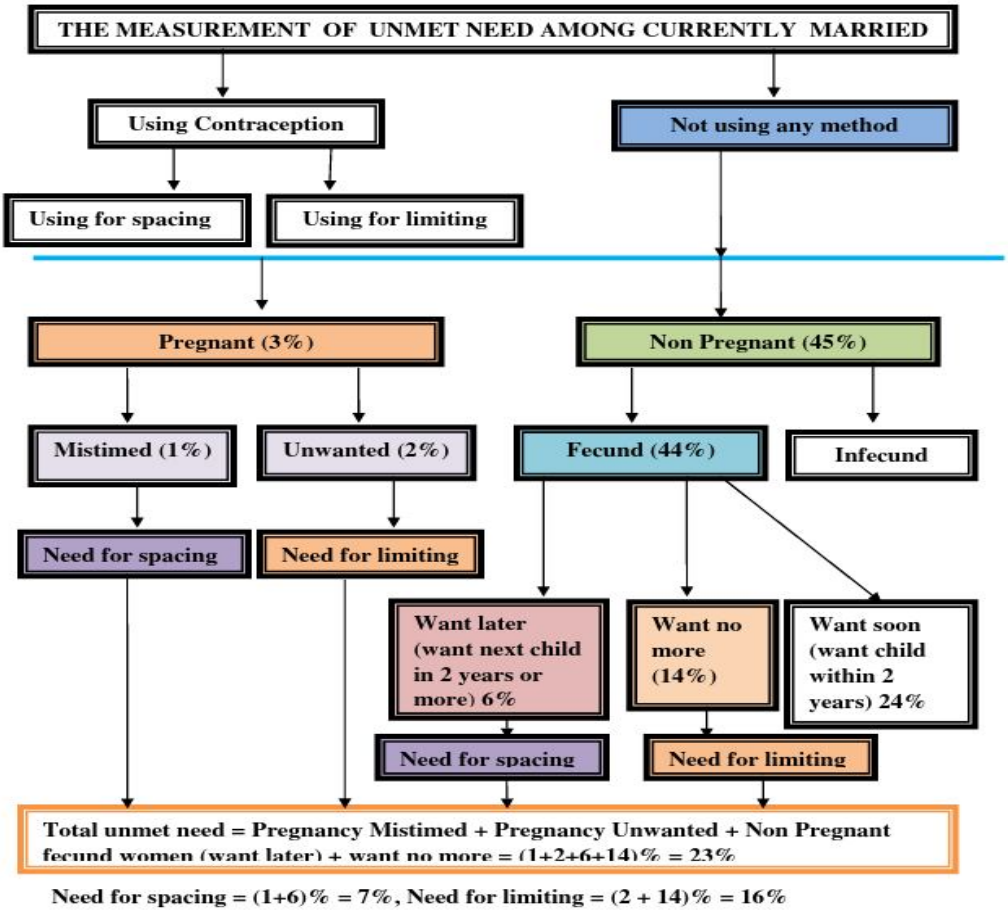

Figure 3: Calculation of unmet need currently married women

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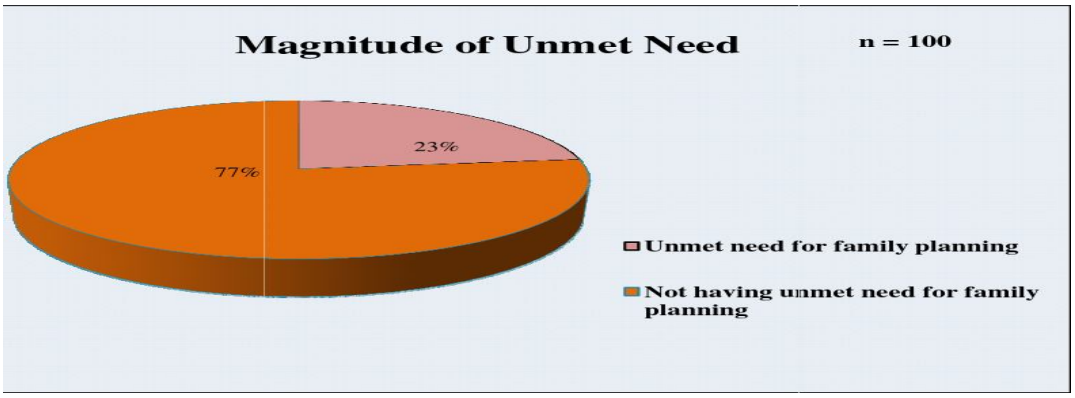

Figure 4: Pie diagram showing the percentage distribution of reproductive age group of married women according to their unmet need

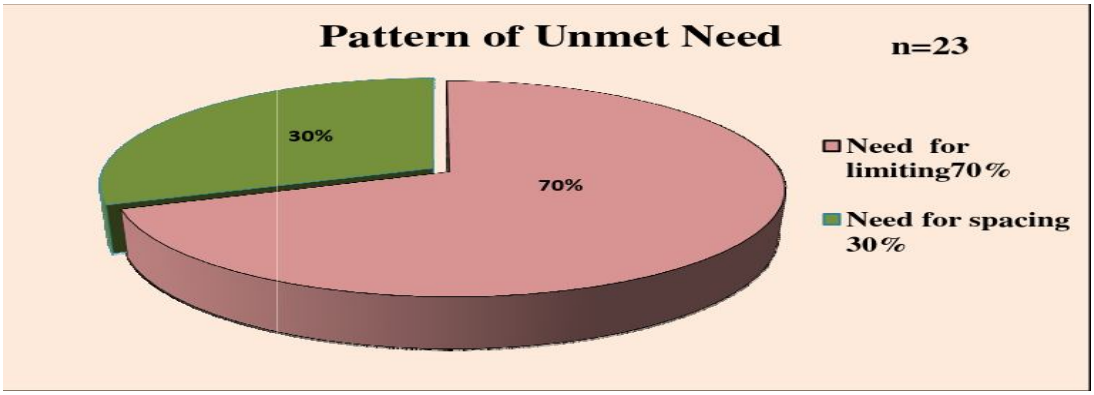

Figure 5: Pie diagram showing the percentage distribution of reproductive age group of married women according to their pattern of unmet need.

5) Section 5: Reasons of Unmet Need

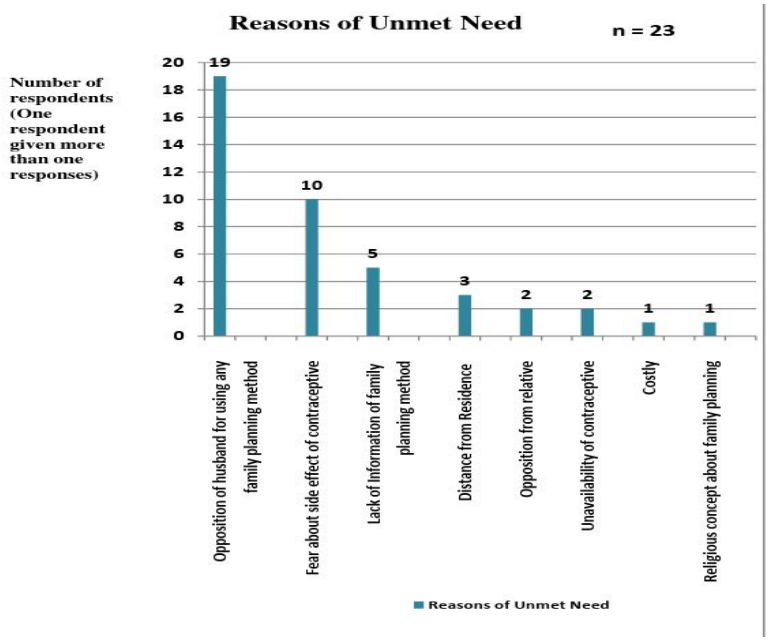

Figure 6: Bar diagram showing the frequency distribution of reasons of unmet need for family planning among married women of reproductive age group who attend immunization clinic

6) *Section 6: Association between unmet need with socio demographic data, obstetric data and health service utilization parameter*

Table 3: Association between met need and unmet need for family planning with selected socio demographic variable and obstetrical variables

n=100

Variables	Met need	Unmet need	χ^2 value	df
Residence				
Urban	76	18	9.745*	1
Rural	1	5		
Number of living children				
One	54	9	7.301*	1
Two or more children	23	14		

$\chi 2$ df (1) = 3.841, *p < 0.05 level

Table 4: Association between age of first pregnancy with unmet need of family planning

Unmet need n=23

Variables	Spacer	Limiter	Total	χ^2 value	df
Age of first pregnancy					
Below 18 years	0	4	4	4.216*	1
18 years and above	7	12	19		
Number of living children					
Up to one child	7	2	9	12.194*	1
Two or more children	0	14	14		

$\chi 2$ df (1) = 3.841, *p < 0.05 level

III. DISCUSSION

The present study revealed that magnitude of unmet need was 23%. Out of this, need for is spacing 7% and need for limiting is 16%. Similar study findings observed in the study done by Lata Kanchan, Barman Sanjiv Kumar, Ram Rama, Mukherjee Shuvankar, Ram Asish Kumar done a study 2012 on Prevalence and determinants of unmet need for family planning in Kishanganj district, Bihar, India. Results showed that the total unmet need for family planning was 23.9%; 9.4% for spacing births and 14.5% for limiting births.[1]

Similar findings of the study conducted by Srivastava Dhiraj Kumar, Gautam Pramod, Gautam Roli, Gour Neeraj, Bansal Manoj to assess the unmet need of family planning in Gwalior District and to study the factors that helps in determining it. The unmet need for family planning in Gwalior district was 21.70%.[2]

The present study findings also supported by another study conducted by Andurkar S.P, Yadav V.B, Dalvi S.D on unmet need for family planning among married women of reproductive age in urban health central field practice area of Govt. Medical college, Aurangabad. 20.54% of married women in reproductive age had unmet need for contraception, 3.61% for spacing birth and 16.93% for limiting births[6]. In the present study findings showed that pattern of unmet need consists of pregnancy mistimed (1%), pregnancy unwanted (2%), Non pregnant fecund women want later (want to take child in future - 2 years or more) (6%), want no more (14%). Total unmet need consists of need for spacing 7% and need for limiting 16%. In the present study the common reasons behind unmet need were19 (82.3%) expressed that opposition of husband and 10 (43.48%) as fear about side effect of contraceptive and least responses given of religious concept about family planning and costly 1 (4.35%).

Similar study findings observed in a study conducted by Lata Kanchan, Barman Sanjiv Kumar, Ram Rama, Mukherjee Shuvankar, Ram Asish Kumar (2012) on prevalence and determinants of unmet need for family planning in Kishanganj district, Bihar, India. Result showed that reasons behind the unmet need were husband's disapproval (34.2%), lack of awareness (27.8%) and fear of side effects (24.1%).[3] With regards to association with socio demographic and obstetric factors and health service utilization parameters with unmet need. A significant association was found between met need and unmet need with residence. number of occurrences in pregnancy, number of living child. A further computation done with unmet need (need for spacer and need for limiter) and selected socio demographic and obstetrical factors. Findings revealed that a significant association was found between unmet need with age of first pregnancy, number of occurrences of pregnancy, number of living children. Choudhary S., Saluja N, Sharma S, Gaur D, Pandey S done a study on the extent and reasons of unmet need for family planning among women of reproductive age group in rural area of Haryana. Contraceptive use rate increased significantly $\chi 2(4, N = 483) = 11.00$, $p = .026$ with the advancement of age. Limiters increased significantly χ 2 (4, N = 201) = 15.67, p = 0.003 with advancement of age with proportionate decrease of spacers[4]

IV. CONCLUSIONS

From the present study, magnitude of unmet need for family planning was 23% among married women of reproductive age group. unmet need was also influenced by residence (urban, rural). In this study showed that unmet need was more in rural areas [5 out of 6 i.e. (83.33%) had unmet need] as compare to urban areas [18 out of 94 (19.14%) had unmet need]. Findings also showed that women those were belonged in unmet need group had occurrence of pregnancy was two or more and most of them had number of living children two or more. Major reasons of unmet need were opposition of husband for using contraceptive, and fear of side effects of contraceptive. Information education counselling activities are to be improved focusing on good quality of life and easily accessible convenient method for family planning.

V. LIMITATIONS

The study was carried out to a small number of samples that limits the generalization of the findings.

VI. RECOMMENDATION

1) The study can be replicated on the larger sample for generalization.
2) It can be done in rural area
3) A comparative study can be done in rural and urban areas to find out the magnitude of unmet need and reasons of unmet need for family planning
4) A study on Factors determining pattern of unmet need for family planning in District among reproductive age group

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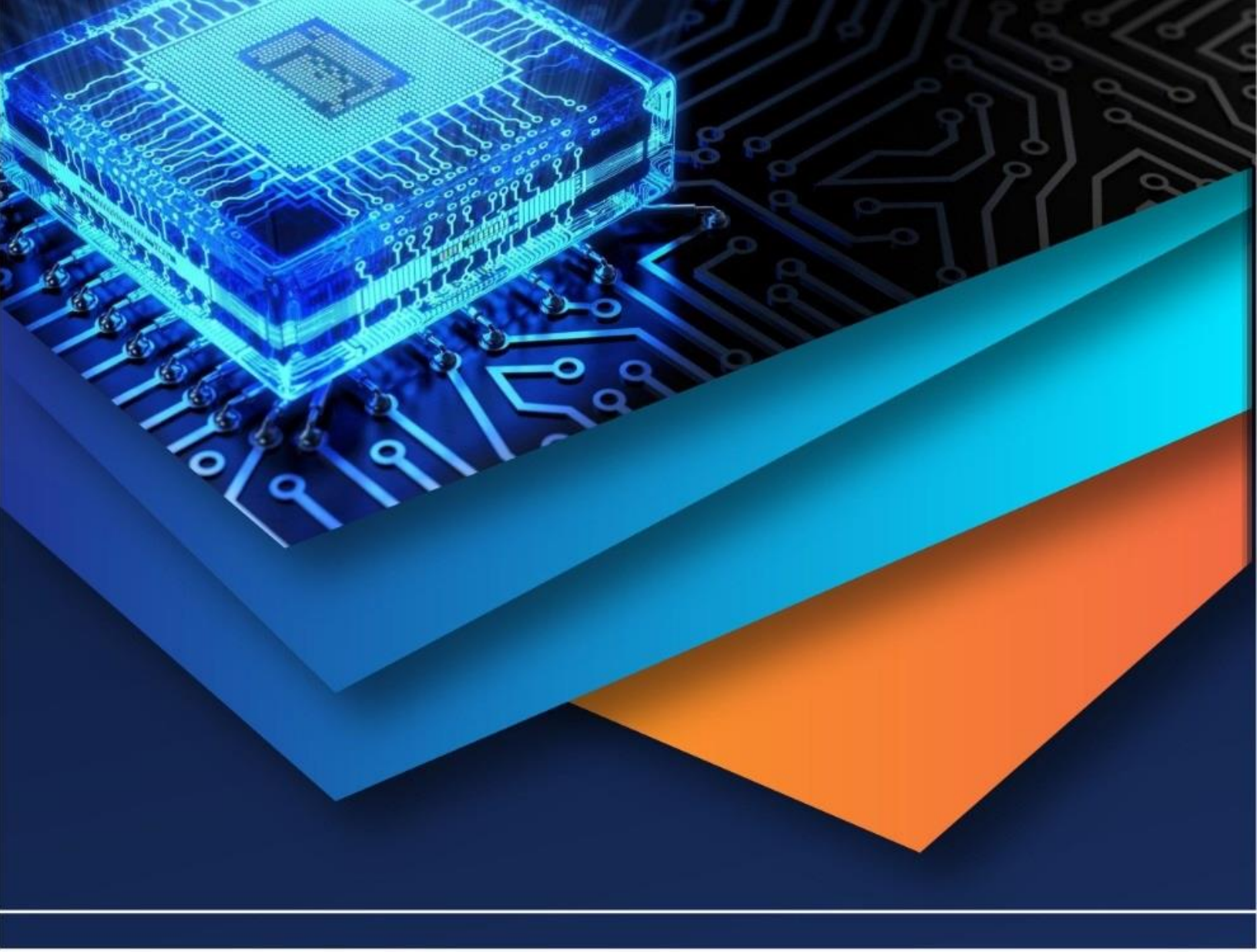

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