



## KNOWLEDGE, ATTITUDE & PRACTICE OF CONTRACEPTION AMONG HEALTH CARE WORKERS IN A TERTIARY CARE MATERNITY HOSPITAL OF KASHMIR VALLEY.

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Conflicts of Interest: Nil

### ABSTRACT:

**Background:** Government of India launched the National Family Welfare Programme in 1951 with the prime objective to reduce the birth rate to an extent necessary for population stabilization. Objectives of the Study were to assess the knowledge, attitude and evaluate the practices of contraceptive methods among health care workers. **Methodology:** The study was a cross-sectional study which was carried out at one of the largest maternity tertiary care hospitals of Kashmir Valley. Arbitrarily we included 200 health care workers of the tertiary care hospital including nursing staff, paramedic staff, and other women staff. **Results:** Among the two groups A & B, the awareness about contraceptive practices were known to all but the type of contraceptive methods varied between the two groups. Most of the study participants were having favorable attitude towards contraceptive use. The contraceptive practices were better among Literate participants (82%) than Illiterate participants (57%). **Conclusion:** Right Knowledge and motivation are the only means for the improved acceptance & utilization of contraceptive methods in our setup.

**Key Words:** Contraception, Contraceptive Methods, Contraceptive Practices, KAP study

### Introduction

An important health indices like maternal mortality and maternal morbidity is rising in India with an alarming rate due to multiple pregnancies, unplanned conceptions and unsafe abortions (1). These factors have proved detrimental in improving health status indices in India. Moreover, these factors are related to failure or nonuse of contraceptive methods among the target population (2, 3).

The government of India launched the National Family Welfare Programme in 1951 with the prime objective to reduce the birth rate to an extent necessary for population stabilization and to a level consistent with the requirement of the National economies and policies (4). The National Family Welfare Programme is the

longest running programme and is 100% centrally sponsored. Moreover, family planning methods are recognized as the prime pillars for the safe motherhood initiatives (SMI) which were introduced in the year 1987. This initiative was undertaken to reduce maternal mortality and morbidity. To achieve this, use of contraceptives prevalence rate among the target population is one of the important goals which needs to be achieved for the universal access to the reproductive health as mentioned previously in the Millennium Development Goals (5, 6).

Health care professionals including doctors, nursing staff, paramedical staff, and other hospital staff members represent an important bridge between the general population to impart knowledge of contraception and other family

planning methods. However, it has been seen that mere knowledge of contraception among health care professional is not the only important factor but their own attitude and practices of contraception play an important role in imparting and advising methods to the general population which is often seen lacking. We conducted this cross-sectional study with the prime objectives to assess the knowledge, attitude and evaluate the practices of contraceptive methods among the health care workers ( nursing, paramedics and other women staff) of one of the largest tertiary care maternity hospital of Kashmir Valley.

**METHODS**

**Study Design & Setting:** The study was a cross-sectional study which was carried out at one of the largest maternity tertiary care hospitals of Kashmir Valley. **Study Period & Study Unit:** The study was conducted for a period of 2 months from November 2018-December 2018 among health care workers of a tertiary care hospital. **Sample Size:** Arbitrarily we included 200 health care workers of the tertiary care hospital including nursing staff, paramedic staff and other women staff. **Inclusion Criteria:** Those who were

married were included in the study. **Questionnaire:** We used a pretested questionnaire which are read out to the participants in the language well versed with them and it contained questions on socio-demographic information (7), questions regarding knowledge, attitude & practice about contraception. **Procedure:** All the staff members were identified and line listed. This included two groups. Group A containing literate participants and Group B containing illiterate participants. We included 100 participants in each group randomly till we achieved the required sample size for respective groups. Informed consent was obtained from the participants after explaining them the objectives of the study. The questionnaire were read out to them in the language feasible for them to understand. The responses were entered in the Excel Spreadsheet and later analyzed using SPSS v 20.0 statistical software. **Ethical Issues:** The study didn't have any ethical issues related to human or animal experiments. The confidentiality of the participants was maintained as per the study protocol. Flow Diagram of the study is illustrated in Figure 1.

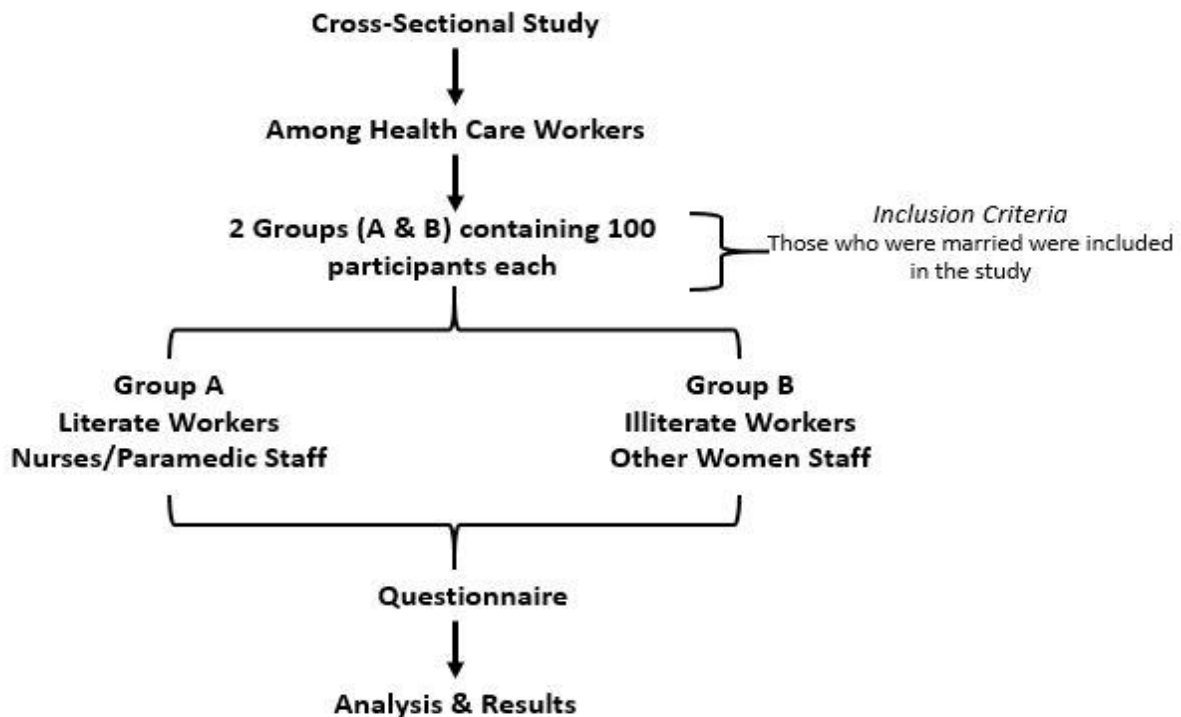


Figure 1: Flow Diagram of the Study Protocol

## RESULTS

The knowledge of contraception and family planning among the study participants is illustrated in Table 1. Among the two groups A & B, the awareness about contraceptive practices was known to all but the type of contraceptive methods varied between the two groups. Most of

the literate participants were aware of Intrauterine device (80%) followed by barrier methods (70%). While the Illiterate participants in Group B were aware of natural methods of contraception (85%) followed by barrier methods (30%). Knowledge of emergency contraception was mere 5% among Group B participants.

**Table 1: Knowledge about contraceptive methods among study participants**

Contraceptive Methods	Group A (N=100) n (%)	Group B (N=100) n (%)
<b>Awareness of Contraception</b>	100 (100)	100 (100)
<b>Oral Contraceptive Methods</b>	64 (64)	10 (10)
<b>Chemical Contraceptive Methods</b>	56 (56)	18 (18)
<b>Barrier Contraceptives</b>	70 (70)	30 (30)
<b>Injectable Contraceptives</b>	64 (64)	10 (10)
<b>Intrauterine Contraceptives</b>	80 (80)	10 (10)
<b>Implants</b>	69 (69)	11 (11)
<b>Natural Methods of Contraception</b>	60 (60)	85 (85)
<b>Permanent Methods</b>	100 (100)	20 (20)
<b>Emergency Contraceptives</b>	50 (50)	5 (5)

Attitude towards contraception and its methods is shown in Table 2. Among both the groups A & B, there were multiple answers to the questions. Eighteen among the Group A and 43 among Group B were non-contraceptive users. Thirty-eight (88%) among the Group B participants responded non using contraceptives for the fear of side effects. In Group A, 14 (78%) were not using any method for the want of a male child while 23 (54%) among Group B were not using

contraceptive methods for the same reason. Among Group B, Fifteen (35%) had religious promiscuities, 33(77%) found the use of contraceptives inconvenient and 16 (37) had partner objections regarding the use of contraceptive methods. All other participants excluding those mentioned in Table 2 among both the groups were having a favorable attitude towards contraceptive methods so were not mentioned in Table 2.

**Table 2: Attitude towards contraceptive methods among non-users**

	Group B (n=18)	Group B (n=43)
<b>Fear of side effects.</b>	7	38
<b>Want for male Child</b>	14	23
<b>Religious Belief</b>	2	15
<b>Lactational Amenorrhea</b>	6	1
<b>Found inconvenient to use</b>	4	33
<b>Apprehension regarding effect on future fertility</b>	0	29
<b>Partners/In-laws Objections Family Pressure</b>	3	16
<b>Social/Logistic Availability</b>	0	0

The contraceptive practices were better among Group A participants (82%) than Group B participants (57%). Most of the participants among Group A were practicing oral contraceptive methods (27%), barrier methods (27%), injectable contraceptives (27%) and

intrauterine contraceptives (25%). Among Group B participants, 28% were practicing barrier methods, 26% practicing natural methods of contraception and 21% practicing permanent methods of contraception.

**Table 3: Practices regarding contraceptive methods among study participants**

	Group B (n=82)	Group B (n=57)
<b>Practicing Contraceptive Methods</b>	82	57
<b>Oral Contraceptive Methods</b>	22	4
<b>Chemical Contraceptive Methods</b>	0	0
<b>Barrier Contraceptives</b>	22	16
<b>Injectable Contraceptives</b>	22	4
<b>Intrauterine Contraceptives</b>	20	8
<b>Implants</b>	0	0
<b>Natural Methods of Contraception</b>	10	15
<b>Permanent Methods</b>	16	12
<b>Emergency Contraceptives</b>	2	0

## DISCUSSION

Family planning as defined by World Health Organization is “*a way of thinking and living that is adopted voluntarily, upon the basis of knowledge, attitude and responsible decisions by individuals and couples, in order to promote the health and welfare of family groups and thus contribute effectively to the social development of the country.*” The adaption of family planning methods by the population can effectively reduce the health indices and thus contribute to economic growth of any country.

In this study, we assessed knowledge, attitude, and practices of contraceptive methods among health care workers working in a tertiary maternal hospital of Kashmir Valley. Socio-demographic and other information related to the study will be presented elsewhere. Here in this part of the study, we shall be discussion only about knowledge, attitude, and practices of contraceptive use & methods among the study participants. The results of the study showed that all the 200 participants included in the study were well aware of the contraceptive methods. Among the two groups A & B, the awareness about contraceptive practices was known to all but the type of contraceptive methods varied between the

two groups. The knowledge of contraceptive methods was better among the literate group than the illiterate group. This may be due to the fact that participants in Group A (Literate group) were having better educational status than those in the Group B (Illiterate group). The same finding was reported by most of the studies published previously (8, 9).

In our study, we had only 18% non-contraceptive users among Group A (Literate group) and 43% non-contraceptive users among Group B (Illiterate group). Most of the participants in group B were having a poor attitude towards contraception and the use of contraceptive methods. Same findings were reported by Khan A et al (10) and S. Bhargava et al (11) in their studies where they found people with low educational status are bound by myths and cultural barriers towards contraceptive use. Furthermore, regarding practice of contraceptive methods, the use among Group A participants was much better than Group B participants. Most of the participants were using oral contraceptives because of their easy availability, cost, and effectiveness. These findings are in accordance with the studies published earlier (12, 13). It was also seen in our study that the contraceptive use practices among the Literate group were far better

than in the Illiterate group. The same finding is reported by previously published studies (14,15).

## CONCLUSION

Right Knowledge and motivation are the only means for the improved acceptance & utilizations of contraceptive methods in our setup. The fear about side effects & apprehensions regarding future fertility should be removed by more educational & motivational activities and improvement in family planning services.

**CONFLICT OF INTREST** None declared

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