

---

---

**FACTORS INFLUENCING ACCEPTANCE OF CONTRACEPTIVE METHODS**

---

---

Anita Gupta \*, A.K. Sharma\*\*, A.T. Kannan\*\*\*

---

**ABSTRACT:**

**Research Problem:** What are the factors influencing acceptance of contraceptive methods.

**Objective:** To study the determinants influencing contraceptive acceptance.

**Study design:** Population based cross - sectional study.

**Setting:** Rural area of East Delhi

**Participants:** Married women in the reproductive age group.

**Sample:** Stratified sampling technique was used to draw the sample.

**Sample Size:** 328 married women of reproductive age group.

**Study Variables:** Socio-economic status, Type of contraceptive, Family size, Male child.

**Outcome Variables:** Acceptance of contraceptives

**Statistical Analysis:** By proportions.

**Result:** Prevalence of use of contraception at the time of data collection was 40.5%. Tubectomy and vasectomy were most commonly used methods. (59.4%, n = 133). Educational status of the women positively influenced the contraceptive acceptance but income did not. Desire for more children was single most important deterrent for accepting contraception.

**Recommendations:**

- (i) Traditional method of contraception should be given more attention.
- (ii) Couples should be brought in the contraceptive use net at the early stage of marriage.

**Key words:** Couple Protection Rate, Literacy, Income, Types of contraceptives, Reasons for acceptance.

**INTRODUCTION:**

It has been observed that over a long historical period prior to 1921, India's population had grown at a very slow pace. But after 1921, it increased rather slowly upto 1951 and rapidly thereafter. Efforts to control unwanted births have been made since olden times. However, the achievements in the direction of population control are far from satisfactory. The complexity of the problem is related to the fact that reproduction has both personal and social implications. In India, the socio-cultural diversity and geographical and economical heterogeneity prevents implementation of family welfare programmes on a uniform basis throughout the country. Thus, it is important to study the factors influencing contraceptive behaviour in a specified community so as to sustain the programme and to make it more effective for the particular community.

The present study was carried out with the following objectives:

1. To know the contraceptive acceptance behaviour and
2. To study the determinants influencing contraceptive acceptance in a specified population of rural area of East Delhi.

**MATERIAL AND METHODS:**

This study was carried out in Gazipur village which is located in the congested trans-Yamuna area of East - Delhi. This serves as the rural field practice area of the Department of Preventive and Social Medicine of UCMS. This village has a population of about 6000 people with an average family size of 5.0.

---

\* Senior Medical Officer, \*\* Lecturer, \*\*\* Professor.  
Deptt. of Preventive and Social Medicine, University College of Medical Sciences,  
Delhi - 110095

All married women in the reproductive age group were eligible for being included in the study. Assuming a Couple Protection Rate of 40%<sup>1</sup> (Census, 1991) and accepting 15% accuracy level, the sample size was calculated to be 266. Assuming a 10% non-response rate, a sample of 300 women was drawn using stratified sampling technique. Every 4th household was surveyed. Since there was more than one eligible woman in some of the households, a survey of 300 households yielded a sample of 328 females. This sample size provides 13% accuracy of data. The study was conducted between July 1993 and June 1994.

The women were interviewed by the first author and all information was recorded on a structured, pre-tested, semi-closed type proforma. Analysis was done using suitable statistical techniques.

#### RESULTS:

All married females in the reproductive age group living with their husbands were eligible for being included in the study. Age distribution of the study population is given in Table I. Majority of the women (63.2%) were in the 20 to 29 years age group. About 60% of the women came from middle income group families having per capita monthly income in the range of Rs 200/- to Rs 500/- (Table II). The findings in relation to educational status of the females reveal that 52.43%, 31.4% and 16.5% females were illiterate, educated upto middle school and high school respectively.

The mean age of current contraceptive users in the study sample was 29.3yrs. The observed prevalence of contraception in the study sample was 40.45% (Table - III). Among the users, the majority i.e. 59.4% (n=133) had opted for terminal method (tubectomy and vasectomy) while Oral Contraceptive Pills (OCP) were the least in practice i.e. 6.7%. Contraceptive acceptance rate was the lowest amongst the younger women (< 24 years of age) but significantly increased with advancing age. Among the literate group, the user rate was higher than the illiterate group, but no

linear trend was observed with rising educational status. The income of the family was not found to be associated with contraceptive acceptance pattern. 45% of the contraceptive users had four or more than four live births (Table - IV).

Terminal method of contraception was accepted by only those couples who had more than two children. In case of 20% respondents, the reason for not using any contraceptive was not having any living child (Table - V). Refusal by husband and/or in laws together constituted the most important reason for not accepting family planning methods. One tenth of the women were afraid of side effects of contraceptives and equal number of them wanted to have at least one male child before accepting contraception. Very small number of females cited social taboo and fear of complications as reasons for not accepting contraceptives.

#### DISCUSSION:

The couple protection rate of 40.5% was similar to the national average of 43.5%<sup>1</sup>. The couple protection rate for Delhi is reported to be 42%. Like in all other places, terminal methods were the most commonly practised. That too, primarily tubectomy, as vasectomy was reported by only two respondents. It reflects on the women's sole responsibility in practising contraception. In this study, the number of males using condoms or coitus interruptus or withdrawal method accounted for 9% of the contraceptive use.

In our study the main group of contraceptive users were above 24 years which is similar to the findings of other researchers<sup>3-5</sup>. Average age of current users was 29.32 years as compared to 32 years reported in the Operations Research Group Survey<sup>3</sup>. Education, caste and per capita income did not have any statistically significant impact on contraceptive use, which is contradictory to common belief. Similar observations regarding educational status have been reported by Ganguly et al from Pune<sup>6</sup>. Educational status of the couples has been found to significantly influence the contraceptive acceptance in a study

conducted in Allahabad<sup>4</sup>. Majority of women were using contraceptives after delivering four children. This shows that the concept of having two children is still to be imbibed by the population. The lack of knowledge regarding use of spacing method may be the reason for more use of tubectomy.

In this study, it was found that lack of consent from the husband and in-laws together accounted for more than one third of the respondents' reason for not using contraceptives. The mind set of the elder members of the family and the husband was not suitably inclined towards contraceptives in this village, which is similar to the observations in other parts of northern India, though not very well documented. At the same time, woman is not suitably empowered to take independent decisions in such regard on account of lack of education and economic freedom. The fear of side effects is another important reason which needs to be tackled by the health workers. In spite of the mass media campaign of the Government of India regarding equality of the male and female child, the desire for a male child prevents one tenth of the women from accepting family planning methods, irrespective of the size of their families.

**CONCLUSIONS:**

The fact that a large number of couples have adopted permanent methods indicates that programme efforts are more inclined towards sterilization. However, this is also not effective as it is adopted not after two but four children.

Considering the number of users accepting traditional methods, they should be given proper attention, so that greater number of couples may be motivated to accept them, especially for the purpose of spacing child birth. Couples should be brought in the contraceptive use net at the early stage of marriage. Of all the respondents, 40.5% females were not using contraception because of being in ante natal period or lactation period. But the number of females who would adopt family planning methods later on, was not asked in the study .

**REFERENCES:**

1. Annual Report 1992 - 93, Ministry of Health & Family Welfare, Govt. of India, New Delhi
2. Census of India 1991. Series - 1, Paper 2 of 1992. Final Population Totals : Brief analysis of Primary Census Abstract. A.R. Nanda, Registrar General & Census Commissioner, India, Ministry of Home Affairs, New Delhi.
3. ORG - Operations Research Group. Family Planning Practices in India. Third All India Survey. Vol. II, 1990.
4. Bhattacharya M, Joshi P.L. and Raj B. Socio-economic correlates of fertility and contraceptive practices amongst target couples of a rural community. *Ind J Pub Hlth* 1984; xxvii (3): 139 - 46.
5. Dutta R. and Seal S.C. A study of relationship of social and economic factors in fertility and family planning practices in a community in West Bengal. *Ind J Pub Hlth*.
6. Ganguly SS, Achar DP and Urmil AC. A contraceptive prevalence survey in a semi-urban population of Pune. Paper presented at the 33rd Annual Conference of Indian Public Health Association, Varanasi, 1989.

TABLE - I

**AGE DISTRIBUTION OF THE STUDY SAMPLE**

| Age Group    | No.        | (%)            |
|--------------|------------|----------------|
| 15-19 yrs    | 15         | (04.6)         |
| 20-24 yrs    | 95         | (29.0)         |
| 25-29 yrs    | 122        | (37.2)         |
| 30 - 34 yrs  | 53         | (16.2)         |
| > 35 yrs     | 43         | (13.1)         |
| <b>Total</b> | <b>328</b> | <b>(100.0)</b> |

TABLE - II

**ECONOMIC STATUS OF THE STUDY SAMPLE**

| Monthly per capita income | Females with 2 or less conceptions (%) |
|---------------------------|--|
| Upto Rs. 200              | 35 (10.7)                              |
| Rs. 200 to Rs. 500        | 205 (62.5)                             |
| > Rs. 500                 | 88 (26.8)                              |
| <b>Total</b>              | <b>328 (100.0)</b>                     |

TABLE - III

**PREVALENCE OF CONTRACEPTION USE**

| Type of contraception | No.        | (%)          |
|-----------------------|------------|--------------|
| Oral Pills            | 09         | (02.7)       |
| Condoms               | 14         | (04.3)       |
| IUCD (CuT)            | 19         | (05.8)       |
| Terminal Method       | 79         | (24.1)       |
| Others                | 12         | (03.6)       |
| None                  | 195        | (59.5)       |
| <b>Total</b>          | <b>328</b> | <b>(100)</b> |

TABLE - IV

**CONTRACEPTION USE WITH RESPECT TO LIVE BIRTHS**

| No. of live births | Users      | (%)            |
|--------------------|------------|----------------|
| 1 to 2             | 39         | (29.3)         |
| 3                  | 34         | (25.6)         |
| ≥ 4                | 60         | (45.1)         |
| <b>Total</b>       | <b>133</b> | <b>(100.0)</b> |

TABLE - V

**REASONS FOR NOT USING CONTRACEPTION.**

| Reasons                | No.        | (%)            |
|------------------------|------------|----------------|
| Incomplete family      | 19         | 09.7           |
| No living issue        | 39         | 20.0           |
| Afraid of side effects | 21         | 10.8           |
| Desire for male child  | 21         | 10.8           |
| Refusal by in - laws   | 40         | 20.5           |
| Refusal by husband     | 29         | 14.8           |
| Lactating              | 12         | 06.2           |
| Others                 | 14         | 07.2           |
| <b>Total</b>           | <b>195</b> | <b>(100.0)</b> |

**THOSE WHO CARRY ON GREAT PUBLIC SCHEMES MUST BE PROOF AGAINST THE MOST FATIGUING DELAYS, THE MOST MORTIFYING DISAPPOINTMENTS, THE MOST SHOCKING INSULTS AND WHAT IS WORST OF ALL, THE PRESUMPTUOUS JUDGEMENTS OF OTHERS.**

**EDMUND BURKE**