



Original Article

Contraceptive Acceptance among Eligible Couples Residing in Rajshahi City Corporation

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Abstract

A descriptive type of cross sectional study was carried out among the eligible couples residing in Rajshahi City Corporation during the period of three months from 1st April to 30th June, 2005 with a view to collect information about the acceptance of contraceptive methods from 366 respondents with 50 male and 316 female. The mean age in female respondents is 27.22 yrs. and male 30.2 years. The mean number of living children is 2.6 in female respondents and 2.1 in male respondents. Majority of the respondents 65.51% were housewives. 11.71% of the respondents were illiterate. Most of the respondents had knowledge regarding contraceptive methods. In this study 93.67% of female respondents & 20% of male respondents were currently using contraceptive methods. The modern methods were oral pill 21.6% IUCDs 14.9%, injection 35.14%, Norplant 12.16%, condom 16.0%, safe period 6.76%, Tubectomy 9.46%, Vasectomy 4.0% and 6.13% were non acceptors of contraceptives. Temporary methods were more accepted than the permanent methods. 84.2% female and 16% male respondents accepted temporary methods. Permanent methods were adopted by 9.5% female and by 4% male only. Study shows that percentage of the contraceptive method users increased with the level of education. The major causes for not accepting contraceptive methods were fear of complications (46.7% among female and 23% among male), opposition of the elderly (13% among female and 6.4% among male) and 55% male said about female partner's preference as user, so they did not use methods by them. Major causes for not accepting permanent methods were fear of operation (43% among female and 55.6% among male), religious barrier (31.9% among female and 42.2% among male), fear for decreased physical ability (12.5% among female and 2.2% among male) and lastly familial pressure (among 12.5% female). Most of the female 50.9% and only 2% male respondents faced problems during contraceptive use and the nature of the problem were mainly physical complication, spouse opposition and 3.16% female faced unwanted pregnancy while practicing method. Hospital supplies of contraceptives to the respondents were more i.e. 23% and 24% by the NGOs worker. It encourages people to accept contraceptive methods. Main causes of dropout among the respondents were desire for more children specially son preference and also due to health problems.

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Introduction

Bangladesh is a densely populated developing country with declining land man ratio, improper distribution of land and wealth. In 1994 its crude birth rate was estimated as 28.4 per thousand

populations and crude death rate 9.2 per thousand populations. The population will be doubled in 33 years if it continues like this rate¹. The fertility rate is now declining in Bangladesh. It was 6.3 in 1975, become 3.4 in 1994, which was a good

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achievement but from 1994, (TFR-3.4) to 2000 (TFR-3.3), fertility rate is still in a constant figure, though contraceptive prevalence rate has increased from 1994 to 2000 (44.6% to 53.8%)². It is a warning sign for developing country like Bangladesh.

National family planning program offers various type of contraceptive choice for Bangladeshi couples. Some of the methods are acceptable, safe, and effective modern methods like oral pill, IUCDs, injectable form, implants, sterilization etc. A key concern is nearly two-third of the users discontinue within 12 months of starting uses e.g. drop out rate is 48.6%³. Our national goal in 1978 was to achieve NRR-1 by 1990. In 1985 we shifted it to achieve by 2000. Again in 1990 we fixed up our goal of NRR-1 by 2005. If this run at the present rate we will not be able to achieve NRR-1 even in 2030.

Though the total fertility rate (TFR) declined from about 7 to 3.5 births per women in 1970 to 1993-1994, the country still has a high population growth rate. The national contraceptive prevalence rate (CPR) 53% should be raised to over 70% to achieve replacement level fertility.⁴ (two child family, norm). Contraceptive failure deserves the serious attention to make national family planning program successful. So, this study was done to reveal the importance of various methods of contraceptive commodities related to their acceptance among the eligible couples and to estimate the proportion of contraceptive users and their drop out rate as well as its reasons in Rajshahi City Corporation area.

Materials and Methods

It was a descriptive type of cross-sectional study, carried out from 15.03.2005 to 15.06.2005 in 30 wards of Rajshahi City Corporation with population of nearly 7.5 lakhs, literacy rate is approx 65%⁵, and the study population was eligible couples of 15-49 years of age residing in City Corporation area. Sample size was 366 and were selected purposively from each ward and collected with a designed pre tested questionnaire containing open/closed questions was set to get the

data and after collection, verification and checking for consistency the data were manually analyzed and results were presented by tables and graphs.

Results

This study has revealed that majority of the female respondent's age at marriage was 16-18 years (77.2%), and most of the male's (64%) 21 years and above. Mean age at marriage is 17.5 years in female and 21 years in male (Fig.1). Most of the respondent's (49.37% female and 18% male) number of living children was 3 (Table 1). Study showed that 46.6% female and 23.4% male respondents told about fear of complication as reason for not using contraceptives, 13.33% female and 6.4% male told about opposition of elder. Most of the male respondents (55.4%) told that their spouse's use. Female 40.0% and male 14.9% respondents told about other reasons. According to the study most of the respondents (82.3% female and 54.0% male) had no desire for more children. Only 17.72% female and 46.0% male respondent had desire for more (Table-2). Out of 366 respondents 93.67% female and only 20% male were using contraceptive method. Female respondents were using injectable form (35.14%), oral pill (21.62%), IUCDs 14.86%, Norplant (12.16%) and safe period method (6.76%) and Tubectomy (9.46%), 16% male was using Condom and 4% performed vasectomy (Fig. 2). Among the users 100% male and 72% female had experienced physical problems, 14.9% female experienced amenorrhea, 7.45% spouse's objection (psycho.), 4.35% irregular bleeding and 1.24% excessive bleeding during use (Fig. 3). The reasons for being discontinuation of contraceptive use were 7.94% want of more children 15.8% male children, 7.94% female children and 41.3% female and 66.7% male respondents told about other causes (Fig.4). During study a strong relationship was found between respondent's level of education and the use of different contraceptive methods (Table-3). Monthly income and age of the respondents had influence on use of different contraceptive methods (Table-4 & Fig.5)

Fig. 1: Distribution of respondents by their age of marriage.

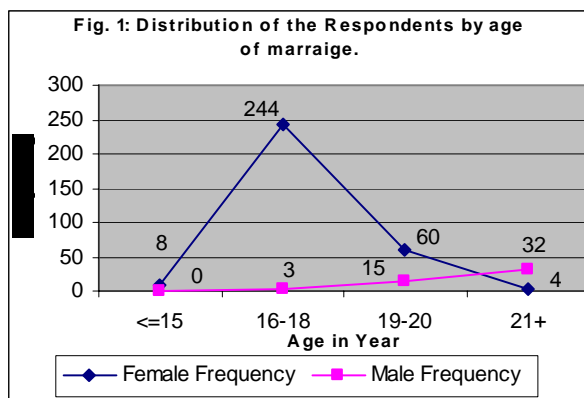


Table-1: Distribution of respondents by number of living children.

No. of children	Female Frequency (%)	Male Frequency (%)
1	12 (3.80%)	9 (18.0%)
2	112 (35.44%)	26 (52.0%)
3	156 (49.37%)	15 (30.0%)
4+	36 (11.39%)	0 (00%)
Total	316	50

Table-2: Distribution of the respondents by social belief against use of contraceptive.

Reasons	Social belief	Female Frequency (%)	Male Frequency (%)
a) Reasons for previously not using contraception	Fear of complication	28 (46.7)	11 (23.4)
	Opposition of elderly	8 (13.3)	3 (6.38)
	Spouse use	0	26 (55.3)
	Others	24 (40.0)	7 (14.9)
Total		60	47
b) Desire for more Children	Desired	56 (17.7)	23 (46.0)
	Not desired	260 (82.3)	27 (54.0)
Total		316	50
c) Reasons for not accepting permanent method	Fear of operation	124 (43.1)	25 (55.6)
	Religious barrier	92 (31.9)	19 (42.2)
	Decrease physical activity	36 (12.5)	1 (2.2)
	Others	36 (12.5)	0
Total		288	45

Fig. 2: Distribution of respondents by currently using contraceptive methods.

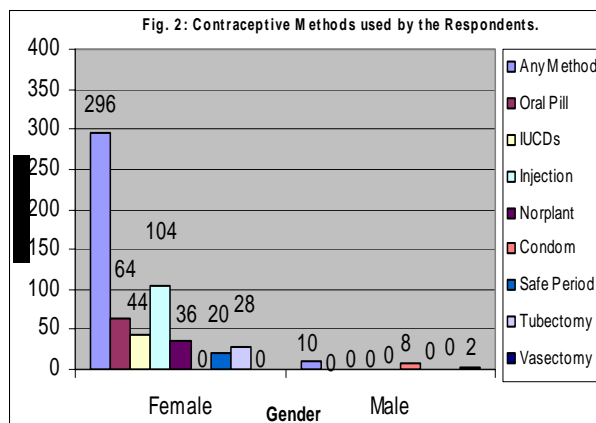


Fig.3: Distribution of respondents by Nature of problem faced during contraceptive Use.

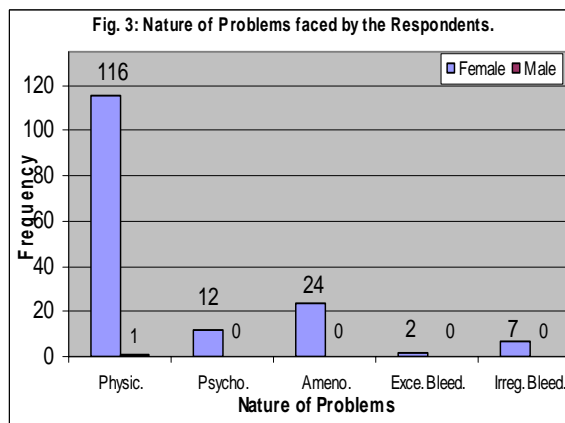


Fig. 4: Distribution of respondents by reasons for discontinuation of Contraceptive.

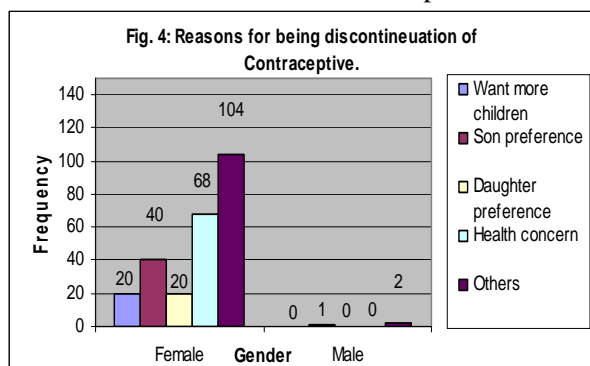


Fig.5: Relationship between age of the respondents and use of different contraceptive.

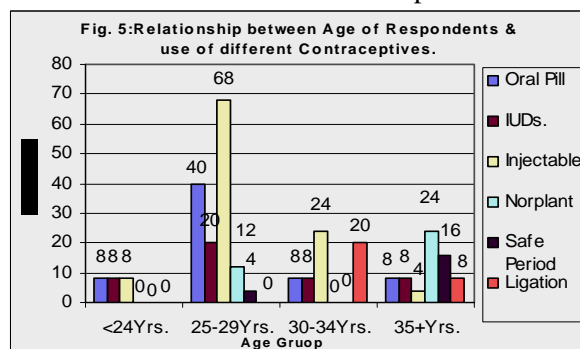


Table-3: Relationship between educational level and use of different contraceptive Method of the respondents.

Education	Oral pill Fre.(%)	IUCDs Fre.(%)	Injectable Fre.(%)	Norplant Fre.(%)	Safe period Fre.(%)	Ligation Fer.(%)	Total
Illiterate	4(6.25)	9(20.5)	36(34.6)	12(33.3)	0	16(57.1)	77
Primary	6(9.38)	16(36.4)	28(26.9)	7(19.4)	0	8(28.6)	135
Secondary	6(9.38)	10(22.7)	40(38.5)	7(19.4)	4(20.0)	3(10.7)	31
S.S.C	8(12.5)	4(9.09)	0	10(27.8)	8(40.0)	1(3.57)	53
H.S.C	36(56.3)	3(6.82)	0	0	8(40.0)	0	0
Degree ⁺	4(6.25)	2(4.55)	0	0	0	0	0
Total	64	44	104	36	20	28	296

$$\chi^2=80; \quad df=4; \quad P<0.01$$

Table-4: Relationship between monthly income of the respondents and use of different Contraceptive method.

Monthly income (Tk.)	Oral pill Fre.(%)	Injection Fre.(%)	Norplant Fre.(%)	IUCDS Fre.(%)	Safe period Fre.(%)	Ligation Fre.(%)	Total
2000-2500	8(12.5)	32(30.0)	8 (22.2)	8 (18.2)	0	12(42.9)	182
2501-3000	4 (6.25)	52(50.0)	20 (55.5)	16 (36.4)	8 (40.0)	14(50.0)	82
3001-3500	8 (12.5)	12(12.0)	8 (22.2)	0	8 (40.0)	2(7.1)	32
3501-4000	20(31.3)	8(7.71)	0	12 (27.2)	4 (20.0)	0	0
> 4000	24(37.5)	0	0	8 (18.2)	0	0	0
Total	64	104	36	44	20	28	296

$$\chi^2=121; \quad df=10; \quad P<0.01$$

Discussion

It was a descriptive type of cross sectional study conducted on eligible couples residing at Rajshahi City Corporation. The study was carried out to find out the contraceptive acceptance among eligible couples with average age of male respondents was 30.2 years and female 27.22 years. Majority of the respondents from all categories were educated above SSC level. This may be due to the fact that they belonged to middle

class. The average family income of the male and female respondents was TK.3800 and TK.3642.41 respectively.

The mean age at marriage was 17.5 years for female and 21 years for male respectively. Early age at marriage and long gap between age at marriage and menopause render the couple to have prolonged reproductive life which leads to increase number of children as well as family size.

49.4% of the female respondents and 30.0% of the male respondents had 3 children. The average number of living children in female 2.68 and male respondents were 2% which was near the mean of ideal family size of 2.2 among married women according to BDHS 1999-2000. Nearly ideal family size of the respondent indicate successful family planning program.

Among the number of children it was observed that in a family where there was two son and one daughter or two sons and two daughters, the respondents were satisfied about their family composition, in comparison to the family where there is either three sons and no daughter or three daughters and no son. Study conducted by M. Kabir Ruhul et.al. on factors affecting desired family size in Bangladesh⁶, it was observed that mothers who had two sons and one daughter were more inclined to perceive their family as complete than those who had three sons and no daughter. This study result is similar to that of our present study. In this study 43.1% female respondent and 55.6% male respondents were not accepting methods due to fear of operation. Asad⁷ conducted a survey on acceptance of permanent methods in 2001 where it was found that, fear of operation was the cause for not adopting permanent methods among 43% female respondents. So this study result is consistent with our present study result.

Thirteen percent female respondents and 6.4% of male respondents expressed that opposition of the elderly was the cause for not using contraceptive. There is an influence of the elderly and heads of the family on making decisions about adopting contraceptive methods. A study conducted by Nashid⁸ found that contraceptive practice of Bangladeshi women were not their own decision and even not by the couple rather it was imposed by elderly and heads of the family. This study finding correlates with the present study.

In this study 7.4% of the female respondents stated spouse opposition an obstacle to contraceptive use. A study conducted by Kamal N.⁹ on the influence of husband on contraceptive use among

Bangladeshi women found that in some areas of Bangladesh, husband's disapproval of family planning was still a major deterrent factor for woman's fertility control. This study result is consistent with the present study.

It was found that 15.4% female and 33.3% male respondents had preference for son and 10.8% female respondents had preference for daughter as a reason for discontinuation of contraceptive practice. A longitudinal study was conducted by Mizanur et. al.¹⁰ among 3,145 women, who were observed for 60 months to examine the effect of the sex composition of surviving children on the acceptance and discontinuation of contraception, this conclude that strong and highly significant effects of gender preference on contraceptive use was present. The preference was not exclusively son-biased rather if was moderate toward a balanced composition, since parents desired to had several sons and at least one daughter. This study result is reflecting the present study result. These findings suggest that gender preferences, particularly preference for sons, act as a significant barrier to fertility regulation in rural Bangladesh.

Among male respondents, 55.4% told that they were not using contraceptive method, since their spouse was using. Therefore it reflects that male respondents were very much dependent on female respondents for contraceptive practice. In this study was found that acceptance of temporary method among females was about 84.8% whereas among males it was only 16%. In case of permanent method female participation was 8.9% whereas male participation was only 4%. So it was evident that male acceptance was much lower than that of females in our country.

A study in U.K¹¹ has shown that those couples who perform vasectomy, there was marked absence of participation of men of African or Asian origin. So this study finding is consistent with our present finding. Bangladesh is one of the developing Asian Country where men participation is very low in comparison to women participation.

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