



A SURVEY OF KNOWLEDGE AND PERCEPTIONS TOWARDS EMERGENCY CONTRACEPTIVES AMONG WOMEN OF BIJAPUR, SOUTH INDIA

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ABSTRACT

Emergency contraceptives (EC) give woman a second chance to prevent unwanted pregnancy from unprotected intercourse. The importance of EC becomes even more in India with high prevalence of unmet need for family planning. This study was done to assess the knowledge about emergency contraceptives among women. A cross-sectional study was done among 300 married women residing in an urban slum of Bijapur & data was obtained using a prestructured questionnaire. Of the 300 women participated in the study, only 68(22.7%) heard of emergency contraception. Majority 65(21.6%) of these women knew about hormonal method of EC. Only 12(4%) knew the correct timing of EC pills. Mass media (15.3%) was major source of information and private hospitals (17.6%) were main source for availing service. The knowledge of emergency contraceptives is poor among women. Improved IEC activities will help to create awareness & better utilization of emergency contraceptives, thus preventing morbidity and mortality from unwanted pregnancy and childbirth.

KEY WORDS: Awareness, Emergency contraceptive, Unwanted pregnancy, Women



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INTRODUCTION

Emergency contraception (EC) is a type of contraception administered to a woman after unprotected intercourse. The need for emergency contraception arises when intercourse is without prior contraceptive coverage (unplanned sex and sexual assault) or failure of conventional contraceptives (slipping or breakage of condoms or forgotten pills). Many of the unintended pregnancies go for abortions which are performed in unsafe condition incurring the higher risk of morbidity and mortality. Also unwanted births can be detrimental to children's health and well being. A study by Pavankumar et al¹ shown that family size had influence on nutritional effects of children. Thus emergency contraceptives give woman a second chance to prevent unwanted pregnancy from unprotected intercourse. Emergency contraceptives were first used by physicians from the Netherland in 1960's where they administered estrogen extracts to 13 years old rape victim². The developing countries are facing a trend of early age of first sex and increasing adolescent sexual activity. Thus use of contraceptives to prevent unwanted pregnancies and unsafe abortion becomes especially important³. India with high unmet need for contraception the unintended pregnancy risks reproductive health of young adults. Many studies conducted worldwide show a poor knowledge of women about EC which prevents them from

seeking timely help and intervention when such a need arises⁴. There is paucity of data regarding EC in this part of India. In view of above, a survey was carried at urban slum of Bijapur to determine their knowledge about EC. The analyses of situation will help policy makers to have modified and better approaches.

METHODOLOGY

A community based cross-sectional study was done on currently married women (15-49yr age group) residing in an urban slum of Bijapur & data was obtained using a structured questionnaire. Sample size was calculated using the formula⁵ $Z = 4PQ / D^2$ as 258 (according to National Health & Family Survey-3⁶- prevalence (P) of Family Planning practices in Karnataka state for urban population was 60.8 %, at 5 % significance, with 10 % allowable error). The total sample size was rounded off to 300. The houses were selected by stratified random sampling method. The informed consent was taken before interviewing participants of study. The women who are not willing to participate were excluded from study. Data was analysed by EPI Info version 7. 1.0.6 Software package and tests like proportions were applied.

RESULTS

Table 1
Awareness of Emergency Contraceptives among women

	Frequency	Percentage
A) Heard of EC (n=300)		
Yes	68	22.7
No	232	77.3
B) Source of information (n=68)*		
Family, Friend	30	10
Health Facility	38	12.6

Mass Media	46	15.3
C) Source of EC service (n=68)*		
Govt hospital	49	16.3
Private hospital	53	17.6
Others	35	11.6
D) Different methods (n=68)*		
Pills	65	21.6
IUD	4	1.3
Others	0	0
E) Period within which EC Pills to be taken (n=68)		
< 72 hr	12	4
Don't Know	56	18.6

***Multiples responses allowed**

The present study observed that of the 300 women participated, only 68(22.7%) heard of emergency contraception. Majority 65(21.6%) of these women knew about hormonal method, where as 4(1.3%) were aware of intrauterine device (IUD). Only 12(4%) women could identify the correct timing of EC pills usage. The source of information for most respondents was Mass media 46(15.3%) followed by Health Facility 38(12.6%) and Family & friends 30(10%). The place for availing service were stated as private hospitals 53(17.6%), Govt hospital 49(16.3%) and other facilities such as pharmacies 35(11.6%).

DISCUSSION

The present study reveals poor knowledge about EC among women regarding its availability and correct timing of usage. Only 22.7% women were aware of emergency contraception. These findings are in comparison to other studies conducted worldwide. S. Bhadra et al⁷ concluded that majority of service utilizers had poor knowledge about emergency contraception. A study among married women in Kuwait⁸ reported that only 9.7% participants heard of hormonal emergency contraception & mostly

from informal sources. Puri S et al⁹ observed 7.3% female college students had knowledge about emergency contraceptive pills. Tesfaye et al¹⁰ reported that the awareness of emergency contraceptives even in women who seek abortion is only about 11.1%. The present study observed that source of information for women was from Mass Media 46(15.3%), Health Facility 38(12.6%) and Family or Friend 30(10%). Obi SN¹¹ observed that mass media (49.2%) and friends (28.8%) were the two most common sources of information about EC. Other investigators Tesfaye et al¹⁰ and C. I. Akani et al¹² also reported similar findings. 53(17.6%) and 49(16.3%) women were aware about Private hospital and Govt hospital as a place for availing the facility. 35(11.6%) women stated other facilities such as pharmacies. Tesfaye et al¹⁰ reported pharmacies, nongovernmental health institutions and both as source of service by 44.4%, 22.2% and 33.3% of women respectively. It was observed that 65(21.6%) women knew about hormonal method and only 4(1.3%) were aware of IUD as method of EC. Other forms of EC such as injectables were not known to any of the participants of the study. Many studies have shown hormonal methods as most popular method of EC. Shaista Naz et al¹³ reported that of the 48% women who

were aware of EC, 41% knew only about hormonal methods and none of them were aware of Intra uterine contraceptive device as an EC. Similar observations were made by Tesfaye et al¹⁰ that only 9 of 89 were aware of EC and of these majority Seven mentioned progesterone only pills as method of emergency contraceptives. Many times the need for EC is confidential and clients take product without detailed knowledge of its correct usage. This information gap leads to failure of EC. Out of 65(21.6%) who were aware of hormonal methods, only about 12(4%) had knowledge of correct timing within which the EC pills are to be taken. These observations were similar to Shaista Naz et al¹³ study where only 2% knew about the correct usage. Puri S et al⁹ reported only 14.7% students knew the correct time for use. Many other studies by Tesfaye et al¹⁰, Obi SN¹¹ and Abbott J¹⁴ documented that very few

respondents knew correctly about the recommended timeframe for use.

CONCLUSION

This study reveals poor knowledge of emergency contraceptives among women. The ill effects of unwanted pregnancy & unsafe abortions are to be stressed. There is need to educate women collectively through health facilities, media, government and non government organizations with emphasis on available methods and correct timing of use¹⁵. The provision of better quality service with client friendly approach will improve the acceptability of EC services. These measures will help to create awareness & better utilization of emergency contraceptives thus preventing morbidity and mortality from unwanted pregnancy and childbirth.

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