#### **CHAPTER – ONE**

#### INTRODUCTION

## 1.1 Background of the Study

Nepal is a land locked country inhibited by multi linguistic, multi religious and multi ethnic. Population of Nepal is 23151423. Among them 11563921 are males and 11587502 are females. The population growth rate is 2.24 percent per annum. The sex ratio is 99.8 and population density is 157.30 persons per square km. the total household No. is 4253,220. If the population increases in the same ratio it will double within 31 years. The main cause to increase the population growth is continuous decline in death rate and low level of contraceptive use. The contraceptive prevalent rate was 39.9 percent among currently married women aged 15-49 years in 2001 (CBS 2003).

Human fertility a complex process, which is responsible for the biological maintains of society factors, economic, social and cultural factors are the ultimate determinants of fertility levels and their variations indifferent societies. Most of the developing countries are suffering from higher fertility rate and our country cannot be exception. One of the important and responsible factors for such problem is low contraceptive prevalence rate that is also essential proximate determinants of fertility. Knowledge and use of contraceptive of any people are determined by their educational status, cultural and religious belief and behavior. Accessibility and availability of contraceptive method also vital role to use of contraceptive method.

The aim of family planning programme must to be enabled couples and individuals to decide freely and responsibly the number and spacing of

their children and to ensure informed choice and make available full range of safe and effective methods. The success of population and family planning programs in variety of setting demonstrates that informed individuals everywhere can and will act responsibility in the light of their own needs and those families and communities. The principle of unformed free choice is essential to the long-term success of family planning programmed (ICPD 1994).

The government of Nepal had adopted Family Planning as official policy in 1959 and then Family Planning Association of Nepal was established in at the same time. That focused on advocacy, when Family Planning / Maternal Child Health Care Board was established. Services were expanded in 24 districts in 1969. Where services were provided through static and mobile clinics and camps were expansion continued till 1975 and 57 districts were covered. Family Planning was integrated with other Public Health Programme in all 75 districts in 1988 and Family Planning was integrated in total health system in 1994. All this governments' action shows that Family Planning had been considered as one of the special programme for the country.

Knowledge of Family planning was nearly universal among Nepalese women and men. Knowledge of modern methods was generally much higher than knowledge of traditional methods with women and men being most familiar with female and male sterilization. Contraceptive prevalence rate among currently married Nepalese women was 39 percent. One in two currently married women have ever used a modern method of Family Planning, compared with only one in three who is currently using. Similarly three fifths of currently married men have ever used a modern method composed with slightly more two fifths that are currently users (NDHS 2001).

Knowledge of at least one modern method of family planning in Nepal is almost universal (99.9%) among both men and women. The most widely known modern contraceptive methods among currently married women are: injectables (99%), female sterilization (99.0%), condom (97%), male sterilization (96%). 84% of married women known of implants about two in three have heard of the IUD, and 7 percent of women have heard emergency contraceptive. About 44 percent of currently married women of age 15-49 are using modern contraceptive method. The most commonly used modern methods are: female sterilization (18%), injectables (10.1%), male sterilization (6.3%), condom (4.8%), Pill (3.5%), IUD (0.7%) and implants (0.8%). This shows interesting result that the proportion of women who are using a modern method has increased by 25 percent over the past five years from the 25 percent from the 35 percent reported in the 2001 NDHS to the current level of 44 percent (NDHS, 2006).

#### 1.2 Statement of the Problem

Population growth is serious problem for every developing country. Nepal is also facing this problem due to lack of industrialization, low productivity, education and unemployment. Economically active population of Nepal is facing problem of unemployment because of application of traditional agricultural methods. Thus only way to balance the ratio of total population to population growth is to control the population.

Almost all currently married women 99% of reproductive age are familiar with at least one method of contraceptive (NDHS, 2006). Where as CPR is 48% in 2006. There is a fundamental question why the knowledge of at least one method of contraceptive is high and why the CPR is low.

Slum are being built in adjoining city area mainly on their banks, public lands around temples, taverns dissolute building and other public places. Therefore it is urgent to study how they are planning their family. In other words, it is much useful to examine the socio-economic and demographic characteristics of slum dwellers and factors determining to control fertility.

In this slum area, generally there is low socio-economic status of women. They are especially dependent on Daily wage for subsistence. They have high economic value of children, high Infant Mortality Rate, favoring sons etc. are the some main factors that contributing high level of fertility. In this community high fertility may be appeared because of age and with their socio-economic, cultural and demographic variables. Contraceptive prevalence method is also effective component of reducing fertility. Due to the low use and lack of better knowledge about contraceptive method. this community has been seen higher level of fertility.

Although there are not any studies about contraceptive knowledge and use till now. So, this study will draw the attention of governments and other NGOs, INGOs to educate these women about knowledge and use of contraceptive method to increase contraceptive prevalence rate.

## 1.3 Research Question

The answer of the following research questions are investigates in this study.

a) What are the knowledge, attitude and practice of contraceptive among currently married women age 15-49 years?

- b) What are the relationship among currently married reproductive age group of women's education and occupation towards the use of contraceptives?
- c) What are the reasons for use and non-use of contraceptives by currently married women?

## 1.4 Objectives of the Study

The general objective of this study is to collect and analyze the knowledge, attitude and practice of contraceptive among Women of Reproductive Age of Slum Area in Meghauli VDC - 5, Chitwan.

The specific objectives of the study area are as follows:

- a) To examine the knowledge attitude and practice of contraceptive among currently married women age 15-49 years.
- b) To examine the relationship among currently married reproductive age group of women education and occupation towards the use of contraceptives.
- c) To assess the reason for use and non-use of contraceptives by currently married women.

## 1.5 Significance of the Study

- 1. The study provides the information of knowledge and use of contraceptive method of currently married women of age group 15-49 years in Meghauli VDC-5, Chitwan. So, it is useful for them who are interested to know about it.
- 2. The findings of this study is useful for the government agencies specially for the Family Planning Sector for making Policy and

Programms and INGOs and NGOs and other institute which are working in this sector.

3. The research provides the reference for them who are interested for the further study on related problems.

## 1.6 Limitations of the Study

This study is based on Meghauli VDC-5, Chitwan district. This study is focused on Currently Married Women of Reproductive Age (15-49) years who are lived in slum other part of the country.

- This study covers the knowledge, attitude and practice of contraceptive method.
- This study is based on a case study of selected area therefore the findings cannot be generalized to the whole nation.

#### **CHAPTER -TWO**

#### LITERATURE REVIEW AND CONCEPTUAL FRAMEWORK

#### 2.1 Review of Literature

Before the discovery of the modern contraceptive methods, it was considered that the children were the gift of the God and their existence could not be prevented. When couple did not want more children they used to kill their new born baby but after discovery of modern artificial contraceptive methods. People have started to practice different artificial birth spacing and birth limitating methods. The modern contraceptive methods could play the supplementary role for birth spacing and the improve maternal and child health. However, it might be due to the lack of contraceptive knowledge or social pressure, couples generally have large number of children, therefore some kinds of social change is necessary to motivate to have fewer children. In some societies significant number of couple might have preferred fewer number of children than were having.

Fertility may be considered natural if no contraceptive or induced abortion is used. By analyzing the data from U.S. based studies, Bongaarts and Potter (1983) conclude that there are basically two ways in which a population can control its fertility below the level implied by the natural marital fertility rates. First, the number of years of exposure to childbearing can be limited. Second, deliberate control of marital fertility can be exerted, either through the use of contraceptive or by resorting to induced abortion. But the access to legal abortion in different countries depends largely on the extent of restrictions imposed by law (Bongaarts and Potter, 1983)

In many developing countries, high fertility is associated with the mode of productive and with cultural and religious factors. The level of income, education and child survival also play major roles in the reduction of fertility. In addition, family planning in general has an important role to play in reducing marital fertility (UNFPA, 1989).

Fertility is determined by various social economic and demographic variables, caste ethnicity, religion cultures. Women's education occupation, sex performance use of devices and community. Being these variables supports and Brahman, Chhetri and Newar has lower fertility than other ethnic group (Risal and Shrestha 1989).

The spreading of modern contraceptive methods and its positive roles in declining fertility is, however depends on contraceptive knowledge altitude and practice as well as the sufficient supply of the methods. The importance of knowledge comes first in order to popularize and change the negative attitude towards contraceptive use and finally leading to practice. The population council, in its reports quoted that counseling as an integral part of contraceptive knowledge and decision making ability of individual in order to promote to use contraception (Maria et al. 1986, 17:1-50).

Females are dominated in terms of family planning issues. Most of the popular methods in Nepal are female oriented. Though there are methods for male but males don't intend to use: females don't have control over their own fertility. In number of ways the society dominates females. The major causes of maternal death is unsafe abortion which arise because of the unwanted pregnancy. (Pokherel, 2003)

Nepal fertility survey 1976 studied 5.51 percent respondents of currently married women by specific method. The over all knowledge of at least a

method of family planning among currently married women aged 15-49 years was 22.1 percent survey also show that 4.9 percent were ever user of family planning methods among current married by specific method and currently using any modern contraceptive was 2.9 percent (NFS, 1976).

According to Nepal contraceptive prevalence survey 1986 overall knowledge of at least one method of family planning among currently married women of aged 15 - 49 years was 55.9 percent and ever use of contraceptive is only 15.8 percent (NFHS, 1986).

Conducted a base line survey on health status in Sindhuli district for Integrated Hill Development Project (IHPO) and Swiss Development Cooperation (SDC) in Nepal concluded that 89.0 percent women know at least one method of Family Planning. This study fond out in ethnic groups knowledge, Tamang, Magar, Chettris and Brahmins have 61.8, 85.5, 90.0 and 85.5 percent respectively but current use 7.5, 11.3, 27 and 34.3 percent respectively (New ERA, 1990).

His Majesty's government made a decision regarding integration of family planning services would be provided by interesting all vertical projects in all 75 districts. The Ministry's Organization was restricted to accommodate a majority of vertical projects. Staff members with the restructuring of the Ministry, the Integrated Community Health Services Development Project (ICHSDP) was abolished and converted into the public health division in 1987. All other vertical projects will case to have vertical identity by 1990 and will be integrated health services including Family Planning are being made available through the District Public Health Office (DPHO). The implementation of any Family Planning activities is to be done by DPHO through the regional health division.

Likewise, the 1987 restructuring of the ministry of health also converted the Family Planning / Maternal Child Health Project. Tuladhar (1989:177)

Lower percentage of current married rural women are practicing sterilization compared to urban women. It is noted that female sterilization is popular among currently married women in Terai region and male sterilization is popular in mountain and hill region people believe that they can not work, if they sterilized, so working female people less like to used sterilized. MEBDC survey 1996 showed that contraceptive knowledge varies with women age, place of residence and women education. (Pathak 1996:75)

Nepal fertility and family health survey 1996 shows that 98 percent of both ever and currently married women aged 15-49 knew at least one method of family planning. This survey indicates that 38 percent of currently married women have ever used one method and 35 percent of currently married women have used a modern method of family planning (NFHS, 1996).

The total current users of contraception were reported as 32.3% in BDCS. It also reported that among the currently married women only 5.3% in age group 15-19 and 15.8% in age group 20-24 had used any method of contraception in 1996 (KC, et. al., 1997: 70-73).

Women who had not used any kind of contraceptive had lower CEB is obvious and expected in relatively lower age groups. Because the knowledge and use of contraceptives is sought by women only after completing the desired family size but women with higher CEB in older age group are expected to have slightly less CEB then that of non users, which is no true for the case of Nepal. In total women not using any

method had of 3 where as women using temporary methods had 3.4 and permanent methods had 4.1 CEB. (Population & Development Vol:7 P.26).

Women not working due to any separate group. Similarly, women engaged in agricultural and household related jobs are also merged together and all other performing non-agricultural activities are categorized in non-agricultural group. In total differential occupation of women doesn't support much for a varied fertility level by its categories of other variables. The not working group with 3.2, agricultural and household group with 3.3 and non-agricultural group with 2.9 CEB shows relatively non-variability in fertility while examine with the help of occupational status of women. (Population and Development Vol:7).

The relationship between current uses of any modern method and number of living sons, the use sharply increased with increasing number of living children up to 2. less than one tenth of women with no living sons were using any modern methods of contraception and the contribution of sterilization was less pronounced to the total use in this category. While about 5 out of 10 women with 2 living children were with any number of living son is more likely to use any contraceptive method that of none. This is common phenomenon in Nepal considered the extent of son preference in Hindu dominated society. (Subedi 1997:61)

The majority of the currently married women (95.6%) are familiar with at least one contraceptive method. Among the individual methods female sterilization appears to be the best known method (86.1 percent). Followed by male sterilization (85.6 percent) injectable (77.8 percent) condom (75 percent) and pill (63.3 percent). Less than eight percent of the women are familiar with traditional method. The contraceptive

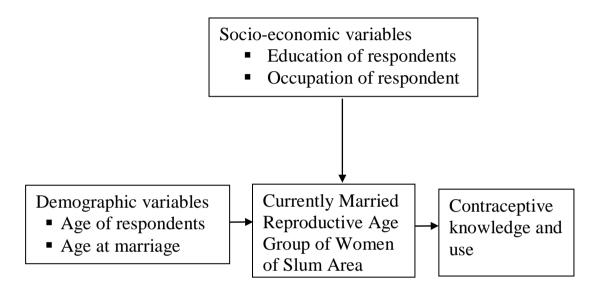
prevalence rate has been found 25.6 percent of the currently married women in reproductive age in this community, which is figure (29 percent) based on VDC survey 1996, almost 26 percent of the total CPR is contributed by female sterilization, injectables (5.6%), pills (95%) and condom (3.9%) are also used. Traditional and other methods are also used. Traditional and other methods are also used less than 3 percent. The current user of male sterilization, IUD and Nor Plant are not found. (Aryal 1999:47,48)

National level data from 2001 indicates that 39.9 percent of currently married women are using some method of family planning and that most (35 percent) use modern methods. Current usage of modern methods has measured by 13 percent since 1996. An estimated 15 percent of women use female sterilization, 8 percentage injectable, 6 percent male sterilization, 3 percent condoms and 2 percent oral pills less that 1 percent each rely on the IUD or the implant. Contraceptive use varies by age with lower rates a peak in usage among women aged 35.39 women in urban areas are also more likely that their rural contraceptives to use a family planning method. The contraceptive prevalence rate for any method & 62 percent in urban areas, compared with 37 percent in rural areas. (CBS, 2003). Similarly, in Chitwan among the currently users, condom (39.35%), pills (7.1%), injectables (16.4%), IUD (1.8%), Norplant (1.3%), male sterilization (45.9%) and female sterilization (19.7%). (District Profile of Nepal 2007/08).

Almost 34 percent of currently married women reported to ever practical as form of contraception. Those who had used modern method constituted about 34 percent. The most commonly used method were female sterilization (14.4 percent) followed by male sterilization (7.1 percent) injectable (6.3%) pill, 40% and condom (3.1%). Ever use of

IUD, Norplant and Vaginal methods was nominal constituting less than one percent are married women using each method. Their share of traditional method to the overall ever used of contraception were negligible. (Wagle, 2007;13)

## 2.2 Conceptual Framework



The conceptual framework is suitable for the study of contraceptive knowledge and use which is influenced by different socio-economic and demographic variables.

The main objective of this research is to study contraceptive knowledge and use among women of Reproductive Age of Slum Area in Meghauli-5, in view socioeconomic and demographics variables.

The knowledge and use of contraceptives are affected by availability, accessibility, side effects and effective counseling of contraceptive service.

## **CHAPTER – THREE**

#### **METHODOLOGY**

This chapter deals with the researcher methodologies. It is used to collect quantitative and qualitative data, which is needed for the study. Especially this chapter discusses the location of the study area, research design, source of data, targeted population, questioner design, method of data collection, selection of dependent and independent variables and method of analysis of data.

## 3.1 Study Area

Chitwan is a district which lies in Narayani zone of Nepal. This District is a central part of Nepal. The area covers hill and Tarai. It is located between 27°27' and 46°0' North latitude, and 83°53' to 85°27' East longitude approximately. It covers an area of 2,218 square kilometers. The climate of this district is known as tropical and sub tropical on an average this district experience average maximum temperature of 30.3°C and minimum temperature is below than 16.6°C in summer and winter seasons. An average rainfall of the district is 1512.3 ml.

There are 36 VDC and 2 municipalities in Chitwan district among them Meghauli is one of the largest VDC of Chitwan district.

According to census 2001, the total population of Chitwan district 4,72,048 among them 2,36,964 are males and 2,36,964 are females. Similarly, according to VDC record, total population of Meghauli VDC has 14,699. The total population of ward no. 5 is 1455. Due to the familiar with this slum area researcher has selected this area. There are to 83 household in study area. The total population of this area has 428 among them 222 are females and 206 males.

## 3.2 Research Design

This research is based on descriptive research design. It has been carried out in Meghauli-5, Chitwan district. In this research, the information of contraceptive knowledge, attitude and practice of currently married women of reproductive age are presented in an organized way. Semistructure questionnaire is used to collect information from the respondents.

#### 3.3 Sources of Data

This study is based on primary source of data which is obtained through census method. Among the total eligible women, 92 currently married women of 15-49 age groups are the main sources of information. As a complementary data, the secondary data are obtained from CBS publications, VDC record, etc.

## 3.4 Targeted Population

The total 92 currently married women of 83 households in slum are of Meghauly VDC-5, Chitwan are the targeted population of this study.

## 3.5 Questionnaire Design

Questionnaire is designed to obtained two types of information. Household and individual. Household questionnaires have been divided into three sections all section provide identification of family background and household questionnaires have been designed to take the information on the sex, marital status, relationship with head of household, educational statues etc.

Individual questionnaire has been divided into four sections. Questionnaire is divided into following sections.

- Respondent's background.
- Knowledge of the contraceptives.
- Attitude of contraceptives.
- Practice of contraceptives.

#### 3.6 Data Collection

As the study is based on primary source of data. Data are collected through face to face interview. Prepared questionnaires are the major research tool of this study. so the questions included in questionnaire are asked to the respondents (currently married women of 15-49 years) to collect the data.

## 3.7 Selection of Dependent and independent variables

This study consists of dependent and independent variables.

The independent variables can be divided into demographic and socio economic variables.

Demographic variables:

- Age of respondent.
- Age at marriage.

Socio economic variables:

- Education of respondent
- Occupation of respondent.

Dependent variables:

- Knowledge of contraceptive
- Use of contraceptive

The main aim of this study is to examine the impact of contraceptive knowledge, attitude and practice. Thus education, age of respondent and occupation are the main influencing variables of the knowledge, attitude towards the practice of contraceptives.

## 3.8 Data Processing

The questionnaire used were pre coded and checked manually to avoid the risk of data processing. After completing checking the data were entered in computer. Microsoft Operating System XP with Office Package (Microsoft Excel) was used to process data for the analysis.

## 3.9 Data Analysis Techniques

The collected data of this research have been analyzed through the descriptive technique. The quantitative data are organized in tables and interpreted these tables in words. Similarly, some other information of this research has been explained in an organized way.

#### **CHAPTER – FOUR**

#### BACK GROUND CHARACTERISTICS OF RESPONDENTS

This chapter provides some demographic and socio-economic characteristics of the household population of slum area people. Demographic characteristics provided age, sex structure and marital status. Socio-economic characteristic provide educational attainment, major occupation of the study area.

## 4.1 Household Background Characteristic

## 4.1.1 Age Sex Structure

Age sex structure is the primary basis of demographic classification of vital statistics. Age and sex are very important variables in the study of fertility, morality and migration.

Table – 4.1: Distribution of Household Population by Age and Sex

Age	M	ale	Fe	emale	T	otal
	No.	%	No.	%	No.	%
0-4	27	13.1	32	14.1	59	13.8
5-9	26	12.6	31	13.9	57	13.3
10-14	25	12.1	24	10.9	49	11.4
15-19	18	8.7	28	12.6	46	10.7
20-24	16	7.8	19	8.6	35	8.2
26-29	21	10.2	20	9.0	41	9.6
30-34	14	6.8	16	7.2	30	7.1
35-39	15	7.3	12	5.4	27	6.3
40-44	12	5.8	15	6.8	27	6.3
45-49	13	6.3	11	4.9	24	5.6
50-54	4	1.9	2	0.9	6	1.4
55-59	7	3.5	5	2.5	12	2.8
60-64	2	1.0	4	1.8	6	1.4
65-69	2	1.0	3	1.4	5	1.2
70 and above	4	1.9	0	0	4	0.9
Total	206	100.0	222	100.0	428	100.0

Table -4.1 shows distribution of household population by age and sex. There are 428 people in 83 households in the study area. Among them 206 are males and 222 are females. The average household size is 5.2 person per household. The highest population is found in the age group 0-4 (13.8%) followed by (13.3%) in the age group 5-9 years.

#### 4.1.2 Marital Status

Marital status is one of the important characteristics for this study so the martial status of the study area is given below.

Table – 4.2: Distribution of Household Population Aged 10 Years and Above by Sex and Martial Status

Marital status	Male		Fema	Female		Total	
	No.	<b>%</b>	No.	%	No.	%	
Married	95	62.1	99	62.3	194	62.2	
Unmarried	51	33.3	43	27.0	94	30.1	
Widow/widower	5	3.3	14	8.8	19	6.1	
Separated	2	1.30	3	1.9	5	1.6	
Total	153	100.0	159	100.0	312	100.0	

Source: Field survey 2008

Table – 4.2 Provide martial status of household population of the study area of aged 10 years and above. Among the total population 153 are male 159 are female. Only about 33 percent male and about 27 percent females are unmarried. The study found that the married population is the highest (62.2%) followed by unmarried (30.1%), widow/widower (5.1%) and separated (1.6%). No cases of divorced in the study area have been found.

## 4.1.3 Socio-Economic Characteristics

Socio-economic characteristics deals with educational attainment, major occupation access to water supply and toilet facilities of the study area.

#### 4.1.3.1 Educational Attainment

Educational attainment is the most important factor for the people with which they can face and solve every problem. Knowledge and use of family planning also depends upon the educational attainment, couple can decide how many children are suitable for their happy life and in what they deal with their children for their bright future.

In this study people who can read and write simple things like name are taken as literate.

Table – 4.3: Distribution of Household Population by Aged 5 Years and Above by Sex and Literacy Status

Literacy status	Male		Female		Total	
	No.	%	No.	%	No.	%
Illiterate	28	15.6	49	25.8	77	20.9
Literate	151	84.4	141	74.2	292	79.1
Total	179	100.0	190	100.0	369	100.0
Literate						
Non-formal	17	11.3	21	14.9	38	13.0
Primary	69	45.7	62	43.9	131	44.9
L. Secondary	30	19.9	33	23.4	63	21.6
Secondary	25	16.5	19	13.5	44	15.0
S.L.C. and above	10	6.6	6	4.3	16	5.5
Total	151	100.0	141	100.0	292	100.0

Table – 4.3 shows distribution of population aged 5 years and above. The total literacy rate is 79 percent. Among them primary level of education has been found about 45 percent in household population, followed by lower secondary 20 percent and secondary 17 percent, 11 percent household population have reported non-formal education 21 percent household population have reported illiterate. 79 percent household population can able to read and write and 21 percent household population can not able to read and write.

## 4.1.3.2 Major Occupation

Occupation is that factor which helps to improve socio-economic factor of the people.

**Table – 4.4: Distribution of Household Population by Major Occupation** 

Occupation	Frequency	Percent
Agriculture	34	8.0
labour	81	18.9
Daily wages	96	22.4
House worker	33	7.7
Student	84	19.6
Dependent	68	15.9
Service and Business	32	7.5
Total	428	100.0

Source: Field survey 2008

Table – 4.4 Shows distribution of household population by major occupation. People are engaged in daily wages 22 percent, followed by 19 percent people are engaged labour, 8 percent people engaged in agriculture 20 percent in student by 16 percent people are reported dependent.

## 4.1.3.3 Drinking Water Facilities

Nepal is one of the richest country in water resource. Although, supply of drinking water is not properly distributed in study area, there is more than 50 percent people use modern drinking water system.

Table – 4.5: Distribution of Households by Drinking Water Facilities

Water facilities	Frequency	Percent
Hand Pipe	56	67.5
Well	18	21.7
Stream	9	10.8
Total	83	100.0

Source: Field survey 2008

Table – 4.5 shows distribution of household by drinking water supply facilities, it shows about 67 percentage of the households are using Hend pipe for drinking water, followed by 22 percent of the households are using well for drinking water and 11 percent of the household are using stream for drinking water.

#### 4.1.3.4 Toilet Facilities

Trend of using toilet is better in the study area. Some NGO's organization distribution toilet materials in this VDC which continuously work.

Table -4. 6: Distribution of Households by Toilet Facility

Type of Toilet	Frequency	Percent
Modern Toilet	70	84.3
Traditional pit	7	8.4
No. Toilet	6	7.3
Total	83	100.0

Table -4.6 shows distribution of households by toilet facility 84 percent of households have modern toilet, 9 percent of house hold traditional pit and 7 percent have no toilet.

## **4.2 Respondent Background Characteristics**

## **4.2.1** Respondents Age

Table 4.7: Distribution of Respondents by Age

Age group	Frequency	Percent
15-19	11	12.0
20-24	15	16.3
25-29	20	21.7
30-34	17	18.5
35-39	13	14.1
40-44	9	9.8
45-49	7	7.6
Total	92	100.0

Table 4.7 shows that the highest respondents are found in age group 25-29 (22%) followed by 18% in the are group 25-29 years. the lowest respondents are found in age group 45-49 (8%).

#### **4.2.2 Educational Status**

Education is most important factor it is a indicator of development and awareness in every aspects of society. Among 92 respondents of currently married women aged 15-49 years, the educational background is a given below.

Table – 4.8: Distribution of Currently Married Women Aged 15-49

According to Their Level of Education

<b>Level of Education</b>	Number	Percent
Illiterate	21	22.8
Literate	71	77.2
Total	92	100.0
Literate		
Non-formal	11	15.5
Primary	32	45.1
L. Secondary	16	22.5
Secondary	10	14.1
S.L.C. and above	2	2.8
Total	71	100.0

Source: Field survey 2008

Table – 4.8 shows of currently married women aged 15-49 according to their level of education. The total literacy rate is 72 percent. Among them 45 percent of respondents have the primary level of education, about 22 percent of respondents have lower secondary, only 3 percent respondents have S.L.C. and above level of education. 12 percent respondents have non-formal education and about 23 percent respondents are illiterate.

77 percent respondents can able to read and write and 23 percent respondents cannot able to read and write.

# 4.2.3 Age at Marriage

According to census marriage is defined as men and women who are married either consensually or religiously or legally and live together in the same or different place as husband and wife are known as married person. For a person to be a married the following criteria should be fulfilled.

- a) Married according to social, cultural or legally practiced method.
- b) Men and women bound in marriage should live together or separately as husband and wives.

But in general marriage is the union, which involve rights and obligation fixed by law and custom.

Table – 4.9: Distribution of Currently Married Women According to Age at Marriage

Age at marriage (in year)	No.	Percent
< - 15	11	11.9
15 – 19	49	53.3
20 – 24 and above	37	34.8
Total	92	100.0

Source: Field survey 2008

Table - 4.9 shows distribution of age at marriage. It shows that, higher no. of respondent have got marriage at age 15-19 years 53 percent which is followed by age 20-24 years 35 percent and 12 percent have got married at under 15 years of age.

## 4.2.4 Major Occupation

Women's occupation is one of the most important factors in the family planning. Most of the study shows that the occupation of women determines that how much children they have.

Table -4.10: Distribution of Currently Married Women Aged 15-49

According to Their Major Occupation

Occupation	No.	Percent
Daily Wage	51	55.4
Agriculture	15	16.3
House workers	21	22.9
Business and Service	5	5.4
Total	92	100.0

Source: Field survey 2008

Table –4.10 shows distribution of currently married women aged 15-49 according to their major occupation. It shows that majority of respondents 55 percent reported daily wage which is major occupation, followed by agriculture(*Adhiya and bandaki*) 16 percent, 5 percent respondent reported engaged Business and Services and 23 percent respondents reported house worker.

## **4.2.5 Income Distribution**

The annual income level plays the major role in determining the level of living standard and economic activities of people.

Table – 4.11: Income in Month of Currently Married Women Aged 15-49 Year

Amount (in month)	Frequently of No.	Percent
≤ 500	12	16.9
501-1000	21	29.6
1001-1500	28	39.4
1501 and above	10	14.1
Total	71	100.0

Table -4.11 shows distribution of currently married women age 15-49 years among 92 respondents only 71 respondents are involved in earning works. According to their monthly income 39 percent of respondents earning NRs. 1000-1500 in month, followed by 30 percent of respondent earning NRs. 501-1000 in a month 17 percent of respondent earning NRs  $\leq$  500 in month, 14 percent of respondent earning NRs. 1501 and above in a month.

#### **CHAPTER – FIVE**

## CONTRACEPTIVE KNOWLEDGE, ATTITUDE AND PRACTICE

#### Introduction

This chapter consists of five sections. This first section deals with the respondent knowledge of contraceptive prevalence. Second section deals with the attitudes towards contraceptives, third section deals with the differential in ever use and current use of contraceptives. Fourth section deals reasons for non- using contraceptives and the last section describes the side effect of contraceptives.

## 5.1 Knowledge of Contraceptives

This section shows finding on knowledge of contraceptives. The study collects information about the knowledge of contraceptives on spontaneous. Currently married women of reproductive age have initially asked whether they have heard about any contraceptive method. If they say yes then they have been asked names of contraceptive. The responses are based on spontaneous knowledge of contraceptive.

## **5.1.1** Level of Knowledge of Methods

Table – 5.1: Distribution of Currently Married Women Knowing at Least One Contraceptive Method by Specific Method

Methods	*Frequently known spontaneous	Percent
Any modern method	92	100.0
Female sterilization	89	96.7
Male sterilization	82	89.1
Pills	71	77.2
IUD	41	44.6
Injectables	89	96.7
Implants	47	51.1
Condom	88	95.6
Any traditional method	12	13.0

\*Multiple responses

In table – 5.1, information about knowledge of contraceptives is presented for all currently married women by specific methods. Knowledge of at least one modern method of family planning is universal in currently married women. The most popular modern contraceptive methods among currently married women are: Female sterilization (97%) and injectables (97%), condom (96%), male sterilization (89%) and pill (77%). Only 51 percent of currently married women know of implants and 45 percent of currently married women know of IUD. A greater proportion of women reported to knowing modern method than traditional method.

# **5.1.2** Knowledge of Different Family Planning Methods According to Age Group

The knowledge of different family planning methods according to age group is given below.

Table – 5.2: Percentage Distribution of Currently Married Women Knowing at Least One Contraceptive Method According to Age Group

Age group	Female Ster.	Male Ster.	Pills	IUD	Inject.	Implant	Condom	No. of
2								women
15-19	100.0	100.0	72.7	54.5	100.0	63.6	100.0	11
20-24	100.0	100.0	93.3	46.7	100.0	66.7	100.0	15
25-29	100.0	95.0	95.0	60.0	100.0	65.0	100.0	20
30-34	94.0	94.0	70.6	52.9	100.0	58.8	94.1	17
35-39	92.0	85.0	69.4	38.5	100.0	30.8	92.3	13
40-44	100.0	78.0	55.5	11.12	89.0	12.2	88.9	9
45-49	86.0	57.0	57.1	14.3	71.4	14.3	85.7	7
Total	96.7	89.0	77.2	44.6	96.7	51.1	95.6	92

In table 5.2, shows that in all group of respondents, 100.0 percent knowledge at least of modern method. In 15-19 years of age group of respondents 100.0 knowledge of female in sterilization, male initialization, injectables and condom. Only 54.5 percent knowledge of IUD in that age group followed by 20-24 age group of respondents 100.0 percent knowledge of permanent method, injectables and condom and 47 percentage knowledge of IUD. In 45-49 years of age group of respondents have knowledge of female sterilization 86 percent, male sterilization 57 percent, and condom 86 Percent, IUD and injectables are equal knowledge 14 percent.

## 5.1.3 Knowledge of Contraceptive According to Level of Education

Table 5.3: Present the Knowledge of Contraceptives of Eligible Women According to Their Level of Education

Methods	Level of Education					
	Illiterate	Non formal	Primary	Low Secondary	Secondary	SLC and above
Female Steri.	61.9	90.9	93.7	93.6	100.0	100.0
Male Steri.	38.0	72.7	78.1	81.3	100.0	100.0
Pill	52.4	72.7	93.7	93.8	100.0	100.0
IUD	4.8	18.2	21.9	46.2	80.0	100.0
Injectable	95.2	100.0	100.0	100.0	100.0	100.0
Implants	23.8	63.6	65.6	87.5	90.0	100.0
Condom	80.9	81.8	90.6	100.0	100.0	100.0
Total No. of Women	21	11	32	16	10	2

Source: Field survey 2008

Table 5.3 shows, in primary level, respondents reported 100.0 percent knowledge of injectables. Knowledge of female sterilization, pills and

condom reported by respondents are more than 90 percent and only 22 percent have knowledge of IUD, followed by lower secondary level 100 percent knowledge of injectables, condom reported by respondent. more then 90 percent women have knowledge of female sterilization, pills and only 46 percent knowledge of IUD. In secondary level 100 percent women have knowledge of permanent sterilization, pills, injectables and condom followed by 90 percent knowledge of implants and 80 percent knowledge of IUD. In SLC and above level 100 percent knowledge of all modern method reported by respondents.

The respondents who have got Non formal education, among them 100 percent knowledge of injectables reported by respondents. More than 80 percent women have knowledge of female sterilization and condom, only 18 percent have knowledge of IUD.

In Illiterate respondents, 95 percent have knowledge of injectables, 81 percent have knowledge of condom and only 5 percent have knowledge of IUD.

## **5.1.4 Source of Contraception**

Table –5.4: Distribution of Currently Married Women Aged 15-49 by Their First Source of Information about Contraceptives

Main source of	Number	Percent
information		
Friends	43	46.7
Family	11	11.9
Health worker	5	5.4
Radio/TV	27	29.34
Print media	6	6.5
Total	92	100.0

Source: Field study, 2008

Table 5.4 shows that the maximum 47 percent of respondents know about contraception methods through friends followed by radio/TV 29 percent only 5 percent respondent know about contraceptive method through health worker.

## 5.1.5 Knowledge on Place of Contraception Method

Table – 5.5: Distribution of Currently Married Women Aged 15-49
the Place of Contraceptive Method Available According
to Their Knowledge

Place of contraceptive method available	*No.	Percent
Hospital	37	40.2
Health Post	92	100.0
Family Planning Clinic	56	60.9
Health workers	42	45.6
Shops	9	9.8

<sup>\*</sup> Multiple response

Source: Field survey 2008

Table –5.5 shows the 100 percent women said the contraceptive methods are available in health post, 62 percent women said contraceptive method are available in Family Planning Clinic. 46 percent women said contraceptive method are available from health workers. And only 9 percent women said the contraceptive method are available from the shops.

# **5.2** Attitudes towards Contraceptives

# **5.2.1** Attitudes towards Advantage of Contraceptive Use

All currently married women are asked about the advantage of contraceptive methods at the time of field survey the result is presented below.

Table – 5.6: Distribution of Currently Married Women Aged 15-49

According to Their Opinion on Advantage of

Contraceptive Use

Opinion	No.	Percent
To make better eco-condition of family	17	18.5
To make better health of child and mother	22	23.9
To make happy family life	19	20.6
To make better education and care of child	16	17.4
All of these	18	19.6
Total	92	100.0

Source: Field survey 2008

Table 5.6 shows that about 24 percent of respondent reported that the major contribution of contraceptive use is to make better health of child and mother. Similarly about 21 percent reported the contribution of contraceptive use is to make happy family life. Furthermore 18 percent of respondents believe that use contraceptive method is to make better economic condition of family. But about 20 percent of respondents reported to believed that the contribution of contraceptive use is to above all advantages.

# 5.2.2 Attitude towards Birth Spacing

The year gap between first birth and second birth is called birth spacing overall currently married women aged 15-49 years are asked about appropriate birth spacing between two children at the time of survey. Their opinion are as follows:

Table – 5.7: Distribution of Currently Married Women Aged 15-49

Years According to Their View on Birth Spacing

Interval (in year)	No.	Percent
One year	1	1.1
Two years	8	8.6
Three years	38	41.3
Four years	21	22.8
Five and above years	24	26.1
Total	92	100.0

Source: Field survey 2008

Table 5.7 shows that 41 percent of respondents reported that like to have birth spacing of three years. More than 26 percent of respondent are like to have birth spacing five and above five years 23 percent of respondent are like to have birth spacing four year, only 9 percent respondent are like to have birth spacing two year and 1 percent respondent are like to have birth spacing one year.

## 5.2.3 Attitude towards Child Bearing Age of Women

All the respondents in the study areas were asked their attitude towards child bearing age of women at the time of survey and the result is presented below.

Table – 5.8: Distribution of Currently Married Women Aged 15-49 Years According to Their Opinion on First Child Bearing Age of Women

Age (in years)	No.	Percent
< 20	29	31.5
21-22	36	39.1
23-24	16	17.5
above 25	11	11.9
Total	92	100.0

Table 5.8 shows that 39 percentage of respondent reported that the appropriate age for child bearing is 21-22 years followed by 32 percent of respondent reported that is under 20 years, 21 percent of respondent reported that the appropriate age for child bearing is above 25 years.

## 5.3 Practice of Family Planning Method

Contraceptive use is one of the most important proximate determinants of aggregate level of fertility. Further more it generally, assumed to play the principle role in transition to lower fertility. The use of contraceptive may have significant impact on declining population growth.

## **5.3.1** Ever Use of Contraception

Data on ever use of contraception has special significance because it reveals the cumulative success of programs promotion the use of family planning among couples. Ever use refers to use of a method at any time, with no distinction between past and present use (NDHS: 2006).

Respondents of the study area who have heard of method of family planning were asked where they have ever used any method.

Table – 5.9: Distribution of Currently Married Women Aged 15-49

According Ever Use of Any Contraceptive Method

<b>Ever used contraceptive method</b>	No.	Percent
Yes	58	63.1
No	34	36.9
Total	92	100.0

Table 5.9 shows that 63 percent of the currently married women have ever used of contraceptive methods where as national figure of ever user of contraceptive method is 65.0 percent (NDHS 2006).

Table – 5.10: Distribution of Currently Married Women Aged 15-49 years by Ever Used of any Contraceptive Method

Method	No.	Percent
Female sterilization	8	13.8
Male sterilization	7	12.1
Pill	7	12.1
Injections	25	43.1
Implants	1	1.7
Condoms	10	17.2
Total	58	100.0

Source: Field survey 2008

Note: If more than one method is used only the most effective method is considered in this table.

Table 5.10 shows distribution of currently married women aged 15-49 who have ever used any contraceptive method by specific method. Among ever user of contraceptives (43 percent) have ever used injectables, 17 percent have ever used condom, about 12 percent have ever used pill, 2 percent have ever used implants and 14 percent have used female sterilization and husband of 12 percent respondent have used male sterilization.

Table – 5.11: Percentage Distribution of Currently Married Women

Who have Ever Used of any Contraceptive Method by

Age

Age	Any	Female	Male	Pills	Inj.	Imp.	Con.	No. of
	modern	ster.	ster.					women
	method							
15-19	27.3	-	1	-	18.2	_	9.1	11
20-24	80.0	13.3	6.7	20.0	26.7	-	13.3	15
25-29	94.1	11.8	11.8	1	47.1	-	23.5	17
30-34	75.0	15.0	1	20.0	25.0	5.0	10.0	20
35-39	53.9	-	15.4	-	30.8	-	77	13
40-44	44.4	11.1	11.1	-	-	-	-	9
45-49	14.3	14.3	-	14.3	-	-	-	7
Total	63.1	8.7	7.6	7.6	27.2	1.1	10.9	92
								(100.0)

Note: If more than one method is used only the most effective method is considered in this table and figure in parentheses indicates number of cases.

Table 5.11 shows that ever use of contraception varies with women's age. The pattern of ever use is curvilinear, use being lowest among women in the youngest age group (15-19), increasing with age and reaching a plateau among women in their twenty-five before declining thereafter in any modern method. The level of ever use of any modern method among currently married women rises to a high of 94 percent among those age 25-29, and then declines to 14.3 percent among women age 45-49. Implant is use only 5 percent in age 30-34 years.

# **5.3.2** Current Use of Contraception

Current use of contraceptive is defined as the proportion of women who reported the use of family planning method at the time of interview (NDHS 2006). The level of current use usually calculated among currently married women is the most widely used and valuable measure of the success of family planning programs.

Tables – 5.12: Distribution of Currently Married Women Aged 15-49

Years by Currently Using Contraceptive Method

<b>Currently using contraceptive method</b>	No.	Percent
Yes	44	47.8
No	48	52.2
Total	92	100.0

Source: Field survey 2008

Table 5.12 shows that 48 percent of the currently married women reported currently using contraceptive methods where as national figure of current user of modern contraceptive are 44 percent (NDHS, 2006).

Table – 5.13: Distribution of Currently Married Women Aged 15-49 years by Currently Using of any Contraceptive method

Method	No.	Percent
Female sterilization	8	18.2
Male Sterilization	7	15.9
Pills	1	2.3
IUD	1	2.3
Injectables	22	50.0
Implant	2	4.5
Condom	3	6.8
Total	44	100.0

Table 5.13 shows distribution of currently married women 15-49 who are currently using any contraceptive method by specific method in total number of currently user of contraceptive method only. Among current user of contraceptive methods, 50 percent are currently using injectables making it most popular method, 18 percent have used female sterilization, 16 percent have used male sterilization. About 7 percent are currently using condom, 4 percent are using implant and 2 & 2 percent are currently using pills and IUD respectively.

## 5.3.2.1 Age of Women and Current Use of Contraception

Data on current use of contraception has special significance because programs promotion the use of family planning among couples. Current use refers to use of a method at present. Respondents of the study area who have heard of method of family planning were asked if they had currently using any method.

Table – 5.14 : Current Use of any Contraceptive Method by Age Group of Women

Age	Any		Male	Pills	IUD	Injectables	<b>Implants</b>	Condom	No. of
	modern		steri.						women
	Method								
15-19	36.4	-	-	-	-	18.2	-	18.2	11
20-24	53.3	13.3	6.7	6.7	ı	20.0	1	6.7	15
25-29	70.6	11.8	11.8	-	5.9	35.3	5.9	-	17
30-34	55.0	15.0	-	-	-	35.0	5.0	-	20
35-39	38.5	-	15.4	-	-	23.1	-	-	13
40-44	33.3	11.1	11.1	-	-	11.1	-	-	9
45-49	14.3	-	14.3	ı	ı	-	-	-	7
Total	47.8	8.7	7.6	1.1	1.1	23.9	2.2	3.3	92
									(100.0)

Note: If more than one method is used only the most effective method is considered in this table.

Table 5.14 shows the percent distribution of currently married woman who are currently using specific Family Planning method by age. Table 5.14 shows that nearly one in two currently married women 48 percent is using a modern method of Family Planning.

Contraceptive use varies by age. Use is lower among younger women (because they are in the early stage of family building) and among older women than among those at intermediate ages. Current use of a modern contraceptive method is 37 percent among currently married women age 15-19, rises to 71 percent among age 25-29 and than drops sharply to 14 percent at age 45-49 most of women who are sterilized age 25-29, while injectables are popular among women age 15-44. Condoms are popular among women age 15-24.

## 5.3.2.2 Education of Women and Current Use of Contraception

In the study area respondents are asked about their educational background and the result is a follows:

**Table – 5.15: Level of Education and Current Use of Contraception** 

<b>Level of Education</b>	Current user	Respondent
Illiterate	8 (38.1)	21
Non formal	6 (54.5)	11
Primary	16 (50.0)	32
Lower secondary	7 (43.8)	16
Secondary and above	7 (58.3)	12
Total	44 (47.8)	92

Table 5.15 shows about 62 percent of current users reported literate. Among them, 58 percent of current users reported, secondary and above level of education, 50 percent of current users reported primary level of education and about 55 percent of current users reported, Non formal education. 38 percent of current users reported illiterate.

Table – 5.16: Distribution of Currently Married Woman Who are

Currently Using Contraceptive Method of Aged 15-49

Years According to Their Literacy Status

Method	Illiterate		Liter	ate	Total No. of		
					women		
	No.	%	No.	%			
Female Steri.	2	25.0	6	16.7	8		
Male sterili.	2	25.0	5	13.9	7		
Pill	-	-	1	2.8	1		
IUD	-	-	1	2.8	1		
Injectable	4	50.0	18	50.0	22		
Implants	-	ı	2	5.5	2		
Condom	-	-	3	8.3	3		
Total	8	100.0	36	100.0	44		

Source: Field survey 2008

Table 5.16 shows that among literate current users women, 50 percent current users reported injectables use, 8 percent current users reported condom, about 6 percent current users reported implants and about 31 percent current users reported permanent methods among illiterate current users women 50 percent current users reported injectables and 50 percent current users reported permanent methods.

# 5.3.2.3 Occupation of Women and Current Use of Contraception

The occupation of women is considered as one of the major determinants of their fertility behaviors contraceptive prevalence rates are generally higher for women involved in business and service.

Table – 5.17: Distribution of Currently Married Women Who are Current Users by Occupation

Occupation	Current user	Respondents
Daily wages	22 (43.1)	51
Agriculture	8 (53.3)	15
House workers	10(47.6)	21
Business and services	4 (80.0)	5
Total	44(47.8)	92

Table – 5.17 shows the currently married women who are involved in business and services, they are 80 percent current user of contraception, followed by 53 percent who are involved in agriculture. 43 percent current users are involved in daily wage and 48 percent current users are involved in houseworkers.

Table – 5.18 : Distribution of Currently Married Women Aged 15-49 Who are Reported Currently Using any Contraceptive Method by Specific Method and Occupation

Method		Daily		Agri.	Bus	iness &	I	House		Total
		Wage				Service		workers		
	No.	%	No.	%	No.	%	No.	%	No.	%
Female	4	18.2	2	25.0	2	50.0			8	18.2
Steri.	+	10.2	2	23.0	2	30.0	_	_	O	10.2
Male	4	18.2	3	37.5					7	15.9
sterili.	4	10.2	3	31.3	_		_		,	13.9
Pill	1	4.5	-	-	1	-	-	1	1	2.3
IUD	1	4.5	-	-	1	-	-	1	1	2.3
Injectable	10	45.5	3	37.5	2	50.0	7	70.0	22	50
Implants	1	4.5	-	-	1	-	1	10.0	2	4.5
Condom	1	4.5	-	-	1	-	2	20.	3	6.8
Total	22	100.0	8	100.0	4	100.0	10	100.	44	100.
	22	100.0	0	100.0	4	100.0	10	0	44	0

Table 5.18 shows distribution of currently married women aged 15-49 according to their occupation who are currently using contraceptive method by specific method. Among women having wage, 46 percent are currently user injectables, followed by 36 percent are current users permanent method and other methods (Pills, IUD, Implants and condom) are equal use. Among the currently married women having agriculture, 38 percent are current users of injectables followed by 63 percent are current users of permanent methods. Among the currently married women having business/service, 50 percent are current users injectables. The women who are involved in houseworkers 70 percent are current users injectables, 10 percent are currently users implants.

#### **5.4** Accessibility of Contraceptives

This section provides the information about the availability of contraceptives in term of source of supply of the most recent method and time required to reach the source of contraceptive from the house of the respondent.

#### **5.4.1 Source of Contraceptives**

According to NDHS 2006 about 91 percent ages of contraceptive user are getting contraceptive from government sector, about 6 percent are getting contraceptives from non-government organization (NGO) sector and rest are obtaining from private medical and other sector. But the study area the result is as below.

Table – 5.19: Distribution of Currently Married Women Aged 15-49 by Their First Source of Contraceptives Method Use

Source of	Methods										
Supply	Fe.	Male.	Pills	<b>IUD</b>	Inject	Impli.	Condom	No. of			
	Steri.	Steri.						woman			
Health post	-	28.6	100.0	1	72.7	-	100.0	22			
Hospital	100.0	42.9	-	100.	4.5	100.0	-	16			
				0							
FP Clinic	-	-	-	-	9.1	-	-	4			
Mobile.	-	28.6	-	-	-	-	-	2			
Total	8	15.9	2.3	2.3	50.0	4.5	6.8	44(100.			
								0)			

<u>Note:</u> If more than one method is used. Only the most effective method is considered in this table.

Table 5.19 shows distribution of currently married women aged 15-49 according to their first source of contraceptive method by specific method, 100 percent of female sterilization service is obtained from hospital. 42.9 percent male sterilization is service is obtained from hospital, 28.6 percent male sterilization service is obtained from health post, 28.6 percent male sterilization is service is obtained from hospital. Pill and condom are 100 percent service is obtained from health post, IUD an implants are 100 percent service is obtained from hospital most of the injectables have got from health post 9.1 percent injectable from mobile clinic.

# **5.4.2** Access to Source of Contraceptives

In the study area respondents were asked about the travel time to the access of contraceptives and the result is as below:

Table 5.20: Distribution of current User of Contraceptive Method by Reported Travel Time to Reach Source of Supply

Travel time (in minute)	No.	Percent
15-30	18	40.9
31-60	26	59.1
Total	44	100.0

Table 5.20 shows that about 41 percentage of current users required to travel for 15-30 minutes. About 59 percentage of current users required to travel for 31-60 minutes.

## **5.5 Side Effect of Contraceptives**

Side effect plays the important role to determine the level of contraception use. In the study area currently married women who are currently using contraceptive were asked if they have any side effect. The result is presented below:

Table – 5.21 : Distribution of Currently Married Women Aged 15-49

Who are Current User of Contraceptive According to

Side Effect

Side effect	Number	Percent
Yes	14	31.8
No	30	68.2
Total	44	100

Source: Field survey 2008

Table 5.21 shows that among currently married women who are current user of contraceptives about 32 percent are reported side effect.

**Table – 5.22: Natures of Side Effects** 

Side effect	Total			
	No.	Percent		
Irregular menstruation	5	35.7		
Over bleeding	3	21.4		
Weakness	2	14.3		
Weight Gain	3	21.4		
Back/waist pain	1	7.2		
Total	14	100.0		

Table 5.22 shows distribution of currently married women aged 15-49 according to side effect of contraceptive method. Among the effect reported by respondents, 36 percent are facing the problem of irregular menstruation followed by over bleeding 21 percent, weight gain reported 21 percent and 7 percent respondents reported back/waist pain.

# **5.6 Reason for Non Use of Contraception**

Table – 5.23 : Distribution of Currently Married Women Aged 15-49 by Main Reason for Not Using Contraception

Reason for not use	No.	Percent
Opposition of seniors	6	12.5
Sexual displeasure	3	6.25
Want children	27	56.25
Fear of side effect	7	14.6
Health problem	5	10.4
Total	48	100.0

Table -5.23 shows the percent distribution of currently married women who are not using any contraceptive methods and who do not intend to use in the future by the main reasons for not intending to use.

Among the non user of contraceptive methods, 56 percent reported the reasons of not using contraceptives as desire of children, 13 percent opposition of seniors, 15 percent fear of side effect, 10 percent reported the reason of health problem.

#### **5.7** Future Intention to Use

Table – 5.24: Distribution of Currently Married Women 15-49 Years by Their Attitude towards Contraceptives

Users	No.	Percent
Current users	44	47.8
Intended future users	48	52.52
Total	92	100.0

Source: Field Survey 2008

Table 5.2.4 shows that out of the 92 respondents 52 percent are interested to use contraceptive method in future and 48 percent respondents are currently using contraceptive method.

Table – 5.25: Distribution of Currently Married Women Aged 15-49

Years Who are Not Using Contraceptive Methods but

Intended to Use in Future by Specific Method

Method	No.	Percent
Female sterilization	14	29.2
Male sterilization	15	31.2
Injectable	17	27.1
Not decided	6	12.5
Total	48	100.0

Table 5.25 shows that 48 respondents intended to use of contraceptive at the time of survey, respondents intend to use only three contraceptive method female sterilization, male sterilization, injectables in the future. Among them remarkably high respondents 31 percent intend to use male sterilization 29 percent intend to use female sterilization and 27 percent to use injectables and 12.5 percent are not decide to use which method are suitable for them.

#### **CHAPTER-SIX**

#### SUMMARY, CONCLUSION AND RECOMMENDATION

This chapter attempts to summarize the whole study and draw some conclusion as well as recommendation for the policy implication and research.

## **6.1 Summary**

This study covers 83 households and all the respondents were currently married women of age group 15-49 years of age. There was 428 total population in the study area. Which is conducted in Meghauli VDC of Chitwan district. The study has examined knowledge use and attitude towards contraceptives among currently married women of the reproductive age of slum area. This study is based on primary data collection of 92 respondents. The major findings of this study are summarized as follows:

The present study has carried out on the basis of descriptive research design. This study is mainly based on primary data collected among 92 currently married women. The data collected in field were tabulated and analyzed manually.

- In Meghauli VDC-5 of slum area people, 428 is the total population in the study area. Among them 206 (48.1%) are male and 222 (51.9%) are female.
- Most of the people are married (62.2%) followed by unmarried (30.1%), widow/widower (6.1%) and separated (1.6%). There is not divorced couple in this community.

- Most of the people are literate 79 percent, primary education 45 percent, lower secondary 22 percent, secondary 15 percent, SLC and above 5.5 percent.
- Most of the people are involved in Daily wages 22 percent followed by 20 percent student, 19 percent labour, agriculture 8 percent, houseworkers 8 percent.
- Most of the households used piped water 67 percent, well 22 percent and stream 10.8percent.
- In this community most of the household have toilet among them modern toilet 84 percent and traditional pit 8 percent and 7 percent have no toilet.
- More number of respondents found in age group 25-29 (22%), the less number of respondent are found in age group 45-49 (8%).
- The total no. of currently married women 92. Among them literate are (77%), Illiterate are (23%). In literate, higher the level of education is primary level where 45 percent followed by lower secondary 22 percent, Non formal 15.5 percent, secondary level 14 percent and S.L.C and above only 3 percent.
- Most of the respondents are married between the age 15-19 years (53.3 percent) where as 20-24 and above years 35 percent and below the age 15 (12%).
- The respondent's main occupation is daily wage (55%) followed by agriculture (16%), houseworkers (23%) and engaged in business and services (5%).

- Among the respondent 17 percent have less than 500 monthly income followed by 500 monthly income, followed by 1501 and above income, (14%), 1001-1500 (39%) income have respondents.
- Overall respondents (100percent) are familiar with at least one method of modern contraceptives and 96.7percent are familiar with female sterilizations, injectables (97%) followed by condom (95.6%) female sterilization, male sterilization, depo, condom, pill appeared to be the best known contraceptive method above (75percent), where as IUD (45percent), implants (51 percent) and any traditional method (13.0percent).
- The age group 15-19 years have at least 100 percent knowledge of female sterilization, male sterilization, injectables, condom, where as pill 73 percent, IUD 54 percent and implants 64 percent. In age group 20-24 year, 25-29 years have 100 percent knowledge female sterilization, male sterilization, injectables, condom, knowledge of IUD is less 40-44 years age group of women 11.1 percent, higher the knowledge of IUD 25-29 year age group of women 60 percent.
- Women's education is strongly associated with contraceptive knowledge. Those women who are illiterate have low knowledge of contraceptive and those women who have get chance to get education they have good knowledge of contraceptives. Among them those women who have pass S.L.C and above level they have cent percent knowledge of any modern methods.
- Largest percent of respondents 47 percent got information of contraceptives through friends followed by Radio/TV 29 percent, family 12 percent, print media 6 percent and health workers 5 percent.

- 100 percent respondents know any contraceptive method are available in health post, 61 percent respondent know any contraceptive method are available in FP clinic only 10 percent respondents know any contraceptive method are available in shops.
- Most of the respondent 24 percent attitude towards contraceptives is to make better health of child and mother where as to make happy family life 21 percent to make better economic condition of family 18 percent and to make better education and care of child 17 percent.
- According to respondents better age of child bearing age of women is 21-22 year (39%), under 20 year is better (31%) and above 25 year is better age of child bearing age of women (12%).
- The rate of ever user of contraceptive are (63%) where as female sterilization is (14%), there are equal percentage both male sterilization and pills (12 %), injectables (43%), condom (17%) and only (2 %) Norplant.
- higher the methods is injectables 18 percent and lower use the method is condom 9 percent. So, on 20-24 year of currently married women who have ever used higher the method is injectable 27 percent and lower use the method is male sterilization or age group of currently married women who have ever used higher the method is injectable 27 percent and lower use the method is implants 1 percent.

- Currently married women aged 15-49 who are currently using contraceptive method is 48 percent. Among them injectable use 50 percent, female sterilization 18 percent, male sterilization 16 percent, condom 6.8 percent, injectables 5 percent and equal use pill and IUD 2 percent.
- 15-19 year of currently married who have currently used 36.4 percent any modern method 25-29 year of currently married women who have currently use 71 percent, 30-34 year of currently married women who have currently use 55 percent, 35-39 year of currently married women who have currently use 38 percent, 40-44 year of currently married women who have currently used 33 percent and 45-49 year of currently married women who have currently use 4 percent any modern method.
- Current use of contraceptive method and education of women,
   Illiterate currently user women 38 percent, literate currently user women 62 percent.
- Among illiterate currently user women, injectables are use 50 percent and permanent method is use 50 percent. Among literate currently user women, injectables are use (50%) and permanent methods are user 31 percent.
- Among the respondents who are involved on business and service they have currently use 80 percent contraceptive method. The women who are involved on agriculture they have currently use 53 percent contraceptive method. The respondents who have involved in daily wage they are currently use 43 percent contraceptive methods. The respondents who have involved in houseworkers they are currently use 48 percent contraceptive methods.

- The women who are involved on Daily wage the majority percentages are the women practicing Dipo 46 Percent followed by 36 percent are permanent method. The women who are involved on agriculture the majority percentages are practicing permanent method 62 percent, the women who are involve on others 50 percent are practice permanent methods and 50 percent are practice injectables methods.
- Currently users of female sterilization 100 percent take from hospital. Currently users of male sterilization 43 percent take from hospital. Male sterilization take from health post and mobile clinic equal 29 percent. 100 percent of pills take from available from health post where as condom take (100.0 percent) from hospital.
- According to 59.1 percent respondent 31-60 minutes time to reach source of contraceptive method of supply and 40.9 percent respondents 15-30 minutes time to reach source of contraceptive method of supply.
- Of the total current users only 32 percent women have reported some side effects contraceptive method of the total users who have reported some side effects irregular menstruation 36 percent, over bleeding 21 percent, weight Gain 21 percent, weakness 14 percent back and waist pain 7 percent.
- The respondent stated that their views on reason for not using contraception 56 percent said there is desire of children, followed by opposition of senior 12 percent, fear of side effect 15 percent, health problem 10 percent and sexual displeasure 6 percent.

- Interest to use contraceptive method in future are 52 percent where as current user 48 percent.
- 36 percent of women will use male sterilization, 33 percent of women will use female sterilization 17 percent of women will use injectables and 14 percent of women will use not decided any method.

#### 6.2 Conclusion

Socio-economic factor influence the use of contraceptive. Hundred percent of women are familiar with at least any modern method of family planning. The current pattern of contraceptive among currently married women is dominated by injectables, female sterilization and male sterilization by their husband. The current use of contraception among the currently married women with higher level of education are more than the using women with non-formal and primary education. There is strong relationship between education and use of contraceptives. The most important reasons for not using contraception are desire of children other important reasons are side effects, health problem, sexual displeasure. Generally, there is positive relationship between educational level and knowledge attitude and contraceptive use.

Most of the respondents are engaged in daily wage activities. But the practice of contraceptive method is higher for those women who are engaged in business and service. In this area low use of permanent method of contraceptive indicates that most of the couples want to fulfill their desired family size first. The temporary method is more familiar than permanent methods. Among the temporary methods injectable method is highly use than other temporary method. The use of condom is very low in the study area.

#### **6.3 Recommendation**

## **6.3.1 Policy Recommendations**

The following recommendation are on the basis of findings of the study.

- Knowledge, attitude and practice (KAP) of contraceptive are dependent upon the levels of education and occupation of women and their husband. In order to increase the KAP contraceptives among currently married women, formal and non formal education programme should be carried out emphasizing contraceptives methods considering the different level of women and their husband's education.
- This finding suggests that more children is prevailing among the married slum area women. This type of tradition concept should be removed by effective education programs.
- The finding also suggests that availability and accessibility of contraceptives should be increased.
- Injectable and female sterilization are most familiar method followed by condom, male sterilization, pill, IUD and implant are less familiar method as well as traditional method. It therefore, is necessary to motivate the couples towards these the modern method and traditional methods through the effective counseling and different educational programmes.
- Condom plays duel role one is preventive unwanted pregnancy and other is prevent STDs, HIV/AIDS. So that promote the use of condom in this area.

- Some incentives like free schooling, free medicine, childs caring facility and employment opportunity should be provided to the couple by the government if the couple have not more than two children.
- Many women dislike using any contraceptives because of being desire of more children, side effectives therefore, effective and opportunities IRC programme should be lunched from grass root levels.

#### 6.2.3 Recommendations for further area of Research

- This study has been carried out contraceptive knowledge attitude and practice among women of Reproductive Age of slum area in Meghauli VDC-5 further study may be carried out in other specific communities.
- This study is based on few social-economic and demographic variables. Other study can be carried out using other approaches like culture, religion, psychological, geographical, maternal child care, demographic impact of sexual behaviour, knowledge, attitude and prevention of STD, HIV/AIDS.

#### REFERENCES

- Arharya, Bidhan, 2000. "Fertility differentials in Nepal: An Analysis of some selected variables of BDC survey data" in Bal Kumar KC (ed) population and development in Nepal. Vol. 7 Pp. 23-35. (CDPS T.U. Kathmandu, pp. 23-35)
- Aryal, G. R., 1999. "Contraceptive knowledge and use in Kumal Community: An Evaluation, Unpublished M.A. thesis submitted to the central department of population studies (Kathmandu: CDPS).
- Bongaorts, J. and Potter R.G. 1983. "Fertility, Biology and Behaviour" An analysis of the proximate determinants.
- Central Bureau of Statistics (CBS) [Nepal], 2002, *Population Census* 2001, Vol. I & II (Kathmandu: CBS).
- \_\_\_\_\_\_2003, Population Monograph of Nepal Vol. I & II. (Kathmandu: CBS).
- Cliquest, R.L., 1997. "Knowledge and Effectiveness of Contraceptive in Belgium" (Chicago: The University of Chicago Press), pp. 190-191.
- District Profile of Nepal 2007/08, Socio-economic Development Data base of Nepal intensive study and research center (Kathmandu: Putalishadak).
- K.C., Bal Kumar, Ram Sharan Pathak and Govinda Subedi (2000), "Contraceptive knowledge and use in Nepal", Bal Kumar KC (ed) *Nepal population Journal*, Vol. 9, (Kathmandu: CDPS).

- Ministry of Health (MOH) [Nepal]. 1978. Nepal Fertility Survey (NFS) 1976. Kathmandu Nepal: Ministry of Health, Nepal Family Planning and MCH Project. 1983. Nepal Fertility and Family Planning Survey (NFFPS) 1986. Kathmandu Nepal: Ministry of Health, Nepal Family Planning and MCH Project. 1996. Nepal Family Health Survey (NFSH) 1996. Kathmandu Nepal: Ministry of Health and Family Health Division. Ministry of Health and Population (MoHP). New Era. and ORC Macro. 2002. Nepal Demographic and Health Survey 2001. Calverton, Maryland, USA: Family Health Division, Ministry of Health, NeW ERA, and ORG Macro. \_. 2007. Nepal Demographic and Health Survey 2006. Calverton, Maryland, USA: Family Health Division, Ministry of Health, New ERA, and ORG Macro.
- New ERA, 1990. A Base Line Study of Health Status in Sindhuli District. (Kathmandu New ERA).
- Pathak, R. S. 1996. *Government Family Planning Programme Effort in Nepal:* An evaluation, An Unpublished Ph.D. Thesis (Canberra: The Australian National University) pp. 75.
- Risal P.R. and Shrestha. A. 1989. "Fertility and its proximate determinant Nepal" *South Asia study on population policy and programmes Nepal.* (Kathmandu: UNFPS). Pp 22-45.

- Subedi, G. 1999. "Contraceptive use in Nepal: A National Scenario from MEBDC Survey", In Bal Kumar KC. (ed.), *Nepal Population Journal*, Vol. 6, No.5 pp: 33-66.
- Tuladhar, J.M. 1989. "Supply Aspect of Meeting Demand for Family Planning" South Asia study on population policy and programme Nepal (Kathmandu: UNFPA pp. 169-189).
- United Nations Population Fund (UNIFPA). 1989. South Asia study on Population Policies and Programmes. Kathmandu Nepal: UNFPA.
- United Nations Population Fund (UNIFPA). 1994. *International Conference on Population and Dvelopment Cairo*. Iss Conf. 171/13 (New York: UNFPA).
- Wagle. G. D. 2007. "Contraceptive knowledge attitudes and Use in Kumal Community" of Vyas Municipality Tanahun District An Unpublished M.A. Thesis submitted to Central Department of Population Studies.

# **QUESTIONNAIRE**

Central Department of Population Studies, Kirtipur, Kathmandu

# (Contraceptive Knowledge and Use among Women of Reproductive Age of slum area Meghauli VDC-5)

		are	a M	egha	auli VD	<b>C-5</b> )			
Part a									
1. District:		2. V	Vard	No.					
3. VDC		4. H	ouse	eholo	l No				
5. Name of H	H Head: .								
6. Caste (see o	code below)	)							
7. Religion (se	ee code bel	ow)					• • • • • •		
8. Household	information	1							
S.N. Name			Rela	tion	sex	Age	Education	Occupation	Marita
Start asking	g from HH hea	ad	with	НН.	male=1	completed	above 6		status
			Head	d	female=2	2	year		(above
									10
									years)
8.1 8.2			8.3		8.4	8.5	8.6	8.7	8.8
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
12									
12									
Cast (6)	Religion (7)	Drinking set (8)	ource		Γoilet cility (9)	Relation to (8.		Education	n (8.6)
Brahmin =1	Hindu=1	Well =1		No =	•	Head of the		Illiterate =0	)
Chhetri/	Buddhist =2		=2			Husband/ w		Nonformal:	
Thakuri = 2									
Newar=3	Muslim =3	Stream =3		Mod	ern =2	Father Moth	ier =3	1-5 class=2	,
Dalit =4	Christian=4	Others =4				Son/Daught =4	er in law	6-8 class =:	3
Gurung/magar/	Other =5					Daughter/so	n in law	9-10 class =	=4
tamang =5						=5			
Thru =6						Grand child	=6	SLC =5	
Musalman = 7						Father/moth	er in	Intermediat	te=6
				Ì		low=7			

Others

(specify)=8

Brother/ sister = 8

Above

intermediate =7

Occupation (8.7)	Marital status (8.8)	
Agriculture =1	Unmarried=1	
Service =2	Married =2	
Business = 3	Widow/widower =3	
Wage =4	Separation =4	
Labor =5		
Housewife =6		
Student = 7		
Currently not working =8		
8. What is your main source of drinking	a. Well1	
water ?	b. Hand pipe2	
	c. Stream3	
	d. Other source4	
9. Do you have toilet facility?	a. No0	
	b. Traditional1	
	c. Modern2	

# Individual information

1. How old are you?		
•		
2 Are you able to read and write?	a. Yes1	
	b. No2 Skip →	(6)
3. Which type of education had you been	a. Formal1	
getting?	b. Informal2	
4. If formal, which class have you		
completed ?		
5. Are you going to school at present time	a. Yes1	
(currently going)?	b. No2	
6. When did you get married?		
7. What is your current occupation?		
According to table 8.7.		
8. How much is your income in a month?		
9. How many children were ever born?	Son Daughter	
	a. Living together	
	b. Living separately	
	c. Dead	
	d. Total	

# Part B Question related to family planning knowledge

1. Have you ever heard about family	Yes1
planning method?	No2
2. If yes, what is the first source of	Friends1
information?	Family2
	Health worker3
	Radio/TV4
	Print media5
	Other6
3. If yes, which method have you heard?	Pills1
(don't read the options?)	Injection2
(Multiple answer possible)	IUO3
	Foam tab4
	Condom5
	Norplant6
	Male sterilize7
	Female sterilize8
	Period abstinence9
	Withdrawal10
	Other specific11
4. Do you know the place where family	Yes1
planning method available ?	No2
5. If yes, where the family planning	Hospital1
method is available.?	Health post2
(Multiple answer possible)	FP clinic3
	Health workers4
	Shops5
	Others (specify)6

# II Practice of Family Planning

1. Have you ever used any family	Yes1
planning method?	No2
2. If yes, give name these methods?	Pills1
(multiple answer possible)	Injection2
	IUO3
	Foam tab4
	Condom5
	Norplant6
	Male sterilize7
	Female sterilize8
	Period abstinence9

	Withdrawal10	
3. Are you or your spouse currently using	Yes1	
any method to delay to avoid getting	No2 Skip →	(9)
pregnant?		
4. If yes, which method are your/your	Name of method:	
spouse currently using (write code form		
S.N.II 3)		
5. Where did you obtain current method	Name of Place	
last time? (Write code form I, 5)		
6. Did you notice any side effect while	Yes1	
using contraceptives?	No2	
7. If yes, what kind of side effect have	Irregular menstruation1	
you got while using contraception?	Over Bleeding2	
(Multiple answer possible)	Weakness3	
	Wait Loss4	
	Headache5	
	Back Pain6	
	Other7	
8. If no, what is the main reason for not	Want children1	
using ?	Spouses opposition2	
	Parents opposition3	
	Against religion4	
	Fear of side effect5	
	Sexual displeasure6	
	No (knowledge7	
	Others specific8	
9. Do you want to use family planning	Yes1	
method in future?	No2	
10. If yes, which method will you use?	Name of intention	
(write code form question no II,3)	Don't know98	
11. If no, what is the main reason for not		
using FP methods in future? (write code		
from Q.N. II 9)		
12. In your opinion what is the best age		
for child bearing?		
13. What should be the spacing time		
between first and second child?		
14. How long do you to take travel from		
your home to family planning source?		

15. What do you think FP should be sued	To make better economic condition	
for ?	of family1	
	To make better child and mother	
	health2	
	To make happy family life3	
	To make better education and care	
	of child4	

Thanks