Original Article

Socio-demographic profile of IUCD acceptors attending Post-Partum Unit (P.P.U.) of Guru Govindsingh Hospital, Jamnagar

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ABSTRACT

Background: The family welfare programme is a priority health programme for our country. In spite of integrated and concerted efforts, the programme has not been able to make an appreciable reduction of Crude Birth Rate. This was mainly because it had almost become synonymous with sterilization and majority of the couples had undergone sterilization only after achieving their desired family size of more than three children. So, the program has shifted its focus on spacing methods to reduce CBR.

Aims: To assess the socio-demographic profile of women using IUCD and the decisionmaking status of women in selection of spacing methods.

Material and Methods: All IUCD acceptors (Total 413 women) attending postpartum unit of G.G. Hospital, Jamnagar from October 2012 to December 2012 were studied.

Results: A total 185 (44.79%) acceptors were in the age group of 24–28 years, 337(81.59%) of acceptors were literate, 238 (57.62%) acceptors had two or more living children. In 370 (89.58%) cases, IUCD was inserted within 10 days of menstruation & only 20 (4.84%) women had got IUCD inserted within 6 weeks of last delivery. Only 28 (6.77%) women took decision themselves for IUCD insertion. Decision making status of women was positively associated with their high education level.

Conclusion: Majority of IUCD users were young women, indicating that spacing is being adopted in the early twenties. Majority of the users were literate & their educational level was significantly associated with their decision making status in matters of opting for contraception.

Keywords: IUCD acceptors, Socio-demographic profile, postpartum unit

INTRODUCTION

The family welfare programme is a priority health programme for our country. In spite of integrated and concerted efforts, the programme has not been able to make an appreciable reduction of Crude Birth Rate (CBR). This was mainly because it had almost become synonymous with sterilization and majority of the couples had undergone sterilization only after achieving their desired family size of more than three children. So, the program has shifted its focus on spacing methods to reduce CBR [1,2].

India's Current demographic phase is characterized by high fertility and moderate mortality rate. Apart from human cost in terms of mortality, morbidity and unwanted pregnancy can place a burden on health resources of developing countries and it causes severe impact on woman health [3]. Intrauterine contraceptive devices (IUCDs) are among the safest and most effective forms of contraceptives available. The intrauterine device (IUD), primarily in the form of the copper IUD, is used by more than 150 million women around the world and about 4.92 million women in India [7], making it the most widely used reversible method of contraception. With a remarkably low failure rate of less than 1 per 100 women in the first year of use, the Copper T-380A is in the top tier of contraceptives in terms of efficacy. Risks of utilization include perforation and an increased risk of infection in the first 20 days following insertion [3]. In addition, they have a service life of 10-12 years and produce very few side effects [6].

There is need to evaluate the effect of copper-T among users of copper-T. Worldwide, approximately 13 percent of all women of reproductive age use the IUD, making it the second most popular contraceptive. However, most IUD users are in a few countries, especially China, where a fifth of the world's population lives. While studies show the Copper T IUD is nearly as effective as male or female sterilization, the IUD is often ignored or overlooked. One reason is misinformation on the part of both clients and providers [5].

IUCD is a cost-effective, long term, reversible contraceptive method & has 0.5-0.8% failure rate. In addition, it is also compatible with breast feeding & thus has a potentially valuable role in postpartum contraceptive protection. It is a reliable, reversible, economic, and safe method for regulation of population [4]. Moreover, studies on IUCD acceptors are limited & such studies may contribute in promoting spacing methods.

With this view, the present study has been conducted with an aim to assess the socio-demographic profile of women using IUCD and to assess the decision making status of women in selection of spacing methods.

The present study was a Cross Sectional Study. The study was carried out in Post-Partum Unit of G.G. Hospital, Jamnagar during the months of October to December 2012. All the IUCD acceptors (n=413) coming to the P.P Unit during the study period were included in the present study. Pre-designed, pre-tested proforma was used to collect data regarding demographic characteristics and the decision making status of women in selection of spacing methods. Data entry & analysis was performed using MS Excel 2010. Chi square test was applied to test the association between various demographic characteristics and decision making about IUCD acceptance.

RESULTS

Study revealed that majority acceptors (44.79%) were in the age group of 24-28 vears, 81.59% were literate & 70.9% were housewives. Women opted for IUCD insertion having one; two & more than two living children were 41.88%, 48.42% & 9.2% respectively 66.58% of women had their first child before 22 years of age. In 89.58% of cases, IUCD was inserted within 10 days of menstruation & 58.83% women had got IUCD inserted within 1 year of last delivery. 66.58% of the acceptors gave birth to their first child between 20 to 29 years of age. However, 48.6% and 2.5% were below 20 years and above 30 years of age respectively when the first child was born. The mean age of



the acceptors at first child was found to be

MATERIAL AND METHODS

Table 1: Socio-Demographic Characteristics

Socio-Demograp Characteristics	Frequency (N=413)		
Age	19-23	119(28.81%)	
	24-28	185(44.79%)	
	29-33	68(16.46%)	
	34-38	34(8.23%)	
	39-43	07(1.69%)	
Education	Illiterate	76(18.40%)	
	Primary	161(38.98%)	
	Secondary	120(29.06%)	
	Higher Secondary	18(4.36%)	
	Graduate	32(7.75%)	
	Post Graduate	6(1.45%)	
Occupation	Housewife	293(70.94%)	
	Labourer	102(24.69%)	
	Service	18(4.35%)	
No. of living children	0	2(0.48%)	
	1	173(41.88%)	
	2	200(48.42%)	
	≥3	38(9.02)	
Age at First child born (Years)	18-22	275(66.58%)	
	23-27	129(31.23%)	
	≥28	9(2.17%)	
Last Menstrual Period	Lactational Amenorrhoea	32(7.75%)	
	≤10 days	370(89.59%)	
	>10 days	11(2.66%)	
Last Date Of Delivery	≤6 weeks	20(4.84%)	
	>6 weeks	393(95.16%)	
Previously used Contraception	Condom	202(48.91%)	
	OC pills	87(21.07%)	
	IUCD Reinsertion	18(4.36%)	
	None	106(25.67%)	

19.7 years.

17.43% of the couples jointly decided & only 6.77% of women took decision themselves for IUCD insertion & in remaining 75.78% of cases; it was the husband who took the decision for IUCD insertion for his wife. This suggests a poor status of women in decision making in matters of mode of contraception.

Education status of women had a positive association with decision making status of women & the association was statistically significant (p<0.01).

DISCUSSION

IUCD is one of the major family planning method used in India as a spacing of between the two children. It is easily available at the doorstep such as at subcentre and PHC level.

Present study found that three fourth of the IUCD acceptors were in the age group of 19-28 years, which is the ideal time for it. Other studies carried out in India indicate the same results as our study. R Biswas et al [8] observed that the three fourth were in the same age group and S. Chandra [9] also observed the same. percentage **IUCD** Higher of the acceptance in the age group of 20 - 30 years of age may be due to the awareness of the family planning method in the community by the health workers. The education of acceptors acts as a favourable factor in adoption of the IUCD. In the present study, the literacy rate of the IUCD acceptors was found to be 81%. More than 2/5th of the acceptors have the education status above the high school

Table 2: Association between Education & Decision Making status among IUCD Acceptors

Education	Husband	Husband+ Wife	Wife	Total		
Illiterate	74(97.37%)	2(2.63%)	0 (0%)	76		
Literate	239(70.92%)	70(20.77%)	28(8.31%)	337		
Total	313(75.80%)	72(17.43%)	28(6.77%)	413		
X ² =23.74, df =2, p<0.01						

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and more. More or less similar observation found in the various study such as R.Biswas et al [8] which was 89% and A.M. Abasittai et al [10] which was 72.8%.

Major Occupation of the acceptors was found to be a housewife (71%) followed by Labourer (25%) and only 4% do the services. A study by A.M. Abasittai et al shows that 26.0% were Civil servants, 15.4% traders and 14.2% professionals constituted majority of the IUCD acceptors [10].

A 41% of the acceptors had one child only and 48% of the acceptors had accepted the method after two living children. Similar observation was seen in the study conducted by S. Chandra [9] whereas in the study conducted by R. Biswas [8] shows 58.9 % of acceptors had one child.

As per the advice of ICMR, the insertion as far as possible should be performed within ten days of the menstrual period to rule out the possibility of pregnancy at the time of insertion [11,12]. 90% of the acceptors had accepted the device within ten days of onset of menstruation. Only in about 2% of the women, the insertion was 10 days after the onset of done menstruation or even later and 8% of women had accepted the IUCD in lactational amenorrhea. Similar observation was seen in the study by A. M. Abasiattai et al [10] and less in study done by R. Biswas et al [8].

17.43% of the couples jointly decided & only 6.77% of women took decision themselves for IUCD insertion & in remaining 75.80 % of cases, it was the husband who took the decision for IUCD insertion for his wife.

CONCLUSION

Majority of IUCD users were young women, indicating that spacing is being adopted in the early twenties, which is highly fertile period, thus helping in averting unwanted pregnancy. Majority (82%) of IUCD users were literate & their educational level was significantly associated with their decision making status in matters of opting for contraception, thus promoting female literacy also helps women in adopting family planning practices.

Large percentage of women opted for IUCD usage after one (41.89%), two (48.43%) & more than two (9.2%), children, suggesting that IUCD is really being used for spacing of births. About 10% of women got IUCD inserted beyond prescribed limit of 10 days of menstruation suggesting a need for creating awareness among them as well as sensitizing the health personnel towards dangers of it.

In about 76% of cases, women still had no role in the decisions related to their reproductive matter.

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