

A Comparative Study to Assess Awareness Regarding Contraceptives Usage among Target Couples in Selected Rural and Urban Community of Gwalior

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ABSTRACT

A comparative study to assess the awareness regarding contraceptive usage among target couples residing at selected rural and urban areas at Gwalior, M.P. The aim of the study is to identify the awareness regarding contraceptive usage among target couples residing at selected rural and urban areas at Gwalior, M.P. Objectives of the study: To assess the awareness regarding contraceptives usage among target couples residing in rural areas of Gwalior. To assess the awareness regarding contraceptives usage among target couples residing in urban areas of Gwalior. To assess the awareness difference regarding contraceptive usage among target couples residing in rural and urban areas of Gwalior. To find out an association between awareness regarding contraceptive usage among rural people with their selected demographic variables. To find out an association between awareness regarding contraceptive usage among urban people with their selected demographic variables. The research approach adopted for this study is quantitative research approach. The research design adopted for this study was non experimental descriptive design. The data was collected through the tool which is prepared by the investigator. The sample consists of 100 (50 from Rural and 50 from Urban areas) target couples in, Gwalior. The tool has two parts. Section – I: Socio Demographic data Section – II: Questionnaire on awareness regarding contraceptive usage among target couples. The findings of the study revealed that, among the rural participants mean score is 6.16, standard deviation 2.87 and range was 10. Frequency and percent wise distribution of rural samples based on their awareness level regarding contraceptive usage shows that 62% of participants had poor awareness, 38% had average awareness and nobody had good awareness. The findings of the study revealed that, among the urban participants mean score was 8.06, standard deviation 2.47 and range was 08. Frequency and percent wise distribution of rural samples based on their awareness level regarding contraceptive usage shows that 62% of participants had poor awareness while urban target couples only 18% had poor awareness regarding contraceptive usage, 38% rural target couples only had average awareness while 82% of urban participants had average awareness regarding contraceptive usage. By comparing the awareness level of participant from rural and urban areas revealed that urban target couples had more awareness than rural target couples regarding contraceptive usage. Since the rural community has less awareness than urban community regarding contraceptive usage hypotheses 3 was accepted, there was a significant difference between rural and urban community regarding contraceptive usage.

Chi square test used to find out the association between awareness regarding contraceptive usage among target couples residing in rural areas with their selected demographic variables. Since majority of demographic variables had no association with awareness regarding contraceptive usage null hypothesis was accepted and research hypothesis was rejected except Age in year, gender. Chi square test used to find out the association between awareness regarding contraceptive usage among target couples residing in urban areas with their selected demographic variables. Since majority of demographic variables had no association with awareness

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regarding contraceptive usage null hypothesis was accepted and research hypothesis was rejected except contraceptive usage status.

KEYWORDS: *contraceptive, target couples, rural areas, urban areas, awareness, comparative study*

Need for the study: -

Reproductive health services that empower women will greatly reduce the social and economic disruption in society.

The global population today stands at 7.7 billion and is expected to reach 9 billion by year 2045.1 Increasing population is a global problem today. India is the largest demographic country of the world, posses 2.4% of world land area and supports 16% of world's population. India is going to be the highest populous country in the world by the year 2050.

Contraceptive usage allows individuals and couples to anticipate and attain their desired number of children and the spacing and timing of their births. Using contraceptive usage methods, more people can obtain maximum benefit at a lower cost than any other single technology available at present. Prevention of unwanted and closely spaced pregnancies substantially reduces maternal, infant, and child mortality. India became the first country in the world to formulate National Contraceptive usage Program in 1952, with the objective of "reducing birth rate to the extent necessary to stabilize the population at a level consistent with requirement of national economy." In many developing countries, several women not wanting to become pregnant are not using safe and effective contraceptive usage methods. Ability of a woman to start a successful, continuous, and appropriate contraceptive method is influenced by many different factors; for example, access to the health care, community, cultural attitudes, and personal attitude can all be considered as obstacles to apply correct use and effective method of the women to contraceptive usage objectives.

India, with one of the world's fastest growing populations, is a nation very much in need of contraceptive counselling. India accounts for just 2.4 percent of world surface area of 135.79 million sq. ft km yet it sustains 17.75 percent of the world population. Although India was the first country in the world to implement a national population control program in 1952, Contraceptive related guidance is very essential for community health. An ideal contraceptive should suit an individual's personal, social, and medical needs. Socio economic factors and education are some of the factors that play an important role in contraceptive usage. There are 45 million women in India not willing to become pregnant but they are failing to practice contraceptive

use because of ignorance. According to NFHS-3 reports around 30% of the fertility in India was unwanted, indicating a huge gap between supply of contraceptive usage measures and its usage.

Objectives of the study:

1. To assess the awareness regarding contraceptives usage among target couples residing in rural areas of Gwalior
2. To assess the awareness regarding contraceptives usage among target couples residing in urban areas of Gwalior.
3. To assess the awareness difference regarding contraceptive usage among target couples residing in rural and urban areas of Gwalior.
4. To find out an association between awareness regarding contraceptive usage among rural people with their selected demographic variables.
5. To find out an association between awareness regarding contraceptive usage among urban people with their selected demographic variables.

Material and method: -

Research approach and design: - Descriptive approach with survey design was adopted.

Setting of the study: - Rural and Urban Areas Of Gwalior.

Study population: -Target couples residing in Rural and Urban areas of Gwalior.

Accessible population: - Target couples residing in selected Rural and Urban areas of Gwalior.

Sample size: - 100 (50 from Rural and 50 Urban)

Sampling technique: - Non probability convenient sampling technique.

Inclusion criteria

- Target couples who are willing to participate in the study.
- Target couples who can read and understand English or Hindi.
- The target couples who are available during the period of data collection.

Exclusion criteria

- Target couples who are not willing to participate in the study.
- Target couples who are not available at the time of study.

VARIABLES:

Study variable: awareness regarding contraceptive usage among target couples.

Extraneous variable: Age, religion, gender, education, occupation, family type, sources of information, number of living children, status of contraceptive usage.

Description of Tools

The tool is divided into section A and B.

- **Section A:** Socio-demographic variable
This part consists of 9 items necessary to obtain demographic data of the research samples such as age in year, gender, religion, educational status, occupation, type of family, sources of information, residential status, no. of living children and contraceptive usage status.
- **Section B:** Structured awareness questionnaire regarding contraceptive usage
This part consists of awareness questionnaire to assess the awareness regarding contraceptive usage among target couples.

Analysis and interpretations**Section I: - Baseline characteristics of participants.****Table 1: - Baseline characteristics of the participants from rural areas**

Sl.no	Demographic variables	frequency	percentage
1.	Age in year		
	25-30 years	12	24
	31-35 years	14	28
	36-40 years	13	26
2.	41 years and above	11	22
	Religion		
	Hindu	24	48
	Muslim	11	22
	Sikh	05	10
3.	Christian	10	20
	others	00	00
3.	Gender		
	Male	22	44
4.	Female	28	56
	Educational status		
	No formal education	23	46
	Primary education	18	36
5.	Secondary education	06	12
	Graduation and above	03	06
	Occupational status		
	Un employed	14	28
	Home maker	05	10
	Unskilled trainer	11	22
	Skilled trainer	07	14
Shop keeper	11	22	
professional	02	04	
Others	00	00	

Data collection procedure: -

Primarily permission was obtained from rural area and urban areas of Gwalior, Madhya Pradesh. After getting permission, verbal consent was obtained from the adults, to participate in the study. The data was collected on 15/7/2022 to 30/8/2022. Prior to data collection consent was obtained from the respondent and confidentiality was assured. The responses from the participants were collected using a self-structured awareness questionnaire. A total of 50 each from rural and urban target couples were selected. The data collection process was terminated after expressing thanks to the target couples for their participation and cooperation.

Limitations of the study

1. The study is limited to 100 target couples (50 from rural and 50 from urban).
2. The study is limited to those people who are interested to participate in the study.
3. The study is limited to 6 weeks.
4. The study is limited to selected Rural and Urban areas of Gwalior District.

6.	Type of family		
	Joint	33	66
	Nuclear	07	14
	extended	00	00
7.	Source of information		
	Social circle	03	06
	Health care professional	34	68
	Family members	06	12
	Mass media	07	14
	others	00	00
8.	Residential status		
	Rural	50	100
	urban	00	00
9.	No. of living children		
	Two	44	88
	Three	06	12
	More than 3	00	00
10.	Contraceptive usage		
	Using	16	32
	Not using	34	68

Table 2: - Baseline characteristics of the participants from urban areas

Sl. no	Demographic variables	frequency	percentage
1.	Age in year		
	25-30 years	12	24
	31-35 years	11	22
	36-40 years	14	28
	41 years and above	13	26
2.	Religion		
	Hindu	18	36
	Muslim	13	26
	Sikh	09	18
	Christian	10	20
	others	00	00
3.	Gender		
	Male	10	20
	Female	40	80
4.	Educational status		
	No formal education	11	22
	Primary education	13	26
	Secondary education	09	18
	Graduation and above	17	34
5.	Occupational status		
	Un employed	09	18
	Home maker	12	24
	Unskilled trainer	07	14
	Skilled trainer	00	00
	Shop keeper	05	10
	professional	16	32
Others	00	00	
4.	Type of family		
	Joint	03	06
	Nuclear	47	94
	extended	00	00

5.	Source of information		
	Social circle	03	06
	Health care professional	10	20
	Family members	07	14
	Mass media	29	58
	others	00	00
6.	Residential status		
	Rural	00	00
	urban	50	100
7.	No. of living children		
	Two	47	94
	Three	03	06
	More than 3	00	00
8.	Contraceptive usage		
	Using	30	60
	Not using	20	40

Section II:- Comparison of awareness level of participants from rural and urban areas related to contraceptive usage

To compare the awareness level of participant from rural and urban community hypotheses formulated as follows: -

H0: - There is no significant difference between awareness level of contraceptive usage among rural and urban target couples.

H3: - There is a significant difference between awareness level of contraceptive usage among rural and urban target couples.

Table no 3: - Mean, Standard deviation and Range of Rural and Urban samples based on awareness regarding contraceptive usage.

	Mean	Standard deviation	Range
Rural areas	6.16	2.87	10
Urban areas	8.06	2.47	8

Among the rural participants mean score is 6.16, standard deviation 2.87 and range was 10. Among the urban participants mean score was 8.06, standard deviation 2.47 and range was 08.

Table no 4: - Frequency and percentage wise distribution of rural and urban samples based on their awareness regarding contraceptive usage.

Awareness	poor		Average		Good	
	Frequency	Percentage	Frequency	Percentage	Frequency	percentage
Rural area	31	62	19	38	00	00
Urban areas	09	18	41	82	00	00

Frequency and percent wise distribution of rural samples based on their awareness level regarding contraceptive usage shows that 62% of participants had poor awareness, 38% had average awareness and nobody had good awareness.

Frequency and percent wise distribution of urban samples based on their awareness level regarding contraceptive usage shows that 82% of participants had average awareness, 18% had poor awareness and nobody had good awareness.

Since the rural community has less awareness than urban community regarding contraceptive usage hypotheses 3 was accepted, there was a significant difference between rural and urban community regarding contraceptive usage.

Section III: - Chi square test to find out the association between selected demographic variables of participants from rural areas with awareness regarding contraceptive usage.

Prior to testing the association between selected demographic variables of participants with their awareness regarding contraceptive usage hypothesis was constructed as follows

H0: - There is no significant association between selected demographic variables of participants from rural areas with awareness regarding contraceptive usage.

H1: - There is an association between selected demographic variables of participants from rural areas with awareness regarding contraceptive usage.

Table no 5: - chi square test used to find out the association between awareness regarding contraceptive usage among target couples residing in rural areas with their selected demographic variables.

Sl. no	Demographic variables	Awareness level		Obtained value	Table value	Interference
		Less than or equal to mean	Greater than mean			
1.	Age in year			9.16	7.81	S
	25-30 years	07	05			
	31-35 years	13	01			
	36-40 years	07	06			
	41 years and above	04	07			
2.	Religion			2.87	11.07	NS
	Hindu	17	7			
	Muslim	7	4			
	Sikh	3	2			
	Christian	4	6			
	others	0	0			
3.	Gender			31.60	3.84	S
	Male	08	14			
	Female	23	5			
4.	Educational status			1.20	7.81	NS
	No formal education	15	8			
	Primary education	11	7			
	Secondary education	4	2			
	Graduation and above	1	2			
5.	Occupational status			8.21	12.59	NS
	Un employed	9	5			
	Home maker	5	0			
	Unskilled trainer	4	7			
	Skilled trainer	6	1			
	Shop keeper	6	5			
	professional	1	1			
	Others	0	0			
6.	Type of family			3.51	5.99	NS
	Joint	19	14			
	Nuclear	02	05			
	extended	00	00			
7.	Source of information			3.89	9.48	NS
	Social circle	03	00			
	Health care professional	21	13			
	Family members	04	02			
	Mass media	03	04			
	others	00	00			
8.	Residential status			0	3.84	NS
	Rural	31	19			
	urban	00	00			
6.	No. of living children			2.37	5.99	NS
	Two	29	15			
	Three	02	04			
	More than 3	00	00			

7.	Contraceptive usage					
	Using	08	08	1.43	3.84	NS
	Not using	23	11			

S= significant, NS= not significant
1=3.84, 2=5.99, 3=7.81, 4=9.48, 5=11.07, 6=12.59.

Since majority of demographic variables had no association with awareness regarding contraceptive usage null hypothesis was accepted and research hypothesis 1 was rejected except Age in year, gender.

Section IV: - Chi square test to find out the association between selected demographic variables of participants from urban areas with awareness regarding contraceptive usage.

Prior to testing the association between selected demographic variables of participants with their awareness regarding contraceptive usage hypothesis was constructed as follows

H0: - There is no significant association between selected demographic variables of participants from urban areas with awareness regarding contraceptive usage.

H2: - There is an association between selected demographic variables of participants from urban areas with awareness regarding contraceptive usage.

Table no 6: - chi square test used to find out the association between awareness regarding contraceptive usage among target couples residing in urban areas with their selected demographic variables.

Sl. no	Demographic variables	Awareness level		Obtained value	Table value	Interference
		Less than or equal to mean	Greater than mean			
1.	Age in year			1.26	7.81	NS
	25-30 years	08	04			
	31-35 years	09	02			
	36-40 years	09	05			
	41 years and above	10	03			
2.	Religion			1.68	11.07	NS
	Hindu	13	05			
	Muslim	10	03			
	Sikh	05	04			
	Christian	08	02			
	others	00	00			
3.	Gender			0.89	3.84	NS
	Male	06	04			
	Female	30	10			
4.	Educational status			1.95	7.81	NS
	No formal education	09	02			
	Primary education	09	04			
	Secondary education	05	04			
	Graduation and above	13	04			
5.	Occupational status			12.83	12.59	NS
	Un employed	07	02			
	Home maker	08	04			
	Unskilled trainer	05	02			
	Skilled trainer	00	00			
	Shop keeper	03	02			
	professional	12	04			
	Others	00	00			
4.	Type of family			1.24	5.99	NS
	Joint	03	00			
	Nuclear	33	14			
	extended	00	00			

5.	Source of information			3.25	9.48	NS
	Social circle	04	00			
	Health care professional	06	04			
	Family members	04	03			
	Mass media	22	07			
others	00	00				
6.	Residential status			00	3.84	NS
	Rural	00	00			
	urban	36	14			
7.	No. of living children			2.36	5.99	NS
	Two	35	12			
	Three	01	02			
	More than 3	00	00			
8.	Contraceptive usage			8.74	3.84	NS
	Using	17	13			
	Not using	19	01			

S= significant, NS= not significant

1=3.84, 2=5.99, 3=7.81, 4=9.48, 5=11.07, 6=12.59.

Since majority of demographic variables had no association with awareness regarding contraceptive usage null hypothesis was accepted and research hypothesis 2 was rejected except contraceptive usage status.

CONCLUSION

The findings of the study recommended for the further approaches to assess and improve the awareness regarding contraceptive usage among target couples. The present study proved the necessity of the education program in providing awareness regarding contraceptive usage.

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