

Awareness and Practice on Postpartum Family Planning among Postpartum Mothers attending Maternal and Child Health Clinic

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ABSTRACT

Background: Women in the postpartum period need effective contraceptives to prevent unintended pregnancies soon after child birth. This helps to promote the mother health as well as to reduce the child mortality and morbidity rate. The objective of study was to find out the awareness and practice regarding postpartum family planning among postpartum mothers.

Methods: A descriptive study design was carried among 241 postpartum mothers having under 6 months age child came for vaccination at Sunaulo Bhabishya Nepal, Chitwan. Postpartum mothers were selected using purposive sampling technique. All the postpartum mothers were interviewed through semi structured questionnaire for data collection. Data collection was done from 17th December 2019 to 14th January 2020. Data was analyzed by using descriptive statistics with the help of Statistical Package for Social Science (SPSS) version 20.

Results: The findings of the study revealed that the mean age of the mothers was 25.36 years. Regarding the awareness on postpartum family planning, most of the mothers had below average (39%) and average (36.9%) level of awareness. Whereas few (24.1%) had above average level of awareness. More than one third of mothers (37.8%) were used family planning method.

Conclusions: The study concluded that only few postpartum mothers had above average awareness. Practice of family planning method was low. Therefore it is recommended that routine counseling on postpartum family planning (PPFP) among antenatal and postnatal mother in health institute should be done.

Keywords: awareness; postpartum family planning; practice.

INTRODUCTION

Postpartum family planning (PPFP) is the prevention of unintended pregnancy and closely spaced pregnancies through the first 12 months following childbirth. Yet 214 million women of reproductive age in developing countries who want to avoid pregnancy are not using a modern contraceptive method.¹ Globally, family planning is recognized as a key life-saving intervention for mothers and their children.² Short time pregnancy space cause maternal anemia; low birth weight, and neonatal/infant mortality.³

In Nepal, one in four married women had an unmet need for family planning.⁴ Family planning can prevent more than 30% of maternal deaths and 10% of child mortality if couple space their pregnancies more than 2 years.⁵ Postpartum period need effective contraception to prevent unintended pregnancies. Which help to reduce the risk of maternal and child morbidity and mortality. Therefore the study was to assess awareness and practice of family planning among postpartum mothers.

METHODS

Descriptive study design was used to assess the awareness and practice of postpartum family planning among postpartum mothers. Non probability purposive sampling technique was used for this study. All postpartum mothers who came for child vaccination in one month were included for the study. Data were collected from 17th December, 2019 to 14th January, 2020 (Poush 2076). The study population was postpartum mothers having child under 6 months of age and attending to vaccinate their child in the time of data collection. The mother having age of children above 6 month and permanent family planning done were excluded from this study. The area of the study was conducted in Sunaulo Bhabishya Nepal, Chitwan. This is Non-governmental organization approved by government of Nepal, which provides family planning, immunization, abortion care, antenatal and postnatal care service. Total sample size was 241 postpartum mothers for data collection. Sample size calculation was done by using infinite and finite population formula.

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Sample size calculation for infinite population $n = (z^2pq)/(e^2 + z^2pq/N)$, by taking 95% confidence interval, prevalence as 53% (national demographic health survey 2016), margin of error is considered as 5%, number of postnatal mother came for child vaccination in clinic is 500. The required sample size is $n = (1.96^2 * 0.53 * 0.47) / (0.05^2 + (1.96^2 * 0.53 * 0.47 / 500)) = 218$. After taking 10% non-response rate the optimal sample size is 241.

Ethical approval were permitted from the Nepalese Army Institute of Health Sciences-Institutional Review Committee (NAIHS-IRC). A formal written permission was taken from Sunaulo Bhabishya Nepal, Chitwan for data collection. The objective of the research study was explained and informed written consent was obtained from each mother before data collection. The respondents were not forced to participate in the study.

A semi-structured questionnaire was developed on the basis of research objective through literature review. Data was collected by using face to face interview method. In Nepali language interview schedule was done. Duration for data collection was 15 to 20 minutes. Two enumerator were used for data collection after providing complete information of instrument. Researcher herself also collects data with them. Anonymity was maintained by giving code number. Confidentiality of their information was maintained by interviewing them in separate place. During the study, every precaution was taken to safeguard the rights and welfare of every respondent. After collecting data, it was checked for completeness of information. Data was then coded, entered into SPSS version 20. After completion of data entry, it was analyzed by using descriptive statistics. Awareness level was categorized by study done in Srilanka as average, below average and above average.⁶

RESULTS

While analyzing the finding regarding socio-demographic data, (40.6%) of the respondents were between ages 21-25 years. Only (1.7%) were age >35 years. The mean age is 25.36 and SD ± 4.85 . Regarding ethnicity, (37.3%) of the respondents was Brahmin/Chhetri. Similarly (36.5%) of the respondents were Janjati. Most (70.5%) of the respondents followed Hinduism. Majority (64.7%) of the respondent's occupation were house manager. More than half (53.1%) of respondents had one children and only 6.2% of mother had 3 children. Highest proportions (36.2%) of respondent's child birth spacing were 3-5 years. Most (92.3%) of the respondents could read and write and among them, (26.8%) of respondents had completed secondary level. Whereas nearly one fourth (23.2%) of the respondents had completed lower secondary and higher secondary level respectively. Also, (34.4%) of

respondents stated correctly that PPF means prevention of unintended pregnancy within 1 year of postpartum. Nearly half (48.3%) of respondents had got information about PPF at the time of discharge. Most (90.5%) of respondents knew about the Depo-Provera while (78.8%) of respondents knew about condom (Table 1).

Table 1. Respondents Awareness on Meaning and Types of PPF.

Variables	Frequency	Percent
Meaning of PPF (n=241)		
Prevention of unintended pregnancy within 1 year of postpartum	83	34.4
Prevention of pregnancy after 1 year of delivery	40	16.6
Practice of controlling the number of children	57	23.7
Increasing the birth spacing	61	25.3
Place of Last Child Delivery (n=241)		
Home	12	5
Hospital	229	95
If Hospital Delivery, get Information about PPF (n=229)		
Yes	151	66
No	78	34
Timing of Information on Hospital about PPF (n=151)		
Antenatal period	33	21.9
After delivery	45	29.8
At the time of discharge	73	48.3
Types of PPF* (n=241)		
Condom	190	78.8
Pills	189	78.4
Depo-provera	218	90.5
Norplant	135	56
Copper t	119	49.4
Lam method	44	18.3
<i>*Multiple response</i>		

Result shows that (72.2%) of the respondents were aware on duration of protection from depo-provera. Majority (72.2%) of respondents said correctly about place of Implant insertion. Similarly (60.6%) said correctly about duration of protection from implant. Majority (62.2%) of respondents said correctly about place of IUCD insertion. Nearly more than half (53.1%) of the respondents said correctly about duration of protection from IUCD (Table 2).

Finding shows that (37.8.0%) of respondents (couples) were using PPF method. In which (33%) of respondents used condoms and (6.6%) were used method Depo-Provera. Among them (42.9%) of respondents were used PPF within 45 days of child birth. While only 20.9% of the

Variables	Frequency	Percent
Duration of protection from depo-provera		
3month	174	72.2
2 month	25	10.4
9month	9	3.7
Don't know	33	13.7
Site of insertion implant		
In arm	174	72.2
In uterus	13	5.4
Don't know	54	22.4
Duration of protection from implant		
5 years	146	60.6
7 years	26	10.8
12 years	6	2.5
Don't know	63	26.1
Insertion site of IUCD		
Cervix	20	8.3
Arm	8	3.3
Uterus	150	62.2
Don't know	63	26.1
Duration of protection from IUCD		
5 years	12	5
7 years	15	6.2
10 years	15	6.2
12 years	128	53.1
Don't know	71	29.5

respondents felt side effect where (57.9%) had irregular menses as side effect (Table 3).

Variables	Frequency	Percent
Use of PPF method (n=241)		
Yes	91	37.8
No	150	62.2
If yes, types of used PPF method (n =91)		
Condom	30	33
Pills	22	24.2
Depo provera	25	27.5
Implant	6	6.6
IUCD	8	8.8
Time period of PPF used (n=91)		
Immediate after delivery	6	6.6
Within 45 days of baby delivery	39	42.9
After 45 days to 3 months	32	35.2
4-6 months	12	13.2
7-9 months	2	2.2
Side effects of PPF used (n=91)		
Yes	19	20.9
No	72	79.1
If yes (n=19)		
Headache	2	10.5
Bleeding	4	21.1
Weakness	4	21.1
Irregular menses	11	57.9
Backache	7	36.8

Finding shows (16.7%) of respondent's reason of not using PPF was due to husband out of home and using natural method, where (20%) of respondent had fear of side effect of contraceptives. In future (40.7%) of the respondents want to use contraceptives methods, among them 34.4 % of respondents want to use Depo-Provera (Table 4).

Variables	Frequency	Percent
Causes of not used PPF		
I don't like	26	17.3
Not suit for me	19	12.7
Due to fair of side effect	30	20
Husband out of home/aboard	25	16.7
Want next baby soon	5	3.3
No sexual contact after de- livery	20	13.3
Natural method	25	16.7
Want to use of PPF method in future (n=150)		
Yes	61	40.7
No	89	59.3
If yes, types (n=61)		
Condom	10	16.4
Pills	12	19.7
Depo-provera	21	34.4
Norplant	16	26.2
IUCD	2	3.3

Result shows that (39%) of the respondents had poor knowledge followed by 36.9% of the respondents had average level of awareness regarding postpartum contraception (Table 5).

Level	Frequency	Percent
Below average awareness (<40 %)	94	39
Average awareness (41-60 %)	89	36.9
Above average awareness (>60 %)	58	24.1

DISCUSSION

The findings of the study revealed that (34.4%) of respondents stated meaning of PPF is prevention of unintended pregnancy within 1 year of postpartum period. Majority (66.4%) of the respondents were getting information of PPF from health personnel and half (49.8%) of the respondents got information through friends. In contrast with similar study was conducted in Kathmandu which revealed that family planning information was obtained from media (55.70%), followed by health workers (25.30%) for the sources of awareness of contraception.⁷ Government of Nepal has launched the postpartum family planning program on health services and also focused on advertisement about different types of family planning method through national media. Almost all (95%) of respondents had delivered their

last child on hospital among them majority (66%) of respondents received information about PPF method. In which half (48.3%) of respondents had received PPF information at the time of hospital delivery and only (21.9 %) got information during antenatal visit. This finding is inconsistent with study done in Ethiopia on postpartum family planning utilization where, the prevalence of institutional delivery were (58%). However, nearly one fourth (24.6%), (24.6%) and (19.3%) counseled for family planning during antenatal care, delivery and postnatal care respective.⁸ Government of Nepal has launched and focused institutional delivery as well as mobilized trained community health volunteers for providing information on family planning so that most of the respondents delivered in hospital and get information about PPF.

The study revealed that all the women were aware of at least one type of PPF. Most (90.5%) of respondents knew about Depo-Provera, (78.8%) of the respondents knew about condom similarly (78.4%) of the respondents knew pills while half (49.4%) of the respondents knew about IUCD, (56%) of the respondents knew about implant and only (18.3%) of the respondents knew about lactational amenorrhea method. This finding is contrast with the study conducted in India showed that more than two third (76%) of respondents knew about Condom, nearly half (42.50%) of respondents knew oral pills, more than one third (38.33%) of respondents knew Depo-Provera, most (82.77%) of respondents knew IUCD and 43.1% knew about Implant and few (9.72%) knew about Lactational amenorrhea method.⁹ Ministry of health has trained the community health volunteers for providing information as well as distribute condom and pills.

Similarly, (72.2%) of the respondents stated 3 month is the duration of protection of depo-provera. Regarding implant, most (72.2%) of the respondents knew arm is the site of insertion implant whereas majority (60.6%) of the respondents said 5years is duration of protection from implant. As to the awareness regarding IUCD used time only (22%) of respondents said 45 days of delivery. Majority (62.2%) of respondents answered site of insertion. More than half (53.1%) of the respondents answered on duration of protection from IUCD is 12 yrs.

Regarding the use of PPF (37.8%) of respondents were used PPF method among them (33%) of respondents were used condoms and only (6.6%) were use depo-provera. (42.9%) of respondents were use PPF method within 45 days of child birth followed by minority (20.9%) of the respondents felt side effect. Study done in eastern Nepal only

(21%) postnatal women used PPF.¹⁰ Similar study held in Ethiopia showed that contraceptive utilization was (12.3%) among women in the postpartum period. The majority of respondents (68.7%) started utilization of contraceptive between 2-3 months of postpartum and only 5 respondents used contraceptive within one months.⁸ This study finding was contrast with present study. Reason for not using PPF, only (20%) of respondents said due to fair of side effect whereas (16.7%) of the respondents said husband out of home and 13.3% were no sexual contact after delivery, Similar type of study conducted in Karachi showed that 20.83% of respondents said fear of side effects, only (3.33%) not having sex and (3.83%) away from husband.¹¹ This finding is contrast to the present study. It might be due to geographical and religion variation. Among PPF not used mothers, (40.7%) of the respondents wanted to use PPF methods in future. Where (34.4%) of the respondents wants to use depo-provera and few (3.3%) wants to use IUCD in future. Similar study conducted in Kathmandu shows that about 68.50% of the participants wanted to use contraceptives in the future and the most preferred method for future use being depo-provera (23%) and least (5.5%) wants to use IUCD.⁷ So that to improve practice on PPF, health professionals should be more focused to encourage effective and high quality contraceptive counseling during antenatal, intrapartum and postpartum period. Concerning level of awareness, the present study shows that (39%) had below average, (36.9%) had average and (24.1%) above average awareness. Similar type of study was conducted in Sri Lanka among postnatal mothers, the findings revealed, about 46% had below average, 37.7% had average and 15.8% had above average.⁶ Both study were same finding revealed that most of the respondents had below average and average level of knowledge on PPF.

Awareness programmes on family planning are essential in prenatal visits, delivery services and postnatal period, thus decrease the unmet needs of postpartum contraception and increase family planning usage. Mother should counsel on family planning method during child vaccination to provide effective PPF services.

The setting of this study was limited in only one maternal and child health clinic, these finding cannot be generalized to all postpartum mother population of the country. Recall bias can occur in participant. In addition, the information on practice was obtained by self-reporting, so it may affect the practice score

CONCLUSIONS

Based on the finding of the study, it is concluded that awareness level was moderate in most of the

postpartum mother. Regarding the practice, more than one third of the mothers had used of PPF method. Most of the mothers were aware on about one types of PPF method but had low awareness in implant and IUCD used. Majority of the mothers did not practice PPF due to fear of side effects. So, there is need on promotion of PPF practices among mothers through counseling during antenatal and postnatal period.

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