Scholars Journal of Applied Medical Sciences (SJAMS)

Abbreviated Key Title: Sch. J. App. Med. Sci. ©Scholars Academic and Scientific Publisher A Unit of Scholars Academic and Scientific Society, India www.saspublishers.com ISSN 2320-6691 (Online) ISSN 2347-954X (Print)

Community Medicine

Post Abortion Use of Contraceptive Methods among Women in Reproductive Age Group in Rural Area

Dr. Valekar SS¹, Dr. Pandve HT²

¹Assistant Professor Dept. of Community Medicine, Smt. Kashibai Navale Medical College, Narhe, Pune India ²Professor & HOD, Dept. of Community Medicine, ESIC Medical College, Sanathnagar, Hyderabad India

Original Research Article	Abstract: Prior to legalization of abortion, induced abortions were performed in an illegal manner and that resulted in many complications hence abortion was
*Corresponding author Dr. Pandve HT	legalized in India in 1971 and the number of induced abortions has been gradually increasing since then. One way of preventing abortions is to provide family planning services to these abortion seekers so that same is not repeated. The study was performed to find out the acceptance of contraception after abortion and its
Article History Received: 16.11.2018 Accepted: 25.11.2018 Published: 30.11.2018	association with some socio-demographic determinants. The cross-sectional study conducted amongst 378 women in reproductive age group in rural health training centre of tertiary care hospital with the study tool of semi-structured questionnaire. Women in reproductive age group from 35 villages of primary health centres were participated in the study. The study showed that out of total 378 women, 33 (9%)
DOI: 10.36347/sjams.2018.v06i11.066	women had history of abortion and the acceptance of contraceptive method was significantly higher in these women. Most women opted for female sterilization followed by OC pills & Condom.age, literacy status, socio-economic status,
	number of children did not had a significant impact on the women seeking abortion services and using contraceptive methods. So the study concluded that women utilizing abortion services are more likely to adopt the contraceptive methods as compare to the women who have not undergone any abortion. The study recommends that Post abortion period is one which is important to prevent subsequent abortions and family planning services after abortion need to be strengthened.
	Keywords: Post abortion, Reproductive age group.

INTRODUCTION

Worldwide maternal mortality continues to be the concern in advance. Each year, approximately 500,000 maternal deaths had occurred worldwide. Among 99% of these deaths occur in developing countries from which Sub-Saharan Africa accounts for 50% of the maternal death burden [1]. The World Health Organization (WHO) estimates that, worldwide, almost 20 million unsafe abortions take place each year; accounting for about 13% of all maternal deaths in the world[2].

Prior to legalization of abortion, pregnancies could be terminated on medical grounds only; but at times there were some personal, social or humanitarian reasons when pregnancy had to be terminated. Since there was no provision to terminate pregnancy other than on medical grounds; the patients had to resort to illegal methods of pregnancy termination. This type of illegal abortion resulted in many complications. To put a check on rising incidence of illegal abortions along with its complications and to control population explosion; abortion was legalized in India in 1971 and the number of induced abortions has been gradually increasing since then [3].

Contraception can reduce the incidence of unwanted and unplanned pregnancies, thereby avoiding both legal and illegal abortions. Patients who have had an induced abortion are highly motivated to switch from inadequate and infrequent methods to effective contraceptive methods [4]. When patients come for induced abortion they are very receptive to accept subsequent family planning measures[5, 6].

Objectives

- To find out the prevalence of contraceptive use among women with history of abortion.
- To find out association with some sociodemographic determinants with contraceptive users with history of abortion.

MATERIALS & METHODS

Study Design

Valekar SS & Pandve HT., Sch. J. App. Med. Sci., Nov, 2018; 6(11): 4529-4532

The Cross-sectional study was carried out in the field practice area of a rural health training centre of teaching institute in Pune city which covers 35 villages.

Period of study

From January 2012 to December 2012

Study area

Villages under Primary Health Centre (PHC) Karla, Tal. Mawal, Dist. Pune, Maharashtra. Karla PHC is having 7 sub centres and 35 villages. According to the census 2011, total population of Karla PHC was 36760.

Sample size

With the reference to National Family Health Survey-3 (NFHS-3), the prevalence of contraceptive methods was taken to be 56% for the any contraceptive methods. Using Epi Info Software Sample size for Population Survey, sample size was calculated with the Confidence limit of 5%. The Sample Size calculated for the survey was 378. The calculated sample size is divided proportionately into 35 villages.

Sampling unit

The women in reproductive age group (15-49 years)

Sampling techniques

• Sampling technique for selection of household: Assuming at least one woman in the reproductive age group, sampling technique used for the selection of household was systematic random sampling method in each village. • Sampling technique for selection of study subject in the household: In the selected household if more than one eligible subject (more than one female in the reproductive age-group) were available, all subjects were included. Total 378 households with women in reproductive age group were planned to be surveyed at the start of the study (assuming one woman in the age group of 15-49 Yrs per household). In case the sampled household did not have a woman in the reproductive age group then subsequent house was taken. The household, where desired sample size is achieved was the last household surveyed in the study.

Study tool

The study was conducted by using a Questionnaire. The questionnaire was based on NFHS-3 Questionnaire. Semi structured, Pre-tested Questionnaire was used.

Data analysis

Epi Info 3.5.3, Primer software Data will be analyzed using chi-square test and statistical significance is taken if p value is less than 0.05. Written approval from ethical committee, at the institute level was obtained. Informed consent was taken from the study subjects before conducting an interview.

RESULT

Out of 378 women in the reproductive age group of the study population, 33 (9%) women had a history of abortion .

Table-1. Thistory of Abortion and use of contraceptive method							
Sr. No.	History of Abortion	Users	Non users	Frequency (%)			
1.	Yes	28 (84.85%)	5 (15.15%)	33 (100%)			
2.	No	189 (54.78%)	156 (45.21%)	345 (100%)			
	Total	217 (68%)	102 (32%)	378 (100%)			
	$\chi^2 = 9.939$ d.	f = 1	p = 0.002	2			

 Table-1: History of Abortion and use of contraceptive method





Valekar SS & Pandve HT., Sch. J. App. Med. Sci., Nov, 2018; 6(11): 4529-4532

The above table shows that those who had the history of abortion majority (84.85%) of them are acceptors of contraceptives. This shows that Contraceptive methods use increases with the history of Abortion. This also shows that majority (87.1%) of the users had no history of abortion. This has also shown a statistically significant association between history of abortion and use of contraceptive methods.

Out of 33 women who had abortion, 5 women are not using any contraceptive methods, reasons were 2 women willing to use (one want to use OC pills and other wants female sterilization) but rest 3 wants to conceive again.

Out of 28 women who had abortion and using some contraceptive use, 3 are using OC pills, 3 using condom, 1 using CuT and 21 had undergone female sterilization.

Socio-Demographic Variables		Abortion (Yes)	Abortion (No)	Total	Chi-square Value (d.f) &P value	
Age Group	15-19	1 (8%)	13 (92%)	14 (100%)		
	20-24	5 (6%)	79 (94%)	84 (100%)		
	25-29	12 (15%)	70 (85%)	82 (100%)	7.709 (5)	
	30-34	9 (16%)	48 (84%)	57 (100%)	0.189	
	35-39	1 (3%)	36 (97%)	37 (100%)		
	>39	5 (11%)	40 (89%)	45 (100%)		
Literacy status of Women	Illiterate	3 (4%)	65 (96%)	68 (100%)		
	Primary upto 4th std	21 (16%)	113 (84%)	134 (100%)	7.074 (4)	
	Secondary upto 10th std	6 (9%)	61 (91%)	67 (100%)	7.874 (4) 0.09	
	Higher Secondary	2 (7%)	28 (93%)	30 (100%)		
	Graduate& Post graduate	1 (5%)	19 (95%)	20 (100%)		
Socio- Economic Status	Class I	1 (8%)	11 (92%)	12 (100%)		
	Class II	8 (11%)	67 (89%)	75 (100%)	0.838 (4) 0.933	
	Class III	11 (12%)	80 (88%)	91 (100%)		
	Class IV	10 (10%)	89 (90%)	99 (100%)		
	Class V	3 (7%)	39 (93%)	42 (100%)		
Religion	Hindu	29 (10%)	269 (90%)	298 (100%)	0.969(1)	
	Muslim	4 (19%)	17 (81%)	21 (100%)	0.325	
Number of Children	0	1 (3%)	28 (97%)	29 (100%)		
	1	7 (12%)	52 (88%)	59 (100%)	1.696 (3)	
	2	15 (11%)	124 (89%)	139 (100%)	0.875	
	More than 2	10 (11%)	82 (89%)	92 (100%)		

Table-2: Association of some socio-demographic determinants with history of	of abortion ((n-378)
Table-2: Association of some socio-demographic determinants with history (of abortion (n=3/8)

The table no. 2 shows that none of the above mentioned socio-demographic determinants are significantly associated with the history of abortion though the association between age and number of children shows that as the number increases the number of women undergoing abortions are also increases.

DISCUSSION

Zavier A J F *et al.* in the year 2005-06 investigated the pattern of and determinants of post abortion contraceptive use and the rates of method continuation in India from the data drown from Indian National Family Health Surveys showed that 70.4% of women reported not using any method following abortion, and the levels varied considerably across states [7]. This study finding is not comparable with the present study finding; the probable reason could be place of study since the present study has been carried out in rural area.

Dhillon B S et al. conducted a study which was published in Indian Journal of Medical sciences in

the year 2004 among the 26 districts from 13 states on 1851 eligible women to assess the induced abortion and concurrent use of contraceptive method showed that Nearly one half of the women undergoing abortion accepted a family planning method concurrently; of these Intra Uterine Device/oral contraceptives and a permanent method was adopted by 37.2% and 49.1% respectively [5]. This study finding is similar to the current study in the respect that permanent method is most commonly accepted method of contraception after abortion.

Sosthène Mayi-Tsonga *et al.* conducted a study showed that Over 90% accepted a modern contraceptive method after abortion. Two-thirds (66.8%) chose the pill, 14.6% DMPA, and 9.3% a LARC method [8]. This is not in consistence with the present study findings as in the present study none of the women were aware about modern contraceptive methods like DMPA injection mentioned in the Tsonga *et al.* study.

Valekar SS & Pandve HT., Sch. J. App. Med. Sci., Nov, 2018; 6(11): 4529-4532

Similarly, study conducted by Bista KDB *et al.* showed that 78% accepted contraceptive method after abortion; of which 45% women started using CuT as a method of contraception [9]. Similar study finding was noted in Janie Benson *et al.* study. They did program evaluation in 10 countries of Asia and Sub Saharan Africa. In their study, 77% of women left the facility with a contraceptive method. The majority (84%) of contraceptive acceptors selected a short-acting method, especially oral contraceptives [10]. In the present study also maximum women started using contraceptive method after abortion but the most common method used was female sterilization.

Limitation of Study

Since, the present study setting was community based, the number of women who had undergone abortion is less as compare to women who had not undergone abortion. The less number of subjects is the limitation of this study.

CONCLUSION

In the present study, women utilizing abortion services are more likely to adopt the contraceptive methods as compare to the women who have not undergone any abortion. The most commonly accepted method was female sterilization. However, none of the socio-demographic determinants mentioned in the study showed significant association.

REFERENCES

- Wall SN, Lee AC, Carlo W, Goldenberg R, Niermeyer S, Darmstadt GL, Keenan W, Bhutta ZA, Perlman J, Lawn JE. Reducing intrapartumrelated neonatal deaths in low-and middle-income countries—what works?. InSeminars in perinatology 2010 Dec 1 (Vol. 34, No. 6, pp. 395-407). WB Saunders.
- Ceylan A, Ertem M, Saka G, Akdeniz N. Post abortion family planning counseling as a tool to increase contraception use. BMC Public Health. 2009 Dec;9(1):20.
- 3. Patel T, Leuva B. A 17 year review of voluntary termination of pregnancy. J Obstet Gynaecol India. 2006;56:522–528.
- Bulut A. Acceptance of effective contraceptive methods after induced abortion. Stud Fam Plann. 1984;15:281–284.
- Dhillin BS, Chandhiok N, Kambo J, Saxena NC. Induced abortion and concurrent adoption of contraception in the rural areas of India (an ICMR task force study). Indian J Med Sci. 2004;58:478– 484.
- 6. Carolyn C, Douglas H, Tamarah M. Postabortion family planning: addressing the cycle of repeat pregnancy and abortion. Int Perspect Sex Reprod Health. 2010;36:23–35.
- 7. Zavier F, Padmadas SS. "Post abortion contraceptive use and method continuation in

India". International Journal of Gynecology and Obstetrics. 118 (2012) 65–70

- Sosthène Mayi-Tsonga, Pamphile Assoumou Obiang, Ulysse Minkobame, Doris Ngouafo, Nathalie Ambounda, Maria Helena de Souza. International Journal of Gynecology and Obstetrics. 126 (2014) S45–S48
- Bista KDB, Pradhan N, Manandhar R. Knowledge, attitude and practice of contraception among women seeking: abortion care services. Journal of Institute of Medicine, August. 2013, 35:2
- Benson J, Andersen K, Healy J, Brahmi D. What Factors Contribute to Postabortion Contraceptive Uptake By Young Women? A Program Evaluation in 10 Countries in Asia and sub-Saharan Africa. Global Health: Science and Practice. 2017;5(4):644-57

Available online at https://saspublishers.com/journal/sjams/home