

Unmet Need of Contraception

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ABSTRACT

Objective: This study was disburse to spot the unmet need of contraceptive method and to assess the factors influencing it in Sakrand city, Sindh.

Study Design: Cross sectional study.

Place and Study Duration of Study: This study was conducted at the Department of Public Health Services Academy, Islamabad, Community Medicine and Obstet & Gynae Department, Sialkot Medical College Sialkot from April 1st, 2018 to 30th April, 2018.

Materials and Methods: 194 respondents were approached for interviewing after verbal consent. These respondents were designated through Convenience Sampling. The sample size involves ninety-seven for every (Married Men & Women), was required for the present study. A structured form was accustomed to gather data from 194 married couples. Data was entered and analyzed exploitation SPSS-20.

Results: 38.14% of men (37 out of 97) were found to own associate unmet need for contraceptive method, while 42.26% of female (41 out of 97) were found to own associate unmet need for contraceptive method. On the premise of findings of study, it had been found that married couples in city Sakrand had higher unmet need for contraceptive method.

Conclusion: The study found married men of city Sakrand were facing totally different barriers within the seizing of contraceptive method i.e. at community level e.g. lack of education and awareness, excessive work, family pressure.

Key Words: Contraceptive Method, Contraceptive Prevalence Rate, Married Couples

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INTRODUCTION

The recent knowledge on unmet need reveals that the services associated programs fail to fulfill the demand and leave an unmet need high¹. As family size wants cut back, unmet need tends to develop till service facility catches up with the demand for fewer births and longer birth intervals. After that additional gains in commission convenience consecutively decrease unmet need². According to World Health Organization, encouragement of contraceptive method and enabling girls to avoid unwanted pregnancies is key. World Health Organization's care in humanizing motherly health in achieving the Millennium Development Goal³.

Birth control and generative health programs have contributed seriously to fertility decline within the developing contries⁴.

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The use of in contraceptive method contributes to dropping the load of generative health problem by declining mortality and morbidity of reserve pregnancies. Ever-increasing recent family planning use needs the population's intensive comprehensive interventions and mutual demand of serious info. At the similar time importance has been set on the interventions aiming at countering negative perceptions of recent contraceptive ways⁵. The population policy of Pakistan envisages achieving population stabilization in 2020 by declining the annual rate of growth from one.9% to 1.3% and TFR at 2.1. This mark needs exhausting diligence to create the perception of little family a usual surroundings through a keenly planned statement and education promotion. On immediate determinants of fertility largely infant feeding and prolonging birth area won't create conflict from the community as a result of these ideas area unit in accordance with Moslem injunctions and data⁶. The vital importance of generative rights to the contradiction of population policies within the twenty first century argued that generative rights prolong to be beneath risk, even some fifteen years once the milestone ICPD in Cairo declared the importance of a satisfying and sex activity life, the potential to own youngsters and therefore the right to decide on on the temporal order, range and spacing. This is often contrasted with the unmet want for birth control within the poorest countries. It entails health suppliers to promoter for generative rights, affirming that the

autonomy of girls to arrange their fertility is that the origin for different necessary decisions⁷.

The health edges of contraceptive method area unit as: around two hundred,000 maternal morbidities take up to 0.5 the full may be prevented through effective birth control and literature is clear that eleven girls die on a daily basis from gestation and birth complications thus most of those deaths can even be prevented by contraceptive method. Correct birth spacing reduces by 0.5 the chance of death for newborns and infants. Over seven,800 baby deaths may be prevented yearly through contraceptive method. Poor girls and infants carry the foremost risk of death and incapacity from lack of access to generative health services, thus contraceptive method may be a cost-efficient public health live. Unmet need as a thought dates to the Sixties, once researchers 1st incontestable a spot within the developing world between women's fertility preferences and their use of contraceptive method. New views on men have emerged from associate evolution in puzzling over generative health with ICPD programme of action birth down a holistic conception of generative health⁸.

An Indian study disclosed that unmet want for contraceptive method was St Martin's Day for married men and seventeen.5% for married girls. The distinction was seen each in unmet want for spacing (M-3.5% vs. F-6%) similarly as limiting family size (M-7.5% vs. W-11.5%). Overall, unmet want for contraceptive method was considerably higher for married girls compared to married men⁹.

Unmet need for contraceptive method is especially high in Sub-Saharan Africa, wherever very little progress has been created. Inside each region, however, some countries and sub regions stand out as clear targets for help. Though African nation, South Africa and plenty of their immediate neighbors have unmet want levels below 2 hundredth, Ethiopia, other countries on the east and west coasts of continent have rates around thirty fifth. Different regions, too, have their hassle spots: The rates for Asian nation (30%) and Haiti (40%), as an example, area unit sixfold rock bottom measured rates in their region; Vietnam (5%) and South American nation (6%) severally associate calculable 113.6 million girls within the developing world have associate unmet want for contraceptive method one zero five.2 million married girls (of whom fifty five.4 million would like to area births and four9.8 million would like to limit additional childbearing) 4 million unwedded girls. Additionally, associate calculable 9 million girls in different regions have associate unmet need: four.6 million in Russia, 3.6 million in Japanese Europe. Thus, a complete of 122.7 million girls in developing countries and therefore the former Soviet republics have associate unmet need for contraceptive method. Asia contains sixty one million married girls with unmet want, or fifty eight of the

full for the developing world, reflective the inclusion of many countries with terribly giant populations (India, Indonesia, Pakistan and Bangladesh). Sub-Saharan Africa contains twenty four million (22% of the total), largely owing to the massive populations of African nation, Ethiopia, South Africa and therefore the Democratic Republic of the Congo. Geographic area contributes eleven million married girls with unmet want (11%), nearly 1/2 whom board Mexico and Brazil. North Africa and therefore the Mideast account for under concerning eight million (8%), and therefore the Central Asian republics, with their smaller populations, have a complete of one.1 million (1%). The proportion of presently married girls with unmet want in varied regions of the developing world in 2000 ranges from St Martin's Day to pure gold. sub-Saharan Africa's figure of pure gold is concerning 0.5 once more the common for the developing world overall (17%); different regional figures vary from St Martin's Day within the Central Asian republics to 14 July in geographic area and Sixteen Personality Factor Questionnaire in North Africa and therefore the Mideast and in Asia¹⁰. At an equivalent time, it's evident that reducing unmet have to be compelled to zero or negligible levels is feasible and nearly assured wherever contraceptive prevalence is high, e.g., Vietnam with five-hitter and country with 11th of September. This indicator is one by that MDG 5b's progress is being monitored, and nil tolerance for unmet contraceptive want deserves thought for adoption by all countries absolutely committed to rising the human condition¹¹.

The unmet want live offers associate estimate of the proportion of girls UN agency may probably use contraceptive method. UN agency area unit exploitation contraceptives area unit aforementioned to own met want for birth control. The full demand for birth control is formed of the proportion of married girls with unmet want and married girls with met want for birth control¹².

MATERIALS AND METHODS

A Cross sectional study was conducted from April 1st, 2018 to 30th April, 2018 at the Department of Public Health Services Academy, Islamabad, Community Medicine and Obstet & Gynae Department, Sialkot Medical College Sialkot. This study was conducted to spot the unmet need of contraceptive method and to assess the factors influencing it in married couples of Sakrand city, Sindh. The sample size involves ninety seven for every (Married Men & Women), was required for the present study. A complete of 194 respondents were approached for interviewing after verbal consent & these respondents were designated through Convenience Sampling with inclusion criteria as Married Men & Women; (15 to forty nine for married girls & fifteen to seventy

years). Collected data was entered and analyzed exploitation SPSS-20.

RESULTS

Unmet Need of Contraception: 38.14% of men (37 out of 97) were found to have an unmet need for contraception, while 42.26% of women (41 out of 97) were found to have an unmet need for contraception.

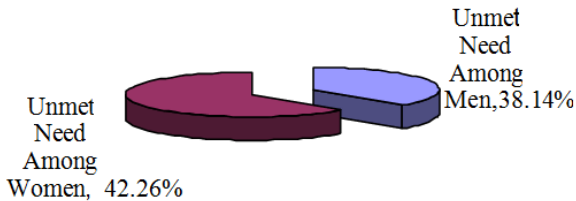


Figure No.1: Unmet Need among married men and women.

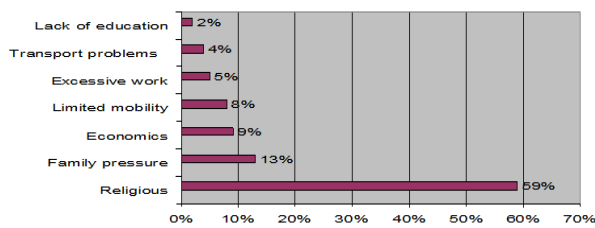


Figure No.2: Reason of Unmet need among women.

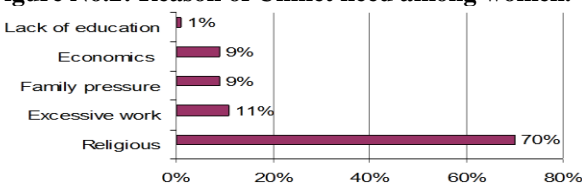


Figure No.3: Unmet need for contraception.

DISCUSSION

In the current study; unmet want for contraceptive method was found to be higher for married girls compared to men (42.26% & 38.14% respectively) among study respondents. International & regional literature shows regional figures of total Unmet need as: 1990-2009 West and Central Africa twenty five.5, East and Southern Africa twenty six.5, Middle East / North Africa thirteen.5, Eastern Europe eleven.3, South Asia twenty one.0, East Asia/Pacific sixteen.6, Latin America and Caribbean seventeen.425.

Although African nation, South Africa and plenty of their immediate neighbors have unmet want levels below 2 hundredth, Ethiopia, African nation and other countries on the east and west coasts of continent have rates around thirty fifth. different regions, too, have their hassle spots: The rates for Asian nation (30%) and Haiti (40%), as an example, area unit sixfold rock bottom measured rates in their region Vietnam (5%) and South American nation (6%), respectively¹².

In line with a supply that identifies that the unmet need for contraceptive method remains persistently high in many countries wherever one fifth or a lot

of married reproductive-aged non-contracepting girls report desirous to area or limit births e.g., Myanmar (20%), Laos (40%), Asian nation (25%) and Asian nation (24%). These 5 countries alone account for nearly twenty million girls with unmet want and an other eight with accessible knowledge (e.g., Indonesia, Philippines, Vietnam, Bangladesh, India, Kazakhstan, and Mongolia) contribute a further fifty eight.3 million girls.

Unmet need varies wide similarly, wherever knowledge area unit accessible. Pakistan, Laos and therefore the Maldives register a number of the best levels of unmet want (33%, 40%, and thirty seventh respectively) within the region and area unit substantial for Asian nation (24%), Asian nation (25%), Myanmar (20%), the Philippines (17%), PDR Korea (16%) and Mongolia (14%). These levels occur among married men & girls, wherever the ladies isn't contracepting however wishes to area or limit future births and imply continuing vulnerability to the chance of haphazard gestation till the necessity is met. Globally this figure is calculable to be 215 million girls, with a predominant share being within the Asia region, and therefore the incidence of uncaused pregnancies annually is calculable at seventy five million. At an equivalent time, it's evident that reducing unmet have to be compelled to zero or negligible levels is feasible and nearly assured wherever contraceptive prevalence is high, e.g., Vietnam with five-hitter and country with 11th of September. This indicator is one by that MDG 5b's progress is being monitored, and nil tolerance for unmet contraceptive want deserves thought for adoption by all countries absolutely committed to rising the human condition¹¹

In my study reasons known for higher rates of unmet want in Sakrand city were e.g. lack of education, excessive domestic work and resistance from the female parent, resistance from husband, relative-in-law and elders.

Regarding reasons of unmet wants of contraceptive method there's coherence thus of these barriers ought to be self-addressed at the same time and fruitfull efforts created to cut back unmet have to be compelled to zero or negligible levels as literature is clear Vietnam.

Similar results were rumored in an exceedingly study from urban center, twenty ninth of men compared to thirty ninth of girls rumored having unmet need for contraceptive method. None of the previous studies have looked between married men and married girls on the unmet want for contraception¹²

The findings of our study have highlighted the numerous distinction in married men and married girls; unmet want of contraceptive method and reinforce the actual fact that responses of married girls alone might not be enough; this is often why my study has target each genders to assess the unmet need of

contraceptive method in terms of frequency similarly as totally different reasons one by one among married men and married women as serious issue.

CONCLUSION

The study found married men and ladies of city Sakrand were facing totally different barriers within the seizing of contraceptive method. Largely the barriers were at community level like lack of education and awareness, excessive work, resistance from family. Religious barriers were the foremost common among all.

Sakrand city includes a high unmet want of contraceptive method and low contraceptive prevalence rate. Though there's smart data relating to family and trendy ways of contraceptive method but there's low utilization of recent contraceptive ways.

Author's Contribution:

Concept & Design of Study:	Abdul Rahman
Drafting:	Muhammad Akram Saeed
Data Analysis:	Nasreen Hamid
Revisiting Critically:	Abdul Rahman, Muhammad Akram Saeed
Final Approval of version:	Abdul Rahman

Conflict of Interest: The study has no conflict of interest to declare by any author.

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