

## Postpartum Contraception: A Missed Opportunity For Family Planning

Ankita Mann<sup>1\*</sup>, Sumita Mehta<sup>2</sup>, Anshul Grover<sup>2</sup>

<sup>1</sup>Department of Obstetrics and Gynaecology, Babu Jagjivan Ram Memorial Hospital, New Delhi, India, <sup>2</sup>Department of Obstetrics and Gynaecology, Jagjivan Ram Memorial Hospital, New Delhi, India

### ABSTRACT

Demographic and health surveys data regarding contraceptive usage in postpartum period in 17 developing countries from 2003 to 2007 demonstrated rates of unmet need up to 88% indicating that postpartum women are more likely to have an unmet need for family planning than married women. A cross-sectional interview-based study was undertaken from June 2019 to September 2019 in the Department of Obstetrics and Gynaecology of Babu Jagjivan Ram Memorial Hospital, New Delhi. A total of 200 women in their immediate postpartum period (both vaginal and cesarean deliveries) admitted in the hospital were interviewed, and analysis was made. Majority of the respondent's, that is, 78% were in the age group of 20–30 years. Awareness and acceptance of contraceptives were highest among couples with higher education, higher socioeconomic status, and working women. The most common contraception used was condom (51%), and the major source of receiving contraception was government hospital (87.50%). Of the 200 women, nine opted for sterilization. Mass media (35%) were the major source of information. Contraceptive acceptance after counseling was 47%. Regular and comprehensive counseling is must for all antenatal and postnatal women from every health center in a village to super-specialty centers in cities that are all levels of health care delivery system, proper, and correct information which should be provided about various methods of contraception and the patient should be able to choose a method of their choice.

**Key words:** Contraception, counseling, family planning, postpartum, pregnancy.

### BACKGROUND

A woman's reproductive right – including the right to decide the number, timing, and spacing of her children – is absolutely fundamental to women empowerment and equality.

The provision of quality family planning services in the postpartum period has the potential to reduce the voluntary termination of unwanted pregnancies and effect a reduction in both maternal and childhood mortality and morbidity arising from unsafe abortions and inadequate spacing of births, respectively.<sup>[1]</sup> Demographic and health surveys data regarding contraceptive usage in postpartum period in 17 developing countries from 2003 to 2007 demonstrated rates of unmet need up to 88% indicating that postpartum women are more likely to have an unmet need for family planning than married women.<sup>[2]</sup> In developing countries like India, where home deliveries are still common, and postnatal care is unlikely, only a few women provided with opportunities for postpartum contraception counseling. This study aims to assess knowledge, uses and reasons for non-usage of contraception among postpartum women.

### METHODS

A cross-sectional interview-based study was undertaken from June 2019 to September 2019 in the Department of Obstetrics and Gynaecology of Babu Jagjivan Ram Memorial Hospital, New Delhi. A total of 200 women in their immediate postpartum period (both vaginal and cesarean deliveries) admitted in hospital were interviewed and analysis was made. The women were counseled regarding postpartum contraception after assessment of their knowledge and practices.

### RESULTS

Out of 200 women, majority of the respondents, that is, 78% were in the age group of 20–30 years. Awareness and acceptance of contraceptives were highest among couples with higher education, higher socioeconomic status, and working women. The most common contraception used was condom (51%) and the major source of receiving contraception was government hospital (87.50%). Of the 200 women, nine opted for sterilization. Mass media (35%) were the major source of information. Contraceptive acceptance after counseling was 47%. The main reason for non-acceptance of contraception during postpartum period was anxiety related to the various side effects of contraceptive methods.

\*Corresponding author:

Email: ankitamann1988@gmail.com

ISSN: 2320-138X

## DISCUSSION

Contraceptive demand is not constant throughout the reproductive life of a woman. Immediate puerperium presents an ideal and important opportunity to initiate effective contraception. Our study analysis is consistent with other authors<sup>[3]</sup> suggesting that postpartum family planning programs need to prioritize the provision of care to young mothers, for whom delaying a subsequent pregnancy could be potentially life-saving.

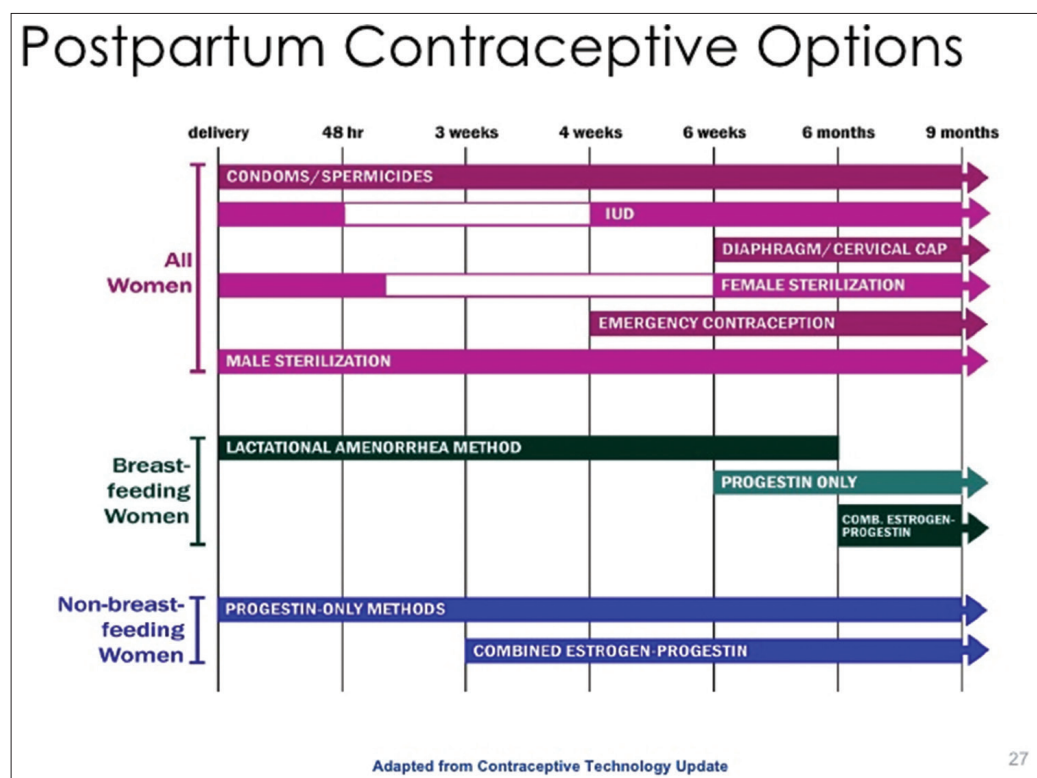
In our study, it was evident that the key factors that influenced the knowledge of contraception were education, occupation, and socioeconomic status of women. Similarly, significant association between contraception acceptance and socioeconomic status was observed by Murarkar *et al.*<sup>[4]</sup> in their study.

In spite of advent of hormonal contraceptives, 51% of couples opted for condom (barrier contraceptive) as postpartum contraceptive. Condoms are still popular among couples due to fear of side-effects of other contraceptive methods and to escape postpartum hospital visit. Major source of receiving contraception was government hospitals seen in 87% of patients. Based on the study, analysis main source of information about contraception among patients was mass media (television) followed by doctors and other health care personnel. During our study, after receiving postpartum contraception counseling acceptance rate was as high as 47% and among the common

reasons found for non-acceptance are inconvenience, unsatisfactory services, lack of information, fears of contraception side effects and opposition from husbands, and relatives or others. In a large study conducted in Mexico,<sup>[5]</sup> it was found that women who received family planning advice during postnatal care were more likely to use a contraceptive than those who did not receive such advice. Cochrane review<sup>[6]</sup> considers postpartum contraceptive education, including contraceptive choices, contraceptive knowledge, attitudes, and practices and improved satisfaction with care as a standard component of postpartum care.

## CONCLUSION

Postpartum and postabortal periods are very crucial for a woman as for many patients who belong to rural areas, this may be the only time she comes in contact with a health personnel. Hence, counseling done at this period is very crucial and effective too. It is clearly evident that there is a great lack of awareness and knowledge of contraception in postnatal and postabortal women. Therefore, regular and comprehensive counseling is must for all antenatal and postnatal women from every health center in a village to super-specialty centers in cities that are all levels of health care delivery system, proper, and correct information which should be provided about various methods of contraception and the patient should be able to choose a method of their choice.



## REFERENCES

1. Cleland J, Bernstein S, Ezeh A, Faundes A, Glasier A, Innis J. Family planning: The unfinished agenda. *Lancet* 2006;368:1810-27.
2. Borda M, Winfrey W. *Postpartum Fertility and Contraception: An Analysis of Findings of 17 Countries*. Baltimore, MD: Jhpiego; 2010.
3. Mayor S. Pregnancy and childbirth are leading causes of death in teenage girls in developing countries. *BMJ* 2004;328:1152.
4. Murarkar SK, Soundale SG. Epidemiological correlates of contraceptive prevalence in married women of reproductive age group in rural area. *Natl J Community Med* 2011;2:78-81.
5. Barber SL. Family planning advice and postpartum contraceptive use among low-income women in Mexico. *Int Fam Plan Perspect* 2007;33:6-12.
6. Lopez LM, Hiller JE, Grimes DA. Education for contraceptive use by women after childbirth. *Cochrane Database Syst Rev* 2010;1:CD001863.