

A Study to Assess the Knowledge and Attitude of Eligible Couple Regarding Permanent Family Planning Methods in Selected Rural Area of Jalgaon

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Abstract: *The study to assess the knowledge and attitude of eligible couples regarding permanent family planning methods in selected rural area of Jalgaon district was carried out in partial fulfilment of the requirement for the award of the degree of master in science in nursing at Godavari college of Nursing ,DrUlhasPatil Medical College Jalgaon, the objectives of this study were to assess the level of knowledge and attitude of permanent family planning method in eligible couples. The study was based on evaluative approach .the samples were 60 eligible couples who fulfilled the exclusion and inclusion criteria.The study is primarily concerned with the assessment of knowledge and attitude of eligible couples of rural area towards permanent family planning methods. simple randomized sampling was followed in this study. The conceptual framework of this study is based on Rosenstock's Health Belief Model. The health belief model was developed to provide a framework to explain why some people take specific actions to avoid ill effect of family health while others fail to protect themselves. The analysis of the data was done in accordance with the objectives of the study. The data was analyzed by collectively by the frequency, mean, mean percentage. The description of tool can be assessed with Socio Demographic Data, Questionnaire regarding permanent family planning methods, Linkert attitude scale. One-way ANOVA and unpaired t-test were used within groups comparison categories. For variables having more than two categories unpaired t- test was used in this study.*

Keywords: Knowledge and attitude, permanent family planning methods, eligible couples

1. Introduction

“Small Family, Happy and Prosperous Family”.

Human development is the ultimate objective of all planning efforts. Planning takes into account the resources and pathways available for human development and human resources available for carrying out the developmental Plans. Family planning in India continues to be synonymous with sterilization, although government policies strive to promote reversible methods¹.

Indeed, much of the recent fertility decline in India (especially in the southern states) is attributed to increasing acceptance of sterilization, particularly female sterilization. Family planning evolution and the widespread high use of sterilization has several roots².

India launched the National Family Welfare Program in 1951 with the objective of "reducing the birth rate to the extent necessary to stabilize the population at a level consistent with the requirement of the National economy⁹.

Attitudes are associated with physical neural state, verbal opinion, ideologies and above all integrated philosophy of life. Attitudes are a stage of sensitiveness and proneness to act. Attitudes can be defined as readiness to acts; mental posture, guide for conduct; feeling desires, fear, conviction, a cumulative perception; predispose to form certain opinions, thinking one develops a kind of mental set.³

Current Demographic Scenario

India, currently the second most populous country in the world, has 17% percent of world's population in less than

three percent of earth's land area, India began the 20th century with the population about 238 million and by 2000 it ended up with 1 billion. While the global population has increased threefold during the last century, from 2 billion to 6 billion, India has increased its population nearly five times during the same period India's population is expected exceed that of China before 2030 to become the most populous country in the world.⁴

2. Literature Survey

A study was conducted on attitude toward Family Size Preferences among urban people and to understand the fertility transition in urban areas. Urban residents may not have a significantly different motivation as to why they would like to have children compared to people from rural areas. In this study researcher concludes that urban residents by way of responding to the pressure from economic constraints and hoping success in the social ladder, are slowly accepting social norms and values that promote small family sizes.⁵

A study conducted regarding decline aggregate fertility and increasing aggregate contraceptive method use from1990 to 2000.study showed the result that yet, in rural Zambia, progress in family planning has lagged far behind the advances made in Zambia's urban areas. The contraceptive prevalence rate in Lusaka and other urban areas outstripped the rate in rural Zambia by nearly percentage points (41.2 percent versus16.66 percent) in 2001.The total fertility rate varied between urban and rural areas by 2.5 children (4.3 versus 6.9 children). This paper considers the urban rural differentials in Zambia and assesses family planning outreach as a tool to narrow this divide.⁶

Rao et al. in Tamil Nadu (2011). conducted a study and pointed out that family planning knowledge was widespread in their study area and all the respondents were aware of at least one method of contraception, the adoption of family planning was found hampered probably on account of fear of side effects and misconceptions about family planning.⁷

Kameswararao et al (2015) conducted a cross-sectional study descriptive study among 50 Family Planning adopting families and 50 non Family Planning adopting families from the village of Vector and the city of Karimnagar in Andhra Pradesh. Use random sampling method. For inferential calculation Chi-square test is used. Results shows that Family Planning adopting families have better standard of living because they have amenities like housing, television, and vehicles and less mortality and morbidity ($P < 0.001$) However they lack positive feeling towards life.⁸

3. Problem Definition

A study to assess the knowledge and attitude of eligible couple regarding permanent family planning methods in selected rural area of Jalgaon.

4. Objectives

- 1) To assess the level of knowledge of eligible couple's residing in rural area regarding permanent family planning methods.
- 2) To assess the attitude of eligible couple's residing in rural area regarding permanent family planning methods.
- 3) To associate the attitude and knowledge of eligible couple's regarding permanent family planning methods with selected demographic variables.

5. Methodology

The present study is a quantitative study, this study has evaluative approach, Non experimental design was chosen for the study. This design was selected as it best matched the study topic. The study was conducted at rural area. The population and samples were 60 eligible couples who fulfilled the exclusion and inclusion criteria. The sampling technique used in this study was simple random sampling technique and tools used for the data collection included demographic Performa and structured interview questionnaire for knowledge and Likert scale for attitude.

6. Results

The following are the major findings of the study

Section I

Demographic variables:

- 1) Maximum 35(58.33%) of them were in the age of 18-28 years. frequency 20 (33.33%) of them were in the age of 29-38 years. Frequency 5(8.33%) of them were in the age of 39-44 years. And 0 of them were in the age of above (>) 45 years.

- 2) According to their educational status reveal the maximum secondary education 24 (41.66%), illiterate 10 (16.66%), primary education 17 (28.33%) and graduation & post – graduation 8(13.33%).
- 3) According to religion reveal the maximum Hindu 31 (51.66%), other specify 11 (18.33 %), Muslim 9 (15 %) and Christian 9 (15 %).
- 4) According to occupation reveal the maximum others 23 (38.33%), private job 19 (33.33%), self-job 15 (23.33%) and government job 3 (5%).
- 5) According to their monthly income status reveal the maximum Rs.5000 /- 29 (48.33%), Rs. 10,000/- and >Rs. 10,000/- 7 (11.66%).
- 6) According to types of family reveal the maximum joint family 39 (66.66%), nuclear family 21 (33.33%) and expanded family 0 (0%).
- 7) According to duration of marriage reveal the maximum 1-3 yrs. 26 (43.33%) ,4-6yrs. 16 (26.66%) ,7-10 yrs. 15 (25 %) and >10 yrs. 3 (5 %).
- 8) According to number of children 1-2 children 33 (55%), 2-4 children 23 (38.33%) and > 4 children 4 (6.66%).

Section II

Association of knowledge score in relation to demographic variables

This section deals with association of knowledge and attitude scores with demographic variables of the study eligible couples. One-way ANOVA and unpaired t-test were used within groups comparison categories. For variables having more than two categories unpaired t- test was used.

Section III

Association of attitude score in relation to selected demographic variables.

There is not-significant association between age, educational status, religion, occupation, monthly income, types of family, duration of marriage and number of children

7. Discussion

The present study was a study conducted to assess the knowledge & attitude of eligible couple regarding permanent family planning. The Non Experimental Descriptive study design was adopted for the present study.

Data was collected from 60 eligible couples from rural area of Nashirabad, distJalgaon.

The tool of the study has three sections:

- SECTION A: Socio Demographic Data
- SECTION B: Questionnaire regarding permanent family planning
- SECTION C: Likert attitude scale.

The data collected was analyzed by using Descriptive and Inferential statistics and presented in the form of table and graphs. ANOVA test was used to calculate the relation between the demographic variables and knowledge & attitude regarding permanent family planning among eligible couples.

The summary of the results is discussed and presented under the following headings:

Section-A Assess the knowledge of eligible couple's regarding permanent family planning method.

Section-B: Assess the attitude of eligible couple's regarding permanent family planning method.

Section-C: Association of knowledge & attitude of eligible couple regarding permanent family planning method with demographic variables.

8. Conclusion

After the detail analysis, this study leads to the following conclusion

The people of rural area do not have 100% knowledge regarding permanent family planning and its impact on population, to assess the knowledge and attitude of eligible couple.

Association of knowledge score in relation to selected demographic variables. There is not-significant association between age and religion and there is significant association between educational status, occupation, monthly income, types of family and duration of marriage.

Association of attitude score in relation to selected demographic variables. There is not-significant association between age, educational status, religion, occupation, monthly income, types of family, duration of marriage and number of children.

Here, based on above finding it was concluded that written prepared material by investigation help the eligible couple to improve their knowledge and attitude of eligible couple regarding permanent family method.

9. Future Scope

The findings of the study have several implications in different branches of nursing profession, i.e. Nursing education, nursing practice, Nursing Administration and Nursing research. By assessing the knowledge & attitudes of eligible couples regarding permanent family planning derive a clear picture that age, education, religion, occupation, monthly income, types of family, duration of marriage and number of children, family planning advice taken or not these all part of our society need to improve. So that the explosion of population would be control.

Nursing Education

- Nurses along with other community workers, leaders must take steps to recognize poor attitudes of eligible couples regarding family planning methods as a serious societal and public health problems.
- Student nurses during clinical and community posting can provide health education against the adverse effects of over population.
- Nurses posting at family planning clinic can render family planning advice through guidance and counseling.

Nursing Practice

- The present study revealed that the knowledge & attitudes of eligible couples of rural area is poor than the knowledge & attitudes of eligible couples of urban areas.
- The rural health care center and other family planning should have taken more initiative to improve the knowledge & attitudes of eligible couples of rural areas.
- The nurse educators during their home visit and using of media must give advice to implementation of permanent family planning methods and control the family size.

Nursing Administration

- Today nursing has become complex and highly varied practice discipline with the rapidly growing, well developed and well documented scientific and humanistic knowledge based.
- A massive awareness camping involving the community, religion leaders, priests, non-Government-organization, women's organizations, social activist at all level should be organized to developed good attitudes of eligible couples regarding family palming
- Various programs regarding permanent family planning should be promoted.
- Administrative support should be provided to eligible couples to adopt permanent family planning methods to adopt small family norms.

Nursing Research

- The present study revealed that there are need to create good knowledge & attitude towards family planning among eligible couples. the findings of the present study shall provide a base line data for research studies to be conducted in future.
- Further research can be conducted in large samples.
- Further research can be conducted only in rural area.
- Further research can be conducted only in urban area.

10. Recommendation

Onthe basis of finding of the study, it is recommended that the following studies can be concluded

- More elaborate study with large size sample could be done in future.
- A study can be done to assess the knowledge and attitude of permanent family planning method in both rural eligible couples in large scale.
- An extensive study can be done in rural eligible couples only.
- A study can be done to assess the attitudes of highly educated eligible couples and lower level of educated eligible couples.

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