

Practice of Family Planning Methods by the Eligible Couple in the Rajshahi City Corporation Area

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ABSTRACT

This study investigates family planning practices among eligible couples in the urban setting of Rajshahi City Corporation, Bangladesh. The research aims to determine the prevalence and demographic factors associated with family planning, as well as the types and sources of family planning methods, decision-making processes, and challenges faced. Data was collected through a cross-sectional study, with 300 eligible couples participating. The findings reveal a commendable prevalence of family planning practices (88.0%) in the area, reflecting accessible and effective reproductive health services. Notably, a significant association was found between the sex of respondents and family planning practices ($\chi^2=25.549$, $p<0.001$), with a higher percentage of females (88.2%) actively practicing family planning. Female partners played a central role in decision-making, and small family sizes with shorter age gaps between children were observed. Challenges related to side effects (87.2%) and method-related problems highlighted the need for targeted interventions. Enhancing awareness and education programs, strengthening counseling services, and promoting male involvement. Collaboration with NGOs and healthcare providers is suggested to improve family planning services in urban settings, contributing to healthier demographics in Rajshahi City Corporation. These significant statistics underscore the importance of tailored strategies to enhance family planning practices in urban areas.

KEYWORDS: family planning, eligible couples, urban, prevalence, demographics, methods, sources, decision-making, Rajshahi.

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1. INTRODUCTION

Family planning is a pivotal component of public health policy and an essential determinant of reproductive and maternal health. It plays a significant role in shaping the demographics of a region, particularly in urban settings. A study by Khan et al. (2020) noted that family planning services in urban areas, including Rajshahi, have witnessed increased availability and utilization over the years. However, the extent to which eligible couples are effectively practicing family planning in this urban setting remains an area of ongoing research [1].

Statistics from the National Institute of Population Research and Training (NIPORT) (2021) indicate that family planning methods have been increasingly used in urban areas of Bangladesh. In fact, the prevalence of contraceptive use in urban areas was reported to be 64.6% in 2017-18, showing a significant uptrend. This signifies a considerable proportion of the urban population in Bangladesh using family planning

methods, indicating both access and acceptance of such practices in these settings. Nevertheless, the urban landscape is characterized by a diverse socio-economic fabric, and understanding the variations and determinants of family planning practices among eligible couples in a specific urban area like Rajshahi City Corporation is necessary to tailor interventions effectively [2].

This research aims to provide insight into the prevalence and determinants of family planning practices in Rajshahi City Corporation, with a focus on the dynamics that influence eligible couples in their choices regarding family planning methods and the factors contributing to their adoption or non-adoption of these methods. This understanding will not only inform policy and program implementation but will also contribute to the broader discourse on reproductive health in urban areas of Bangladesh.

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Objectives of the study:

General Objective:

To investigate and analyze family planning practices among eligible couples in the Rajshahi City Corporation area, Bangladesh.

Specific Objectives:

1. Determine the prevalence of family planning methods.
2. Examine demographic characteristics and their association with family planning.
3. Assess marital and child-related factors.
4. Analyze types and sources of family planning methods.
5. Explore duration and decision-making processes.
6. Investigate problems associated with family planning methods.
7. Examine the relationship between respondents' sex and family planning practices.
8. Provide recommendations for improving family planning practices.

2. METHODOLOGY

A. Study Design:

- Type of Study: Descriptive cross-sectional study.
- Place of Study: Rajshahi City Corporation area, Bangladesh.
- Duration: The study was conducted from January 2011 to August 2011.

B. Study Population:

- The study population comprised eligible couples residing in the Rajshahi City Corporation area.

C. Sample Size and Selection:

- Sample Size: A purposive sample of 300 participants was selected for the study.

3. RESULT

Table 1. Distribution of the participants by demographic variables (n=300).

Traits	Characteristics	Frequency	Percentage
Age	Up to 19 years	11	3.7
	20 – 29 years	128	42.6
	30 – 99 years	151	50.3
	40 + years	10	3.4
	$X+SD=29.32+6.112$ years		
Sex	Male	4	98.67
	Female	296	1.33
Religion	Muslim	266	88.7
	Hindu	33	11.0
	Christian	1	0.3
Occupation	Service	100	33.33
	Day labor	21	7.0
	Housewife	178	59.3
	Farmer	1	0.3
Education	Illiterate	3	1.0
	Up to class V	89	29.7
	Class VI – XII	152	50.7
	Graduate +	56	18.7
Monthly family income in Taka	Up to 6000	226	75.3
	6001-12000	26	8.7

• Inclusion Criteria:

- ✓ Married females aged 15-49 years living with their husbands.
- ✓ Eligible couples residing in Rajshahi City Corporation.
- ✓ Participants are willing to participate in the study.

D. Data Collection:

- Data collection methods included interviews and surveys conducted by trained researchers.
- Data collection tools such as questionnaires were developed to gather information from the study participants.

E. Data Variables:

- The study collected data on various demographic variables, marital and child-related factors, family planning methods, sources of family planning, decision-making processes, and problems associated with family planning methods.

F. Data Analysis:

- Data collected was entered into a database and analyzed using statistical software (SPSS) version 23.
- Descriptive statistics, including frequencies and percentages, were used to summarize the data.
- Inferential statistics, such as chi-squared tests, were used to explore relationships between variables.

G. Ethical Considerations:

- Ethical approval for the study was obtained from the relevant ethics committee or institutional review board.
- Informed consent was obtained from all study participants.
- Participant confidentiality and privacy were ensured throughout the study.

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	>12000	48	16.0
Type of family	Nuclear	79	26.33
	Joint/Extended	221	73.67
Practice of FP methods	Yes	264	88.0
	No	36	12.0

Table 1 presents a comprehensive overview of the demographic characteristics of the 300 study participants. The participants' ages vary, with the majority falling within the 20-29 and 30-99 age groups, and an average age of 29.32 years. Females constitute the overwhelming majority (98.67%), and most participants follow the Muslim faith (88.7%). Occupation-wise, a significant proportion are housewives (59.3%), while the education levels range from

illiterate to graduate and beyond. The monthly family income is predominantly within the up to 6000 Taka bracket (75.3%), and a significant number of participants belong to joint or extended families (73.67%). It's worth noting that a substantial portion of the participants practice family planning methods (88.0%). These demographic details provide valuable insights into the sample, facilitating further analysis and drawing conclusions in the context of the study.

Table 2. Distribution of the respondents by marriage and children.

Traits	Characteristics	Frequency	Percent	Statistics
Age at marriage of wife	<18 years	39	13.0	Total = 300, $\bar{X} \pm SD = 21.31 \pm 3.67$ yrs.'
	18-20	139	46.3	
	21-24	48	16.0	
	>24	74	24.7	
Total number of children	1	118	45.7	Total = 258, $\bar{X} \pm SD = 1.59 \pm 5.74$ yrs.
	2	129	50.0	
	3	11	4.3	
Number of male children	1	138	91.4	Total = 151, $\bar{X} \pm SD = 1.10 \pm 3.4$ yrs.
	2	11	7.3	
	3	2	1.3	
Number of female children	1	182	85.8	Total = 212, $\bar{X} \pm SD = 1.10 \pm 3.5$ yrs.
	2	30	14.2	
Age of last-child	Up to 1 year	62	24.0	Total = 212, $\bar{X} \pm SD = 4.23 \pm 3.67$ yrs.
	2-5 years	134	51.9	
	6-10 years	46	17.8	
	>10 years	16	6.2	

Table 2 presents a comprehensive breakdown of the respondents based on marriage and children-related traits. It includes data on the age at which wives were married, the number of children they had, the gender distribution among their children, and the age of their last child. Notably, a significant portion of wives were married between the ages of

18-20, and the majority had one child, primarily female, with an average of 1.59 children. The age of the last child ranged from less than 1 year to over 10 years, with an average of 4.23 years. These statistics offer a detailed view of the respondents' family and marital characteristics, aiding in the understanding of family dynamics in the study.

Table 3. Distribution of the respondents by FP (family planning) methods.

Traits	Characteristics	Frequency	Percent	Total
Reason for not using FP methods	Want baby	5	14.7	34
	Others	29	85.3	
Type of FP methods	Oral pill	193	73.4	263
	Injectable one	15	5.7	
	Copper-T	03	1.1	
	Norplant	03	1.1	
	Ligation	06	2.3	
	Condom	43	16.3	
Duration of FP method practice	<1year	17	6.5	263
	1-2 years	61	23.3	
	3-5 years	75	28.6	
	>5 years	110	41.6	
The decision for the FP method	Both husband & and wife	220	83.7	263
	Husband	42	15.9	
	Wife	01	0.4	

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Advised by FP method	Self	251	95.5	
	Friend	05	1.9	
	Relatives	07	2.7	
Problems due to the FP method	Yes	230	87.2	263
	No	33	12.8	
Types of problems	Pain in abdomen	48	20.8	230
	Breast tenderness	11	4.8	
	Headache	120	52.2	
	Vertigo/Nausea	23	10.0	
	White discharge	28	12.2	
Source of FP method	Doctor	74	28.0	263
	FWA	13	4.9	
	FWV	93	35.2	
	NGO Worker	33	12.5	
	UHC	01	0.4	
	Urban clinic	50	18.9	
The practice of the FP method at present	Male partner	53	20.0	263
	Female partner	290	80.0	

Table 3 provides a comprehensive breakdown of respondents' family planning (FP) practices, with included statistics. It reveals that a majority of respondents choose not to use FP methods for reasons other than desiring a child, with the oral pill being the most common method (73.4%). Many have practiced FP for more than five years (41.6%), and decisions are typically made jointly by both spouses (83.7%). Self-advice is the predominant source (95.5%), although a notable

percentage experienced problems with FP methods (87.2%). Doctors and Family Welfare Visitors (FWVs) were common sources of FP methods (28.0% and 35.2%, respectively), and female partners primarily oversee current FP practices (80.0%). These statistics offer valuable insights into FP decision-making, method choices, and potential challenges faced by the respondents.

Table 4. Relationship between sex of the respondents and practice of FP methods.

Sex of the respondents	The practice of FP methods at present		Total n (%)
	Yes	No	
	n (%)	n (%)	
Male	3 (75.0)	1 (25.0)	4 (1.3)
Female	261 (88.2)	35 (11.8)	296 (98.7)
Total	264 (88.0)	36 (12.0)	300 (100.0)

$$\chi^2 = 25.549, df = 4, p < 0.001$$

Table 4 illustrates the relationship between the sex of respondents and their current practice of family planning (FP) methods. The data shows that a higher percentage of female respondents (88.2%) are practicing FP methods compared to male respondents (75.0%). Conversely, a larger proportion of male respondents (25.0%) are not using FP methods compared to female respondents (11.8%). The statistical analysis, including a chi-squared (χ^2) test, reveals a significant association between sex and FP method practice ($p < 0.001$), indicating that gender plays a role in the utilization of FP methods among the study participants, with more females actively practicing FP methods.

3. DISCUSSION

The presented data on family planning practices among eligible couples in the Rajshahi City Corporation area provides valuable insights into demographic characteristics, marital and child-related factors, family planning methods, and associated challenges. To provide a more comprehensive

discussion, it's crucial to compare and contrast these findings with existing literature and research in similar contexts.

The high prevalence of family planning practices (88.0%) in this urban setting is promising and suggests the effectiveness of family planning programs. In contrast, national-level data from the Bangladesh Demographic and Health Survey (NIPORT et al., 2017) reported a lower prevalence (64.6%) in urban areas of the country. This difference may be attributed to more targeted and accessible family planning services in urban areas, including Rajshahi City Corporation, or variations in sample demographics. The study's findings align with Khan et al. (2020), which noted an increased availability and utilization of family planning services in urban areas, signifying a positive trend in family planning practices [1,3].

Demographic characteristics of the study participants reveal a predominantly female population (98.67%), in line with broader data on gender distribution in Bangladesh. This reflects women's active role in family planning decisions and practices in the country. However, the study's exclusive focus

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on eligible couples might contribute to this gender disparity, as women often play a more direct role in contraceptive methods.

The marital and child-related statistics offer insights into family dynamics. The age at marriage of wives in the study, primarily between 18-20 years, is consistent with national trends. The average number of children (1.59) and the relatively small age gap between children align with the trend of smaller family sizes in urban areas of Bangladesh. These findings suggest that urban families are adopting family planning methods effectively to control the number and timing of their children, in line with global efforts to promote smaller, healthier families.

Data on family planning methods and associated factors, including reasons for non-use, type of methods, duration of use, and source of methods, reveal patterns that can be compared with similar studies in urban Bangladesh. The prevalence of the oral pill as a family planning method is consistent with national data. Self-advice being the primary source of family planning methods may reflect the relative ease of access to over-the-counter contraceptive methods in urban areas. However, the report of problems associated with the use of family planning methods by a substantial percentage of respondents highlights the importance of addressing side effects and concerns to increase acceptability and continuation.

The substantial role of female partners in overseeing current family planning practices (80.0%) aligns with the trend of women's involvement in reproductive health decisions. This echoes findings from studies on gender dynamics in family planning (Asif, 2018) and underscores the significance of women's agency in managing family planning methods and their own reproductive health [4, 5].

The data from this study provides valuable insights into family planning practices in the Rajshahi City Corporation area, offering an opportunity to compare and contrast findings with existing literature. The higher prevalence of family planning practices in this urban area is promising, indicating the effectiveness of family planning programs. However, challenges related to side effects and the role of female partners in family planning decisions highlight areas where targeted interventions can be beneficial.

4. CONCLUSION

The findings from the study on family planning practices among eligible couples in the Rajshahi City Corporation area reveal a commendable prevalence of family planning methods, highlighting the accessibility and effectiveness of reproductive health services in this urban setting. The demographic characteristics align with broader gender dynamics in Bangladesh, emphasizing the central role of women in family planning decisions. Furthermore, the data underscores the importance of smaller family sizes and relatively small age gaps between children in urban areas, reflecting a global trend towards healthier family planning

practices. However, the study also reveals concerns related to side effects and method-related problems, suggesting the need for targeted interventions and improved counseling services to enhance method acceptability and continuation. Moreover, the active involvement of female partners in overseeing family planning practices underscores the significance of women's agency in reproductive health decision-making.

5. RECOMMENDATIONS

To further enhance family planning practices in the Rajshahi City Corporation area and similar urban settings, it is imperative to implement comprehensive awareness and education programs to inform eligible couples about family planning methods and address concerns. Strengthening counseling services is vital, providing couples with a platform to discuss their needs and preferences. Additionally, promoting male involvement in family planning decisions and research into method-related side effects are essential steps. Collaborating with NGOs and healthcare providers, monitoring program effectiveness, and encouraging data sharing among researchers can help develop evidence-based interventions and address the diverse needs of urban populations in Bangladesh. By focusing on these recommendations, policymakers and healthcare providers can further strengthen family planning services and contribute to healthier urban demographics.

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CONFLICT OF INTEREST

None to declare.

REFERENCES

- I. Khan MN, Khan MM, Khan MN. Family Planning Practices in Urban Slum Areas of Rajshahi City. *J Family Welfare*. 2020;66(1):3-10.
- II. National Institute of Population Research and Training (NIPORT), Mitra and Associates, ICF International. Bangladesh Urban Health Survey 2013 [Internet]. [cited 2021]. Available from: <https://dhsprogram.com/publications/publication-fr311-other-education.cfm>

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- III. National Institute of Population Research and Training (NIPORT), Mitra and Associates, ICF International. Bangladesh Demographic and Health Survey 2017-18. [cited 2021]. Available from: <https://dhsprogram.com/pubs/pdf/FR344/FR344.pdf>
- IV. Ahmed S, Li Q, Liu L, Tsui AO. Maternal deaths averted by contraceptive use: an analysis of 172 countries. *Lancet*. 2012;380(9837):111-125.
- V. Asif M. Gender dynamics in family planning: The case of Pakistan. *Health Hum Rights J*. 2018;20(1):221-231.