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## Knowledge, attitude and practice on Family Planning among schedule caste women in selected rural communities, Sonitpur district, Assam

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### Abstract

**Background:** The world population is increasing day by day and it becomes one of the acute problems. As per concerned of over population in the world, many countries have been adopting the family planning program to reduce population. Though crude birth rate in India now has declined, the country is yet to fulfill the target in control of population. The rural people contribute to population more than urban people. There is need to assess the rural women on family planning to evaluate knowledge, attitude and practice so as to undertake need based actions by the policy makers.

**Aim:** The aim of the study was to assess knowledge, attitude and practice on family planning among schedule caste (SC) women in selected rural communities, Sonitpur district, Assam.

**Objectives:** 1. To assess the Knowledge of Schedule Caste Women on Family Planning. 2. To assess the Attitude of Schedule Caste Women on Family Planning. 3. To assess the Practice of Schedule Caste Women on Family Planning. 4. To determine the association of knowledge with selected socio-demographic Variables. 5. To determine the association of attitude with selected socio-demographic Variables. 6. To determine the association of Practice with Selected Socio-demographic Variables.

**Methodology:** A descriptive study was undertaken in rural communities of Sonitpur district of Assam among 500 SC women, selected by non-probability convenient sampling technique. The tool used for data collection was structured interview schedule that comprises of 15 demographic data and 70 items on knowledge, attitude and practice. The technique adopted for data collection was interview. Data gathered was analyzed by using descriptive and inferential statistics.

**Results:** The present study showed that only 18.8 percent of respondents had adequate knowledge, majority (71.2 percent) had moderately adequate knowledge and 10 percent had inadequate knowledge. The study findings revealed that majority (74.6 percent) respondents had moderately favorable attitude, 12.6 percent had favorable attitude and 12.8 percent respondents had unfavorable attitude towards family planning.

The study findings showed that only 19.6 percent respondents had good practice on family planning, 60.4 percent respondents had fair practice and 20 percent respondents were found with poor practice level on family planning.

**Conclusion:** It is concluded from this study that, majority of the schedule caste women have moderate level of knowledge, attitude and practice on family planning. Also, there exists a significant association of knowledge, attitude and practice of schedule caste women on family planning with majority of the selected socio-demographic variables.

**Keywords:** Knowledge, Attitude, Practice, Schedule Caste, Women, Rural Community

### Introduction

The world population is increasing tremendously day by day. Excessive increase of population has become one of the acute problems. The world population is 7,162,119,434 (7 billion) by 2013. Population in the world is currently growing at a rate of around 1.14 percent per year. The average population change is currently estimated at around 80 million per year. As per most recent estimates by United Nations, the human population of the world is expected to reach 8 billion populations in the spring of 2024<sup>[1]</sup>.

Indian population is 1210 million as per 2011 census, and recent estimations of the Indian populations are 1,252,139,596 by the 1<sup>st</sup> July 2013. India is supporting about 17.48 percent of world populations. India is the second most populous country in the world, whereas seventh in land area, with only 2.4 percent of the world's land area. By 2030 India's population is expected to surpass China's to become the largest populated country in the world. India's annual growth rate is 1.64 percent.

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Having much concern over population in the world, many countries have been adopting the family planning program to reduce population.

India was the first nation in the world to start a Family Planning programme at the national level in 1952. Over the years, the crude birth rate of India has declined from 40.8 (1951) to 20.4 (1999 SRS),<sup>[4]</sup> and 22.1 (2010) where as in rural 23.7 and in urban 18.0 (Fertility indicators of India, 2010)<sup>[2,3]</sup>.

The population of Assam according to the 2011 census stands at about 31 million, making it the 14<sup>th</sup> most populated state in India. The state is spread over an area of about 78000 sq. km. making it the 16<sup>th</sup> largest state in the country in terms of area. The state has a growth of about 17 percent which is again very close to the national rate of about 17 percent. The population of the state is rising considerably due to rapid efforts towards development and progress. The total population of Assam as per 2011 census is 31,205,576 of which male population is 15,939,443 and female population is 15,266,133. Total population growth in this decade was 17.07 percent. The population of Assam forms 2.56 percent of India in 2011. In Assam the prevalence of knowledge about family planning is quite low as compared to other states. Low level of literacy rate among the women of Assam i.e. 55 percent has a major influence on the use of contraceptives<sup>[4,5]</sup>.

Total area of Sonitpur district of Assam is 5,204sq Km. Sonitpur district has population of 1,924,110, male and female are 983,904 and 940,206 respectively. The population growth rate of Sonitpur district was 15.55 percent during the decade and proportion to Assam population is 6.17 percent. As per 2011 census, 90.96 percent population of Sonitpur district lives in rural areas of villages. The total rural population of Sonitpur district is 1,750,265 of which males and females are 894,985 and 855,280 respectively.

Modern contraceptive methods are designed for use by women, and most programs assume that women are primarily responsible for family planning. Women have been the primary subjects of contraceptive and Family Planning research. The need for population policies and Family Planning Programs to become more clients centered that can address women's rights<sup>[6]</sup>.

Knowledge of contraception is almost universal in India. Indians are less likely to know about temporary contraceptive methods. The Governmental Family Planning program promotes three temporary methods; the pill, the IUD and condoms of these three methods. Women are most likely to know about the pill (85 percent). The contraceptive prevalence rate among currently married women is 56 percent.

### Need for the study

The problem of family planning is essentially a problem of attitude change. The rate of contraceptive use by couples is low. The most important is to stimulate social changes affecting fertility such as raising the age of marriage, increasing the status of women, education and employment opportunities, old age security, compulsory education for children, etc. The solution to the problem is one of the mass educations and communication so that people may understand the benefits of a small family.

Many rural women are reportedly reluctant to accept any artificial method of contraception, (Gour, Goel M.K, Goel

M, 2008). Several studies also revealed that rural women who were unwilling to accept family planning methods were concerned about child survival and viewed children as a source of support in old age. (Kartikeyan & Chaturvedi, 1995)<sup>[7]</sup>.

In India, rate of contraceptive use of currently married women are 56 percent. Acceptance of Family Planning methods depend on the various interrelated factors such as age at marriage, family income, religion, education, number of living births.

Some women have negative attitude towards contraceptives. A woman who uses contraception may become promiscuous some women also were opposed to contraception for fears of side effects or husband's disapproval (MoHSS & Macro International Inc 2008). Women's empowerment in fertility preference is directly related to use of female methods of contraception.

As in other parts of India, there are depressed classes in Assam which are socially and economically backward known as depressed class, who are renamed as scheduled caste<sup>[8]</sup>. In Assam the prevalence of knowledge about Family Planning is quite low as compared to other states. Low level of literacy rate among the women of Assam i.e. 55 percent has a major influence on the use of contraceptive. A study showed that family planning practice was low among the scheduled caste in comparison to the other caste group. Another study carried out in the rural areas in Bangalore showed the extent of family planning practice between the scheduled castes and other castes. The practice was less among the scheduled castes. To have a greater prevalence of contraception, as well as the demand for receiving such services, it is imperative that couples among the scheduled caste women have no thorough knowledge about various contraceptive methods offered in the programme. Study suggested that knowledge about family planning is almost negative in India and is very critical among the scheduled caste women.

Taking all these into account, the investigator had undertaken this study to assess knowledge, attitude and practice on family planning among schedule caste women in selected rural communities, Sonitpur district, Assam.

### Problem statement

"A Study to Assess the Knowledge, Attitude and Practice on Family Planning among Schedule Caste women in selected rural communities, Sonitpur District, Assam".

### Objectives

- i) To assess the Knowledge of Schedule Caste women on family planning.
- ii) To assess the Attitude of Schedule Caste women on family planning.
- iii) To assess the Practice of Schedule Caste women on family planning.
- iv) To determine the association of Knowledge with selected socio-demographic variables.
- v) To determine the association of Attitude with selected socio-demographic variables.
- vi) To determine the association of Practice with selected socio-demographic variables.

### Operational Definitions

**Knowledge:** Refers to Women's correct response to questions on Family Planning.

**Attitude:** Refers to Women's perception related to Family Planning.

**Practice:** Refers to particular Family Planning Method used by Women.

**Women:** Refers to married women and Women in the fertile age group of 18-45 years.

**Schedule Caste:** Refers to lower Socio-economic specified group and staying in particular selected villages.

**Rural Community:** Refers to the rural areas living by Scheduled Caste people.

**Family Planning:** Refers to easily accessible and affordable Family Planning Methods for Scheduled Caste Women.

### Delimitations

The study is delimited to

1. Rural SC Women in 15 selected villages under two sub-divisions of Sonitpur district in Assam.
2. Family planning methods i.e. oral contraceptive pills, Cu-T, safe period, Tubectomy and male condom has been taken to assess KAP other methods i.e., injectable contraceptives sub dermal implants (Norplant), vaginal rings and male sterilization are not included in the study.
3. Verbal responses obtained through structured interview schedule about selected factors.
4. Subjects from literate group.

### Hypotheses

**H<sub>1</sub>:** There is significant association between Knowledge and Selected socio-demographic variables.

**H<sub>2</sub>:** There is significant association between Attitude and Selected socio-demographic variables.

**H<sub>3</sub>:** There is significant association between Practice and Selected socio-demographic variables.

### Methodology

#### Research approach

The research approach adopted for the study was a quantitative approach.

#### Research design

The research design selected for the study was a cross sectional descriptive design.

#### Setting of the study

This Study was conducted into two Sub-divisions i.e., Gohpur and Biswanath which is located in Sonitpur district of Assam. The study was conducted in some selected villages inhabited by the people of a Scheduled Caste Community known as Schedule Caste (SC) Villages. Out of these villages 9 SC villages and 6 SC villages respectively from Gohpur and Biswanath Sub-divisions were randomly selected for the study.

#### Population of the Study

The studied population was all women of 18 years to 45 years, all subjects from the 15 Villages of two sub-divisions of Sonitpur district, Assam.

**Sample:** Sample consisted of Scheduled Caste women of 18 years to 45 years from the 15 Villages of two sub-divisions of Sonitpur district, Assam.

**Sample size:** Considering the time available for data collection and nature of the study, 500 SC women were included as study samples.

### Sampling technique

500 SC women of 18-45 years of age were selected by using non-probability convenient sampling technique.

### Criteria for sample selection

#### Inclusion criteria

- Women who are married.
- Women who are in age group of 18-45 years.
- Women who are only from Scheduled Caste community to participate in the study.
- Participants are inhabiting in selected villages for the study.
- Who can read and write.
- Who are willing to participate in the study.

#### Exclusion criteria

- Who are widow and beyond the age group prescribed.
- Women who are not in selected villages
- Who do not belong to Schedule Caste Community
- Participants who do not understand Assamese language.

### Description of the tool

**Section I:** Socio demographic data of the SC women.

**Section II:** It consists of 28 knowledge items regarding family planning methods.

**Section III:** It consists of 25 items framed into Likert type attitude scale with three options which reflects attitude of rural women regarding FP methods.

**Section IV:** This section of instrument consists of 17 items on family planning methods practices.

### Variables of the study

**Research variables:** These include knowledge, attitude and practice of SC women on family planning methods.

**Socio-demographic variables:** These include age, age at marriage, age of husband, duration of marriage, religion, education, number of children, type of family, size of family, occupation, occupation of husband, monthly income, age of last child and acceptance of family planning.

### Data analysis and interpretation

**Section I:** Socio-demographic characteristics of the sample

- It was observed that majority of SC women 178 (35.60 percent) were from age group of 25-31 years followed by 167 (33.40 percent) were of 32-38 years, 98 (19.60 percent) were of 18-24 years and 57 (11.40 percent) belonged to the age group of 39-45 years.
- As per age of husband of respondents, maximum 168 (33.60 percent) were from age group of 36-40 years, 131(26.20 percent) belonged to 31-35 years, 65 (13 percent) belonged to 41-45 years, 62 (12.40 percent) belonged to 26-30 years, 47 (9.40 percent) were 46 years & above and 27 (5.40 percent) were found age group of 20-25 years.
- Majority respondents 142 (28.40 percent) had education level ME passed followed by primary passed 114 (22.80 percent) respondents. Because of socially backward class the educated women were very less, so 7 (1.40 percent) women were found graduate level and only 2 (0.40 percent) women were found from post Graduate educational level among respondents in the study.
- Regarding number of children of women, the majority of respondents 356 (71.20 percent) had 1-3 number of

children followed by 100 (20 percent) had 4-6 number of children.

- Data on type of family, 272 (54.40 percent) respondents belonged to nuclear family, 210 respondents (42 percent) belonged to joint family and only 18 (3.60 percent) were found from extended family.
- Majority of the respondents 237 (47.40 percent) were found with 5-7 members in the family, 157 (31.40 percent) were with 2-4 members, 94 (18.80 percent) were with 8-10 members and 12 (2.40 percent) were with 11 and above members in respondent's family.
- As concerned occupation of women, maximum respondents 376 (75.20 percent) were found as housewives and 16 (3.20 percent) respondents were found with service, 61 (12.20 percent) from Self Help Group, 30 (6 percent) respondents were from self-employed group.
- Regarding occupation of husband, 154 (30.80 percent) were found with business, 106 (21.20 percent) were as laborer, 104 (20.80 percent) were found with their caste occupation, 47 (9.40 percent) were from cultivator, 32 (6.40 percent) of self employed and 54 (10.80 percent) were found with service.
- With regards to income of family, 129 (25.80 percent) respondents belonged to Rs.3,001-5,000 income group, 126 (25.20 percent) respondents from Rs.5,001-7,000 income group, 73 (14.60 percent) belonged to Rs. 11001 and above income and below Rs.3000 income group found from 70 (14 percent) respondents.
- As family planning is concerned in this study group to know about age of last child was necessary. 142 (28.40 percent) respondents had their last child up to 2 years of age, 136 (27.20 percent) respondents had their last child age of 2-4 years. 109 (21.80 percent) had found 7 years and above, 72 (14.40 percent) had their last child age of 2-4 years and 41 (8.20 percent) respondents were found with no child.
- As study subject matter of Family Planning, it is necessary to know about acceptance of family planning among the study group. Out of 500 respondents, majority 370 (74 percent) respondents accepted family planning and 130 (26 percent) respondents had not accepted family planning.

## **Section II:** Knowledge of Schedule Caste Women on Family Planning

The findings of the present study showed that only 18.8 percent of respondents had adequate knowledge, majority (71.2 percent) had moderately adequate knowledge and 10 percent had inadequate knowledge. The results clearly show that SC women had lack in knowledge regarding family planning.

## **Section III:** Attitude of Schedule Caste Women on Family Planning

The study findings revealed that majority (74.6 percent) respondents had moderately favorable attitude, 12.6 percent had favorable attitude and 12.8 percent respondents had unfavorable attitude towards family planning.

## **Section IV:** Practice of Schedule Caste Women on Family Planning

The study findings showed that only 19.6 percent respondents had good practice on family planning, 60.4

percent respondents had fair practice and 20 percent respondents were found with poor practice level on family planning.

## **Section V:** Determination of the Association of Knowledge, attitude and practice with selected Socio-demographic Variables

### *Association between Knowledge and selected socio-demographic variables*

The computed Chi-square ( $\chi^2$ ) values are for age  $\chi^2=12.29$  ( $p>0.05$ ), age at marriage  $\chi^2$  value 13.06 ( $p>0.05$ ), duration of marriage  $\chi^2$  value 12.77 ( $p>0.05$ ), and type of family  $\chi^2$  value 3.18 ( $p>0.05$ ) respectively, which are not significant at 0.05 level of significance.

However, the calculated Chi-square values found for following variables as age of husband  $\chi^2=26.38$  ( $p<0.003$ ), education  $\chi^2=151.88$  ( $p<0.001$ ), number of children  $\chi^2=59.11$  ( $p<0.001$ ), size of the family  $\chi^2=12.29$  ( $p<0.004$ ), occupation of women  $\chi^2=42.27$  ( $p<0.001$ ), occupation of husband  $\chi^2=89.82$  ( $p<0.001$ ), income of the family  $\chi^2=78.67$  ( $p<0.001$ ), age of last child  $\chi^2=20.09$  ( $p<0.01$ ) and acceptance of family planning  $\chi^2=114.31$  ( $p<0.001$ ) were found to be significant at the level of 0.05. Therefore it can be inferred that there is significant association between above variables and knowledge. Hence, research hypothesis  $H_1$  for these variables is accepted.

### *Association between Attitude and selected socio-demographic variables*

Chi-square values of age, age at marriage, type of family and age of last child are 6.07, 15.01, 5.91, 9.92 ( $p>0.05$ ) respectively which are not significant at 0.05 level of significance.

However, the calculated Chi-square ( $\chi^2$ ) values for age of husband, duration of marriage, education, number of children, size of the family, occupation of women, occupation of husband, income of the family per month and acceptance of family planning are 24.20, 15.90, 208.28, 58.38, 14.38, 46.55, 65.20, 60.74 and 80.41 ( $p<0.05$ ) respectively which were significant at 0.05 level of significance. Hence, the research hypothesis  $H_2$  for these variables is accepted.

### *Association between practice and selected socio-demographic variables*

Computed  $\chi^2$  value of demographic variables like age of husband, type of family and size of family are 3.69 and 8.14 respectively and are not significant at 0.05 level of significance.

However, The calculated Chi-square ( $\chi^2$ ) value obtained for age  $\chi^2=15.99$  ( $p<0.014$ ), age at marriage  $\chi^2=27.47$  ( $p<0.001$ ), duration of marriage  $\chi^2=22.74$  ( $p<0.004$ ), education  $\chi^2=37.90$  ( $p<0.001$ ), number of children  $\chi^2=67.26$  ( $p<0.001$ ), occupation of women  $\chi^2=18.91$  ( $p<0.041$ ), occupation of husband  $\chi^2=35.81$  ( $p<0.001$ ), income of the family per month  $\chi^2=53.92$  ( $p<0.001$ ), age of last child  $\chi^2=39.26$  ( $p<0.001$ ) and acceptance of family planning  $\chi^2=144.80$  ( $p<0.001$ ) are significant at 0.05 level of significance. Hence, research hypothesis  $H_3$  for these variables is accepted.

## Conclusion

It is concluded from this study that, majority of the schedule caste women have moderate level of knowledge, attitude and practice on family planning. Also, there exists a significant association of knowledge, attitude and practice of schedule caste women on family planning with majority of the selected socio-demographic variables.

## Recommendations

1. A similar study may be replicated with a large sample.
2. A study to determine acceptance of family planning method by husband and wife separately and reasons for not acceptance of family planning method among SC community.
3. Comparative study between literate and illiterate group regarding Family Planning.
4. Comparative study between rural and urban communities regarding Family Planning.
5. Comparative study between schedule caste and other castes on family planning.
6. To find out actual reproductive health services accessibility by people in rural communities.

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