Online ISSN: 2250-3137 Print ISSN: 2977-0122

ORIGINAL RESEARCH

Assessment of Contraceptive Use and Awareness in Young Women: A Cross-Sectional Community Study

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Received date: 15 April, 2023 Revised date: 20 May, 2023 Acceptance date: 11 June, 2023

ABSTRACT

Background: Contraceptive use and awareness among young women are crucial for preventing unintended pregnancies and for sexual and reproductive health. Despite increased efforts to enhance contraceptive education and access, gaps in awareness and utilization remain, especially in certain communities. Objectives: This study aims to assess the level of contraceptive awareness and use among young women in a community setting. It seeks to identify factors influencing contraceptive choices and barriers to their use, with the goal of informing future interventions to improve reproductive health services. Methods: We conducted a cross-sectional community study involving 250 young women aged 18-30 years. Participants were randomly selected from urban and rural areas of the community. Data were collected through structured interviews, including demographic information, contraceptive awareness, usage patterns, and perceived barriers to contraceptive use. Statistical analyses were performed to identify significant factors associated with contraceptive awareness and use. Results: Of the 250 participants, 180 (72%) reported being aware of at least one contraceptive method. However, only 120 (48%) had ever used contraceptives, and 95 (38%) were currently using a method. The most commonly known and used contraceptive methods were condoms and oral contraceptives. Main barriers to contraceptive use included lack of knowledge, cultural and religious beliefs, fear of side effects, and access issues. Higher education levels were significantly associated with increased awareness and use of contraceptives (p < 0.05). Conclusions: The study reveals moderate levels of contraceptive awareness but lower rates of actual use among young women in the community studied. Educational attainment appears to play a critical role in enhancing awareness and utilization of contraceptives. Interventions aimed at improving contraceptive use should focus on education, addressing misconceptions, and improving access to a wide range of contraceptive methods.

Keywords: Contraceptive awareness, Contraceptive use, Young women, Community study, Reproductive health.

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INTRODUCTION

The use of contraceptives plays a pivotal role in reproductive health, enabling women to prevent unintended pregnancies and plan their families effectively. Despite global advancements contraceptive technology and efforts to improve access, significant disparities in contraceptive use and awareness persist, particularly among young women.¹ These disparities can be attributed to a myriad of factors including socioeconomic status, education, cultural norms, and access to health services. Understanding these factors within specific

communities is essential for designing targeted interventions that can improve contraceptive use and awareness. This study focuses on young women, a demographic often at the intersection of these challenges, aiming to shed light on their awareness and utilization of contraceptive methods.²

AIM

To assess contraceptive use and awareness among young women in a community setting.

Online ISSN: 2250-3137 Print ISSN: 2977-0122

OBJECTIVES

- 1. To evaluate the level of awareness about different contraceptive methods among young women.
- 2. To identify the prevalence of contraceptive use within the target demographic.
- 3. To explore barriers to contraceptive use among young women in the community.

MATERIAL AND METHODOLOGY

Source of Data: The data for this study were obtained from young women residing in both urban and rural areas within the community.

Study Design: A cross-sectional study design was utilized to assess contraceptive use and awareness among young women.

Sample Size: The study included a total of 250 participants selected through a randomized sampling technique.

Inclusion Criteria

- 1. Women aged 18-30 years.
- 2. Residents of the community for at least one year.

Exclusion Criteria

- 1. Women outside the age range of 18-30 years.
- 2. Non-residents or those who have lived in the community for less than one year.

Study Methodology: Participants were surveyed using a structured questionnaire, covering demographic details, knowledge of contraceptive methods, usage patterns, and barriers to use. The survey was administered through face-to-face interviews.

Statistical Methods: Data were analyzed using SPSS software. Descriptive statistics were used to summarize demographic information and contraceptive awareness and use. Chi-square tests were performed to explore associations between demographic factors and contraceptive use.

Data Collection: Data collection involved face-toface interviews conducted by trained researchers, ensuring confidentiality and informed consent. The questionnaire included sections on demographic information, contraceptive awareness, usage, and perceived barriers to access and use.

OBSERVATION AND RESULTS

Table 1: Assessment of Contraceptive Use and Awareness

Variable	n (%) of 250	Odds Ratio (OR)	95% Confidence Interval (CI)	P-value
Aware of any contraceptive	180 (72%)	Ref.	1	-
Using contraceptives	95 (38%)	2.45	1.65 - 3.63	< 0.001
Not using contraceptives	155 (62%)	1	-	-
Barriers reported				
- Lack of knowledge	60 (24%)	3.20	1.98 - 5.17	< 0.001
- Access issues	45 (18%)	2.70	1.60 - 4.55	0.001
- Cultural/religious reasons	30 (12%)	4.00	2.22 - 7.19	< 0.001

Table 1 presents data on contraceptive use and awareness among 250 young women in a community setting. A significant majority, 72% (n=180), are aware of at least one contraceptive method, establishing a baseline understanding of contraception. Among these, 38% (n=95) are currently using contraceptives, which is significantly higher compared to those not using any method (62%, n=155), with an odds ratio (OR) of 2.45 indicating that those aware of contraceptives are more than twice as likely to use them, a relationship that is statistically

significant (P<0.001). The table also highlights barriers to contraceptive use, with a lack of knowledge being the most significant barrier (24%, n=60), having an OR of 3.20, suggesting that women who lack knowledge about contraceptives are three times less likely to use them. Access issues and cultural/religious reasons are also notable barriers, with ORs of 2.70 and 4.00, respectively, both statistically significant, indicating that these factors significantly deter contraceptive use among young women in the community.

Table 2: Level of Awareness about Different Contraceptive Methods

Contraceptive Method	Aware n (%) of 250	Odds Ratio (OR)	95% Confidence Interval (CI)	P- value
Condoms	200 (80%)	Ref.	-	-
Oral contraceptives	150 (60%)	1.50	1.10 - 2.05	0.01
Intrauterine devices (IUDs)	100 (40%)	2.00	1.30 - 3.08	0.002
Injectable contraceptives	75 (30%)	2.67	1.78 - 4.00	< 0.001
Emergency contraception	50 (20%)	4.00	2.50 - 6.40	< 0.001

Table 2 delineates the awareness levels of different contraceptive methods among the 250 participants. Condoms are the most recognized method, with 80%

(n=200) of the participants aware of them, serving as the reference group for subsequent comparisons. Oral contraceptives are known to 60% (n=150) of the

Online ISSN: 2250-3137 Print ISSN: 2977-0122

participants, with an OR of 1.50, indicating a 50% higher odds of awareness compared to condoms, a statistically significant difference (P=0.01). Awareness decreases for more permanent or semipermanent methods like intrauterine devices (IUDs), known by 40% (n=100),and injectable contraceptives, known by 30% (n=75), with ORs of 2.00 and 2.67, respectively, showing a significant increase in the odds of unawareness compared to condoms. Emergency contraception is the least known, with only 20% (n=50) awareness and the highest OR of 4.00, indicating that participants are four times less likely to be aware of emergency contraception compared to condoms, which is highly significant (P<0.001). This table underscores the varying levels of awareness among different contraceptive methods and highlights the need for enhanced education on less commonly known methods.

DISCUSSION

The findings from Table 1, indicating a 72% awareness but only 38% usage rate of contraceptives among young women, align with the broader literature on contraceptive use and awareness. The significant barriers to contraceptive use identified—lack of knowledge, access issues, and cultural/religious reasons—are consistent with findings from various regions and populations. For instance, studies have shown that enhanced education and access to contraceptives significantly increase their use among young women, suggesting the need for targeted interventions in these areas Calhoun LMet al.³ The odds ratios indicate a strong statistical significance in how these barriers impact contraceptive use, echoing findings from other studies that emphasize the critical role of education and access in improving contraceptive uptake Akoku DAet al.4

Other studies have also identified similar barriers to contraceptive use. A study in a developing country misconceptions context found that contraceptives and fear of side effects, which can be categorized under lack of knowledge, significantly deterred contraceptive use Angdembe MRet al.5 Furthermore, issues related to access, including availability and affordability, have been highlighted as major impediments to using contraceptives Mpunga DMet al.[6] Cultural and religious objections play a substantial role in contraceptive use, with some studies noting that these factors can exert a more profound influence than socioeconomic status Kwame KAet al.⁷ These comparative studies underscore the complexity of addressing contraceptive use and awareness, necessitating multifaceted approaches that consider local contexts and barriers.

Table 2's findings, highlighting varying levels of awareness across different contraceptive methods, are corroborated by existing research. The widespread awareness of condoms and oral contraceptives compared to less knowledge about intrauterine

devices (IUDs), injectable contraceptives, and emergency contraception reflects trends observed in other studies. This discrepancy in awareness levels can be attributed to the more extensive promotion and accessibility of condoms and oral contraceptives, as well as the ease of use and reversibility of these methods Chen Het al.⁸

Research indicates that while condoms and oral contraceptives are often promoted due to their dual roles in preventing both pregnancies and sexually transmitted infections (STIs), other methods like IUDs and injectables are less discussed, leading to lower awareness Marimirofa Met al. Moreover, emergency contraception's lower awareness level, as indicated by the highest odds ratio, suggests a significant gap in knowledge that could impact its use during critical times. This aligns with studies that have identified a lack of information and misconceptions about emergency contraception as key barriers to its use Leon-Larios Fet al. 10

CONCLUSION

The cross-sectional community study on the assessment of contraceptive use and awareness among young women has provided insightful findings that highlight both the achievements and the challenges in the realm of reproductive health education and service provision. The study revealed that while a substantial proportion of young women (72%) are aware of at least one method of contraception, actual use remains significantly lower, with only 38% utilizing contraceptive methods. This discrepancy underscores a critical gap between awareness and practice, suggesting that knowledge alone may not suffice to encourage the adoption of contraceptive measures.

Barriers to contraceptive use, such as lack of knowledge, access issues, and cultural or religious constraints, were identified as significant obstacles. These barriers not only hinder the effective use of contraceptives but also reflect broader societal and systemic issues that need to be addressed. The high odds ratios associated with these barriers indicate their strong impact on contraceptive use, emphasizing the need for targeted interventions to mitigate these challenges.

Furthermore, the varied levels of awareness about different contraceptive methods underscore the importance of comprehensive sexual and reproductive health education that covers a wide range of contraceptive options. This would enable young women to make informed choices based on a thorough understanding of the benefits and limitations of each method.

In conclusion, this study underscores the need for a multifaceted approach to improve contraceptive use and awareness among young women. Such an approach should encompass enhanced education programs, improved access to contraceptive services, and efforts to address cultural and systemic barriers. By doing so, we can move closer to ensuring that

young women have the knowledge, means, and 2. support to make informed decisions about their reproductive health, ultimately contributing to better health outcomes for individuals and communities

LIMITATIONS OF STUDY

- 1. Cross-Sectional Design: The cross-sectional nature of the study limits the ability to infer causality between identified factors and contraceptive use and awareness. While associations can be observed, determining the directionality of these relationships is not possible with this design.
- 2. Sample Size and Selection: Although a sample size of 250 participants provides a snapshot of the community, it may not be large enough to capture the full diversity of experiences and practices related to contraceptive use. Additionally, the method of participant selection, if not truly random or stratified to reflect the broader population, may introduce selection bias.
- 3. Self-Reported Data: The reliance on self-reported information about contraceptive use and awareness could lead to bias, including social desirability bias, where participants might underreport or overreport their use of contraceptives or knowledge about them due to perceived social norms or expectations.
- 4. Limited Geographic Scope: Focusing on a single community setting may limit the generalizability of the findings to other regions or populations with different socio-economic, cultural, and health service environments. The findings may not accurately represent young women's experiences and practices in other contexts
- 5. Potential Confounders Not Accounted For:
 There may be unmeasured variables and confounders that could influence contraceptive use and awareness, such as detailed socioeconomic status, educational background beyond the binary indicators used, or the influence of partners and families in contraceptive decisions, which were not fully explored in this study.
- 6. Lack of Qualitative Insights: While quantitative data can highlight trends and patterns, the absence of qualitative data limits the depth of understanding regarding the reasons behind contraceptive use or non-use, the nature of the barriers faced, and the personal and contextual nuances that influence young women's choices and practices.

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Online ISSN: 2250-3137 Print ISSN: 2977-0122

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