

Family planning service providers' perceptions on barriers to use of different contraceptive methods amongst youth: A qualitative study in slums of Karachi, Pakistan

Background: Population of Pakistan is growing rapidly and around three million persons are added into existing population every year. Forty-one percent of its population is below 15 years of age and 69 percent of its population is below 29 years of age. Women of reproductive age constitute almost one quarter of the total population and maximum fertility is between 20 to 24 years of age. Brisk increase in population has resulted in a quadrupling of the population over the past five decades resulting in compromising the economic gains made during the period. This uncontrolled increase is adding to the widespread poverty and overburdening the available resources. Studies show that one of the main reasons for fast increase in population is that the use of contraceptive methods amongst youth of the country is very low. There are numerous reasons for not using contraceptives, specifically amongst youth.

Therefore there is a need to explore FP service providers' perceptions about determinants of use of contraceptive methods amongst youth, because responses explicated from them are unbiased & based on their observations & experiences. A research into exploring the perceptions of family planning service providers about contraceptive methods practice amongst youth could help to understand their role on nonuse and help researchers and policy makers to device interventions which might result in improvement in contraceptive use among youth. Therefore this study was conducted with following to explore family planning service providers' perceptions regarding use of different contraceptive methods and to identify determinants influencing their use amongst currently married youth aged 18-24 years in slums area of Karachi during July-September 2010.

Methods:

For study purposes, we included male contraceptive methods as: condoms and vasectomy and female contraceptive method as: Oral Contraceptive Pills, Contraceptive injections, Intra Uterine Contraceptive Device and tubal ligation.

Exploratory qualitative was the study design for this research. In depth interviews were conducted with family planning service providers.

The study participants included: Family Planning Service Providers from the 2 UCs. They included two physicians, four LHVs, two LHWs, and two medical store drug providers. Study was approved by Ethical Review Committee (ERC) of Aga Khan University (AKU). LHWs working in the area facilitated the identification of family planning service providers. Purposive sampling was the strategy used for conducting in-depth interviews with family planning service providers. Saturation of information was achieved after conducting in depth interviews with 10 FP service providers

After the data collection, recording of the Interviews were transcribed into Urdu by the note taker and then translated to English by the PI. Recordings and notes were also consulted by the PI for any verification. All the transcribed data was organized & prepared for identification of themes for analysis. The hard copies of the interviews and all audiotapes were kept in lock and key. The data collectors were trained by PI. The entire data collection process was pilot-tested so that any unforeseen flaws in the protocol could be addressed. Transcription was done twice to ensure quality. Transcription was done on the day of the interview to ensure that there is minimum time lapse so that the data on tapes is transcribed to the paper with the fresh memory. Verbal and written consent was sought from all study participants. Thematic analysis was done manually around determinants to use of contraceptive methods by youth in the study area.

Results:

Ten in-depth interviews were conducted with the Family Planning service providers of the area. Their experiences were varying from 4-25 years.

Table 1 shows family planning service providers of the area, who took part in the study.

Table 1: Family planning service providers interviewed in the study area

Serial No	Family planning service providers	Interviewees
1.	Medical Doctors	2
2.	Lady Health Workers	4
3.	Lady Health Visitors	2
4.	Medical Store Drug Providers	2

All of them agreed that the use of contraceptive methods were very low amongst youth of the area. They opined that contraceptive methods if used then condoms are the acceptable method amongst males and injections is the most widely used method amongst females.

“The most commonly used methods in her area among females is injectable contraceptions, despite the side effects”
an LHV working in an NGO with 10 years of experience.

Intra Uterine Contraceptive Devices is the method which is used rarely and is not used because of its side effects and myths and misconceptions associated with its use. Tubal ligation and vasectomy are not at all practiced by youth of the area.

Table 2: Contraceptive methods use amongst youth as perceived by the Family Planning Service Providers of the area.

Contraceptive methods	Contraceptive methods Use
Condoms	Used but not often ++++++++
Vasectomy	Not at all in youth ++++++++
Oral Contraceptive Pills	Used but among very few ++++++
Injectable contraceptives	Most commonly used methods ++++++
Intra Uterine Contraceptive Device	Used but rarely ++++++
Tubal Ligation	Not at all ++++++++

Box 1: Determinants of the use of contraceptive methods amongst youth (Perceptions of family planning service providers):

- *Side Effects of different contraceptive methods*
- *Myths and misconceptions about different contraceptive methods*
- *Lack of proper knowledge about different contraceptives*
- *Unmet needs of contraceptives*
- *Sociocultural factors about different contraceptive methods*
- *Religious factors about different contraceptive methods*

- ***Side Effects of different contraceptive methods***

Exaggerated side effects of different contraceptive methods were considered as one of the main reasons for discontinuation or nonuse of FP methods.

Most of the Family Planning service providers shared that IUCD has most of the side effects.

“Many women complain that IUCDs make their husbands uncomfortable during intercourse because of the thread that protrudes. Therefore, IUCDs are not well liked by the general population.”
LHV 15 years of experience

“Most women taking OCPs complain of dizziness & nausea. Even if she convinces them to take the pills they, automatically, get turned off because of the side effects.” LHW 4 years of experience

Likewise most of the family planning service providers were of the view that youth of the area think that vasectomy is causing physical weakness in males and tubal ligation is the causing weight gain in females as a side effect.

- ***Myths and misconceptions about different contraceptive methods***

Family Planning service providers of the area shared that myths and misconceptions about different contraceptive methods are also potential factors for not using contraceptive methods

“Usually they don’t have misconceptions about injections. If they have a big family, they frequently use injections”

Medical store drug provider

“In general, men do not realize or care for the problems that their wives are going through. They do not agree to undergo vasectomy as they are afraid it will make them impotent”

LHV with 5 years of experience

“She said that many of the women shun IUCDs because they believe that IUCDs can cause infections, destroy the uterus somehow & that it can travel up from the uterus into the abdomen.”

LHW with 20 years of experience

A drug dispenser reported that males of the area perceive that use of contraceptives by females causes ‘dryness’ of the ovaries resulting in their inability to conceive again”.

“After using family planning method, the ovary of females will become dry and then they will not be able to have children”

drug dispenser with 8 years of experience

Majority of family planning service providers also validated the same findings that youth of the area perceive that condoms cause inflammation, infections and ulceration in both males and females. Most of the FP service providers said that none of the males in the area want to opt for vasectomy as they believe that vasectomy causes physical weakness and impotency.

A medical store staff shared his perception that youth of the area generally believe that the chemicals and hormones used in the injections contraceptives are not only harmful for the women but also for their children especially female children. He said that youth perceive.

“Injections will get mixed in the mother’s milk and if the baby is girl, she cannot become pregnant when she grows up.”

- ***Lack of proper knowledge about different contraceptives:*** This also emerged as one of the probable factor for nonuse of FP methods amongst youth of the area as some of the FP service providers shared what youth of the area perceived

“Pills are difficult to remember & these women become very upset often missing a dose & do not understand what to do next.” LHV 10 yrs experience

Women tend to forget to take the proper dose of OCP's and they also believe that these pills can cause weight gain. Doctor 16 years' experience

- ***Unmet needs of contraceptives***
LHWs and an LHV shared about the non-availability of contraceptives like Intra Uterine Contraceptive Device, Oral Contraceptive Pills and injectable at BHU
- ***Sociocultural factors about different contraceptive methods***
All the FP service providers are of the view that education is one of the most important factors in improving CPR. Four of the FP service providers had shared that certain ethnicities as Bengali and Sindhi believe that big family size is associated with more respect in the society. Moreover role of mother in law and husbands is also pivotal in decision making for the use of contraceptives.
- ***Religious factors about different contraceptive methods***
Family planning providers also shared that some people of the area believes that if someone prevents pregnancy, Allah makes them ill in some other way for example blood pressure and diabetes and there is a common belief that FP is forbidden in our religion.

One of a FP service provider shared that

“Youth of the area thinks that their prayers will not be accepted if they use Family Planning methods”

Discussion:

This study has tried to explore the use of FP methods amongst youth and determinants affecting its use by conducting in-depth interviews with the family planning service providers. Different family planning service providers were selected for this purpose.

Strengths of the study: Study addresses the reproductive health issues of youth in a community setting and in depth interviews responses explicated from FP service providers were unbiased and based on their observations& experiences, which is one of the strength of this study. Moreover findings documented by study would assist in planning and undertaking policy initiatives to streamline recommendations for improving the use different contraceptive methods amongst youth in slums of Karachi. Regarding limitations of this study: As said above it was a not a large population study due to paucity of funds and time due to which it has certain shortcomings, important of which are: few interviews with the respondents were not conducted in depth due to increase patient load at their offices; extreme hot weather in the month of data collection and respondents unwillingness to give more time for interview.

In the light of findings of the study and suggestions by the study participants during IDIs some of the recommendations to address the low use of contraceptives are suggested is that there is a need to disseminate correct information on contraceptive methods use. It will help in removing related myths and misconceptions about FP methods through easy to understand booklets in local languages. The initiative should also include other opinion leaders in the society such as prayer leaders, school teachers, local political and social workers. It would help change the societal mindset regarding many aspects such as baseless myths. It will also help to rectify religious and cultural misperceptions. Some urgently needed policy initiatives to improve the use of contraceptives are: LHWs, LHVs, physicians and staff of the pharmacies are needed to be trained for proper counseling for correct use of family planning method and there is a need for long term planning for educating the women and men.

Based on the study results, following were the main conclusions drawn: Contraceptives use amongst youth is low in the study area; in addition lack of appropriate knowledge about contraceptives contributes for low CPR among the youth and side effects; some religious and sociocultural beliefs about different contraceptive methods were potential DETERMINANTS contributing to low use of contraceptives.