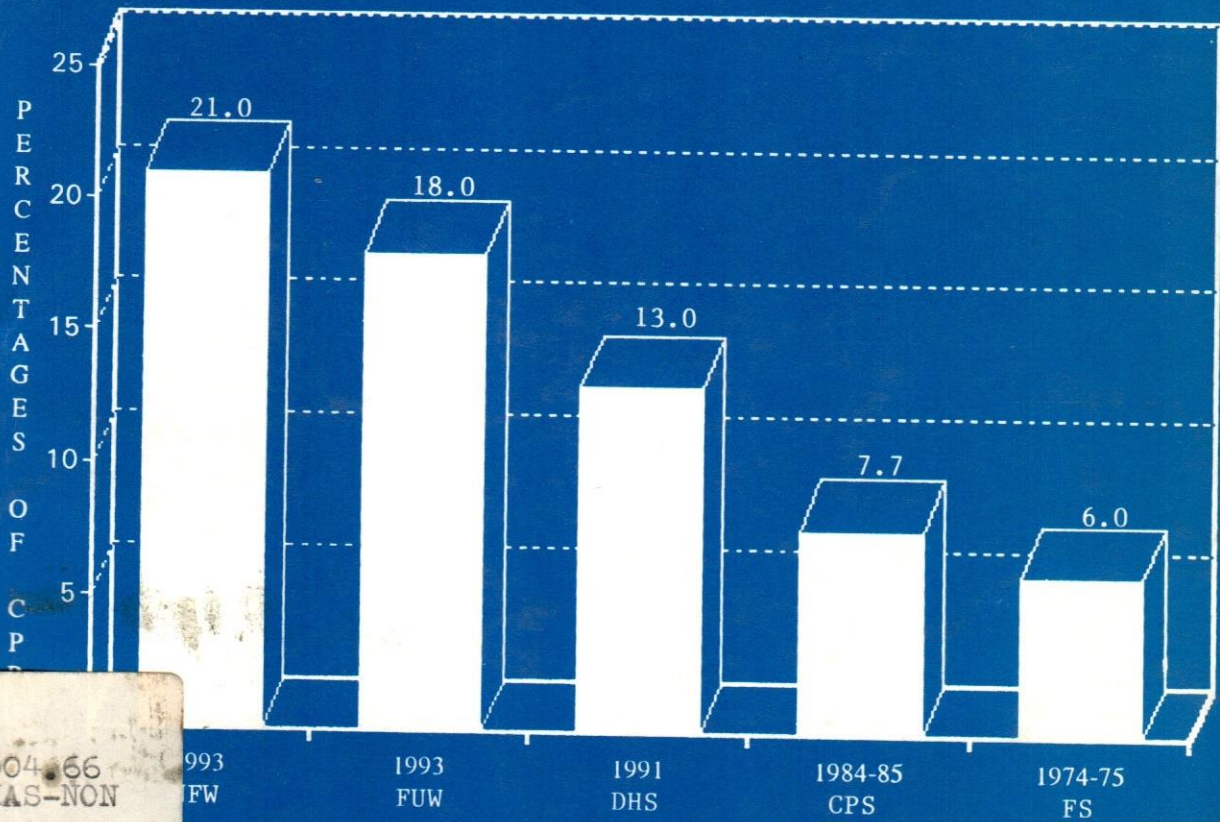


99

NON-USERS AND UNMET NEED FOR CONTRACEPTION PUNJAB, 1993

FIRST REPORT

TRENDS IN CURRENT USE OF CONTRACEPTIVE METHODS BY
MARRIED WOMEN, 15-49 YEARS OF AGE, PUNJAB



304-66
HAS-NON



national institute of
population studies

ISLAMABAD - 1993



NATIONAL INSTITUTE OF
POPULATION STUDIES
LIBRARY

CALL NO .304.66.....
HAS-NON
ACC. NO

INSTITUTE OF POPULATION STUDIES

3, St. 70, F-8/3, Islamabad
O. Box 2197 (Pakistan)

Studies (NIPS) established in 1986, is an autonomous
institute for undertaking evaluation of components of Family
planning and action oriented research, impact studies of
policies and dissemination of information on population
and development to the Government of Punjab and
Government of Sindh.

BOARDS OF GOVERNORS

Minister of Population Welfare

Chairman

Official Members

Secretary, Ministry of Population
Secretary, Planning Division
Secretary, Ministry of Finance
Secretary, Statistics Division
Secretary, Ministry of Health

Chairman Planning Punjab
Additional Chief Secretaries
Planning and Development
Department Govt. of Sindh,
Balochistan, NWFP

Executive Director, NIPS (Member/Secretary)

Non-Official Members

Farrukh Nigar Aziz
Abdul Hameed Khan
Begum Akhlaque Hussain

Begum Mahmooda Salim
Zafar Vaince
Mushtaq A. Khan

NON-USERS AND UNMET NEED FOR CONTRACEPTION

FIRST REPORT

By

SULTAN S. HASHMI
KHUSHNOOD ALAM
AYSHA SHERAZ

NATIONAL INSTITUTE OF POPULATION STUDIES
House No.8, Street No. 70, F-8/3
Islamabad
1993

Handwritten notes on the left margin:
Huy
C-6057
P-11-8-2

NON-USERS AND UNMET NEED
FOR
CONTRACEPTION

304-66
Mat-Mon

FIRST REPORT

BY

SULTAN S. HANIMI

KHUSHOOD ALAM

AYSHA SHEBAZ

NATIONAL INSTITUTE OF POPULATION STUDIES

House No. 8, Street No. 70, F-8/3

Islamabad

1991

PREFACE

Although family planning activities in the country began as early as 1953 when the Family Planning Association of Pakistan was established, the contraceptive prevalence rate (CPR), given the duration of the family planning programme has been quite low. Even the 1990/91 Pakistan Demographic and Health Survey (PDHS) showed a CPR of 11.8 percent.

Viewing this concern, NIPS has included several studies in its work programme for the evaluation and intensive probe of various components of the Population Welfare Programme. The present study is one such efforts in this direction. The present study is based on the follow-up survey of married women in the reproductive age who were reported as non-users in Punjab province in the 1990/91 PDHS.

This is the first preliminary report of the study. The work on the more comprehensive analysis and report is in progress. However, the results presented in this report show that some major changes have occurred since the PDHS was undertaken during 1990/91.

The analysis shows significant increases in the knowledge and use of contraception among the women who were reported as non-users in the PDHS. Also more genuine reasons have been advanced by those women who were still non-users for non-use and unmet need for contraception.

The survey and analysis for this study were designed and carried out under USAID technical and financial assistance which are gratefully acknowledged.

The preparation and field work for the survey were started during the first quarter of 1993 under the direction of Dr. M.S. Jillani the former Executive Director of NIPS.

October, 1993

Tewfiq Fehmi
Executive Director

ACKNOWLEDGEMENTS

The survey of non-users and unmet need for contraception was designed and conducted during the first half of 1993. The financial assistance for the survey was provided by the USAID. Several people have worked on this study from the planning stage to the completion of this report.

Dr. M. S. Jillani former Executive Director contributed to the initial development of the project. He continued his interest until his retirement on March 31, 1993.

Mr. Tewfiq Fehmi the present Executive Director who succeeded Dr. M. S. Jillani took keen interest in the study, provided all the necessary support, reviewed the earlier draft and ensured the timely production of this report. Dr. Abdul Hakim Director of NIPS also read the earlier draft and made helpful suggestions.

Mr. Mohammed Afzal who was initially designated as the Principal Investigator made a substantial contribution at the planning stage of the project, in particular in the designing of questionnaires and organization of the field work. He had to leave NIPS to join the Pakistan Council for Science and Technology in February, 1993 but he continued his interest in the project.

The contribution of Mr. Mushtaq Ahmed NIPS programmer and Mr. Faateh-ud-din Research Assistant in processing and cleaning the data and producing tables for this report is gratefully acknowledged. This account will be incomplete if the work of the survey teams who undertook the difficult task of the field operation is not acknowledged. Thanks are due to Mr. Zulfiqar Alim for his assistance in checking the questionnaires and Mr. Rana Muhammad Akbar Stenotypist for typing several earlier drafts of this report. The final formatting of the report was done by Mr. Asif Amin Khan.

Sultan S. Hashmi
Khushnood Alam
Aysha Sheraz

CONTENTS

S.No.	Title	Page No
	PREFACE	ii
	ACKNOWLEDGEMENTS	iii
	CONTENTS	iv
	CONTENTS - TABLES	vi
	CONTENTS - FIGURES	viii
	EXECUTIVE SUMMARY	x
I.	INTRODUCTION	1
I.1	Background	1
I.2	Objectives	3
I.3	1990/91 PDHS Sample	3
I.4	Sample Selection	5
I.5	Questionnaires	6
I.6	Recruitment And Training Of Field Staff	7
I.7	Coverage Of The Survey	7
I.8	Education Level Of Respondent	10
II.	CONTRACEPTIVE KNOWLEDGE AND USE	15
II.1	Knowledge	15
II.2	Ever Use Of Contraceptive Methods	18
II.3	Current Prevalence Rate	21
III.	REASON FOR NON-USE	26
III.1	Wanted Children And Pregnant	27
III.2	Side Effects	30

S.No.	Title	Page No
III.3	Religion	31
III.4	Breast Feeding	31
III.5	Source Not Known	32
III.6	Husband Absent	33
III.7	Opposition Of Husband Or Other Family Members	33
III.8	Contraceptives Not Available	34
III.9	Poor Health	34
III.10	Failure Of Contraceptives	35
III.11	Contraceptives Are Expensive	35
III.12	Using Traditional Methods	36
III.13	Emerging Reasons For Non-Use	36
IV.	UN-MET NEED FOR CONTRACEPTION	38
IV.1	Desire For Children	38
IV.2	Un-Met Need	39
IV.3	Reasons For Un-Met Need Of Limiters	42
IV.4	Reasons For Un-Met Need For Spacers	46
V.	SUMMARY AND CONCLUSIONS	49
	ABBREVIATION USED	54
	REFERENCES	55

S.No.	Title	Page No
Table II.3	PERCENT DISTRIBUTION OF MARRIED WOMEN CURRENTLY USING CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993	21
Table II.4	PERCENT DISTRIBUTION OF CURRENT USERS BY NUMBER OF YEARS STARTED USING, PUNJAB, NUNS 1993	24
Table III.1	PERCENT DISTRIBUTION OF NON-USERS OF FAMILY PLANNING METHODS DUE TO SPECIFIC REASONS, PUNJAB, NUNS 1993	26
Table III.2	PERCENTAGE OF PREGNANCY PREVALENCE AND DESIRE FOR PREGNANCY AMONG FUW AND NFW, PUNJAB, NUNS, 1993	28
Table IV.1	PERCENTAGE OF FUW AND NFW BY DESIRE FOR CHILDREN AND CONTRACEPTIVE USE, PUNJAB, NUNS 1993	38
Table IV.2	PERCENTAGE OF FUW AND NFW BY STATUS OF NEED FOR FAMILY PLANNING, PUNJAB, NUNS 1993	39
Table IV.3	PERCENT DISTRIBUTION OF UN-MET NEED OF CONTRACEPTION OF FUW AND NFW COMBINED NON-USERS WHO DID NOT WANT ANY MORE CHILDREN, BY REASONS FOR NON-USE, PUNJAB, NUNS 1993	44
Table IV.4	PERCENT DISTRIBUTION OF UNMET NEED OF CONTRACEPTION OF SPACERS, DUE TO SPECIFIC REASONS, PUNJAB, NUNS 1993	46

CONTENTS - FIGURES

S.No.	Title	Page No
Figure I.1	PERCENT DISTRIBUTION OF FUW AND THEIR HUSBANDS BY LEVEL OF EDUCATION, PUNJAB, NUNS 1993	11
Figure I.2	PERCENT DISTRIBUTION OF NFW AND THEIR HUSBANDS BY LEVEL OF EDUCATION, PUNJAB, NUNS 1993	12
Figure I.3	PERCENT DISTRIBUTION OF ELIGIBLE WOMEN BY LEVEL OF EDUCATION, PDHS 1990/91, PUNJAB, NUNS 1993	13
Figure II.1	PERCENTAGE OF FUW, NFW WHO KNOW SPECIFIC CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993	16
Figure II.2	PERCENTAGE OF FUW, NFW WHO KNOW SPECIFIC CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993	17
Figure II.3	PERCENTAGE OF CURRENTLY MARRIED WOMEN 15-19 YEARS OF AGE WHO HAVE EVER USED CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993	19
Figure II.4	PERCENTAGE OF CURRENTLY MARRIED WOMEN 15-49 YEARS OF AGE WHO HAVE EVER USED CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993	20
Figure II.5	PERCENT DISTRIBUTION OF MARRIED WOMEN CURRENTLY USING CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993	22
Figure II.6	PERCENT DISTRIBUTION OF MARRIED WOMEN CURRENTLY USING CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993	23

S.No.	Title	Page No
Figure III.1	PERCENT DISTRIBUTION OF NON-USERS OF FAMILY PLANNING METHODS DUE TO MAJOR REASONS, PUNJAB, NUNS 1993	27
Figure III.2	PERCENTAGE OF PREGNANCY PREVALENCE AND DESIRE FOR PREGNANCY AMONG FUW AND NFW, PUNJAB, NUNS 1993	29
Figure IV.1	PERCENTAGE OF FUW AND NFW BY STATUS OF NEED FOR FAMILY PLANNING, PCPS 1984/85, PUNJAB, NUNS 1993	40
Figure IV.2	PERCENT DISTRIBUTION OF UN-MET NEED OF CONTRACEPTION OF FUW AND NFW COMBINED NON-USERS WHO DID NOT WANT ANY MORE CHILDREN, BY MAJOR REASONS FOR NON-USE, PUNJAB, NUNS 1993	45
Figure IV.3	PERCENT DISTRIBUTION OF UNMET NEED OF CONTRACEPTION OF SPACERS, DUE TO SPECIFIC REASONS, PUNJAB, NUNS 1993	47

EXECUTIVE SUMMARY

1. INTRODUCTION

The present study is based on the follow-up survey of 844 currently married women of reproductive age (15-49 years of age) from Punjab province who were reported as non-users of contraception in the 1990/91 Pakistan Demographic and Health Survey (PDHS).

In addition, 164 women who were currently married, were in the reproductive age and happened to be in the follow-up households were also interviewed. The data from these newly found women were obtained without much additional effort and cost and have been used in the present study for comparative analysis.

The response rate of the PDHS follow-up women after a period of two years is 77 percent which is encouraging and under the circumstances is quite reasonable. It also, confirms that the field operation of the PDHS was a successful effort. If there was no small mix-up in the list of households in the field, the response rate would have been even higher.

The 1990/91 PDHS reported that the current prevalence rate was only 12 percent. The objective of the follow-up survey was to explore in-depth, the factors due to which there was a high prevalence of non-users, inspite of the availability of family planning services in the country. In particular, what were the reasons due to which women who either wanted to space or limit their births altogether were not using contraception.

The educational background of the followed-up women showed that four-fifth of them were either illiterate or had less than primary level education, while about half of their husbands were either illiterate or had less than primary level education. The

remaining about one fifth of the followed up women and one half of their husbands had primary or higher level of education.

Among the newly found women over three-fourth were either illiterate or had less than primary level of education and the remaining about one fourth had primary or higher level of education. Also their husbands were somewhat better educated than the husbands of followed-up women. Another main difference between the two groups of women was that the followed-up women on the average were about four years older than the newly found women and had, therefore more average number of children ever born (CEB).

With these important differences in the educational background, ages and CEB of the two groups of women, the results of this study in respect of knowledge, use and non-use of contraceptive methods and factors attributed to non-use and unmet need of contraception have become more meaningful.

The results of the present study may seem surprising as levels of knowledge and use observed are higher than expected and attributes of non-use have changed and become more rational than observed in earlier studies.

2. KNOWLEDGE

The knowledge of eligible women about any contraceptive method reported in the 1990/91 PDHS was about 78 percent but the data of the present survey show that about 95 percent of followed-up women had the knowledge of at least one contraceptive method. Also the level of their knowledge about individual methods was quite high. For example, 90 percent of the women knew about female sterilization, 85 percent had the knowledge about injectables and pill and 82 percent knew about IUD.

The knowledge of the newly found women who were younger than the followed-up women was only slightly lower as 90 percent knew at least one contraceptive

method, 85 percent knew contraceptive surgery, 78 percent knew injectables, 79 percent had the knowledge about pill and 75 percent were aware of IUD.

It can be argued that the followed-up women had at least an exposure to the 1990/91 PDHS which might have brought more awareness among them. But the newly found women also had high level of knowledge. However, it should not be generalized that the knowledge has become almost universal, as it is a small sample, but it is highly likely that awareness about family planning has significantly increased among eligible women.

3. EVER USE OF CONTRACEPTION

The ever use of contraception was reported in the 1990/91 PDHS by 21 percent of eligible women, but this level for Punjab was reported at 29 percent. The followed-up women who were reported as non-users at the time of PDHS, 31 percent reported that they were ever users. Among the newly found women 32 percent reported that they ever used contraception. Due to the intensive IEC campaign, this transformation just after a period of two years is not surprising and was quite possible.

4. CURRENT PREVALENCE RATE

The current prevalence rate (CPR) reported in the 1990/91 PDHS was 11.8 percent and the same survey for Punjab reported 13.0 percent. There is another surprise as the CPR observed for the followed up women who were reported as non-users in the 1990/91 PDHS is as high as 18 percent. For the newly found women the CPR is 21 percent which is even higher.

Also, there is a change in the pattern of contraceptive use since 1990/91 but there is a similarity in this respect between followed up and newly found women. According to PDHS, female sterilization was the most used method followed by the condom. The present survey for both the groups of women shows that withdrawal is the most used followed by condom and the females sterilization is the third most used method.

However, the levels of these CPRs are higher than those observed in the PDHS.

This break through in a period of two years may be an indication that the programme is taking off. Also, some actual users might have been shy at the time of PDHS to admit that they were users and became more open after couple of enquiries. In any case the CPR has risen quite significantly.

5. NON-USERS OF CONTRACEPTION

In spite of this rather rapid transformation, a proportion as large as about four fifth of the PDHS non-users in Punjab were still found as non-users. But the analysis of data shows that most of them had given either genuine reason or some rational response. The genuine reason such as young women wanting more children to complete the size of their families or for the same reason were pregnant or older women who reached menopause or could not conceive due to secondary sterility or some other reason.

Among the FUW non-users 20 percent were found pregnant and of the pregnant, 18 percent did not want the pregnancy and 22 percent wanted to have later. Of the combined FUW and NFW non-users 21 percent were pregnant and of these 16 percent did not want the pregnancy at all and 20 percent wanted it later. Also 14 percent of combined FUW and NFW non-users gave pregnancy as the reason for non-use.

Among the remaining reasons given by FUW for non-use, fear of side effects has emerged as the major reason followed by the religion, breast feeding, source not known, opposition from husband or other family members and contraceptives not available in that order.

In the past religion was the main reason for the non-use and fear of side effects was not that important. It appears that with increase in the knowledge and use of modern contraception, more genuine concerns are emerging. More follow-up and care of the users is urgently needed to maintain the tempo of increase in the CPR.

5. UNMET NEED

Irrespective of the current contraceptive use status, about 48 percent of followed up women wanted more children and about 52 percent did not want any more children. Of the newly found women, who were younger than the followed-up women and had not yet completed the size of their families, 65 percent wanted more and 35 percent did not want any more children.

Among the non-users 52 percent of followed up and 75 percent of newly found women wanted more children and the rest did not want any more. Those who were pregnant among the two groups, 40 percent of the followed up and 16 percent of newly found women reported that their pregnancies were unwanted.

The true unmet need was determined by the percentage of those who were currently married, were neither sterile nor experiencing menopause, were not using contraception and either did not want any more children or wanted to delay their pregnancies.

According to this definition, 33 percent of the followed-up, 20 percent of newly found women and 31 percent of both combined, did not want any more children. Then 17 percent of followed-up, 24 percent of newly found women and 18 percent of both combined women wanted to space their pregnancies. Thus the total unmet need was 50 percent for followed-up, 44 percent for newly found and 49 percent for both combined women.

CHAPTER I

INTRODUCTION

I.1 BACKGROUND

The central concern of any family planning programme is to convert non-users to users of contraception. Such behaviour modification has remained, for decades the basic enigma for family planners in diverse cultural setting. A review of literature on family planning indicates a long list of socio-demographic, socio-psychological and cultural determinants of contraception acceptance, effective use and its expected demographic impact. Recognizing the mounting evidence of an interaction between fertility levels and income, education, employment, nutrition, health services and status of women, the programme included in the Eighth Five Year plan 1993-1998 is a multi-dimensional, multi-sectoral and integrated population welfare programme.

One limitation of the family planning research is that much of it is based on data pertaining to users of services. Non-users typically are identified in general population or contraceptive prevalence surveys to assess the programme impact. Through the present study, which is based on the primary data collected through a follow-up survey of Punjab, and which was specifically designed for this purpose, attempt is made to find out reasons from the non-users, their characteristics, attitudes and behavioural change. Also investigated in this study are the reasons for the non-use of contraception from women who do not want any more children or want to have longer interval between consecutive births. In other words, the object is also to find out reasons for the so called " unmet needs".

In 1984-85 a survey "Pakistan Contraceptive Prevalence Survey" (PCPS) was carried out [1]. The analysis of this survey revealed that only 7.6 percent of the currently married women in the reproductive age 15-49 years were using contraceptive methods [1,p.98]. The study also pointed out that there were 59 percent of the women who wanted a child after one year or wanted no more births but were not using any contraceptive methods [1,p.118]. Similarly the 1990/91 Pakistan Demographic and Health Survey (PDHS) showed a percentage of 30.5 for women in Punjab who wanted to delay their next birth for two or more years or wanted to limit their births altogether [2, p.103]. This considerable difference between the two surveys is partly due to the period of postponement of birth which was one year in the case of PCPS and two or more years in the case of PDHS. Another factor which might have contributed to the reduction of unmet need is that after a period of six years there was an increase in the met needs as the current use rate also had increased to 11.8 percent by 1990/91.

Thus a question arose: what are the reasons for the non-use of contraception among those women. In the 1984/1985 PCPS for Punjab 26.2 percent of currently married non-pregnant 15-49 years of age who were non-users and had knowledge and wanted no more children, stated "religion" as the main reason for non-use, followed by 11.8 percent for fear of side-effects and 9.2 percent for family planning methods not available [1,p.117]. Similarly, main reasons given in the 1990/91 PDHS included "religion" 13.2 percent, lack of knowledge about family planning 10.5 percent, husband opposed to the use of contraception was mentioned by 6.4 percent women and worry about side effects was stated by 2.8 percent [2, p. 81].

Since surveys like PCPS and PDHS have limitations such as response error or enumeration bias and/or questionnaires over-loaded with many questions, it was decided to undertake a follow up survey of the PDHS non-user women to explore in-depth the reasons relating to the non-use of contraception by using a more direct and precise questionnaire.

I.2 OBJECTIVES

The main object of the present study was to find out in detail the reasons for the non-use of family planning methods from women who were reported as non-users in the 1990/91 PDHS and, in particular, from women who wanted either to space or limit their births and to feed the results for improving the Population Welfare Policy and Programme of the Eighth Five Year Plan, 1993-1998.

I.3 1990/91 PDHS SAMPLE

Before describing the sample and the topical coverage of the present follow up survey, attempt is made to provide a glimpse of the 1990/91 PDHS which provided the frame for the selection of the respondents for the follow-up. The PDHS was carried out during December 1990 to May 1991 to collect data on fertility, nuptiality, family size preferences, knowledge and use of family planning, child nutrition, immunization, health and maternal care. In PDHS three questionnaires were used. One questionnaire for households which included questions on age, sex, marital status and other household characteristics.

From this questionnaire 6904 ever married women in the reproductive age were identified for whom second questionnaire was used to obtain information on fertility, nuptiality, family size preferences, other socio-economic characteristics, contraceptive use or non-use, infant and child mortality, breast-feeding, food supplementation practices, maternal care, child nutrition, immunization and health, child morbidity, height and weight measurement.

The third questionnaire used in the PDHS was designed to obtain information from a sub-sample of husbands of currently married women 15-49 years of age. The topics covered included background of demographic, social and economic characteristics, family planning knowledge, attitude and practices, and fertility preferences.

For the PDHS a two stage sample was drawn which consisted of 408 clusters,

8019 households, 6904 respondents and 1757 husbands - to obtain national urban-rural and provincial estimates. The sampling frame consisted of 7420 primary sampling units (PSUs). The PSUs selected for Punjab, Sindh, NWFP and Baluchistan were 155, 110, 82 and 60 respectively (see Table I.1). Only one PSU could not be covered from Baluchistan. The sample excluded FATA and other areas which were difficult to cover. The total excluded area constituted four percent of the total population of the country.

TABLE I.1
SAMPLE COVERAGE FOR URBAN AND RURAL AREAS
COMBINED 1990/91 PDHS

Province	Number Of PSUs			Number Of SSUs (Household)			Number Of Eligible Women			Number of Eligible Husbands		
	Covered	Not Covered	Total	Covered	Not Covered	Total	Covered	Not Covered	Total	Covered	Not Covered	Total
Punjab	155	0	155	2598	192	2790	2207	124	2331	461	103	564
Sindh	110	0	110	2071	189	2260	1798	102	1900	364	175	539
NWFP	82	0	82	1609	147	1756	1665	24	1689	313	81	394
Baluchistan	60	1	61	915	298	1213	941	43	984	216	44	260
Total	407	1	408	7193	826	8019	6611	293	6904	1354	403	1757

Source: [2,p.10]

I.4 SAMPLE SELECTION

For the present study of follow-up of non-users, only Punjab province was selected. Originally it was decided to cover all 155 PSUs of Punjab which were selected for the 1990/91 PDHS but later due to time constraint, the number of PSUs were reduced to 129. The distribution of selected PSUs among districts of Punjab is shown in Table 2. From these PSUs currently married women in the age group 15-49, who were reported in the PDHS as non-users of family planning methods were identified and listed for the follow-up. These women who were 1204 in number, were considered as the sample for the present follow-up study, " Non-users and Unmet Need for Contraception Survey", which is abbreviated as NUNS.

TABLE I.2
DISTRIBUTION OF SELECTED PSUs AMONG
DISTRICTS OF PUNJAB, NUNS 1993

Districts	Major Urban	Other Urban	Rural	Total
Rawalpindi	6	2	4	12
Attock	-	1	2	3
Chakwal	-	-	2	2
Jehlum	-	1	2	3
Gujranwala	6	1	3	10
Gujrat	-	1	5	6
Lahore	13	1	1	15
SheikhuPura	-	1	2	3
Sahiwal	-	2	3	5
Okara	-	1	3	4
Kasur	-	1	3	4
Sargodha	-	2	3	5
Toba T.Singh	-	1	2	3
Jhang	-	1	3	4
Mianwali	-	1	2	3
Faisalabad	6	1	5	12
Khushab	-	1	2	3
Multan	4	1	3	8
Khanewal	-	1	2	3
M.Gharh	-	1	3	4
D.G.Khan	-	1	2	3
Rajanpur	-	1	2	3
Layyah	-	1	2	3
Vehari	-	1	3	4
Bahawalpur	-	2	2	4
Total	35	28	66	129

TABLE I.3

**DISTRIBUTION OF PSUs AMONG DISTRICTS WHICH COULD
NOT BE COVERED FROM PUNJAB, NUNS 1993**

Districts	Major Urban	Other Urban	Rural	Total
Sialkot	-	2	5	7
Faisalabad	1	-	-	1
Jhang	-	1	1	2
Bhakkar	-	-	2	2
Lahore	1	-	1	2
Sheikhupura	-	-	1	1
Sahiwal	-	-	1	1
Multan	2	-	-	2
Bahawalnagar	-	2	3	4
Rahimyar Khan	-	1	3	4
Total	4	5	17	26

I.5 QUESTIONNAIRES

Two types of questionnaires were used in this survey: household questionnaire and the questionnaire for eligible women. In the household questionnaire, the questions asked were for usual residents, visitors who were there in the night before the interview, age, sex, marital status, education level and employment status. The second questionnaire was designed primarily for Followed-up Women (FUW) who were reported in the PDHS as non-users and were found in their households. It included questions relating to the characteristics of women, fertility, knowledge, attitude and practice of family planning, reason for non-use and unmet needs.

The eligible women who were not in the selected households at the time of 1990/91 PDHS but were present in the household at the time of the present survey were also interviewed and were recorded as Newly Found Women (NFW). The questionnaires used appear as Annex I and Annex II. These questionnaires were pretested and corrected before use.

I.6 RECRUITMENT AND TRAINING OF FIELD STAFF

Interviewers and supervisors were selected for four teams. Each team consisted of three interviewers and one supervisor. After recruitment, the interviewers and supervisors were given intensive training for seven days at the National Institute of Population Studies. These teams included at least one interviewer who had the experience of interviewing in the 1990/91 PDHS. The pretesting of the questionnaires was also carried out as a part of this training. The teams were also given test before they were sent to the field. The main survey was conducted during the months of March and April, 1993.

I.7 COVERAGE OF THE SURVEY

As indicated earlier, originally 155 PSUs were selected but due to time constraint (as the study had to be completed by June 30, 1993) the sample was reduced to 129 PSUs. In these PSUs there were supposed to be 1077 households with 1204 eligible women (Table I.4). Of these 1024 households and 1096 women were located but 53 households with 108 women could not be located. Thus the location rate was 95 percent for households and 91 percent for the follow-up women (FUW). Of the follow-up located women 844 or 77 percent could be interviewed and the rest 252 or 23 percent could not be interviewed for reasons shown in Table I.5.

In addition, the household survey showed that there were 186 newly found women (NFW) in the follow-up households who were currently married and were in the reproductive age. Of these 164 could be interviewed and 22 could not be interviewed. In the analysis these two groups of women FUW and NFW are treated separately for

inter-group comparison as well as are used to indicate overall joint picture.

Among the interviewed women it was found that 36.8 percent were urban and the rest were rural, where as the estimated urban population of Punjab province as of 1993 was 32 percent. Thus the sample was slightly over represented by the urban women for which necessary adjustment was made by giving proper weights.

TABLE I.4

NUMBER AND PERCENTAGE OF FOLLOW-UP HOUSEHOLDS AND FUW SELECTED AND FOUND AND NFW FOUND BY INTERVIEWING STATUS, PUNJAB, NUNS 1993

	Follow-Up Households Selected			FUW-Selected			NFW	Eligible Women- Total		
	Found	Not Found	Total	Found	Not Found	Total	Found	Found	Not Found	Total
Number	1024	53	1077	1096	108	1204	186	1282	108	1390
Percent	95.1	4.9	100	91.0	9.0	100	100	92.2	7.8	100
	FUW-Found			NFW-Found			Total Eligible Women-Found			
	Inter-viewed	Not Interviewed	Total	Inter-viewed	Not Interviewed	Total	Inter-viewed	Not Interviewed	Total	
Number	844	252	1096	164	22	186	1008	274	1282	
Percent	77.0	23.0	100	88.2	11.8	100	78.6	21.4	100	

FUW = Followed-Up Women
 NFW = Newly Found Women
 NUNS = Non-Users and Unmet Needs Survey

Of the total 1390 eligible women, 1204 were followed-up women who were non-users at the time of 1990/91 PDHS and 186 were those who were not there at the time of PDHS but were in the households at the time of present survey who are called as NFW. These NFW were identified by comparing the non-users list (which include names of eligible women, names of the heads of the households, addresses of households) of 1990/91 PDHS. The response rate of the total eligible women was 79 percent. This rate, inspite of the month of Ramadhan and wheat harvesting season is quite reasonable.

Table I.5

**RESPONSE RATE AND REASON FOR NON-RESPONSE
1990/91 PDHS AND FUW AND NFW RESPONDENTS,
PUNJAB, NUNS 1993**

S.No.	Result Of Interview	Total 1993	FUW 1993	NFW 1993	PDHS (Punjab) 1990/91
1	Completed	78.6	77.0	88.2	93.1
2	Household present but respondent not at home	9.0	9.1	8.7	0.9
3	Household absent	1.8	2.1	-	0.6
4	Refused	2.1	2.1	2.1	0.9
5	Household moved away or vacant	2.7	3.1	-	3.2
6	Dwelling destroyed	0.1	0.1	-	0.2
7	Dwelling not found	3.8	4.5	-	0.4
8	Other	1.9	2.0	1.0	0.7
Percent		100	100	100	100
Number		1282	1096	186	2790

As shown in Table I.5 the non-response was due to several reasons. In the total (FUW + NFW) located women (1282), nine percent eligible women were not at home at the time of visit, and in 1.8 percent cases, the whole family was not at home. Over 2 percent refused, arguing that it was only two years ago that they were surveyed. Their

main objection was: why were they selected again? The percentage (3.8) of dwellings not found is quite substantial. This was mainly due to confusion in the PDHS lists of dwellings, otherwise the response rate could have been even higher.

For the FUW the response rate was 77.0 percent, the main reasons for the non-response of 23.0 percent are the same as just mentioned for the total women. The overall main reason is the changes which occurred during the two years period since the 1990/91 PDHS.

I.8 EDUCATION LEVEL OF RESPONDENT

Table I.6 shows that slightly more than four fifth of the FUWs (82 percent) had less than five year schooling including the illiterates as compared to over half (52 percent) of their husbands. Also about half (50 percent) of couples had less than five year education or had no education at all.

TABLE I.6
PERCENT DISTRIBUTION OF FUW AND THEIR HUSBANDS
BY LEVEL OF EDUCATION, PUNJAB, NUNS 1993

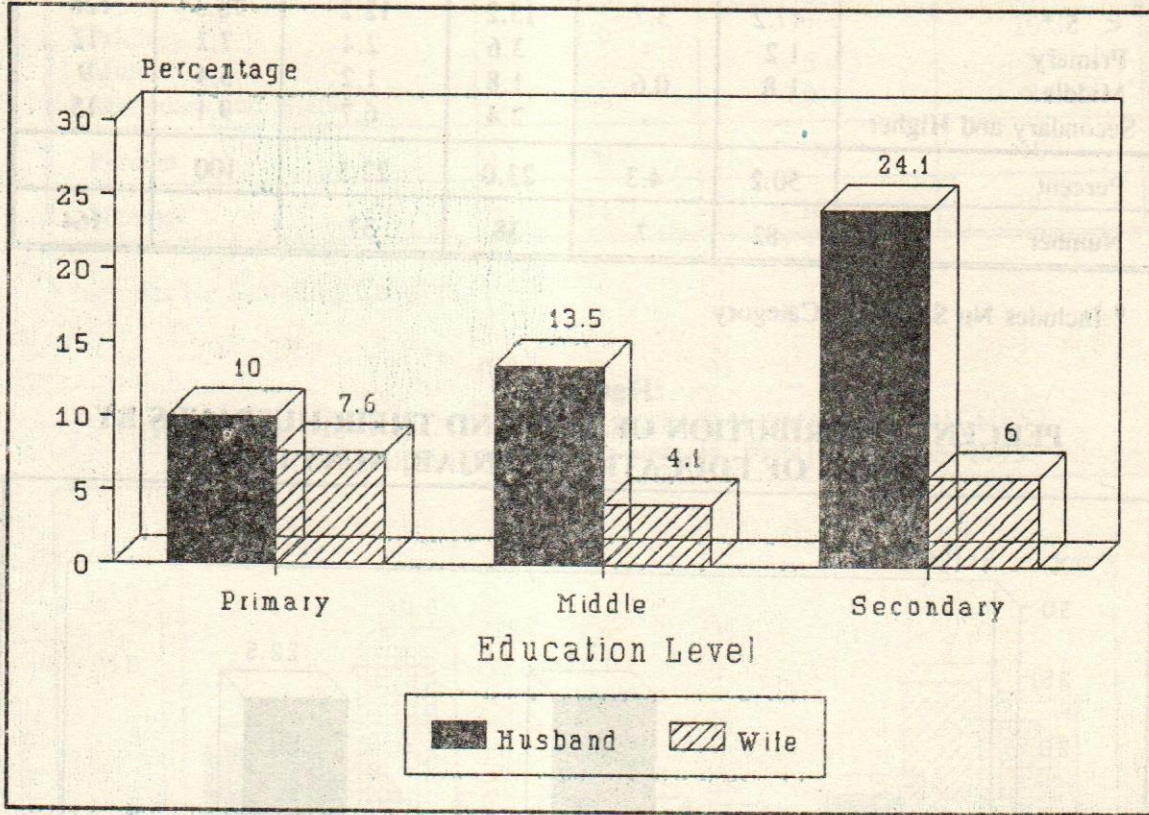
Husband Wife	< 5 *	Primary	Middle	Secondary And Higher	Percent	Number
< 5 *	50.5	8.5	11.0	12.3	82.3	695
Primary	0.8	1.2	1.5	4.1	7.6	64
Middle	0.7	0.2	0.8	2.4	4.1	35
Secondary and higher	0.4	0.1	0.2	5.3	6.0	50
Percent	52.4	10.0	13.5	24.1	100	
Number	442	85	114	203		844

* Includes No Schooling Category

PERCENT DISTRIBUTION OF FFW AND THEIR HUSBANDS BY LEVEL OF EDUCATION, PUNJAB, NUNS 1993

Figure I.1

PERCENT DISTRIBUTION OF FFW AND THEIR HUSBANDS BY LEVEL OF EDUCATION, PUNJAB, NUNS 1993



Source Table I.6

The pattern of educational achievement was similar among the NFW as among FFW with minor variations in the percentages of higher educational groups in which NFW and their husbands seem to have done better than FFW and their husbands (Table I.7).

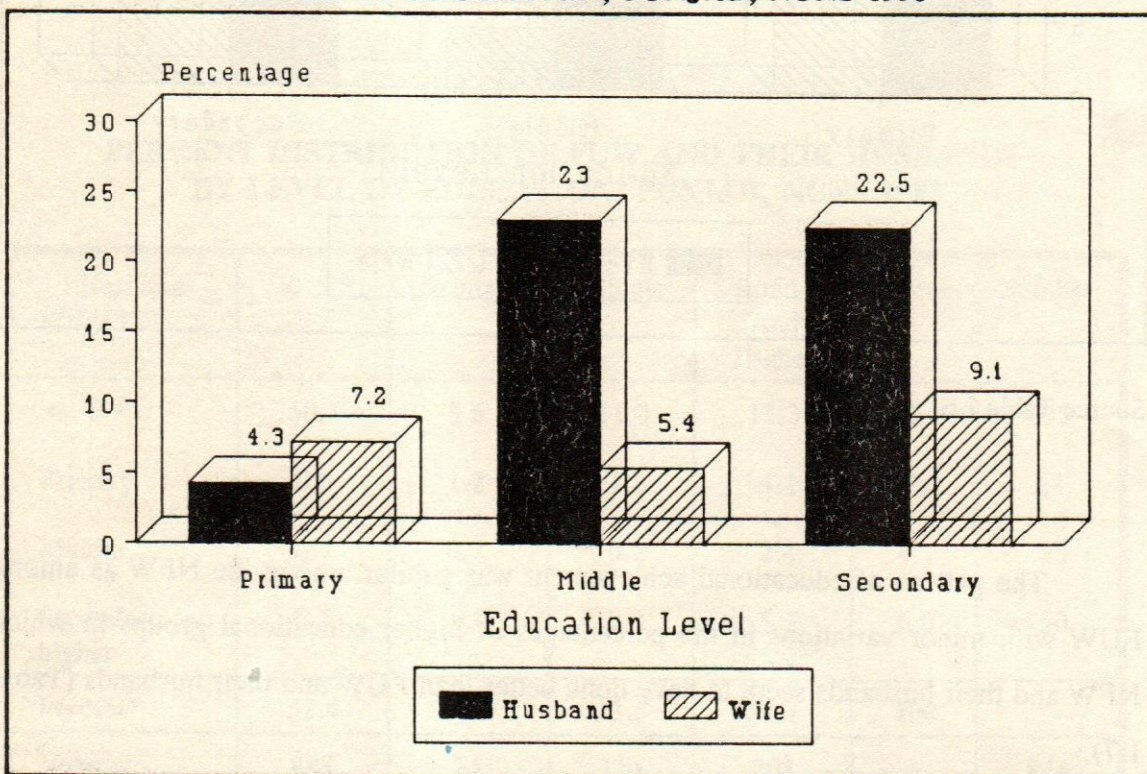
TABLE I.7

PERCENT DISTRIBUTION OF NFW AND THEIR HUSBANDS BY LEVEL OF EDUCATION, PUNJAB, NUNS 1993

Wife	Husband	< 5*	Primary	Middle	Secondary And Higher	Percent	Number
< 5*		47.2	3.7	15.2	12.2	78.3	128
Primary		1.2	-	3.6	2.4	7.2	12
Middle		1.8	0.6	1.8	1.2	5.4	9
Secondary and Higher		-	-	2.4	6.7	9.1	15
Percent		50.2	4.3	23.0	22.5	100	
Number		82	7	38	37		164

* Includes No Schooling Category

Figure I.2
PERCENT DISTRIBUTION OF NFW AND THEIR HUSBANDS BY LEVEL OF EDUCATION, PUNJAB, NUNS 1993



Source Table I.7

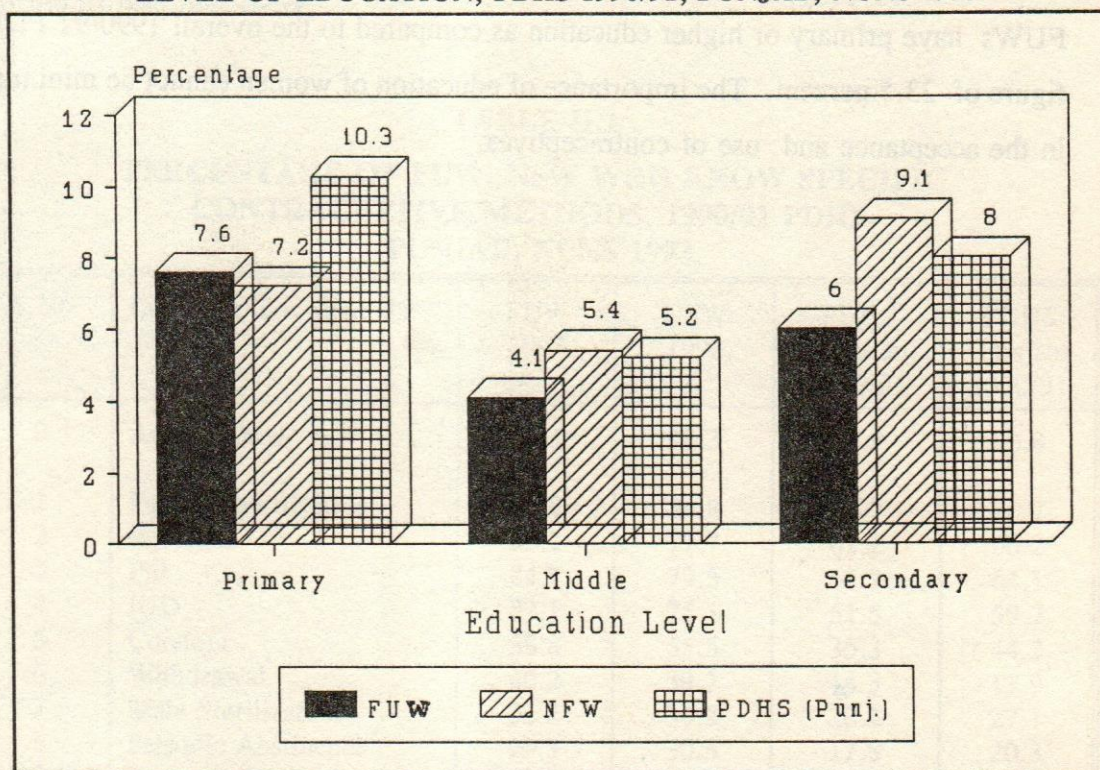
TABLE I.8

PERCENT DISTRIBUTION OF ELIGIBLE WOMEN BY
LEVEL OF EDUCATION, PDHS 1990/91, PUNJAB, NUNS 1993

Level Of Education	FUW 1993	NFW 1993	PDHS (Punjab) 1990-91
< 5 *	82.3	78.3	76.5
Primary	7.6	7.2	10.3
Middle	4.1	5.4	5.2
Secondary and Higher	6.0	9.1	8.0
Percent	100	100	100
Number	844	164	3948

* Includes No Schooling Category

Figure I.3
PERCENT DISTRIBUTION OF ELIGIBLE WOMEN BY HIGHEST
LEVEL OF EDUCATION, PDHS 1990/91, PUNJAB, NUNS 1993



Source Table I.8

Comparing the educational attainments of FUW, NFW and PDHS Punjab eligible women (Table I.8), it is noted that the educational attainments of NFW and PDHS women are some what more than FUW as the latter group consists of women who were non-users and had lower educational attainment.

In general, it is observed that the percentage of educated newly found women is higher than the Punjab PDHS women in the categories of middle and higher education. In general, NFW were younger (the average age of NFW was 27.8 years as compared to 31.8 of FUW) and younger women are more likely to have attended school and attained higher level than older women which is evident from the comparison of FUW and NFW in Table I.8. The comparison of educational attainment of NFW with the Punjab PDHS women confirms that level of educational achievement at middle and higher levels has increased somewhat over time. The comparison of 1990/91 Punjab PDHS and FUW indicates that only 18 percent of FUWs have primary or higher education as compared to the overall 1990/91 PDHS figure of 23.5 percent. The importance of education of women cannot be minimised in the acceptance and use of contraceptives.

CHAPTER II

CONTRACEPTIVE KNOWLEDGE AND USE

II.1 KNOWLEDGE

Table II.1 exhibits the trends in contraceptive knowledge. The eligible women were first asked to name all the methods they knew without prompting. Then the interviewer read out the names of methods and asked if she knew any one of them. Table II.1 is based on both unprompted and prompted answers. It is observed from Table II.1 that the level of contraceptive knowledge is 94.4 percent for FUW and 90.3 percent for NFW. Both these values when compared with the 1990/91 PDHS 77.9 percent for the country and 80.8 percent for Punjab, indicate a substantial increase over a period of past two years.

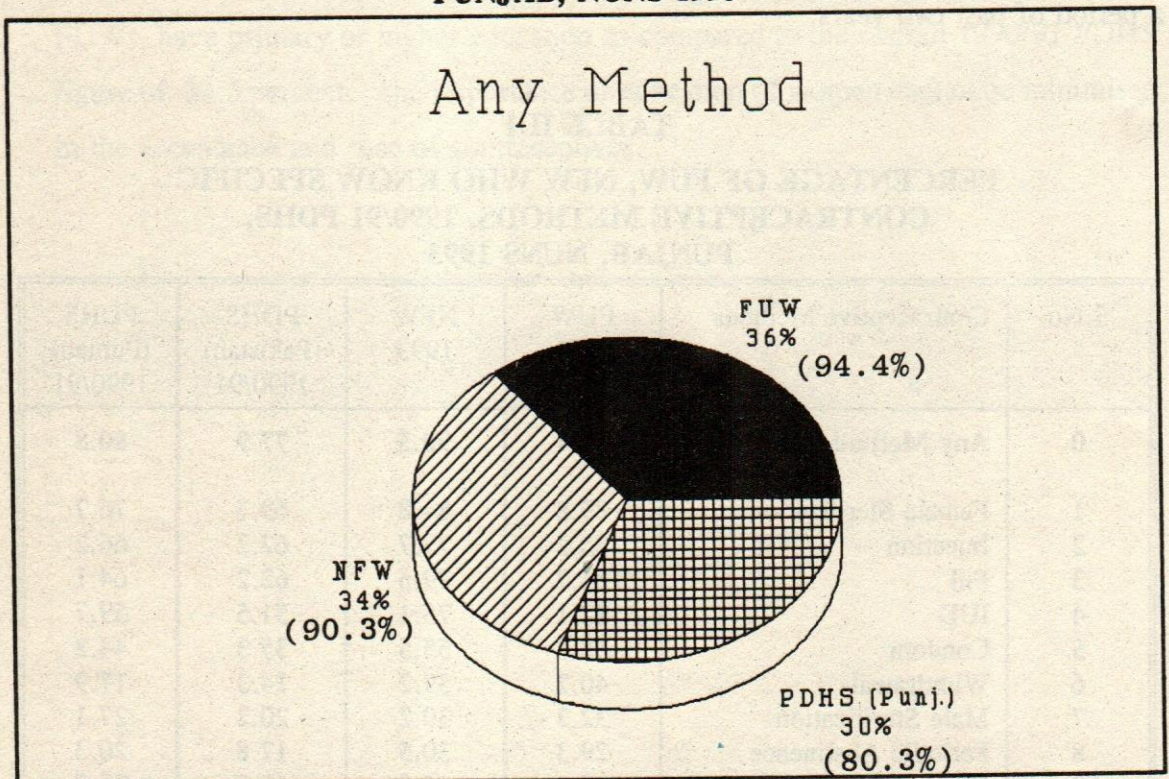
TABLE II.1
PERCENTAGE OF FUW, NFW WHO KNOW SPECIFIC
CONTRACEPTIVE METHODS, 1990/91 PDHS,
PUNJAB, NUNS 1993

S.No	Contraceptive Methods	FUW 1993	NFW 1993	PDHS (Pakistan) 1990/91	PDHS (Punjab) 1990/91
0	Any Method	94.4	90.3	77.9	80.8
1	Female Sterilization	89.8	84.8	69.7	76.7
2	Injection	85.2	77.7	62.2	66.2
3	Pill	84.7	79.5	62.2	64.1
4	IUD	82.1	75.1	51.5	59.7
5	Condom	58.8	55.5	35.3	44.2
6	Withdrawal	40.2	39.2	14.3	17.9
7	Male Sterilization	32.2	30.2	20.2	27.1
8	Periodic Abstinence	29.3	30.5	17.8	20.3
9	Foam, Jell	17.4	15.9	12.7	16.0
Number		844	164	6611	2207

However, it can be argued that the FUW had been exposed to the same questions in the 1990/91 PDHS and since then they have become more knowledgeable. But women who were not exposed to PDHS questioning were also almost equally knowledgeable.

It appears that in term of knowledge the programme has made a significant breakthrough. This level is almost the same as in other developing countries which are being considered as having successful programmes. For example, the level of knowledge according to the survey undertaken in 1987 was 99 percent in Sri Lanka and 94 percent in Indonesia [3,p.6].

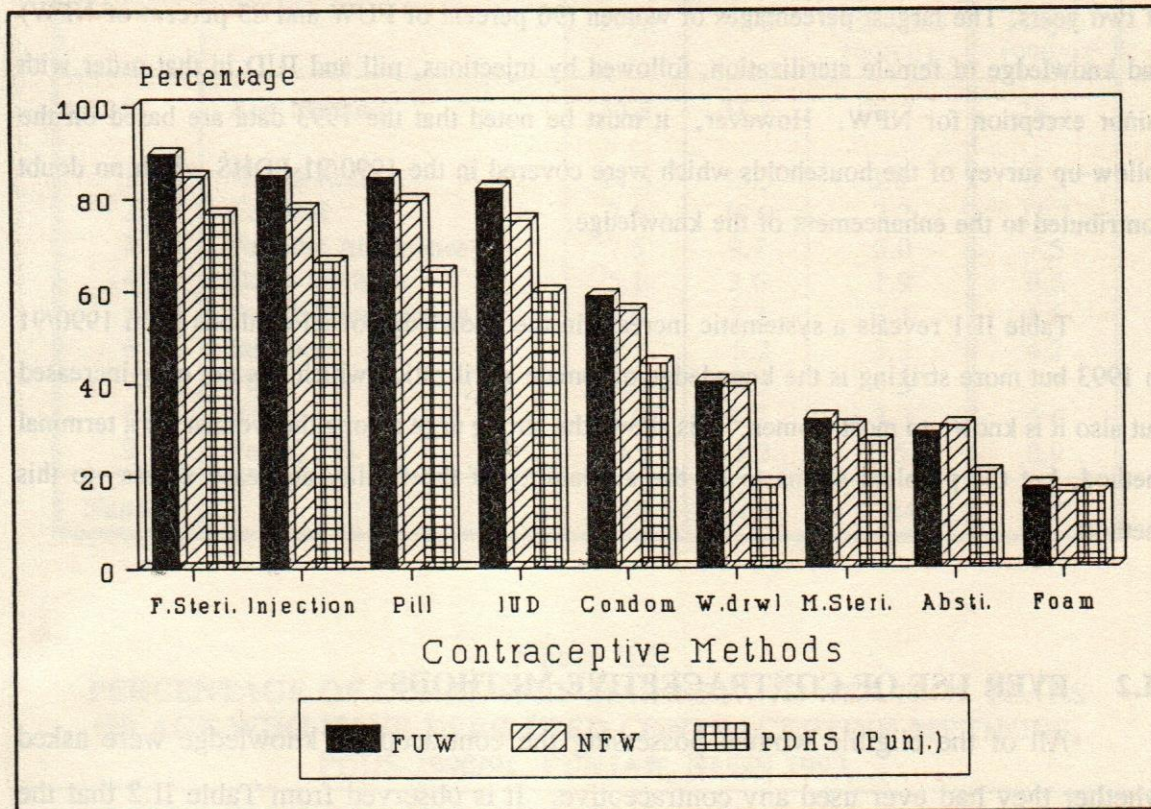
FIGURE II.1
PERCENTAGE OF FUW, NFW WHO KNOW SPECIFIC
CONTRACEPTIVE METHODS, PDHS 1990/91,
PUNJAB, NUNS 1993



Source Table II.1

FIGURE II.2

PERCENTAGE OF FUW, NFW WHO KNOW SPECIFIC CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993



Source Table II.1

It is interesting to note from Table II.1 that the knowledge of IUD and withdrawal among FUW as well as NFW has increased sharply since 1990/91. One reason may be that copper-T which has been introduced recently has become a more popular method. The increase in the knowledge about the withdrawal method might be due to improvement in the understanding of religion which shows that this method was being used during prophet's time. Another feature of this method is that it preserves privacy. Still another reason may be that in case the family planning facilities or modern

methods are not available, withdrawal is the easiest method to adopt.

In the case of NFW those who had no knowledge of "any methods" is only 10 percent. This reflects the achievement of the IEC component of the programme in a period of two years. The largest percentages of women (90 percent of FUW and 85 percent of NFW) had knowledge of female sterilization, followed by injections, pill and IUD in that order with minor exception for NFW. However, it must be noted that the 1993 data are based on the follow-up survey of the households which were covered in the 1990/91 PDHS which no doubt contributed to the enhancement of the knowledge.

Table II.1 reveals a systematic increase in the knowledge of all methods from 1990/91 to 1993 but more striking is the knowledge of female sterilization which has not only increased but also it is known to most women. This shows the strong urge among the women for a terminal method, but the problem seems to be the availability of the facility and easy access to this method.

II.2 EVER USE OF CONTRACEPTIVE METHODS

All of the eligible women possessing the contraceptive knowledge were asked whether they had ever used any contraceptive. It is observed from Table II.2 that the women who were non-users at the time of PDHS, 31 percent of them have been reported as ever users of any family planning method. In the PDHS only one fifth of the women in the country and 28 percent in Punjab were reported as ever user of any method. The largest relative increase in the ever use is of withdrawal, followed by other methods and the values of percentages of these methods are significantly higher than those observed in PDHS.

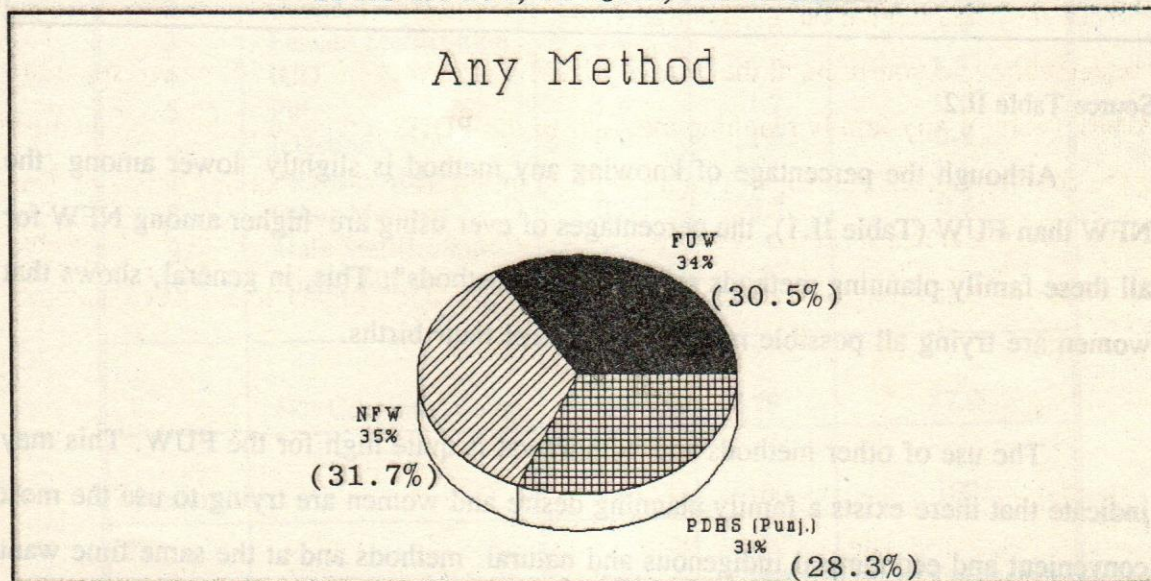
TABLE II.2

PERCENTAGE OF CURRENTLY MARRIED WOMEN 15-49 YEARS OF AGE WHO HAVE EVER USED CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993

S.No	Contraceptive Methods	FUW 1993	NFW 1993	PDHS (Pakistan) 1990-91	PDHS Punjab 1990/91
0	Any Method	30.5	31.7	20.7	28.3
1	Withdrawal	14.5	15.3	3.8	5.5
2	Condom	7.6	11.0	7.2	11.7
3	Periodic Abstinence	7.5	9.7	5.0	7.5
4	Other Methods	5.1	2.6	1.9	0.6
5	Female Sterilization	4.0	5.3	3.5	4.8
6	Injection	4.1	5.2	3.3	4.2
7	Pills	3.2	6.5	4.5	5.7
8	IUD	2.6	4.7	3.3	5.6
9	Foam, Jell	0.5	1.2	0.5	0.9
Number		844	164	6364	2207

Figure II.3

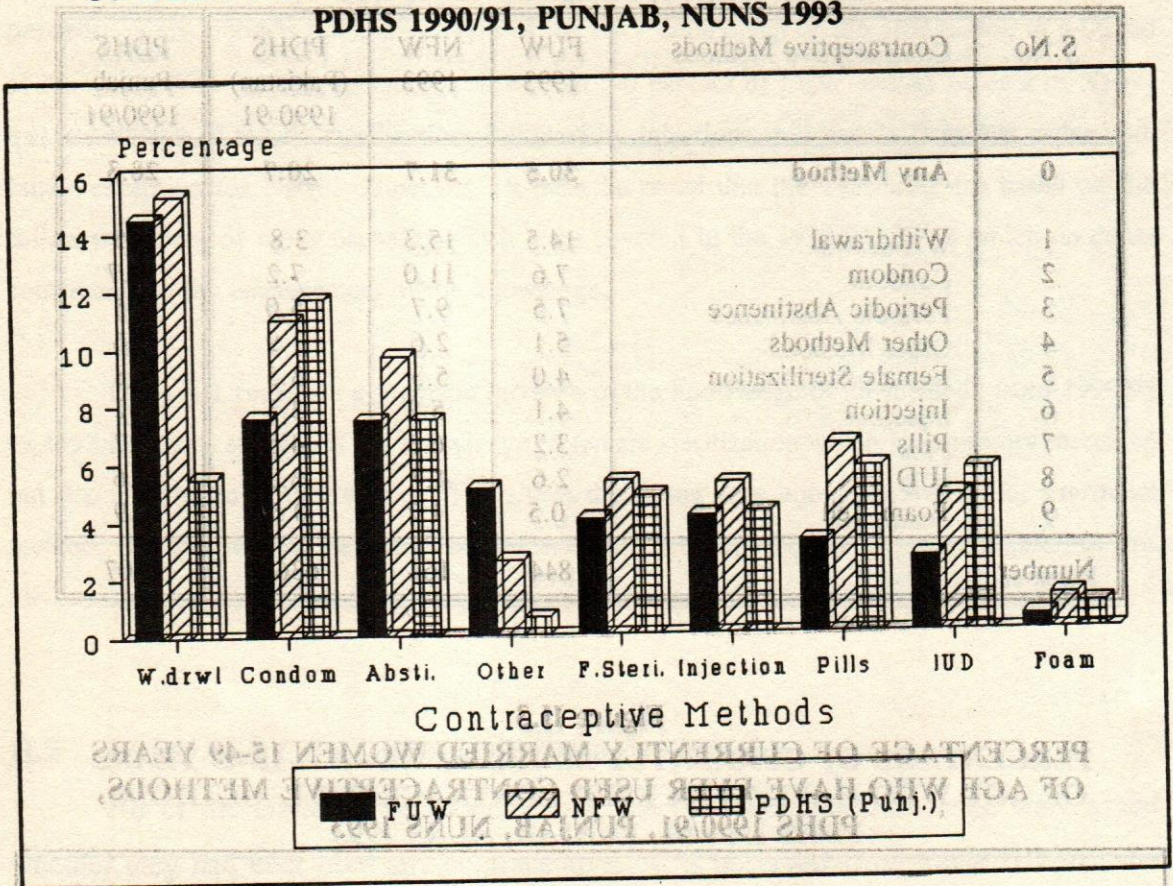
PERCENTAGE OF CURRENTLY MARRIED WOMEN 15-49 YEARS OF AGE WHO HAVE EVER USED CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993



Source Table II.2

Figure II.4

PERCENTAGE OF CURRENTLY MARRIED WOMEN 15-49 YEARS OF AGE WHO HAVE EVER USED CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993



Source Table II.2

Although the percentage of knowing any method is slightly lower among the NFW than FUW (Table II.1), the percentages of ever using are higher among NFW for all these family planning methods except "other methods". This, in general, shows that women are trying all possible methods to control their births.

The use of other methods and withdrawal is quite high for the FUW. This may indicate that there exists a family planning desire and women are trying to use the most convenient and economical indigenous and natural methods and at the same time want to maintain privacy.

II.3 CURRENT PREVALENCE RATE

First of all, the level of current prevalence rates(CPRS) 18.0 and 21.0 percent observed for both FUW and NFW respectively are noted with surprise.

The CPR is higher among the NFW, although their contraceptive knowledge is slightly lower than the FUW as is evident from Table II.1. The withdrawal, condom, female sterilization and IUD are the most popular methods in that order.

TABLE II.3

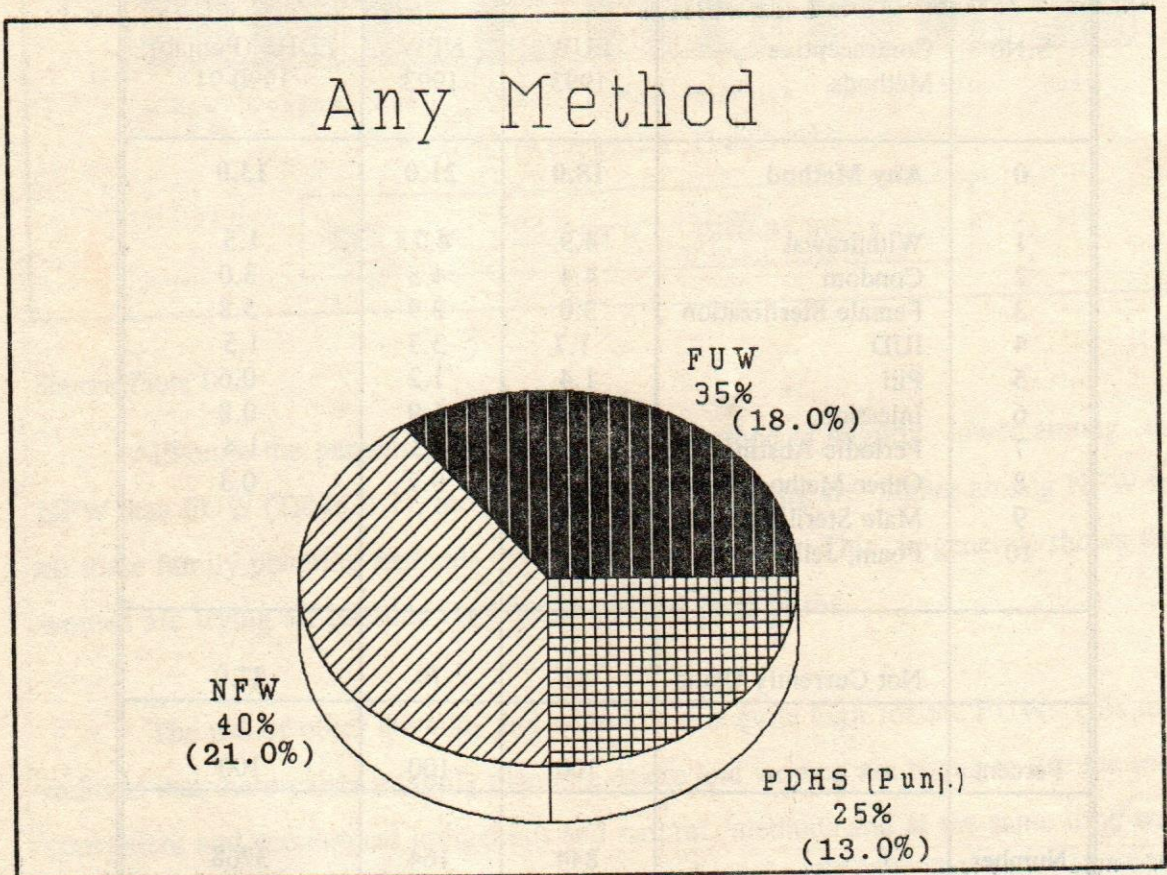
PERCENT DISTRIBUTION OF MARRIED WOMEN CURRENTLY USING CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993

S.No	Contraceptive Methods	FUW 1993	NFW 1993	PDHS (Punjab) 1990-91
0	Any Method	18.0	21.0	13.0
1	Withdrawal	4.9	4.7	1.5
2	Condom	4.4	4.5	3.0
3	Female Sterilization	3.0	2.9	3.8
4	IUD	1.7	3.3	1.5
5	Pill	1.4	1.2	0.6
6	Injection	0.9	1.9	0.8
7	Periodic Abstinence	0.8	1.3	1.4
8	Other Methods	0.8	0.7	0.3
9	Male Sterilization	-	-	-
10	Foam, Jell	-	-	-
	Not Currently Using	82	79	87.0
Percent		100	100	100
Number		844	164	3768

Table II.3 also shows the highest percentages, (4.9 percent for FUW and 4.7 percent for NFW) using withdrawal among the current users, followed by the condom and these values are higher than those observed in PDHS. This as indicated earlier may partially be due to non-availability of modern and more effective methods. The other reason for increase in the use of withdrawal method may be the convenience as no exogenous material is needed as well as the tradition that it also used to be practiced during early Islamic period.

Figure II.5

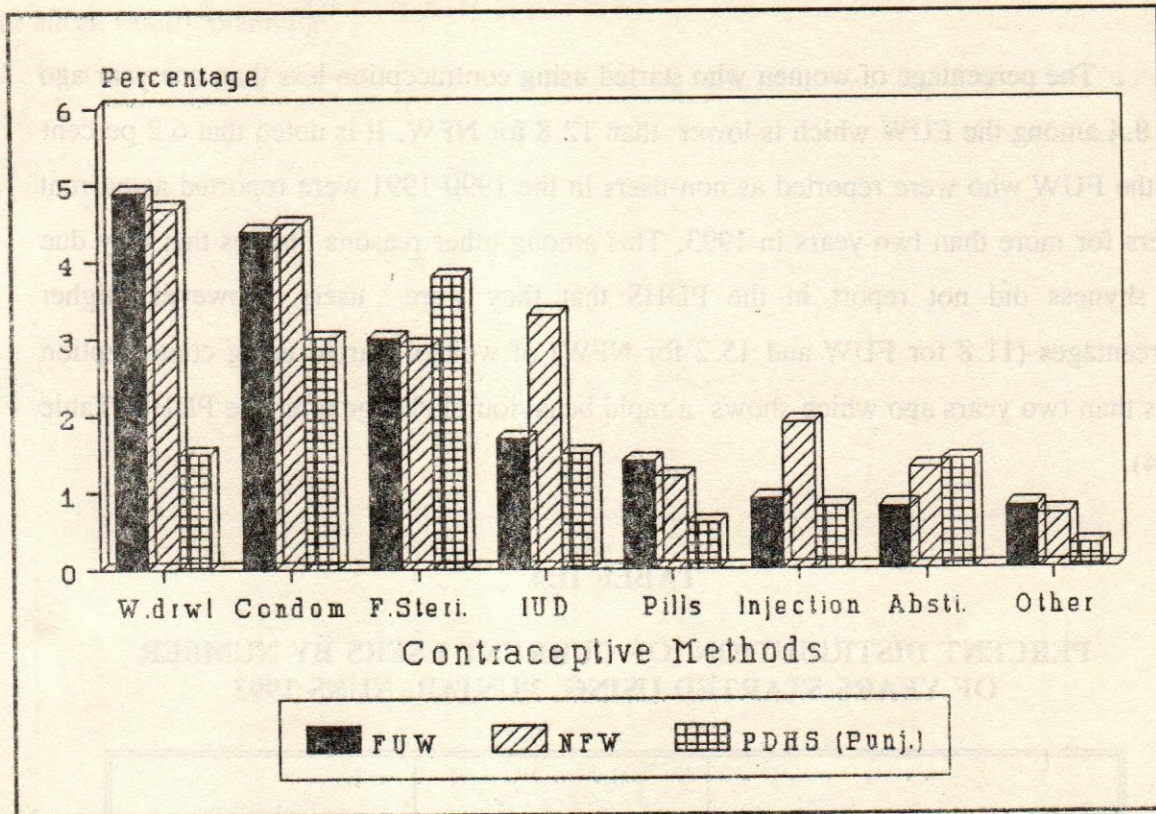
PERCENT DISTRIBUTION OF MARRIED WOMEN CURRENTLY USING CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993



Source Table II.3

Figure II.6

PERCENT DISTRIBUTION OF MARRIED WOMEN CURRENTLY USING CONTRACEPTIVE METHODS, PDHS 1990/91, PUNJAB, NUNS 1993



Source Table II.3

In 1990-91 PDHS, it was reported that 13 percent of currently married women from Punjab province were currently using some methods to delay or prevent pregnancy but the present survey NUNS reveals that approximately 18 percent of the FUW (who were non-user in 1990/91 PDHS) are currently using some family planning methods to delay pregnancy. In the case of NFW, 21 percent are using the family planning methods. These rates are significantly higher than the 1990/91 PDHS level (13.0 percent for Punjab and 11.8 percent for the nation).

This break-through in a period of two years may be an indication that the programme is taking off. Also, it is possible that some actual users might have been more shy to divulge at the time of PDHS that they were users and after couple of inquiries they became more open.

The percentage of women who started using contraception less than one year ago is 8.4 among the FUW which is lower than 12.8 for NFW. It is noted that 6.2 percent of the FUW who were reported as non-users in the 1990-1991 were reported as current users for more than two years in 1993. This among other reasons implies that they due to shyness did not report in the PDHS that they were users. However, higher percentages (11.8 for FUW and 15.2 for NFW) of women started using contraception less than two years ago which shows a rapid behavioural change after the PDHS (Table II.4).

TABLE II.4

PERCENT DISTRIBUTION OF CURRENT USERS BY NUMBER OF YEARS STARTED USING, PUNJAB, NUNS 1993

Duration of Current Use	FUW 1993	NFW 1993
Less Than One Year	8.4	12.8
More Than One Year But Less Than Two Years	3.4	2.4
More Than Two Years	6.2	5.8
Not Using	82.0	79.0
Percent	100	100
Number	844	164

CHAPTER III

REASONS FOR NON-USE

In spite of the break through in the CPR still the larger proportion of non-users remained non-users. In quest of reasons for non-use of contraceptive methods, 16 causes were listed to facilitate classifications of the responses into the most appropriate reasons for not practicing any contraceptive method. The results are presented in table III.1 in the order of frequency of FUW.

TABLE III.1

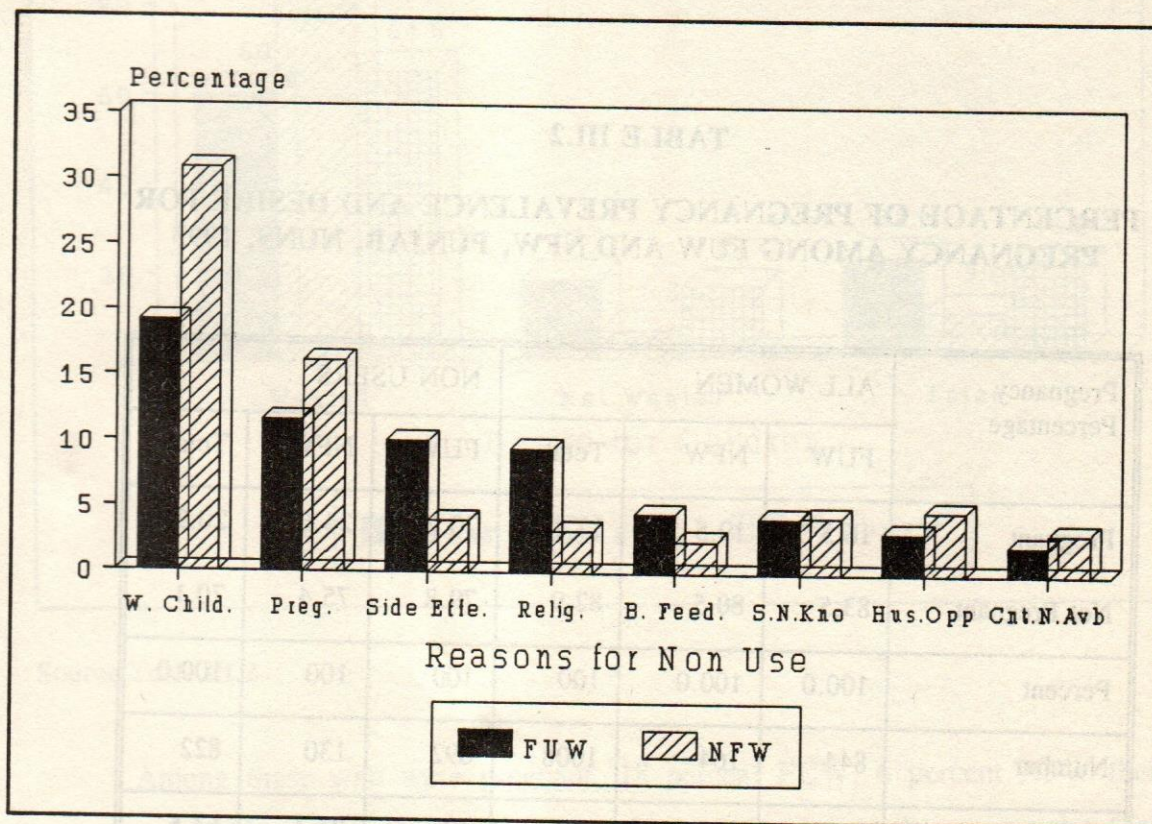
PERCENT DISTRIBUTION OF NON-USERS OF FAMILY PLANNING METHODS DUE TO SPECIFIC REASONS, PUNJAB, NUNS 1993

Reasons For Non-Use Of Contraceptive Methods	FUW 1993	NFW 1993
Want Children	19.2	30.9
Pregnant	11.6	16.2
Fear Of Side Effects	10.1	4.0
Religion	9.5	3.2
Other	5.5	4.3
Breast Feeding	4.6	2.5
Source Not Known	4.3	4.4
Husband Absent	3.7	3.7
Opposition From Husband Or Other Family Members	3.2	4.9
Menopause	2.4	-
Secondary Sterility	2.4	-
Contraceptives Not Available	2.3	3.2
Poor Health	1.2	1.2
Using Traditional Methods	0.6	0.5
Contraceptives Are Expensive	0.8	-
Failure Of Contraceptives	0.6	-
Users	18.0	21.0
Percent	100	100
Number	844	164

It is noted that some of these reasons are genuine, some are beyond the control of FUW and NFW and others are programme related.

Figure III.1

PERCENT DISTRIBUTION OF NON-USERS OF FAMILY PLANNING METHODS DUE TO MAJOR REASONS, PUNJAB, NUNS 1993



Source Table III.1

III.I WANTED CHILDREN AND PREGNANT

Of the FUW non-users 19 percent gave the reason for non-use that they wanted children and 11.6 percent reported that they were pregnant. Similarly of NFW non-users 30.9 percent wanted children and 16 percent were pregnant (Table III.1). The major

reasons such as "want more children" and "respondent was pregnant" were mainly offered by those who were young and had not yet completed their desired family size. Or, some pregnancies had occurred due to non-availability of services and were unwanted. This has been shown in Table III.2. It is revealed that 16.5 percent of FUW were pregnant and the rest who included contraceptive users were not pregnant. Similarly among NFW and both groups combined 19.5 percent and 17 percent respectively were pregnant and the rest were not pregnant.

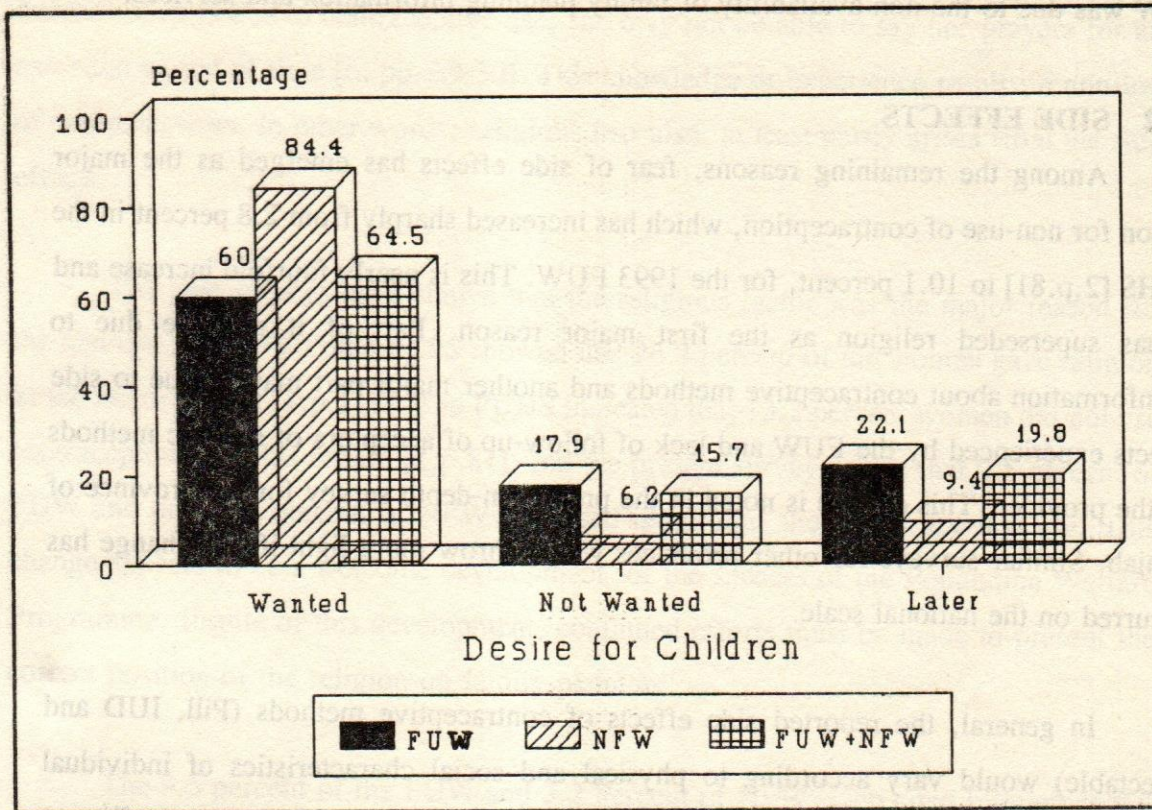
TABLE III.2

PERCENTAGE OF PREGNANCY PREVALENCE AND DESIRE FOR PREGNANCY AMONG FUW AND NFW, PUNJAB, NUNS, 1993

Pregnancy Percentage	ALL WOMEN			NON USERS		
	FUW	NFW	Total	FUW	NFW	Total
Pregnant	16.5	19.5	17.1	20.2	24.6	20.9
Not Pregnant	83.5	80.5	82.9	79.8	75.4	70.1
Percent	100.0	100.0	100	100	100	100.0
Number	844	164	1008	692	130	822
Wanted	60.0	84.4	64.5	60	84.4	64.5
Not Wanted	17.9	6.2	15.7	17.9	6.2	15.7
Wanted Later	22.1	9.4	19.8	22.1	9.4	19.8
Percent	100.0	100.0	100.0	100.0	100.0	100.0
Number	140	32	172	140	32	172

Figure III.2

PERCENTAGE OF PREGNANCY PREVALENCE AND DESIRE FOR PREGNANCY AMONG FUW AND NFW, PUNJAB, NUNS, 1993



Source Table III.2

Among those who were pregnant, 18 percent FUW, 6 percent NFW (being younger) and 15 percent of both groups combined did not want the pregnancies (Table III.2). Also among the pregnant FUW 22 percent, among the pregnant NFW 9 percent and among the pregnant both groups combined 20 percent wanted to postpone their pregnancies. In other words 40 percent of the pregnancies of FUW and 16 percent pregnancies of NFW were unwanted and unplanned and could have been avoided if proper information and services were available.

Thus the pregnancies which according to table III.1 accounted for 11.6 percent

of the non-use of FUW and 16 percent of non-use of NFW actually explained only 7 percent of the non-use in case of FUW and 13.3 percent of the non-use of NFW. The remaining non-use of 4.6 percent in the case of FUW and 2.7 percent in the case of NFW was due to the non availability of family planning information and services.

III.2 SIDE EFFECTS

Among the remaining reasons, fear of side effects has emerged as the major reason for non-use of contraception, which has increased sharply from 2.8 percent in the PDHS [2,p.81] to 10.1 percent, for the 1993 FUW. This is nearly fourfold increase and it has superseded religion as the first major reason. Part of it may be due to disinformation about contraceptive methods and another major part may be due to side effects experienced by the FUW and lack of follow-up of acceptors of specific methods by the provider. This change is noted in the present in-depth survey for the province of Punjab. Similar surveys for other provinces would throw more light if this change has occurred on the national scale.

In general, the reported side effects of contraceptive methods (Pill, IUD and Injectable) would vary according to physical and social characteristics of individual acceptors and the quality of care taken in usage. Side effects may vary according to women's, endogenous hormone levels, body weight and nutritional status [4,pp.39-50]. Prior knowledge of side effects experienced by others also leads to non-use of contraception.

Most commonly reported side effects of the use of contraception are headaches, nausea, irritability, dizziness, tiredness, inter-menstrual spotting, bleeding, backache, abdominal pain, weight gain, vomiting and hair loss [5,pp.116-121]. There is a controversy that contraceptives can increase risk of breast cancer, cervical cancer and of cardiovascular diseases [4,pp.39.50]. Those women who are not well-informed or are ill-informed about the side effects, fear the use of contraceptives.

III.3 RELIGION

Religion has often been cited as the major reason for non-use of contraception. One religion based argument is that, if a woman profusely bleeds for more than usual number of days due to contraceptive use, she may not be able to say her prayers for an extended period of time [6, pp. 39-50]. This knowledge or experience results in non-use of contraceptives. In other words, religious fear also, at least partly arises from the side effects.

The past surveys have shown that the religious factor was the major reason for the non-use. The 1984/1985 PCPS showed that 26.2 percent of the women gave religion as the major reason [1,p.117]. The PDHS indicated that 13.2 percent women did not use contraceptives for this reason [2,p.81]. But the present survey shows that 9.5 percent of FUW and only 3.2 percent of NFW advanced religion as the reason for non use. This change appears to be a welcome development for the success of the Population Welfare Programme. In spite of this development, continued efforts must be made to present the correct position of the religion on family planning.

The 9.5 percent of the FUW and 3.2 Percent of NFW, who cited religion as the sole cause for their non-use of contraceptive methods were not clear whether they were prompted by their own perception about specific religious injunction or they had a fatalistic attitude towards life or the size of their family. These two are very different reasons for not practicing family planning: one is a "particularized" decision based on specific perception and the other represents a "generalized" attitude of apathy towards planning one's family, or more likely planning one's life in general [7,pp.20-29].

III.4 BREAST FEEDING

Although a substantial proportion of FUW (4.6 percent) gave breast-feeding as the reason for non-use of family planning method, the average duration of breast-feeding according to the 1990/91 PDHS is around 20 months, but the concept of full breast-feeding and insusceptibility are not clear to most of the women. The women often think

that they are safe from the risk of pregnancy if they continue breast-feeding and do not use any contraceptive method. This notion is not entirely correct.

The PDHS results showed that the breast-feeding median insusceptibility was 7.5 months and the mean was 10.3 months [2, Table 7.8]. There is an urgent need for the dissemination of correct and complete information about the impact of breastfeeding on the risk of pregnancy among the women. This should be done by the family planning workers and traditional birth attendants through inter-personal contact.

III.5 SOURCE NOT KNOWN

The knowledge about the availability of contraceptive methods is still lacking. Not all the people, living in the vicinity in which family planning outlet is located, know that source to obtain contraceptive methods. Table III.1 shows that 4.3 percent of FUW and 4.4 percent of NFW did not know the source and 2.3 percent of FUW and 3.2 percent of NFW reported non availability of contraceptives.

The PDHS 1990/91 showed that 10 percent of the respondents had no knowledge of source of family planning methods [2,p.69] which is significantly higher than 4.3 percent of FUW and 4.4 percent of NFW in present study. This shows an improvement after a short period of two years and indicates that knowledge has increased substantially about the source from where to obtain the contraceptives. However, as is shown by the analysis in section III.1, 4.5 percent non-use in case of FUW and 2.6 percent non-use in case of NFW were also due to non-availability of family planning information and/or services. Thus more efforts towards improving the family planning information, services and particularly about the source, should continue without any break.

The need is urgent for the dissemination of the complete information about the sources from which contraceptive methods and services can be obtained in each community. Display of the family planning board is not enough as most of the women are illiterate or they do not go around. The programme should ensure that the effective

out-reach approach and interpersonal contacts are extended to all prospective clients in each community and services are made available at the door steps of the clients to the extent possible.

III.6 HUSBAND ABSENT

It is apparent from table III.1 that 3.7 percent of FUW and the same percentage of NFW mentioned that the foremost reason for their non-use of contraceptives was the absence of their respective husbands who were either working outside their district of residence or were out of the country. However, there is embraced evidence that husbands visit once or twice a year has the pregnancy risk.

III.7 OPPOSITION OF HUSBAND OR OTHER FAMILY MEMBERS

Family pressure is another factor which is frequently mentioned as the reason for the non-use of contraceptives. Many women are not able to use contraception if their husbands, in-laws, in particular mother-in-laws or other relatives do not approve. Table III.1 shows that 3.2 percent of FUW and 4.9 percent of NFW did not use contraceptives as their husbands or other family members opposed.

While it is encouraging to note that the percentage of FUW and NFW who gave this reason has decreased from 6.4 percent in PDHS [2,p.81], some women who use contraceptives do it secretly because of the fear of their husbands or other family members or both. Women also fear if they use the contraceptives secretly, and their husbands find it out, they will be embarrassed. Women with weak intention about use of contraceptives are easily discouraged by the fear of social disapproval. This points to the urgent need for devising a strategy for educating the husbands and also the in-laws.

In the cultural setting of the country, there is a shyness and even husband and wife do not communicate with each other about family planning. This is at least partly due to illiteracy and lack of adequate education. Special assistance must be provided to illiterate and low educated couples.

III.8 CONTRACEPTIVES NOT AVAILABLE

As discussed in section III.5, inaccessibility of contraceptives is not only due to lack of knowledge about the source but it is also due to the shortage at the family planning outlets. It seems that there is an increase in the complaint that the contraceptives are not available. In the PDHS only 0.8 percent of respondents made this complaint where as in this survey 2.3 percent of FUW and 3.2 percent of NFW said that contraceptives were not available (Table III.1). This complaint implies that if contraceptives were available, the complainants would have used the contraceptives.

FWCs are supposed to be the major source of supply of contraceptive methods. Also these outlets are far and few in number and it is disappointing as well as frustrating for the clients, if they are not provided with desired family planning services and supplies. Provision of efficient family planning services and supplies to the full satisfaction of all the clients at all the FWCs and other family planning outlets must be ensured to enhance the coverage to those whose needs and demands are not being met. Each outlet must have at least six months supply of the contraceptive methods.

III.9 POOR HEALTH

Around 1.2 percent of the FUW and 1.2 percent NFW narrated that because of their poor health they did not use any contraceptive methods. Poor health was attributed to diabetes, blood pressure, anemia and heart problems as stated by the respondents in the follow-up survey. Some of the women might have given poor health as a mere excuse for not using contraception.

On the other hand poor health could be a genuine reason for using the contraception to avoid pregnancy and risk of mortality. These women deserve special attention and provided adequate information for obtaining medical treatment and appropriate contraceptive method if necessary.

III.10 FAILURE OF CONTRACEPTIVES

Only 0.6 percent of the FUW complained about the failure of contraceptives as the reason for their non-use of contraceptive. In the survey a question was asked whether women themselves experienced failure of contraceptives or they heard about it. The results had not been tabulated by the time this report was being prepared but the impression from the field was that both, the woman's own experience of failure of contraceptive as well as rumours about the failure of contraceptive methods were cited as reasons for non-use. The failure of contraceptive methods is often the outcome of improper application of contraceptive methods and insufficient knowledge about their use [6, pp. 39-50].

If a woman is not made aware of pros and cons of the consequences of contraceptives before using, her experience may have negative impact on the programme [8, pp. 51-64]. Particularly in the rural settings women often talk to each other about such matters as side effects or failure of contraceptive methods. Thus the family welfare outlets must be careful and vigilant about such incidents and they should advise clients to use low-failure methods.

III.11 CONTRACEPTIVES ARE EXPENSIVE

It was noted in the 1990/91 PDHS that 15.5 percent of the current users of pill, on the average paid rupees eight for one packet of oral pill, 41.2 percent of IUD users paid rupees 100 per insertion, 15.1 percent of users of injectables paid rupees 102 per injection, 19.7 percent of condom users paid rupee one per piece and 72.6 percent of sterilized women on the average paid rupees 2740 per case [2,p.71].

In the present survey, although no such question on the cost of contraceptives was asked from the respondents, the item "expensive" as one of the categories of reasons for not using contraceptive methods was included. As shown in table III.1 only 0.8 percent of FUW reported that contraceptive methods were expensive and they also mentioned to the interviewers that some family planning workers sell contraceptive methods at a higher

be replacing the religion as the major reason for non-use.

As the CPR increases which is very likely, more and more complaints about side effects are expected to emerge. Continuous follow-up, immediate treatment of side effects and promotion of effective contraception to reduce failure rate along with continuous and relevant IEC messages must accompany the efficient service delivery programme.

This is the general picture with regard to the desire for children which is one of the basic input for determining the unmet need for family planning. The higher score of NPW over FFW and 42 percent of NPW wanted more children. The higher score of NPW over FFW on wanting more children is mainly due to the former were younger, more recently married and had less frequent number of children ever born (2.48 than the later (3.47)).

TABLE IV.1
PERCENTAGE OF FFW AND NPW BY DESIRE FOR CHILDREN AND CONTRACEPTIVE USE, BURUNDI, 1993

Desire	FFW		NPW	
	Total	Users	Total	Users
Want More	26.3	32.3	47.6	32.4
Don't Want More	73.7	67.7	52.4	67.6
Percent	100.0	100.0	100.0	100.0
Number	152	602	844	34

CHAPTER IV

UN-MET NEED FOR CONTRACEPTION

IV.1 DESIRE FOR CHILDREN

Table IV.1 shows the position of FUW and NFW with regard to the desire for more children by the status of contraceptive use. It is observed that irrespective of the use status 48 percent of FUW wanted more children and their majority (52 percent) did not want any more children. On the other hand majority (65 percent) of NFW wanted more children and only 35 percent wanted no more. Among the non-users 52 percent of FUW and 75 percent of NFW wanted more children. The higher score of NFW over FUW on wanting more children is mainly due to the former were younger, more recently married and had less mean number of children ever born (2.64) than the later (3.47). This is the general picture with regard to the desire for children which is one of the basic input for determining the unmet need.

TABLE IV.1

PERCENTAGE OF FUW AND NFW BY DESIRE FOR CHILDREN AND CONTRACEPTIVE USE, PUNJAB, NUNS 1993

Desire	FUW			NFW		
	Users	Non-Users	Total	Users	Non-Users	Total
Want More	26.3	52.3	47.6	32.4	75.0	65.2
Don't Want More	73.7	47.7	52.4	67.6	25.0	34.8
Percent	100.0	100	100.0	100.0	100.0	100
Number	152	692	844	34	130	164

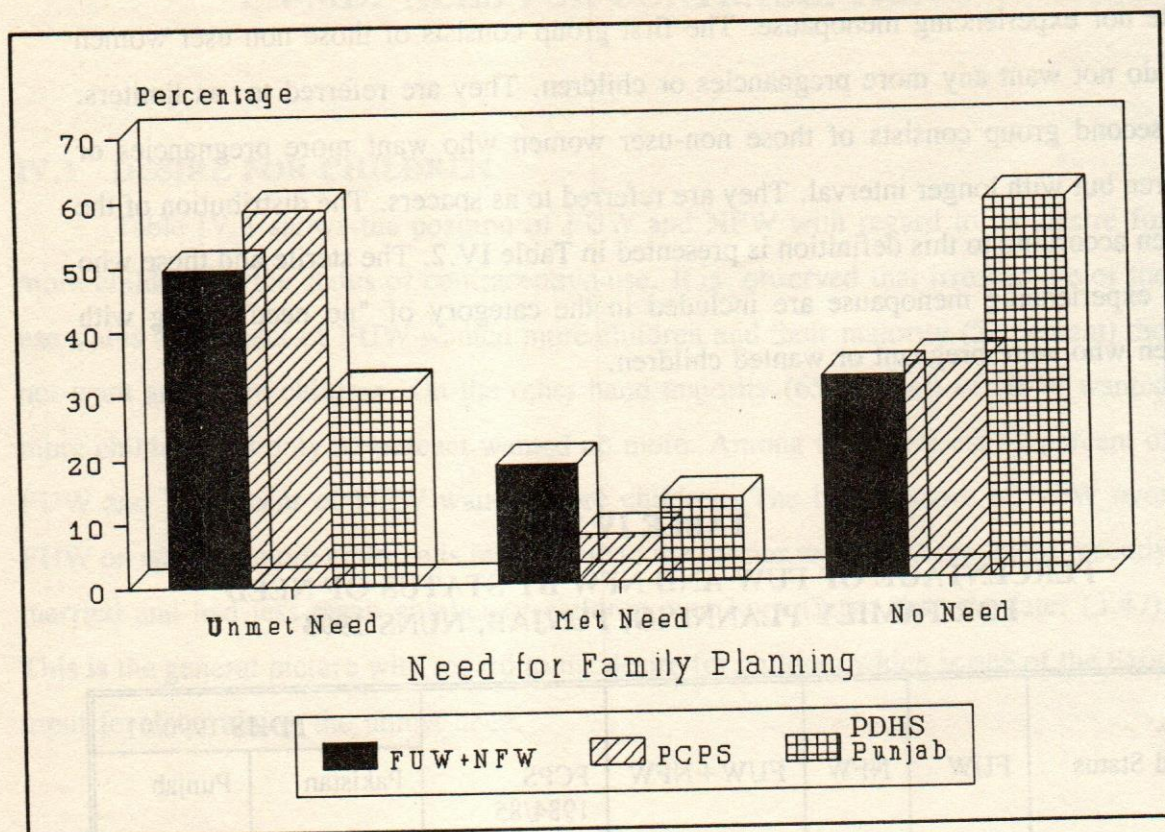
IV.2 UN-MET NEED

Un-met need is determined by the percentage of two groups of currently married women in age span 15-49 who are not using any contraception and those who are neither sterile nor experiencing menopause. The first group consists of those non-user women who do not want any more pregnancies or children. They are referred to as limiters. The second group consists of those non-user women who want more pregnancies or children but with longer interval. They are referred to as spacers. The distribution of the women according to this definition is presented in Table IV.2. The sterile and those who were experiencing menopause are included in the category of "no need" along with women who were pregnant or wanted children.

TABLE IV.2
PERCENTAGE OF FUW AND NFW BY STATUS OF NEED
FOR FAMILY PLANNING, PUNJAB, NUNS 1993

Need Status	FUW	NFW	FUW + NFW	PCPS 1984/85	PDHS 1990/91	
					Pakistan	Punjab
Unmet Need	50.7	43.9	49.6	58.6	28.0	30.4
Limiters	33.5	20.1	31.3	23.4	17.6	19.0
Spacers	17.2	23.8	18.3	35.2	10.5	11.4
Met Need	18.0	21.0	18.5	7.6	11.8	13.0
No Need	31.3	35.1	31.9	33.8	60.2	56.6
Percent	100.0	100	100	100.0	100.0	100.0
Number	844	164	1008	7407	6364	3768

Figure IV.1
PERCENTAGE OF FUW AND NFW BY STATUS OF NEED FOR
FAMILY PLANNING, PCPS 1984/85, PUNJAB, NUNS 1993



Source Table IV.2

It is observed that 33 percent of FUW, 20 percent NFW and 31 percent both combined did not want any more children, they were not experiencing sterility and menopause and were not using any contraception. Then there were 17 percent of FUW, 24 percent of NFW and 18 percent of both combined who wanted more spacing between births but were not using any contraception. Thus there were 51 percent FUW, 44 percent NFW and 50 percent FUW and NFW combined whose need for family planning information, services and supplies were not being met.

Those whose need was being met consisted of 18 percent FUW, 21 percent NFW and 19 percent of both these groups combined. This means that in total 69 percent of

FUW , 65 percent of NFW and 68 percent of both FUW and NFW combined had the need, out of which need of only 26 to 32 percent was being met.

The un-met need of contraception of the limiters and spacers as calculated from PCPS 1984/85 was 58.6 percent, composing of 35.2 percent currently married women 15-49 who were non-users and wanted to have next child after one year and 23.8 percent who did not want any more children [1,p.118]. The PDHS 1990/91 reported for Punjab that 11.4 percent women wanted to wait for two or more years for their next birth and 19.0 percent did not want any more child [2,p.103]. In other words, the total unmet need in Punjab according to 1990/91 PDHS was 30.4 percent. From this, it appears that there is a difference in the definition of period of postponement of the spacers.

The present survey data show that the un-met need for women who wanted to limit their births was 33 percent for FUW and 20 percent for NFW. The un-met need for women who wanted to space their births irrespective of the period was 17 percent for FUW and 24 percent for NFW.

The Un-met need of women who wanted to have next child, after one but before two years was 7.0 percent for FUW and 8.5 percent for NFW, and the women who wanted to have next child, after two but before three years was 7.1 percent for FUW and 9.1 percent for NFW, and the women who wanted to have next child, after three but before four years was 2.1 percent for FUW and 4.3 percent for NFW, and the women who wanted to have next child, after four or more years was 1.0 percent for FUW and 1.9 percent for NFW.

Further analysis is confined to the FUW and the combined FUW and NFW data as the numbers of NFW are too small for further distribution. Attempt is made to transform the present study data to conform to the definition of PCPS and PDHS.

The total un-met need of FUW who wanted no more children or wanted to have

a child after one year was $33.5+7.0 = 40.5$ percent. This figure is comparable to the PCPS figure of unmet need. Those follow up women who wanted to have no more children or wanted to have next child after two or more years were: $33.5+10.2 = 43.7$ percent. This figure is more or less comparable with the corresponding figure of PDHS.

This shows that as compared with PCPS, the unmet need has decreased from 58.6 percent in 1984/85 to 40.5 percent in 1993. But as compared with PDHS it has increased from 30.5 percent in 1990/91 [2,p.103] to 43.7 percent in 1993. However, it is cautioned that in spite of the transformation the figures may not be strictly comparable. But it seems that observable changes in the level of knowledge and use of contraception might have some impact on the unmet needs for different reasons. On the other hand percentages of limiters from three survey shows less fluctuation as compared to the percentages of spacers (Table 1V.2).

IV.3 REASONS FOR UNMET NEED OF LIMITERS

Table IV.3 exhibits reasons for non-use of contraception of those women who did not want any more children. More detailed analysis of these reasons has been presented in chapter III in the context of general non-use.

From these reasons it appears that the need for the use of contraception had disappeared for 12.8 percent FUW non-users which include 6.7 percent who became secondarily sterile and 6.1 percent who reached the meno-pause stage. As shown earlier they have been excluded from the women whose need was not being met.

Table IV.3 shows that the major reasons which deserve special consideration of the programme are the "fear of side effects" and "religion". The largest percentage of 17.6 of those FUW who did not want any more children and were not using contraception, reported fear of side effects as the reason for non-use. This fear is expected to be a major challenge to the PWP. While fear of religion is declining, still it is the second important factor in the non-use and was stated by 15.4 percent of the

FUW who did not want any more children.

Other reason which was advanced by 10.6 percent of limiters was pregnancy. Since they did not want any more children their pregnancy in most cases was unwanted. The survey data show that 18 percent of the pregnant FUW and 6.2 percent of the pregnant NFW stated that their pregnancies were unwanted. However, after the termination of their pregnancies they would need family planning services and they are the integral part of those whose need was not being met.

Next to pregnancy, 5.7 percent reported that as they were breastfeeding, they did not need any more contraceptive method. They believed that so long as they were breastfeeding they were safe from the risk of pregnancy. More information should be provided to the women about the period of insusceptibility from the risk of pregnancy.

Then some FUW who did not want any more children gave somewhat vague reasons. For example 5.0 percent said that they had the ability to naturally control their births. May be they were using withdrawal, abstinence or some other method and they did not consider these as methods. But they also need more information and effective methods. In case of another 5.0 percent their husbands were absent. Since they were limiters they should be using contraception when their husbands return. They also need information about the source and availability of contraception.

There were 4.2 percent FUW who were experiencing postpartum amenorrhoea, but they are also in urgent need of information about the safe period and effective contraception.

Still another group (4.2 percent) stated that they had miscarriages or had tumor or were using TAVEEZ (emulate) from PIR (spiritual healers). This group also is in need of more information and effective contraceptive methods.

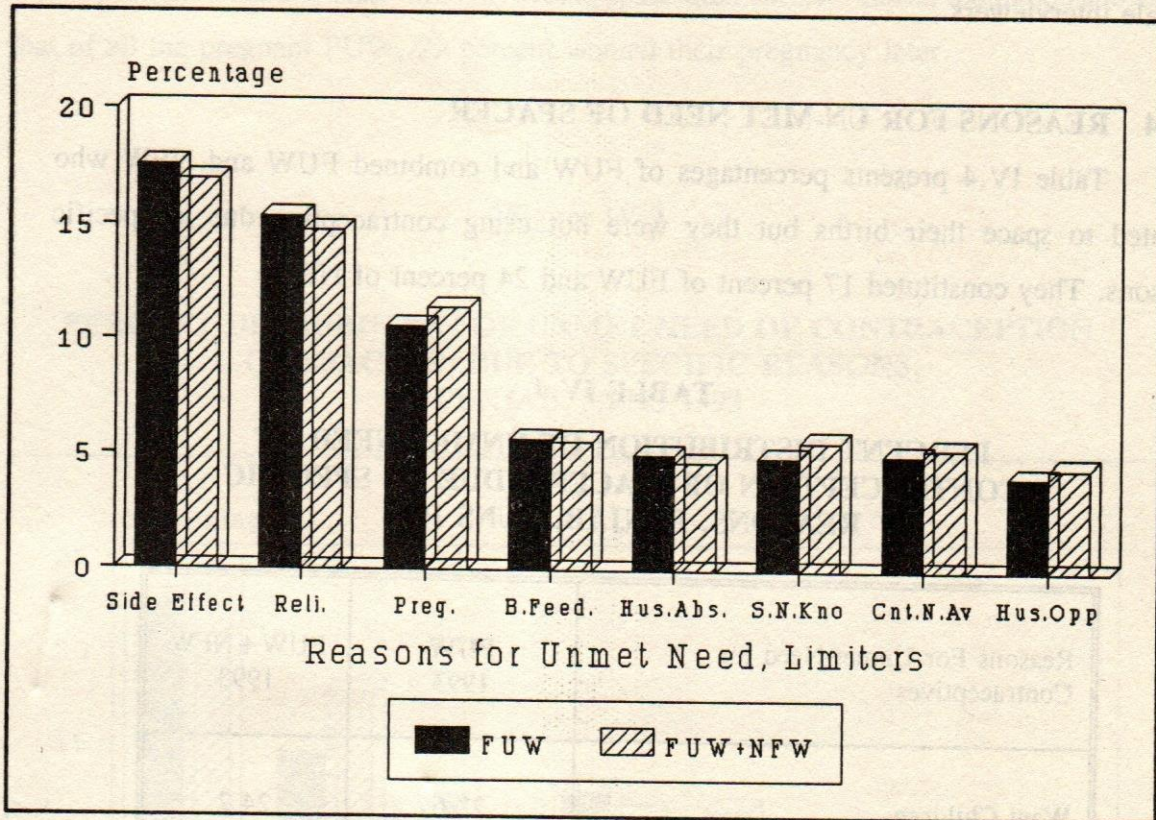
As the number of NFW who did not want any more children was only 33, they have been combined with FUW and the result is shown in column 2 of table IV.3. The combined scores show minor changes due to the averaging effect. Slight decline in the values of "fear of side effects" and "religion" and rise in the categories "source not

TABLE IV.3
PERCENT DISTRIBUTION OF UN-MET NEED OF CONTRACEPTION
OF FUW AND NFW COMBINED NON-USERS WHO DID
NOT WANT ANY MORE CHILDREN, BY REASONS
FOR NON-USE, PUNJAB, NUNS 1993

Reasons For Un-Met Need Of Contraceptives	FUW 1993	FUW+NFW 1993
Fear of Side Effects	17.6	17.0
Religion	15.4	14.8
Pregnant	10.6	11.4
Secondary Sterility	6.7	6.5
Menopause	6.1	5.6
Breast Feeding	5.7	5.6
Natural Spacing	5.0	5.1
Husband Absent	5.0	4.7
Source Not Known	4.9	5.6
Contraceptives Not Available	5.0	5.3
Postpartum Amenorrhoea	4.2	4.5
Other	4.2	3.9
Opposition From Husband Or Other Family Members	4.1	4.5
Poor Health	2.1	2.2
Failure of Contraceptive	1.5	1.4
Contraceptive Are Expensive	1.3	1.1
Using Traditional Methods	0.6	0.8
Percent	100	100
Total	326	359

Figure IV.2

PERCENT DISTRIBUTION OF UN-MET NEED OF CONTRACEPTION OF FUW AND NFW COMBINED NON-USERS WHO DID NOT WANT ANY MORE CHILDREN, BY MAJOR REASONS FOR NON-USE, PUNJAB, NUNS 1993



Source Table IV.3

known" and "contraceptive methods not available" were expected as the NFW were at the outset of their matrimonial life and were younger than the FUW, their knowledge of the source was found to be less in comparison with the knowledge of FUW. Similarly, for the same reason the combined percentage has increased for "contraceptive methods not available". Some increase has also occurred in the percentage of those who announced the reason that they were unable to use contraception as their husbands or other family members opposed.

The probability of under-reporting of the use of contraceptive methods cannot be ruled out due to the socio-cultural milieu. The interviewers who were females observed that most of the women were shy to talk about sexual matters and contraceptive use in front of other family members, and some were even hesitant to talk these matters with female interviewers.

IV.4 REASONS FOR UN-MET NEED OF SPACER

Table IV.4 presents percentages of FUW and combined FUW and NFW who wanted to space their births but they were not using contraception due to specific reasons. They constituted 17 percent of FUW and 24 percent of NFW.

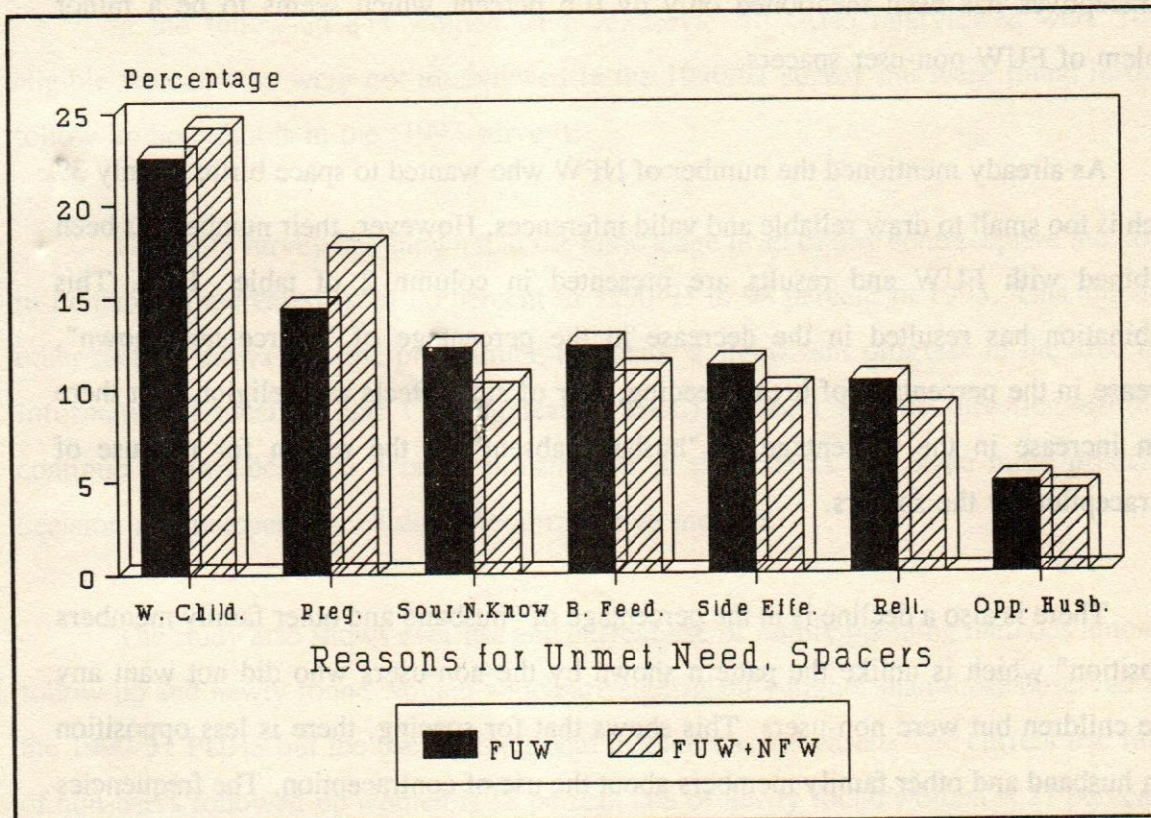
TABLE IV.4
PERCENT DISTRIBUTION OF UNMET NEED OF
CONTRACEPTION OF SPACERS, DUE TO SPECIFIC
REASONS, PUNJAB, NUNS 1993

Reasons For Unmet-Need for Contraceptives	FUW 1993	FUW+NFW 1993
Want Children	22.6	24.2
Pregnant	14.4	17.7
Source Not Known	12.2	10.3
Breast Feeding	12.3	10.9
Fear of Side Effects	11.2	9.8
Religion	10.3	8.6
Husband Absent	7.0	8.2
Opposition From Husband Or Other Family Members	4.9	4.4
Natural Spacing	2.7	2.1
Using Traditional Methods	1.8	1.6
Contraceptive Not Available	0.6	1.1
Postpartum Amenorrhoea	-	1.1
Percent	100	100
Total	145	184

The spacers show somewhat different pattern of reasons than the limiters. The FUW though wanted to space births but still 22.6 percent wanted to have more children, another 14.4 percent were pregnant. Those who were pregnant and wanted to space, provide an indication that their pregnancy occurred too early and was perhaps unplanned which prompted them to state that they would space their births. Special tabulation shows that of all the pregnant FUW, 23 percent wanted their pregnancy later.

Figure IV.3

PERCENT DISTRIBUTION OF UNMET NEED OF CONTRACEPTION OF SPACERS, DUE TO SPECIFIC REASONS, PUNJAB, NUNS 1993



Source Table IV.4

Among FUW, who were desirous of birth spacing 12.2 percent were found lacking knowledge about the source of contraceptive methods, while 12.3 percentage of FUW were not using contraception, since they were breast-feeding their infants, which they considered as a contraceptive device. The side effect scare is another important reason for non-use of contraception which was expressed by 11.2 percent of FUW.

The hypothesis of religious prohibition has been advanced by another 10.3 percent of FUW, which is cited as next to fear of side effects. Though Pakistani society is regarded as a predominantly male-dominated, nevertheless, the findings of the survey portray that only 4.9 percent FUW cited opposition from husband or other family members as the reasons for the non-use of contraception. However, 7.0 percent of FUW stated husband's absence as specific reason for the non-use. Non-availability of contraceptives has been mentioned only by 0.6 percent which seems to be a minor problem of FUW non-user spacers.

As already mentioned the number of NFW who wanted to space births is only 39 which is too small to draw reliable and valid inferences. However, their number has been combined with FUW and results are presented in column 2 of table IV.4. This combination has resulted in the decrease in the percentage of "source not known", decrease in the percentage of breast feeding, fear of side effects and religion. But there is an increase in the percentage of "husband absent" as the reason for non-use of contraception by the spacers.

There is also a decline in the percentage of "husband and other family members opposition" which is unlike the pattern shown by the non-users who did not want any more children but were non-users. This shows that for spacing, there is less opposition from husband and other family members about the use of contraception. The frequencies and percentages of other reasons are too small to draw any valid conclusions.

CHAPTER V

CONCLUSIONS AND RECOMMENDATIONS

The National Institute of Population Studies (NIPS) conducted a national study "Pakistan Demographic and Health Survey (PDHS)" in 1990/1001. During 1993 NIPS undertook a follow-up study of those married women 15-49 years of age in Punjab province who reported in the 1990/91 survey that they were non-users of family planning.

In the follow-up 844 women were reinterviewed. Also interviewed were 164 eligible women who were not interviewed in the 1990/91 survey but were found in the follow-up households in the (1993 survey).

The 1993 survey has shown that the knowledge level of any contraceptive method in Punjab has increased from 80 percent in 1990/91 to 94 percent in 1993. This among other factors shows that the programme has made a significant progress in the area of Information Education and Communication (IEC). Efforts in this direction should continue to provide more detailed information so that clients can make more prudent decision and independent choice of contraceptive method.

The study also shows ever use and current use of family planning methods among follow-up and newly found women which are significantly higher than those observed in the 1990/91 PDHS but the use of traditional method has increased. The current use rate of non-users followed-up women is 18 percent and of newly found women is 21 percent.

Although significant number of 1990/91 non-users became users by 1993, there

is some indication that some non-users in the PDHS were actually users but they were shy to admit this at that time.

The 1993 survey showed that 12 percent of followed-up women and 16 percent of newly found women were pregnant. The reinterviews and interviews revealed that 40 percent of the pregnancies of followed-up women and 16 percent pregnancies of newly found women were unwanted and unplanned. These are high proportions and could have been reduced or avoided if proper information and services were made available to them at their door steps. Those women who are not well-informed or are ill-informed about the side effects, fear the use of contraceptions and become pregnant against their will.

In the previous studies religion has often been cited as the major reason for non-use of contraception. Although the proportion of women citing religion as one of the reasons for non-use, has declined comparatively in this study, yet it still is a significant factor. One religion based argument is that, if a woman profusely bleeds for more than usual number of days due to contraceptive use, she may not be able to say her prayers for an extended period of time. This knowledge or experience results in non-use of contraceptions. In other words, religious fear also, at least partly arises from the side effects. Continued efforts must be made to provide wider choice of methods, information on methods available, use of methods, potential side effects, services available and correct position of the religion on family planning.

There is an urgent need for the dissemination of correct and complete information about the impact of breastfeeding on the risk of pregnancy among the women. This should be done by the family planning workers and traditional birth attendants through inter-personal contact.

The knowledge about any contraceptive method has increased significantly but about the availability of contraceptive methods, it is still lacking. While efforts towards improving the knowledge about family planning should continue provision of more

information, particularly, about the source of supply is urgently needed.

It is interesting as well as surprising to note that 51 percent of the followed-up women and 44 percent of newly found women either wanted no more pregnancies or births or wanted to space their pregnancies but they were not using any contraception.

The need is urgent for the dissemination of the complete information about the sources from which contraceptive methods and services can be obtained in each community. Display of the family planning board is not enough as most of the women are illiterate or they do not go around. The programme should ensure that the effective out-reach approach and interpersonal contacts are extended to all prospective clients in each community and services are made available at the door steps of the clients to the extent possible.

Women also fear if they use the contraceptives secretly, and if their husbands find it out, they will be embarrassed. Women with weak intention about use of contraceptives are easily discouraged by the fear of social disapproval. This points to the urgent need for devising a strategy for educating the husbands and also the in-laws. A study of male attitude and motivation towards family planning is urgently needed.

In the cultural setting of the country, there is a shyness and even husband and wife do not communicate with each other about family planning. This is at least partly due to illiteracy and lack of adequate education. Special assistance must be provided to illiterate and low educated couples.

Some respondents complained that contraceptive methods were not available. They would have used the contraceptive methods if they were available. Family Welfare Centres (FWCs) are supposed to be the major source of supply of contraceptive methods. Also these outlets are far and few in number and it is disappointing as well as frustrating for the clients, if these centers are unable to provide desired family

planning services and supplies.

Provision of efficient family planning services and supplies to the full satisfaction of all the clients at all the FWCs and other family planning outlets must be ensured to enhance the coverage to those whose needs and demands are not being met. Each outlet must have at least six months supply of the contraceptive methods.

Some women give poor health as reason for non-use. In some cases poor health could be a genuine reason for using the contraception to avoid pregnancy and risk of mortality. These women deserve special attention and provided adequate information for obtaining medical treatment and appropriate contraceptive method if necessary.

The failure of contraceptive methods is often the outcome of improper application of contraceptive methods and insufficient knowledge about their use. If a woman is not made aware of pros and cons of the consequences of contraceptive methods before using, her experience may have negative impact on the programme. Particularly in the rural settings women often talk to each other about such matters as side effects or failure of contraceptive methods. Thus the family welfare providers must be careful and vigilant about such incidents and they should advise clients to use low-failure methods.

Some women also reported that contraceptive methods were expensive and they also mentioned to the interviewers that some family planning workers sell contraceptive methods at a higher price than is authorized for which they argue that the pay of family welfare staff was so meagre. This matter deserves serious consideration of the policy makers and planners. Providing free accessibility to contraception or at the proper price and improving the quality of services are among the pre-requisites for the successful implementations of population welfare programme.

Although traditional methods are not as effective as the modern methods, they are being used for two main reasons, fear of side effects and perhaps due to the belief that

modern methods are not allowed by the religion. In such cases special education and communication should be provided for shifting the couples to safer and high-continuation methods.

As the use of contraception increases which is very likely, more and more complaints about side effects are expected to emerge. Continuous follow-up, immediate treatment of side effects and promotion of effective contraception to reduce failure rate along with continuous and relevant information messages must accompany the efficient service delivery programme.

Some women who were experiencing postpartum amenorrhoea, are also in urgent need of information about the safe period and effective contraception. Still another group stated that they had miscarriages or had tumor or were using TAVEEZ (emulate) from PIR (spiritual healers). This group is also in need of more information about the treatment and effective contraceptive methods.

ABBREVIATIONS USED

1. PCPS = Pakistan Contraceptive Survey.
2. PDHS = Pakistan Demographic and Health Survey.
3. FWC = Family Welfare Centers.
4. FWW = Family Welfare Worker.
5. PWD = Population Welfare Division.
6. F.P = Family Planning.
7. FUW = Follow Up Women.
8. NFW = Newly Found Women.
9. CPR = Contraceptive Prevalence Rate

REFERENCES

1. Population Welfare Division, Pakistan Contraceptive Prevalence Survey 1984-1985, Ministry of Planning and Development, Government of Pakistan, Islamabad, 1986.
2. National Institute of Population Studies , Pakistan Demographic and Health Survey 1990-1991, IRD/Macro International Inc. Columbia, Maryland, U.S.A., 1992.
3. Rutenberg, Nomi. et.al., Knowledge And Use of Contraception, Comparative Study No.6 IRD/Macro International Inc. Columbia Maryland, U.S.A., 1991
4. Jones, E.F. Paul,L and Westoff,C.F. "Contraceptive Efficacy: The Significance of Method and Motivation", Studies in Family Planning, Vol 11, No. 2, 1980.
5. Manzoor, K et.al, Focus on Family Planning Welfare Centers Marketing Research, Perspectives, Attitudes and Knowledge about Family Planning and Family Welfare Centers, National Institute of Population Studies, Islamabad, 1991.
6. Nag, Moni "Why People Desiring Birth Control Still do not Use Contraception", Populi, Vol.13, No.2.,1986.
7. Porter, E.G."Birth Control Discontinuance as a Diffusion Process", Studies in Family Planning, Vol. 15, No 1, 1984.
8. Kar, S.B, Talbot, M.J , "Attitudinal and Non-Attitudinal Determinants of Contraception: A Cross-cultural Study", Studies in Family Planning, Vol.11, No 2, 1980.