

Role of MCH services on the uptake of contraception use in India: A reproductive calendar approach

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Abstract

This study used the reproductive calendar of National Family Health survey-4, 2015-16 to analyse the contraceptive initiation among 1,38,068 currently married women in India. A complementary log-log regression model was used to examine associations the timing of contraception initiation with MCH care at the national level. It was found that only a quarter of women in the postpartum period have adopted the modern method. The multivariate model found that the timing of contraception uptake mainly varies by the composition of children and assesses MCH services. The odds of the timing of contraception uptake were relatively lower among women who had only one male child (AOR=0.89; S.E-0.02), and also 13% of women were more likely to adopt early contraception when availed of MCH services.

In India, the proportion of women receiving MCH services has increased, but contraception initiation was not up to the mark; providing family planning services alongside the MCH services could prove efficient and effective in low resource settings. It provides an invaluable window of opportunity to educate and encourage women for early adoption of contraception.

Introduction

- Postpartum Contraceptive is of relative importance as it reduces maternal and infant mortality because of appropriate birth spacing.
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- The study's main aim is to critically examine whether different indicators of MCH care play a significant factor in initiating contraceptive use after birth. As timely intervention could reduce the unmet need for family planning and thereby avert an unwanted pregnancy.

Data

- For this study we have used the data from India DHS, conducted in 2015-16.
- The study period is restricted to 12 post-pregnancy periods because a mother and child hold a higher risk of mortality during the latter period
- For NFHS-4 the sample size was 1,38,068 currently married women in India.

Methodology

- We have used a discrete-time approach as the period in the recent survey is recorded in the nearest completed months.
- A complementary log-log link function has been used after adopting the discrete-time approach.



Figure1:Percentage Distribution of currently married women by the type of contraception used after the delivery, NFHS (2015-2016)







Table 1: Discrete Time complementary log -logmodel results on Modern contraceptive adoptionby selected covariates, NFHS, 2015-2016

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Covariate	Odds Ratio	S.E
Region of India		
North	1.00	-
South	2.25*	0.05
East	0.82*	0.02
West	1.08*	0.03
Central	0.84*	0.02
North East	0.67*	0.02
Economic status		
Poorest	1.00	_
Poorer	1.11*	0.02
Middle	1.15*	0.03
Richer	1.19	0.03
Richest	1.25	0.04
Age Group		
<25	1.00	_
25-34	1.03*	0.02
35-44	0.99*	0.02
45+	0.73	0.07
Child Composition		
No Male	1.00	-
One male	0.89*	0.02
Two Male	1.56*	0.03
Both Male and Female	1.51*	0.03
Child Loss		
No loss	1.00	-
one loss	0.93*	0.06
more than 2 loss	0.93*	0.06
Family planning	r	
knowledge	,	
Mass media	1.09*	0.02
Print Media	1.09*	0.02
Maternal and	1.11*	0.01
Child care	1.11*	0.01
Wanted Last child		
Wanted	1.00	_
Wanted later	0.99*	0.03
wanten later		
Never wanted	1.05*	0.03

Conclusion

 In India, the proportion of women receiving MCH services has increased, but contraception initiation was not up to the mark; providing family planning services alongside the MCH services could prove efficient and effective in low resource settings.
It provides an invaluable window of opportunity to educate and encourage women for early adoption of contraception.