Factors Influencing Sterilization Decision among Multiparous Women – One Year Retrospective Studyin A Premium Institute.

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Abstract:

Background:

It is estimated that globally 222 million women in developing countries are motivated for using contraception techniques but they don't use any method of contraception. The main reasons for this disparity include limited access to contraception, fear of experience of side effects, cultural or religious opposition, poor quality of available services, gender based barriers^{1,14}.

Objectives: To evaluate the factors which influences the women's decision on sterilization.

Methodology: This retrospective study conducted at Sri Ramachandra Medical Collegeduring the study period of January – December 2015 with sample size of 2097 multiparous women.

Results: Among 2097 women ,1130 patients got sterilized,967 patients did not get sterilized due to various maternal,neonatal & social factors. Anaemia contributes 40.3% among maternal factors, 65.7% of women denied sterilization due to preterm baby &22.57% deferred sterilization as they are awaiting male child. Majority of women who got sterilized were educated (70%).

Conclusion: Among the various factors influencing the women's decision on sterilization, social factors remains the most common factor which prevents the women from taking the decision of sterilization with minimal contribution from maternal and neonatal factors.

I. Introduction

Family planning is a basic tool to improve the health status of people.According to world health organization about 210 million pregnancies occur every year and among them one – third are unintended ¹⁻³. Women who hesitate to seek proper medical attention due to various reasons result in unintended or unwanted pregnancy which might end up in unsafe abortion that contributes to 13 % of maternal mortality rate every year ¹⁻⁴.

5 million women are hospitalized each year for treatment of complicationsof abortion like hemorrhageand sepsis ^{1,5,6}. Promoting sterilization among women contributes to improve maternal health, reduces child morbidity and directly influences world population thereby helps for better distribution of government health scheme ^{1,7,8,9,10}.

Global population control needs urgent attention especially in developing countries as planned family will not only improve the financial status, but also provides better existence⁹⁻¹¹. Studies shows that the factors affecting women's choices of contraception depends on the working condition, age group & education status^{12,13}.

Sterilization has been widely accepted among middle aged educated women which emphasizes the importance of women education for controlling global population explosion ^{14,15}.

Women with unintended pregnancies that are continued to term are more likely to receive inadequate / delayed antenatal care and have poorer health outcomes than women with planned pregnancies such as low infant birth weight and higher infant morbidity and mortality 14,15 .

II. Materials and Methods

Source: This retrospective study includes 2097 multiparous women, who delivered in Sri Ramachandra Medical College during the study period of January – December 2015.

Inclusion criteria:

- Married women
- Age>22 years, <49 years
- Women with 2 or more living children
- Medically fit candidates for sterilization but denied due to social barriers.
- Candidates who are unfit due to medical complications.

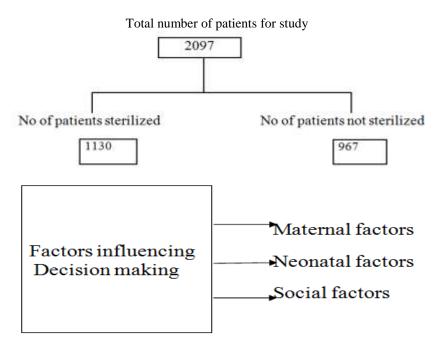
Exclusion criteria:

- Unmarried women
- Age <21 years, >49 years
- ➤ Single living child who is <1 year old
- > Severe medical contraindication for surgery and anaesthesia.

Data thus obtained is analyzed with special regards to the factors influencing the decision for sterilization, on both medical and social grounds.

III. Results

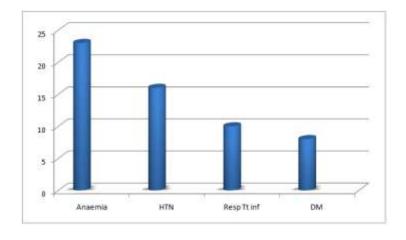
Of 2097 patients selected for analysis, 1130 patients were sterilized and 967 were not sterilized.



Maternal factors:

1	Severe anemia	23	40.3 %
2	Severe hypertension and its complications	16	28.0%
3	Respiratory tract infections	10	17.5%
4	Uncontrolled diabetes mellitus	8	14.0%
	Total	57	100%

Total number of patients for whom sterilization was deferred due to maternal factors -57(5.89%). Among the various factors, for majority of the patients, sterilization was deferred in view of severe anemia (40.3%) and uncontrolled diabetes was the least with (14.0%).

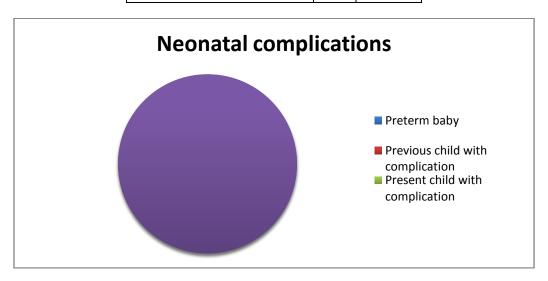


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Neonatal factors:

312 patients did not undergo sterilization due to neonatal complications(previous as well as present child). 65% of the patient had preterm delivery, hence sterilization was deferred. 7.6% of patient had their previous child with complications such as cerebral palsy, anomalous baby, child with delayed milestones. 26.6% of the patient had their present delivered child with complications such as Neonatal Jaundice, Respiratorydistress, Birth asphyxia.

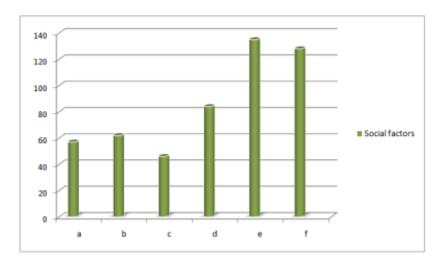
Preterm baby	205	65.7%
Previous child with complications	24	7.6%
Present child with complications	83	26.6%
Total	312	100%

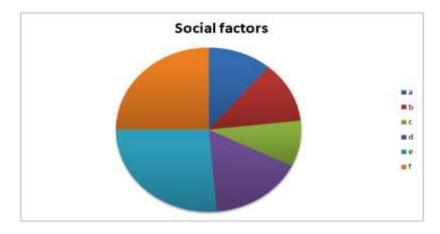


Social factors:

- a) Deferred in view of younger age of previous child 57 (9.5%)
- **b)** Deferred in view of absent assistance during recovery period 62 (10.3%)
- c) Deferred in view of fear of surgical complications 46 (7.69%)
- **d)** Not willing for puerperal sterilization, willing for interval sterilization(through laparoscopicmethod)-84(14.04%)
- e) Awaiting male child -135 (22.57%)
- f) Deferred due to peer pressure 128 (21.4%)
- g) Adopted other contraceptive methods (suchas Cu-T) 73 (12.20%)
- h) Refusal on religious grounds 13 (2.17%) with total sample size being 598.

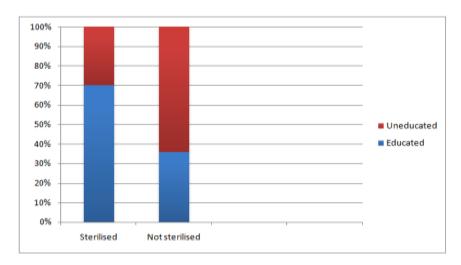
Among the various social factors, majority of patients (22.57%) deferred sterilization as they awaiting a male child, least proportion of patients (2%) deferred due to religious reasons.





Women's Education status

Among the women who got sterilized 70% of them were educated, only 30 % were uneducated, whereas among the women who denied sterilization 64% were uneducated & 36% were educated.



IV. Discussion

Female sterilization being a permanent method, has many features such as doesn't affect couple's sexual life,minimal surgical complications, women's daily activities, possibility of reversal. However, it offers no protection to STD or HIV like barrier contraceptives. Thus, women should be highly motivated for sterilization and factors which prevents women to get sterilized needs special attention to control global population explosion.

Maternal, neonatal &social factors have been thoroughly evaluated in our study, severe anaemia of the mother remains as topmost cause for deferral of sterilization on medical grounds. It signifies the regular evaluation of maternal Haemoglobin status and prompt correction of severe anaemia. Neonatal factors such as birth asphyxia, RDS, severe neonatal jaundice & elevated C Reactive protein & other complications prevent the mother as well as the Obstetrician from making the decision of sterilization.

Social barrier remains as a constant threat to female sterilization. In our study among 967 patients who did not get sterilized 598 (majority) of women deniedsterilization due to various social factors which calls for a need to intervene and reduce those factors.

Article shared by Pooja Mehta et al¹⁶ on "Measures to control population in India" signifies social, economic&other measures.

Social measures
1.Raising the age of marriage
2.Raising the status of women
3.Spread of education
4.Adoption
5.Change in social outlook
6.Social security

Economic measures	
1.More employment opportunities	
2.Standard of living	
3.Urbanisation	
Other measures	
1.Family planning awareness	
2.Publicity of family planning measures	
3.Incentives for those who underwent sterilization	
4.Employment to women.	

V. Conclusion

Social factors preventing the women from undergoing sterilization needs proper intervention to increase awareness regarding sterilization, its advantages, its effect on controlling global population explosion and better quality of life. Since educated women are highly motivated for sterilization, women's education influences the Indian population status directly.

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