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## FACT SHEET

### 1. Community perspective:

#### A. Key findings from interview with Eligible Women

Sl. No.	Indicator	Value (%)	Number
<b>Sample Size</b>			
1	Districts covered		10
2	Blocks covered (2 per district)		20
3	Villages selected (12 per district)		120
4	Eligible Women (20 per village)		2400
5	Mothers-in-law (5 per village)		600
6	ASHAs		113
7	ANMs		100
<b>Findings: Eligible Women</b>			
1	Illiterate	51.0	1224
2	Housewives	76.6	1838
<b>Age</b>			
1	15-25	29.9	718
2	26-30	27.1	650
3	31-49	43.0	1032
<b>Parity</b>			
1	0-2	44.8	1075
2	3 & above	55.2	1325
<b>Preferred Facility for health services</b>			
1	Govt. Hospital/CHC/PHC	76.5	1836
2	Pvt. Hospital/ Physician	70.9	1702
<b>FAMILY PLANNING SERVICES</b>			
<b>Knowledge about modern FP methods</b>			
1	Condom	95.5	2292
2	OCP	85.0	2040
3	IUCD	75.7	1817
4	Injectable	38.5	924
5	Male Sterilization	67.6	1622
6	Female Sterilization	90.0	2160
<b>Source of Information</b>			
<b>Condom</b>			
1	ANM/ASHA/Other Govt. Health workers	17.6	422
2	Husband/relatives /friends	68.1	1634
<b>OCP</b>			
1	ANM/ASHA/Other Govt. Health workers	19.6	470
2	Husband/relatives /friends	53.4	1282

Sl. No.	Indicator	Value (%)	Number
<b>IUCD</b>			
1	ANM/ASHA/Other Govt. Health workers	32.0	768
2	Husband/relatives /friends	36.7	881
<b>Male Sterilization (MST)</b>			
1	ANM/ASHA/Other Govt. Health workers	26.3	631
2	Husband/relatives /friends	35.3	847
<b>Female Sterilization (FST)</b>			
1	ANM/ASHA/Other Govt. Health workers	37.0	888
2	Husband/relatives /friends	45.0	1080
<b>Current use of modern FP methods</b>			
	<b>Total (CPR)</b>	<b>35.5</b>	<b>853</b>
1	Condom	17.2	415
2	OCP	2.0	49
3	Injectable	0.4	10
4	IUCD	1.4	33
5	Male Sterilization	0.2	4
6	Female Sterilization	14.3	342
<b>Motivators for FP</b>			
1	ANM/ASHA/Other health workers	27.6	235
2	Self/Husband/Relatives/ friends	68.4	583
3	Advertisement	0.1	1
<b>Use of FP by age and parity</b>			
<b>Parity</b>		<b>Age</b>	
<b>Condom users</b>		<b>&lt;30 years %</b>	<b>30+ years %</b>
1	0-2	67.0	33.0
2	3 & above	14.5	85.5
<b>OCP users</b>			
1	0-2	46.2	53.8
2	3 & above	30.4	69.6
<b>IUCD users</b>			
1	0-2	52.6	0.0
2	3 & above	47.4	100.0
<b>Sterilization users</b>			
1	0-2	29.1	9.2
2	3 & above	70.9	90.8
		<b>Value (%)</b>	<b>Number</b>
<b>Condom Users</b>			
1	Total no. of Condom users	17.3	415
2	<b>Source of supply:</b>		
	Market/shop	35.2	146
	Husband	24.6	102
	ASHA/ANM/health worker	33.5	139
3	Knowledge about safe period	52.3	217

Sl. No.	Indicator	Value (%)	Number
4	Regular supply received	93.7	389
5	Purchased CC	75.2	312
<b>Oral Pill Users</b>			
1	<b>Oral Pill Users</b>	2.0	49
2	<b>Received from:</b>		
	Market/shops	46.9	23
	Husband	18.4	9
	ASHA/ANM/Health worker	24.5	12
3	<b>Period for which supply received</b>		
	One month	69.4	34
	Two months	24.5	12
	> Two months	4.1	2
4	Received regular supply	93.9	46
5	Sufficient quantity received in last 3 months	87.8	43
6	Using regularly	85.7	42
7	Purchased OCP	73.5	36
8	<b>Prior to receiving OCP:</b>		
	Information given	30.6	15
	Any check-up done	4.1	2
9	Follow-up received	18.4	9
10	Follow-up received within first three months	66.7	6
11	Follow-up received after three months	33.3	3
12	Follow-up received from ASHA/ANM/Nurse	66.7	6
13	Problem faced within two months of using pills	10.2	5
<b>IUCD Acceptors</b>			
1	Total Cu-T users	1.4	33
	<b>Place of insertion</b>		
1	Government Hospital	63.6	21
2	Private Hospital	27.3	9
3	Sub-centre	9.1	3
	<b>Knowledge about max. effectiveness</b>		
1	<5 years	48.5	16
2	5 Years	30.3	10
3	10 Years	21.2	7
	<b>Knowledge about PPIUCD</b>		
1	Yes	24.2	8
2	No	75.8	25
	<b>Health check-up before insertion</b>		
1	Yes	48.5	16
2	No	51.5	17
	<b>Follow-up visit received</b>		
1	Yes	42.4	14
2	No	57.6	19
	<b>No. of follow-up visits received</b>		
1	One follow-up visit	35.7	12

Sl. No.	Indicator	Value (%)	Number
2	Two follow-up visits	50.0	17
3	Three follow-up visits	7.1	2
4	Four follow-up visits	7.1	2
<b>Complications within 3 months of insertion</b>			
1	Yes	42.4	14
2	No	57.6	19
<b>Received help from ASHA/ANM</b>			
1	Yes	42.9	14
2	No	57.1	19
<b>Sterilization Acceptors</b>			
1	Total Sterilization acceptors	14.5	346
<b>Place of sterilization</b>			
1	Government Hospital	90.5	313
2	Private Hospital	7.5	26
3	Sterilization Camp	2.0	7
<b>Post Sterilization complications faced</b>			
1	Yes	4.9	17
2	No	95.1	329
<b>Pre-operative check-up</b>			
1	Yes	90.2	312
2	No	9.8	34
<b>Post operative follow-up/ check-up</b>			
1	Yes	73.4	254
2	No	26.6	92
<b>No. of follow-up visits within 3 months</b>			
1	Nil	25.1	87
2	1-2 follow-ups	58.7	203
3	3-5 follow-ups	15.3	53
4	>5 follow-ups	0.9	3
<b>Received help from ASHA/ANM</b>			
1	Yes	45.3	157
2	No	54.7	189
<b>Shift from spacing to permanent FP method intended</b>		<b>Value (%)</b>	<b>Number</b>
1	Spacing users intending to adopt sterilization in future	12.6	64
2	MST	6.3	4
3	FST	93.7	60
<b>Ever users of FP method (Currently non-users)</b>		18.8	290
1	Condom	65.7	191
2	OCP	20.8	60
3	IUCD	11.4	33
<b>Dropped out (period)</b>			
1	1 - 12 month	48.3	140
2	13 - 24 months	22.6	66

Sl. No.	Indicator	Value (%)	Number
3	25- 36 months	7.3	21
4	36 + months	21.8	63
<b>Duration of use before discontinuing FP method</b>			
1	1-12 months	70.5	205
2	13 - 24 months	17.4	50
3	25- 36 months	7.6	22
4	36 + months	4.5	13
<b>Major reasons for discontinuing FP method</b>			
1	Desire for child	43.5	126
2	Method failure/got pregnant	6.5	19
3	inconvenient to use	10.6	31
4	Difficult to obtain	3.2	9
5	Opposition from family	1.0	3
<b>Major reasons for not using CuT/IUCD</b>			
1	Lack of knowledge	18.9	291
2	Opposition by Husband/family members	12.8	197
3	Cu-T moves upwards	8.6	133
4	Excessive MC	9.5	146
5	Inconvenient to use	7.8	120
6	Dislike the method	10.1	156
7	Child is small/lactating	12.1	186
8	Difficult to receive	2.3	35
<b>Perceived family size complete</b>			
1	Yes	48.0	740
<b>Main Reasons for not adopting sterilization</b>			
1	Fear of operation	23.5	362
2	Can't work after Sterilization/ weakness/ illness	14.0	216
3	Opposition by Husband/Family Members	11.1	171
4	Against Religion	6.0	92
5	Child small/breast feeding	10.4	160
6	Illness	13.4	206
7	Lack of health services	1.8	28
8	Intend to use any FP method in future	32.1	495
9	Sterilization	59.2	293
10	CuT /IUCD	4.8	24
11	Intending to use within 1-6 months	99.4	492

## B. Key finding from interview with Mothers- In-Law

Sl. No.	Indicator	Value (%)	Number
<b>Sample Size</b>			
1	5 Mothers-in-law per village		600
<b>Age wise distribution</b>			
1	35-50 Years	30.7	184



Sl. No.	Indicator	Value (%)	Number
2	51-60 Years	42.2	253
3	61-70 Years	22.8	137
4	>71 years	4.3	26
<b>Level of Education</b>			
1	Illiterate	85.2	511
2	Formal literate	3.2	19
3	1-5 <sup>th</sup> class	7.2	43
4	6-8 <sup>th</sup> class	3.2	19
5	9-12 <sup>th</sup> class	1.0	6
6	Graduate and above	0.2	1
<b>Religion wise distribution</b>			
1	Hindu	89.3	536
2	Muslim	9.7	58
3	Others	1.0	6
<b>Caste wise distribution</b>			
1	SC	23.0	138
2	ST	1.7	10
3	OBC	56.8	341
4	General	18.5	111
<b>Major Occupation wise distribution</b>			
1	Agriculture	20.7	124
2	Agriculture Labour	7.2	43
3	Daily wages Labour	2.8	17
4	House Wife	52.0	312
5	Service	1.2	7
<b>Decision concerning education of child in family</b>			
1	Self (Sas)	11.5	69
2	Husband	31.2	187
3	Son	51.5	309
4	Daughter-in-law	4.0	24
5	Other family members	1.8	11
<b>Decision concerning health of family</b>			
1	Self (Sas)	14.0	84
2	Husband	34.8	209
3	Son	48.2	289
4	Daughter-in-law	1.7	10
5	Other family members	1.3	8
<b>Whether Daughter-in-law should take decision on child's education.</b>			
1	Yes	84.8	581
2	No	13.5	9
3	Don't Know	1.7	10
<b>Whether Daughter-in-law should take decision on family planning.</b>			
1	Yes	88.2	529

Sl. No.	Indicator	Value (%)	Number
2	No	9.7	58
3	Don't Know	2.2	13
<b>Should the daughter-in-law have a say in other family matters as well.</b>			
1	Yes	73.5	441
2	No	24.2	145
3	Don't Know	2.3	14
<b>Will decision taken by you in case of your daughter-in-law also apply for your daughter.</b>			
1	Yes	69.5	417
2	No	27.3	164
3	Don't Know	3.2	19
<b>Have you ever used a family planning method</b>			
1	Yes	27.7	166
2	No	72.2	433
3	Don't Know	0.2	1
<b>If yes, then which method</b>			
1	CC	3.6	6
2	OCP	6.0	10
3	IUCD	6.6	11
4	MST	2.4	4
5	FST	77.1	128
6	Injectables	3.0	5
7	Others	1.2	2
<b>Who motivated to adopt the FP method</b>			
1	ANM/Health Worker	13.3	80
2	Doctor	6.6	40
3	ASHA	3.6	22
4	Husband/Relatives/MIL/ Friends	26.5	159
5	Self	48.2	289
<b>If your son/daughter-in-law currently using any FP method.</b>			
1	Yes	30.3	182
2	No	61.2	367
3	Don't Know	8.5	51
<b>If yes, do you approve of their decision</b>			
1	Yes	96.2	577
2	No	2.2	13
3	Don't Know	1.6	10
<b>If not, will you motivate them to adopt FP</b>			
1	Yes	52.4	314
2	No	38.8	233
3	Don't Know	8.9	53
<b>Do you think it important to have a son in the family.</b>			
1	Yes	84.5	507

Sl. No.	Indicator	Value (%)	Number
2	No	14.7	88
3	Don't Know	0.8	5
<b>In want of a male child, would you compel your son/daughter-in-law to have more children.</b>			
1	Yes	36.2	217
2	No	60.6	364
3	Don't Know	3.2	19

## II. Providers perspective:

### A. Key finding from interview with ANMs

Sl. No.	Indicator	Value (%)	Number
<b>Sample Size</b>			
1	01 ANM per village		100
<b>Age wise distribution</b>			
1	20-29 Years	9.0	9
2	30-39 Years	9.0	9
3	40-50 Years	41.0	41
4	>51 years	41.0	41
<b>Level of Education</b>			
1	High school	23.0	23
2	Intermediate	52.0	52
3	Graduate & Above	25.0	25
<b>Work Experience in years</b>			
1	1-10 years	26.0	26
2	11-20 years	16.0	16
3	21-30 years	46.0	46
4	31 & above	12.0	12
<b>Number of years at the current sub-centre</b>			
1	< 1 year	6.0	6
2	> 1 year	12.0	12
3	> 2 years	82.0	82
<b>No. of villages served by ANM</b>			
1	1-5	42.0	42
2	6 - 10	45.0	45
3	>10	13.0	12
<b>Population covered by ANM</b>			
1	2000-5000	10.0	10
2	5001-6000	21.0	21
3	6001-7000	8.0	8
4	>7000	61.0	61
<b>No. of ASHAs supervised by ANM</b>			
1	1-3	13.0	13
2	4-5	28.0	28
3	6-8	48.0	48

Sl. No.	Indicator	Value (%)	Number
4	>8	11.0	11
<b>Conducting deliveries at their sub-centre</b>			
1	Yes	16.0	16
2	No	84.0	84
<b>No. of deliveries conducted at the SC in last 6 months</b>			
1	1-20	66.7	11
2	21-50	20	3
3	51-100	6.7	1
4	>100	6.7	1
<b>Reasons for not conducting deliveries at SC</b>			
1	No delivery room	10.8	17
2	No delivery Table	14.0	22
3	No essential services available	25.5	40
4	Lack of confidence	7.6	12
5	No second ANM is available	4.5	7
<b>Home deliveries being conducted by ANM</b>			
1	Yes	36.0	36
2	No	64.0	64
<b>No. of home deliveries conducted in last 6 months</b>			
1	Zero	25.0	9
2	1-5	41.7	15
3	6-10	27.8	10
4	>10	5.6	2
<b>Cu-T insertion done at SC by ANM</b>			
1	Yes	57.0	57
2	No	43.0	43
<b>Received Training on PPIUCD</b>			
1	Yes	5.0	5
2	No	95.0	95
<b>Home visit conducted by ANM</b>			
1	Yes	94.0	94
2	No	6.0	6
<b>Motivate couple for FP during home visit</b>			
1	Yes	100.0	94
2	No	0.0	0
<b>Problem faced during motivation for FST</b>			
1	Fear of operation	11.4	38
2	Weakness after operation	19.3	64
3	Due to illness	15.4	51
4	Husband opposes	9.9	33
5	MC stopped	1.2	4
6	Child is too small	2.7	9
7	Family opposes	13	43
8	Against religion	12.7	42
9	Pregnant	0.9	3

Sl. No.	Indicator	Value (%)	Number
<b>Problem faced during motivation for MST</b>			
1	Lack of knowledge	14.4	30
2	Fear of operation	17.2	36
3	Against religion	4.8	10
4	Work problem after sterilization	23.9	50
5	Reduction in pleasure	10.5	22
6	Difficult to access the MST facility	2.4	5
7	Family opposes	1.9	4
8	Need for baby	1.9	4
9	Wife opposes	18.2	38
<b>Problem faced during motivation for Cu-T</b>			
1	Excess bleeding	26.7	75
2	Weakness /weak stamina	14.6	41
3	Pain/Back Pain	18.5	52
4	Sepsis	13.9	39
5	Fever	4.3	12
6	Reduction in pleasure	7.5	21
<b>Fixed date of meeting with ASHAs</b>			
1	Yes	83.0	83
2	No	17.0	17
<b>Whether ASHAs giving information about FP to the community</b>			
1	Yes	100.0	100
2	No	0.0	0
<b>Whether ASHAs motivating clients for CuT insertion and referring to ANM</b>			
1	Yes	97.0	97
2	No	3.0	3
<b>Whether ASHAs motivating clients for Sterilization and referring to ANM</b>			
1	Yes	98.0	98
2	No	2.0	2
<b>Knowledge about years of effectiveness of IUCD</b>			
1	3 Years	5.0	5
2	5 Years	14.0	14
3	8 Years	2.0	2
4	10 Years	79.0	79
<b>Referral by ANM for Male Sterilization (MST)</b>			
1	CHC/PHC	16.0	16
2	District Hospital	46.0	46
3	Not referring	38.0	38
<b>Referral by ANM for Female Sterilization (FST)</b>			
1	CHC/PHC	85.0	85
2	District Hospital	15.0	15

## B. Key finding from interview with ASHA

Sl. No.	Indicator	Value (%)	Number
<b>Sample Size</b>			
1	Number of ASHAs		<b>113</b>
<b>Age wise distribution</b>			
1	20-29 Years	24.8	28
2	30-39 Years	54.0	61
3	40-50 Years	20.3	23
4	>51 years	0.9	1
<b>Marital Status</b>			
1	Married	98.2	111
2	Unmarried	0.0	0
3	Other	1.8	3
<b>Residing in the same village</b>			
1	Yes	91.2	103
2	No	8.8	10
<b>Duration of residing in the village</b>			
1	1-10 years	23.9	27
2	11-20 years	53.1	60
3	21-25 years	16.8	19
4	Above 25 years	6.2	7
<b>Caste wise distribution of ASHA</b>			
1	SC	19.5	22
2	ST	1.8	2
3	OBC	40.7	46
4	General	38.0	43
<b>Level of Education</b>			
1	Illiterate	0.0	0
2	Literate	1.8	2
3	Class 1-5 <sup>th</sup>	4.4	5
4	Class 6-9 <sup>th</sup>	38.9	44
5	Class 10-12 <sup>th</sup>	46.9	53
6	Graduate & above	8.0	9
<b>Work experience before becoming ASHA</b>			
1	Yes	13.3	15
2	No	86.7	98
<b>Work experience as ASHA</b>			
1	1-5 years	16.8	19
2	6-7 years	51.3	58
3	8-9 years	30.1	34
4	10 & above years	1.8	2
<b>Population covered</b>			
1	Less than 1000	8.8	10
2	1000	24.8	28

Sl. No.	Indicator	Value (%)	Number
3	>1000 to <1400	32.7	37
4	1400 to <2000	21.2	24
5	2000 to 3000	10.7	12
6	5000 & above	1.8	2
<b>Frequency of interaction with ANM in a month</b>			
1	1-2 times	46.9	53
2	3-4 times	44.2	50
3	5 & above times	8.9	10
<b>Occasion of interaction with ANM</b>			
1	Monthly meeting	90.3	102
2	VHND	96.5	109
3	Home visit	42.5	48
<b>Purpose of interaction with ANM</b>			
1	Checking of records	60.2	68
2	Meeting with Beneficiary	69.0	78
3	To resolve the problem in field	81.4	92
<b>Does ANM accompany you during home visits</b>			
1	Yes	56.6	64
2	No.	43.4	49
<b>At what interval do you meet the clients</b>			
1	Regularly/Maximum	61.1	69
2	Some time	38.9	44
3	Very Less	0.0	0.0
<b>Place of meeting</b>			
1	At Home	90.3	102
2	Group Meeting	47.8	54
3	VHND	86.7	98
<b>Number of clients visited in a day</b>			
1	3-4 client	14.2	16
2	5-6 client	36.2	41
3	7-8 client	20.4	23
4	9 & above	29.2	33
<b>No. of clients contacted in last one month</b>			
1	10-20	31.9	36
2	>20-<50	46.9	53
3	50-90	15.9	18
4	100 & above	5.3	6
<b>Topics covered during visits</b>			
1	Nutrition	69.9	79
2	Primary hygiene & sanitation	76.1	86
3	Method of healthy life	54.0	61
4	Recent Heath Schemes	69.0	78

Sl. No.	Indicator	Value (%)	Number
5	Need of health & family planning services at right time	69.9	79
<b>FP methods for which clients motivated</b>			
1	Male Sterilization	61.1	69
2	Female Sterilization	99.1	112
3	Condom	100	113
4	O.C.P.	100	113
5	CuT	99.1	112
<b>Problem faced during motivation for Female Sterilization (FST)</b>			
1	Fear of Operation	46.0	52
2	Weakness after operation	63.7	72
3	Illness/ reason of weakness	43.4	49
4	Husband opposed	3.0	43
5	M.C. stopped	6.2	7
6	Child is small	15.0	17
7	Family opposed	36.3	41
8	Against religion	23.0	26
<b>Problem faced during motivation for MST</b>			
1	Lack of knowledge	15.9	18
2	Fear	20.4	23
3	Against religion	5.3	6
4	Can't work after sterilization	40.7	46
5	Reduction in pleasure	14.2	16
6	Difficult to access	2.7	3
7	Opposed by family members	3.5	4
8	Want more children	0.9	1
9	Wife opposed	34.5	39
<b>Problem faced during motivation for CuT insertion</b>			
1	Fever	31.0	35
2	Pain/Back ache	46.9	53
3	Sespsis /Mavad	39.8	45
4	Leads to weakness/ low stamina	39.8	45
5	Reduction in pleasure	17.7	20
6	Excessive bleeding	77.0	87
<b>MST referrals by ASHA</b>			
1	Block CHC/PHC	11.9	10
2	District Hospital	26.5	30
3	Private Hospital	0.0	0
<b>FST referrals by ASHA</b>			
1	Block CHC/PHC	73.5	83



Sl. No.	Indicator	Value (%)	Number
2	District Hospital	26.5	30
3	Private Hospital	0.0	0
<b>MST Facility available at BPHC/CHC, if yes then in what frequency</b>			
1	Yes	9.7	11
2	No	90.3	102
3	Daily	81.8	9
4	Once in a month	9.1	1
5	Twice in a month	9.1	1
<b>FST Facility available at BPHC/CHC, if yes then in what frequency</b>			
1	Yes	85.8	97
2	No	14.2	16
3	Daily	68.0	66
4	Once in a month	32.0	31
5	Twice in a month	0.0	0
<b>Knowledge about years of effectiveness of IUCD</b>			
1	5 years	36.3	41
2	10 years	23.9	27
3	Not sure	39.8	45
<b>No. of IUCD/Stz. cases motivated in last three months by 113 ASHAs.</b>			
1	Male sterilization		2
2	Female sterilisation		34
3	CuT/IUCD		58
<b>No. of institutional deliveries in last three months</b>		5.8	661
<b>Accompanied women to hospital for delivery in last three months</b>		5.7	640
<b>Advice on post partum family planning given</b>		<b>Percentage</b>	<b>Number</b>
1	Yes	85.8	97
2	No	14.2	16
<b>Knowledge about PPIUCD insertion</b>			
1	Yes	15.0	17
2	No	85.0	96
<b>Motivation for PPIUCD</b>			
1	Yes	76.5	13
2	No	23.5	4
<b>How many adopted PPIUCD</b>			
1	Yes	23.1	3
2	No	76.9	10
		<b>Avg.</b>	<b>Number</b>
<b>Number of home deliveries in last 3 months</b>		2.4	269

## Study: At a Glance...

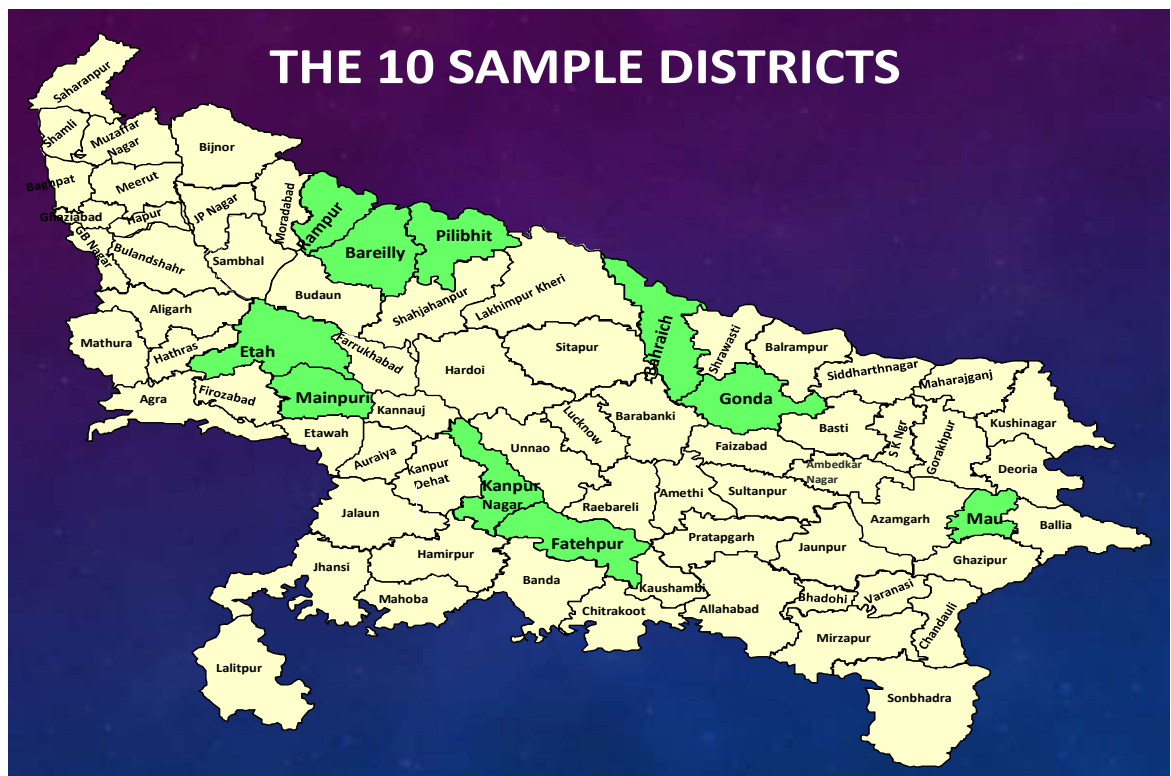
### About the Study: Objectives and Methodology

#### Objectives:

- To identify factors associated with family planning use and barriers to adoption of terminal and semi terminal methods of FP
- To understand the stakeholders' perspective of these barriers and opportunities to overcome them.

#### Methodology & Sampling:

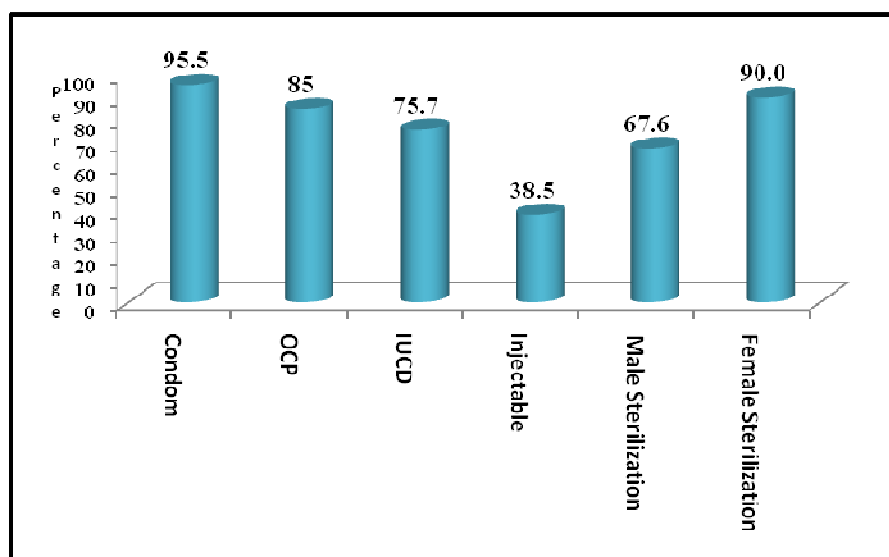
- 10 districts selected having low sterilization performance
- 02 blocks and 12 villages/PSUs (6/block) selected from each district (using systematic random sampling)
- Detailed house listing done & 20 HHs randomly selected from each PSU and one EW interviewed from each HH (2400 EWs)
- 05 Mothers-in-Law (MIL) interviewed additionally from each PSU (600)
- 113 ASHAs, 100 ANMs interviewed
- Senior government officials interviewed



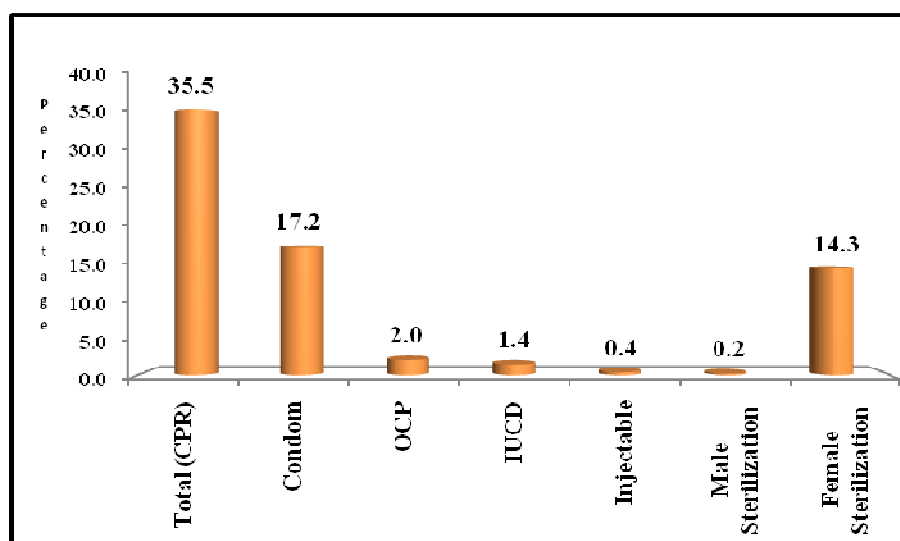
### Socio-Economic & Demographic Profile of EW:

- Average Age (yrs) 31.3
- Average no. of Living Children 3.1
- Educational status- Illiterate 51.0
- Occupational Status- Housewife 76.6

### Knowledge about Family Planning Methods

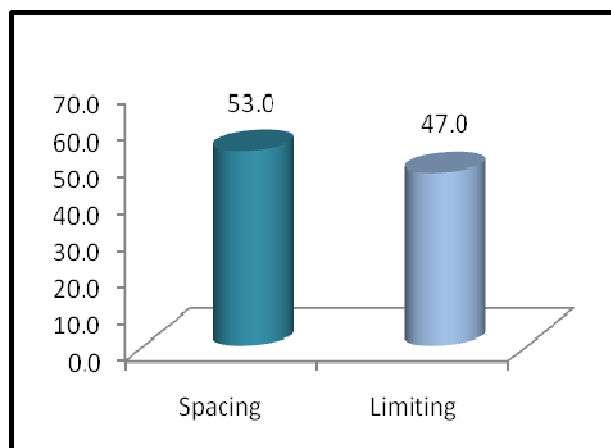


### Current use of Family Planning Methods (mCPR)

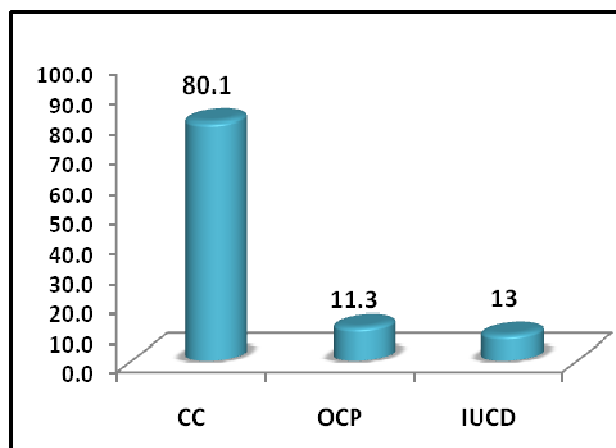


**Concern:** Two-third Couples not using any modern method. Use of IUCD and NSV very low.

### Current FP Users having 3+ parity



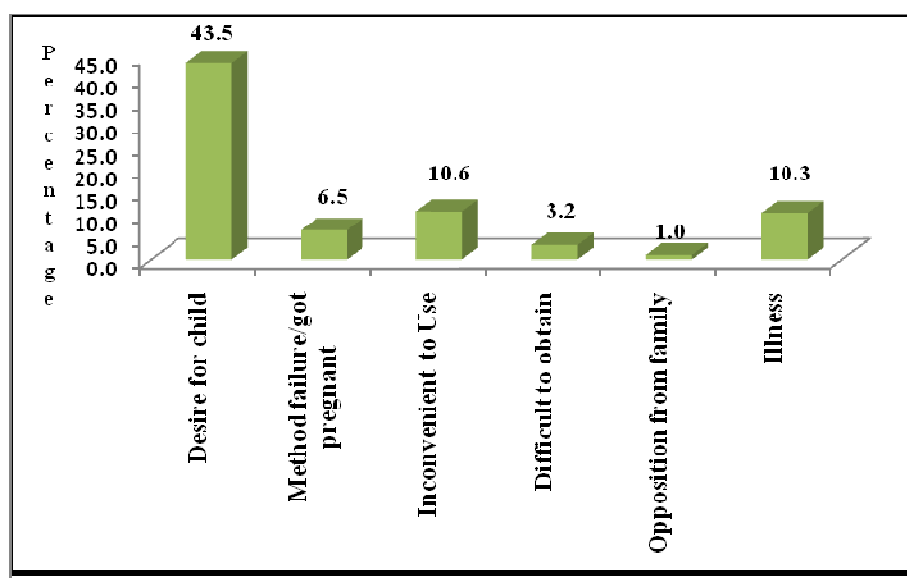
### Current spacing users having 3+



**Concern:** Over dependence on less effective spacing methods by high parity couples (only 38% EWs with 3+ Parity use Modern FP)

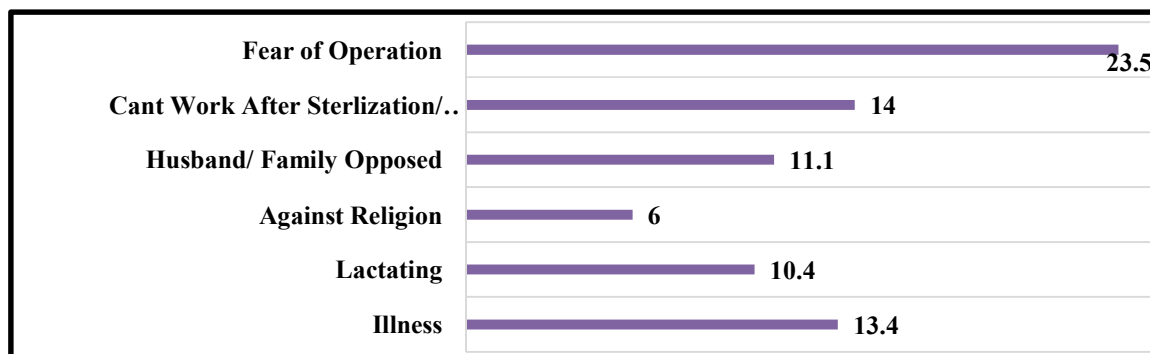
### Reasons for Discontinuation of FP Method by Ever Users

#### *Past Users of Spacing FP-18.8%*



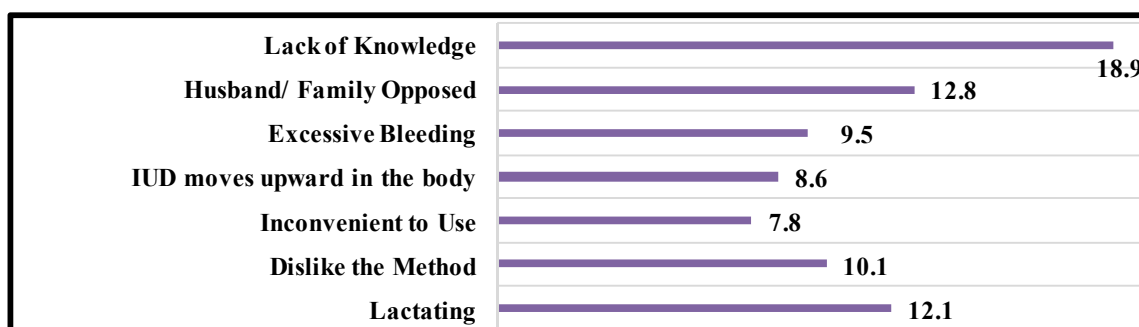
**Concern:** Effective post service follow-up and counseling may help reduce the high drop outs and encourage method switch.

### Major Barriers to Adoption of sterilization even after completing family size (spacing + non users)



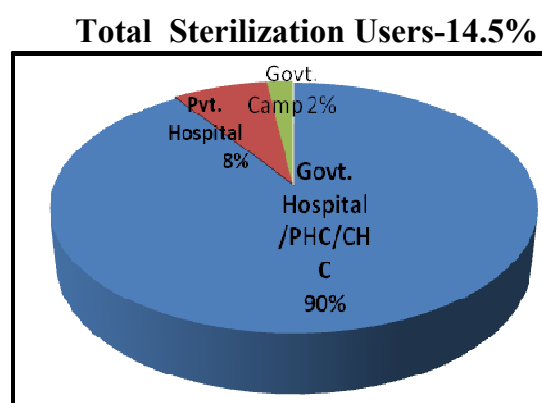
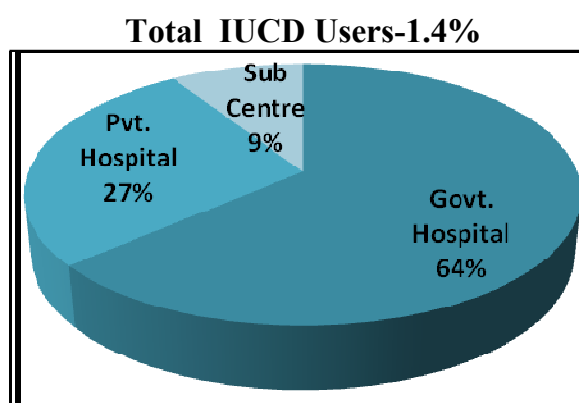
**Concern:** Most reasons cited can be addressed by Effective IPC/BCC by FLWs

### Major Barriers to Adoption of IUCD



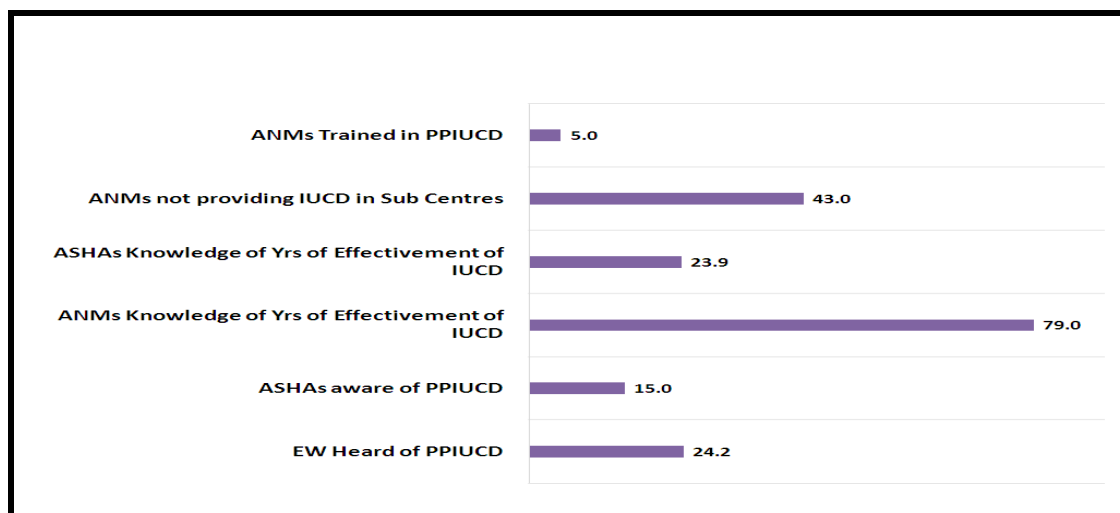
**Concern:** Most reasons cited can be addressed by Effective IPC/BCC by FLWs

### Sterilization and IUCD Insertion by place of service

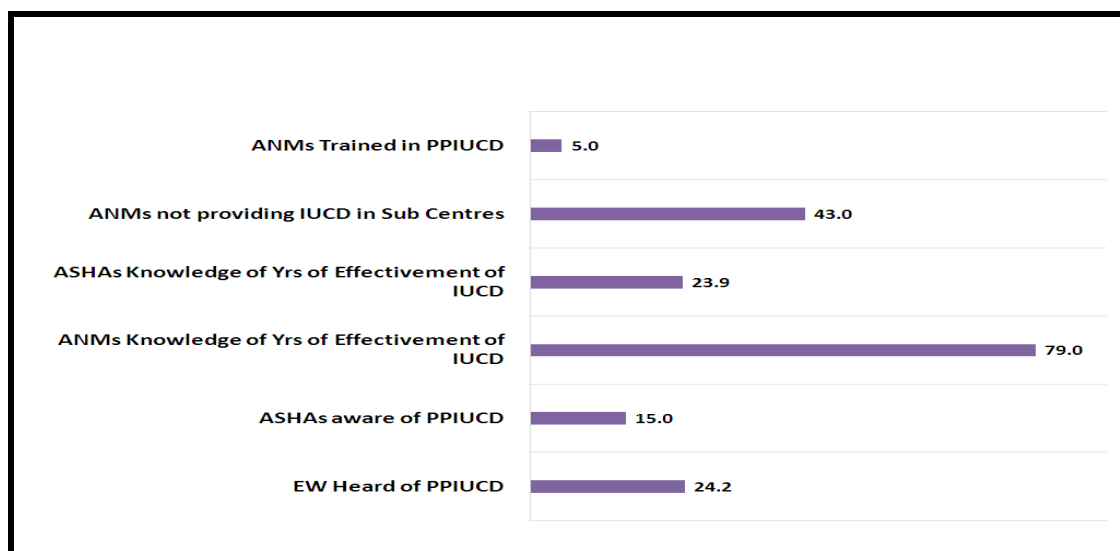


**Concern:** Role of Private Sector in Sterilization and IUCD/PPIUCD Services is critical in expanding provider base

## Gap in Knowledge and Skills of ANMs & ASHAs in Promotion of IUCD & PIUCD



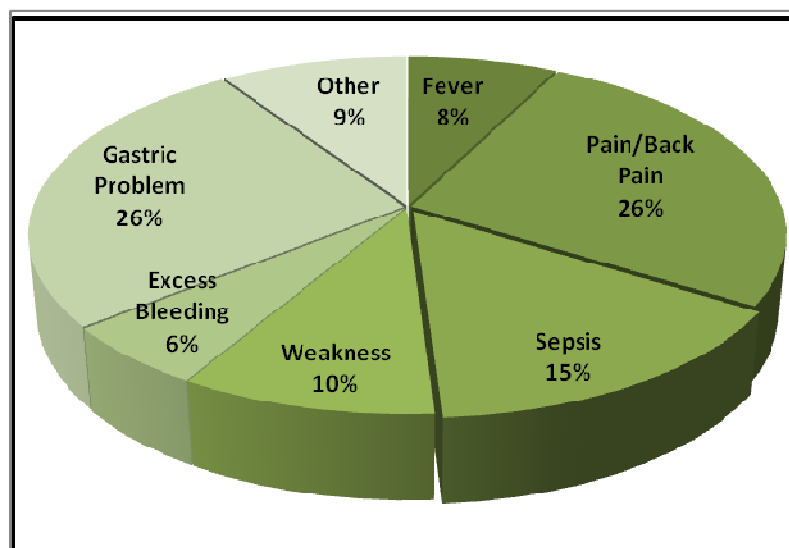
## IUCD: Pre Check Up and Post Service Follow up



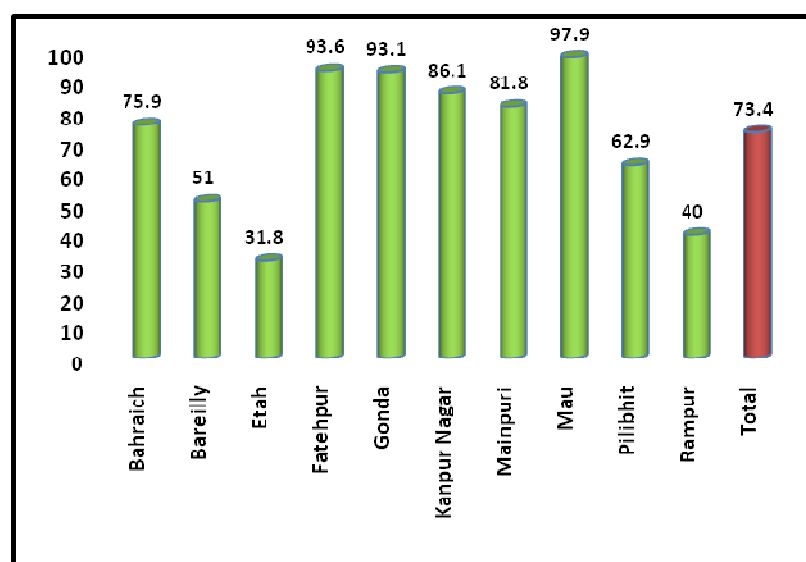
**Concern:** Lot more desired on quality parameters in terms of pre check-ups and post-insertion counseling and follow-up to ensure IUCD continuity

### Sterilization: Complications Reported

#### 4.9 % Clients Reported Post Operative Complications in Sterilization

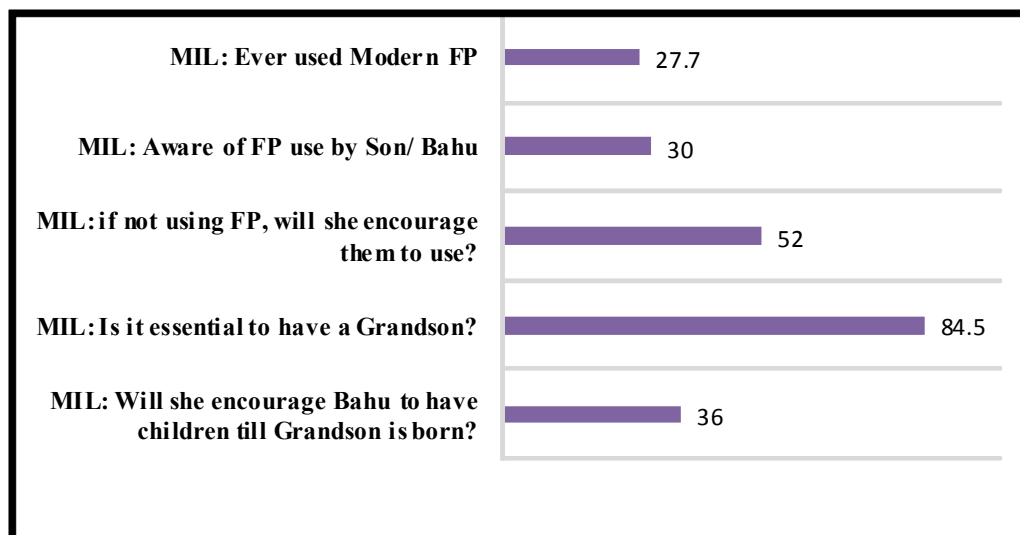


### Sterilization: Follow-up Visit by FLWs



**Concern:** One in every four sterilization cases still not followed up by FLWs

## **Role of Mothers in Law (MIL) in Promoting FP**



**Concern:** MIL is a critical opinion maker in deciding use of modern FP by EW

## **Recommendations**

- ❖ Focused IPC/BCC: to address prevailing myths, fears and concerns of families and couples towards accepting higher order FP like IUCD, PPIUCD & Sterilization
- ❖ Reverse the Missed Opportunity of Post Partum FP: With ever increasing institutional deliveries adequate counseling and support to adoption of post partum family planning- Post Partum Sterilization and PPIUCD to be followed by effective post adoption follow up and support to deal with complications
- ❖ Enhance Counseling Skills of FLWs: ASHAs/ ANMs to be adequately trained on counseling skills and the counseling should start with ANC and continue during intra and post partum periods. They should also be oriented on IPC skills for dealing with prevailing myths and misconceptions on higher order methods.
- ❖ **Contraceptive technology update:** to be made mandatory for program managers, surgeons and field forces for updating their understanding on various methods and addressing some of the provider biases relating to efficacy of methods
- ❖ **Communication plan to focus on MIL:** they continue to be seen influencing the couple's ability in taking decision for FP adoption. A customized communication plan focusing on such influences to be put in place to convert them as family planning champions in the community



- ❖ **Engaging Private Sector:** facilitate private providers' accreditation under government scheme and streamline reimbursement of cost incurred in providing sterilization and IUCD services by the private providers as per the revised norms set by GOI
- ❖ **Focus on Quality:** strict adherence of quality norms set for FDS including 30 case limit for quality assurance, pre procedure screening and post service follow-up/checkup for sterilization, IUCD/ PPIUCD.
- ❖ **Focus on school based FLE:** Need for 'nipping in the bud' by introducing family life education in school curriculum beginning as early as class five, emphasizing the importance of hygiene for good health, talking about disadvantages of having a large family and from class eight onwards gradually moving towards knowledge and importance of a planned family, creating awareness amongst adolescents
- ❖ **Focus on RMNCH+A:** the state population policy should be linked with complete RMNCH+A health instead of just population stabilization. Poor infrastructure, equipment, lack of trained manpower, inappropriate placements were all stated as matters of concern in extending quality family planning services
- ❖ **Centres with High Delivery Case Load to focus on PPIUCD:** special strategy and incentives may be considered for promoting PPIUCD at over 150 centres with high delivery case loads. The staff should be given adequate training in PPIUCD with equal emphasis on adherence to quality standards and follow up support.