

The Family Planning Association of Bangladesh

FOLLOW-UP STUDY REPORT OF NAYA PALTAN CLINIC



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Follow-up Study Report of the Pill users
and Tubectomy Clients of Naya Paltan Clinic

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The follow-up report of the clients (Pill and Tubectomy users) of Naya Paltan Clinic is enclosed herewith.

It is hoped that the Follow-up study findings will make us aware of some aspects which may be of interest to us all.

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1. INTRODUCTION

Bangladesh Family Planning Association has been working since its inception in various fields of family planning activities. The major activities of FPAB are (a) to motivate and educate people to accept family planning and (b) to provide services to the clients.

Out of the permanent and semi-permanent methods ligation cases are increasing over the years. Of all acceptors oral pill users are the highest. According to 1981 Contraceptive Prevalence Survey (CPS) the acceptors of pill and ligation are 13.4% and 3.7% respectively. The FPAB clinic located at Haya Kanton has been providing services to numerous acceptors from 1968 till 1984. It appears from the record that the female clients mostly visit the clinics to receive family planning services. To find out the effectiveness of the method and health condition of the clients a follow-up study was planned to be conducted within Dhaka city.

2. OBJECTIVES

The objectives of the study are :-

- (a) To find out the effectiveness of the method adopted,
- (b) To find out the continuation rate of acceptors, and
- (c) To find out the health condition of the clients.

3. METHODOLOGY

The follow-up study was conducted in Dhaka City. The sample size comprised seventy clients, of whom thirty five were pill users and thirty five were tubectomy clients. The respondents

were selected from the clients' registrar maintained in the clinic. Clients were selected on simple random basis. Six Research Assistants were engaged for data collection for this purpose.

4. PENDING

Out of 70 clients, 35 were interviewed. The remaining 35 clients could not be located due to various reasons. Some of the clients living in rented houses left their old address, some houses as per given address could not be located and some were guest clients living with their relatives temporarily but left the place after sometime. (some clients were given pills during their stay with relatives but later on moved to their original village home outside Dhaka City). For these various reasons 50 percent of the clients could not be traced out.

Among the 35 clients found 13 (37.1) were using pills at the time and 17 (48.6) were tubectomy clients. Four (11.4) were drop-outs. They were not using pill any more. Among the drop-outs two were pregnant according to their desire, and two were not taking pill any more as they were getting fat and had vomiting tendency. One client switched over from pill to Copper T. Both the groups of pill and tubectomy clients were analysed separately.

AGE

Age Distribution of the Respondents

The respondents using pill were in the age group ranging from 15-34. Majority of the respondents (53.8%) were in the age group of 25-29, 30.8% were in the age group of 20-24 and the rest were in the age groups of 35-39 and 15-19.

Whereas the tubectomy clients were in the age group ranging from 25-44, the highest frequency was in the age group of 30-34 (47.1%), 23.5% were in the age group of 25-29, 17.6% in the age group of 35-39 and the remaining 11.8% were in the age group of 40-44. One client who switched over from pill to Copper T was in the age group 30-34.

(Table -1a)

Table - 1 (a)

Distribution of the age of the Respondents and the Methods used by them

Age group	Pill		Tubectomy		S.Over	Dropout	Total	
	Frc.	Per.	Frc.	Per.			Frc.	Per.
15 - 19	1	7.7	-	-	-	-	1	2.9
20 - 24	4	30.8	-	-	-	2	6	17.1
25 - 29	7	53.8	4	23.5	-	2	13	37.1
30 - 34	1	7.7	8	47.1	1	-	10	28.6
35 - 39	-	-	3	17.6	-	-	3	8.6
40 - 44	-	-	2	11.8	-	-	2	5.7
Total	13	100%	17	100%	1	4	35	100%

Age Distribution of the Respondents' Husband :

Most of the respondents' husband were in the age group of 30-39 (57.2%) 17.1% were in the age group of 40-41; 11.4% were in the age group of 45-49 and the rest were in the age group of 50-60, (Table-1,b). Only one was in the age group of 20-40.

Table - 1 (b)

Age Distribution of Respondents Husbands

Age	Frequency	Percentage
20 - 24	1	2.8
30 - 34	10	28.6
35 - 39	10	28.6
40 - 44	6	17.1
45 - 49	4	11.4
50 - 54	2	5.7
55 - 59	1	2.9
60 & above	1	2.9
Total	35	100%

Parity : Inquiry was made to the clients about the total number of live birth during their whole reproductive span. Among the pill users 53.8% reported having 1-2 live births, 30.8% reported having 3 live births. Only one client had 5 live births and one had no birth at all. The tubectomy clients had at the minimum 3 and maximum 8 live births during their reproductive age. Among them 17.7% had 3 live births, 11.8% had 4 live births, 29.4% had 5 live births, 17.6 had 6 and 23.5 had 7-8 live births. One client who switched over from pill to Copper T had in total 6 live births.(Table-2a)

In a separate question respondents were asked about their number of children at the time. The pill using respondents reported having 1 to 4 living children. Whereas the tubectomy clients reported having 4 to 7 children. Among the pill users 46.1% had 2 children, 23.1% had 3 children and 15.4 had one child each. Only one had 4 children and one had no child. Among the tubectomy clients 23.5% had 3 children, 17.6% had 4 children 23.5% had 5 children, 17.7% had 6 children and 17.7% had 7 children at the time. The client who switched over to Copper T had 5 children. It has to be mentioned here that people having 3 or more children are usually adopting permanent methods which is a good sign for our country (Table -2b)

Table - 2(a)

Total number of live birth during their reproductive span

Number of Live birth	Pill		Ligation		Total	
	Pre.	Per.	Pre.	Per.	Pre.	Per.
0	1	7.7	-	-	1	3.3
1 - 2	7	53.8	-	-	7	23.3
3	4	30.8	3	17.7	7	23.3
4	-	-	2	11.8	2	6.7
5	1	7.7	5	29.4	6	20.0
6	-	-	3	17.6	3	10.0
7 - 8	-	-	4	23.5	4	13.4
Total	13	100%	17	100%	30	100%

* 4 cases of drop-outs and 1 (one) case of switch over not shown.

Table - 2 (b)

Number of Living Children

No. of Children	Pill		Ligation		Total	
	Fre.	Per.	Fre.	Per.	Fre.	Per.
0	1	7.7	-	-	1	3.3
1	2	15.4	-	-	2	6.7
2	6	46.1	-	-	6	20.0
3	3	23.1	4	23.5	7	23.3
4	1	7.7	3	17.6	4	13.4
5	-	-	4	23.5	4	13.3
6	-	-	3	17.7	3	10.0
7	-	-	3	17.7	3	10.0
Total	13	100%	17	100%	30	100%

Current use of Family Planning Methods:

Out of the 35 respondents interviewed 48.6% were tubectomy acceptors, 37.1% were pill users and 11.4% were not using any method at the time of interview, but they were listed as clients in the client register. They were drop-out cases. Among them two clients were pregnant at present and two were drop-out. One of the clients switched over from pill to Copper T (Table - 3).

Table - 3

Distribution of the respondents according to the status of
Current use of Family Planning Methods :

Method used	Frequency	Percentage
Tubectomy	17	48.6
Oral Pill	13	37.1
Copper T	1	2.9
Drop out	4	11.4
Total	35	100%

Present Health Condition of the Clients :

A question was asked regarding their present health condition. 84.6% of the pill users reported that they were enjoying good health, one reported having side effect and one client said she neither enjoyed positive health nor suffered health complaints. Among the tubectomy clients 70.6% reported that they were fine, 29.4% reported having some side effect (Table -4) 3.3% Tubectomy clients complained having pain in their abdomen and in the place of operation. One of them complained loosing working ability. One of the ligated patient complained that she was pregnant at the time of operation. She felt that it was the negligence of the Doctor.

Table - 4

PRESENT HEALTH STATUS OF THE RESPONDENTS

Condition	Pill		Tubectomy		Total	
	Fre.	Per.	Fre.	Per.	Fre.	Per.
Good	11	84.6	12	70.6	23	76.7
Midium	1	7.7	-	-	1	3.3
Bad	-	-	5	29.4	5	16.7
Vomiting	1	7.7	-	-	1	3.3
Total	13	100%	17	100%	30	100%

Physical Illness after Adopting Family Planning Method

Around 85 percent of the pill using clients had no physical illness. Only 15.4% had some physical illness after taking pill. Pill users had vomiting tendency which was a common side effect. Among tubectomy clients 52.9% had no physical illness, but 47.1% reported having some type of physical illness. The common problems identified by the tubectomy clients were, Abdomon, pain, dizziness, weakness etc. (Table-5)

Table - 5

Distribution of respondents on the basis of health condition
after adopting Family Planning Method

Status of Physical illness	Pill		Tubectomy		Total	
	Frc.	Per.	Frc.	Per.	Frc.	Per.
Yes	2	15.4	8	47.1	10	33.3
No	11	84.6	9	52.9	20	66.7
Total	13	100%	17	100%	30	100%

* 5 (4 drop out clients switch over) cases were not shown.

Source of Motivation for adopting Family Planning

Majority of the respondents reported that their husbands were the main source of inspiration for adopting both the devices of Family Planning method. The second source of inspiration was the combined effort of the husband and wife. None of the pill users were motivated by FPAB workers, 15.4 were self motivate and one was motivated by the relative.

Table - 6

Source of motivation of the respondents

Source of Motivation	Pill		Tubectomy		Total	
	Freq.	Per.	Freq.	Per.	Freq.	Per.
Husband	7	53.8	9	52.9	16	53.3
Husband & Joint wife	3	23.1	3	17.6	6	20.0
Self	2	15.4	1	5.9	3	10.0
FPAB Worker	-	-	2	11.8	2	6.7
Relative/ Neighbour	1	7.7	2	11.8	3	10.0
Total	13	100%	17	100%	30	100%

Length of Time

Among the respondents interviewed pills and Tubectomy were being used by 46.2% and 82.4% clients respectively for less than one year, and 53.8% and 17.6% for more than one year. (Table-7)

Table - 7

Distribution of respondents on the basis of the use of
Family Planning Devices by the Length of time

Length of Time	Pill		Tubectomy		Total	
	Frc.	Per.	Frc.	Per.	Frc.	Per.
Less than a year	6	46.2	14	82.4	20	66.7
More than one year	7	53.8	3	17.6	10	33.3
Total	13	100%	17	100%	30	100%

Status of Supply :

Aseparate question was asked only to the pill users regarding the regularity of getting supply of pill from the clinic. Eight of the respondents (61.5%) reported that they get regular supply, only one reported not getting regular supply. There (14.3%) of them mentioned that they get the supply from outside and one did not give any answer. (Table - 8)

Table - 8

Distribution of respondents on the basis of the status of contraceptive supply :

Status	Frequency	Percentage
Get regularly	8	61.5%
Do not get regularly	1	7.7%
Get supply from out side	3	23.1%
No Answer	1	7.7%
Total	13	100%

Summary

Ninety nine percent of the respondents were in the fertile age group with their mean age being around 31 years. The mean age of their husbands was around 39 years. The pill users were within the age group of 15 to 34 whereas the tubectomy clients were within the age group of 25-44. Respondents having 0-4 children were user of pill and respondents having 3-7 children were tubectomy clients. Respondents had on an average 3.6 children. Around eighty five percent of pill users and 70.6% of tubectomy clients had no complain of any side effect and the remaining had some complains of side effect such as pain, weakness, dizziness, loss of ability to work. Among the tubectomy clients and pill users complain of vomiting tendency was a common. The continuation rate was 88.6%. 11.4% were drop-out cases.

92.3% of pill users and 76.4% tubectomy clients adopted the respective methods being motivated either by their husbands or by themselves or out of their common desire. Only 11.6% of the tubectomy clients were motivated by the FPAW workers. About sixty two percent of the pill users reported getting regular supply from the clinic.

IMPLICATIONS

The follow-up study reveals some very important information about family planning. It is therefore necessary to conduct such studies frequently to find out, the effectiveness of various family planning methods in urban as well as in the rural areas. The system for keeping record in the clinic must be accurate and improved. The payment for the tubectomy clients should be made in time by the workers or referer. Follow-up study should be a continuous not only for pill users or tubectomy clients but also for other methods in the city of Dhaka as well as other parts of the country to find out the continued acceptor rate. If some health care facilities could be rendered along with it family planning service would become more attractive to the clients. The problem of side effects of the tubectomy clients can be easily removed if some simple medicine can be supplied to the clients. Good motivation and counselling will help decrease drop-out cases. Follow-up visit, home visit will check drop-out and will ultimately increase the rate of acceptors. Follow-up study will enable us to find out the effectiveness of all the methods. In addition our workers should carry some simple medicine eg. Paracetamol (with advice to take after meal), anti acid tablets, anti diarrhoea capsules etc to sell at cost price to those they visit. This will be an added point of contact with the target group.