

CHANGES IN FAMILY PLANNING METHOD UTILIZATION POST MISSION PARIVAR VIKAS: A COMPARATIVE ANALYSIS FROM NFHS-4 TO NFHS-5 IN MPV AND NON - MPV STATES



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Content

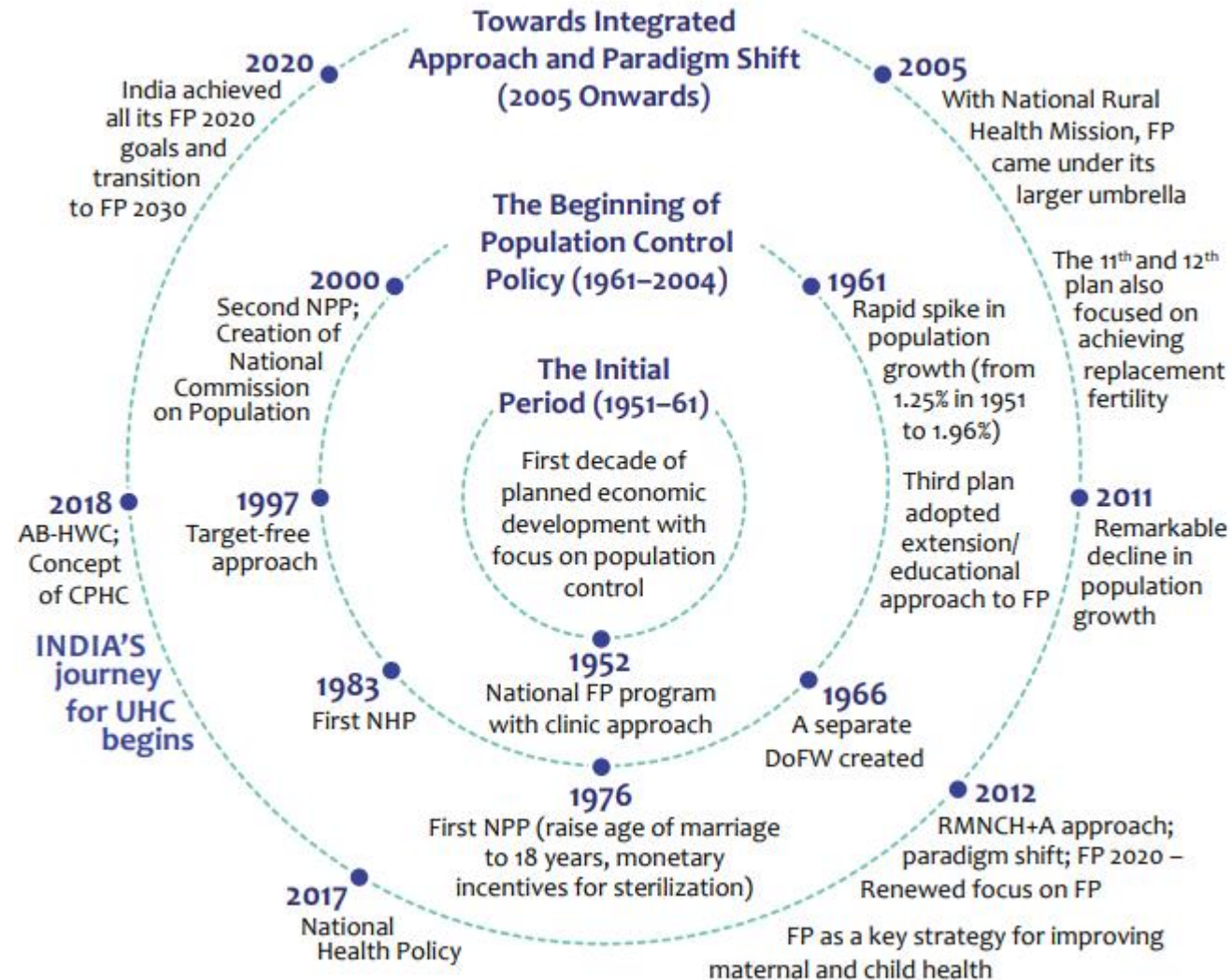
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INTRODUCTION

Family planning is a crucial aspect of public health that involves the ability of individuals and couples to anticipate and attain their desired number of children and the spacing and timing of their births. Achieved through the use of contraceptive methods and the treatment of infertility, family planning empowers people to make informed choices about their reproductive health. It plays a significant role in improving the health and well-being of women and children, reducing poverty, and fostering sustainable development. Effective family planning services can help prevent unintended pregnancies, reduce maternal and child mortality rates, and promote gender equality by enabling women to pursue education and employment opportunities.

Milestone of Family Planning



Objective



Research Question

Has the interventions of MPV affected contraceptive use among women of reproductive age group?



Objective

To assess the use of contraceptive methods MPV and non-MPV states.



Study Design

The study design chosen is Descriptive analytical study based on Secondary Research.



Study Duration

The study duration is from 15th March to 28th June.



Study Population

The reproductive age of women from 15 - 49 years of age.



Data Collection

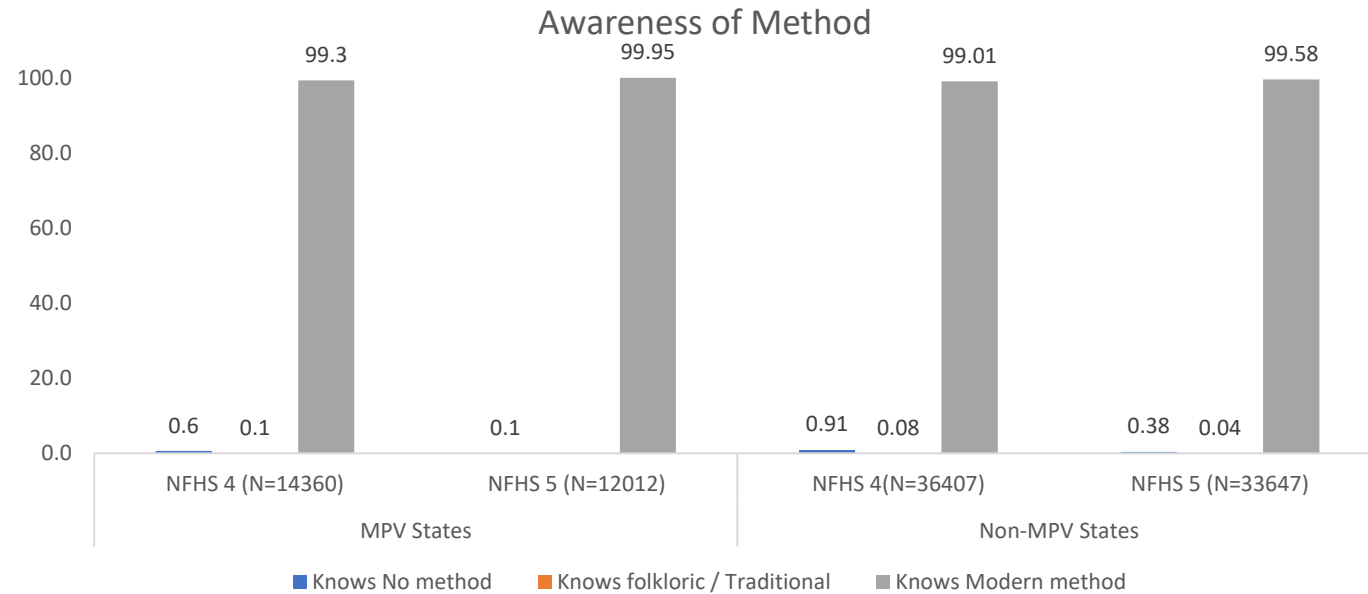
The secondary data taken from NFHS 4 and NFHS 5.



Data Analysis

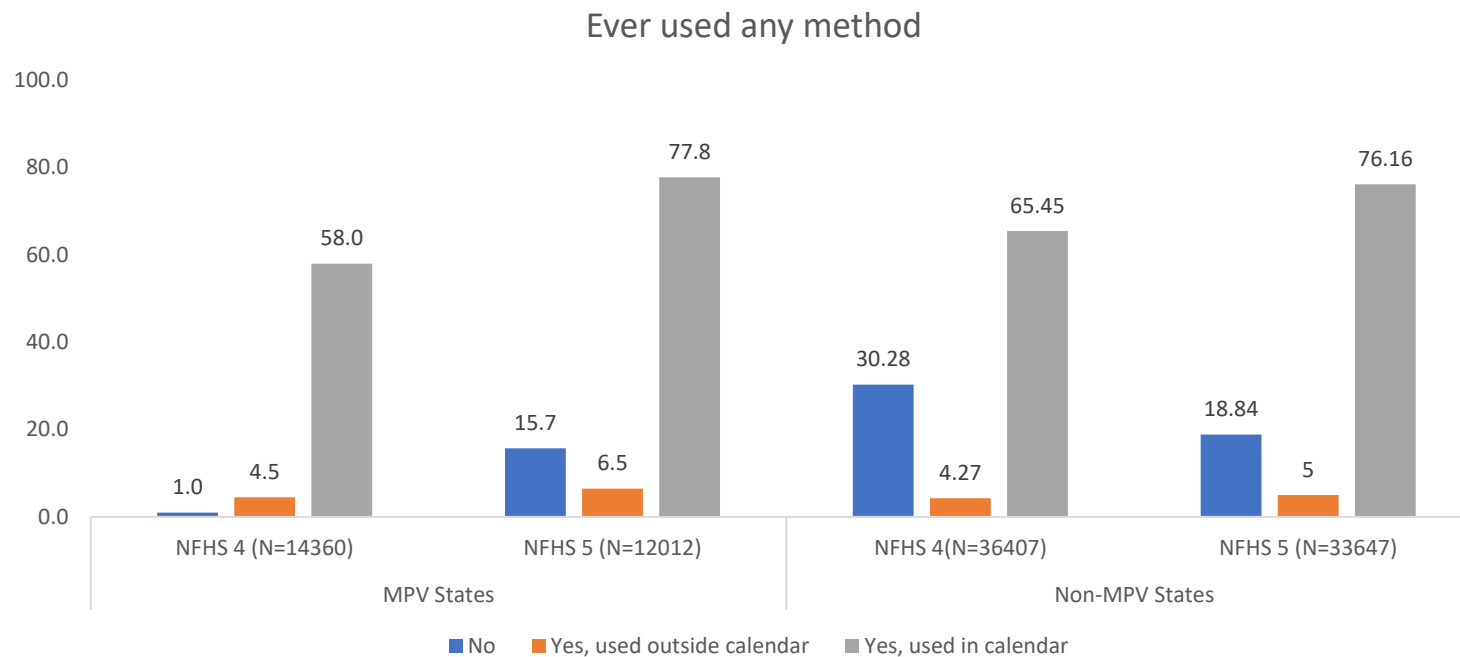
In the study for analysis purpose STATA was used.

Awareness of Family Planning Method



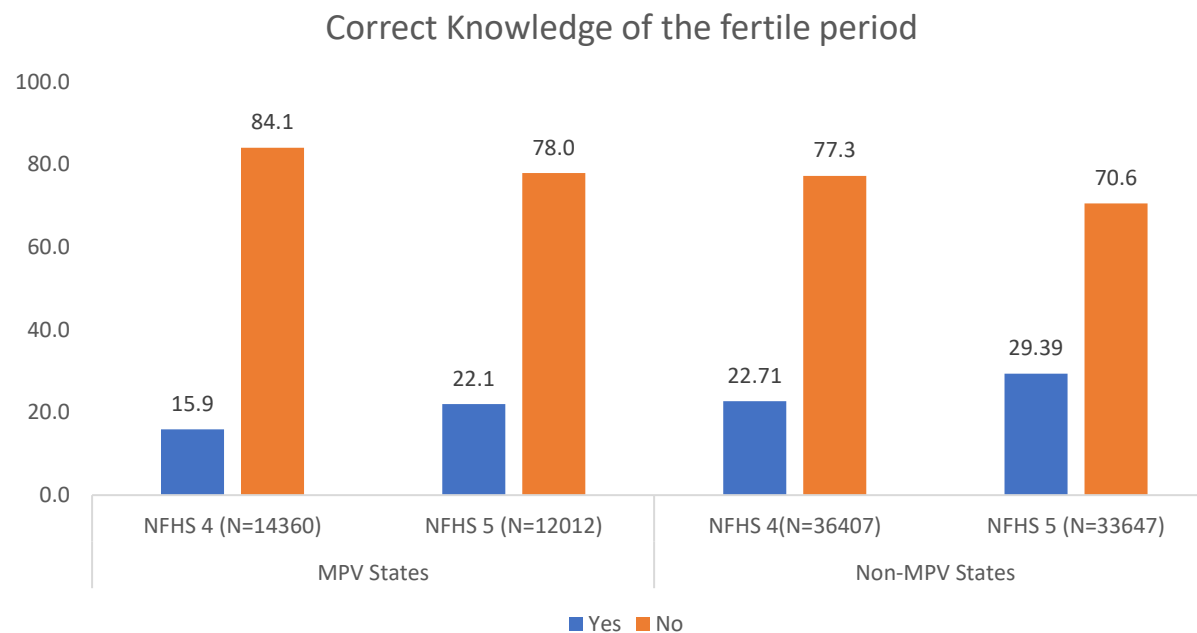
- **Awareness of Modern Methods** : The graph shows the increase in Modern Methods both in MPV and Non –MPV states from NFHS 4 to NFHS 5.
- Less than 1% of women reported knowing no family planning methods at all, highlighting the effectiveness of educational initiatives on family planning.

Ever –Used any method



- MPV states shows more substantial increase in the usage of contraceptive methods (recorded in the calendar), rising from 58.0% in NFHS 4 to 77.8% in NFHS 5.
- Non-MPV states also show an increase, but less pronounced, from 65.45% in NFHS 4 to 76.16% in NFHS 5.

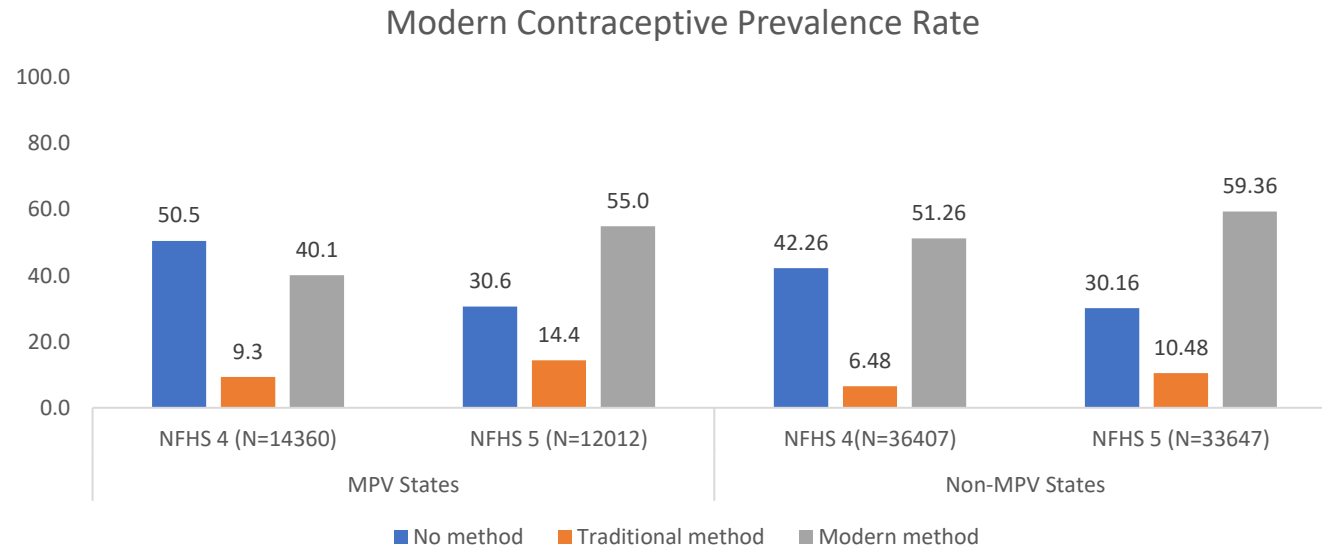
Correct Knowledge of fertile period



- The percentage of individuals with correct knowledge of the fertile period increased significantly from 15.9% in NFHS 4 to 22.1% in NFHS 5. This represents a notable improvement in awareness over the two survey periods.
- While there is an improvement, the increase is relatively smaller compared to the progress seen in MPV states.

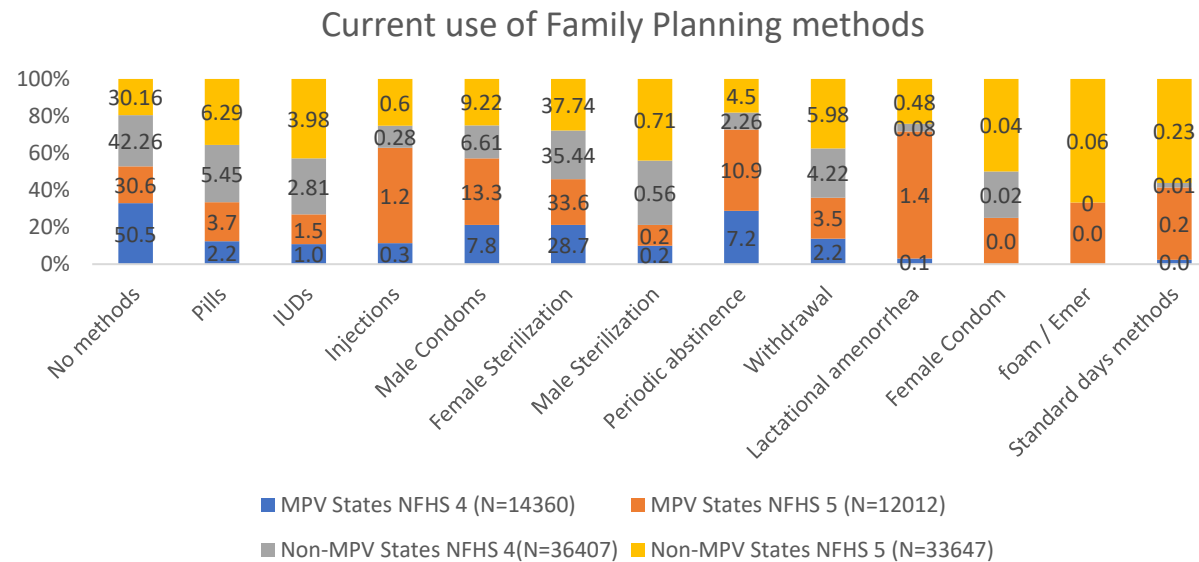
Modern Contraceptive Prevalence Rate

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- The most significant change in the MPV states is the decrease in the percentage of people not using any contraceptive method, which dropped by 19.9 % from NFHS 4 to NFHS 5.
- While there is a significant increase in MCPR

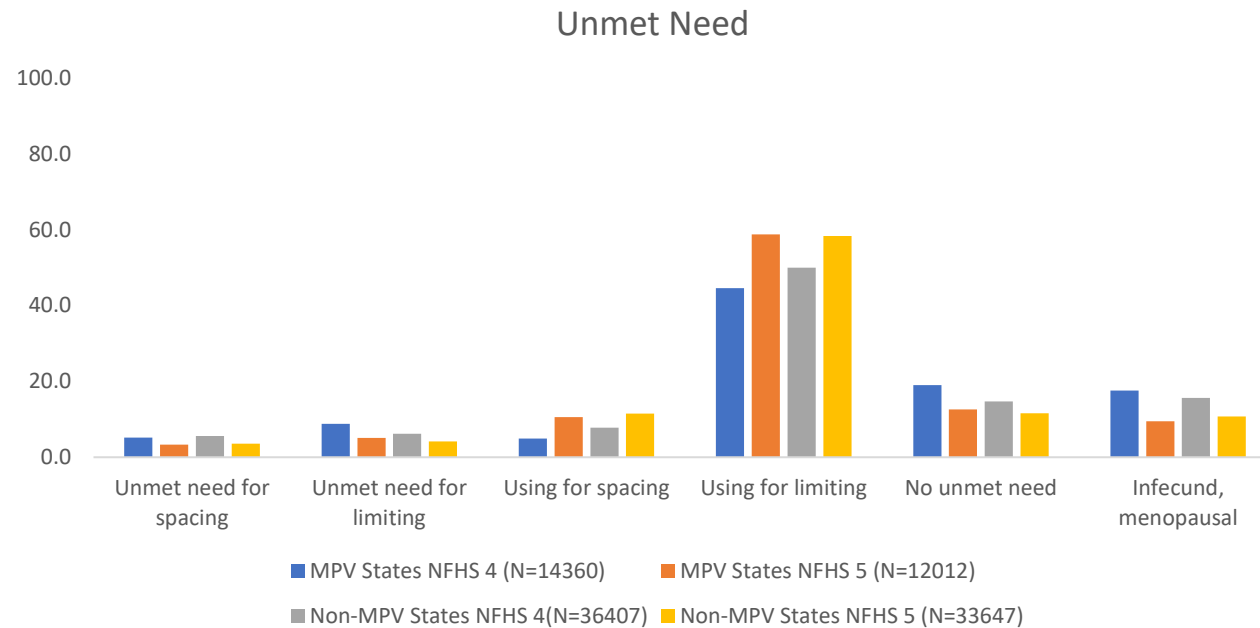
Current use of Family Planning methods



- Significant reduction in the use of no family planning methods, dropping from 50% (NFHS 4) to 30.6% (NFHS 5).
- Notable increases in the use of pills (2.2% to 3.7%), IUDs (1.5% to 3.5%), male condoms (7.8% to 10%), and female sterilization (22.5% to 26.8%).

Unmet Need

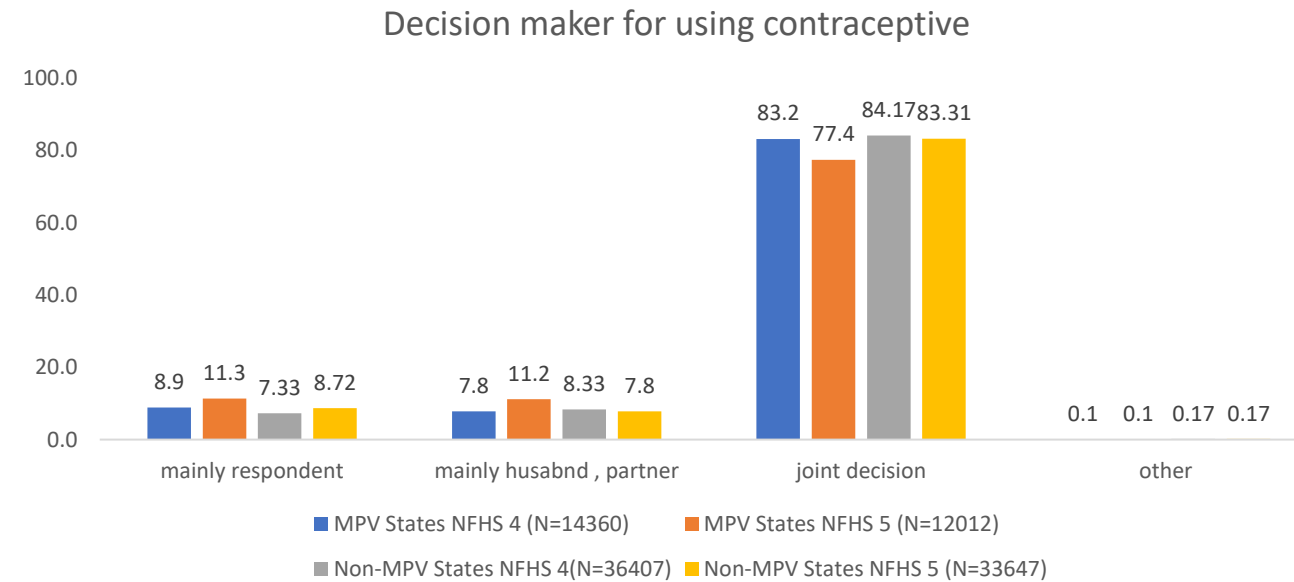
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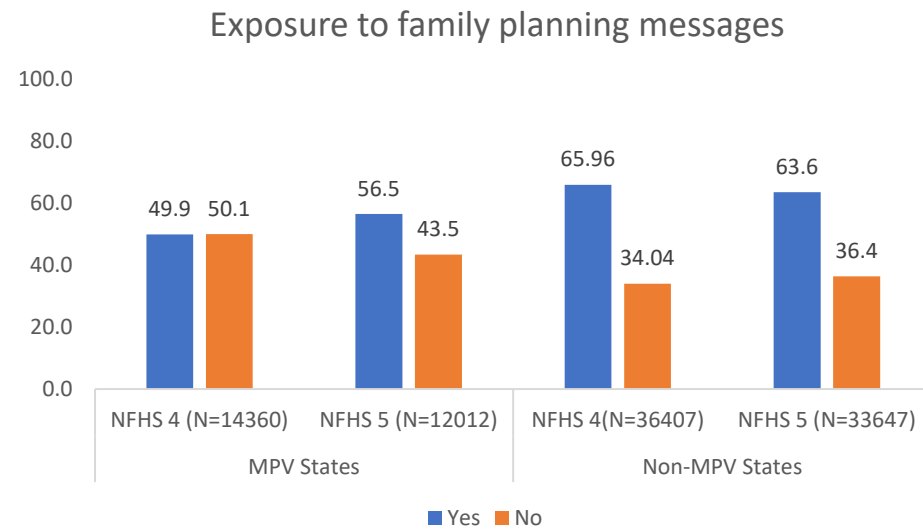
- MPV states show a more significant reduction in unmet need for both spacing and limiting family size compared to Non-MPV states.
- There is a notable increase in the percentage of people using family planning methods for both spacing and limiting in MPV states, with MPV states also showing a higher increase in the category of no unmet need compared to Non-MPV states.

Decision maker for using Contraceptive

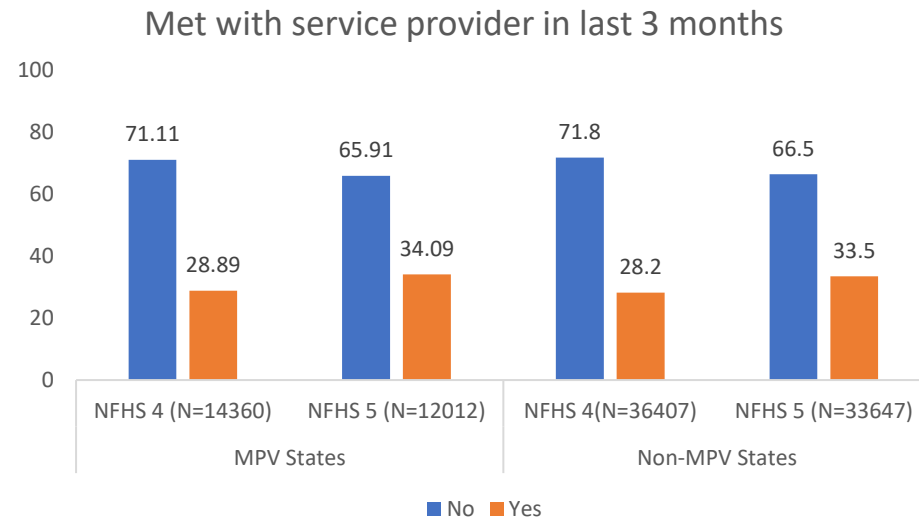
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- In MPV states the respondent making decisions has increased from 8.9 % to 11.3% .



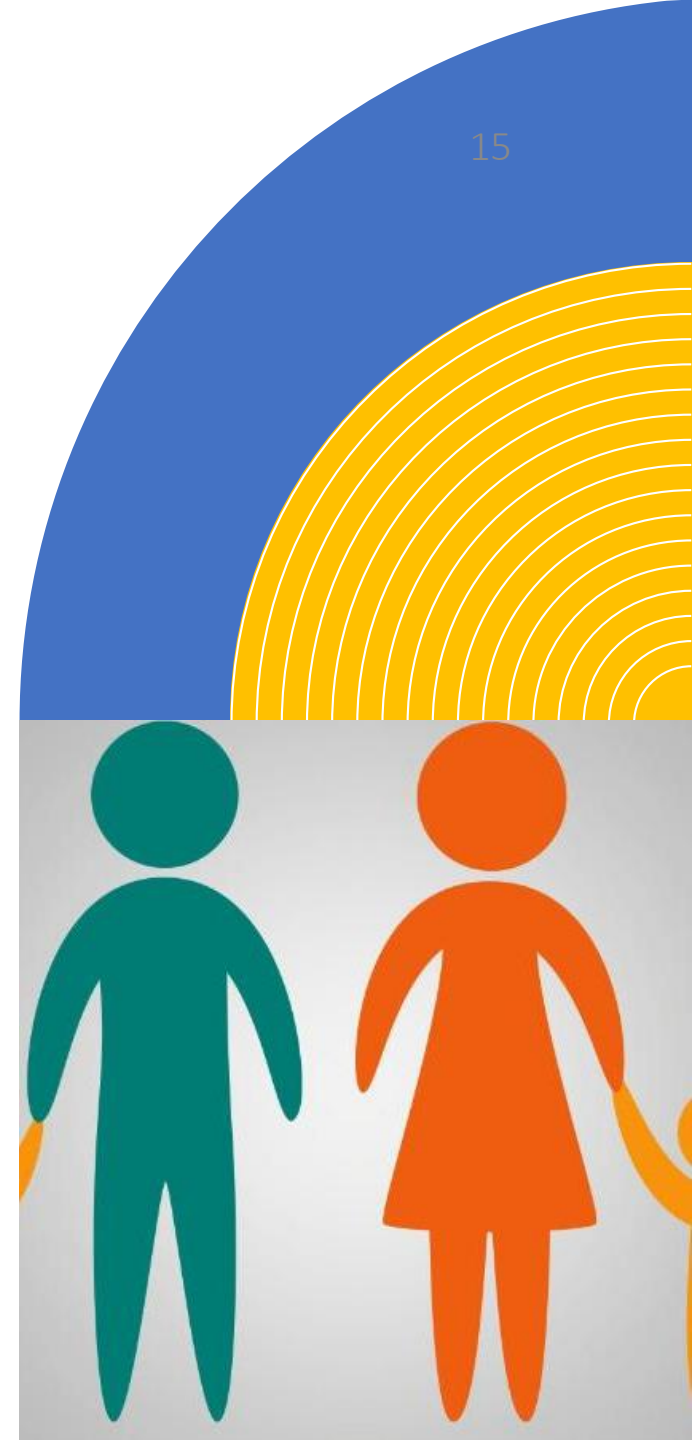
In MPV states the engagement of community has increased to a significant level .



In MPV states meetings with service provides has also significantly increased.

RESULT

The study's results highlight significant differences in contraceptive use and related demographics between MPV (Mission Parivar Vikas) and non-MPV states. In MPV states, there was an increase in modern contraceptive prevalence from NFHS-4 to NFHS-5, with female sterilization rising from 28.7% to 33.6%, and condom use from 7.8% to 13.3%. The mean age of females, age at first birth, and number of children born and living showed a decline, indicating shifts towards smaller family sizes. Awareness of modern contraceptive methods was nearly universal, and correct knowledge of the fertile period increased from 15.9% to 22.1%. Unmet needs for family planning decreased, reflecting better access and use of contraceptive services. Exposure to family planning messages and engagement with service providers also improved, suggesting enhanced outreach and awareness efforts in MPV states.



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Thank
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