



January 2009

**Contraceptive use among females of reproductive age group in Kersa district, Eastern Hararge, East Ethiopia**

This policy brief documents the knowledge, practice and attitude of reproductive age women on contraceptives.

Based on data from survey done among reproductive age women in kersa District.

**Introduction**

Worldwide there is a large unmet need for family planning and contraceptive services. An estimated 123 million couples, mainly in developing countries do not use contraceptives, despite wanting to space or limit their child bearing. Beyond prevailing social and cultural norms, the attitude of sexually active couples towards contraceptive are influenced by their contracts with providers, the quality of care they receive, the availability of reproductive health services and supplies.

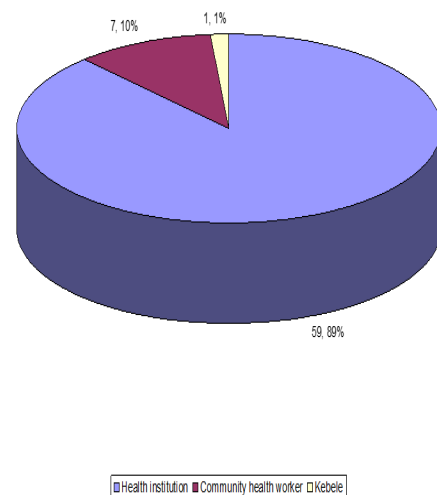
In Ethiopia the contraceptive prevalence is very low with only 14% of the married women use any form of contraceptive (EDHS, 2005), which leads to large number of unwanted pregnancy every year. The incidence of wanted pregnancy and incomplete and unsafe abortion is high in Ethiopia, particularly among adolescents. People in Ethiopia also disproportionately suffer from the country’s unsustainable population growth which strain the government’s ability to provide health care and education to young people and create condition for ever greater unemployment, poverty and unrest

Contraceptive/ family planning services have become the intervention of choice to avoid the risk as well as to slow population growth. It is believed that 25% of maternal and infant death could be avoided in the developing world by the use of family planning. Child spacing or timing of every birth can also improve survival of the child and can maintain good physical and emotional health for the whole families.

Among 381 married women 258(67.7%) had been married before they reach 18 years old and 318

(85.7%) of them were pregnant before the age of 18 and only about 120(32%) were attend antenatal follow up during their pregnancy. From 348(94.4%) mother report ever had live birth, only 11(4.9%) were at health institution. Nearly only half (54%) of the reproductive age female knew at least one contraceptive method. Among the respondents (n=411) only 90(21.9%) were ever used contraception.

Fig 1. place of gettin contraceptive services among female of reproductive age goup currently using contraceptive in Kersa District, Eastern Ethiopia, January 2008



Among those 222 mother who ever heard of about family planning 159(72%) had positive attitude to wards the use of contraception and from mothers who didn't use family planning about 113(35.2%) were in need of contraception.

## Conclusion and Recommendation

Study has shown very low knowledge and practice of family planning. In addition ANC follow up, postpartum follow up and institutional delivery is also very low. The major source of family planning services is from health institution. The study also reveals that there is high unmet need for family planning which accounts more than 35% of the participants.

In addition to expanding health facility based quality family planning service delivery, focusing on alternative service deliveries programs such as community based reproductive health (CBRH) approach through promoting and raising awareness about family planning with appropriate IEC. Also involving the husbands in all fertility determination and other reproductive health services and religious leaders should be considered as one strategy to raise family planning usage.

### Kersa Demographic Surveillance and Health

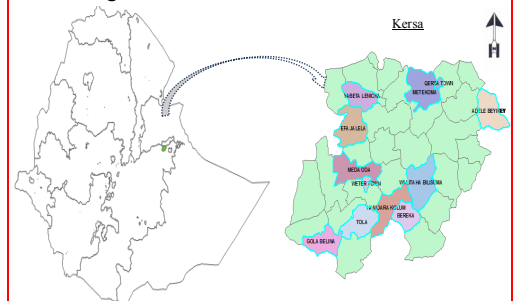
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The surveillance site was established in September 2007 in Kersa district, Eastern Hararge of Oromia region, East Ethiopia with aim of tracking demographic changes like death, birth, migration and marital status change. The surveillance activities further extended by adding surveys in Nutrition, Reproductive Health, Environmental Health, HIV/AIDS, Morbidity/health seeking behavior and health care utilization during the month of January-March 2008.

The surveillance activity is instituted in 12 kebeles (the smallest administrative unit in Ethiopia with approximate population Size of 4-5 thousand). Two of the kebeles are semi urban and the remaining 10 are rural kebeles.

According to the first census there were 10,256



households and 53,482 people in the study site with an average household size of 5.2 and sex ratio of 104.5. In the study area the crude birth and death rates were 26.8 and 9.2 per 1000 population. Infant and under five mortality rates were 44.9 and 108.2 per 1000 live births respectively.

The activities of the surveillance are lead by a coordinator and a group of six staff members from the College of Health and Medical Sciences.

