



## **A Study to Assess the Awareness and Utilization of Family Welfare Services Among Eligible Women in A Selected Urban Community, Hyderabad, Telangana**

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### **ABSTRACT**

Family welfare services centered towards welfare of the whole family by means of total family health care. The different dimensions of Family Welfare includes maternal and child health services, spacing of births and limiting births, contraceptive methods, small family norm, eligible couple, community need assessment approach women's welfare' etc.

A study was conducted to know the effectiveness of Standard Days Method (SDM) Trained health workers instructed the participants about standard days method. Participants kept a calendar to record the beginning and end of their cycles, acts of intercourse, and any other method used to avoid pregnancy (e.g., condoms or withdrawal). barrier methods.15 A study has been made to understand the utilization for safe motherhood, particularly, the antenatal care (ANC) in 35 villages. Hence, the investigator being experienced in the field of Community Health nursing recognized the crave need of imparting awareness among the women about Family Welfare Services available to reduce persisting increase of maternal mortality and morbidity. Based on the above findings the investigator felt that there is a strong need to bring awareness and utilization of family welfare services among Eligible Women.

According to WHO (2016) reports Indian population is projected to increase by 1,6613,486 people and reach up to 1,33,61,91,444 in the beginning of 2017. The natural increase is expected to be positive, as the number of births will exceed the number of deaths. As per the projections made in the report based on United Nations projection India's population will reach 1.53 billion by the year 2050. India's population stands second most populous country in the world, while China is on top with over 1,415,489,506 (1.41 billion) people With the population growth rate at 1.2% .

The Ministry of Health and Family Welfare is the government unit responsible for formulating and executing family planning related government plans in India. An inverted red triangle is the symbol for family planning health and contraception services in India. According to World Health Organization (WHO) reports (2015) revealed that there are approximately 57 million more men than women in the World to achieve contraceptive prevalence rate (CPR) of 15 percent by following modern family planning methods by 2000 and 50 percent by 2020. The total population using family welfare services is about 1107 million instead of 1162 million projected by the technical group of population World in 2015. The total number of users will increase from 1.6 million women in 2010 to more than 2.8 million women in 2015 and almost 4.3 million women in 2020.

### **Objectives of the Study**

- i. To assess the Awareness and Utilization of Family Welfare Services among Eligible Women
- ii. To co-relate the scores of Awareness and Utilization of Family Welfare Services among Eligible Women
- iii. To find out association between the scores of Awareness and Utilization of Family Welfare Services among Eligible Women with the selected demographic variables.

### **4. REVIEW OF LITERATURE**

A study was conducted by Muhammad J J. (2015), to determine the level of knowledge among women on antenatal care in rural Andhra Pradesh (A.P). The study selected 104 women aged between 15–49 years who had at least one antenatal experience. The data collected by structured questionnaire. The results revealed that 92.3% attended antenatal clinic, during their previous pregnancy, 48.1% came early for their first check-up, 70% had history of home delivery and 44.2% had experienced at least one high risk pregnancy before. The study concluded that home delivery and late antenatal booking was still high in rural A.P.

A study was conducted by Babalola (2015), to assess the utilization of maternal health services in Nigeria. The study included 2148 women who had a child. The data was collected by survey method. The result revealed that 60.3% of the mothers used antenatal services, 43.5% had gone for hospital delivery & 41.2% received postnatal care.

The three indicators of maternal child health services were inadequately utilized and there is a need to create awareness among women on various services and schemes provided by the Government. The study concluded that the knowledge is suboptimal among the women of Nigeria on utilization of maternal child health services.

A study was conducted by Darmstadt GL. et.al (2015) on current global under-5 mortality rate need to be halved from 57 deaths per 1,000 live births to 29 to reach the target by 2015. Research has shown that 80% of deaths in the maternal group could be averted if women had access to essential maternity and basic health care, reproductive health including family planning saves infant and maternal lives and reduces unintended births. The progress towards Millennium Development Goal (MDG) 5B is slow and uneven. In 2009, the contraceptive prevalence rate was 63% globally, during 2015, 65% of births were attended by a skilled health worker, There has been insufficient investment to ensure that maternal and reproductive health services are accessible, affordable, and available on an equitable basis.

**Method:** Descriptive design was used for this Study. The study was carried out among 100 Eligible women in a selected Urban Community, Hyderabad, Telangana, selected by simple random sampling technique using Structured Knowledge Questionnaire. The study was adapted Modified Pender's Health promotion model (2007).

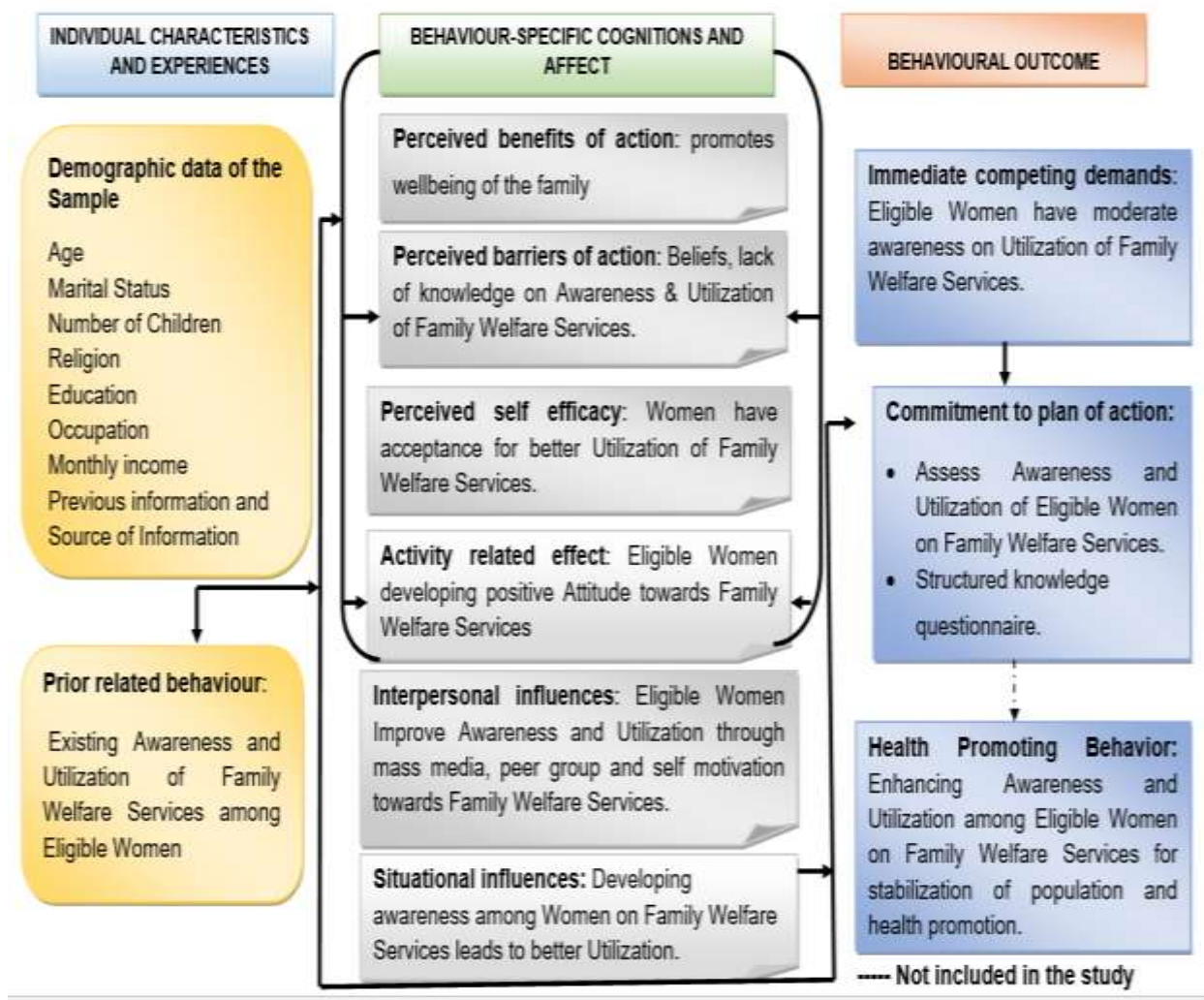


Figure no 1: Conceptual Framework based on Modified Pender's Health Promotion Model (2007)

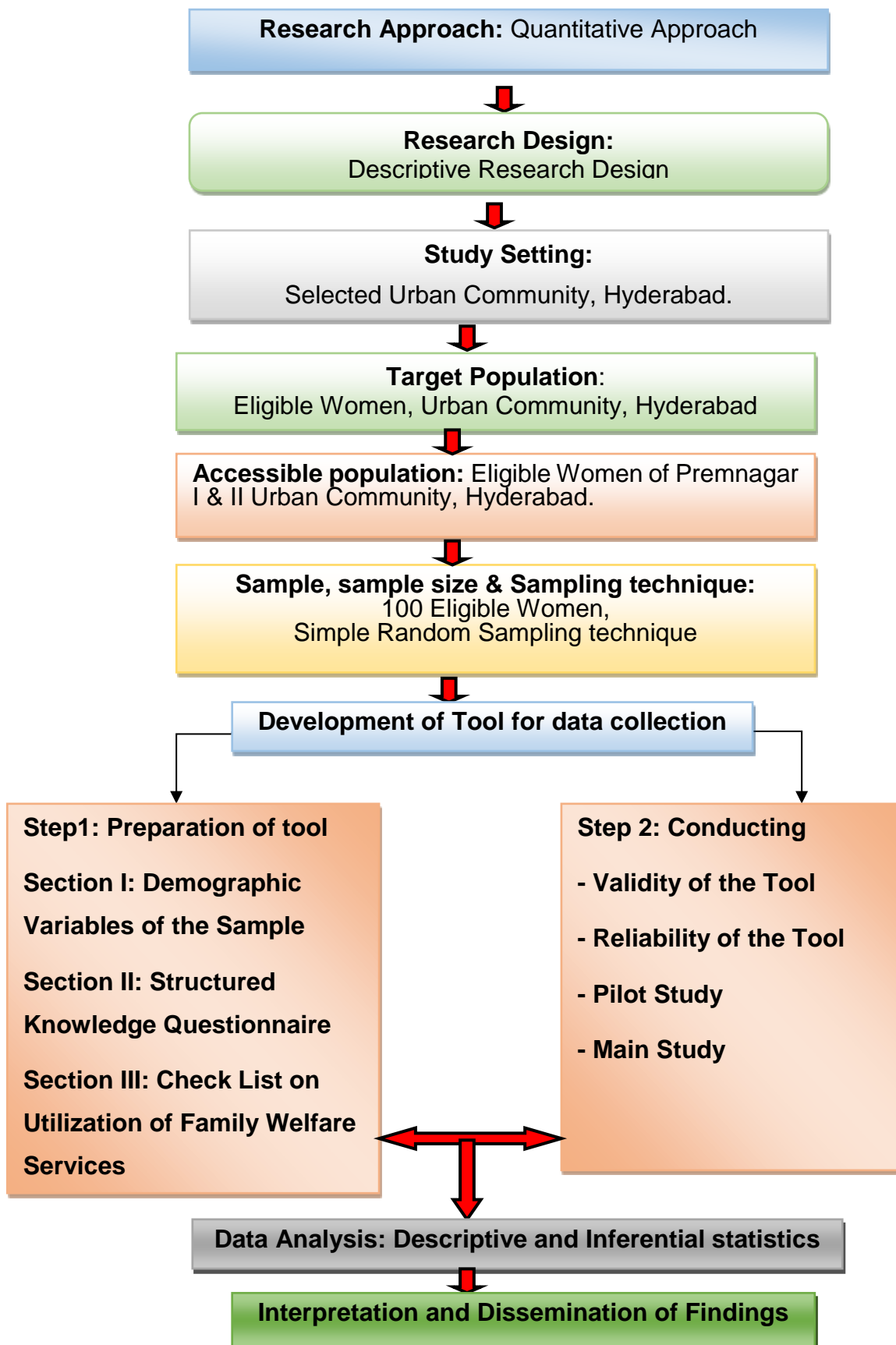


Figure no: 2 Schematic representation of the Study Design

**Results:**

The overall Awareness mean score was 11.8 with a Standard Deviation of 1.04 and the mean score of Utilization is 9.1 with a standard deviation of 1.01. There is a positive correlation between Awareness & Utilization ( $r=0.961$ ), which was statistically significant at 0.05 level of significance. There is a significant association found between Awareness scores Age (Chi-square=14.5,  $df=4$ ) and Education (Chi-square=11.0,  $df=4$ ), Utilization scores Age (Chi-square=11.86,  $df=4$ ) was found to be significant at 0.05 level of significance on Family Welfare Services.

The other demographic variables had not shown statistically significant association with Awareness & Utilization among Eligible Women.

The first section of the questionnaire elicited information about demographic features of the sample which included Age, Marital Status, number of children, Religion, Education, Occupation, Monthly Income, Previous and Source of information.

**Analysis and interpretation****Table: 1****Frequency and Percentage distribution of samples Demographic Variables n=100**

S. No.	Demographic Variables	Frequency (f)	Percentage (%)
<b>1</b>	<b>Age (in years)</b>		
1.1	21 - 25	11	11
1.2	26 - 30	38	38
1.3	31 - 35	35	35
1.4	36 - 40	11	11
1.5	41 - 45	5	5
<b>2</b>	<b>Marital Status (in years)</b>		
2.1	<1	15	15
2.2	1 - 5	35	35
2.3	6 - 10	20	20
2.4	11 - 15	20	20
2.5	16 - 20	5	5
2.6	>21	5	5
<b>3</b>	<b>Number of Children</b>		
3.1	One	30	30
3.2	Two	50	50
3.3	Three & Above	20	20
<b>4</b>	<b>Religion</b>		
4.1	Hindu	50	50
4.2	Muslim	12	12
4.3	Christian	38	38
4.4	Others	0	0
<b>5</b>	<b>Education</b>		
5.1	Illiterate	5	5
5.2	Primary School Education	20	20
5.3	Secondary School Education	24	24
5.4	Intermediate	44	44
5.5	Degree & Above	7	7
<b>6</b>	<b>Occupation</b>		
6.1	House maker	30	30
6.2	Self employee	35	35
6.3	Daily wages	15	15
6.4	Private employee	15	15
6.5	Government employee	5	5
<b>7</b>	<b>Family Monthly Income (in rupees)</b>		
7.1	5001 -10,000	40	40
7.2	10,001-15,000	35	35
7.3	15,001-20,000	20	20
7.4	>20,000	5	5

<b>8</b>	<b>Previous information on Family Welfare Services</b>		
8.1	Yes	60	60
8.2	No	40	40
<b>9</b>	<b>If yes, source of information (n=60)</b>		
9.1	Family members	2	2
9.2	Friends	2	2
9.3	Health personnel	40	40
9.4	Mass media	16	16
9.5	Any other	0	00

Table No. 2

Table -2.1: Frequency and Percentage distribution of Awareness Scores among Eligible Women.

n=100

Awareness Scores	Frequency (f)	Percentage (%)
Inadequate (< 33.33 %)	20	20
Moderately Adequate (33.33% - 66.66 %)	80	80
Adequate (> 66.67%)	00	00
Total	100	100

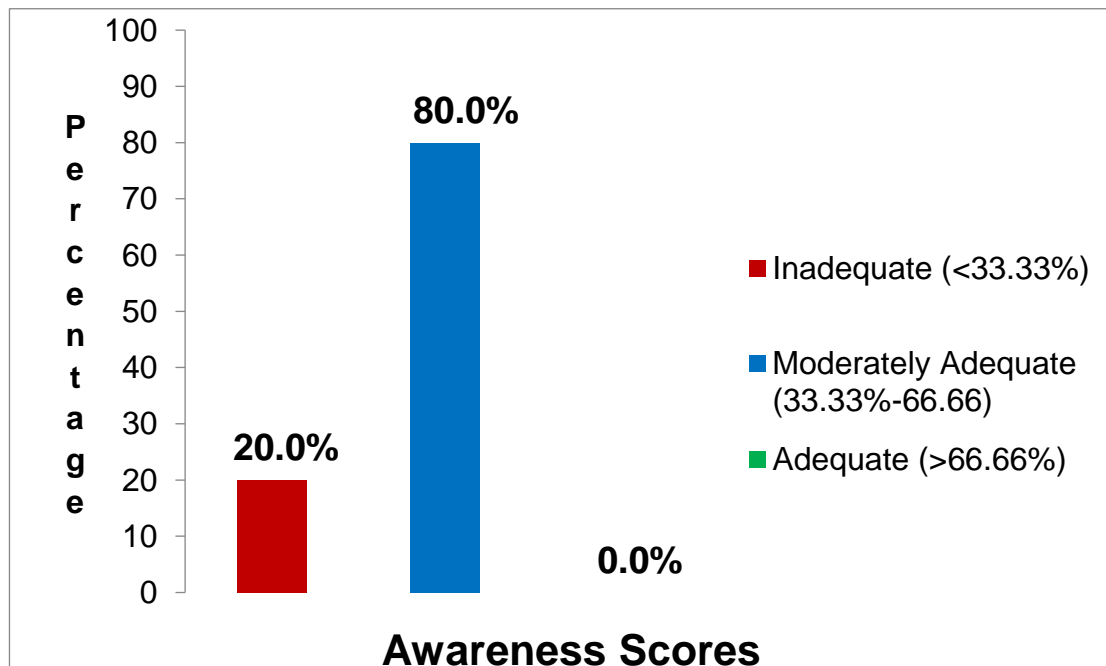


Figure No.3: Distribution of Eligible Women according to the level of Awareness Scores on Family Welfare services

The table No. 2 and Figure No. 3 depicts with respect to Awareness among Eligible Women. Majority i.e., 80 percent of Eligible Women had Moderate Awareness, 20 percent had inadequate Awareness and none of them had Adequate Awareness regarding Family Welfare Services.

Table - 3 Mean, Standard Deviation on Awareness scores among Eligible Women

n=100

S.NO	Variables	Mean	Standard Deviation
1	Awareness	11.8	1.04

From table No.3 shows that the mean score of Awareness among Eligible Women is 11.8 with a standard deviation of 1.04.

Table No: 4

Table No.4: Frequency and Percentage distribution of Eligible Women according to level of Utilization of Family Welfare Services

n=100

Utilization Scores	Frequency (f)	Percentage (%)
Poor (< 33.33 %)	30	30
Moderate (33.33 % - 66.6 %)	70	70
Good (> 66.66%)	00	00
Total	100	100

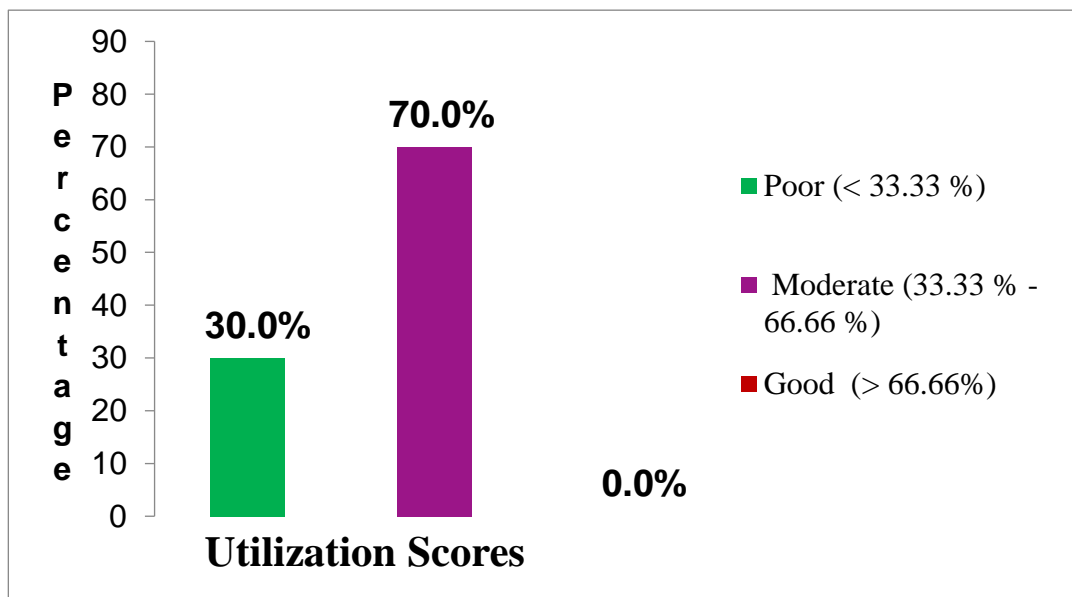


Figure No.4 Distribution of Eligible Women according to the level of Utilization on Family Welfare services

The table No:4 and Figure No.4 depicts with respect to Utilization among Eligible Women. Majority i.e., 70 percent of Eligible Women had moderate Utilization of Family Welfare Services, while 30 percent of Women had Poor Utilization, none of them had good Utilization of Family welfare services.

Table - 4.2 Mean, Standard Deviation on Utilization scores among Eligible Women.

n=100

S. No	Variables	Mean	Standard Deviation
1	Utilization	9.1	1.01

From table No.4.2 shows that the mean score of Utilization is 9.1 with a standard deviation of 1.01.

Table No. 5

Correlation between Awareness and Utilization of Family Welfare Services among Eligible Women

n=100

Study Variables	Correlation Coefficient
Awareness and Utilization	0.961

\* Significant at 0.05 level  $P \leq 0.05$

From table No.5 the Karl Pearson's method was used to compute Correlation. The Correlation between Awareness and Utilization ( $r=0.961$ ) found to be positive and also statistically significant at 0.05 level. It evidenced that increase in Awareness bears the increase in Utilization of Family Welfare Services among Eligible Women.

Table No. 6

## Association between Awareness and selected Demographic Variables

n=100

S. No.	Demographic Variables	Awareness			$(\chi^2)$	Tab Value	df	Inference
		In Ade	Mod	Ade				
<b>1</b>	<b>Age (in years)</b>							
1.1	21 - 25	5	06	00	14.5	9.49	4	S*
1.2	26 - 30	4	34	00				
1.3	31 - 35	4	31	00				
1.4	36 - 40	4	07	00				
1.5	41 - 45	3	02	00				
<b>2</b>	<b>Marital Status (in years)</b>							
2.1	<1	4	11	00	3.64	11.07	5	NS
2.2	1 - 5	5	30	00				
2.3	6 - 10	4	16	00				
2.4	11 - 15	3	17	00				
2.5	16 - 20	2	03	00				
2.6	> 21	2	03	00				
<b>3</b>	<b>Religion</b>							
3.1	Hindu	10	40	00	0.18	7.82	3	NS
3.2	Muslim	03	09	00				
3.3	Christian	07	31	00				
3.4	Others	00	00	00				
<b>4</b>	<b>Education</b>							
4.1	Illiterate	3	2	00	11.0	9.49	4	S*
4.2	Primary School Education	6	14	00				
4.3	Secondary School Education	3	21	00				
4.4	Intermediate	5	39	00				
4.5	Degree & Above	3	4	00				
<b>5</b>	<b>Family Monthly Income(in rupees)</b>							
5.1	5001 - 10,000	8	32	00	1.24	7.82	3	NS
5.2	10,001 - 15,000	6	29	00				
5.3	15,001 - 20,000	4	16	00				
5.4	>20,000	2	03	00				
<b>6</b>	<b>If yes, source of information(n=60)</b>							
6.1	Family members	01	01	00	0.81	9.49	4	NS
6.2	Friends	01	01	00				
6.3	Health personnel	12	28	00				
6.4	Mass media	06	10	00				
6.5	Any other	00	00	00				

\* Significant at 0.05 level

The table 6 shows that the demographic variables Age and Education had shown statistically significant association with Awareness among Eligible Women at  $p < 0.05$  level. The other demographic variables had not shown statistically significant association with Awareness among Eligible Women.

Table No. 7

## Association between Utilization and selected Demographic Variables

n=100

S. No.	Demographic Variables	Utilization			$(\chi^2)$	Tab Value	Df	Inference
		Poor	Moderate	Good				
<b>1</b>	<b>Age (in years)</b>							
1.1	21 - 25	06	05	00	11.86	9.49	4	S*
1.2	26 - 30	10	28	00				
1.3	31 - 35	06	29	00				
1.4	36 - 40	04	07	00				

1.5	41 - 45	04	01	00				
<b>2</b>	<b>Marital Status (in years)</b>							
2.1	<1	06	09	00				
2.2	1 - 5	10	25	00				
2.3	6 - 10	07	13	00				
2.4	11 - 15	03	17	00	3.37	11.07	5	NS
2.5	16 - 20	02	03	00				
2.6	> 21	02	03	00				
<b>3</b>	<b>Religion</b>							
3.1	Hindu	13	37	00				
3.2	Muslim	07	05	00	4.97	7.82	3	NS
3.3	Christian	10	28	00				
3.4	Others	00	00	00				
<b>4</b>	<b>Education</b>							
4.1	Illiterate	04	01	00				
4.2	Primary School Education	07	13	00				
4.3	Secondary School Education	06	18	00	7.85	9.49	4	NS
4.4	Intermediate	10	34	00				
4.5	Degree & Above	03	04	00				
<b>5</b>	<b>Family Monthly Income(in rupees)</b>							
5.1	5001 - 10,000	11	29	00				
5.2	10,001 - 15,000	10	25	00				
5.3	15,001 - 20,000	05	15	00	6.11	7.82	3	NS
5.4	>20,000	04	01	00				
<b>6</b>	<b>If yes, source of information (n=60)</b>							
6.1	Family members	01	01	00				
6.2	Friends	01	01	00				
6.3	Health personnel	10	30	00	3.42	9.49	4	NS
6.4	Mass media	08	08	00				
6.5	Any other	00	00	00				

**\* Significant at 0.05 level**

The table 7 shows that the demographic variables Age had shown statistically significant association with Utilization among Eligible Women at  $p < 0.05$  level. The other demographic variables had not shown statistically significant association with Utilization among Eligible Women.

## Major Findings of the Study

### 5.2.1 Section A: Findings related to Demographic Variables

- Majority of Eligible women (38%) were in the age group of 26-30 years.
- Majority (35%) of Eligible Women duration of marital status is between 1-5 years.
- Majority (50%) of Eligible Women had two children.
- Majority (50%) of Eligible Women belonged to Hindu religion.
- Majority (44%) of Eligible Women were having Intermediate education.
- Majority (35%) were Self employees.
- Majority (40%) of Eligible Women were having Family Monthly Income of Rs. 5,001 -10,000.
- Majority (60%) of Eligible Women know about Family Welfare Services.
- Highest (40%) received previous information from health Personnel.



### 5.2.2 Section B: Findings related to sample's Awareness and Utilization on Family Welfare Services.

#### The present study revealed that:

- ❖ Majority (80%) of Eligible Women had moderate Awareness, while 20 percent had inadequate Awareness and none of the Eligible Women had adequate Awareness of Family Welfare Services
- ❖ Majority (70%) percent had moderate Utilization, while 30 percent had poor Utilization and none of the Eligible Women were not adequately Utilizing the Family Welfare Services.

### 5.2.3 Section C: Findings related to correlation between Awareness & Utilization.

The linear correlation between Awareness and Utilization found to be positive i.e. ( $r=0.961$ ), which was statistically significant at 0.05 level. Hence, the Hypotheses  $H_1$  was accepted indicating that there was a significant correlation between Awareness and Utilization among Eligible Women regarding Family welfare services.

### 5.2.4 Section D: Findings related to association between Awareness and Utilization with selected demographic variables.

The table 5 shows that the demographic variables Age and Education had shown statistically significant association with Awareness among Eligible Women at  $p<0.05$  level. The other demographic variables had not shown statistically significant association with Awareness among Eligible Women.

The table 6 shows that the demographic variables Age had shown statistically significant association with Utilization among Eligible Women at  $p<0.05$  level. The other demographic variables had not shown statistically significant association with Utilization among Eligible Women.

## 5.3 Discussion

This chapter discusses the findings of the study derived from the statistical analysis. This study is to assess the Awareness and Utilization of Family Welfare Services among Eligible Women on Family Welfare Services in a selected Urban Community, in Hyderabad, Telangana." The discussion is based on the objectives and hypotheses specified in this study.

#### i. To assess the Awareness and Utilization among Eligible Women on Family Welfare Services.

- ❖ Majority (80%) of Eligible Women had moderate Awareness, while 20 percent had inadequate Awareness and none of the Eligible Women had adequate Awareness of Family Welfare Services
- ❖ Majority (70%) percent had moderate Utilization, while 30 percent had poor Utilization and none of the Eligible Women were not adequately Utilizing the Family Welfare Services.

A descriptive study was conducted by Chatman L.M.(2014) on knowledge & practice among 60 Eligible couples on contraceptive methods in Kerala. Structured Interview Schedule was used to collect the data from the sample. The findings of the study revealed that 82% of the sample were having below average knowledge on contraceptive methods of them 56.7% of the couples were practicing Family Planning Methods while 43.3% were not practicing.<sup>33</sup>

#### ii. To correlate between Awareness and Utilization among Eligible Women on Family Welfare Services.

The linear correlation between Awareness and Utilization resulted to be positive i.e. ( $r=0.961$ ), which was statistically significant at 0.05 level. Hence the hypothesis  $H_1$  which was stated there is significant correlation between Awareness and Utilization among Eligible Women on Family Welfare Services was accepted.

A descriptive study was conducted by Saluja and Sharma (2014), to correlate the common source of knowledge regarding Emergency Contraceptives (ECP) at Haryana Agroha village. 250 eligible couples were selected by Simple Random Sampling Technique. The Results showed (72.0%) had exposure to family planning messages, were as 42.6% of Emergency Contraception were having information through doctors and other health care workers. A positive correlation for contraception was found among 198 (79.2%). The study concluded that there is good knowledge and practice of couples towards emergency contraception.<sup>34</sup>

#### iii. To associate Awareness and Utilization among Eligible Women on Family Welfare Services with selected demographic variable.

This study revealed demographic variables Age and Education had shown statistically significant association with Awareness among Eligible Women at  $p<0.05$  level. The other demographic variables had not shown statistically significant association with Awareness among Eligible Women.

This study revealed that the demographic variables Age had shown statistically significant association with Utilization among Eligible Women at  $p<0.05$  level. The other demographic variables had not shown statistically significant association with Utilization among Eligible Women.

A study was conducted on utilization of family welfare services among 21 villages in Ethiopia. Women who lived within 10 km from the health center in the district capital, Robe, were more likely to use prenatal services than those who lived at a greater distance (41% vs. 23%;  $p 0.001$ ). Among 29% of mothers had taken their child to under five clinics and among those 64% took their child to clinic for 3 visits. Only 5% of women between 15-45 years

were using contraceptive devices. Contraceptive usage was significantly associated with age i.e. 10% among 40 years of eligible couples, 7% for 20 years, and 4% of eligible women between 21- 39 years of age group were using contraceptive devices.<sup>35</sup>

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## 5.4. Implications of the Study

### 5.4.1 Nursing Education

- The present study emphasizes on enhancement of Awareness and Utilization among Eligible Women on Family Welfare Services.
- The student nurses and all health professionals should be given the responsibility to teach Eligible couples regarding Family Welfare services and teaching repeated until they gain knowledge.
- Using various techniques of teaching and communication to propagate the message on family welfare services to common women.
- Motivating people for family planning operation or permanent contraceptives.
- Organizing mass campaign in the community to bring Awareness among public.

### 5.4.2. Nursing Practice

- Nurses working in Health units should educate people by using appropriate audio visual aids which can be an effective method to bring Awareness and Utilization of Family Welfare Services.
- Organizing family planning campaign for sterilization operation.
- Community Health Nurses play important role in imparting knowledge among Eligible women in the community settings on utilization of Family Welfare Services.

### 5.4.3 Nursing Administration

- Nurse as administrator should plan and organize various educational programmes including continuing nursing educational programmes.
- The nurse administrators have to plan and provide information to the public through mass media for enhancing more awareness and Utilization among Eligible Women.
- Nurses need to organize family welfare programmes through family welfare centers and to coordinate with the family planning programmes with the child welfare and maternal health services.
- Nurses need to check for the adequate supply of contraceptive devices at health centres preferably free or at a minimum of cost.

### 5.4.4 Nursing Research

- The essence of research is to build a body of knowledge in nursing. The findings of the present study serve as the basis for the professional and the students to conduct further studies.
- The generalization of the study results can be made by replication of various studies related to Family Welfare Services.
- Nursing education programmes by using mass media to communicate with current, past and potential information that makes a very useful resources for health care for nursing research.

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## 5.5 Limitations

### *The Study is limited to*

- Study results are confined only to a selected Urban Community in Hyderabad which possibly will decrease credibility of the study.
- Study was limited only to the Eligible Women in Urban Community hence the findings cannot be generalized to other Eligible Women.

### 5.6 Recommendations

On the basis of the study findings, certain suggestions are given for future studies.

- A similar study can be done on large population, with the intention that generalization might be possible to a larger population.
- A comparative study can be carried out between urban and rural study settings.

- An experimental study can be conducted to evaluate the effectiveness of Video Assisted Educational programmes.
- KAP study can be carried out between rural and urban settings.

## 5.7 Conclusion

Uncontrolled growth of population is a most urgent problem in the country and it is a major obstacle to overall progress of the nation.

The study findings revealed that Eligible Women were having moderately adequate awareness and moderate Utilization of Family Welfare Services. There is a need to bring Awareness among public to adopt small family norm to stabilize our country population and also to improve the wellbeing of Women.

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