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Contraceptive Prevalence in an Isolated Population of Bay of Bengal

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ABSTRACT The growth of a population is dependent on many factors that limit and determine its growth. Load on land and natural resources along with artificial measures have a limiting effect on the growth. This paper discuses the family planning practices of the Nicobarese, an isolated but flourishing population of a small island in the Bay of Bengal.

INTRODUCTION

The menace of population overgrowth was in the minds of the planners of independent India, even before the independence, that is why, in 1946, Board Committee was established by the Interim Government of India to find measures to check the growth of population in independent India. Then, after the independence, India's first national Non Governmental Organization (NGO), Family Planning Association of India, for population control and study was established. India has been the first country ever, to launch a broadbase nation wide Family Planning program in 1952, which according to Barnabus (1977) has been a major government undertaking. Despite the huge amount of governmental expenditure, involvement of man power and logistic support that has gone into this monumental exercise till now, this program remains disappointing in terms of results achieved, barring two Indian states of Kerala and Goa, which have reached replacement levels with respect to fertility.

Presently, it has been attempted to understand family planning practices among the Nicobarese, a population inhabiting the Union Territory of Andaman and Nicobars. This is an indigenous population and has been living in Nicobars since time immemorial, with the earliest available reference in the writings of Claude Ptolemy of the 2nd century AD. The Nicobarese are of Mongoloid stock and are racially akin to some marginal groups of Indonesia (Ganguly, 1976). Their language has been classified as belonging to the Mon Khymer Group of the Austro-Asiatic family of languages by Grierson.

Their mainstay is horticulture and they grow variety of fruits. Pigs and coconuts are central to their very existence as their routine and ritual life is based on them. No part of the coconut tree is left unused. The unit of their social life is Tuhet, which is like an extended family and is all-important. They practice monogamy and by faith, a majority of them are Protestant Christians; but there are around 8-10 % Muslims also.

MATERIAL AND METHODS

The data for the present study was collected from 222 ever married women of the village Mus in Car Nicobar Island, whose population according to 2001 census preliminary reports is 2290 and 23785, respectively. Information was collected through personal interview with the help of pre-tested interview schedules which contained questions pertaining to knowledge, attitude and practice of birth control measures besides those on educational and occupational status and the data, thus collected, was analysed using standard statistical techniques.

RESULTS

***Knowledge About Contraception*:** It was found that almost 95% (n = 210) of the women did have the knowledge about the Birth Control Devices (BCD). But a little over 5%(n = 12) were not aware of any modern birth control methods and every single woman of this category was of old age and well past her reproductive age (Fig.1).

Table 1 shows the distribution of source of knowledge of BCD among the women. It is evident from the table that the main source of information was the hospital (36.19%) followed by 19%, had received information from hospital, friends and relatives. Another 18% were those who had got the information from hospital and relatives. Only 1.43% women claimed to have become aware, through Anganwadi in addition to hospital, relatives, friends and radio.

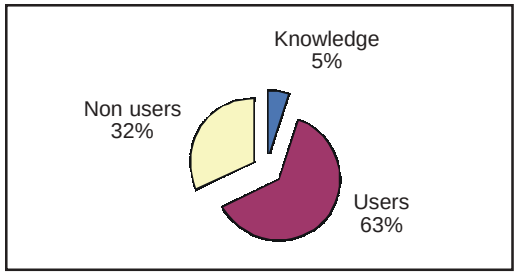

Fig. 1. Knowledge and practice of BCDs among the women of village Mus, Car Nicobar

The local media including television and Radio were not much reported to be the source of information because very few of the studied households had access to TV and radio. The television channels available here, both private and government, do not beam much of the publicity about Birth Control Measures. The government channel, whatever little it telecasts, is during the time when most of the men and women folk are out for work. The medium of publicity is also Hindi which most of them do not understand properly.

As far as the All India Radio is concerned, it does not have much time slot allotted in its schedule for Nicobarese language because it has to telecast its programs in many languages. Andaman and Nicobar being a heterogeneously populated area with sizeable population of people from different linguistic groups like Bengalese, Tamils, Malyalese, Telegus, apart from the Hindi Speaking people and the Nicobarse. Thus little exposure time in the native language is again a problem though there is some sort of publicity in Nicobarese too.

Attitude Towards the Use of BCDs: Out of the 210 women, who had knowledge about the birth control measures, 138 (65.71%) women used them while 72 (34.28%) did not use any type of birth control measure at all (Table 2). Almost all of the women, who used BCDs, used those for not having more children and not for health benefits, etc. But among the older ladies (> 45 years) who had adopted tubectomy as the birth control measure, the incentive was obviously monetary as many of them already had 5-6 children and were about to or had completed their reproductive life span. The government earlier gave Rs. 500 for each sterilization operation but later the amount was reduced to Rs. 150 because even young married couples were lured by the fact that a substantial sum was being given for the operation and were getting the operation done within two or three years of marriage. This became problematic since the area has high rates of Hepatitis B, malaria, tuberculosis, HIV and STDs, and subsequent loss of children due to any reason would have had negative effect on the population growth. Apart from cash, the government also gives additional incentive in the form of an increment in the salary of government employees who, or the spouse has undergone a sterilization operation after the birth of two children.

Among the women who did not use any BCM at all, the majority said that they did not like it (30.55%) while 12.5% of them reported that it was not of any use to them (Table 2). Another 12.5% said that they wanted to try these BCDs and were inquisitive but they did not know how to use them. There was a husband who told that he brought a condom but did not know how to use it so he made it into a balloon and gave his young children to play. 22.22% of the women did not specify any particular reason for not using the BCDs. 15.27% of women who were in the age bracket of 35 or above mentioned that the use of BCDs was not known to them when they got married and so they didn't use it otherwise, had they known about it before, they might have thought about using them. But in general, the people laughed away at the suggestion of using a birth control device. Some other reasons cited for not using any BCMs were that it was not necessary (1.38%) and were not good for health (5.55%).

Practice of BCMs: The present study is restricted to modern methods of contraception, which include condoms, IUDs, pills and sterilization because no women in the study group report about coitus interruptus, abstinence and ritual taboos and indigenous methods of contraception. Of all

Table 1: Distribution of source of knowledge of BCD among the Nicobarese women

	Hospital (1)	*Friends/ Relatives(2)*	*Radio (3)*	*Anganwadi (4)*	*1+2*	*1+3*	*2+3*	*1+2+3*	*1+2+3+4*	*Total*
n	76	14	8	-	38	17	14	40	3	210
%	36.19	6.66	3.81	-	18.1	8.1	6.66	19.05	1.43	100

the interviewed women, 65.71% (n = 138) used some form of BCM or the other.

Table 3 shows the distribution of women according to the type of bpirth control measure used. It is observed that 73.18% of the women adopted sterilization by tubectomy as a BCM alone while another 3.6 % chose tubectomy after using pills, IUD or both. As it has been mentioned above that the primary reason for using tubectomy was monetary incentive, but now due to increased awareness people have slowly started accepting other forms of BCDs also. Strangely only 1.45 percent of the women reported to have practised family planning by using pills and condoms. Condoms are the easiest available BCM and are supplied free by the government and they do not have any sort of side effects that pills might have but in the opinion of the general people, they did not want any physical barrier during intercourse as it reduced pleasure. This also shows that males accepted very little responsibility when it came to family planning and the entire onus was left on the women folk to do.

Influence of Education on the use of BCMs: Education has a great impact on several aspects of life. From the tables 4a and 4b it can be seen that the number of BCM users among women who had education upto standard 10 (65.2%) is more than the number of women in the same category among non-users (45.23%). This shows that education has had a positive effect on the use of contraceptives. Among the other categories, there is not much to discuss about users and non-users.

Occupational Status of BCM Users and Non-users: The comparison between tables 5a and 5b tells us that the women who were educated and had ventured out of the confines of their houses and were involved in government service, almost all of them used BCMs. Among the rest of the categories there's not much of a difference.

DISCUSSION

To sum up it may be said that although the percentage of awareness of BCM is high (94.59%) yet the acceptance i.e. the actual practice of BCM is low (62.16%) in comparison. Response regarding the knowledge of the different methods of birth control indicated that

Table 2: Reasons for not using birth control measures among the Nicobarese women

	Of no use	*Not necessary*	*Not good for health*	*Do not want it/ like it*	*Do not know how to use it*	*Not known at our time*	*No specific reason*	*Total*
n	9	1	4	22	9	11	16	72
%	12.5	1.39	5.55	30.56	12.5	15.28	22.22	100

Table 3: Distribution of women according to the type of birth control measure used

	IUD	*Pills*	*Tubectomy (TT)*	*IUD and TT*	*Pills and IUD*	*Pills, IUD and TT*	*Pills and TT*	*Condoms Pills*	*Total*
n	8	4	101	18	2	2	1	2	138
%	5.80	2.90	73.19	13.04	1.45	1.45	0.72	1.45	100

Table 4a: BCM non-users vis-à-vis educational status

Husband Wife	*Illiterate*	*%*	*Up to standard 10*	*%*	*11-12*	*%*
Illiterate	23	27.38	11	13.09		-
Upto standard 10	4	4.76	27	32.14	7	8.83
11-12	-	-	7	8.33	5	5.95

Table 4b: BCM users vis-à-vis educational status

Husband Wife	*Illiterate*	*%*	*Up to standard 10*	*%*	*11-12*	*%*	*Graduation/ Technical*	*%*
Illiterate	20	14.49	17	12.31	-	-	-	-
Upto standard10	-	-	8	5.79	72	52.17	10	7.24
11-12	-	-	3	2.17	4	2.89	4	2.89

Table 5a: Occupational status of BCM non-users

Husband Wife	*Business*	*%*	*Service*	*%*	*Misce-llaneous*	*%*	*Total*	*%*
Housewife	37	44.05	34	40.48	13	15.47	84	100
Service	-	-	-	-				

Table 5b: Occupational status of BCM users

Husband Wife	*Business*	*%*	*Service*	*%*	*Misce-llaneous*	*%*	*Total*	*%*
Housewife	69	50.00	48	34.78	6	4.34	123	89.12
Service	6	4.34	9	6.52	-	-	15	10.86

tubectomy was the single most commonly used birth control measure. The chief source of information about BCM was found to be the hospital as apart from the counseling center in the hospital. Many health camps are also organized in different villages of the island. Various sports meets and competitions like art, debate are organized and sponsored by the Health authorities with the theme being health, diseases and/or family planning related.

It was observed that maternal education and economic status had significant impact on the acceptance of BCMs. Similar conclusions were drawn by Pilai et al. (1990) among the Bengalis couples of West Bengal and Maheo and Kalla (2001) among the Mao Nagas of Manipur. The Nicobarese in general were found to be progressive people, who are picking up modern education, modern thinking and modern health care practices. The young couples now are using modern family planning and are trying to emulate the two-child norm as propagated by the government. But more has to be done in terms of publicity of BCMs, there should be focussed publicity which should not only inform the people about BCMs but tell them how to use them as many of the respondents of the study have expressed their ignorance about it.

The importance of family planning in today's context should be stressed as the island of Car Nicobar is a small island with only 49.02 Square miles in area, and the population which it supports is 29145, according to the 2001 census estimates and includes the non tribals and migrants, with the population of the Nicobarese tribals standing at 23,785. The total population of Nicobarese in 1901 on all the islands of the Nicobar archipelago was 6501 which is only 27.33% of the population of Nicobarese on Car Nicobar Island itself. The chief mainstay of the people of Nicobars is horticulture and growing population may mean shrinkage of forest cover and load on resources. The natural resources on an isolated island like this are extremely limited and the natural environmental balance is very delicate, so before it becomes too late and irreparable damage is done to the environment and the very existence of man is endangered, some strategies should be chalked out to control the population growth by means of family planning and resettlement.

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