The review of literature usually refers to published writing in books, journals and conference proceeding arranged in relation to the problem of study. The literature also includes unpublished thesis, dissertation, articles in magazine and newspapers. Importance of reviews of researches can be over emphasized not only with a view that it provides information but also because it involves the building of knowledge to show how this study could be an addition to the field. Reviews composed in with the present study have been presented in this chapter:

**Alag and Banerjee (1995)** in their study on acceptance of spacing methods of contraception in Municipal Corporation of Delhi reported that although the contraceptives were made available with adequate infrastructure and knowledge service provided, yet the acceptance of terminal method was much more popular than the spacing methods.

**Kumar and Sapru (1996)** conducted study in the union territory of Delhi to assess the knowledge about condom, covering a sample of 252 retailers from four zones. The study concluded that the retailers selling socially marketed condoms had very poor knowledge about the proper method of the use of condom, its storage and disease prevention benefits.

**Audinarayana and Shakilia (1996)** studied socio-economic and demographic factors influencing the use of fertility control regulating method in a Tamil Nadu Village. The findings suggested that educational status of wives closely followed by husbands, the overall socio-economic status (index) and age at marriage of wives have significant influence on the use of contraceptive methods. The socio-economic factors, except occupational status of wives, are significant only among those couples who have two living children while the demographic factors played a major role among those who had three living children.
David (1998) indicated significant relationship between social and cultural factors, local belief factors, gender roles, religion and social network on family planning choice of couples. The result indicated that a combination of five independent variables significantly predicated couples family planning choice yielding a co-efficient between each of the independent variables except local between factors.

Lee et. al. (1999) reported ignorance of a substantial proportion (33.0%) of women about ‘Emergency contraceptive’. More nulliparous women and women younger than twenty years had heard of emergency contraception. Of the women who knew about emergency contraception, only 10.0% of women had used emergency contraceptive and only 2.5% had used it in attempt to prevent pregnancy. The main reason for not using it was risk-taking behaviour (41.8%).

Kundu and Bhayana (1999) conducted study to understand the relationship between achievement values, contraceptive behaviour and fertility levels of adopters and non-adopters of family planning with small and large families. A sample of 240 married adult males comprising of adopters of family planning method belonging to both small and large families was selected. The results of the study demonstrated that like modernity, achievement values too have a strong impact on contraceptive behavior and fertility.

Mishra et. al. (1999) reported that 15% of women mentioned method-connected problems while 9% opposition of family members as main reason for not intending to use contraception. Thirty per cent of currently married women aged 13-49 discontinued use of contraception because of a method–related problem or method failure.

Onwuzurike and Uzochukwu (2001) interviewed 334 Nigerian, non-pregnant women, living in a high density, low income urban area of Enugu on knowledge, attitude and practice of family planning. Knowledge and approval of family planning was high, but the practice of family planning was low, as only 20% of the women were on a family planning method. The commonest methods for both
ever use and current use were safe period/billings ovulation chart method, condom, Intra Uterine Contraceptive Device (IUCD) and injections.

**Pandey (2002)** concluded that the level of contraceptive use in Mongolia even after eight years of its transition to market economy was low however; there has been a significant increase in the knowledge of the women about the use of modern contraceptive methods.

**Khan (2002)** studied attitude of rural women towards family planning with a semi structure interview schedule in the villages of three northern states; Uttar Pradesh, Bihar and Haryana. It was seen that majority of the rural women (86.1%), though illiterate, prefer to have only two to three children.

**Mcnay et. al. (2002)** concluded that while many of the socio-economic variables play their part, mother’s education, mass media exposure emerged as important diffusion channels associated with fertility rate. An important feature of India’s current fertility transition is the spread of contraceptive use among uneducated women.

**Singh et. al. (2003)** studied contraceptive frequency amongst the Muslim population in a Delhi slum. The percentage of contraception was only 8.6 percent. While condom was the most popular contraceptive (37.2%), tubectomy (16.6%) was the least preferred. Awareness about various contraceptive methods was uniform. The main reasons for low contraceptive usage were fear of side-effects and contraception failure.

**Reddy et. al. (2003)** studied men within five years of married life (N=50) in the service area of the urban health center Karanchipuram, Pondicherry. Sixty four percent males had knowledge about family planning methods with 54% using condoms. Forty six per cent of the subjects expressed the need for involvement of men of reproductive health age in Family Planning programme.

**Chadhick et. al. (2003)** studied contraceptive knowledge, practices and utilization of services, across sectional survey of 117,465 eligible women carried out
in the sampled areas of 28 districts from January 1996 to February 1997. From among the current contraceptive users all of IUD, OC and acceptors of a permanent method in the last one year (14,276) were interviewed in detail. Overall contraceptive prevalence was 45.2% of which 34.2% had used a permanent method. Among the current users, the contraceptive had been availed mainly from either PHC (31.5%) or hospital (42.1). Around half the women (53.1%) had received counseling and 20.3% information regarding other methods. A large majority of women (70.5%) used a family planning method for the first time only after completing their desired family size. The main reason given for not using any family planning methods was family not complete” (as reported by 34.6% women). There is need to promote spacing methods by policy makers and field workers and motivate couples to accept them.

*Pal and Makepeace (2003)* analyzed factors determining the current contraceptive use in rural and urban west Bengal, India. Result suggested that male and female sterilization was a popular method among the poorer couples with little assets, low education and more living children. More literate women were, however, more likely to use a different types of interchangeable methods of contraception though the effect of husband’s education remained insignificant. The effect of belonging to an upper caste household was more pronounced on the current use of contraception, especially among rural women.

*Dabral and Malik (2004)* conducted interviews on married Delhi Gujjar women aged 15-49 years from a sample of 558 households. Knowledge of family planning method was widespread, also, majority of women have positive attitude towards family planning. However, there was gap between the knowledge and the practice of contraception among Gujjars. Female sterilization was the popular contraceptive method. One fifth of the women were aware of injection.

*Pathi et. al. (2004)* initiated study among 300 couples attending the out-patient department of Safderjang hospital to find out the involvement of male partner in family planning and their knowledge, attitude and practice towards it, with
reference to literacy and age. Eighty nine per cent were aware of condom as a contraceptive and it was the most preferred method of contraception with no associated problems of use. Literacy status of the husband positively influenced their discussion with spouse about family planning and taking joint decision substantially. This trend was more prevalent in the younger than the older age group. Couples choices on permanent sterilization were favorably tilted towards wife than the husband in majority of the cases (71.2%).

**Basu et. al. (2004)** conducted study on knowledge, attitude and practice of family planning among Santal and lodha tribals from Midnapore district of West Bengal. The majority of the Santal (80.3 percent) a Lodha (87.3 percent) communities were aware of sterilization, but spacing methods were less known. Only 1.0 per cent of Santal knew of oral pills and 1.7 per cent about IUDs. Traditional methods were known to only 3.7 per cent of the Santals. Lodhas did not know about traditional methods. It was found that only 3.3 per cent of Santal had received pamphlets and family planning while 29.3 percent of Santals and 24.7 percent of Lodhas had seen FP posters in their village during family planning camps.

**Puri et. al. (2004)** assessed unmet need for contraception in an urban slum of Delhi. The aim was to find out the knowledge index of the study group with the mean age of 29.7±29 years. 34.6% of the study subjects were users. Where tubectomy accounted for 58.3%, vasectomy as a method was not accepted by any of subjects. Partner of 159 women were not using contraception, 22.6% women expressed the need for spacing and 27.2% women had unmet need for limiting. Opposition from husband’s / families (30.6) and male child preference was cited as the main reason for non use of contraception by majority of women (z=288, p<0001).

**Naik et. al. (2005)** conducted study to determine the factors influencing the use of spacing contraceptive methods in India, particularly from men’s perspective. Data were obtained through a semi-structured interview schedule from 2687 married men aged between 18 and 40 years from central Mumbai city. It was learned that
48.1% couples were not using any method at the time of survey. Male contraceptive was 23% (condom and withdrawal). The result indicated that the use of spacing contraceptives methods was significantly higher among those couples where the men desired one or two children (OR=4.3), had knowledge of five or more contraceptive methods (OR=1.9) and discussed with their wives obtaining family planning information (OR=3.2), spacing (OR=2.7) and permanent (OR=2) contraceptive methods.

Kumar et. al. (2005) conducted study on a slum of Delhi to know the attitude of women regarding use of family planning methods and to find out the factors that restrict its use and the change in pattern of use over a period of one year. Demands for more children and preference for son were the leading reasons for not using any methods followed by fear of side effects and health problems. More than 70% women reported irregular menstruation from oral contraceptive pill and ill health from tubectomy as the other side effects.

Tripathi et. al. (2005) examined the determinants for early discontinuation among Intra Uterine Contraceptive Device (IUCD) users in a rural district of northern India. Intra Uterine Contraceptive Device (IUCD) acceptors were typically Hindus, housewives in the age group 25-30 years. More than 90% of respondents had at least one son; 75% were first time Intra Uterine Contraceptive Device (IUCDs) users. The mean age at first pregnancy and youngest child’s mean age were 19.5 years and 1.94 years respectively. Only 27% of the respondents reported an irregular menstrual cycle before insertion.

Srivastav et. al. (2005) in contraceptive KAP survey found that 82.2% women were aware of the existence of a contraceptive method but only 44.2% ever used one. The most commonly used contraceptive was condom (34.5%). 82.6% were willing to undergo tubectomy in future whereas only 20.3% were willing to accept an intrauterine contraceptive device.

Kansal et. al. (2006) conducted study to find out reasons for not practicing contraception or factors for discontinuation of contraceptive methods (women who
had ever used any method) among ever married women aged 15-49 years in a rural population of Dehradun district. In this study knowledge of any method of contraception was almost universal (96.9%) among ever-married women but 61.81% of the couples had ever used while only 49.9% were currently using any methods of contraception.

Maharaj (2006) studied reasons for condom use among people in Kwazula Natal for prevention of Human Deficiency Virus or Human Infectious Virus (HIV), pregnancy or both. Fifty nine per cent of respondents used condoms, 6% used it with another method. The main reason for use (cited by 64 % of users) was protection against both pregnancy and Human Deficiency Virus or Human Infectious Virus (HIV) infection.

Joshi and Patil (2007) studied knowledge of family planning and factors influencing methods of contraception among married women in the age group 15-44 years living with their spouses in slums. 44.5% of the women were acceptors (48.1% nuclear families and 40.2% joint families); 52.8% were using spacing methods and 47.19% had used terminal methods. Age of the mother, literacy, living male children was strong abdicatior for family planning.

Aninyei et. al. (2008) assessed the level of misconceptions of modern family planning methods in Abraka communities. The findings showed that 75.3% of those interviewed were aware of modern family planning but only 42.9% were using it to plan their families; of which 32.6% using condom, safe periods and withdrawal.

Prasad and Rawat (2008) concluded that there is a statistical dependence between different methods of contraceptives to the variables namely standard of living (low, medium, high), regions (rural-urban), castes (SC,ST,OBC and others), religions (Hindu, Muslim, Jain and others),

Verma and Rohini (2008) found that 57.5% men and 42.5% women reported encouragement of their spouses for adopting family planning, whereas 3.4% of men and 5% of women reported that their spouse opposed and discouraged
the use of family planning methods. However, a significant proportion of men (39.1%) and women (52.5%) reported the neutral attitude of their spouse.

Howard et. al (2008) stated that approval of family planning was significantly higher in women than in men (90% vs. 70%). Contraceptive use in the camps served by RGH was much higher than typical for either refugees’ country of origin or the multitude country (17% vs. 3.9 and 4.1% respectively).

Irfan et. al (2009) assessed knowledge and attitudes about Emergency Contraception among women of childbearing age in Karachi, Pakistan. The study suggested that Eighty-eight percent of women were not aware of EC and only a small number (11.5%) ever used it to prevent pregnancy. The correct timing of effectiveness of post-coital pill was known to only 40% of women while none of these women were aware of the continuation of Intra Uterine Contraceptive Device (IUCD) insertion as an option for EC. About 50% of women identified general practitioners or family medicine clinics as their main sources of knowledge about EC. Increased advertising was considered desirable by 72% ; 37% considered over the counter availability of EC pill desirable and only 36% of women were uncomfortable to use EC because of religious reasons.

Sharma and Rani (2009) in a study on tribal women of central India reported that only 42% used contraceptives, 32.7% used female sterilization and 1.8% male sterilization.

Ogunjuyigbe et. al. (2009) reported that men have a significant role to play and be motivated for adoption of contraception. Only 37% of the respondents reported joint decision making on when to stop having children and 44% on what to do to stop childbearing.

Chopra and Dhaliwal (2010) studied knowledge, attitude and practice of contraception in urban population of north India. Finding revealed that a total of 55.2% subjects were aware of contraceptive methods, mostly barrier contraception, IUCD (10.3 %) and oral pills (3.3%). Permanent methods were known to nearly
50% subjects but acceptance was very less. Five percent emergency contraception was known to 13.8% subjects.

Nasir et al. (2010) reported that 42 percent of the married males were users of family planning methods. Condoms was the most used method (71%) followed by traditional methods (14%).

Shweta and Singh (2010) in a study on 400 women revealed that only 246 (61.5 percent) women respondents had knowledge of family planning methods and only 176 (71.5% out of 246) adopted family planning methods. The substantial gap between knowledge and adoption in contraceptive methods has been found in the study area. Female sterilization appeared the most popular contraceptive method in Kashi Vidyapeeth block (46% adopted female sterilization).

Mark et al. (2011) initiated study to investigate the correlates of traditional contraceptive use in Moldova, a poor country in Europe with one of the highest proportions of traditional contraceptives method users. The result indicated that 40.3% of respondents used a modern method. The percentage of respondents using traditional methods (21.2%) was substantial. The proportion of traditional method users in rural areas was 8.4%. Traditional method use is lowest in Chisinau, which includes both urban and rural residents (approximately 7% of Chisinau residents live in rural area). Eighteen per cent of respondents were ignorant of the existence of AIDS or do not know how to prevent it.

Abad et al (2011) conducted study to find out emergency contraceptive practice and its related factors in a sample of Malaysian women. The result showed that the use of contraceptives during last month was reported by 45.1%. Unawareness (50.2%) and fear of side effects (42.1%) were the most frequent reasons for not using emergency contraceptive (EC).

Dube and Sharma (2012) reported that 40 per cent rural and 60 per cent urban girls considered menstruation as natural phenomena while 39 per cent of urban girls and 56 per cent of rural girls took it as disease. 11 per cent of urban and
28 per cent of rural girls were not aware about the gap of periodic menstruation cycle.

**Ghosh et. al. (2013)** found that nine per cent of subjects had no idea about contraception. Family members were the major source of knowledge (39.8%) followed by TV (38%). Oral contraceptive pills (52.6%) were the most commonly used contraceptive followed by condom (24.6%). Approx two third of the study population was currently not using any contraceptive methods. Common reasons for not using any method were desire of a child (42.0%), amenorrhea since last delivery (26.1%) and lack of motivation (20.2%).

**Bhattachariya and Reang (2014)** studied the prevalence of contraceptive use and its determinants among eligible couples in an urban slum of Tripura. 88.9 percent of the study couples were aware about family planning but prevalence of contraceptive use was only 43.9 percent. Tubal ligation was the most adopted and condom was the least practiced method. Decision regarding family planning was mostly made by the husband and wife jointly.

**Shrivastav et .al. (2014)** assessed the knowledge, attitude and practice of contraceptive among married reproductive females. It was found that 71.22 percent females had awareness regarding any method of contraception. Knowledge about emergency contraceptive was quiet low (6.83%). The most common source of information on contraception was media, both printed and electronic. The most common reason for discontinuation of family planning methods was fear of side effects.

**Bakibinga et. al. (2015)** studied the role of socio-cultural factors such as religion and ethnicity in aiding or hampering family planning uptake in rural western Kenya. Findings revealed that 68 percent women discussed family planning with their partner, 34% women used method of contraception as long acting method, 55 percent women showed high approval for family planning. However, a significant proportion (45%) exhibited negative attitude towards family planning.
Choi et al. (2015) examined the meeting demand for family planning within a generation. On an average across the 63 study countries, family planning demand satisfied with modern contraceptive methods needs to increase by 2.2% points per year for the next 15 years.

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Vikash and et al (2015) indicated that around 62% participants were currently used one or more of the various family planning methods. Female sterilization (45.6%) was the most common choice among the contraceptive users, followed by intrauterine contraceptive device (23%) and condom (22%), oral contraceptive pill (9.2%) being the least preferred. The awareness source for family planning methods were mainly doctors/multipurpose health workers/ anganwadi workers (70.4%).

Hetal and et.al (2015) found that majority of the women (95.11%) were aware about contraceptive methods. Effective couple protection rate in this study was found to be 66.44%. Major source of information about family planning were health worker (68.88%), husband (68.46%), television and doctor (35.75%).

Jyoti et.al. (2016) studied the extent of awareness and practice of various contraceptives methods among married women. Findings revealed that 72.4% subjects had knowledge of various FP methods. Most common method used was condom (21%), followed by CT(18%) and female sterilization by 12% subject only.

Barbhuiya and et.al (2016) indicated that only 7% of the study population were fully aware about several family planning methods, 61%were partially aware and 32% were completely ignorant about the matter. Only 7% of the study population were using some form of contraception. Oral contraceptive pill (OCP) was the most dominant method. Among the users of contraceptives, 68.18% were users of OCP and among the non users, 45.5% opined to use the same in future. Husbands (825) were observed to be the chief decision maker for contraceptive use.
Shumayla and Kapoor (2016) assessed the knowledge, attitude and practice of family planning among Muslim women of north India. Findings showed that the majority of women (87%) had knowledge about family planning, but only 47% of the ever-married women are currently using any kind of family planning methods. Age of marriage, education level socioeconomic status, parity and sex of the first child were significantly associated with the current use of family planning methods. Most of the women are not using family planning methods because of religious constraints (34.5%) followed by lack of knowledge (27.7%) and fear of side effects (19.2%).

Abhinash and et. al (2017) in their study found that 65.3% of woman reported using any method of family planning in the past, compared with 85.5% of women reporting current usage of family planning methods. Recognition of at least one family planning method was nearly universal i.e. 97.61% age education status and age at marriage were significantly associated (p<0.05) with contraceptive usage.

Jahan and et.al (2017) in a study on awareness, attitudes and practice of family planning methods in a tertiary care hospital revealed that contraceptive prevalence rate was 62.9%, higher than the national data as 28.5%. Most of them (93.1%) were aware at least one family planning method. Awareness about female sterilization (36.4%) was more than male sterilization (25.3%). Majority (92.4%) thought that contraceptive use was beneficial but only (27.2%) expressed the willingness to start practicing contraception if they received more information about the subject.