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The Pharma Innovation



ISSN (E): 2277- 7695 ISSN (P): 2349-8242 NAAS Rating: 5.03 TPI 2019; 8(5): 572-574 © 2019 TPI www.thepharmajournal.com Received: 20-03-2019 Accepted: 25-04-2019

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A comparative study to assess the knowledge and attitude regarding vasectomy among married men in selected areas of Pune district

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Abstract

It is an operative procedure for permanent sterilization of male.

Methodology: A non-experimental descriptive study enrolling 150 married men aged between 25 up to 45 years residing in urban and rural areas of Pune Districts. Non probability purposive sampling technique was adopted. Analysis was done using descriptive statistics and inferential statistics.

Results: In urban and rural area the majority of the married men having average knowledge regarding vasectomy. It was found that in urban area 54.67% of samples were having average knowledge, 12% of samples have good knowledge and 33.33% having poor knowledge regarding vasectomy. In rural area 58.66% having average knowledge, 20 of samples having poor knowledge and 21.33% samples having good knowledge regarding vasectomy. There is significant difference in knowledge regarding vasectomy between married men in urban and rural area. 78% of samples were having positive attitude in urban area and 64 % of samples were having positive attitude regarding vasectomy between married men in attitude regarding vasectomy between married men in urban and rural area.

Conclusion: The study found that married men having average knowledge, positive attitude regarding vasectomy. The rural men had better knowledge regarding vasectomy as compared to their urban counterparts. The urban men have positive attitude towards vasectomy as compared rural men. The majority of the couples used tubectomy as permanent contraception.

Keywords: Knowledge, attitude, vasectomy, married men

Introduction

A joint decision for conception should be taken by a couple before intercourse will lead to a healthy birth. Similarly decision for contraception must be joint. Among the method of permanent contraception, vasectomy has more advantages than tubectomy and gives opportunity for the male to shoulder the responsibility.

It is an operative procedure for permanent sterilization. In 1823 the vasectomy was performed on a dog for the first time. After short time purposes of atrophy for the enlarge prostate for human vasectomy was performed by R. Harrison of London, but it was not performed for male permanent contraceptive purpose. Vasectomy is procedure that male vas deferens are resected & ligated. It blocks the entry of the sperm from urethra and there by prevents the future pregnancy or it makes the male infertile ^[1].

Non scalpel Vasectomy is usually done by the surgeon by occluding both the vas deferens. It assist to decrease anxiety and promote client comfort, men those who have fear of surgery are recommended for NSV (minimal invasive surgery) or NSV it helps to increase the chance of recovery. Usually the procedure takes less than 30min to complete. The body will disintegrated and absorbed the sperm which are produced by testicle after the vasectomy.

Need of study

The rate of vasectomy are vastly different in world wide. 0.1 % of married men preferred to adopt vasectomy on average in the less developed countries in the world ^[1].

In 1975 WHO experts define five methods to assess the success of family planning programme, they are inspiration, apprehension, attitude and behavior among people.

In India the rate of tube ctomy as compared to vasectomy, is exceeding by the ratio of 37: 1 by making present of 4.4%. As per the Family Planning Programme which was established in 1950s by the 1970s.vasectomy had a superior role ^[2].

Maharashtra was succeeded by Uttar Pradesh where a little smaller than 10,000 men adopted for the method the number have been declining over the last few year since 2011-12, there was an 11% -21% decline in vasectomies. Last year, however, it registered a 4% increase.

In 2015-16, near 18% of overall vasectomies was done by Maharashtra government. Vasectomy is a minimally invasive permanent method for men. However the female sterilization is 35 times more than in male sterilization.14,453 men had undergone sterilization in last financial year, a jump of around 500 cases from 2014-15^[3]. While comparing vasectomy and tubectomy at a district level household and facility survey (DLHS Reports Karnataka) shows that 0.2% of men prefer vasectomy against 57.4% of women.

A descriptive study was done at Turkey, about the opinion and attitude of vasectomy in married couple. And the result showing that 14% of women and 43% of men were have

Procedure of data collection

The data gathering will begin from 29/10/2018 to 2/11/2018 in urban area and 19/11/2018 to 24/11/2018 in rural area. The investigator will visit to the community area in advanced and Obtained the necessary permission from the concerned authority that is HOD of community health nursing. The investigator will present him and knowledge them about nature of education so as to confirm better cooperation during the data collection.

opinion that vasectomy procedure was a sin. Among them 88% of men are not willing have vasectomy.

Objectives

- 1. To assess the knowledge regarding vasectomy among married men in selected urban and rural areas.
- 2. To assess the attitude regarding vasectomy among married men in urban and rural areas.
- 3. To compare the knowledge regarding vasectomy among married men in urban and rural areas
- 4. To compare the attitude regarding vasectomy among married men in urban and rural areas.
- 5. To associate the finding with selected demographic variables.

Research methodology Research approach

After the approaching respondent's patient of community setting, informed consent will be taken and the questionnaire will be given to respondents.

Data analysis

Descriptive Statistics & Inferential Statistics was used to examine the data according to the purpose of research.

Results

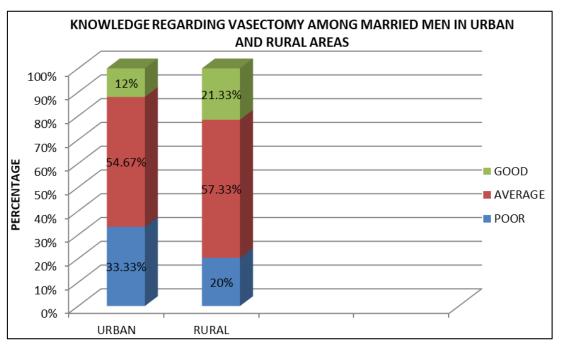


Fig 2: knowledge regarding vasectomy among married men in urban and rural areas

Research Methodology

Research approach

Quantitative approach was used in this study

Settings

In urban: Upper Indira agar, Bibvewadi, Pune. This area wascome under Municipal Corporation. The people are belongs to middle class family. This area was near to Pune city.

 $\mathbf{\Psi}$

In rural: At post Nasarapur, Bhor Pune these come under Bhor Panchayat Samiti. The people belong to middle class family. This area was away from Pune city.

Target population

All married men in Punedistrict.

Sample

Samples are 150 married men in selected areas of Pune district.

1

Sampling technique -- non probability purposive sampling technique

Sample size is 150 \checkmark

Tools for data collection

Informed Consent form

Tools A- Demographic data

Tool B: Structured questionnaire to assess knowledge regarding vasectomy.

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Analysis of the data

Descriptive statistics

Fig 1: Schematic representation of the Research methodology

Table 1: Attitude regarding vasectomy among married men in urban & rural areas

Attitude	Negative		Positive		Mean	SD
	F	%	F	%		
Urban	16	22	59	78	29.6	7.81
RURAL	27	36	48	64	27.89	9.9

Table 2: Association	of the knowledge	with selected dem	ographic varia	able of rural area

Sr. No	Association	square exact/chi	p value	Remark
1	Age	F=5.13	0.52	NA
2	Religion	F=0	1	NA
3	Education	F=8.3	0.4	NA
4	Occupation	C=9.5	0.14	NA
5	Type of family	F=7.8	0.01	Associated
6	Number of children alive	F=1.8	0.75	NA
7	Do you want to have any more child/children	F=1.2	0.54	NA

Conclusion

The overall finding of the study show that married men in urban and rural areas having inadequate knowledge regarding vasectomy. In urban 54.67% of sample were having average knowledge 12% of samples having good knowledge and 33.33% were having good knowledge whereas, In rural 58.66 samples were having average knowledge, 20% of sample having poor knowledge and 27.33% of having good knowledge. About attitude regarding vasectomy among married men in urban and rural areas having positive attitude towards vasectomy 64% of samples were having positive attitude in rural area and 78% positive attitude in urban area. Mean of attitude in rural area 27.89 with 9.9 SD. And mean attitude in urban area 29.6 with 7.81 SD.

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