

## ABSTRACT

Pre-pregnancy care and family planning are two major topics of female related health care in the world. Pre-pregnancy care is now developing much concern within the preventive health sector of Sri Lanka also while family planning is a topic the country had been dealing with for last few decades. This study looks at these issues from a community based approach. The objective of this study was to describe fertility intentions regarding conception, current practices related to the intention and factors associated with practices not appropriate for the intention among cohabiting women in reproductive age group (15-44 years) in MOH area Ambagamuwa.

This study was carried out as a cross sectional study using multi stage cluster sampling. The estimated sample size was 500 which achieved a 95.2% response rate at the end of the study. Data were collected using a pre tested, interviewer administered questionnaire. Results were described using frequencies and percentages. Chi square test was applied to assess the associations of inappropriate practices.

Current intention of childbearing was present among 29.8% of the respondents. Among 142 current pregnancy intenders, 81% were aware of Rubella vaccine. But only 75.4% of current intenders had taken Rubella vaccination. Awareness on folic acid was seen among 84.5% of current pregnancy intenders. Again, pre-conceptual folic acid use was present in only 12.7%. Current pregnancy intenders had 42.2% of adequate level of sexual exposure for conception. Among participants with adequate sexual exposure, 66.7% thought it's adequate to get pregnant. Among females with inadequate sexual exposure, only 26.8% identified it as inadequate. Healthy dietary habits were poor within the sub group. It was assessed using 6 desirable dietary habits. Only 5 participants had all 6 dietary habits. A selection criteria was developed by the investigator to identify those with an acceptable level of dietary habits. According to it also only 21.8% were having desirable dietary habits.

Among currently intending not to get pregnant group, awareness and related practices on family planning was looked for. A majority of 97.6% had heard of contraceptives before. Most commonly heard methods were DMPA (71.5%) and OCP (61.7%). A majority of 79% were using a contraceptive method at the moment. Most widely used method was DMPA (39.8%). Major reasons for non use of contraceptives were fear of side effects(40%) and perceiving that the risk of getting pregnant is low(41.4%).

Age of the participant ( $p=0.045$ ) and previous experience of pregnancy ( $p=0.015$ ) were significantly associated with Rubella vaccination.

Higher educational level ( $p=0.011$ ) and need of more health care services ( $p=0.042$ ) were significantly associated with pre-conceptual folic acid use.

Nationality ( $p=0.038$ ), not having experience of pregnancy before ( $p=0.014$ ) and need of more pre-pregnant health care services ( $p<0.001$ ) were significantly associated with adequate sexual exposure. The proportion with adequate level of sexual exposure was higher among Tamils (52.9%).

Nationality ( $p<0.001$ ), Religion ( $p<0.001$ ), Higher educational level ( $p<0.001$ ), recent PHM contact ( $p=0.002$ ), advice on pre-pregnant nutrition before ( $p=0.001$ ) and experience of pregnancy before ( $p=0.002$ ) were significantly associated with dietary habits. Similarly need of more pre-pregnant health care information ( $p=0.004$ ) and services ( $p=0.005$ ) were significantly associated with dietary habits.

Age ( $p<0.001$ ), nationality ( $p<0.001$ ), religion ( $p<0.001$ ), higher educational level ( $p<0.001$ ), hearing family planning messages during last 6 months ( $p<0.001$ ), use of contraceptives before ( $p<0.001$ ), having ever discussed ( $p=0.018$ ) and currently discussed ( $p<0.001$ ) on family planning with partner were significantly associated with current contraceptive use.

There is a strong need to improve on existing pre-pregnancy care services within the area. Special emphasis should be given by the health staff to identify those who are more vulnerable to undesirable practices. Future fertility intentions should be sought in them and appropriate help should be given to couples to come to healthy decisions. Family planning services within the area also should be improved. As mentioned earlier, more information and service sources should be made available regarding future fertility.

**Key words:** Fertility, intention, pre-pregnancy, family planning