Internship Training

At

International Institute of Health Management Research, New Delhi

Socio-Economic differentials in contraceptive discontinuation in aspirational districts of

India: Re-analysis of NFHS 4 data

by

Name – Dr. Jaswinder Kaur

Enroll No. PG/17/022

Under the guidance of

Dr. Sanjiv Kumar

Post Graduate Diploma in Hospital and Health Management

2017-19

International Institute of Health Management Research

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The certificate is awarded to

Name – Dr. Jaswinder Kaur

in recognition of having successfully completed his/her

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and has successfully completed his/her Project on

Socio-Economic differentials in contraceptive discontinuation in aspirational districts

of India: Re-analysis of NFHS 4 data

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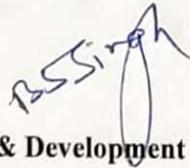
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i

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The Candidate has successfully carried out the study designated to him during internship training and his/her approach to the study has been sincere, scientific and analytical. The Internship is in fulfillment of the course requirements.

I wish him all success in all his/her future endeavors.
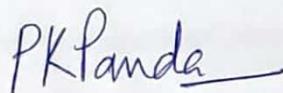
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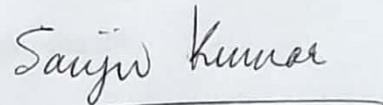
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The following dissertation titled "**Socio-Economic differentials in contraceptive discontinuation in aspirational districts of India: Re-analysis of NFHS 4 data**" at "**International Institute of Health Management Research, New Delhi**" is hereby approved as a certified study in management carried out and presented in a manner satisfactorily to warrant its acceptance as a prerequisite for the award of **Post Graduate Diploma in Health and Hospital Management** for which it has been submitted. It is understood that by this approval the undersigned do not necessarily endorse or approve any statement made, opinion expressed or conclusion drawn therein but approve the dissertation only for the purpose it is submitted.

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This is to certify that **Dr. Jaswinder Kaur,** a graduate student of the **Post- Graduate Diploma in Health and Hospital Management** has worked under our guidance and supervision. He/ She is submitting this dissertation titled "SOCIO-ECONOMIC DIFFERENTIALS IN CONTRACEPTIVE DISCONTINUATION IN ASPIRATIONAL DISTRICTS OF INDIA: RE-ANALYSIS OF NFHS 4 DATA " at "INTERNATIONAL INSTITUTE OF HEALTH MANAGEMENT REASEARCH" in partial fulfillment of the requirements for the award of the **Post-Graduate Diploma in Health and Hospital Management.**

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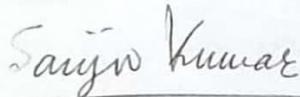
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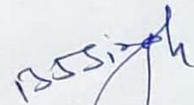
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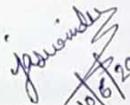
Signature 10/6/2019

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Name of the Student : Dr. Jaswinder Kaur

Dissertation Organisation : International Institute of Health Management Research

Area of Dissertation: Research

Attendance: 100%

Objectives achieved: → Compilation and analysis of Secondary data for Various Projects.

Deliverables: → field visits for monitoring of Data Collection
→ Report writing

Strengths: Hard Working, Dedicated

Suggestions for Improvement: good attempt, need to Convert into paper

Suggestions for Institute (course curriculum, industry interaction, placement, alumni): Involve more student in re-analysis of reatioxel data.

BSSingh

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Date: 13.6.2019
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Socio-Economic differentials in contraceptive discontinuation in aspirational districts of India: Re-analysis of NFHS 4 data

Dr. Jaswinder Kaur

(Health Stream)

The family planning programs of many developing countries haven't yet met their goals in spite of couples and individuals having the basic right to make decisions regarding the number of their children and the spacing between them along with right to be informed, educated and have the means to do so. Continuation of contraceptive methods is viewed as a mirror for the quality of family planning services. The major categories for discontinuation can be method related, method failure, reduced need and non-method-related reasons. In this study, we focus on 115 Aspirational districts identified by the NITI Aayog which are grouped as districts chosen by Ministry of Home affairs (35 districts), Central Ministries of GoI (50 districts) and NITI Aayog (30 districts). Objective is to examine the socio-economic and demographic differentials in discontinuation of spacing methods in aspirational districts in India, and understand the reasons for discontinuation. Analysis of secondary data (raw data from NFHS 4) was done using SPSS syntax. The reasons for discontinuation of contraceptives among the users of spacing method by socio economic groups will be examined and compared among three groups in Aspirational districts of India. With increase in age, educational attainment and wealth quintile, the usage and discontinuation of contraceptives increased. In terms of residence, discontinuation was more in urban than in rural areas. Scheduled Caste, schedule Tribe and other backwards class had very less usage of contraceptives and discontinuation rates. Major reason for discontinuation were need to become pregnant, side effects/ health concerns and menstrual problems for IUD, husband disapproved (for male condom), need for more effective method. Recommendations are to improve the quality of family planning and counselling services along with the monitoring the quality of contraceptives provided.

Keywords – Contraceptive discontinuation, Aspirational districts, socio economic differentials, NFHS 4

Acknowledgements

Table of contents

List of figures

List of Tables

List of abbreviations

GoI	Government of India
Inj.	Injections
IUD	Intra Uterine Devices
PPIUD	Post portem Intra Uterine Device
NITI	National Institute for Transforming India
MHA	Ministry of Home Affairs
NFHS	National Family Health Survey
SC	Schedule Caste
ST	Schedule Tribe
OBC	Other Backward Class
MoHFW	Ministry of Health and Family Welfare
SPSS	Statistical Package for Social Sciences
Edu.	Education
DHS	Demographic and Health Surveys

1 Introduction

In 1994 the United Nations International Conference on Population and Development (ICPD) declared that — "all couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education, and means to do so.". Unfortunately, the programs for family planning in many developing countries are still struggling to meet this goal. In these developing countries there is a high proportion of sexually active women who don't want pregnancy but don't use contraceptive methods. (1)

Knowledge of contraceptive methods is almost universal in India, with 99 % of currently married women knowing at least one method of contraception. Yet, use of modern contraceptives by currently married women remains unchanged, at just under 50 %, between 2005-06 and 2015-16. Female sterilization being the most popular contraceptive method, used by 36 % of the currently married women. In the 5 years before the survey, 33 % of the women discontinued a contraceptive method in less than an year. The topmost on the list for reasons for discontinuation is desire to become pregnant (9%). Some of the other contraceptive discontinuation rates were injectables (51%), condoms/*Nirodhs* (47%), pills (42%) and IUDs/PPIUDs (26%). Only 5% of contraceptive discontinuation episodes accounted for switching to another method (2). Contraceptive use translates as the consequence of contraceptive acceptance, method choice, switching and failure. Detailed analysis of the contraceptive discontinuation and its reasons can help improve the health care and family planning service delivery in many ways. (3)

"The National Institution for Transforming India, also known as NITI Aayog, came into play via a resolution by the Union Cabinet on January 1, 2015. NITI Aayog is the premier policy 'Think Tank' of the GoI, providing both directional and policy inputs. While designing strategic and long term policies and programmes for the GoI, NITI Aayog also provides relevant technical advice to the Centre and States. In this study, we focus on Aspirational districts under the NITI Aayog's 'Transformation of Aspirational Districts' programme launched in January 2018.

Of these 115 districts, 35 districts have been identified by the Ministry of Home Affairs, on the basis of the density of violence. Central Ministries of GoI, have selected 55 districts on the basis of severe deficiency or sensitivity in the district. The remaining 25 districts, spreading across 10 States, have been picked by NITI Aayog. Districts are prodded and encouraged to first catch-up with the best district within their state, and subsequently aspire to become one of the best in the country, by competing with, and learning from others in the spirit of competitive & cooperative federalism.   (4)

In this study, socio economic differentials and reasons related to contraceptive discontinuation of spacing methods (Pills, IUD and condoms) have been examined for 115 aspirational districts of India.

1.1 Aim

To examine the Socio-Economic differentials and reasons of contraceptive discontinuation in aspirational districts of India through re-analysis of NFHS 4 data.

1.2 Objectives

- To examine the socio-economic and demographic differentials of discontinuation of spacing methods in aspirational districts in India, and
- To understand the reasons of discontinuation of spacing method in the aspirational districts in India.

2 Review of Literature

Investment on family planning has multiple returns: demographic, health, social, and economic benefits at individual, familial, and societal levels. Improved access and use of family planning improves child survival, reduces unwanted pregnancies and abortion, and improves health of mother and children (5). The social and economic benefits include increased schooling of children and mothers, higher familial stability, increased work participation among women, increased wage, and reduction in poverty (6). Continuation of contraceptive is considered a summarized outcome indicator of family planning services quality. The reasons associated with contraceptive discontinuation can be broadly categorized into four groups: method-related reasons, contraceptive failure, reduced need, and non-method-related reasons (7). Some of the reasons for reduced need are wanting to become pregnant again, infrequent

sex, husband being away, difficult to get pregnant/menopausal, and marital dissolution. The non-method-related reasons are desire to get pregnant, lack of access/availability, wanted more effective method, cost, inconvenient to use, did not like method, lack of sexual satisfaction, lack of privacy for use, husband disapproved, fatalistic, and other reasons (7).

"Literature suggests that age at the time of discontinuation, family size, fertility preferences, the prior use of a method, contraceptive method chosen, and prior experience with the method were significant predictors of discontinuation. Knowledge of contraceptive methods is almost universal in India, with 99 % of currently married women knowing at least one method of contraception. Modern contraceptive use by currently married women has remained unchanged, at just under 50 %, between 2005-06 and 2015-16. Female sterilization is still the most popular contraceptive method, used by 36 % of currently married women. In the five years preceding the survey, 33 % of the women who started using a contraceptive method discontinued the method in less than 12 months. The leading reason for discontinuation is a desire to become pregnant (9%). 33% episodes of contraceptive use in the five years before the survey were discontinued within 12 months. Contraceptive discontinuation rates were higher for injectables (51%), withdrawal (50%), condoms/*Nirodhs* (47%), rhythm (44%), and pills (42%) than for IUDs/PPIUDs (26%). The most common reason for discontinuing use of the method was that the woman wanted to become pregnant. Only 5% of episodes of contraceptive use were discontinued because the woman switched to another method (2).

The National Institution for Transforming India, also called NITI Aayog, was formed via a resolution of the Union Cabinet on January 1, 2015. NITI Aayog is the premier policy 'Think Tank' of the GoI, providing both directional and policy inputs. While designing strategic and long term policies and programmes for the GoI, NITI Aayog also provides relevant technical

advice to the Centre and States. In this study, we focus on Aspirational districts under the NITI Aayog's 'Transformation of Aspirational Districts' programme launched in January 2018.

The broad contours of the programme are Convergence (of Central & State Schemes), Collaboration (of Central, State level 'Prabhari' Officers & District Collectors), and Competition among districts driven by a mass Movement. With States as the main drivers, this program will focus on the strength of each district, identify low-hanging fruits for immediate improvement, measure progress, and rank districts. The 115 districts were identified from 28 States, at least one from each state, in a highly transparent manner by a Committee of Senior Officers to the GoI, in consultation with State Officials using a Composite Index. The Composite Index has been developed by examining the published sources of district wise data available in the core sectors. It is a weighted average of all 11 indicators, taken as negative indicators and ranked on the basis of highest score to the lowest. The higher the score, more backward is the District. (4)

Of these 115 districts, 35 districts have been identified by the Ministry of Home Affairs, on the basis of the density of violence. Central Ministries of GoI have selected 55 districts on the basis of severe deficiency or sensitivity in the district. The remaining 25 districts, spreading across 10 States, have been picked by NITI Aayog. Districts are prodded and encouraged to first catch-up with the best district within their state, and subsequently aspire to become one of the best in the country, by competing with, and learning from others in the spirit of competitive & cooperative federalism. (4)

The baseline ranking for the 115 Aspirational Districts would be based on 49 indicators across five sectors that include health and nutrition (30% weightage) through 13 indicators, education (30%) through 8 indicators, agriculture and water resources (20%) through 10 indicators,

financial inclusion and skill development (10%) through 10 indicators, and basic infrastructure (10%) through 7 indicators. The progress will be captured on a real-time basis, using a dashboard featuring a real-time monitoring mechanism. As of April 1st, 2018, districts have started entering data onto the dashboard, monthly. To ensure transparency, the dashboard will be open to the public to monitor the progress of the Aspirational Districts.

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The baseline ranking for the 115 Aspirational Districts would be based on 49 indicators across five sectors that include health and nutrition (30% weightage), education (30%), agriculture and water resources (20%), financial inclusion and skill development (10%), and basic infrastructure (10%). The progress will be captured on a real-time basis, using a dashboard featuring a real-time monitoring mechanism. As of April 1st, 2018, districts have started entering data onto the dashboard, monthly. To ensure transparency, the dashboard will be open to the public to monitor the progress of the Aspirational Districts.   (4)

3   Methodology

The National family health survey is a large scale, multi round survey conducted in a representative sample of households throughout India and it is a collaborative project of the International Institute for Population Sciences(IIPS), Mumbai, India; ORC Macro, Calverton, Maryland, USA and the East-West Center, Honolulu, Hawaii, USA. The Ministry of Health and Family Welfare (MoHFW), GoI, designated IIPS as the nodal agency, responsible for providing coordination and technical guidance for the NFHS. (2)

The 2015-16 NFHS-4, the fourth in the NFHS series, provides information on population, health, and nutrition for India and each state and union territory and for the very first time, it includes district level data. (8). ICF provided technical assistance through the DHS Program, which is funded by USAID. NFHS-4 fieldwork was conducted by 14 Field Agencies (FAs), and 7 laboratories conducted the HIV testing.

In this study, we are using the raw data from the NFHS 4, we examine the contraceptive discontinuation rates and reasons for discontinuation of contraceptives among the users of spacing method(pills, condoms, IUDs) by socio economic groups (Place of residence, Age , Education, Religion, Caste, living children at 1st use and wealth quintile) in Aspirational districts of India.

For this study, analysis will be done through using SPSS syntax (a programming language unique to SPSS – a statistical package) and developing various syntax commands for analyzing the raw data from NFHS 4 (from DHS program website).

Using the raw data from the NFHS 4 (from DHS program website), we examine the knowledge among users and discontinuation rates for various modern spacing methods of contraceptives

method by socio economic groups (Place of residence, Age , Education, Religion, Caste, living children at 1st use and wealth quintile) in 115 Aspirational districts of India.

- ❑ Data analysis tools used -

    - ❑ SPSS- Analysis was done **using SPSS syntax** (a programming language unique to SPSS – a statistical package) and developing various syntax commands for analyzing the raw data from NFHS 4.

    - ❑ Microsoft Excel (data cleaning and presentation)

Study period is 21stfebruary 2019 to 31st May 2019.

Results

Various Socio economic differentials cross-tabulated with various groups of districts namely – NITI Aayog's 30, 50 districts by Central ministries of GoI and 35 by Ministry of Home Affairs – in terms of knowledge, prior use, current use of spacing contraceptive methods – Pills, Condoms, IUD/PPIUD.

4.1 Contraceptive discontinuation rates (NITI Aayog's 30)- PILLS

Figures 1-6 show Contraceptive discontinuation of pills in NITI Aayog's 30 districts, and trends in their discontinuation in relation to various socio economic variables.
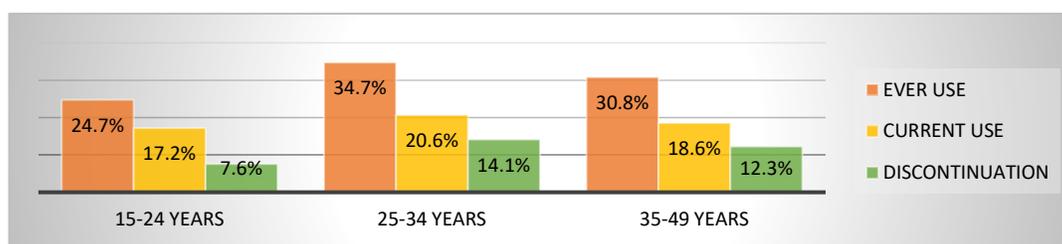
Figure 1 Contraceptive discontinuation - PILLS - by Age

Figure 1 shows Contraceptive discontinuation according to various age groups of 15-24 years, 25-34 years and 35-49 years. The ever use of pills as a contraceptive, current use and subsequently the discontinuation rates of pills can be seen to be increasing with an increase in age.
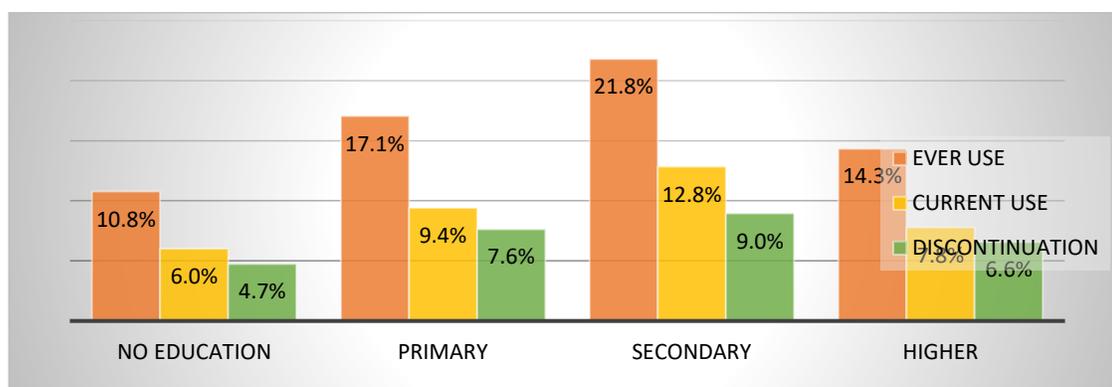
Figure 2 Contraceptive discontinuation - PILLS - by Education

Figure 2 shows Contraceptive discontinuation (pill) according to highest education attainment in the groups of no education at all, primary education, secondary education and higher than secondary education (college level and above). The ever use of pills as a contraceptive, current use and subsequently the discontinuation rates of pills can be seen to be increasing with an increase in highest education upto secondary education level. However, higher than education show a decline in the usage and the discontinuation rate of pills as a contraceptive.
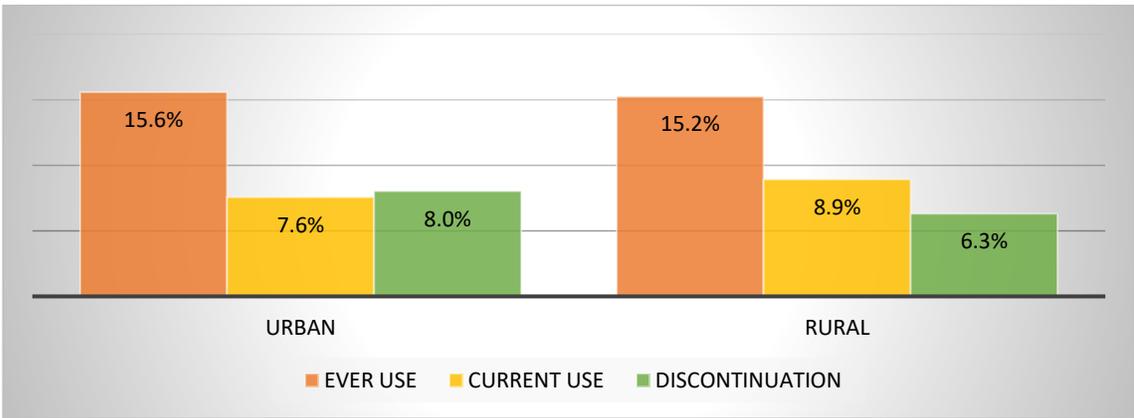
Figure 3 Contraceptive discontinuation - PILLS - by Residence

Figure 3 shows the discontinuation of pill as a contraceptive method by place of residence. This depicts that pills ever being used were almost the same percentage in urban and rural areas. The current use is lesser in urban areas than rural areas. The discontinuation rates were seen to be lesser in rural areas than urban areas.
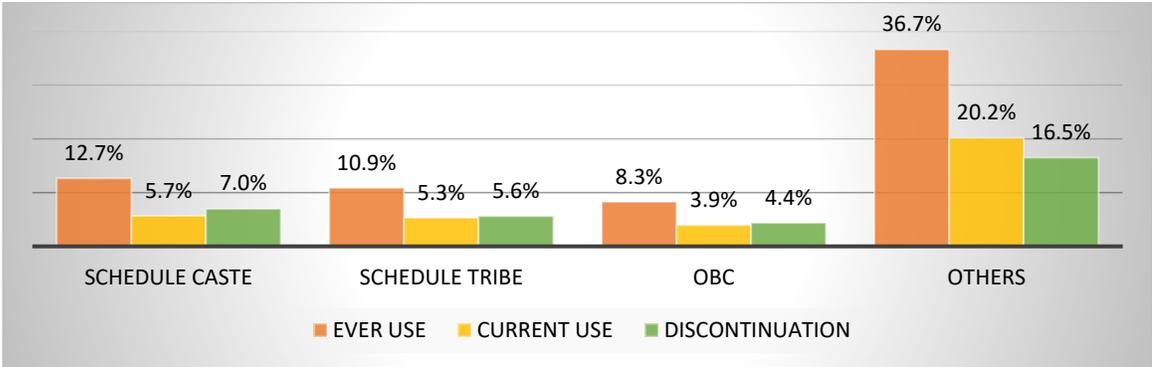
Figure 4 Contraceptive discontinuation - PILLS - by Caste

Figure 4 shows the Contraceptive discontinuation (pill) according to the caste. It can be seen that schedule caste, schedule tribe and other backward classes (the under previlidged sections of the society) have very less use of contraceptive pills to start with. The others including the general category and the ones who did not know their caste, had much more usage and discontinuation rates.
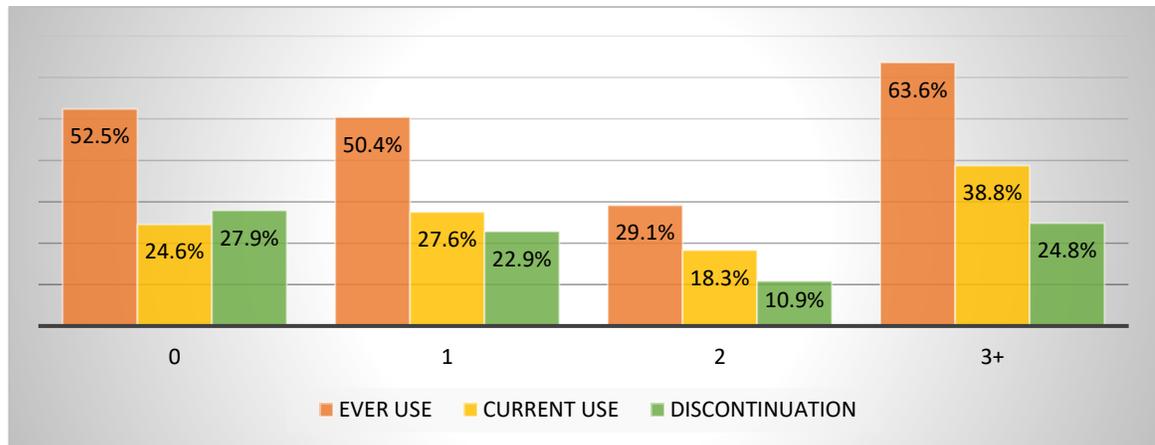
Figure 5 Contraceptive discontinuation - PILLS - by No. of living children at first use

Figure 5 shows the pill discontinuation according to number of living children at its first use. The discontinuation rates decrease with increasing number of living children at first use till the number of children is 2, 3 or more children show high usage and discontinuation rates.
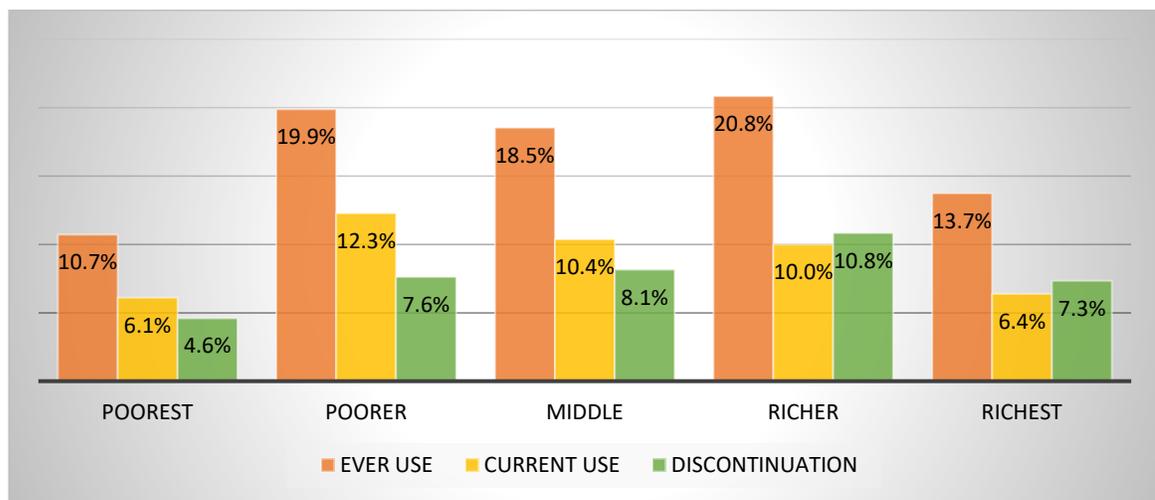
Figure 6 Contraceptive discontinuation - PILLS - by Wealth Quintile

Figure 6 shows the pill discontinuation according to wealth quintile. Poorer, middle and richer people have similar contraceptive use and discontinuation. However, the discontinuation is less in case of richest quintile.

4.2   Contraceptive discontinuation rates (NITI Aayog's 30)- CONDOM

Figures 7-12 show Contraceptive discontinuation of condom in NITI Aayog's 30 districts, and trends in their discontinuation in relation to various socio economic variables.
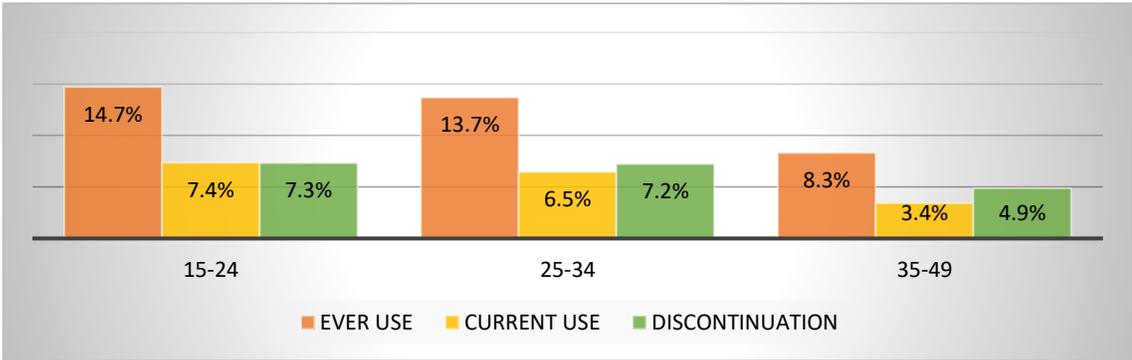
Figure 7 Contraceptive discontinuation - CONDOMS- By Age

Figure 7 shows Contraceptive discontinuation according to various age groups of 15-24 years, 25-34 years and 35-49 years. The ever use of condom as a contraceptive, current use and subsequently the discontinuation rates of condom are similar in age groups upto 34 years of age, but it is lesser in 35-49 years of age.
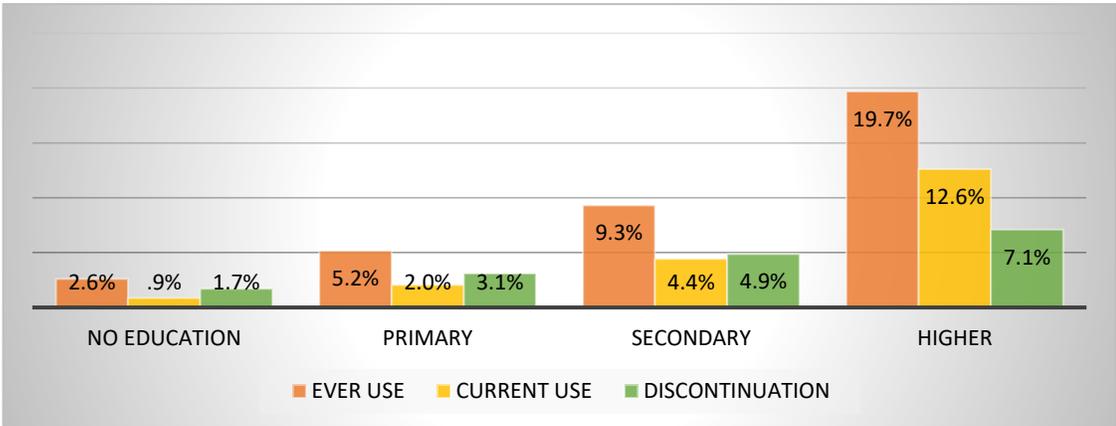
Figure 8 Contraceptive discontinuation - CONDOMS- By Education

Figure 8 shows Contraceptive discontinuation (condom) according to highest education attainment in the groups of no education at all, primary education, secondary education and higher than secondary education (college level and above). The ever use of condom as a contraceptive, current use and subsequently the discontinuation rates can be seen to be increasing with an increase in highest education level. However, use and the discontinuation are very low in case of no or primary level education of condom as a contraceptive.
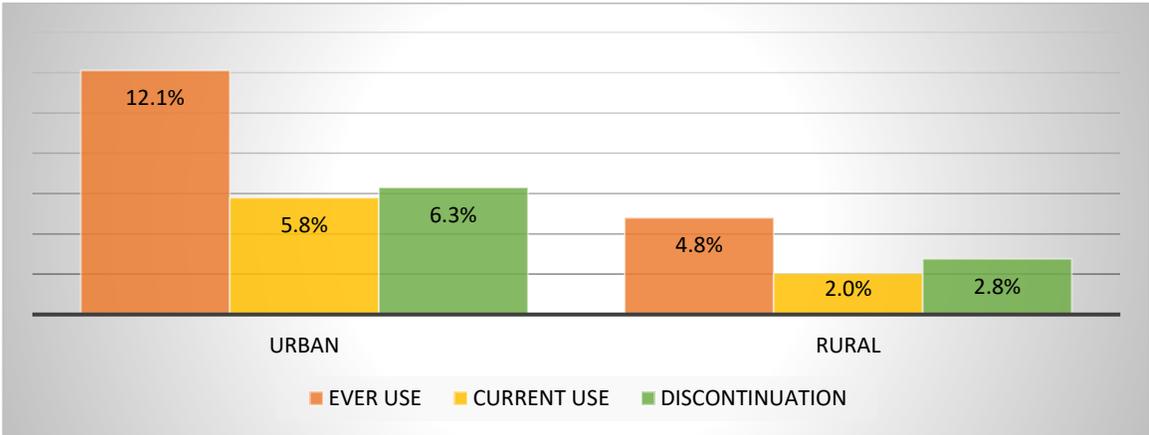
Figure 9 Contraceptive discontinuation - CONDOMS- By Residence

Figure 9 shows the discontinuation of condom as a contraceptive method by place of residence. This depicts that condom ever being used, current use and the discontinuation rates were seen to be more in the urban areas than rural.
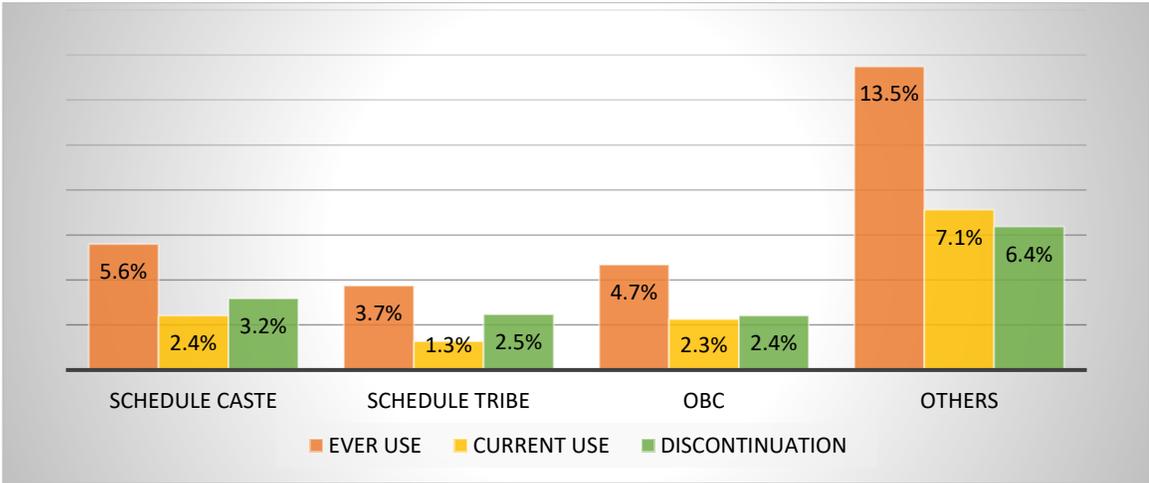
Figure 10 Contraceptive discontinuation - CONDOMS -by Caste

Figure 10 shows the Contraceptive discontinuation (condom) according to the caste. It can be seen that schedule caste, schedule tribe and other backward classes (the under privileged sections of the society) have very less use of contraceptive condom to start with. The others including the general category and the ones who did not know their caste, had much more usage and discontinuation rates.
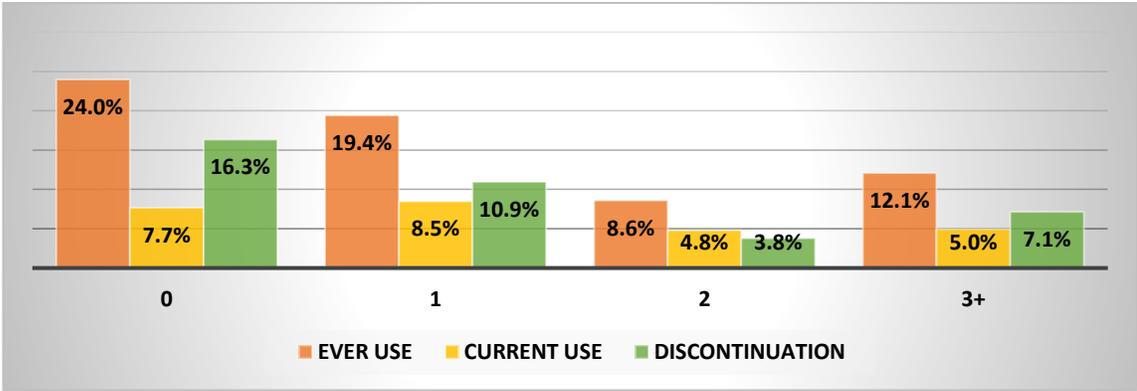
Figure 11 Contraceptive discontinuation - CONDOMS- By No. of living children at first use

Figure 11 shows the condom discontinuation according to number of living children at its first use. The discontinuation rates decrease with increasing number of living children at first use till the number of children is 2, 3 or more children show high usage and discontinuation rates.
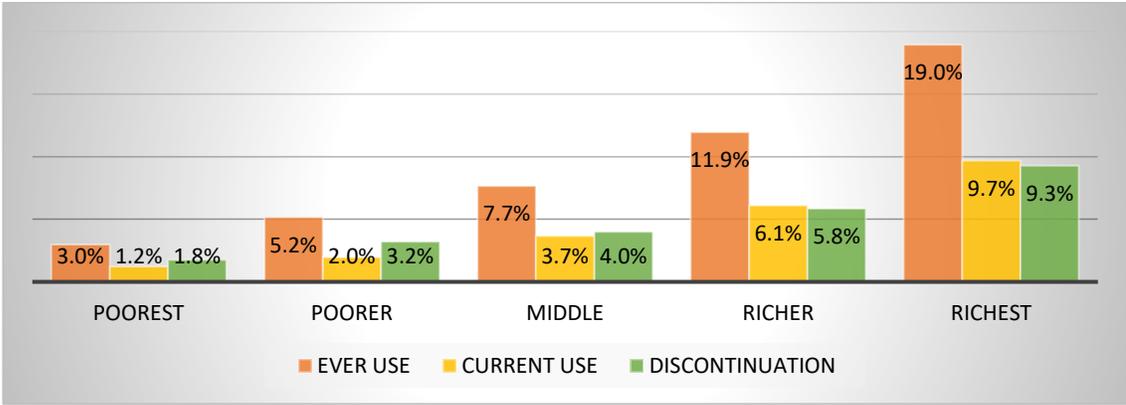
Figure 12 Contraceptive discontinuation - CONDOMS- By Wealth quintile

Figure 12 shows the condom discontinuation according to wealth quintile. The use and discontinuation rates are seen to be increasing with better wealth quintile. Also, the usage and discontinuation is very low in poorest and the poorer sections.

Contraceptive discontinuation rates (NITI Aayog's 30)- IUD/PPIUD

Figures 13-18 show Contraceptive discontinuation of IUD/PPIUD in NITI Aayog's 30 districts, and trends in their discontinuation in relation to various socio economic variables.
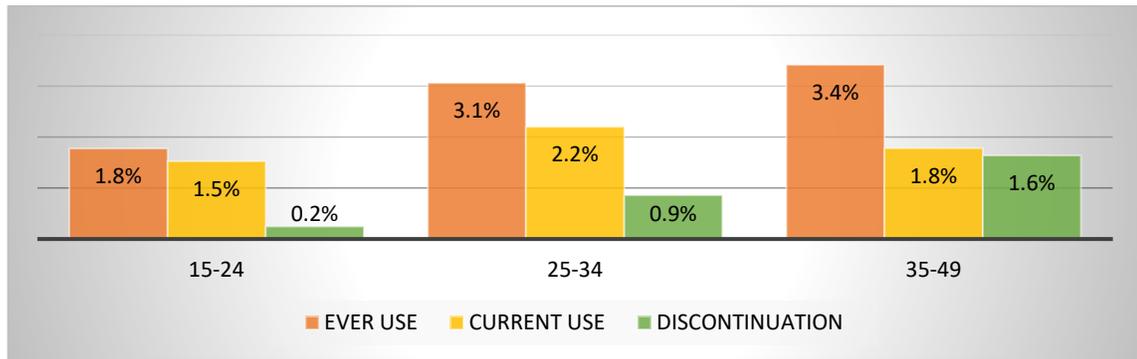
Figure 13 Contraceptive discontinuation - IUD/PPIUD - By Age

Figure 13 shows Contraceptive discontinuation according to various age groups of 15-24 years, 25-34 years and 35-49 years. The ever use of IUD/PPIUDs as a contraceptive, current use and subsequently the discontinuation rates of IUD/PPIUDs can be seen to be increasing with an increase in age.
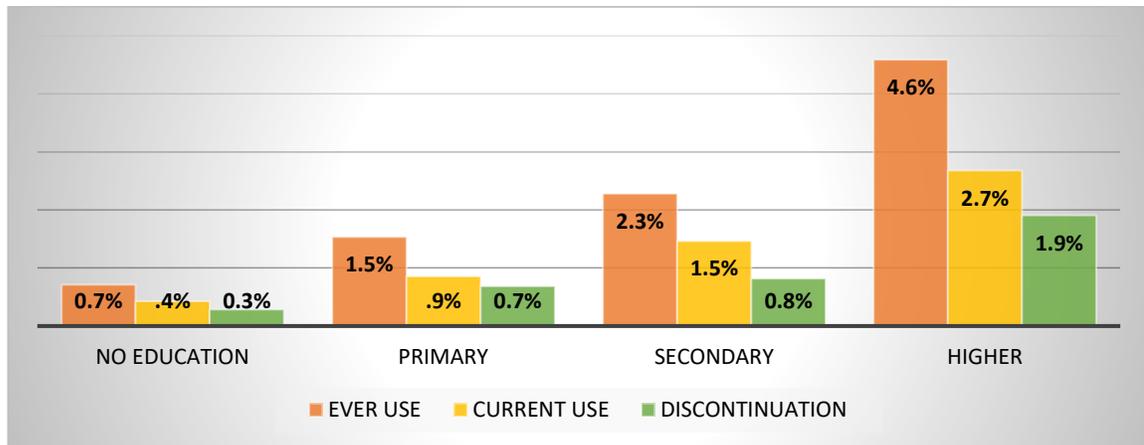
Figure 14 Contraceptive discontinuation - IUD/PPIUD - By education

Figure 14 shows Contraceptive discontinuation (IUD/PPIUD) according to highest education attainment in the groups of no education at all, primary education, secondary education and

higher than secondary education (college level and above). The ever use of IUD/PPIUDs as a contraceptive, current use and subsequently the discontinuation rates of IUD/PPIUDs can be seen to be increasing with an increase in highest education. However, no education and primary education show very less use and thus discontinuation of IUD/PPIUDs as contraceptive methods.
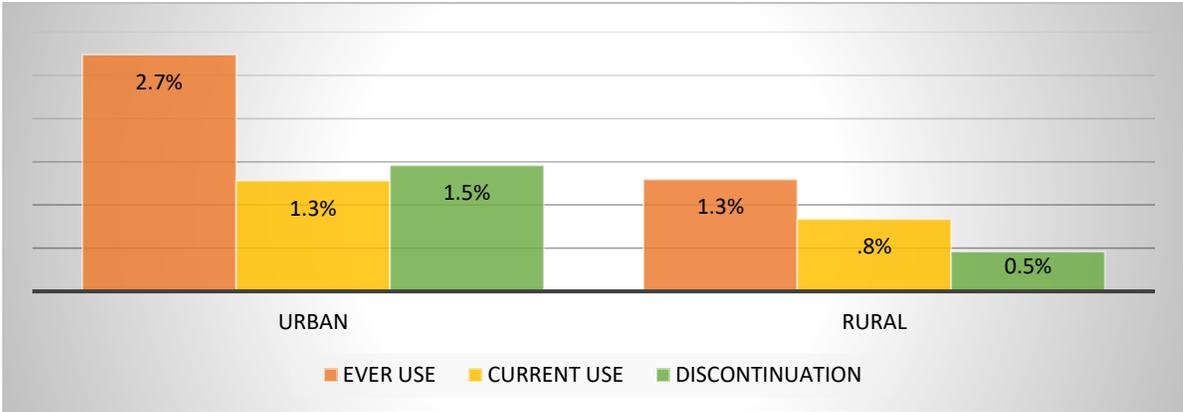
Figure 15 Contraceptive discontinuation - IUD/PPIUD - By Residence

Figure 15 shows the discontinuation of IUD/PPIUD as a contraceptive method by place of residence. This depicts that condom ever being used, current use and the discontinuation rates were seen to be more in the urban areas than rural.
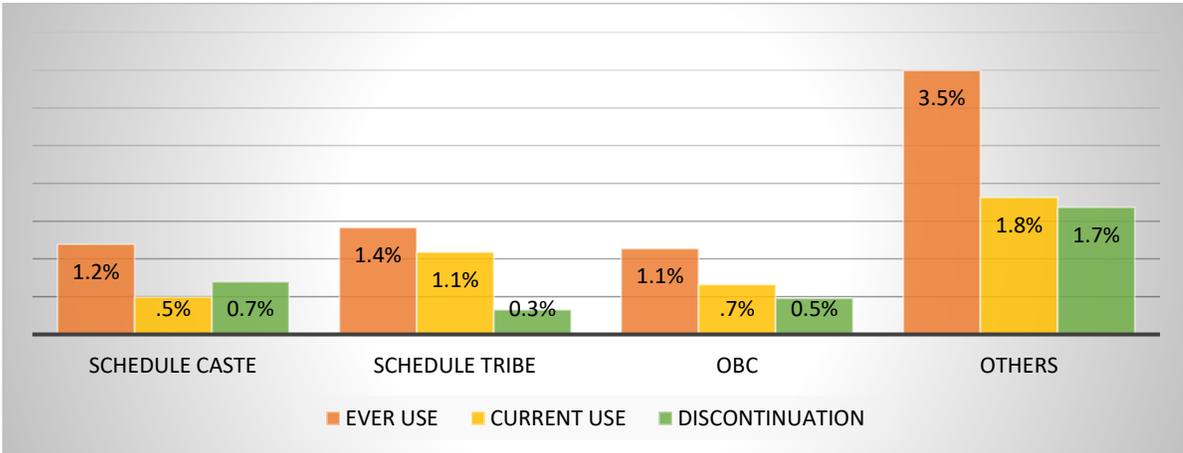
Figure 16 Contraceptive discontinuation - IUD/PPIUD - By Caste

Figure 16 shows the Contraceptive discontinuation (IUD/PPIUD) according to the caste. It can be seen that there is very less use of contraceptive IUD/PPIUDs to start with. The usage and

17

discontinuation is less in case of schedule tribe and other backward class, followed by schedule caste.
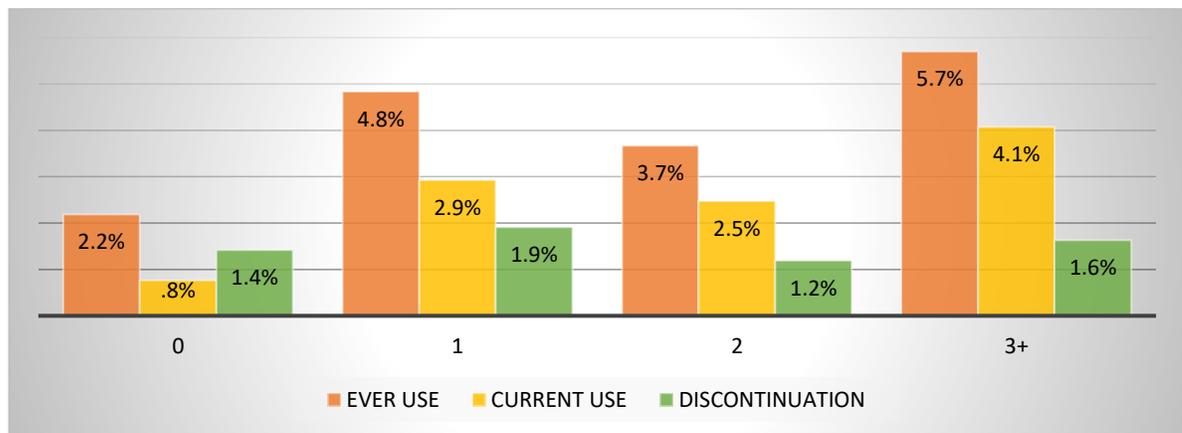
Figure 17 Contraceptive discontinuation - IUD/PPIUD - By No. of living children at first use

Figure 17 shows the IUD/PPIUD discontinuation according to number of living children at its first use. The discontinuation rates are seen to be least when there are 2 living children and most when there is only 1 living children.
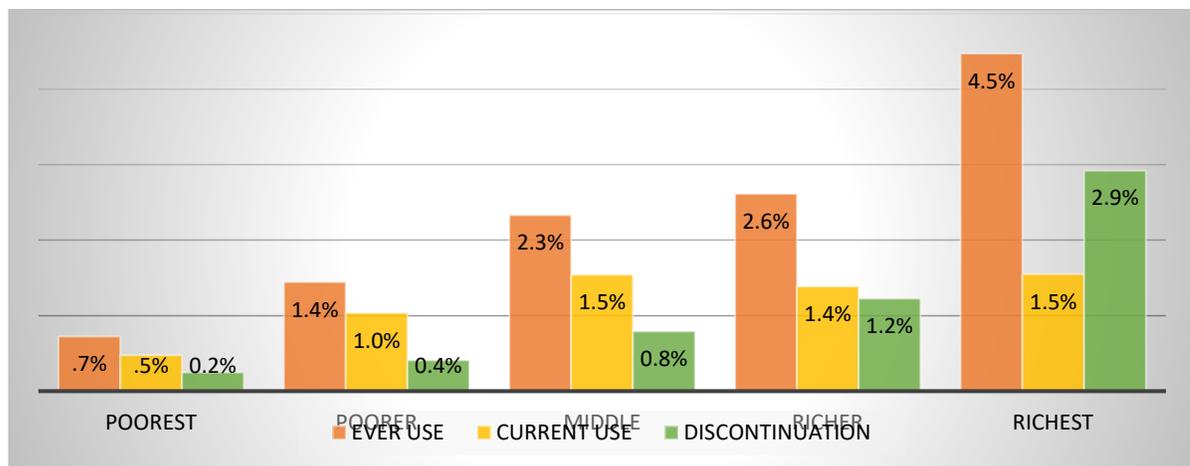
Figure 18 Contraceptive discontinuation - IUD/PPIUD - By wealth quintile

Figure 18 shows the IUD/PPIUD discontinuation according to wealth quintile. The use and discontinuation rates are seen to be increasing with better wealth quintile. Also, the usage and discontinuation is very low in poorest and the poorer sections.

Contraceptive discontinuation rates (50 districts by Central ministries)- PILLS

Figures 19-24 show Contraceptive discontinuation of pills in 50 districts by Central ministries and trends in their discontinuation in relation to various socio economic variables.
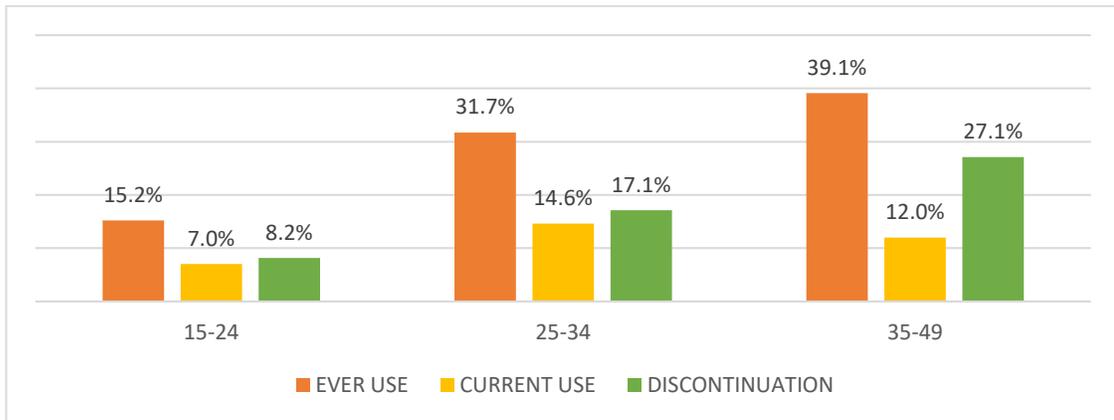
Figure 19 Contraceptive discontinuation - PILLS - by age

Figure 19 shows Contraceptive discontinuation according to various age groups of 15-24 years, 25-34 years and 35-49 years. The ever use of pills as a contraceptive, current use and subsequently the discontinuation rates of pills can be seen to be increasing with an increase in age.
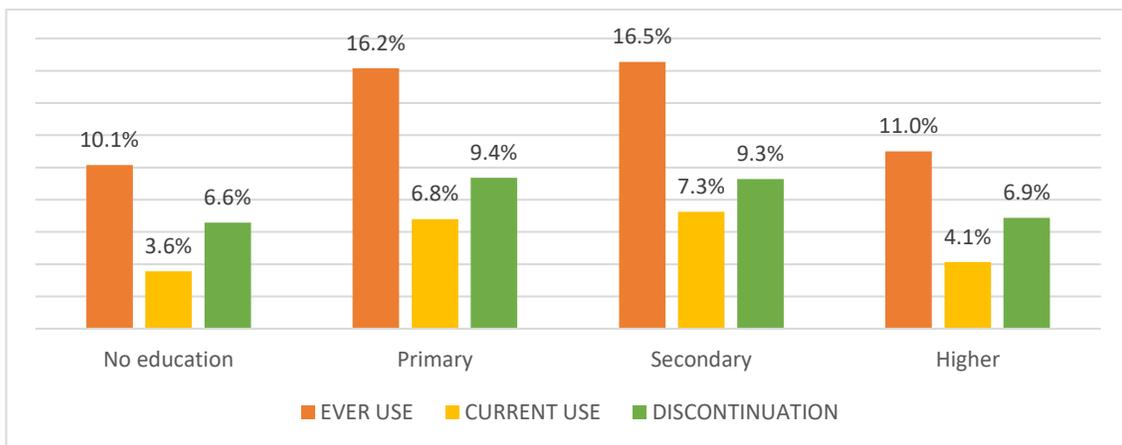
Figure 20 Contraceptive discontinuation - PILLS - by education

Figure 20 shows Contraceptive discontinuation (pill) according to highest education attainment in the groups of no education at all, primary education, secondary education and higher than

19

secondary education (college level and above). The ever use of pills as a contraceptive, current use and subsequently the discontinuation rates of pills can be seen to be increasing with an increase in highest education up to secondary education level. However, higher than education show a decline in the usage and the discontinuation rate of pills as a contraceptive.
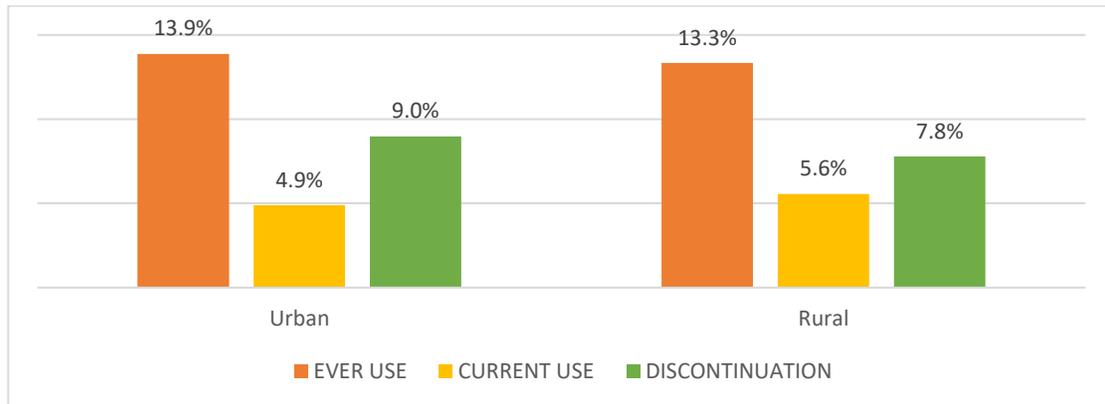
Figure 21 Contraceptive discontinuation - PILLS - by residence

Figure 21 shows the discontinuation of pill as a contraceptive method by place of residence. This depicts that pills ever being used were almost the same percentage in urban and rural areas. The current use is lesser in urban areas than rural areas. The discontinuation rates were seen to be lesser in rural areas than urban areas.
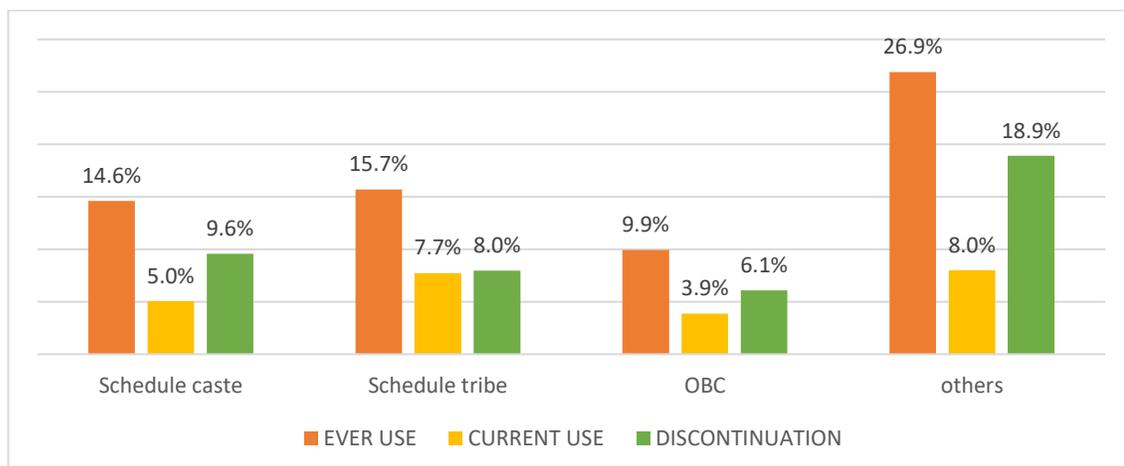
Figure 22 Contraceptive discontinuation - PILLS - by caste

Figure 22 shows the Contraceptive discontinuation (pill) according to the caste. It can be seen that use and discontinuation is least in other backward class, followed by schedule tribe.

20
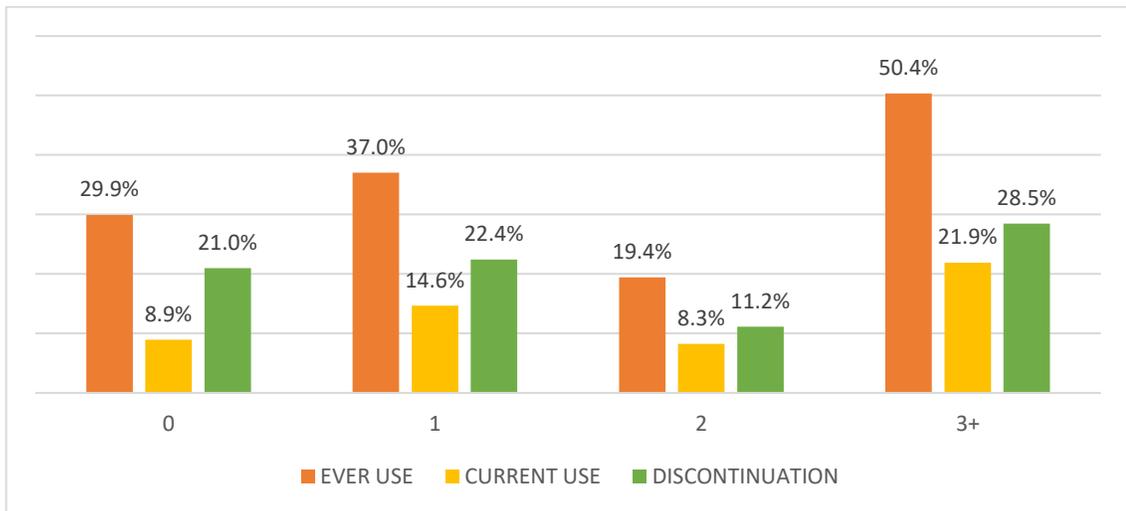
Figure 23 Contraceptive discontinuation - PILLS - by No. of living children at 1st use

Figure 23 shows the pill discontinuation according to number of living children at its first use. The discontinuation rates decrease with increasing number of living children at first use till the number of children is 2, 3 or more children show high usage and discontinuation rates.
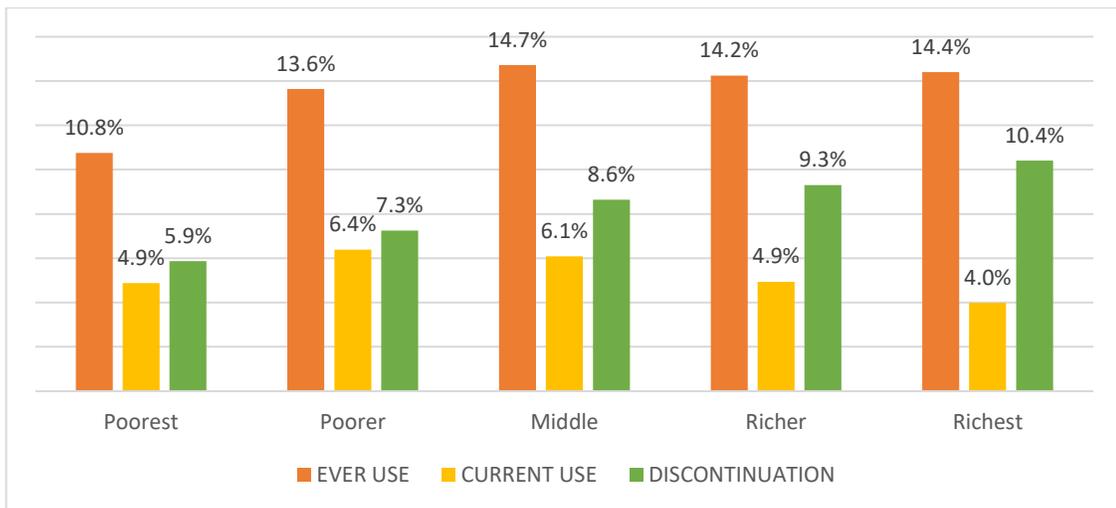
Figure 24 Contraceptive discontinuation - PILLS - by wealth quintile

Figure 24 shows the Pill discontinuation according to wealth quintile. The use and discontinuation rates are seen to be increasing with better wealth quintile.

Contraceptive discontinuation rates (50 districts by Central ministries)- CONDOM

Figures 25-30 show Contraceptive discontinuation of Condom in 50 districts by Central ministries and trends in their discontinuation in relation to various socio economic variables.
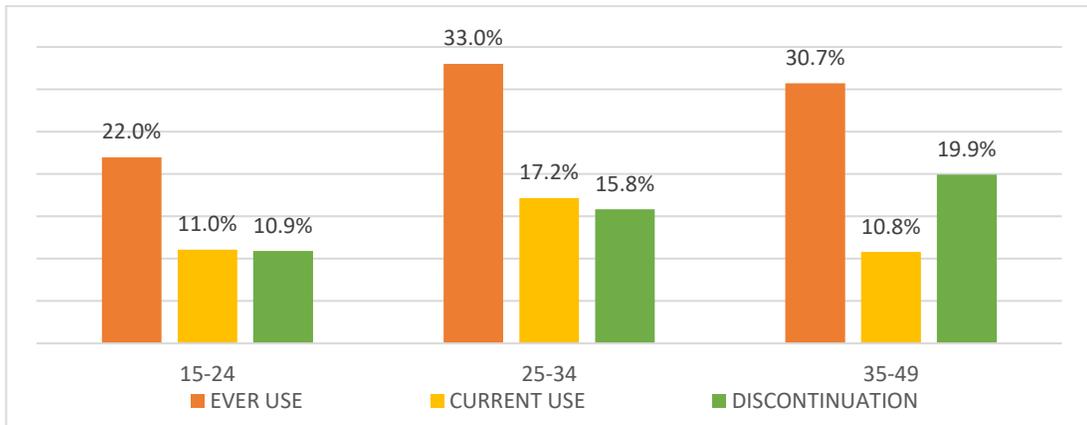
*Figure 25 Contraceptive discontinuation - CONDOM - by age*

Figure 25 shows Contraceptive discontinuation according to various age groups of 15-24 years, 25-34 years and 35-49 years. The ever use of Condoms as a contraceptive, current use and subsequently the discontinuation rates of Condoms can be seen to be increasing with an increase in age.
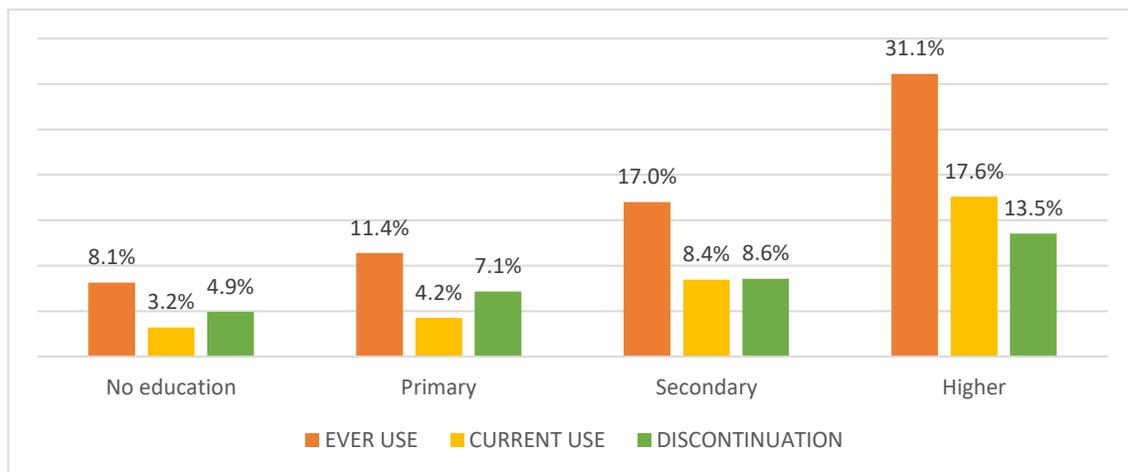
Figure 26 Contraceptive discontinuation - CONDOM - by education

Figure 26 shows Contraceptive discontinuation (Condom) according to highest education attainment in the groups of no education at all, primary education, secondary education and higher than secondary education (college level and above). The ever use of Condoms as a contraceptive, current use and subsequently the discontinuation rates of Condoms can be seen to be increasing with an increase in highest education.
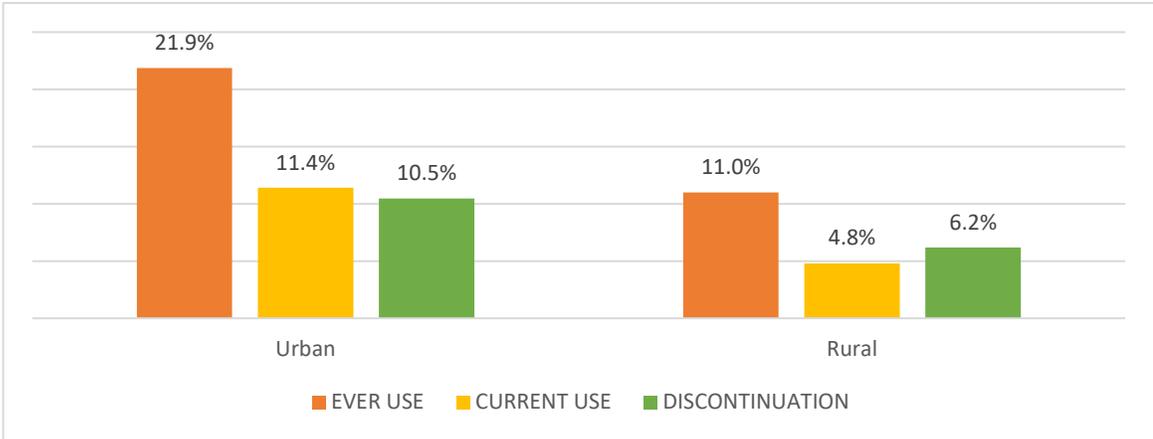
Figure 27 Contraceptive discontinuation - CONDOM - by Residence

Figure 27 shows the discontinuation of Condom as a contraceptive method by place of residence. This depicts that Condoms as a contraceptive method, were used more, still have a higher prevalence rate and subsequently higher discontinuation rate in case of urban areas.
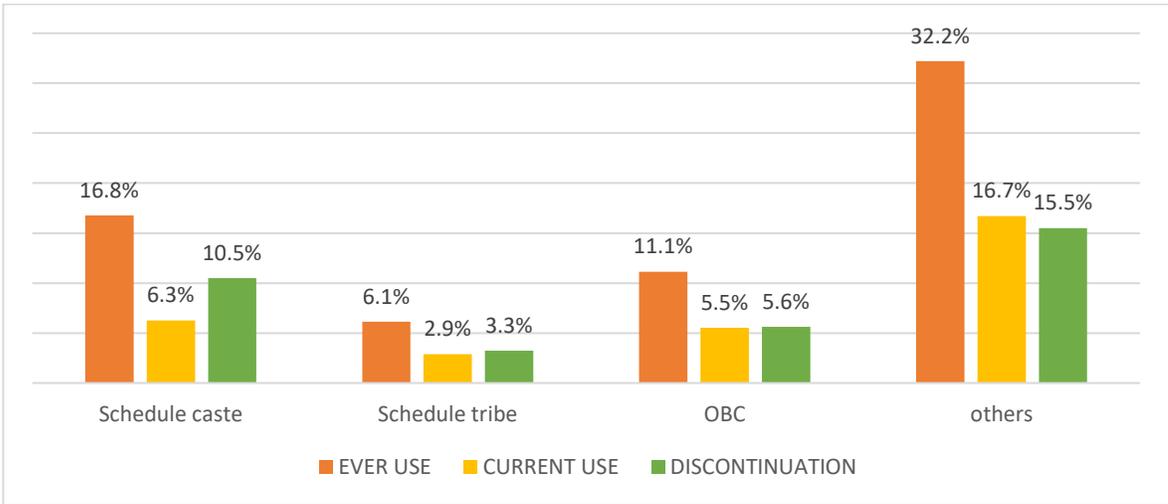
Figure 28 Contraceptive discontinuation - CONDOM - by caste

Figure 28 shows the Contraceptive discontinuation (Condom) according to the caste. It can be seen that use and discontinuation is least in schedule tribe, and so is the current use of condom, followed by other backward class.
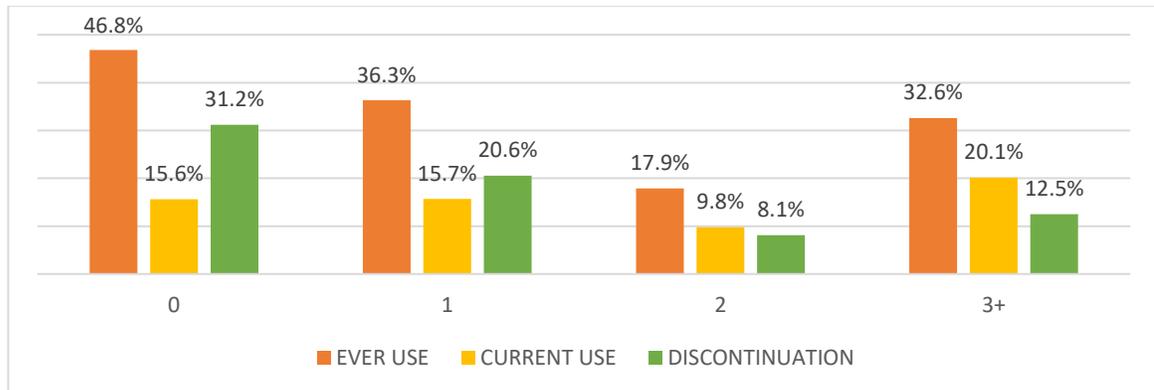
Figure 29 Contraceptive discontinuation - CONDOM - By No. of living children at first use

Figure 29 shows the Condom discontinuation according to number of living children at its first use. The discontinuation rates decrease with increasing number of living children at first use till the number of children is 2, 3 or more children show high usage and discontinuation rates.
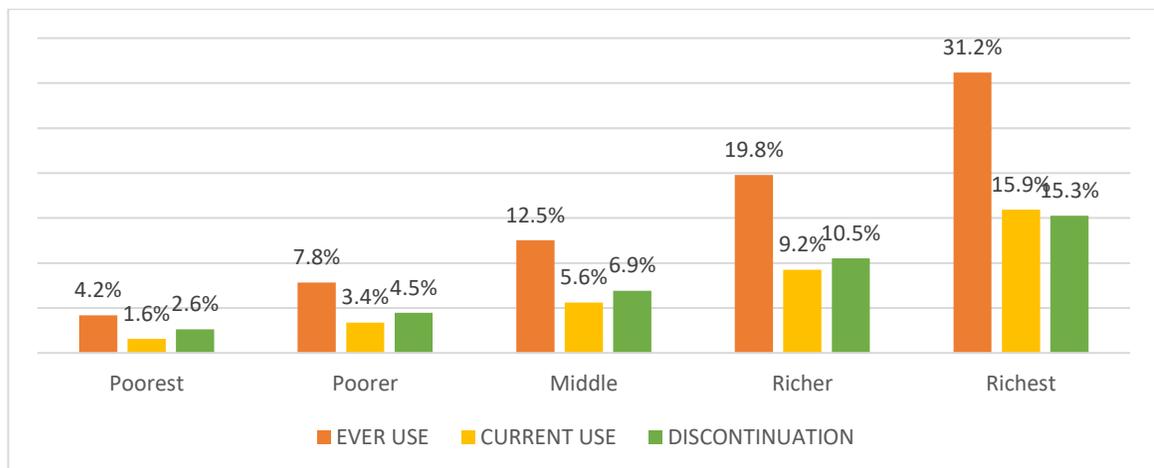
Figure 30 Contraceptive discontinuation - CONDOM - by wealth quintile

Figure 30 shows the condom discontinuation according to wealth quintile. The use and discontinuation rates are seen to be increasing with better wealth quintile. The use and discontinuation rate in poorest is very low.

Contraceptive discontinuation rates (50 districts by Central ministries)- IUD/PPIUD

Figures 31-36 show Contraceptive discontinuation of IUD/PPIUD in 50 districts by Central ministries and trends in their discontinuation in relation to various socio economic variables.
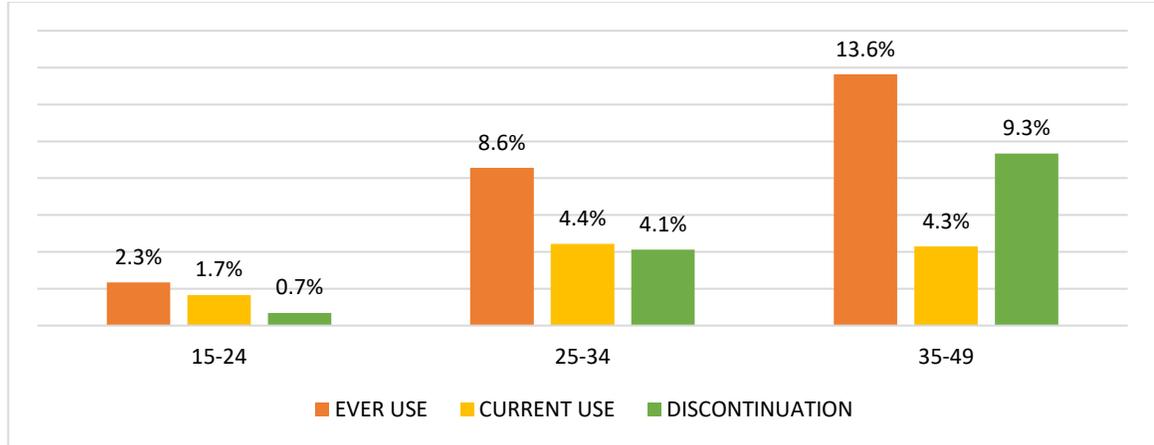
Figure 31 Contraceptive discontinuation - IUD/PPIUD - by age

Figure 31 shows Contraceptive discontinuation according to various age groups of 15-24 years, 25-34 years and 35-49 years. The ever use of IUD/PPIUDs as a contraceptive, current use and subsequently the discontinuation rates of IUD/PPIUDs can be seen to be increasing with an increase in age.
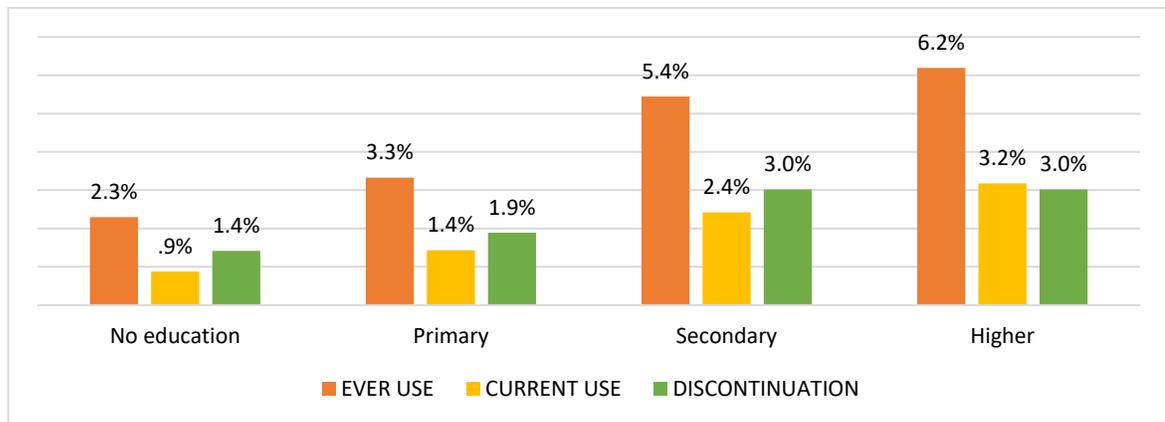
Figure 32 Contraceptive discontinuation - IUD/PPIUD - by education

Figure 32 shows Contraceptive discontinuation (IUD/PPIUD) according to highest education attainment in the groups of no education at all, primary education, secondary education and higher than secondary education (college level and above). The ever use of IUD/PPIUDs as a

contraceptive, current use and subsequently the discontinuation rates of IUD/PPIUDs can be seen to be increasing with an increase in highest education up to secondary education level. However, secondary and higher than secondary education, both have the same discontinuation rates.
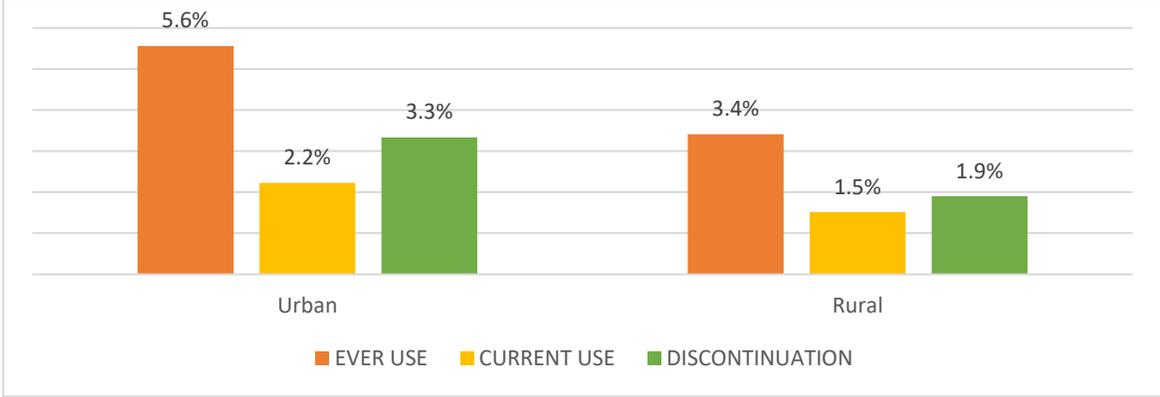

Figure 33 Contraceptive discontinuation - IUD/PPIUD - by residence

Figure 33 shows the discontinuation of IUD/PPIUD as a contraceptive method by place of residence. This depicts that IUD/PPIUDs use and discontinuation is more in urban areas in comparison to the rural areas.
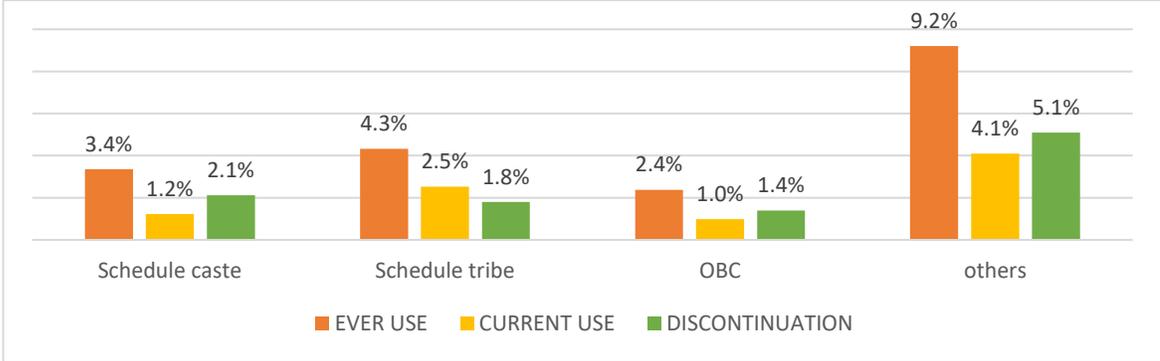
Figure 34 Contraceptive discontinuation - IUD/PPIUD - by caste

Figure 34 shows the Contraceptive discontinuation (IUD/PPIUD) according to the caste. It can be seen that schedule caste and other backward classes have very less use of contraceptive IUD/PPIUDs to start with. The discontinuation is least in case of other backward class followed by schedule tribe..
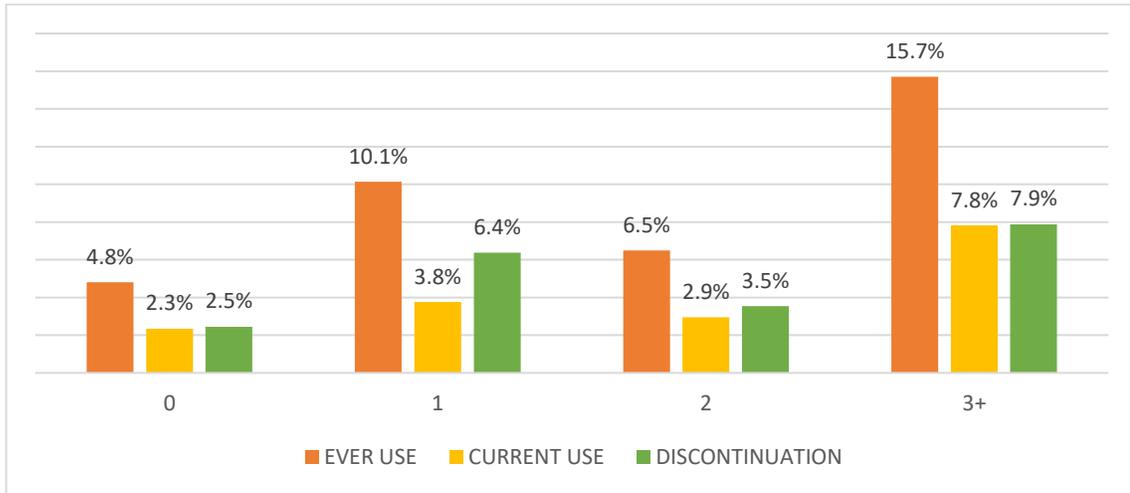
Figure 35 Contraceptive discontinuation - IUD/PPIUD - by no. of living children at first use

Figure 35 shows the IUD/PPIUD discontinuation according to number of living children at its first use. The discontinuation rates are minimum when there is no living children followed by 2 living children.
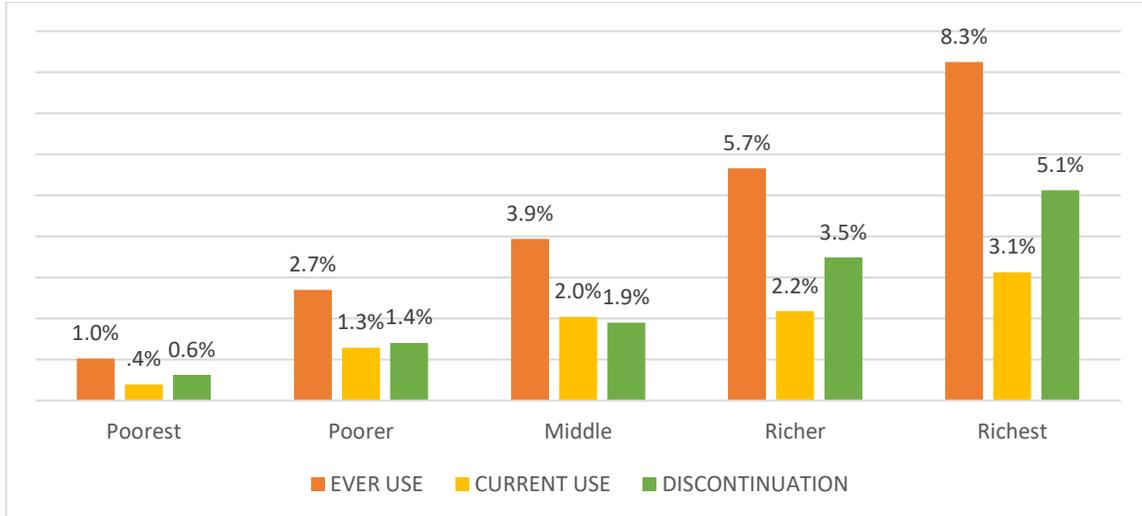

Figure 36 Contraceptive discontinuation - IUD/PPIUD - by wealth quintile

Figure 36 shows the IUD/PPIUD discontinuation according to wealth quintile. The use and discontinuation rates are seen to be increasing with better wealth quintile.

Contraceptive discontinuation rates (35 districts by Ministry of Home Affairs)- PILLS

Figures 37-42 show Contraceptive discontinuation of pills in Ministry of Home Affairs 35 districts and trends in their discontinuation in relation to various socio economic variables.
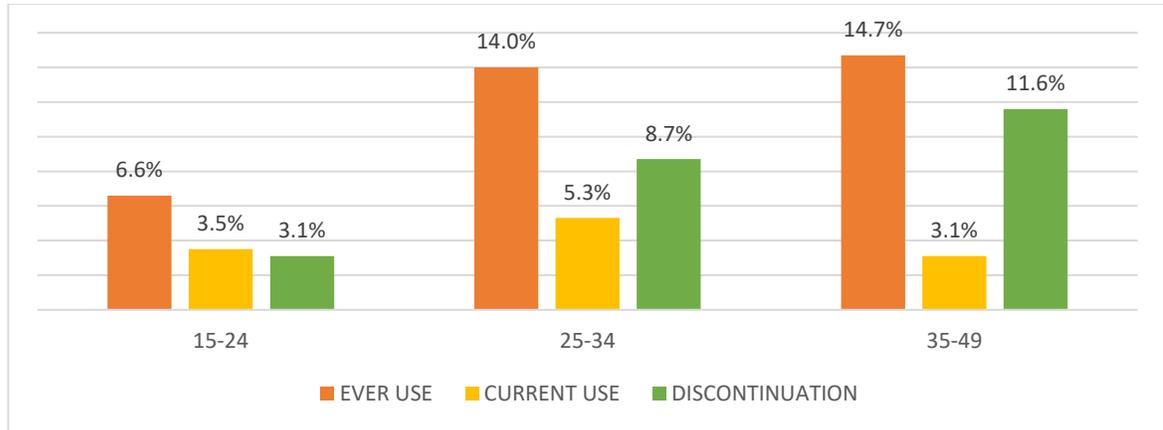

Figure 37 Contraceptive discontinuation - PILL - By age

Figure 37 shows Contraceptive discontinuation according to various age groups of 15-24 years, 25-34 years and 35-49 years. The ever use of pills as a contraceptive, current use and subsequently the discontinuation rates of pills can be seen to be increasing with an increase in age.
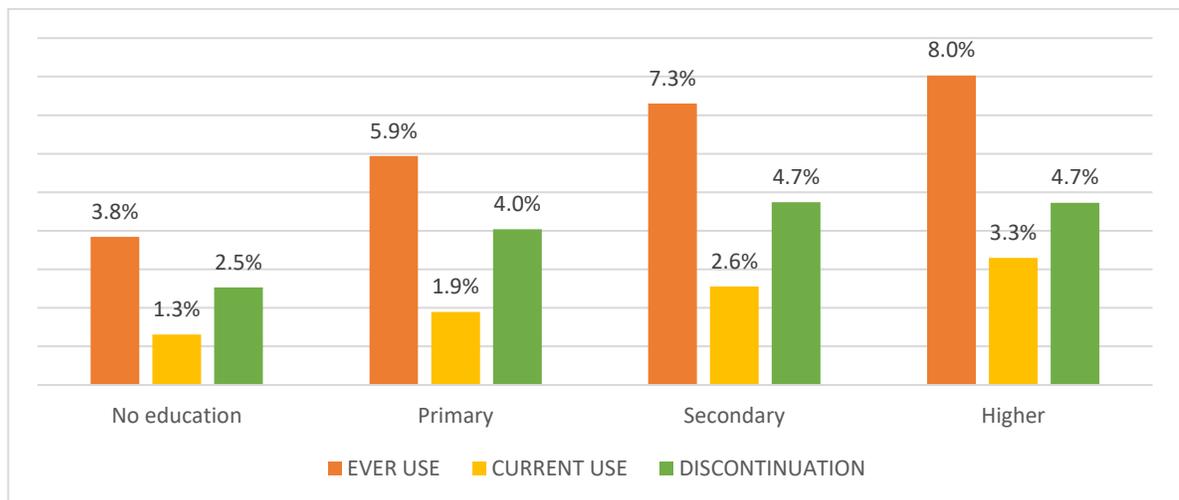

Figure 38 Contraceptive discontinuation - PILLS - by education

Figure 38 shows Contraceptive discontinuation (pill) according to highest education attainment in the groups of no education at all, primary education, secondary education and higher than

secondary education (college level and above). The ever use of pills as a contraceptive, current use and subsequently the discontinuation rates of pills can be seen to be increasing with an increase in highest education.
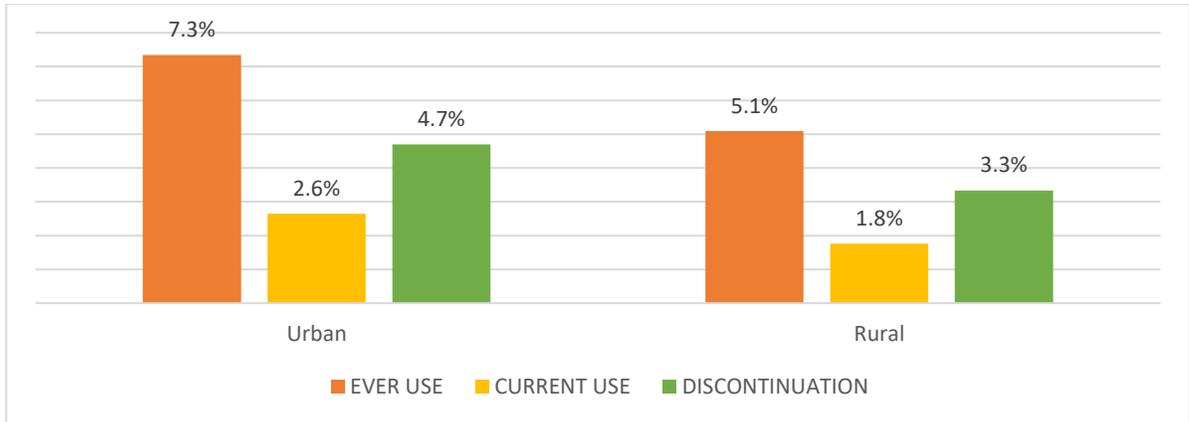
Figure 39 Contraceptive discontinuation - PILLS - by residence

Figure 39 shows the discontinuation of pill as a contraceptive method by place of residence. This depicts that pill's use and discontinuation is more in urban areas in comparison to the rural areas.
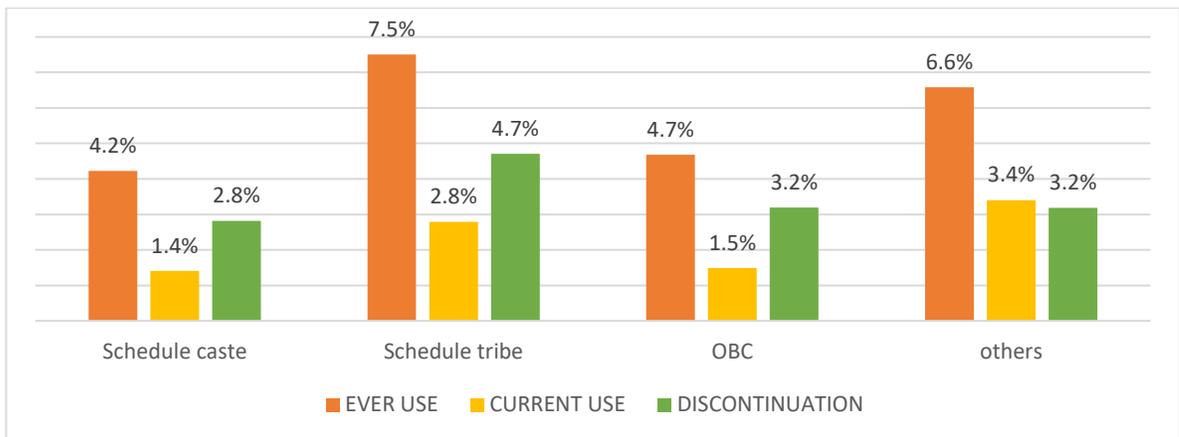
Figure 40 Contraceptive discontinuation - PILLS - by caste

Figure 40 shows the Contraceptive discontinuation (pill) according to the caste. It can be seen that schedule tribe has the highest discontinuation rate and also the highest use of pill as a contraceptive method and schedule caste has the least discontinuation rate.
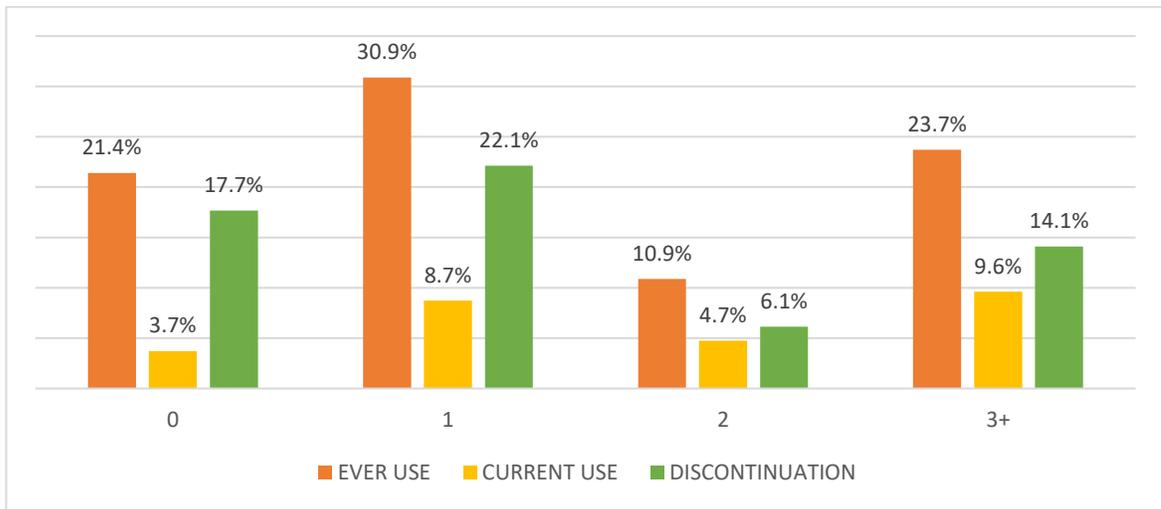
Figure 41 Contraceptive discontinuation - PILLS - by no. of living children at first use

Figure 41 shows the pill discontinuation according to number of living children at its first use. The discontinuation rate is least for group with 2 living children at the time of first use and maximum in case there is only 1 living child at first use.
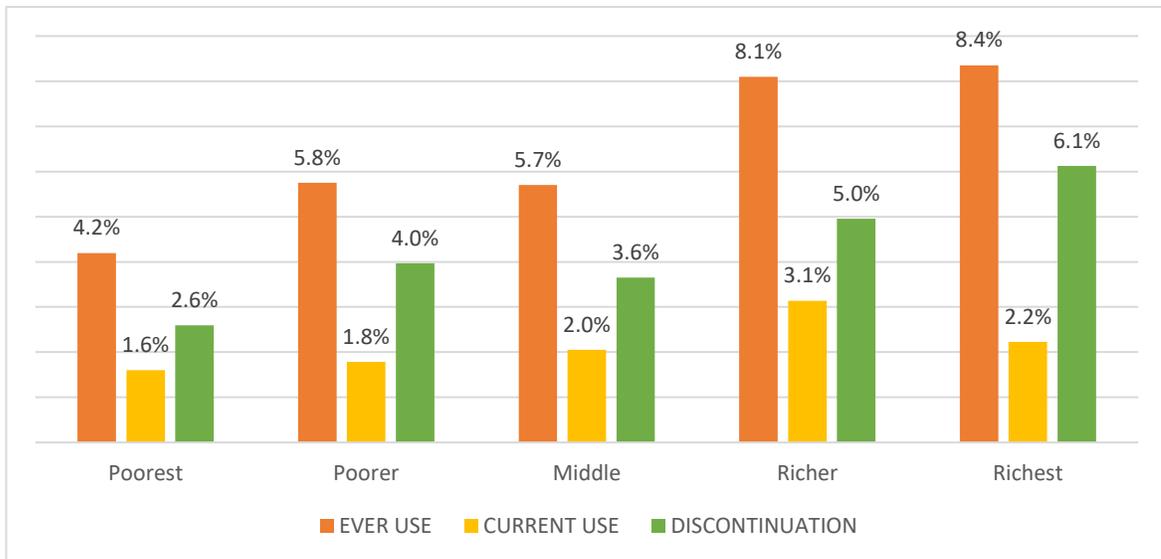
Figure 42 Contraceptive discontinuation - PILLS - by wealth quintile

Figure 42 shows the pill discontinuation according to wealth quintile. The use and discontinuation rates are seen to be increasing with better wealth quintile.

Contraceptive discontinuation rates (35 districts by Ministry of Home Affairs)-CONDOM

Figures 43-48 show Contraceptive discontinuation of condom in MHA's 35 districts, and trends in their discontinuation in relation to various socio economic variables.
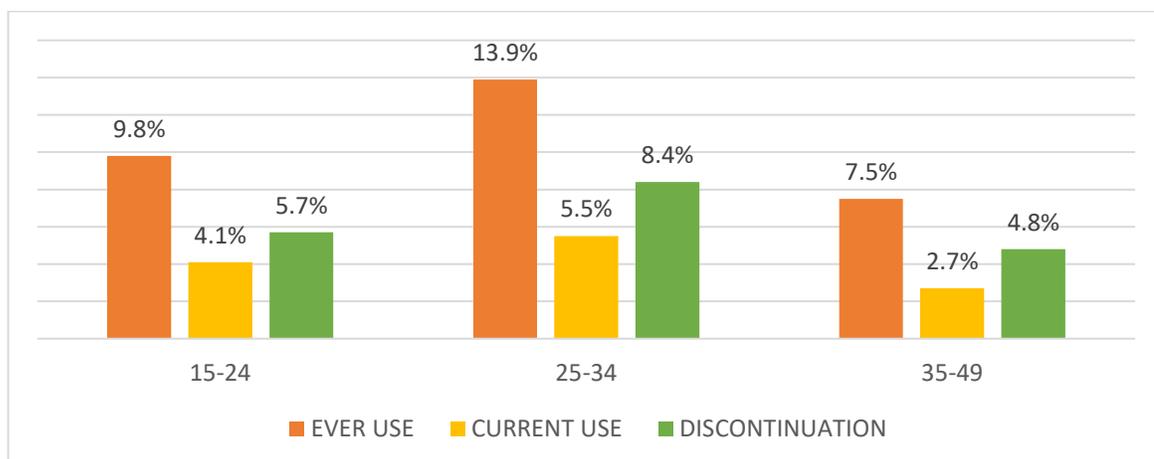
Figure 43 Contraceptive discontinuation - CONDOM - by age

Figure 43 shows Contraceptive discontinuation according to various age groups of 15-24 years, 25-34 years and 35-49 years. The ever use of Condoms as a contraceptive, current use and subsequently the discontinuation rates of Condoms are maximum in 25-34 years of age, and least in 35-49 years of age.
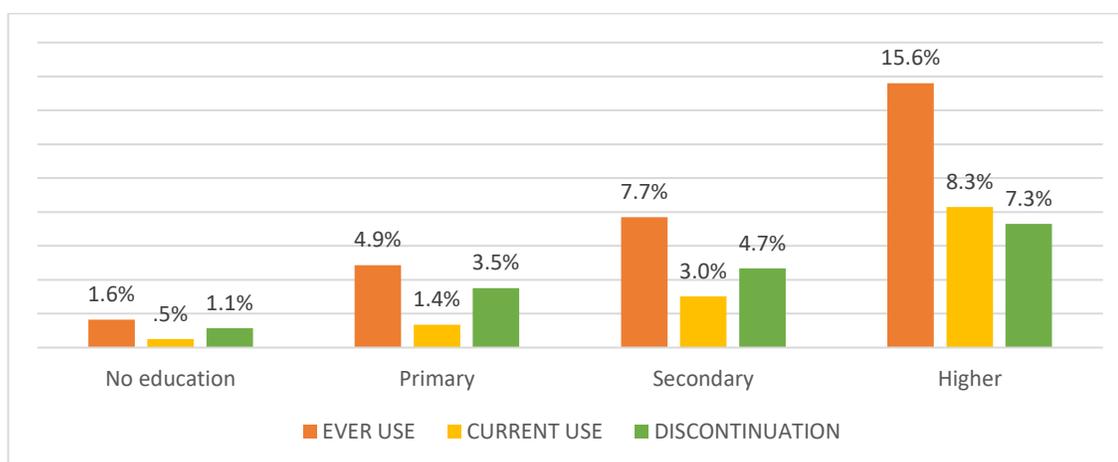
Figure 44 Contraceptive discontinuation - CONDOM - by education

Figure 44 shows Contraceptive discontinuation (Condom) according to highest education attainment in the groups of no education at all, primary education, secondary education and higher than secondary education (college level and above). The ever use of Condoms as a contraceptive, current use and subsequently the discontinuation rates of Condoms can be seen to be increasing with an increase in highest education.
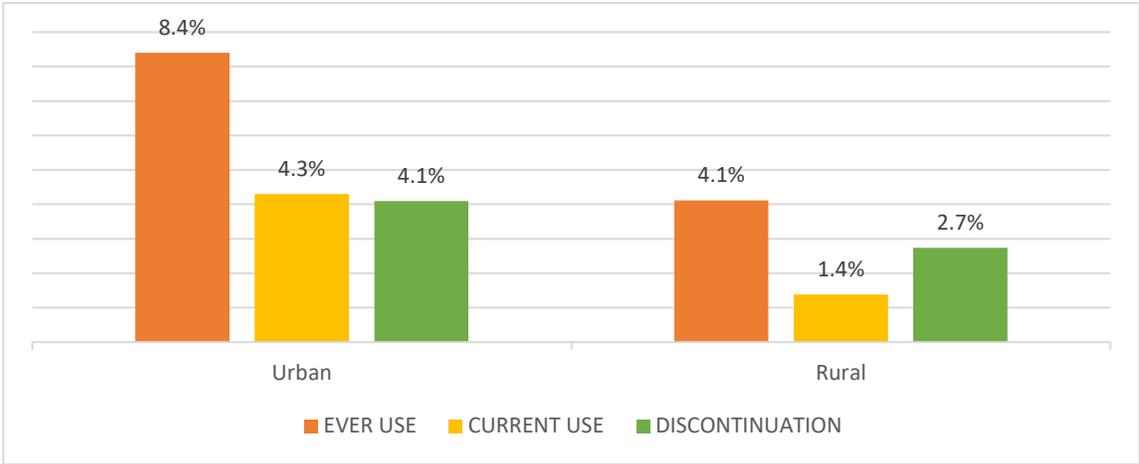
Figure 45 Contraceptive discontinuation - CONDOM - by residence

Figure 45 shows the discontinuation of Condom as a contraceptive method by place of residence. This depicts that condom's use and discontinuation is more in urban areas in comparison to the rural areas.
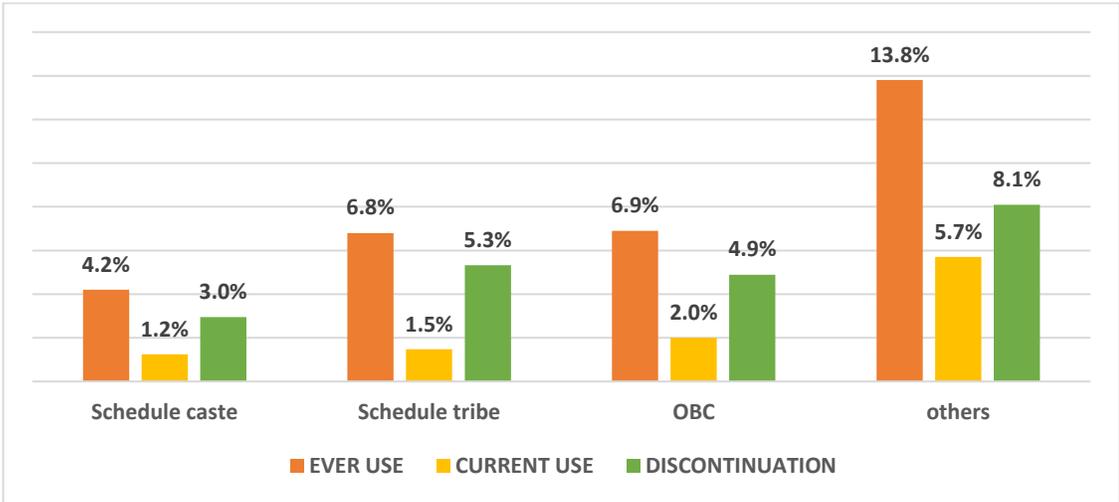
Figure 46 Contraceptive discontinuation - CONDOM - by caste

Figure 46 shows the Contraceptive discontinuation (Condom) according to the caste. It can be seen that schedule caste has the lowest use as well as discontinuation rate.
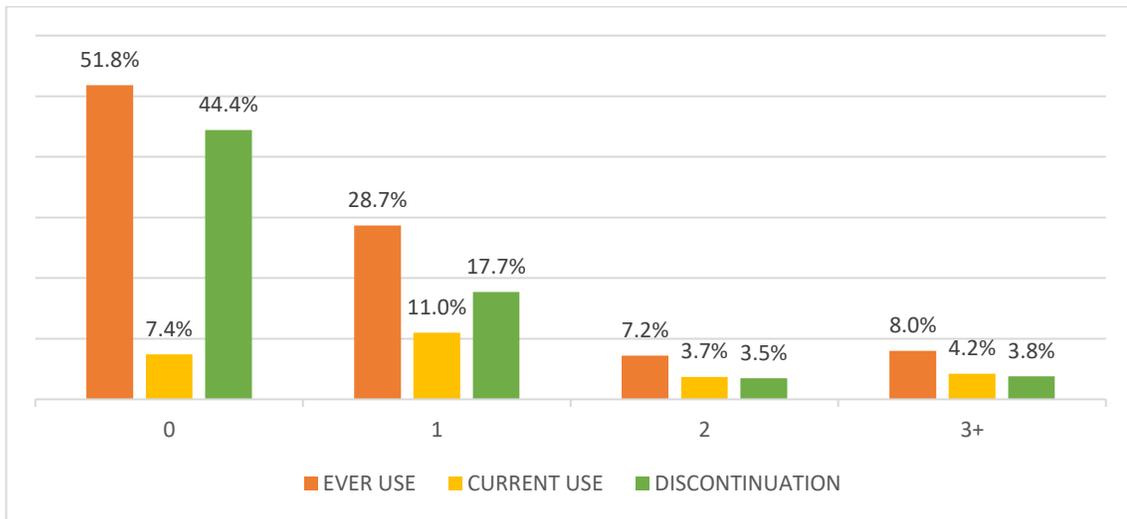

Figure 47 Contraceptive discontinuation - CONDOM - No. of living children at 1st use

Figure 47 shows the Condom discontinuation according to number of living children at its first use. The use and discontinuation rates of condom decrease with increasing number of living children at first use.
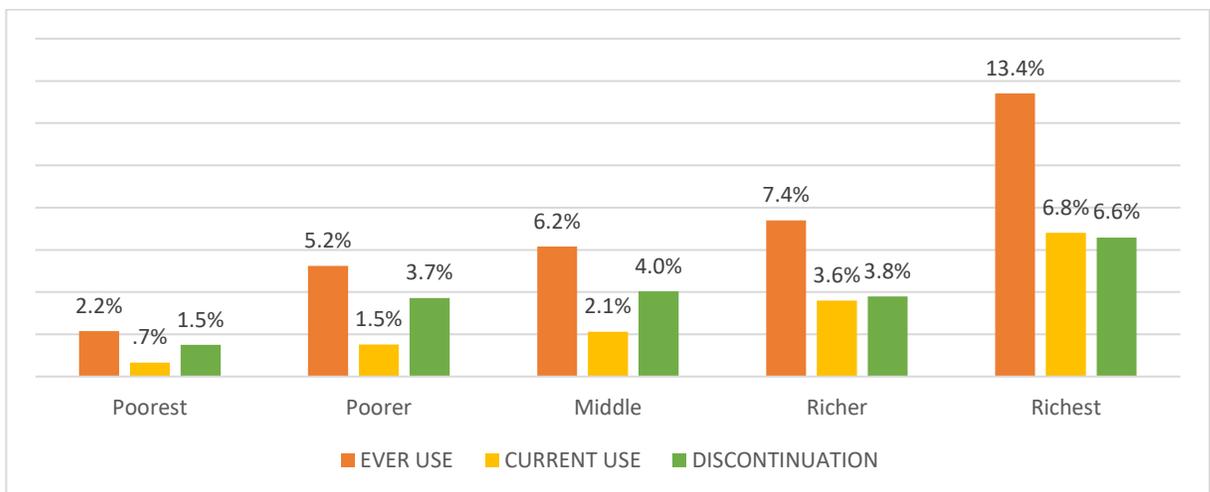
Figure 48 Contraceptive discontinuation - CONDOM - by wealth quintile

Figure 48 shows the condom discontinuation according to wealth quintile. The use and discontinuation rates are seen to be increasing with better wealth quintile.

Contraceptive discontinuation rates (35 districts by Ministry of Home Affairs)-IUD/PPIUD

Figures 49-54 show Contraceptive discontinuation of pills in condom in MHA's 35 districts and trends in their discontinuation in relation to various socio economic variables.
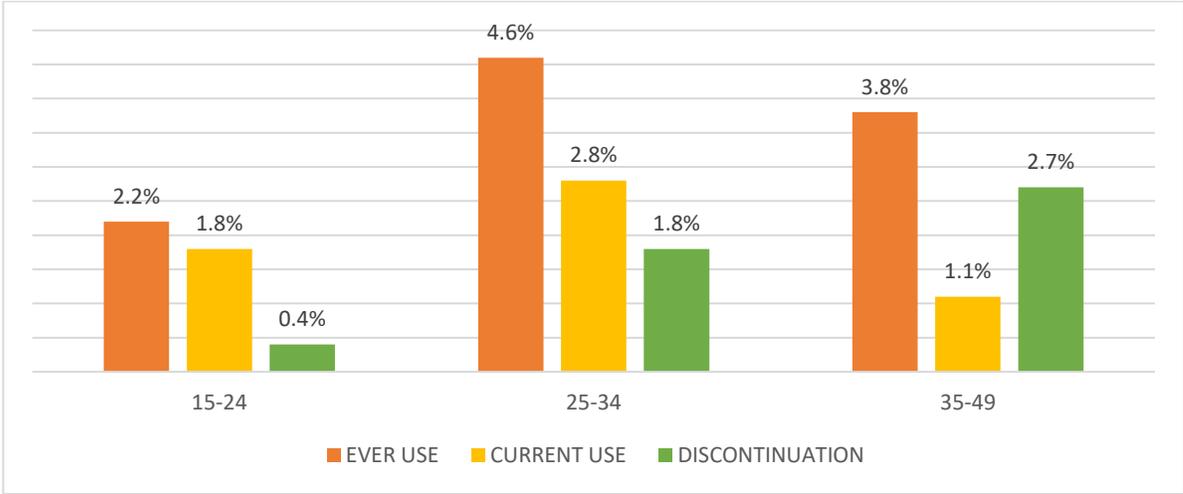

Figure 49 Contraceptive discontinuation - IUD/PPIUD - by age

Figure 49 shows Contraceptive discontinuation according to various age groups of 15-24 years, 25-34 years and 35-49 years. The ever use of IUD/PPIUDs as a contraceptive, current use and

subsequently the discontinuation rates of IUD/PPIUDs can be seen to be increasing with an increase in age.
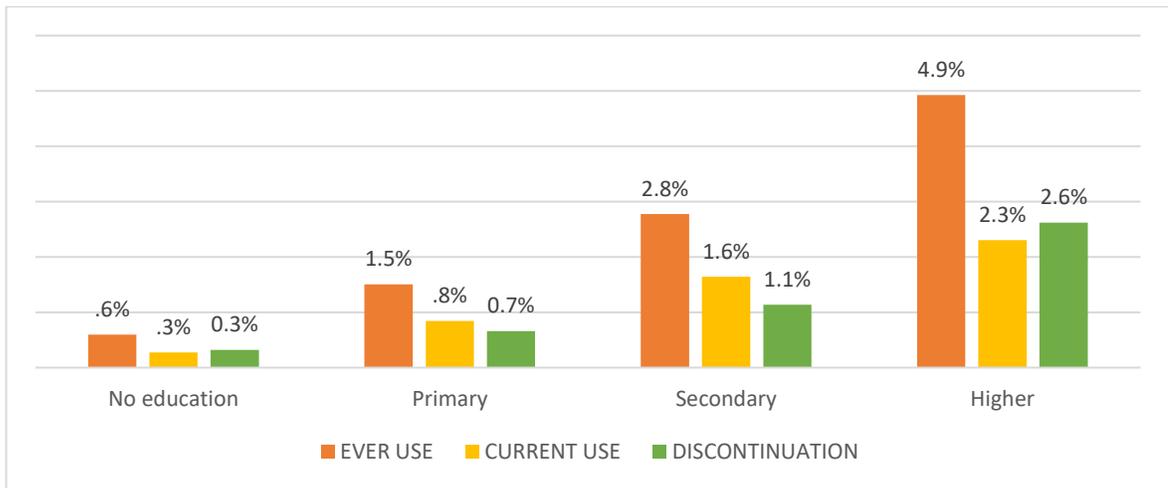
Figure 50 Contraceptive discontinuation - IUD/PPIUD - by education

Figure 50 shows Contraceptive discontinuation (IUD/PPIUD) according to highest education attainment in the groups of no education at all, primary education, secondary education and higher than secondary education (college level and above). The ever use of IUD/PPIUDs as a contraceptive, current use and subsequently the discontinuation rates of IUD/PPIUDs can be seen to be increasing with an increase in highest education.
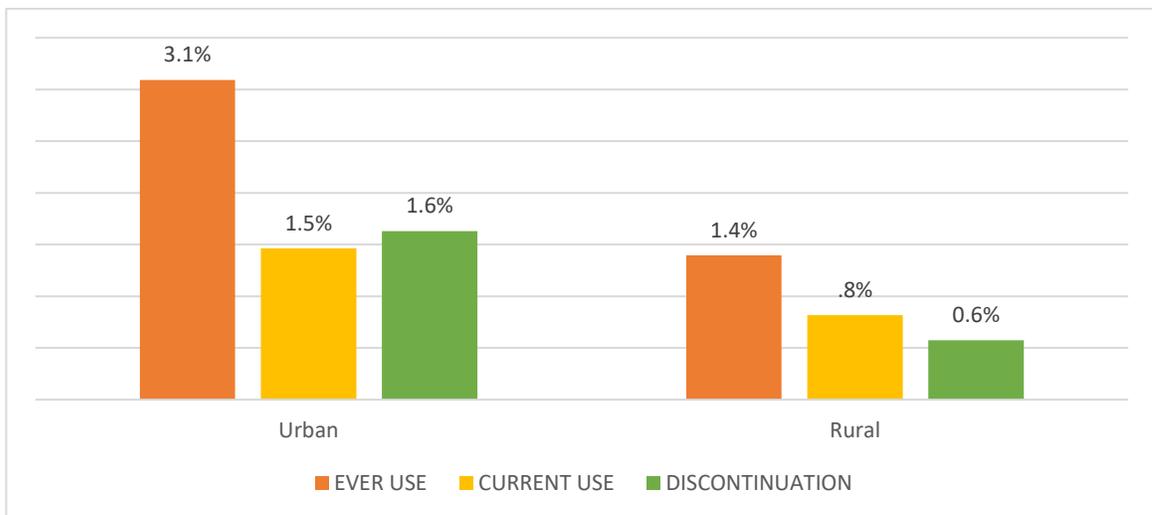

Figure 51 Contraceptive discontinuation - IUD/PPIUD - by residence

Figure 51 shows the discontinuation of IUD/PPIUD as a contraceptive method by place of residence. This depicts that use and subsequently the discontinuation rates are higher in case of urban areas, in comparison to the rural areas.
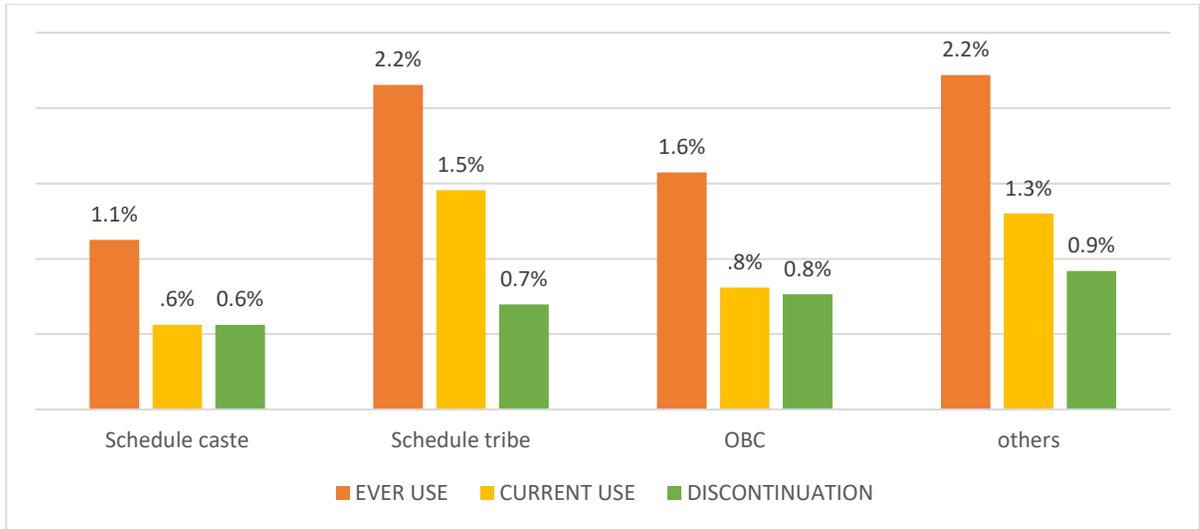

Figure 52 Contraceptive discontinuation - IUD/PPIUD - by caste

Figure 52 shows the Contraceptive discontinuation (IUD/PPIUD) according to the caste. It can be seen that In spite of different use, all categories have similar discontinuation rates.
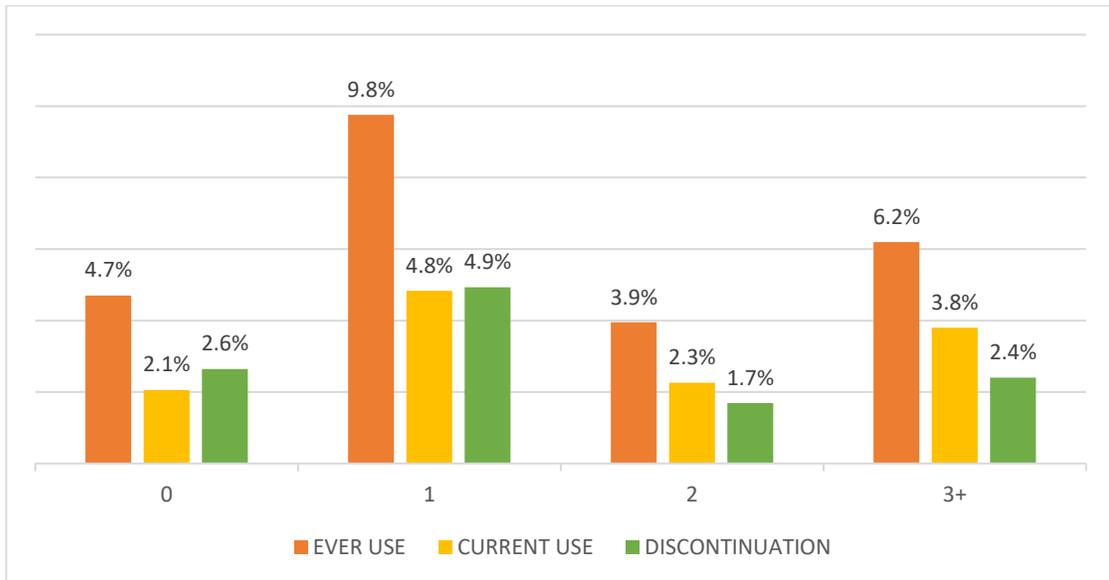

Figure 53 Contraceptive discontinuation - IUD/PPIUD - by no. of living children at 1st use

Figure 53 shows the IUD/PPIUD discontinuation according to number of living children at its first use. The discontinuation rate is least for group with 2 living children at the time of first use and maximum in case there is only 1 living child at first use.
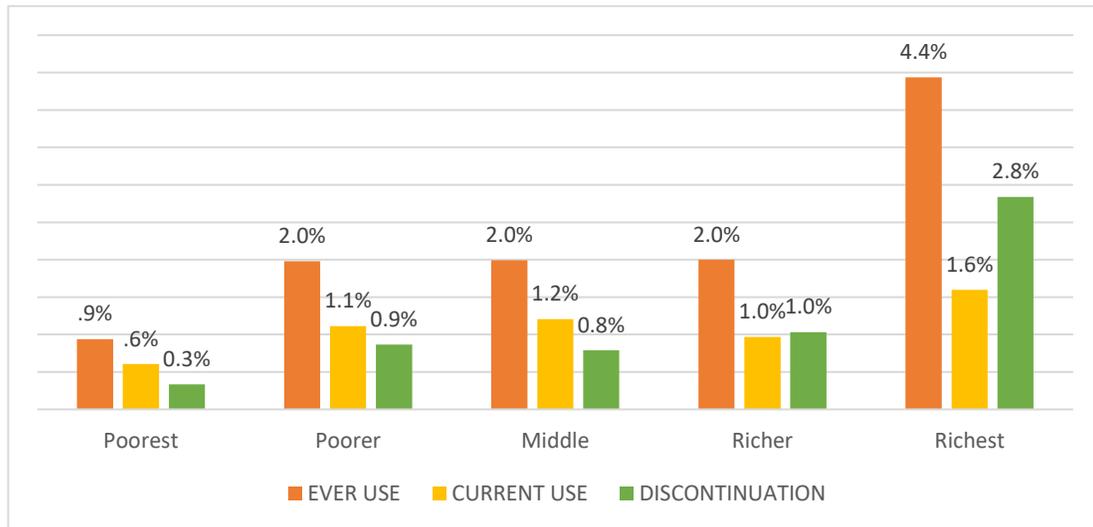
Figure 54 Contraceptive discontinuation - IUD/PPIUD - by wealth quintile

Figure 54 shows the IUD/PPIUD discontinuation according to wealth quintile. The use and discontinuation rates are seen to be increasing with better wealth quintile.

Reasons for discontinuation – NITI Aayog's 30 districts

Cross tabulation of reasons for discontinuation with various before mentioned groups of aspirational districts revealed the distribution of reasons given by currently married women for discontinuing the last method they used.

Figure 55 to 58 depict the top 10 reasons for last method discontinuation versus the last method discontinued. and their percentages for NITI Aayog's 30 districts.
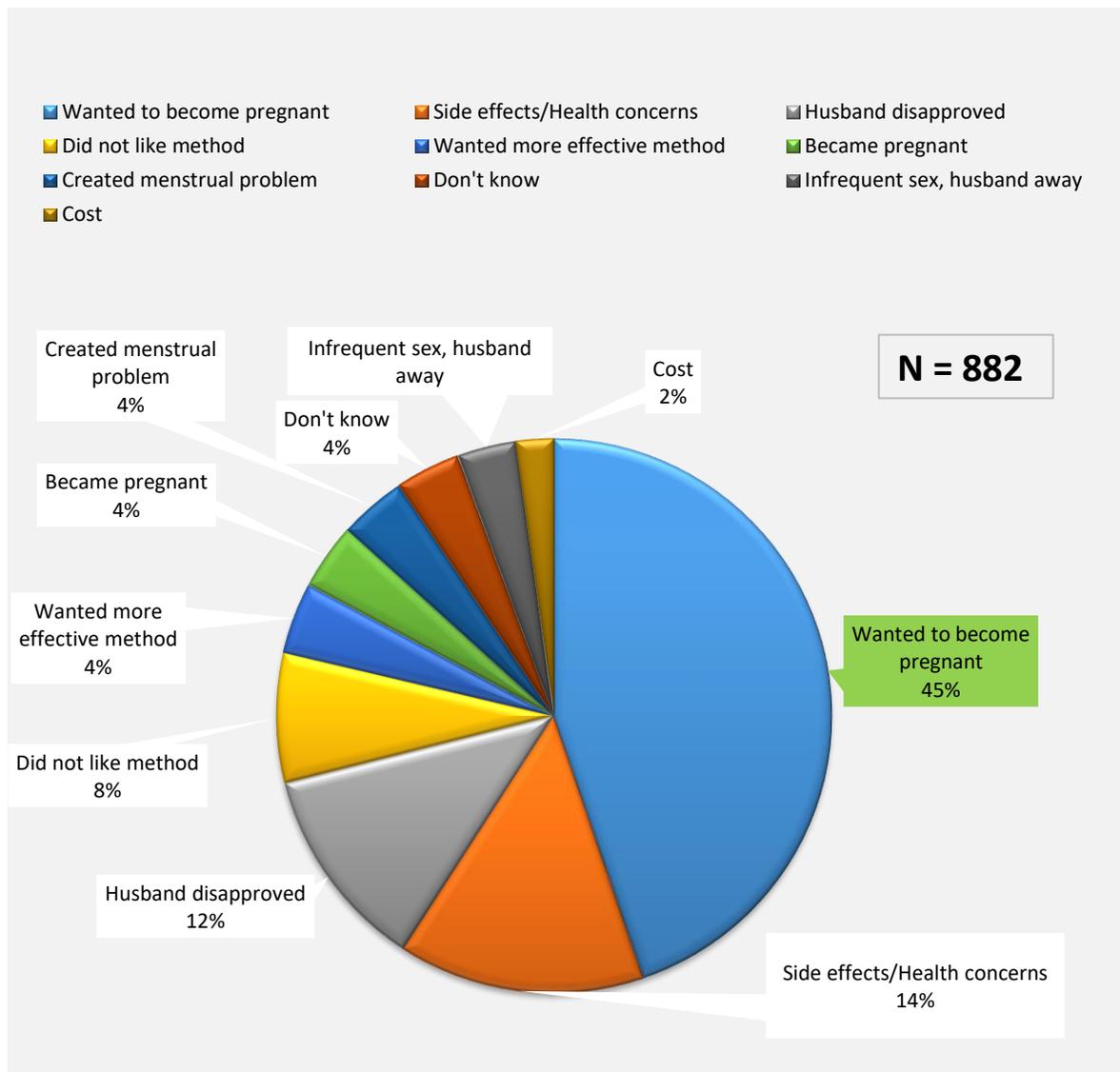
Figure 55 Reasons for discontinuation of PILLS

Figure 55 shows the reasons for last pill discontinuation in the 30 districts picked by NITI aayog. The top 4 reasons are wanting to become pregnant (45%), side effects/health concerns (14%), husband disapproved (12%), did not like the method (8%)
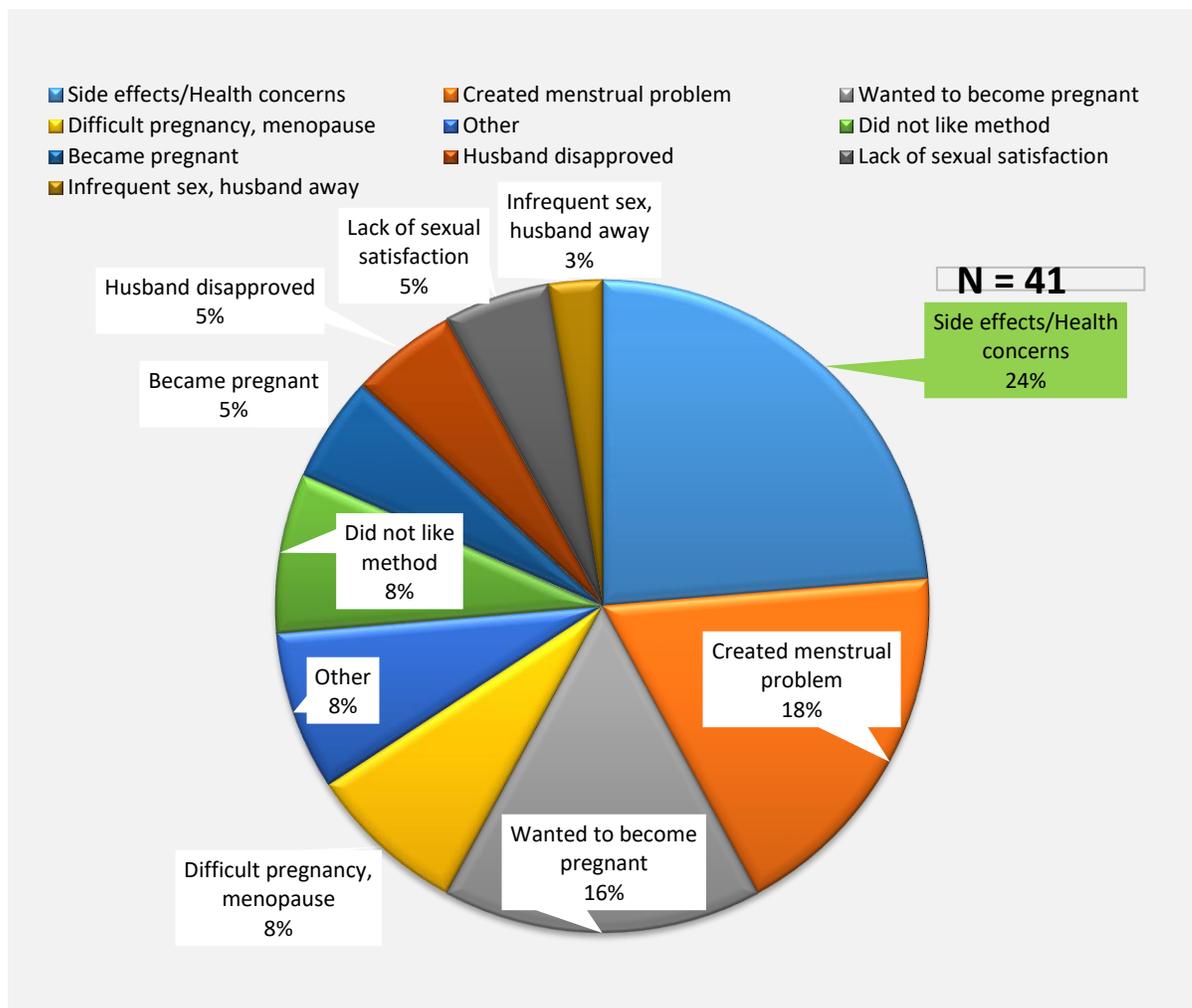
Figure 56 Reasons for discontinuation of IUD/PPIUD

Figure 56 shows the reasons for last IUD/PPIUD discontinuation in the 30 districts picked by NITI aayog. The top 4 reasons are side effects/health concerns (24%), created menstrual problems (18%), wanting to become pregnant (16%) and did not like the method and menopause (8%).
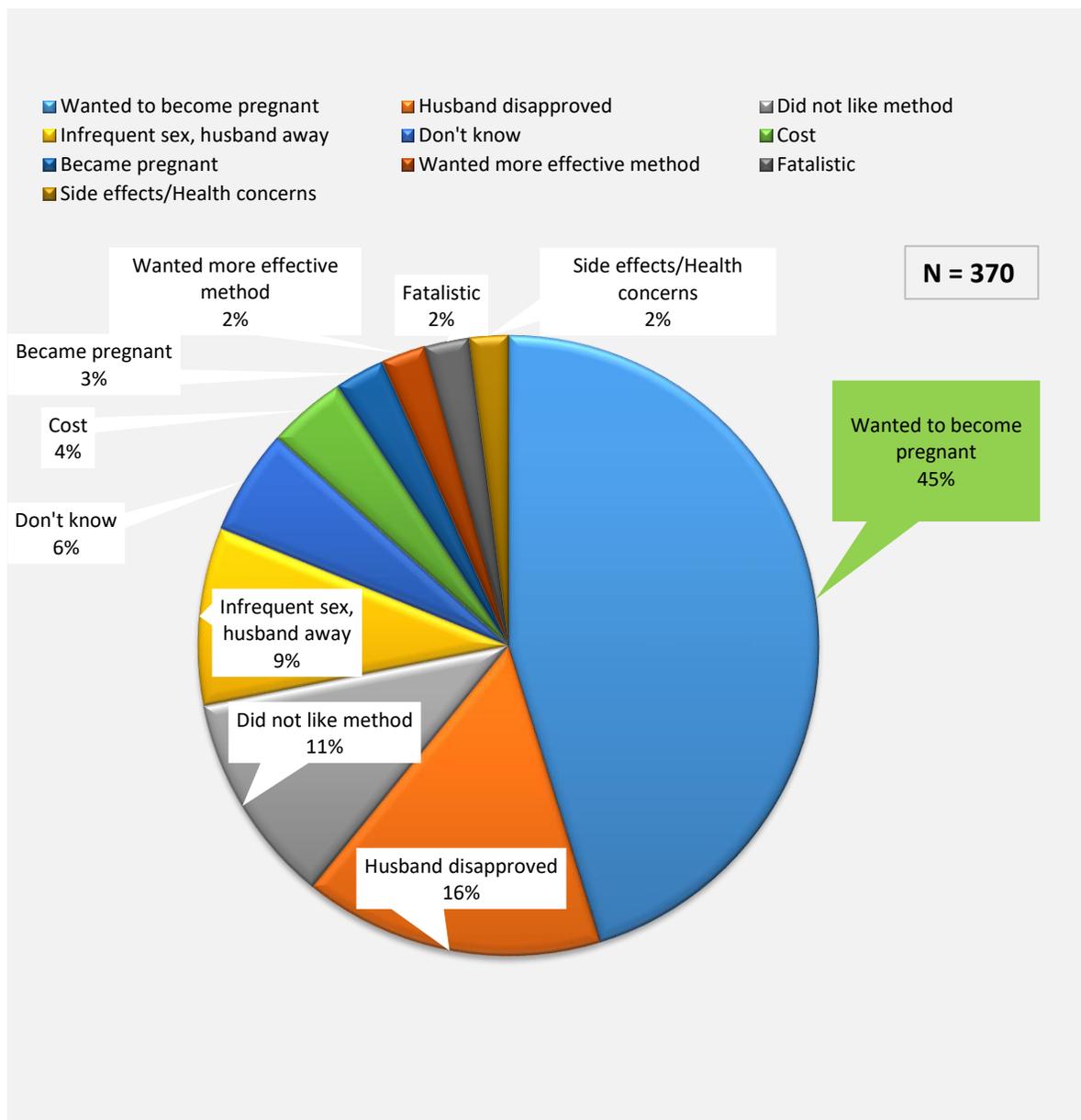
Figure 57 Reasons for discontinuation of CONDOM

Figure 57 shows the reasons for last condom discontinuation in the 30 districts picked by NITI aayog. The top 4 reasons are wanting to become pregnant (45%), husband disapproved (16%), did not like the method (11%) and infrequent sex or husband away (9%).
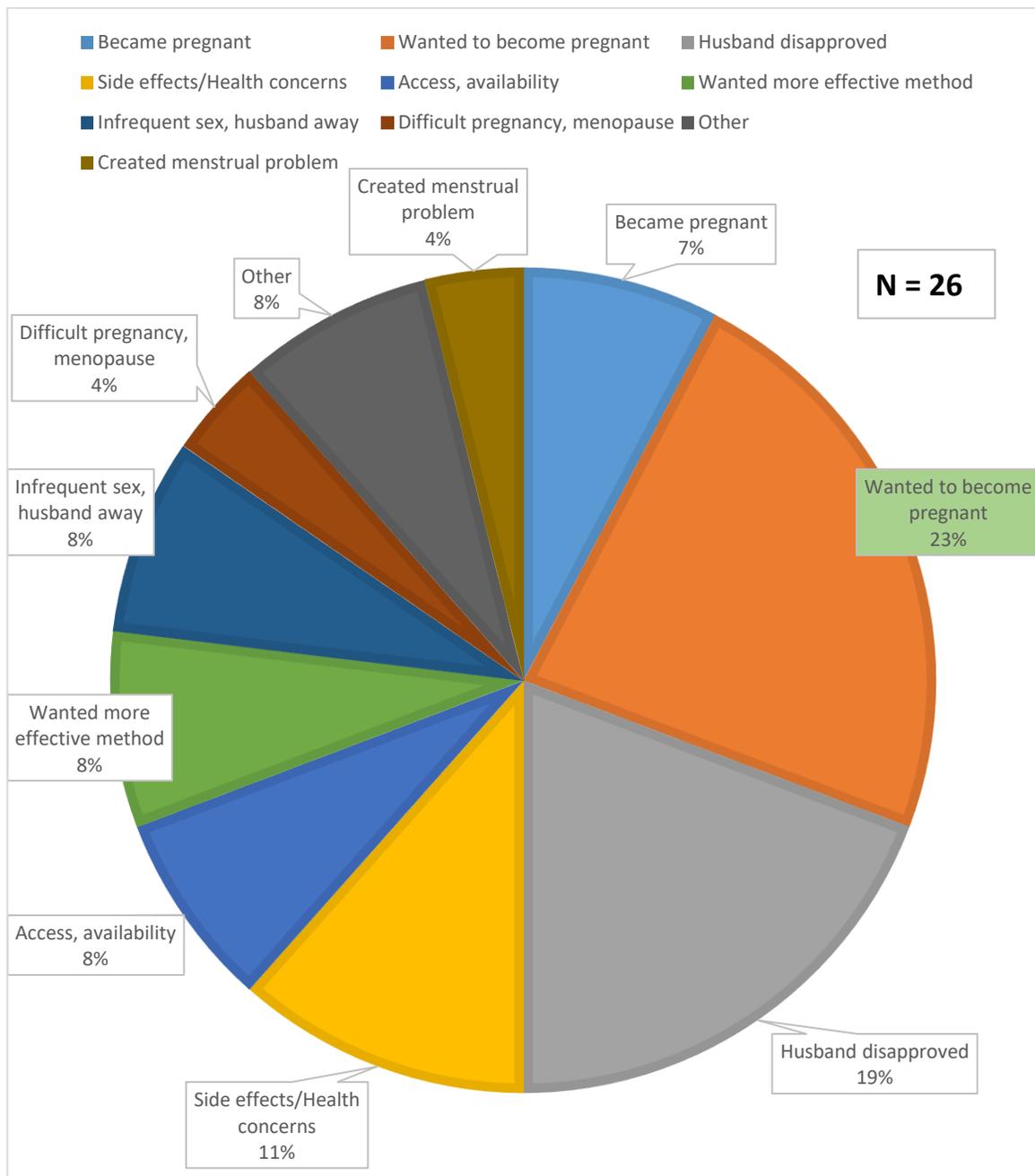
Figure 58 Reasons for discontinuation of INJECTION

Figure 58 shows the reasons for last injection discontinuation in the 30 districts picked by NITI aayog. The top 4 reasons are wanting to become pregnant (23%), husband disapproved (19%), side effects/health concerns (11%), access, availability and need for more effective method (8%)

Reasons for discontinuation – 50 districts by Central ministries

Figure 59 to 62 depict the top 10 reasons for last method discontinuation versus the last method discontinued. and their percentages for Central Ministries' 50 districts.
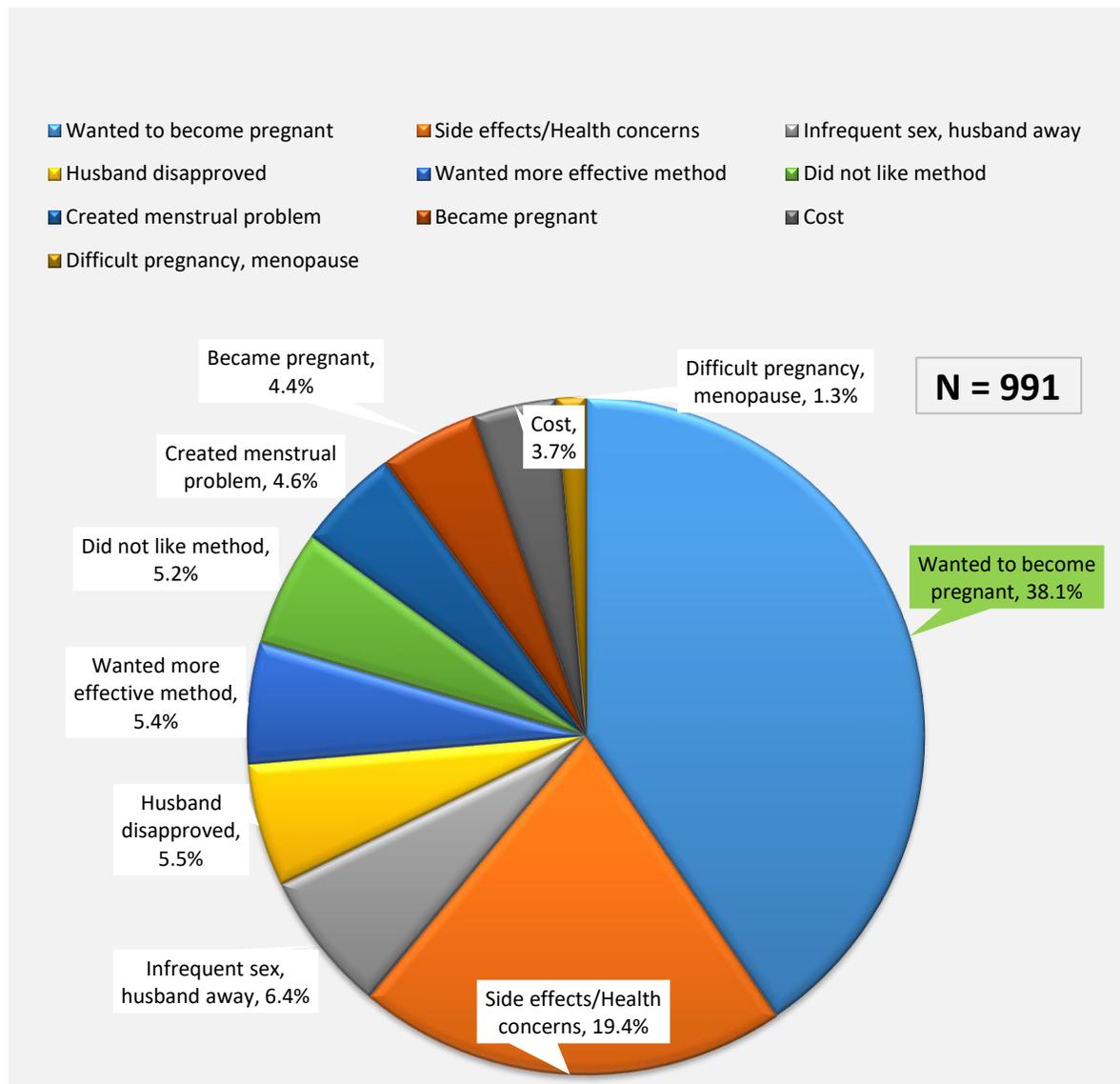
Figure 59 Reasons for discontinuation of PILLS

Figure 59 shows the reasons for last pill discontinuation in the 50 districts picked by central ministries of GoI. The top 4 reasons are wanting to become pregnant (38.1%), side

effects/health concerns (19.4%), infrequent sex, husband away (6.4%) and husband disapproved (5.5%).
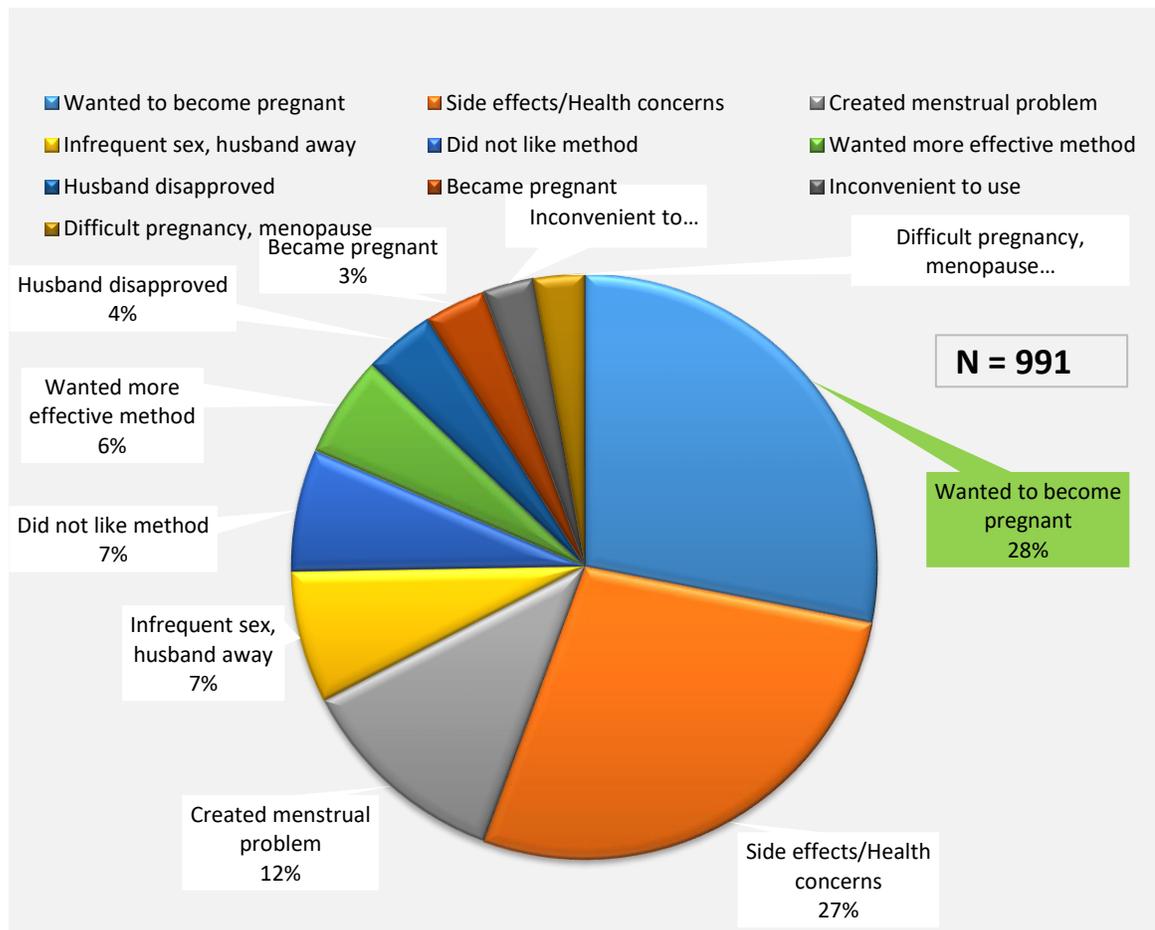
Figure 60 Reasons for discontinuation of IUD/PPIUD

Figure 60 shows the reasons for last IUD/PPIUD discontinuation in the 50 districts picked by central ministries of GoI. The top 4 reasons are wanting to become pregnant (28%), side effects/health concerns (27%), created menstrual problems (12%) and infrequent sex, husband away (7%).
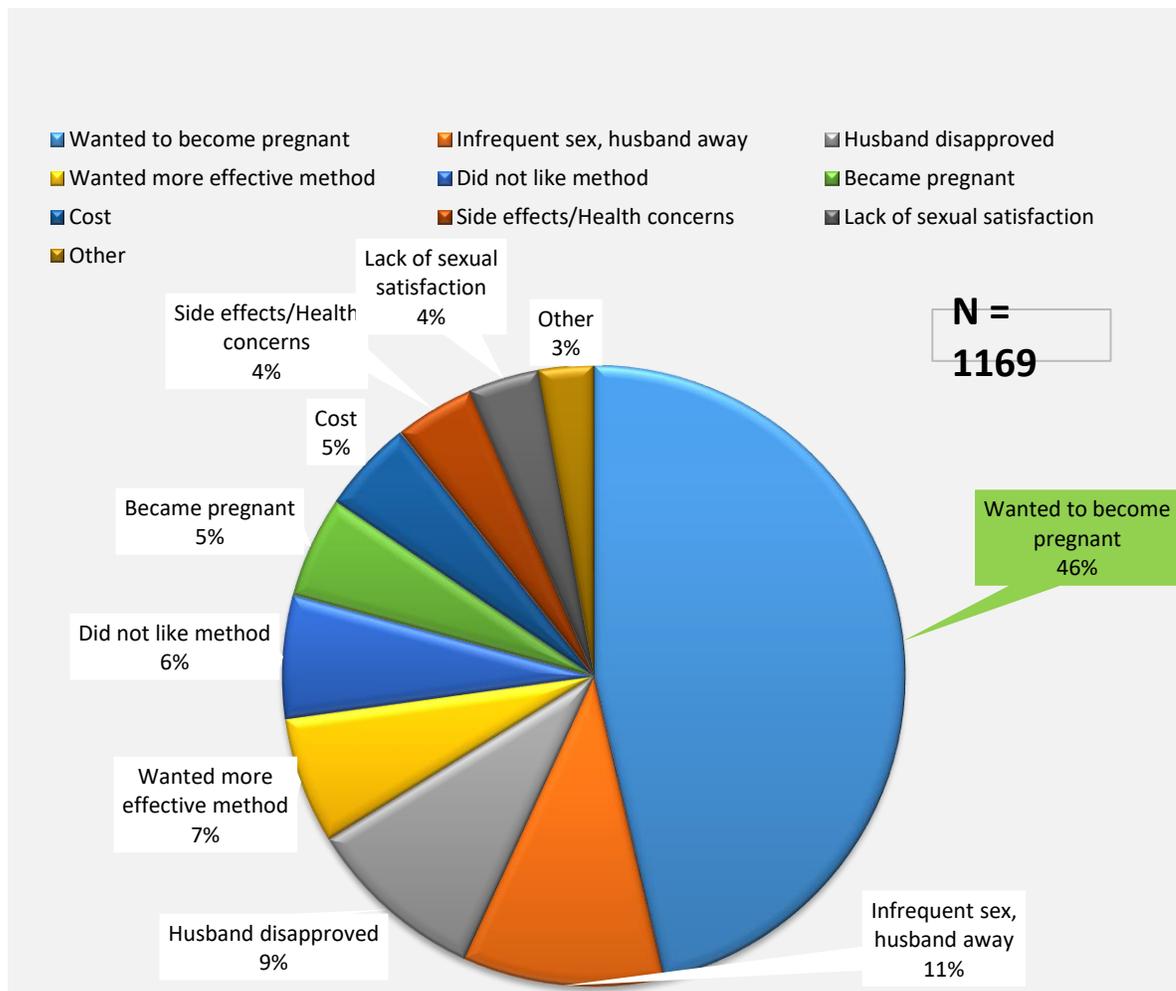
Figure 61 Reasons for discontinuation of CONDOM

Figure 61 shows the reasons for last condom discontinuation in the 50 districts picked by central ministries of GoI. The top 4 reasons are wanting to become pregnant (46%), infrequent sex, husband away (11%), husband disapproved (9%) and wanted more effective method (7%).
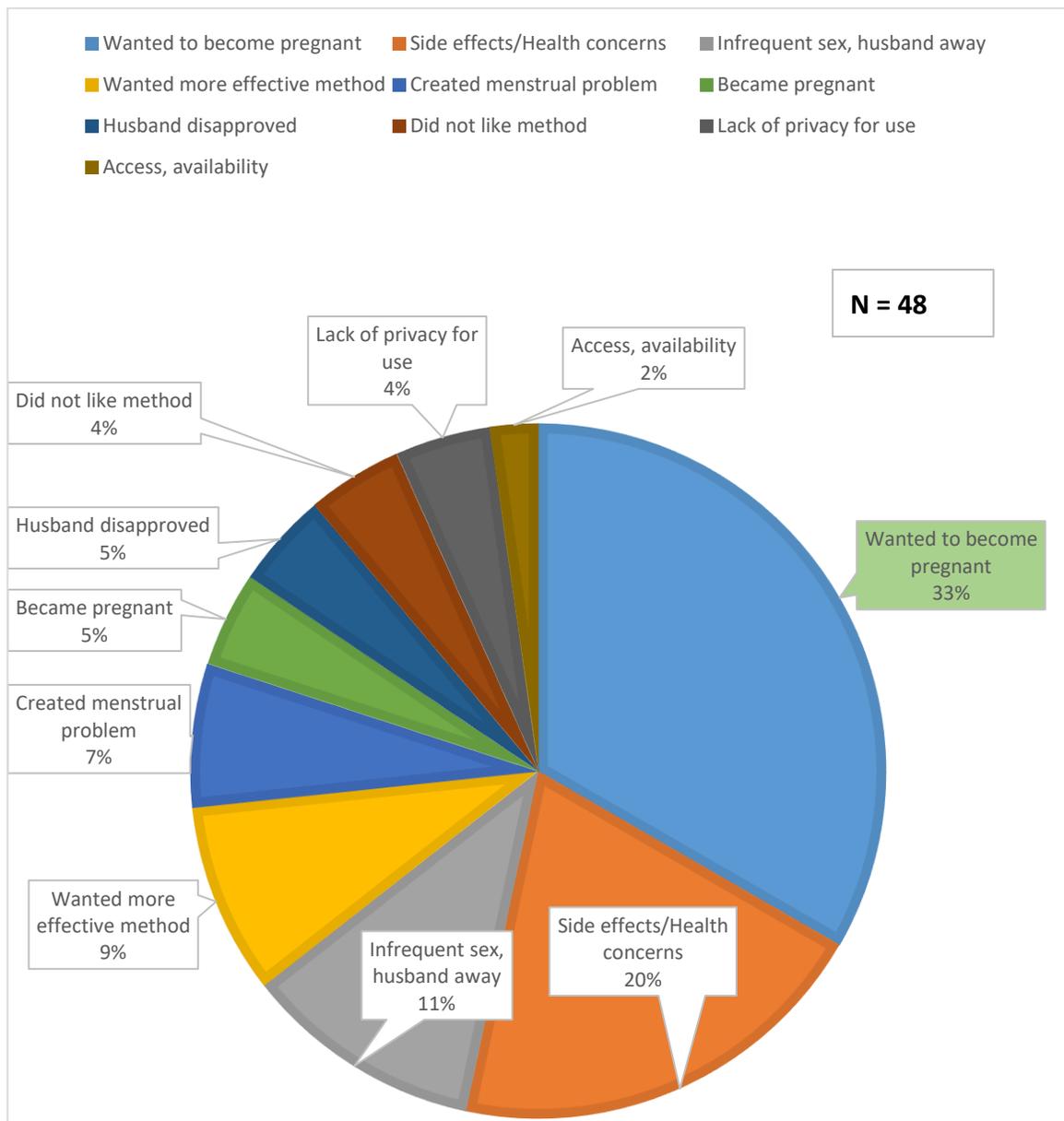
Figure 62 Reasons for discontinuation of INJECTION

Figure 62 shows the reasons for last injection discontinuation in the 50 districts picked by central ministries of GoI. The top 4 reasons are wanting to become pregnant (33%), side effects/health concerns (20%), infrequent sex, husband away (11%) and wanted more effective method (9%).

Reasons for discontinuation – 35 districts by Ministry of Home Affairs

Figure 63 to 66 depict the top 10 reasons for last method discontinuation versus the last method discontinued. and their percentages for MHA's 35 districts.
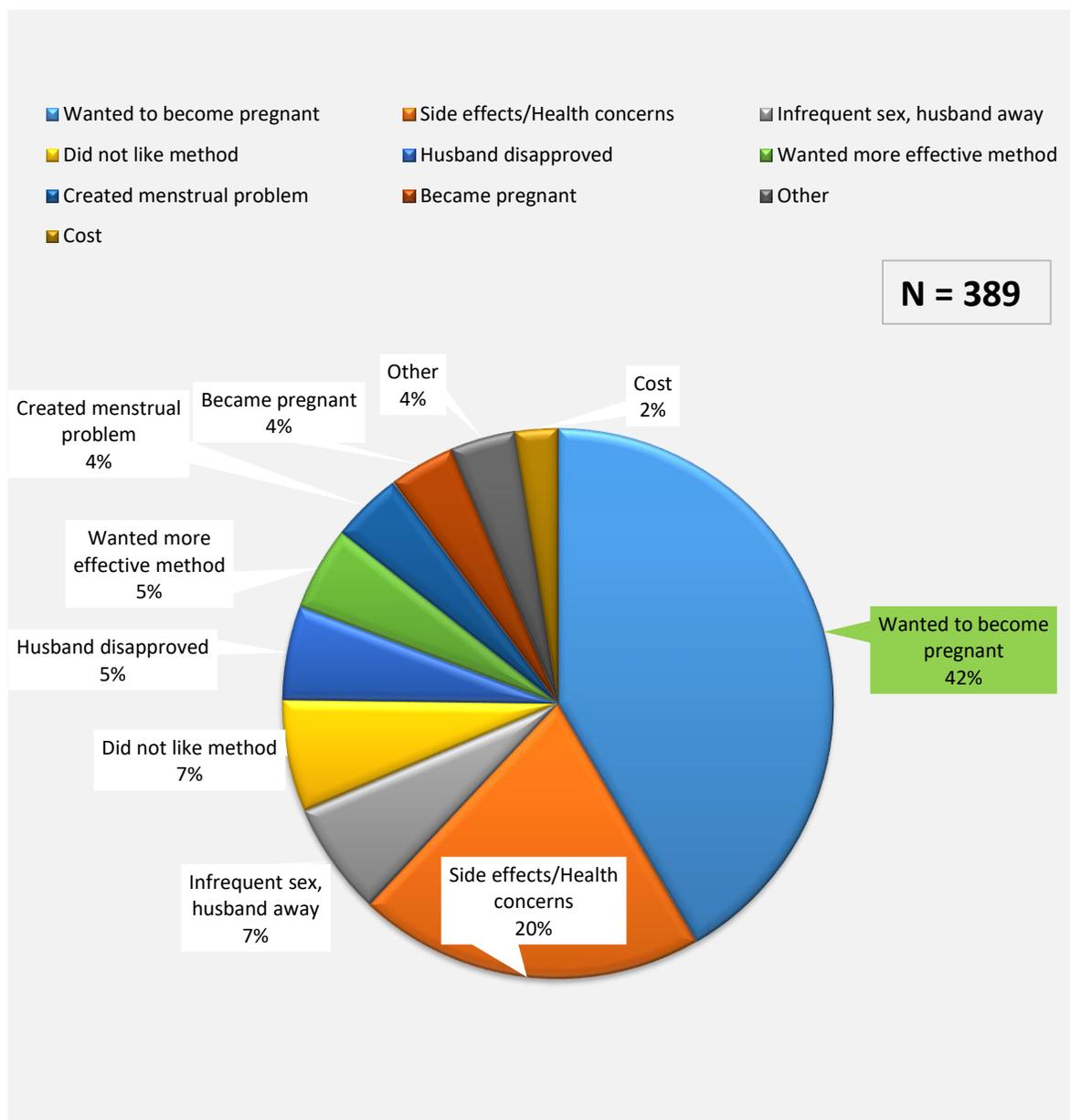
Figure 63 Reasons for discontinuation of PILLS

Figure 63 shows the reasons for last pill discontinuation in the 35 districts picked by ministry of home affairs. The top 4 reasons are wanting to become pregnant (42%), side effects/health concerns (20%), infrequent sex, husband away (7%) and wanted more effective method (7%).
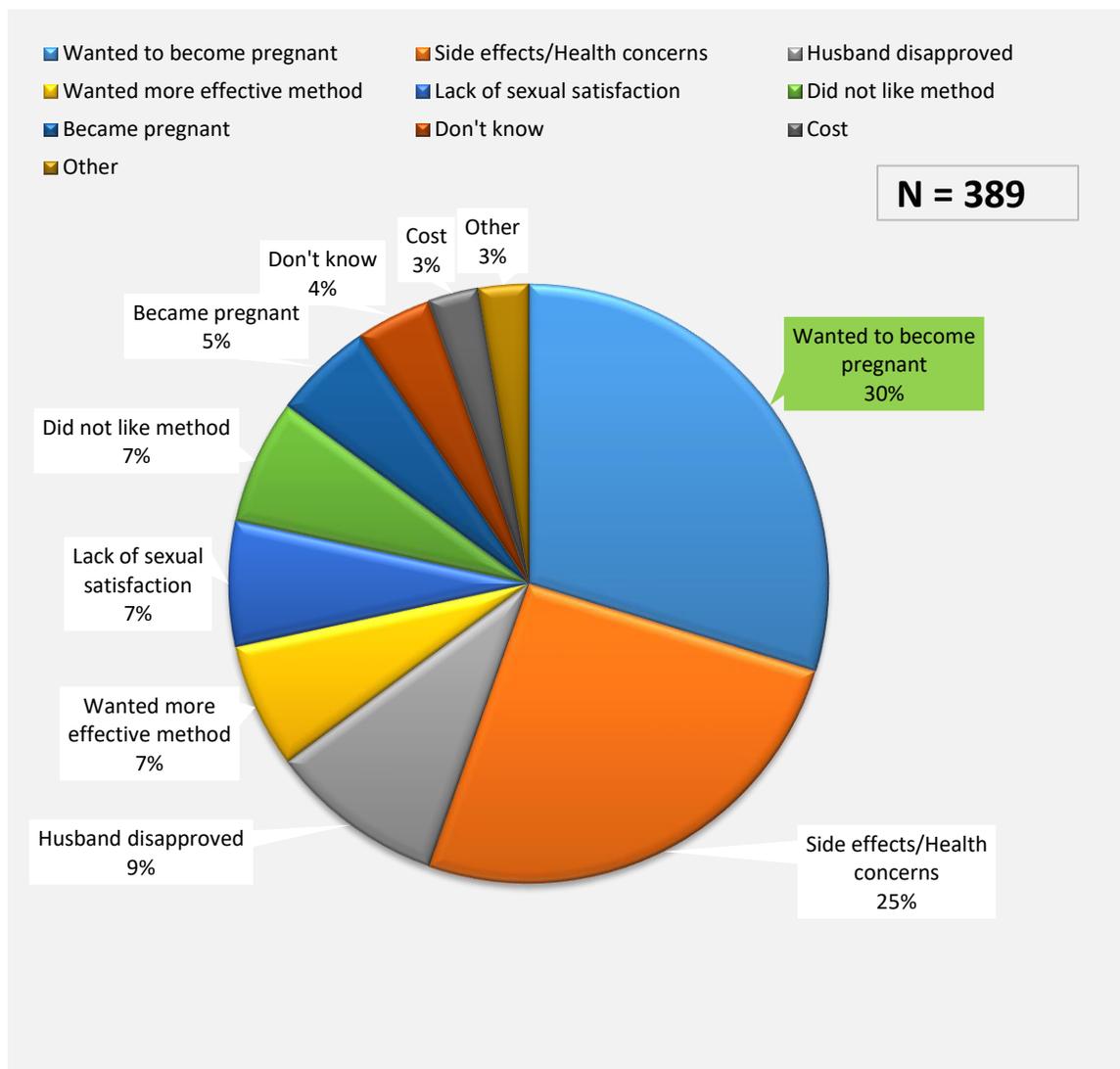
Figure 64 Reasons for discontinuation of IUD/PPIUD

Figure 64 shows the reasons for last IUD/PPIUD discontinuation in the 35 districts picked by ministry of home affairs. The top 4 reasons are wanting to become pregnant (30%), side effects/health concerns (25%), infrequent sex, husband disapproved (9%) and wanted more effective method (7%).
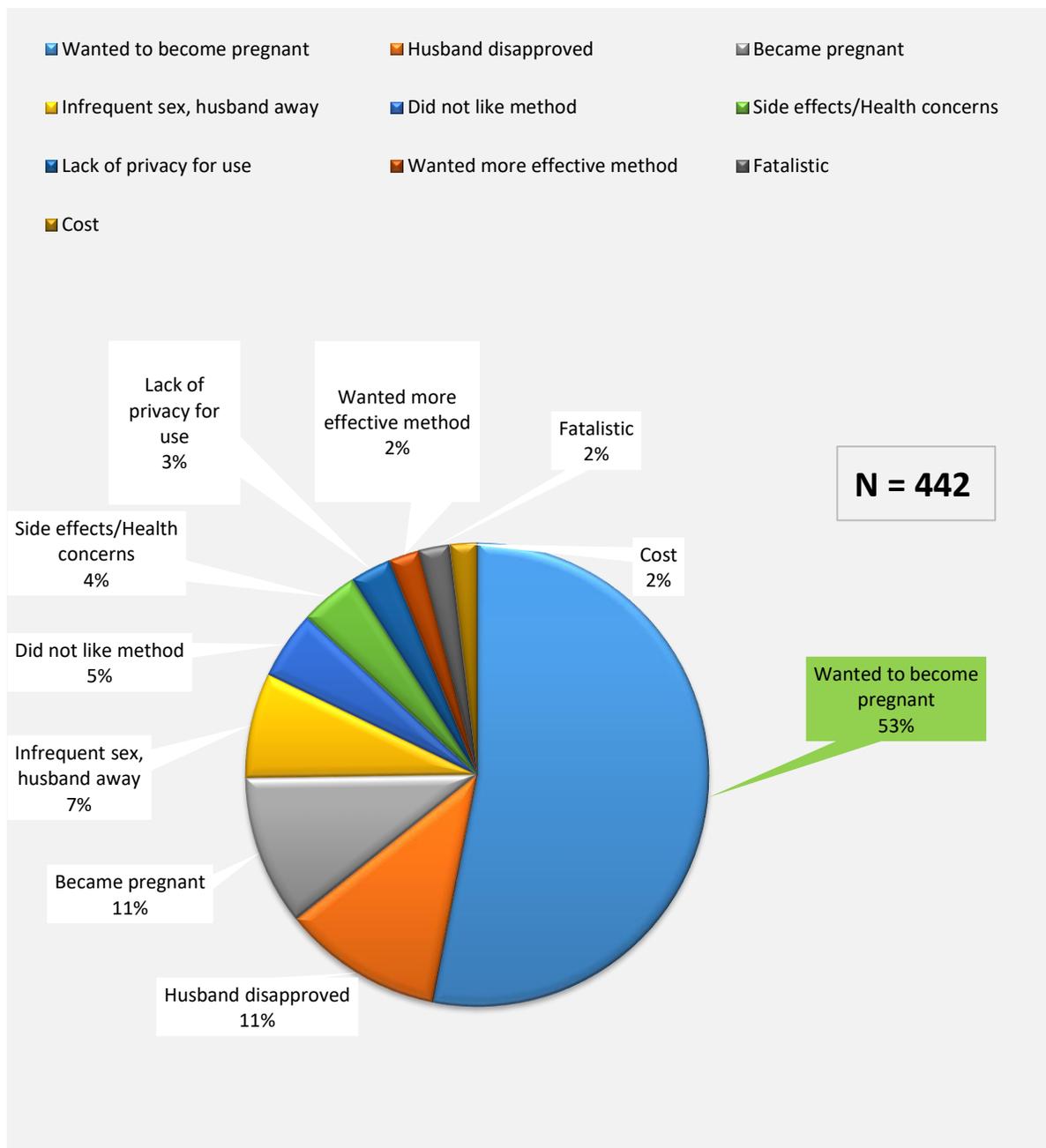
Figure 65 Reasons for discontinuation of CONDOM

Figure 65 shows the reasons for last condom discontinuation in the 35 districts picked by ministry of home affairs. The top 4 reasons are wanting to become pregnant (53%), husband disapproved (11%), became pregnant (11%) and infrequent sex, husband away (7%).
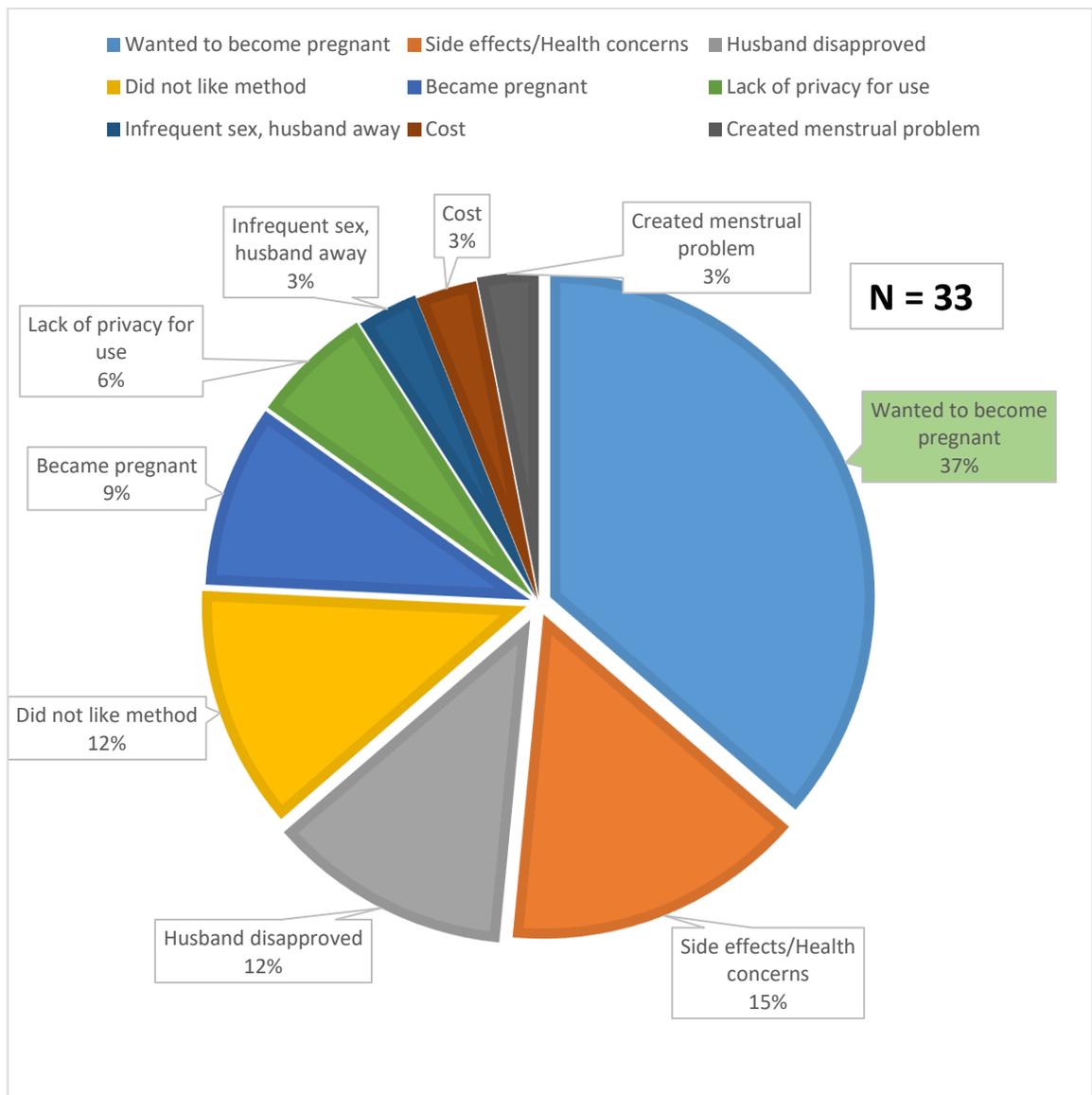
Figure 66 Reasons for discontinuation of INJECTION

Figure 66 shows the reasons for last Injection discontinuation in the 35 districts picked by ministry of home affairs. The top 4 reasons are wanting to become pregnant (37%), side effects/health concerns (15%), husband disapproved (12%) and did not like the method (12%).

The data tables for the state wise discontinuation, district wise discontinuation and group wise discontinuation is given in the apppendix.

5   Discussion

In case of 30 districts selected by NITI aayog, the prior use, the current use and subsequently the discontinuation rates of pill, condom and IUDs, showed consistent association with the age, education, place of residence and wealth quintile. Similar results were seen in case of 50 districts selected by Central ministries of GoI and 35 districts selected by ministry of home affairs. So, it can be said that in all the aspirational districts, use of contraceptives and their discontinuation is associated with socio economic differentials.

The most common reasons for discontinuation of contraceptives were found to be wanting to become pregnant, side effects/health concerns, husband disapproved, did not like the method, infrequent sex or husband away and wanted more effective method.

Contraceptive discontinuation according to various age groups of 15-24 years, 25-34 years and 35-49 years shows that prior use of contraceptives, current use and subsequently the discontinuation rates can be seen to be increasing with an increase in age. Age from 15 to 34 years is usually the age when women get married and usually want to have children, which was seen to be the most common reason for discontinuation of contraceptives. After 35 years of age, wanting to get pregnant is usually not the criteria, hence the decreased discontinuation rates in that age group. Also, there is a possibility that after 35 years, they prefer a more permanent method for family planning, such as sterilization.

Contraceptive discontinuation according to highest education attainment in the groups of no education at all, primary education, secondary education and higher than secondary education (college level and above) showed that the ever use of pills as a contraceptive, current use and subsequently the discontinuation rates of contraception can be seen to be increasing with an increase in education up to secondary education level. However, in some places, higher than

secondary education show a decline in the usage and the discontinuation rate of pills as a contraceptive. This can be attributed to the increase in awareness and knowledge being more after the higher than secondary education level (college level).

The discontinuation of contraceptive methods by place of residence depicts that prior use, current use and subsequently the discontinuation rates were seen to be more in urban areas in comparison to rural areas. The less use of contraceptives can be related to less awareness and hence the husband disapproving of contraceptive methods and side effects and health concerns in rural areas. Also, the husband being away or infrequent sex can also be the reason, as the earning men in the house have to migrate to urban areas for work.

The Contraceptive discontinuation according to the caste showed that schedule caste, schedule tribe and other backward classes (the under privileged sections of the society) have very less use of contraceptive methods to start with. The others including the general category and the ones who did not know their caste, had much more usage and discontinuation rates.

The contraceptive discontinuation did not show any pattern of association with the number of living children at first use of the contraceptive method.

The wealth quintile and contraceptive discontinuation showed association in way that showed the use and discontinuation rates are seen to be increasing with better wealth quintile. Also, the usage and discontinuation is very low in poorest and the poorer sections and high in richer and richest section. Though in some places, the poorer, middle and richer people have similar contraceptive use and discontinuation.

6   Conclusion

➢ The usage of contraceptives and subsequently the discontinuation rates were associated with socio economic differentials.

➢ With increase in age, educational attainment and wealth quintile, the usage of contraceptives increased and subsequently, so did the discontinuation. Although, Higher than secondary education meant slight decrease in contraceptive discontinuation.

➢ In terms of place of residence, the usage and discontinuation rates were more in urban and lesser in rural areas.

➢ Scheduled Caste, schedule Tribe and other backwards class had very less usage of contraceptives and discontinuation rates.

➢ Major reason for discontinuation observed, in various groups of aspirational districts were

>   ➢ Need to become pregnant,

>   ➢ Health related concerns or side effects (and menstrual problems for IUD),

>   ➢ husband disapproved (for male condom),

>   ➢ husband being away/infrequent sex,

>   ➢ Wanted more effective method.

7   Recommendations

❑ Good quality family planning services along with counselling services must be provided with an equitable distribution. The improvement of quality of family planning services will further include follow up visits, for at least a few months initially.

❑ It should be insisted that the couple comes for counselling rather than only women. Also, They must be informed about the risk of unintended pregnancies leading to unwanted births and induced abortions.

❑ The counselling must be increased to promote birth spacing and for users of spacing methods. Also, the socio economic effect of having more than children must be mentioned.

❑ During counselling, the eligible couples must be given a basket of choices for family planning methods, told about each method, their side effects and benefits. The health care providers or the counselling provider must understand the fear of users about any health concerns they might have and reassure them.

❑ Motivating traditional method users to use modern spacing methods

❑ The quality of the contraceptive pills and IUDs must be monitored; and

❑ The provisioning of condoms and IUDs at various public health facilities must be increased.

8   Appendix

Table 1 Contraception discontinuation rates - By Caste (NITI Aayog's 30 districts)

	SC	ST	OBC	Others	SC	ST	OBC	Others	SC	ST	OBC	Others	SC	ST	OBC	Others
	Condom				**Pill**				**IUD**				**inj.**			
Chitrakoot	3.3	0.0	3.4	2.7	2.2	0.0	2.9	4.1	0.0	0.0	0.0	1.4	0.0	0.0	0.0	0.0
Bahraich	0.5	3.4	4.8	7.4	1.4	2.2	3.0	2.0	1.9	0.0	0.4	1.1	0.0	0.0	0.5	0.0
Shrawasti	1.3	0.0	3.6	5.7	1.3	0.0	3.1	1.2	0.0	0.0	1.0	0.0	0.0	0.0	0.0	0.0
Balrampur	2.2	0.0	1.8	1.2	2.2	0.0	1.3	3.1	0.0	0.0	0.5	0.0	1.5	0.5	0.5	0.6
Sonbhadra	3.5	0.8	1.3	6.6	0.7	0.0	1.0	1.6	0.0	0.0	0.0	1.6	0.0	0.0	0.0	0.0
Sitamarhi	1.1	0.1	1.7	3.7	1.1	0.0	1.7	2.8	0.4	0.0	0.1	1.4	0.7	0.0	0.4	0.9
Araria	0.5	0.0	0.7	1.6	0.5	0.0	2.2	3.2	1.0	0.0	0.0	0.0	0.0	0.0	0.9	0.0
Katihar	2.5	1.3	0.7	1.6	2.5	0.0	0.9	1.0	0.0	1.3	0.0	0.0	0.0	1.3	0.3	0.5
Begusarai	0.0	0.0	0.4	0.5	1.6	0.0	1.6	5.0	0.0	0.0	0.1	0.5	0.0	0.0	0.3	0.5
Sheikhpura	2.0	0.0	1.7	0.0	2.0	0.0	3.4	2.6	0.0	0.0	2.5	2.6	0.0	0.0	0.0	0.0
Dhubri	3.6	1.3	0.0	1.8	14.3	16.7	9.5	12.4	0.0	0.0	2.9	0.0	0.0	0.0	0.0	0.0
Goalpara	17.3	2.4	5.0	50.0	27.4	8.5	12.9	57.0	1.7	0.0	1.5	0.5	0.0	0.0	0.0	0.6
Barpeta	8.1	20.0	1.0	6.7	13.6	0.0	3.7	3.2	3.5	7.1	0.0	0.0	0.0	0.0	0.0	0.0
Baksa	0.0	5.6	7.3	4.5	25.6	21.4	26.6	17.9	2.3	1.7	0.8	0.1	0.0	0.0	0.0	0.0
Darrang	11.0	6.3	5.0	1.1	12.6	0.0	6.8	2.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Maldah	6.2	2.7	5.0	6.1	15.6	2.7	15.9	36.8	0.7	0.1	0.8	0.0	0.0	0.0	1.7	0.0
Murshidabad	4.8	0.0	7.8	10.1	10.5	0.0	27.7	71.6	1.0	0.0	0.0	0.9	0.0	0.0	1.4	0.7
Birbhum	4.6	0.0	15.7	6.1	23.0	20.3	23.3	24.7	1.0	0.0	0.0	0.8	0.5	0.0	0.0	0.0
Sahibganj	3.2	0.0	1.5	0.1	12.9	6.3	6.6	3.2	0.0	1.0	0.0	2.0	0.0	0.5	0.3	2.1
Pakur	3.2	1.1	1.0	0.0	3.4	2.9	1.6	11.7	0.0	0.7	0.3	0.0	0.0	0.0	0.0	0.0
Kalahandi	1.7	2.1	2.9	3.9	10.5	11.7	7.3	21.3	0.9	0.0	0.5	60.1	0.0	0.0	0.0	5.9
Rayagada	5.4	4.7	1.2	2.5	10.8	13.0	9.4	11.3	0.9	0.4	0.0	5.5	0.0	0.4	0.0	0.0
Damoh	2.7	4.1	1.5	9.4	5.9	6.2	1.7	2.4	0.0	0.0	0.5	1.2	0.0	0.0	0.0	0.0
Barwani	10.3	3.6	5.2	11.3	1.1	1.6	5.6	7.5	1.1	0.0	4.7	7.5	0.0	0.0	0.0	0.0
Vidisha	0.6	6.9	2.2	12.1	1.7	3.4	3.2	3.5	0.0	0.0	0.0	0.9	0.0	0.0	0.0	0.0
Singrauli	4.3	0.0	0.0	0.0	4.3	0.3	1.0	2.0	0.0	0.0	0.0	2.0	2.2	0.0	0.0	1.0
Khandwa	6.2	1.2	7.2	14.4	4.1	2.0	8.8	11.1	2.1	0.0	1.3	5.6	0.0	0.0	0.5	2.2
Nandurbar	0.0	1.0	4.4	5.0	12.5	2.5	4.7	0.0	0.0	0.0	4.6	0.0	0.0	0.0	2.3	0.0

Table 2 Contraception discontinuation rates - By Residence (NITI Aayog's 30 districts)

	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural
	Condom		**Pill**		**IUD**		**inj.**	
Chitrakoot	4.1	2.7	4.1	2.7	0.0	0.7	0.0	0.3
Bahraich	13.6	2.7	2.7	2.1	1.8	0.6	0.0	0.3
Shrawasti	7.7	3.0	7.7	2.2	0.0	0.8	0.0	0.3
Balrampur	3.4	1.7	5.2	1.5	0.0	0.3	3.4	0.5
Sonbhadra	5.1	1.8	0.0	0.6	0.0	0.2	0.0	0.0
Sitamarhi	1.9	1.7	0.0	1.8	0.0	0.5	1.9	0.3
Araria	1.6	0.7	4.6	1.9	1.6	0.0	1.6	0.5
Katihar	1.1	1.1	6.6	0.5	0.0	0.1	0.0	0.6
Begusarai	0.9	0.3	3.3	1.9	0.5	0.2	0.5	0.2
Sheikhpura	2.6	1.2	2.5	2.4	2.4	1.2	0.1	0.0
Dhubri	2.3	1.3	12.2	8.6	1.5	0.3	0.0	0.0
Goalpara	0.0	4.9	1.1	12.3	2.4	0.8	0.0	0.2
Barpeta	11.0	4.6	9.2	6.0	0.0	0.7	0.0	0.0
Baksa	0.0	4.7	16.1	20.6	0.0	1.2	0.0	0.0
Darrang	5.1	2.4	2.9	8.9	0.2	0.0	0.0	0.0
Maldah	9.0	4.9	28.2	14.4	1.3	0.4	0.0	0.4
Murshidabad	16.2	5.8	14.4	24.0	1.2	0.5	0.8	0.5
Birbhum	14.4	5.2	32.8	21.7	0.0	0.6	0.0	0.2
Sahibganj	4.3	0.8	3.3	7.1	0.0	0.6	0.0	0.5
Pakur	0.0	1.2	6.0	2.2	0.0	0.7	0.0	0.0
Kalahandi	7.8	2.2	25.0	8.8	6.3	0.6	3.1	0.2
Rayagada	2.4	4.8	10.8	11.5	1.2	0.5	0.0	0.2
Damoh	2.1	2.7	4.2	2.7	1.0	0.1	0.0	0.0
Barwani	11.3	3.9	6.3	1.8	6.3	0.6	0.0	0.0
Vidisha	3.3	2.6	2.8	3.0	1.2	0.0	0.0	0.0
Singrauli	1.9	0.0	3.2	0.9	0.6	0.3	1.9	0.0
Khandwa	14.5	3.6	17.3	3.5	3.5	0.6	1.2	0.3
Nandurbar	0.0	1.7	3.3	2.9	6.7	0.8	0.0	0.0

Table 3 Contraception discontinuation rates - By Education (NITI Aayog's 30 districts)

	No education	Primary	Secondary	Higher	No education	Primary	Secondary	Higher	No education	Primary	Secondary	Higher	No education	Primary	Secondary	Higher
	Condom				Pill				IUD				inj.			
Chitrakoot	2.2	4.1	4.4	0.0	2.2	2.0	4.4	4.2	0.0	0.0	1.1	0.0	0.0	0.0	0.0	0.0
Bahraich	1.5	6.3	12.0	2.0	1.4	2.1	6.6	0.0	0.7	1.4	0.0	0.0	0.4	0.0	0.0	0.0
Shrawasti	3.6	2.4	2.0	0.0	1.4	4.9	5.8	0.0	0.4	2.4	0.0	0.0	0.4	0.0	2.0	0.0
Balrampur	1.4	2.1	1.9	5.5	1.6	0.0	3.8	0.3	0.2	0.0	0.0	5.5	0.6	1.1	0.9	0.0
Sonbhadra	1.9	1.2	4.5	2.5	0.0	2.3	0.6	0.0	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.0
Sitamarhi	0.9	2.1	3.1	13.0	1.6	1.7	1.6	0.0	0.4	0.0	1.2	0.0	0.1	1.2	0.0	4.5
Araria	0.7	0.5	1.8	0.0	1.7	3.6	1.4	0.0	0.0	0.0	0.5	0.0	0.3	1.0	0.9	0.0
Katihar	0.6	0.0	2.2	6.6	0.5	1.3	2.2	3.3	0.2	0.0	0.0	0.1	0.6	1.3	0.0	0.0
Begusarai	0.2	0.8	0.3	1.4	1.0	3.9	2.5	10.0	0.0	0.0	0.3	1.4	0.2	0.8	0.3	0.0
Sheikhpura	0.0	3.6	3.2	14.3	2.7	3.6	1.6	0.0	1.8	0.0	1.6	0.0	0.0	0.0	0.0	0.0
Dhubri	1.5	1.8	0.9	5.6	8.9	6.9	9.7	8.2	0.0	0.9	0.7	0.1	0.0	0.0	0.0	0.0
Goalpara	2.6	3.9	5.8	3.3	10.0	17.5	9.8	3.3	0.0	0.8	1.2	0.0	0.5	0.0	0.0	0.0
Barpeta	4.9	5.8	5.1	2.3	7.9	3.9	6.6	0.0	0.8	1.9	0.4	0.0	0.0	0.0	0.0	0.0
Baksa	5.3	3.8	5.0	5.9	21.0	21.8	21.0	11.8	1.2	1.2	1.5	0.0	0.0	0.0	0.0	0.0
Darrang	1.1	1.1	3.6	5.3	10.5	4.4	8.7	8.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Maldah	1.7	5.6	7.4	15.0	12.1	21.0	16.7	17.6	0.0	0.7	0.5	0.0	0.0	0.7	0.9	0.0
Murshidabad	4.0	6.6	9.7	28.9	27.9	21.2	19.6	13.2	1.5	0.8	0.2	0.0	0.6	0.0	0.9	0.1
Birbhum	1.8	4.1	10.0	17.4	22.1	22.1	25.2	17.4	1.2	0.0	0.4	0.0	0.6	0.0	0.0	0.0
Sahibganj	0.5	0.0	2.6	11.1	6.6	3.2	7.5	15.5	0.0	1.1	1.6	0.6	0.0	1.1	1.1	0.0
Pakur	1.0	2.5	0.7	4.8	1.7	3.8	2.8	14.3	0.5	0.0	0.7	0.0	0.0	0.0	0.0	0.0
Kalahandi	2.5	0.0	3.7	4.3	9.6	10.9	9.1	24.5	0.0	2.2	2.3	8.7	0.0	0.0	1.4	4.3
Rayagada	3.8	2.0	4.6	8.7	10.5	15.7	12.8	15.4	0.3	0.0	0.9	2.1	0.3	0.0	0.0	0.0
Damoh	2.3	2.3	3.4	0.1	2.8	1.2	4.4	3.6	0.0	0.0	0.6	3.6	0.0	0.0	0.0	0.0
Barwani	2.0	6.8	8.7	21.0	1.3	2.2	5.3	7.0	0.4	2.2	2.4	11.8	0.0	0.0	0.0	0.0
Vidisha	2.0	3.2	4.0	4.8	0.8	4.8	4.4	0.0	0.0	0.0	1.2	0.0	0.0	0.0	0.0	0.0
Singrauli	0.0	1.3	0.5	2.3	0.4	3.7	2.4	2.0	0.0	1.2	0.5	2.0	0.0	0.0	0.5	4.0
Khandwa	2.6	4.7	11.4	17.1	2.9	7.9	10.0	11.4	0.0	1.6	2.6	8.6	0.3	1.1	0.4	0.0
Nandurbar	0.0	0.0	2.6	6.8	2.2	2.6	3.6	16.7	0.0	0.0	1.2	8.3	0.0	0.0	1.2	0.0

Table 4 Contraception discontinuation rates - By Wealth (NITI Aayog's 30 districts)

	Poorest	Poorer	Middle	Richer	Richest	Poorest	Poorer	Middle	Richer	Richest	Poorest	Poorer	Middle	Richer	Richest	Poorest	Poorer	Middle	Richer	Richest
	Condom					Pill					IUD					inj.				
Chitrakoot	2.4	4.7	2.7	8.7	6.7	1.4	4.6	0.0	4.3	13.3	0.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Bahraich	2.6	1.7	9.2	6.5	11.4	1.5	1.3	4.6	8.2	2.7	0.0	2.6	0.0	3.3	0.0	0.4	0.0	0.0	0.0	0.0
Shrawasti	3.4	1.5	3.1	14.3	0.0	1.5	3.1	3.3	14.3	0.0	0.4	1.5	0.0	7.1	0.0	0.4	0.0	0.0	0.0	0.0
Balrampur	0.8	2.1	2.3	5.9	0.2	1.4	1.6	2.3	2.0	0.0	0.3	0.0	1.1	0.0	0.0	0.6	0.0	1.1	2.0	3.0
Sonbhadra	1.9	1.4	0.1	3.0	6.1	0.6	0.0	0.1	0.0	1.0	0.0	0.0	1.8	0.1	0.0	0.0	0.0	0.0	0.0	0.0
Sitamarhi	0.9	3.0	1.9	8.5	0.0	1.1	3.4	2.9	0.2	0.0	0.4	0.0	0.0	5.2	0.0	0.1	0.3	1.0	3.4	0.0
Araria	0.5	1.1	1.4	0.2	0.0	1.7	3.4	2.8	0.0	0.0	0.0	0.0	1.4	0.0	0.0	0.4	1.1	0.0	3.4	0.0
Katihar	0.5	1.0	7.5	1.5	0.0	0.5	0.5	1.3	4.8	9.1	0.2	0.0	0.0	0.0	0.0	0.6	0.5	0.0	0.0	0.0
Begusarai	0.3	0.0	0.5	1.4	0.0	1.4	2.6	2.1	5.5	6.1	0.0	0.0	0.5	0.0	3.0	0.4	0.0	0.5	0.0	0.0
Sheikhpura	1.4	0.0	0.0	8.0	0.0	2.9	1.4	2.9	0.2	0.0	1.4	0.0	5.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Dhubri	2.2	0.8	0.0	1.9	4.2	10.7	5.8	11.0	14.0	8.0	0.0	0.2	1.4	1.0	0.1	0.0	0.0	0.0	0.0	0.0
Goalpara	2.2	4.9	4.9	8.2	0.0	6.8	14.3	12.5	10.0	2.6	0.6	1.1	1.6	0.1	3.3	0.5	0.0	0.0	0.0	0.0
Barpeta	5.1	5.3	5.9	3.8	12.7	7.4	6.0	6.5	5.9	0.7	1.3	0.2	0.0	0.8	0.0	0.0	0.0	0.0	0.0	0.0
Baksa	3.3	5.6	3.5	6.3	0.0	18.8	21.7	19.5	27.7	10.3	0.0	1.9	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Darrang	1.1	3.3	3.3	2.0	12.5	8.6	7.5	11.3	7.0	6.7	0.0	0.0	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.0
Maldah	3.2	7.4	3.5	5.0	15.0	11.8	17.4	16.4	21.4	30.0	0.8	0.0	0.8	1.6	0.0	0.0	0.0	0.8	3.2	0.0
Murshidabad	5.2	6.9	9.4	9.9	21.3	25.7	21.7	20.6	21.6	9.1	1.1	0.7	0.0	0.6	0.0	0.7	0.2	0.7	1.2	0.1
Birbhum	1.4	5.4	9.0	11.4	32.1	20.8	23.8	23.4	29.1	22.1	0.0	0.6	0.0	1.3	0.0	0.5	0.0	0.0	0.0	0.0
Sahibganj	0.0	0.6	3.7	3.9	16.7	7.1	5.6	3.7	9.8	16.7	0.5	0.0	1.2	2.0	0.0	0.8	0.0	0.0	0.0	0.0
Pakur	1.2	0.8	2.2	0.0	8.3	2.3	0.8	4.4	4.3	8.3	0.5	0.8	2.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Kalahandi	2.4	1.3	1.1	5.2	10.5	9.9	8.8	4.4	25.7	24.3	0.6	0.0	3.3	0.1	10.8	0.0	0.0	1.1	0.0	5.4
Rayagada	5.0	4.7	1.8	0.0	3.5	11.6	11.5	8.7	15.4	10.3	0.0	0.7	0.1	0.0	3.7	0.0	0.7	0.0	0.0	0.0
Damoh	1.9	2.6	2.2	2.8	6.1	2.5	2.6	2.9	4.2	7.6	0.0	0.0	0.0	0.0	4.5	0.0	0.0	0.0	0.0	0.0
Barwani	2.6	4.3	6.8	5.9	13.4	1.0	1.4	3.9	3.9	8.2	0.2	0.0	2.9	4.8	6.1	0.0	0.0	0.0	0.0	0.0
Vidisha	2.1	3.3	1.4	5.7	1.8	3.0	2.9	2.7	6.7	0.0	0.0	0.0	0.0	2.9	0.0	0.0	0.0	0.0	0.0	0.0
Singrauli	0.0	0.0	1.4	0.0	2.1	0.4	0.7	2.8	5.7	2.1	0.0	0.0	1.4	0.0	2.1	0.0	0.0	0.0	0.0	3.1
Khandwa	1.1	3.0	5.2	8.3	14.2	1.7	2.1	6.3	11.3	13.5	0.0	0.5	0.6	0.7	6.0	0.0	0.0	1.1	0.0	1.3
Nandurbar	0.0	1.8	3.0	3.7	6.7	2.3	3.5	3.1	7.4	3.4	0.0	0.0	0.0	3.7	10.7	0.0	0.0	0.0	0.0	0.0

Table 5 Contraception discontinuation rates - By Number of living children at 1st use (NITI Aayog's 30 districts)

	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4
	Condom					**Pill**					**IUD**					**inj.**				
Chitrakoot	26.2	28.3	2.0	4.5	0.0	14.3	11.4	8.7	4.7	6.3	0.0	5.9	2.1	2.3	0.0	0.0	0.0	0.0	0.0	0.0
Bahraich	30.2	36.1	25.0	10.5	5.8	32.0	19.4	7.5	5.1	0.0	0.0	0.0	10.2	7.4	3.2	0.0	2.8	0.1	0.0	3.2
Shrawasti	33.3	26.6	50.0	8.3	12.5	33.3	30.8	18.9	6.7	4.2	0.0	7.7	0.0	8.3	0.0	0.0	0.0	0.0	1,7	0.0
Balrampur	23.1	50.0	30.4	20.0	0.0	34.1	23.3	16.1	20.0	50.0	0.0	0.0	0.0	20.0	25.0	7.7	10.0	14.3	20.0	0.0
Sonbhadra	41.7	10.3	7.0	0.0	3.2	0.0	0.0	1.4	1.0	0.0	0.0	3.4	0.0	1.0	0.0	0.0	0.0	0.0	0.0	0.0
Sitamarhi	18.8	14.8	9.8	2.6	0.0	43.8	9.8	4.9	2.6	0.8	0.0	0.0	3.3	1.7	1.7	0.0	1.7	1.7	1.7	0.0
Araria	6.3	11.4	0.1	2.4	1.8	6.3	17.1	3.2	4.1	8.8	0.0	2.9	0.0	0.0	0.0	0.0	8.6	1.6	0.0	1.8
Katihar	50.0	31.9	5.4	0.0	0.0	0.0	11.1	9.1	2.2	0.0	0.0	0.0	0.0	1.1	0.0	0.0	0.0	1.8	0.0	1.4
Begusarai	0.0	4.0	0.1	0.8	1.0	0.0	30.0	18.5	0.8	3.9	0.0	4.0	1.4	0.0	0.0	0.0	4.3	1.4	0.0	1.0
Sheikhpura	0.0	16.7	7.7	0.2	0.0	33.3	16.7	0.6	4.5	7.1	0.0	16.7	6.0	4.5	7.1	0.0	0.0	0.0	0.0	0.5
Dhubri	6.5	2.4	1.5	4.4	1.6	18.2	26.8	14.9	18.3	22.2	2.6	0.0	1.4	0.0	3.2	0.0	0.0	0.0	0.0	0.0
Goalpara	21.7	9.7	2.3	0.0	5.0	25.5	24.2	13.5	23.3	17.6	6.5	0.8	1.3	0.1	0.2	0.0	0.0	0.0	0.0	5.0
Barpeta	2.9	15.9	4.6	8.9	0.0	13.8	13.4	7.9	6.9	7.4	0.0	1.4	0.5	2.4	0.0	0.0	0.0	0.0	0.0	0.0
Baksa	14.3	8.0	3.9	2.9	8.0	64.3	29.4	22.8	24.3	16.9	0.0	1.3	2.4	4.4	0.0	0.0	0.0	0.0	0.0	0.0
Darrang	2.9	6.0	2.4	1.4	0.0	22.0	15.6	8.6	6.3	3.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Maldah	13.8	11.5	2.5	1.6	3.1	21.9	29.8	20.3	20.3	15.6	1.0	0.0	1.3	0.0	0.0	2.1	1.0	0.0	0.0	0.0
Murshidabad	9.5	13.7	3.7	0.0	0.0	33.6	34.4	19.9	13.8	17.9	1.2	1.2	0.0	0.0	0.0	1.2	0.4	0.0	0.0	5.4
Birbhum	23.7	6.8	1.8	0.0	5.3	57.6	33.0	11.1	3.6	26.3	0.0	0.5	0.0	1.8	5.3	0.0	0.0	0.0	0.0	0.0
Sahibganj	50.0	2.4	3.8	1.0	1.9	25.0	32.8	16.7	11.0	7.5	0.0	4.9	2.5	0.0	0.0	0.0	4.9	0.0	1.0	0.0
Pakur	0.0	4.4	2.9	0.0	2.7	20.0	9.1	7.0	2.8	5.3	0.0	0.0	0.0	1.4	3.0	0.0	0.0	0.0	0.0	0.0
Kalahandi	23.1	3.6	3.1	1.4	0.0	23.1	15.7	13.0	12.8	8.9	0.0	2.8	0.6	0.7	0.0	0.0	0.8	0.6	0.0	0.0
Rayagada	21.2	5.1	0.0	2.0	0.0	19.7	22.9	6.5	10.4	11.1	1.9	1.3	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.0
Damoh	55.6	18.4	1.7	0.9	0.0	44.4	22.4	2.5	0.9	0.0	0.0	6.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Barwani	57.1	32.4	3.9	3.7	0.0	15.0	16.2	5.9	0.7	2.0	0.0	14.7	2.0	0.8	2.0	0.0	0.0	0.0	0.0	0.0
Vidisha	30.3	14.3	7.9	6.5	3.8	12.0	25.0	7.9	8.3	3.8	0.0	0.0	4.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Singrauli	16.7	8.8	2.7	0.0	0.0	33.3	28.2	2.7	0.0	0.0	0.0	8.0	0.0	0.0	0.0	0.0	8.0	1.3	0.0	0.0
Khandwa	46.5	33.2	2.7	3.0	1.1	36.8	14.9	6.6	3.0	5.8	11.1	4.6	2.2	0.6	0.0	0.0	1.1	1.1	0.0	1.1
Nandurbar	10.0	9.5	0.1	0.1	0.0	18.9	13.4	5.8	0.0	0.0	0.0	9.1	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Table 6 Contraception discontinuation rates - By Age (NITI Aayog's 30 districts)

	15-19	20-24	25-29	30-34	35-39	40-44	45-49	15-19	20-24	25-29	30-34	35-39	40-44	45-49	15-19	20-24	25-29	30-34	35-39	40-44	45-49	15-19	20-24	25-29	30-34	35-39	40-44	45-49
	Condom							Pill							IUD							Inj.						
Chitrakoot	0.0	5.8	4.2	3.9	0.1	2.2	0.0	0.0	1.5	5.6	2.0	5.8	2.3	2.4	0.0	1.5	1.4	0.0	0.0	0.0	0.0	0.0	0.0	1.4	0.0	0.0	0.0	0.0
Bahraich	3.4	1.9	5.7	4.8	3.7	3.9	0.0	0.0	0.0	2.4	3.1	4.7	3.1	1.0	0.0	0.0	0.8	0.9	0.0	0.8	3.0	0.0	0.0	0.4	0.0	1.0	0.0	0.0
Shrawasti	4.3	2.9	4.0	4.3	1.5	2.3	3.1	0.0	1.5	5.4	0.0	4.5	0.1	0.0	0.0	0.0	1.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.4	0.0	0.0	0.0
Balrampur	0.0	1.6	3.2	1.5	1.9	0.0	1.3	0.0	0.0	1.9	3.0	1.9	0.0	4.0	0.0	0.0	0.6	0.0	0.0	0.0	1.3	0.0	0.0	0.0	0.7	2.9	2.2	0.0
Sonbhadra	0.0	2.7	3.5	0.9	2.3	3.9	1.3	0.0	0.9	0.0	0.8	1.1	1.3	0.0	0.0	0.0	0.0	0.0	1.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Sitamarhi	2.1	3.0	2.5	0.5	2.1	0.0	0.8	0.0	2.2	0.7	1.4	2.7	2.4	2.3	0.0	0.0	0.0	0.0	1.1	2.4	0.0	0.0	0.4	1.1	0.0	1.1	0.0	0.0
Araria	0.0	1.1	1.7	0.0	0.6	1.0	0.0	0.0	0.6	2.1	1.2	2.5	4.9	4.7	0.0	0.6	0.0	0.0	0.0	0.0	0.0	0.0	1.1	0.4	1.2	0.6	0.0	1.0
Katihar	5.6	1.1	1.4	1.2	0.0	0.9	0.0	0.0	0.0	1.4	1.2	1.3	0.9	1.1	0.0	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	2.5	0.0	0.0
Begusarai	0.0	0.4	0.5	0.5	0.0	0.0	0.9	0.0	2.4	2.7	1.1	3.5	4.3	0.9	0.0	0.0	0.0	0.5	0.0	0.0	0.9	0.0	0.4	0.5	0.0	0.0	0.7	0.0
Sheikhpura	0.0	2.7	0.0	0.0	3.2	4.3	0.0	0.0	2.7	2.3	6.1	3.2	4.3	0.0	0.0	0.0	2.4	0.0	3.2	4.3	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0
Dhubri	2.4	0.4	2.4	2.1	0.0	1.4	0.0	3.9	5.8	13.0	10.4	6.8	10.4	10.1	0.0	0.0	0.4	0.0	0.5	0.0	1.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Goalpara	1.6	5.2	7.4	2.8	5.8	5.9	1.2	6.5	8.6	11.6	11.3	11.9	16.2	12.3	0.0	0.8	0.0	1.9	0.0	0.0	4.9	0.0	0.0	0.0	0.0	1.0	0.0	0.0
Barpeta	5.6	4.7	7.6	4.5	6.8	5.5	1.5	5.3	6.8	3.9	1.3	7.6	8.0	10.7	0.0	0.0	0.0	0.0	1.7	1.9	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Baksa	0.0	3.3	5.3	6.1	5.5	5.4	2.9	3.8	10.8	20.6	21.6	28.5	27.0	26.6	0.0	0.0	0.0	0.1	1.9	2.7	3.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Darrang	2.4	3.0	3.0	4.2	2.3	4.7	1.2	4.9	7.0	8.6	7.8	7.8	13.8	10.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Maldah	8.2	6.5	6.8	1.3	5.1	5.6	2.6	4.3	14.7	22.0	18.8	13.9	23.1	7.4	0.0	0.0	0.0	0.0	0.0	1.4	0.0	0.0	0.0	0.8	0.0	0.0	2.8	0.0
Murshidabad	16.5	9.1	8.7	8.1	10.5	1.6	2.3	10.4	19.9	21.2	28.3	23.1	22.1	28.0	0.0	0.0	0.0	1.2	2.6	1.6	1.5	0.0	0.0	0.4	1.2	1.3	0.0	1.5
Birbhum	4.1	10.4	9.1	8.7	0.0	5.6	5.8	8.2	14.7	29.5	32.6	20.9	30.0	26.2	0.0	0.0	0.0	0.0	1.2	0.0	2.9	0.0	0.0	0.0	0.0	0.0	0.0	1.4
Sahibganj	0.0	0.8	1.2	1.7	0.0	2.2	2.6	2.1	0.8	4.2	7.4	12.7	12.4	7.8	0.0	0.0	1.2	0.8	1.0	0.0	0.0	0.0	0.8	0.6	0.8	0.0	0.0	0.0
Pakur	1.6	0.9	0.8	1.0	1.2	0.0	0.0	0.0	1.8	2.3	6.0	1.2	2.4	1.5	0.0	0.0	0.8	0.0	2.4	0.0	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Kalahandi	2.9	3.2	4.1	2.9	0.6	1.5	2.3	0.0	11.2	9.8	13.8	13.1	7.5	7.6	0.0	1.6	1.8	0.7	0.0	2.2	0.8	0.0	0.0	0.6	0.0	0.0	0.0	1.5
Rayagada	4.3	7.7	7.7	6.2	0.0	0.0	1.3	0.0	11.7	17.6	7.5	16.1	5.5	12.2	0.0	0.0	0.0	0.0	2.7	0.0	0.0	0.0	0.0	1.1	0.0	0.0	0.0	0.0
Damoh	0.0	2.9	4.0	1.5	1.6	2.2	4.3	0.0	2.4	3.4	3.8	3.1	2.2	4.3	0.0	0.0	0.0	0.0	1.6	0.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Barwani	12.3	9.5	3.4	2.9	4.3	0.8	3.6	0.0	3.0	2.8	3.5	4.3	1.6	0.9	0.0	1.0	1.1	2.1	2.6	3.1	2.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Vidisha	0.0	3.6	3.0	4.2	0.0	1.0	5.3	0.0	4.7	4.8	3.0	3.5	0.0	0.0	0.0	0.0	0.0	0.6	0.0	0.0	1.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Singrauli	0.0	0.6	0.0	0.0	1.7	0.1	0.0	0.0	1.3	1.3	1.6	0.9	1.0	2.1	0.0	0.0	1.3	0.0	0.0	0.0	1.0	0.0	0.6	0.6	0.0	0.9	0.0	0.0
Khandwa	4.8	3.5	8.0	10.3	7.4	4.6	1.6	0.0	3.4	9.2	3.5	7.3	9.3	4.8	0.0	0.7	1.2	1.4	3.3	0.9	0.8	4.8	0.0	0.0	2.1	0.0	0.9	0.0
Nandurbar	0.0	2.0	1.7	0.0	0.0	2.2	0.0	0.0	4.0	5.1	0.0	2.6	2.2	4.8	0.0	2.1	1.7	0.0	2.5	2.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Table 7 Contraception discontinuation rates - By Caste (50 districts by Central ministries of GoI)

	Schedule caste	Schedule tribe	OBC	Others	Schedule caste	Schedule tribe	OBC	Others	Schedule caste	Schedule tribe	OBC	Others	Schedule caste	Schedule tribe	OBC	Others
	Condom				Pill				IUD				inj.			
Kupwara	0.0	1.7	10.2	7.4	16.7	6.8	8.0	10.1	16.7	1.7	3.9	5.7	16.7	1.7	3.9	5.7
Baramula	0.0	0.0	22.2	4.4	0.0	15.0	22.2	13.9	0.0	0.0	22.2	5.9	0.0	0.0	22.2	5.9
Chamba	10.1	1.3	16.3	8.5	2.0	2.2	0.3	2.6	0.0	1.1	0.0	1.0	0.0	1.1	0.0	1.0
Moga	48.1	0.0	43.2	35.5	19.6	0.0	28.5	20.4	11.4	0.0	14.1	19.9	11.4	0.0	14.1	19.9
Firozpur	46.5	0.0	38.2	42.7	28.1	0.0	27.4	27.3	8.5	0.0	4.7	18.6	8.5	0.0	4.7	18.6
Udham Singh Nagar	9.6	14.2	12.7	14.8	7.9	11.0	7.8	9.6	1.2	1.4	3.9	3.0	1.2	1.4	3.9	3.0
Hardwar	12.7	4.3	10.2	13.0	7.6	4.3	9.9	10.3	1.2	0.0	2.0	3.3	1.2	0.0	2.0	3.3
Mewat	1.8	7.7	3.1	2.7	0.0	7.7	2.2	0.0	1.8	0.0	1.4	0.0	1.8	0.0	1.4	0.0
Dhaulpur	10.3	0.0	9.1	7.5	2.6	0.0	3.3	4.2	0.9	0.0	0.0	1.7	0.9	0.0	0.0	1.7
Karauli	4.3	4.6	3.8	14.5	5.6	0.8	3.8	9.5	0.6	0.0	0.5	3.2	0.6	0.0	0.5	3.2
Sirohi	6.3	0.0	7.0	6.5	6.2	2.1	5.9	5.0	1.3	1.0	1.6	2.5	1.3	1.0	1.6	2.5
Fatehpur	6.4	0.0	7.3	12.1	3.7	0.0	1.8	5.2	2.8	0.0	0.5	1.7	2.8	0.0	0.5	1.7
Siddharth Nagar	7.1	12.5	9.1	11.1	7.1	12.5	5.4	8.3	0.6	0.0	0.9	0.7	0.6	0.0	0.9	0.7
Chandauli	2.0	0.0	3.4	6.1	0.0	0.0	2.3	2.6	0.0	0.0	0.9	0.0	0.0	0.0	0.9	0.0
Purnia	1.1	0.0	1.3	1.6	4.5	0.0	5.6	5.7	2.2	0.0	0.6	1.0	2.2	0.0	0.6	1.0
Khagaria	1.1	0.0	0.2	0.0	0.0	0.0	0.7	1.6	0.0	0.0	0.9	0.0	0.0	0.0	0.9	0.0
West District	1.8	3.2	2.3	1.0	16.4	12.7	12.0	15.0	1.8	4.4	3.2	3.7	1.8	4.4	3.2	3.7
Kiphire	0.0	2.3	0.0	0.0	33.3	2.7	0.0	0.0	16.7	1.7	0.0	0.0	16.7	1.7	0.0	0.0
Chandel	0.0	2.8	0.0	0.0	0.0	7.1	10.0	10.0	0.4	7.7	5.5	10.0	0.4	7.7	5.5	10.0
Mamit	0.0	0.8	0.0	0.0	23.6	14.2	0.0	0.0	0.0	4.7	0.0	0.0	0.0	4.7	0.0	0.0
Dhalai	1.3	0.6	3.9	0.0	21.1	12.4	22.9	27.3	1.3	0.0	0.0	4.5	1.3	0.0	0.0	4.5
Ribhoi	0.0	1.2	0.0	0.0	25.0	6.7	25.0	0.0	0.0	0.7	0.0	0.0	0.0	0.7	0.0	0.0
Hailakandi	10.1	0.0	2.1	9.6	15.1	33.3	14.3	16.0	2.5	0.0	4.1	1.1	2.5	0.0	4.1	1.1
Udalguri	1.4	4.2	5.5	11.5	28.8	15.5	14.8	33.3	1.4	2.6	1.8	4.6	1.4	2.6	1.8	4.6
Dakshin Dinajpur	7.3	14.3	14.8	10.2	12.3	13.8	22.2	10.9	0.0	2.9	3.7	0.0	0.0	2.9	3.7	0.0
Nadia	7.0	9.2	6.9	8.2	22.4	21.9	29.2	18.4	1.1	0.0	1.0	0.5	1.1	0.0	1.0	0.5
Godda	2.7	1.3	1.7	0.0	2.7	1.9	2.5	1.8	1.8	0.0	0.0	0.0	1.8	0.0	0.0	0.0
Dhenkanal	3.0	0.0	2.4	10.0	14.2	7.3	9.8	8.9	0.0	0.0	0.5	1.1	0.0	0.0	0.5	1.1

Gajapati	3.1	2.2	1.3	0.0	14.1	11.1	6.4	12.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Kandhamal	14.4	6.1	13.1	20.0	17.7	11.6	18.6	16.0	0.0	1.5	0.0	0.0	0.0	1.5	0.0	0.0
Balangir	0.9	1.3	1.2	2.1	16.9	19.1	17.4	22.5	2.7	0.0	1.2	0.0	2.7	0.0	1.2	0.0
Korba	2.1	6.1	7.2	18.0	9.3	5.9	8.1	15.5	1.1	0.3	2.3	2.4	1.1	0.3	2.3	2.4
Mahasamund	4.4	2.3	3.2	0.0	7.7	5.0	4.8	3.4	2.2	0.9	1.4	0.2	2.2	0.9	1.4	0.2
Chhatarpur	6.1	3.9	6.5	3.9	2.2	5.8	2.3	2.8	0.0	0.0	0.0	1.7	0.0	0.0	0.0	1.7
Rajgarh	1.8	2.1	6.1	6.3	0.0	0.0	1.3	3.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Guna	4.8	3.1	5.1	9.1	1.8	9.2	4.9	5.1	0.0	0.0	0.2	0.0	0.0	0.0	0.2	0.0
Dohad	4.0	2.3	0.9	15.0	8.0	2.3	1.8	10.0	0.0	0.3	0.9	10.0	0.0	0.3	0.9	10.0
Narmada	0.0	2.0	9.1	6.7	0.0	2.7	9.1	0.0	0.0	2.0	9.1	13.3	0.0	2.0	9.1	13.3
Washim	8.2	5.7	5.6	1.6	2.8	2.9	3.4	1.9	0.0	0.0	2.2	1.9	0.0	0.0	2.2	1.9
Osmanabad	4.5	0.4	1.9	3.2	0.2	0.0	1.9	4.4	4.5	0.0	1.9	1.9	4.5	0.0	1.9	1.9
Vizianagaram	0.0	0.0	0.3	0.0	0.0	0.0	0.3	0.0	0.0	0.0	0.3	0.0	0.0	0.0	0.3	0.0
Y.S.R.	0.0	0.0	0.5	0.5	0.0	0.0	0.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Raichur	0.0	0.0	0.4	0.0	0.0	0.0	0.0	0.0	0.8	1.2	1.7	1.6	0.8	1.2	1.7	1.6
Yadgir	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.0	0.0	0.0	0.0	3.0
Wayanad	6.7	3.0	10.0	8.9	6.3	0.0	2.5	1.8	18.8	6.1	10.1	11.0	18.8	6.1	10.1	11.0
Virudhunagar	0.9	33.3	1.7	0.0	0.0	0.0	0.3	0.0	3.4	0.0	4.2	0.0	3.4	0.0	4.2	0.0
Ramanathapuram	3.3	0.0	2.0	0.0	2.2	0.0	2.4	0.0	2.2	0.0	2.8	0.0	2.2	0.0	2.8	0.0

Table 8 Contraception discontinuation rates - By Residence (50 districts by Central ministries of GoI)

	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural
	Condom		**Pill**		**IUD**		**inj.**	
Kupwara	13.6	9.3	10.9	13.8	12.3	4.2	4.8	7.7
Baramula	4.3	4.3	5.7	8.9	5.7	4.6	2.4	1.8
Chamba	8.6	7.6	2.9	2.3	0.0	0.8	0.0	0.0
Moga	39.4	43.8	17.8	21.7	12.2	15.9	1.8	0.0
Firozpur	45.7	42.5	25.9	28.4	11.2	10.7	0.7	0.6
Udham Singh Nagar	12.9	12.1	7.2	9.9	3.9	1.6	0.5	0.0
Hardwar	13.9	8.9	11.6	7.1	2.2	1.7	0.3	0.0
Mewat	3.4	3.0	2.6	1.6	4.3	0.6	1.7	0.6
Dhaulpur	11.7	7.3	4.8	3.1	1.0	0.8	1.0	0.3
Karauli	9.6	5.4	8.4	3.9	3.5	0.7	1.2	0.0
Sirohi	12.6	3.7	8.0	3.9	3.4	1.7	0.0	0.0
Fatehpur	14.1	7.0	1.4	3.1	0.0	1.6	1.4	0.0
Siddharth Nagar	9.5	9.0	7.1	6.3	2.4	0.8	0.0	0.9
Chandauli	8.0	2.5	5.5	0.9	1.6	0.6	0.0	0.0
Purnia	0.0	1.4	21.3	2.9	2.8	0.6	0.0	0.9
Khagaria	7.7	0.4	0.0	0.9	7.7	0.7	0.0	0.0
West District	3.4	2.5	10.3	13.1	6.9	3.6	3.4	2.9
Kiphire	1.3	2.6	2.6	2.6	4.2	1.8	0.0	0.4
Chandel	0.0	3.2	7.1	7.0	10.7	7.3	0.0	0.3
Mamit	0.0	0.9	14.7	14.2	3.7	4.7	0.0	0.0
Dhalai	2.4	1.7	18.8	16.9	0.0	0.7	0.0	0.3
Ribhoi	0.2	1.2	3.5	7.1	3.7	1.2	4.0	0.5
Hailakandi	14.4	8.5	29.3	15.4	7.3	1.3	0.0	0.3
Udalguri	21.9	3.3	15.6	19.1	6.1	1.7	0.0	0.0
Dakshin Dinajpur	7.0	11.3	11.8	16.0	0.0	1.0	0.0	0.0
Nadia	8.0	7.5	16.5	24.1	0.0	1.2	0.0	0.0
Godda	0.1	1.5	2.3	2.4	0.0	0.1	0.0	0.0
Dhenkanal	10.0	2.2	7.6	10.3	0.0	0.6	1.2	0.0
Gajapati	0.1	1.9	4.7	11.1	0.0	0.4	0.0	0.0
Kandhamal	8.8	10.8	23.3	14.1	0.1	0.8	0.0	0.0
Balangir	2.3	1.0	24.6	16.8	0.8	1.1	0.0	0.0
Korba	11.0	5.0	13.0	5.3	2.2	1.1	0.3	0.2

Mahasamund	4.1	2.8	5.5	5.1	1.3	1.4	0.0	0.4
Chhatarpur	5.6	5.6	3.7	2.3	0.5	0.3	0.0	0.0
Rajgarh	8.1	4.5	2.0	1.2	0.0	0.0	0.0	0.4
Guna	8.8	3.9	6.2	4.2	0.4	0.1	0.8	0.1
Dohad	10.9	1.7	5.5	2.4	7.3	0.0	0.0	0.0
Narmada	6.3	1.9	5.3	2.5	10.8	2.5	0.0	0.0
Washim	9.1	4.5	2.6	2.8	2.5	1.1	0.0	0.0
Osmanabad	2.9	2.8	5.7	2.8	2.6	1.9	0.0	0.5
Vizianagaram	0.0	0.3	0.0	0.3	0.0	0.3	0.0	0.3
Y.S.R.	0.6	0.3	0.0	0.3	0.0	0.0	0.0	0.0
Raichur	0.6	0.0	0.0	0.0	3.8	0.3	0.6	0.0
Yadgir	0.0	0.0	0.0	0.0	1.3	0.0	0.0	0.0
Wayanad	14.3	8.8	0.0	2.2	14.3	9.9	0.0	0.0
Virudhunagar	2.1	0.8	0.4	0.0	5.9	1.6	0.0	0.8
Ramanathapuram	2.8	2.1	3.7	1.7	3.7	2.1	0.0	0.0

Table 9 Contraception discontinuation rates - By Education (50 districts by Central ministries of GoI)

	No education	Primary	Secondary	Higher	No education	Primary	Secondary	Higher	No education	Primary	Secondary	Higher	No education	Primary	Secondary	Higher
	Condom				**Pill**				**IUD**				**inj.**			
Kupwara	7.8	11.3	10.5	23.1	11.9	17.0	14.1	9.3	5.3	11.3	6.6	0.1	7.8	7.5	6.9	2.3
Baramula	3.7	1.9	5.3	5.5	8.2	5.5	10.0	2.8	4.3	8.6	6.2	0.1	1.9	5.3	1.2	2.9
Chamba	0.8	6.0	9.3	19.3	0.0	1.7	4.2	1.9	0.8	0.8	0.9	0.0	0.0	0.0	0.0	0.0
Moga	49.1	43.3	40.9	30.2	22.4	16.7	21.4	18.9	14.4	15.3	15.9	13.7	0.0	1.5	0.5	0.0
Firozpur	43.7	44.4	43.5	40.6	29.6	33.0	25.9	15.7	8.9	7.6	14.2	12.0	0.0	0.5	1.2	0.0
Udham Singh Nagar	9.2	13.7	15.1	14.3	7.0	13.3	9.6	6.6	1.7	2.2	2.9	4.6	0.0	0.0	0.0	1.2
Hardwar	9.4	12.4	11.6	15.1	8.3	10.4	9.6	8.0	1.8	2.0	2.6	1.3	0.1	0.0	0.3	0.0
Mewat	2.7	3.5	5.3	0.0	2.2	1.2	1.1	0.0	1.7	0.0	0.0	0.0	0.2	1.2	0.0	9.5
Dhaulpur	6.0	12.2	6.3	17.7	3.0	3.7	3.1	7.6	0.9	1.2	0.8	2.6	0.4	0.0	0.8	0.0
Karauli	2.6	7.1	9.3	17.9	2.9	8.1	6.7	7.1	0.6	1.0	1.3	3.6	0.0	0.0	0.7	0.0
Sirohi	3.7	5.5	10.4	10.5	3.7	5.4	6.3	5.3	0.4	3.6	3.2	5.3	0.0	0.0	0.0	0.0
Fatehpur	5.5	2.2	10.6	16.8	1.7	5.4	3.8	3.4	0.9	0.0	3.4	0.0	0.0	0.0	0.4	0.0
Siddharth Nagar	6.7	8.1	12.9	25.6	6.5	7.2	5.7	4.9	1.1	0.0	0.7	0.0	1.5	0.0	0.0	0.0
Chandauli	0.9	5.1	4.1	8.4	1.2	2.6	2.1	2.4	0.3	0.0	1.0	0.1	0.0	0.0	0.0	0.0
Purnia	0.9	1.7	1.6	0.0	3.0	2.8	11.3	18.8	0.8	0.0	2.0	0.0	0.3	2.3	1.2	0.0
Khagaria	0.0	0.0	1.2	4.5	0.6	1.7	0.6	4.3	0.6	0.0	1.9	4.5	0.0	0.0	0.0	0.2
West District	4.2	1.1	2.0	9.4	15.0	12.7	12.4	12.5	2.1	3.2	3.9	9.4	2.1	3.2	3.1	6.6
Kiphire	1.6	1.7	2.3	11.1	1.6	5.0	2.4	0.0	1.7	1.8	2.4	0.0	0.0	0.0	0.6	0.0
Chandel	0.0	1.4	4.7	4.9	4.3	5.8	8.2	7.3	5.4	8.8	7.6	10.0	0.0	1.4	0.0	0.0
Mamit	0.0	1.8	0.8	0.0	8.7	6.4	19.8	25.0	0.8	5.5	5.9	12.5	0.0	0.0	0.0	0.0
Dhalai	1.2	0.0	2.4	0.0	13.8	19.8	18.4	10.0	1.2	0.0	0.6	0.0	0.0	0.0	0.0	0.0
Ribhoi	0.8	1.2	0.0	8.9	7.4	7.7	5.8	0.0	0.0	1.2	2.2	0.0	0.0	1.2	0.0	0.0
Hailakandi	5.0	14.8	8.5	10.9	20.0	11.9	16.2	10.9	2.0	1.3	1.7	0.0	0.0	0.0	0.4	0.0
Udalguri	2.5	0.0	6.1	18.3	20.0	21.1	18.2	12.7	1.5	1.2	1.8	0.3	0.0	0.0	0.0	0.0
Dakshin Dinajpur	8.1	6.7	13.9	15.2	16.7	17.6	11.6	14.4	0.1	1.7	1.0	0.0	0.0	0.0	1.0	0.0
Nadia	1.6	4.6	11.1	15.4	25.6	25.8	20.1	7.7	1.6	0.0	0.8	0.0	0.0	0.0	0.0	0.0
Godda	0.6	2.8	3.4	0.0	1.5	4.7	2.9	4.3	0.0	0.0	0.4	0.2	0.0	0.0	0.0	0.0
Dhenkanal	1.3	1.6	3.2	14.0	6.9	9.9	11.1	12.0	0.0	0.0	1.1	0.0	0.0	0.0	0.0	2.0
Gajapati	1.6	2.4	2.8	0.0	12.2	9.3	8.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Kandhamal	5.0	9.5	19.1	26.4	16.4	12.3	13.1	27.8	0.9	1.6	0.0	1.4	0.0	0.0	0.0	0.0

Balangir	0.9	0.4	1.2	3.8	18.6	17.3	17.2	10.5	0.7	0.9	1.7	7.3	0.0	0.0	0.0	0.0
Korba	3.0	5.3	9.4	17.8	5.6	7.0	9.4	15.1	0.7	1.2	1.8	2.7	0.0	0.0	0.0	1.4
Mahasamund	1.0	2.4	4.7	4.5	3.8	3.6	7.7	4.3	0.0	1.8	2.3	0.3	0.3	0.0	0.7	0.0
Chhatarpur	3.1	9.4	7.0	10.2	2.1	2.6	1.8	12.5	0.0	1.0	0.4	0.0	0.0	0.0	0.0	0.0
Rajgarh	2.0	5.1	10.1	12.8	0.6	2.1	2.2	0.0	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.0
Guna	2.7	6.2	8.4	16.1	3.7	6.9	6.7	0.1	0.2	0.6	0.0	0.0	0.4	0.0	0.4	0.0
Dohad	0.8	2.2	3.8	17.9	0.8	4.3	5.3	3.1	0.0	0.0	3.0	3.1	0.0	0.0	0.0	0.0
Narmada	0.0	0.0	3.7	23.2	1.9	2.9	3.7	0.0	1.9	0.0	4.9	12.5	0.0	0.0	0.0	0.0
Washim	2.7	2.3	5.8	16.2	0.0	0.0	3.3	5.9	0.0	0.0	0.8	5.9	0.0	0.0	0.0	0.0
Osmanabad	0.0	6.3	2.7	0.9	0.0	2.9	4.0	0.0	0.0	3.0	2.7	0.6	0.0	0.0	0.7	0.0
Vizianagaram	0.0	0.0	0.8	0.0	0.0	0.0	0.0	2.4	0.6	0.0	0.8	0.1	0.6	0.0	0.0	0.0
Y.S.R.	0.5	0.0	0.0	1.9	0.0	3.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Raichur	0.0	0.0	0.0	3.3	0.0	0.0	0.0	0.0	0.0	0.0	3.6	6.7	0.0	0.0	0.7	0.0
Yadgir	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.2	0.0	0.0	0.0	0.0	0.0
Wayanad	0.0	5.9	10.1	9.7	0.0	0.0	3.1	0.0	0.0	11.8	10.9	9.7	0.0	0.0	0.0	0.0
Virudhunagar	0.9	0.0	0.8	8.9	0.0	0.0	0.4	0.0	2.7	3.6	3.3	5.4	0.9	0.0	0.4	0.0
Ramanathapuram	0.0	3.2	3.7	2.9	1.7	3.2	2.1	2.9	3.2	0.0	3.2	2.9	0.0	0.0	0.0	0.0

Table 10 Contraception discontinuation rates - By Wealth (50 districts by Central ministries of GoI)

	Poorest	Poorer	Middle	Richer	Richest	Poorest	Poorer	Middle	Richer	Richest	Poorest	Poorer	Middle	Richer	Richest	Poorest	Poorer	Middle	Richer	Richest
	Condom					Pill					IUD					inj.				
Kupwara	1.6	5.2	12.5	16.6	14.6	9.4	12.1	17.3	11.9	13.1	1.5	3.2	6.7	7.5	14.7	6.3	8.1	9.1	5.2	1.5
Baramula	4.5	2.5	4.3	4.6	6.0	9.1	9.8	7.9	9.4	4.8	0.0	5.4	3.5	5.8	6.0	0.0	2.5	2.5	2.3	0.0
Chamba	0.0	1.5	3.8	8.9	15.3	0.0	1.5	1.2	2.4	5.4	0.0	0.0	0.6	0.0	2.7	0.0	0.0	0.0	0.0	0.0
Moga	0.0	83.8	47.4	40.0	38.5	0.0	35.8	18.9	19.7	19.8	100.0	4.2	10.1	13.1	18.5	0.0	0.0	0.0	0.0	0.4
Firozpur	20.0	41.2	42.2	47.2	41.9	20.0	28.1	31.2	27.8	26.0	0.0	6.1	5.0	15.2	11.2	0.0	0.0	0.0	1.4	0.2
Udham Singh Nagar	1.0	8.5	13.7	14.6	13.8	8.3	7.9	9.6	8.8	8.6	1.1	2.7	1.4	2.4	4.1	0.0	0.0	0.0	0.0	0.7
Hardwar	7.8	10.8	11.3	9.9	13.0	9.0	5.4	9.5	8.9	10.7	2.2	2.4	1.3	1.0	3.2	0.0	0.3	0.0	0.3	0.0
Mewat	1.1	3.0	1.4	3.0	7.1	6.6	0.6	0.7	1.0	1.8	0.0	0.6	1.4	5.0	0.9	1.1	0.0	0.7	0.0	2.7
Dhaulpur	5.4	8.1	7.9	9.8	11.6	5.4	2.3	2.0	3.9	5.8	1.1	0.6	0.0	2.0	1.5	0.0	0.6	0.0	0.0	0.0
Karauli	3.6	4.2	4.1	9.2	17.0	3.6	3.4	4.9	7.6	5.3	0.7	0.0	0.8	0.0	7.1	0.0	0.0	0.0	0.0	1.8
Sirohi	3.7	3.2	8.1	5.7	12.5	4.6	4.1	3.5	3.4	12.5	0.0	1.0	2.3	2.2	4.7	0.0	0.0	0.0	0.0	0.0
Fatehpur	4.6	7.2	5.5	23.6	20.2	1.7	5.1	0.0	4.8	7.7	1.1	3.6	0.0	0.0	2.6	0.0	0.5	0.0	0.0	0.0
Siddharth Nagar	6.5	8.5	9.7	13.3	18.7	7.8	5.7	4.6	7.1	7.3	0.4	1.1	0.6	2.4	0.0	0.9	1.1	1.3	1.2	0.0
Chandauli	1.1	2.5	3.3	3.0	10.2	1.5	0.0	2.5	1.5	4.1	0.4	0.0	0.8	0.7	2.0	0.0	0.0	0.0	0.0	0.0
Purnia	0.7	2.0	3.3	0.0	0.2	2.7	3.6	15.4	20.8	26.1	0.6	1.2	0.0	5.7	4.3	0.9	0.0	2.2	0.0	0.2
Khagaria	0.0	0.0	1.3	2.9	0.0	0.3	1.4	0.0	2.9	0.0	0.3	0.7	0.0	6.1	18.2	0.0	0.0	0.0	0.0	0.0
West District	0.0	4.9	1.8	3.7	0.0	0.0	9.5	13.3	14.8	4.3	0.0	3.1	4.1	3.7	3.7	0.0	0.0	3.0	3.7	3.7
Kiphire	0.0	1.3	5.1	3.3	12.5	0.0	2.0	3.8	3.4	0.0	2.4	2.6	1.3	0.6	0.0	0.0	0.0	1.3	0.0	0.0
Chandel	0.0	3.2	3.6	1.7	6.3	5.0	5.6	8.1	6.7	12.5	6.7	8.1	10.8	5.0	0.0	0.0	0.0	0.9	0.0	0.0
Mamit	0.8	0.0	0.8	1.0	1.5	6.8	12.2	14.7	24.5	14.9	0.0	4.3	2.4	6.2	14.5	0.0	0.0	0.0	0.0	0.0
Dhalai	1.3	1.2	3.5	2.7	0.0	14.2	16.6	17.4	22.2	25.0	1.3	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ribhoi	0.0	1.7	0.8	0.3	3.6	8.3	5.8	7.3	9.7	0.0	0.0	1.2	0.8	3.3	0.0	1.0	0.6	0.0	3.3	0.0
Hailakandi	5.1	9.4	12.8	12.6	37.5	11.7	14.1	22.7	25.4	37.5	2.2	0.6	3.3	3.2	0.0	0.0	0.0	1.6	0.0	0.0
Udalguri	1.8	3.8	2.5	12.9	16.1	23.0	15.4	21.3	27.4	17.9	0.9	1.8	1.7	6.6	0.0	0.0	0.0	0.0	0.0	0.0
Dakshin Dinajpur	8.6	10.4	16.4	6.3	16.7	15.5	17.7	13.1	12.5	0.0	0.0	1.9	0.0	0.0	0.0	0.0	1.0	0.0	0.0	0.0
Nadia	6.5	6.5	8.8	6.7	9.2	26.6	24.3	21.6	18.8	15.9	1.1	0.4	0.9	1.5	0.0	0.0	0.0	0.0	0.0	0.0
Godda	0.4	1.8	3.0	8.6	0.0	2.3	1.8	3.0	3.2	5.6	0.0	0.9	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0

Dhenkanal	1.0	1.7	2.5	4.8	11.9	8.3	9.0	12.3	12.3	8.7	0.0	0.6	0.6	1.9	0.0	0.0	0.0	0.0	0.0	1.7
Gajapati	1.8	2.2	1.7	3.0	1.4	10.9	11.9	6.9	8.4	11.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Kandhamal	8.1	13.6	16.7	7.0	16.7	14.2	18.4	14.0	11.8	13.9	0.9	0.0	2.3	5.9	0.0	0.0	0.0	0.0	0.0	0.0
Balangir	1.4	0.0	1.4	3.8	3.3	17.4	17.5	18.0	16.9	29.7	2.1	0.0	1.4	1.3	0.0	0.0	0.0	0.0	0.0	0.0
Korba	2.9	5.0	6.7	8.6	14.8	3.6	8.3	8.9	10.1	12.5	0.4	0.6	0.7	1.6	3.6	0.4	0.0	0.0	0.0	0.6
Mahasamund	3.4	2.3	1.8	3.3	5.2	2.5	5.8	4.8	8.7	8.2	0.0	1.9	1.2	3.3	1.7	0.0	0.0	1.2	1.1	0.0
Chhatarpur	5.5	3.8	5.8	10.6	6.1	1.9	3.4	2.5	2.9	3.8	0.0	0.7	0.0	1.0	0.0	0.0	0.0	0.0	0.0	0.0
Rajgarh	4.1	2.8	3.4	11.1	12.0	1.4	0.3	2.9	2.4	0.0	0.0	0.0	0.0	0.0	0.0	0.9	0.0	0.4	0.0	0.0
Guna	1.7	2.7	6.8	7.5	9.9	3.0	3.6	5.0	8.2	6.3	0.0	0.4	0.0	0.7	0.0	0.0	0.4	0.0	0.0	1.6
Dohad	2.0	0.0	2.2	9.1	13.0	3.5	1.4	0.1	0.2	6.7	0.0	0.0	0.0	0.0	9.0	0.0	0.0	0.0	0.0	0.0
Narmada	0.0	1.4	2.6	6.3	13.1	2.7	1.5	2.6	6.7	5.9	0.0	1.5	0.0	13.3	12.1	0.0	0.0	0.0	0.0	0.0
Washim	3.2	4.1	0.0	8.3	11.1	0.0	2.0	3.8	2.1	5.6	0.0	2.0	1.9	0.0	2.8	0.0	0.0	0.0	0.0	0.0
Osmanabad	3.7	3.3	3.2	2.3	0.0	0.0	1.6	3.2	2.2	5.0	0.0	1.6	3.2	2.1	5.0	0.0	0.0	0.0	2.1	0.0
Vizianagaram	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.0	1.1	0.0	0.0	0.0	0.6	0.0	0.0
Y.S.R.	0.0	0.0	0.8	0.0	0.8	0.0	0.0	0.0	1.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Raichur	0.0	0.0	0.0	0.0	1.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.4	1.2	6.8	0.0	0.0	0.7	0.0	0.0
Yadgir	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.7	0.0	0.0	0.0	0.0	0.0	0.0
Wayanad	0.0	6.7	7.1	10.6	13.1	0.0	0.0	1.8	1.3	5.3	0.0	0.0	10.9	9.4	10.5	0.0	0.0	0.0	0.0	0.0
Virudhunagar	0.0	0.0	1.1	3.9	0.0	0.0	0.0	0.0	0.0	1.6	0.0	3.9	2.2	7.6	1.7	0.0	0.0	0.1	1.5	0.0
Ramanathapuram	0.0	1.1	4.0	1.1	5.8	0.0	2.3	2.0	2.2	3.9	0.0	2.3	2.0	2.2	5.8	0.0	0.0	0.0	0.0	0.0

Table 11 Contraception discontinuation rates - By No. of living children at 1st use (50 districts by Central ministries of GoI)

	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5
	Condom						Pill						IUD						inj.					
Kupwara	0.0	22.2	17.8	11.6	6.1	2.7	0.0	20.3	25.1	11.5	24.3	22.0	0.0	5.7	9.4	13.9	11.7	9.8	0.0	10.9	14.6	9.3	4.1	9.8
Baramula	0.0	12.8	3.1	3.4	1.3	5.6	0.0	16.4	12.6	9.5	8.3	2.8	0.0	7.9	11.9	3.4	1.5	8.3	0.0	4.2	3.8	0.0	0.0	5.6
Chamba	62.5	24.6	10.8	2.3	0.1	0.0	0.0	7.2	2.8	2.3	0.0	0.0	0.0	1.4	0.9	1.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Moga	71.4	54.0	35.4	28.6	26.7	0.0	31.4	26.9	19.5	11.4	7.1	0.0	11.4	20.2	14.9	11.4	7.1	25.0	0.0	0.0	0.0	0.0	6.7	0.0
Firozpur	69.5	48.3	45.9	33.3	35.0	33.3	38.6	35.6	22.6	11.1	0.0	16.7	6.9	16.1	10.5	5.5	0.0	0.0	0.0	0.8	0.8	0.0	0.0	0.0
Udham Singh Nagar	36.7	30.7	19.3	14.6	12.0	14.5	13.7	17.2	23.1	11.2	12.9	11.8	2.7	6.4	6.4	4.7	1.1	0.0	0.0	1.2	0.0	0.0	0.0	0.0
Hardwar	41.0	27.8	13.7	7.5	8.9	9.9	8.5	17.6	18.2	16.0	14.9	15.9	0.0	2.3	5.2	5.0	3.5	4.4	0.0	0.0	1.0	0.0	0.0	0.0
Mewat	16.7	46.2	12.1	11.8	5.2	8.1	16.7	16.7	6.0	6.4	5.0	0.5	0.0	0.0	5.9	5.9	9.7	14.8	0.0	0.0	5.9	2.9	4.8	0.5
Dhaulpur	35.1	21.7	13.2	9.9	4.3	0.0	8.7	6.7	2.9	3.3	6.4	3.4	0.0	3.3	0.0	1.7	0.0	0.0	0.0	1.7	0.0	0.0	0.0	3.7
Karauli	18.9	17.1	9.5	2.2	4.9	0.0	13.0	6.2	9.5	2.2	1.6	3.4	1.9	1.6	2.1	1.1	0.0	0.0	0.0	1.5	0.0	0.0	0.0	0.0
Sirohi	26.4	16.0	12.5	4.8	2.1	0.0	25.0	18.3	14.5	3.2	4.3	0.3	0.0	7.7	4.8	0.0	4.3	0.0	0.0	0.1	0.0	0.0	0.0	0.0
Fatehpur	33.3	22.2	21.0	1.1	1.7	3.1	8.3	5.3	7.4	4.3	5.4	0.0	0.0	3.5	5.3	0.0	5.4	0.0	0.0	0.0	1.1	0.0	0.0	0.0
Siddharth Nagar	29.6	19.7	23.3	12.5	7.0	4.5	11.1	9.9	12.4	16.0	12.3	22.7	0.0	0.0	4.7	1.6	3.5	0.0	0.0	2.8	1.6	1.6	3.5	4.5
Chandauli	50.0	26.7	9.1	2.1	1.4	2.8	33.3	7.4	4.5	3.1	1.4	2.8	0.0	0.6	4.5	0.0	1.4	0.0	0.0	0.1	0.0	0.0	0.0	0.0
Purnia	13.4	7.6	3.9	4.0	0.0	4.4	57.1	58.9	11.8	5.0	5.0	2.3	4.5	10.3	2.6	2.0	1.0	0.0	0.0	2.6	1.4	4.0	2.0	2.3
Khagaria	50.0	16.7	6.4	0.0	0.0	0.0	16.7	33.3	3.4	0.0	2.3	3.7	0.0	16.7	6.7	1.8	0.1	0.1	0.0	0.0	0.2	0.0	0.0	0.0
West District	8.3	5.1	1.4	2.1	1.8	0.0	54.3	19.6	15.1	10.2	7.2	1.9	3.0	7.8	4.2	2.1	3.4	0.6	0.0	5.2	4.2	5.2	1.9	0.0
Kiphire	0.0	13.8	6.1	5.0	0.0	7.7	0.0	6.7	10.5	5.0	5.9	7.7	0.0	0.4	15.8	2.1	7.0	7.7	0.0	0.0	0.0	0.0	0.0	7.7
Chandel	0.0	12.8	0.3	10.0	12.5	0.0	0.0	19.1	31.4	15.8	0.0	20.0	0.0	25.5	16.0	24.5	44.6	33.3	0.0	0.0	0.0	0.0	0.0	20.0
Mamit	0.0	3.1	0.1	0.0	0.0	0.0	50.0	50.0	36.7	26.4	5.7	5.3	0.0	18.5	6.9	5.7	0.0	10.5	0.0	0.0	0.0	0.0	0.0	0.0
Dhalai	5.4	3.4	0.0	0.0	0.0	0.0	17.4	21.4	25.2	20.6	18.1	0.7	0.0	0.0	1.5	3.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ribhoi	0.0	2.7	3.6	6.8	5.0	0.0	0.0	17.4	39.3	30.0	10.0	16.2	0.0	2.5	7.1	7.1	0.0	0.0	0.0	4.8	0.0	0.2	0.0	0.0
Hailakandi	12.5	14.4	12.2	4.4	10.7	10.0	19.8	27.4	19.7	16.0	10.7	30.0	1.8	5.8	1.4	4.4	0.0	0.5	0.0	0.0	1.4	0.0	0.0	0.0
Udalguri	32.0	3.2	5.6	4.0	0.0	0.0	22.5	26.0	23.3	17.5	14.3	20.0	7.7	1.6	1.1	8.0	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Dakshin Dinajpur	21.4	18.8	10.0	0.0	0.0	0.0	27.4	26.5	9.2	20.0	16.1	0.0	0.0	1.4	2.4	0.0	0.0	0.0	0.0	1.4	2.4	0.0	0.0	0.0
Nadia	10.1	11.8	4.3	1.5	0.0	0.0	26.9	32.8	21.4	6.1	5.5	33.3	2.0	0.3	0.7	0.0	0.0	33.3	0.0	0.0	0.0	0.0	0.0	0.0
Godda	66.7	17.2	0.8	0.9	0.1	0.0	66.7	9.7	6.6	2.8	1.2	0.0	0.0	4.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Dhenkanal	40.0	6.7	2.0	1.0	2.6	0.0	0.0	15.8	13.2	7.0	7.9	18.2	0.0	0.5	1.0	1.0	0.0	0.0	0.0	0.5	0.0	0.0	0.0	0.0
Gajapati	25.0	2.7	1.4	4.3	6.3	0.0	50.0	16.2	11.3	10.5	12.5	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Kandhamal	26.9	15.9	7.9	6.8	0.0	0.0	23.1	26.9	14.0	15.9	3.2	9.8	3.8	0.7	1.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Balangir	0.9	3.1	0.5	0.0	0.0	0.0	27.3	38.2	13.6	14.5	15.5	6.8	0.0	2.5	1.3	0.0	0.0	3.4	0.0	0.0	0.0	0.0	0.0	0.0
Korba	45.8	17.1	9.4	3.0	1.4	4.3	28.3	23.3	7.6	5.2	11.0	4.5	3.6	4.6	2.4	0.8	0.0	0.0	0.0	0.8	0.6	0.0	0.0	0.0
Mahasamund	5.6	10.2	5.5	0.0	0.0	0.0	22.2	23.8	2.8	0.7	1.8	4.5	0.0	6.1	1.4	0.7	0.0	0.0	0.0	2.1	0.0	0.0	0.0	0.0
Chhatarpur	53.2	28.3	5.0	4.9	3.5	3.4	0.0	5.5	3.7	6.3	5.3	0.0	0.0	1.8	0.0	0.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Rajgarh	66.7	26.0	1.0	2.7	0.0	0.0	6.7	4.0	1.5	2.1	3.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.9	0.0	0.0	0.0	0.0
Guna	42.3	23.7	5.7	0.7	0.0	1.7	29.5	14.0	6.4	4.0	4.3	5.2	0.0	1.3	0.6	0.0	0.0	0.0	0.0	1.3	0.0	0.7	0.0	1.7
Dohad	9.1	36.8	5.3	2.4	0.0	0.0	32.6	21.1	7.5	2.4	0.0	0.0	0.0	5.3	10.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Narmada	33.3	17.5	2.9	0.0	0.0	0.0	33.3	18.8	2.8	2.9	0.0	0.0	0.0	24.6	2.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Washim	30.0	12.2	5.7	5.7	0.0	0.0	20.0	12.0	2.9	1.9	0.0	0.0	0.0	3.7	2.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Osmanabad	5.9	14.3	4.3	2.0	0.0	0.0	5.9	0.0	5.5	4.1	0.0	0.0	0.0	7.1	2.7	4.0	0.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0
Vizianagaram	0.0	0.0	0.5	0.0	0.0	0.0	0.0	4.8	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.0	0.0	0.0	0.0	0.0	1.8	0.0	0.0
Y.S.R.	0.0	20.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.5	0.0	0.0	0.0	11.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Raichur	100.0	0.6	0.0	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.0	16.7	3.4	1.1	0.0	0.0	0.0	0.0	0.8	0.0	0.0	0.0
Yadgir	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Wayanad	42.9	22.4	3.8	0.0	0.0	0.0	0.0	6.1	1.9	0.0	0.0	0.0	0.0	30.6	5.8	5.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Virudhunagar	14.3	3.3	2.9	0.0	0.0	0.0	4.8	0.0	0.0	0.0	0.0	0.0	14.5	32.8	1.5	11.1	0.0	0.0	0.2	3.2	0.0	0.0	0.0	0.0
Ramanathapuram	25.0	14.7	3.9	3.8	0.0	0.0	0.0	5.2	5.9	3.7	40.0	0.0	0.0	19.9	7.8	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

	15-19	20-24	25-29	30-34	35-39	40-44	45-49	15-19	20-24	25-29	30-34	35-39	40-44	45-49	15-19	20-24	25-29	30-34	35-39	40-44	45-49	20-24	25-29	30-34	35-39	40-44	45-49
	Condom							Pill							IUD							Inj.					
Kupwara	14.3	2.6	7.4	17.0	10.3	7.5	14.7	0.0	6.5	9.2	12.9	18.4	14.2	20.3	0.0	0.0	1.8	4.1	10.2	11.5	6.8	5.2	5.6	7.5	6.1	9.4	9.5
Baramula	0.0	6.5	3.9	3.4	5.8	5.4	1.7	0.0	6.5	7.1	11.0	10.1	5.4	6.1	0.0	0.0	2.5	8.7	5.7	2.9	5.3	0.1	1.9	2.8	2.7	1.8	0.0
Chamba	0.0	3.2	10.3	8.8	6.5	6.9	9.5	0.0	1.5	1.7	2.0	2.1	3.4	1.4	0.0	0.0	0.0	0.0	2.1	1.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Moga	23.3	38.0	35.6	42.6	41.4	49.9	55.1	0.0	11.0	15.6	26.0	16.5	26.4	27.9	1.1	2.4	6.7	16.8	16.5	24.5	23.4	0.1	1.1	0.0	0.0	0.0	1.6
Firozpur	20.0	26.8	31.4	48.7	53.8	50.3	48.4	0.0	10.7	23.9	33.7	31.0	35.2	28.5	0.0	0.0	8.0	12.0	19.0	12.7	10.6	0.0	0.0	0.0	2.2	0.6	0.0
Udham Singh Nagar	4.7	10.8	13.7	12.8	13.8	12.4	11.0	0.0	4.3	7.4	12.0	11.4	10.0	10.2	0.0	1.7	0.9	3.2	3.7	2.9	4.6	0.0	0.5	0.3	0.3	0.0	0.0
Hardwar	0.0	12.5	13.8	11.5	8.5	7.5	12.9	4.9	5.8	10.3	8.5	10.1	12.0	8.7	0.0	0.0	0.4	3.1	1.8	2.6	5.6	0.0	0.4	0.0	0.3	0.0	0.0
Mewat	2.4	3.4	6.4	1.0	1.4	2.9	1.9	2.4	0.0	0.8	5.0	4.1	0.0	1.9	0.0	0.7	0.8	3.1	2.7	0.0	0.0	0.7	0.0	3.0	0.0	0.0	0.0
Dhaulpur	4.0	9.8	9.6	10.5	8.8	8.8	1.9	0.0	1.0	5.4	3.9	5.0	3.7	0.0	0.0	0.0	0.0	1.3	1.3	1.8	1.9	0.0	0.0	0.0	1.3	1.8	0.0
Karauli	5.0	7.5	8.7	4.5	5.1	3.4	5.1	2.4	3.8	5.2	5.7	8.8	2.3	1.3	0.0	0.0	0.9	0.0	2.5	2.3	2.6	0.0	0.0	1.1	0.0	0.0	0.0
Sirohi	0.5	6.7	9.4	3.9	6.3	5.8	0.0	0.5	5.7	5.2	6.4	3.3	3.8	2.0	0.0	0.0	1.0	2.6	4.7	1.9	2.0	0.0	0.0	0.0	0.0	0.0	0.0
Fatehpur	0.0	5.5	8.5	13.7	7.5	3.7	7.5	0.0	0.8	0.8	3.3	7.5	3.7	1.3	0.0	0.8	0.0	0.0	4.5	2.2	1.3	0.0	0.8	0.0	0.0	0.0	0.0
Siddharth Nagar	7.1	11.5	12.5	6.9	12.6	5.5	1.1	3.3	2.9	8.2	7.0	7.8	6.6	4.5	0.0	0.7	0.5	0.7	1.0	3.3	0.0	0.0	1.1	1.4	1.0	2.2	1.1
Chandauli	0.2	5.2	4.7	0.7	3.5	2.0	4.3	4.2	1.3	0.0	2.2	2.6	2.9	1.1	0.0	0.0	0.0	0.7	0.9	1.0	1.1	0.0	0.0	0.0	0.0	0.0	0.0
Purnia	0.0	1.7	1.7	1.6	1.3	0.0	0.0	5.8	5.4	7.8	3.2	4.6	6.6	3.2	0.0	0.4	1.3	0.0	0.0	4.1	2.1	0.4	1.3	0.0	1.3	0.0	1.1
Khagaria	0.0	0.0	0.0	0.0	0.0	1.8	0.0	0.0	1.6	0.8	0.0	1.3	1.8	1.8	1.9	0.8	0.8	1.0	0.0	1.8	1.9	0.0	0.0	0.0	0.0	0.0	0.0
West District	12.5	1.7	3.7	2.7	0.8	1.9	2.2	0.0	14.3	11.1	18.8	11.9	10.0	12.8	0.0	3.4	1.8	2.6	3.6	5.4	6.4	0.0	1.9	6.1	0.8	5.6	2.2
Kiphire	0.0	2.9	1.6	3.6	3.3	2.2	0.1	0.0	2.8	0.0	3.6	6.7	2.2	0.0	0.0	2.7	3.5	0.2	3.3	1.9	0.1	0.0	0.0	1.8	0.0	0.0	0.0
Chandel	0.0	0.0	2.5	1.3	4.3	1.8	2.3	0.0	2.6	5.1	10.2	7.4	7.1	6.8	0.0	0.0	5.1	5.1	10.4	10.6	13.6	0.0	0.0	0.0	0.0	0.0	2.3
Mamit	0.0	2.9	0.0	0.0	2.5	0.0	0.0	0.0	12.0	15.6	17.0	17.3	15.5	5.8	0.0	4.3	5.1	6.2	3.8	4.7	4.2	0.0	0.0	0.0	0.0	0.0	0.0
Dhalai	5.0	0.1	3.8	1.7	1.8	2.1	0.0	14.2	13.2	10.4	11.9	20.0	25.5	28.6	0.0	0.0	1.3	0.0	0.0	2.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ribhoi	0.0	0.0	2.1	1.3	2.8	3.5	0.0	5.0	8.2	6.3	11.7	5.5	7.1	0.1	0.0	1.3	3.2	1.2	0.1	0.0	2.3	0.0	2.1	0.0	0.0	0.0	0.0
Hailakandi	5.9	9.4	6.3	9.2	4.1	10.0	14.5	5.9	11.2	14.1	15.4	14.1	23.7	23.9	0.2	0.0	1.2	1.5	4.1	1.7	3.7	0.0	0.0	1.5	0.0	0.0	0.0
Udalguri	5.0	1.3	7.8	6.0	3.8	2.5	2.7	10.7	12.1	16.4	17.1	17.5	26.3	29.9	0.2	0.0	0.1	1.0	3.9	5.0	2.7	0.0	0.0	0.0	0.0	0.0	0.0
Dakshin Dinajpur	9.5	14.5	16.7	5.8	11.3	3.6	8.3	4.2	12.7	20.3	12.1	19.3	17.9	14.5	0.0	0.0	2.4	2.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Nadia	5.8	14.8	12.6	8.1	7.0	1.0	0.8	11.9	19.3	25.4	23.2	28.7	14.9	21.9	0.1	0.0	1.3	0.8	0.8	0.0	1.6	0.0	0.0	0.0	0.0	0.0	0.0
Godda	1.4	1.5	1.3	3.2	0.8	0.9	0.0	1.4	1.5	1.3	2.6	4.5	2.7	1.1	0.0	0.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Dhenkanal	0.0	4.0	7.0	2.5	0.9	1.8	2.1	7.1	6.7	12.1	13.1	12.0	8.3	7.1	0.0	0.0	0.7	0.8	0.9	0.0	1.0	0.0	0.0	0.8	0.0	0.0	0.0

Gajapati	0.0	2.0	4.9	1.8	3.8	0.0	2.9	0.0	9.8	11.3	8.4	9.8	9.7	14.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Kandhamal	16.7	21.6	10.6	13.4	8.5	3.8	1.5	5.3	6.8	22.5	23.7	14.2	16.7	8.9	0.0	2.7	1.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Balangir	0.0	1.3	1.1	0.5	1.8	1.3	0.5	8.7	11.2	13.0	21.3	23.1	21.1	17.6	0.0	1.3	3.8	1.4	1.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Korba	0.0	7.2	8.2	7.7	9.0	4.1	7.0	4.8	6.6	7.6	8.3	11.2	10.1	6.3	0.0	0.7	0.0	2.5	1.5	2.0	1.4	0.7	0.0	0.6	0.0	0.0	0.0
Mahasamund	0.0	3.5	3.1	4.5	2.4	3.1	0.0	0.0	7.8	7.5	4.5	7.2	5.1	0.0	0.0	0.9	1.9	3.0	1.6	1.0	0.0	0.0	0.6	0.8	0.8	0.0	0.0
Chhatarpur	8.5	11.2	5.3	7.6	3.2	2.5	0.0	2.1	2.4	3.1	1.4	3.2	2.5	1.5	0.0	0.0	0.0	0.0	0.0	0.0	2.3	0.0	0.0	0.0	0.0	0.0	0.0
Rajgarh	13.8	6.4	6.6	7.8	3.1	0.0	1.7	2.4	1.5	1.0	1.3	2.5	2.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.3	0.6	0.0	0.0
Guna	4.8	10.6	6.0	3.1	6.8	2.0	0.0	0.0	3.3	7.6	6.2	4.8	3.9	3.2	0.0	0.0	0.0	1.2	0.0	0.0	0.0	0.0	0.0	0.0	1.0	1.9	0.0
Dohad	6.7	0.0	6.6	3.7	2.9	2.5	1.6	0.0	6.3	0.0	1.2	4.3	3.8	0.0	0.0	0.0	0.0	0.0	2.9	2.5	1.6	0.0	0.0	0.0	0.0	0.0	0.0
Narmada	11.1	3.4	3.2	3.3	3.1	3.6	4.8	0.0	3.4	3.3	3.3	6.5	0.0	0.0	0.0	0.0	3.2	6.7	3.3	3.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Washim	0.0	4.9	11.4	2.4	5.4	0.1	3.8	0.0	2.8	6.8	0.0	2.8	0.0	3.8	0.0	0.1	0.1	2.4	2.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Osmanabad	7.1	4.1	6.4	2.1	2.7	0.2	0.0	0.0	2.1	6.4	4.1	2.9	6.3	3.4	0.0	2.1	2.1	4.0	5.6	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0
Vizianagaram	0.0	0.0	1.4	1.4	0.0	0.0	0.0	0.0	0.0	1.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.7
Y.S.R.	0.0	1.4	1.0	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.1	0.0	0.0	0.0	0.0	0.0	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Raichur	0.0	0.0	0.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.8	0.0	2.3	3.1	3.6	1.0	0.0	0.0	0.0	0.0	0.0
Yadgir	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Wayanad	0.0	4.5	9.3	11.8	8.5	11.4	3.8	0.0	0.0	0.0	2.9	5.7	0.0	3.8	0.0	0.0	9.2	8.8	13.9	14.3	12.0	0.0	0.0	0.0	0.0	0.0	0.0
Virudhunagar	0.0	3.3	2.5	2.1	1.1	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0	1.5	0.0	1.6	6.2	2.2	3.3	4.6	4.7	0.0	1.2	0.1	0.0	0.0	1.5
Ramanathapuram	0.0	0.0	1.6	2.7	4.8	5.0	0.0	0.0	2.4	1.6	2.7	3.2	2.5	3.5	0.0	2.3	1.6	5.3	3.3	0.0	1.8	0.0	0.0	0.0	0.0	0.0	0.0

Table 13 Contraception discontinuation rates - By Caste (35 districts by Ministry of Home Affairs)

	SC	ST	OBC	Others	SC	ST	OBC	Others	SC	ST	OBC	Others	SC	ST	OBC	
	Condom				Pill				IUD				inj.			
Jaisalmer	4.0	7.4	3.0	5.1	2.0	0.0	3.0	2.6	0.0	0.0	1.0	0.8	0.0	0.0	1.0	0.0
Baran	1.4	4.5	7.2	8.5	1.4	1.8	2.8	6.6	0.0	0.0	0.9	0.0	0.7	0.0	0.0	0.0
Muzaffarpur	0.0	0.0	0.7	0.0	0.8	5.6	2.0	2.6	1.5	0.0	0.3	1.7	0.0	0.0	0.4	0.0
Banka	0.0	2.6	1.4	3.6	1.0	2.6	0.5	0.0	0.0	0.0	0.4	0.0	0.0	0.0	0.0	0.0
Aurangabad	1.1	0.0	0.0	0.7	0.6	0.0	0.2	5.7	0.0	0.0	0.5	0.0	0.6	0.0	0.5	0.7
Gaya	0.8	0.0	0.2	2.9	0.6	0.0	1.2	5.4	0.2	0.0	0.1	1.5	0.2	0.0	0.1	0.0
Nawada	0.7	0.0	1.6	2.5	2.0	0.0	1.9	6.2	0.7	0.0	0.9	0.0	1.3	0.0	0.9	0.0
Jamui	0.0	0.0	1.7	1.3	1.3	7.1	2.0	2.6	0.6	0.0	0.0	0.1	0.0	0.0	0.0	0.0
Garhwa	0.0	0.8	1.4	0.0	1.5	0.0	2.5	2.0	0.5	0.0	0.4	2.0	0.0	0.0	0.2	3.9
Chatra	0.4	0.0	3.0	2.2	1.3	2.9	2.8	2.1	0.0	0.0	0.5	0.0	0.9	0.0	0.0	4.2
Giridih	0.5	2.4	4.0	2.3	2.5	6.1	2.5	4.7	0.5	0.0	0.8	0.9	0.0	0.0	0.4	0.9
Bokaro	2.5	3.2	1.8	2.9	3.2	4.4	2.3	5.9	0.3	0.6	0.6	1.2	0.3	0.0	0.0	0.0
Lohardaga	0.0	0.7	1.4	4.5	9.5	2.1	1.4	0.0	0.0	0.7	0.0	0.0	0.0	0.0	0.0	0.0
Purbi Singhbhum	0.6	0.7	0.8	1.7	2.4	0.5	2.3	2.8	0.0	0.0	0.4	0.8	0.0	0.0	0.2	0.0
Palamu	0.7	2.4	1.0	3.1	1.1	0.0	2.4	2.3	0.7	0.0	0.0	3.9	0.0	0.0	0.0	0.0
Latehar	0.0	1.1	1.7	3.4	1.2	0.5	1.7	3.3	0.0	0.5	0.0	0.0	0.0	0.0	0.0	3.3
Hazaribagh	2.0	2.6	3.7	2.6	3.5	2.0	4.3	3.3	0.5	2.0	0.6	2.0	0.0	0.7	0.0	0.0
Ramgarh	2.3	0.0	2.5	3.7	2.3	1.5	3.2	3.6	2.3	1.5	1.9	1.9	0.0	0.0	0.3	0.0
Dumka	0.0	0.3	1.7	0.0	3.3	3.3	2.8	0.0	0.0	0.3	0.0	0.0	0.0	0.0	0.0	0.0
Ranchi	5.1	3.6	1.2	3.7	5.1	5.2	3.1	4.2	2.5	0.9	1.5	1.3	1.7	0.5	0.5	0.4
Khunti	0.3	1.5	1.3	0.5	5.2	4.0	2.7	1.0	0.3	1.5	0.0	1.0	0.0	0.5	0.0	0.0
Gumla	1.8	1.8	1.9	0.0	3.5	3.6	4.9	5.7	0.0	1.1	1.9	0.0	0.0	1.1	0.6	0.0
Simdega	2.9	0.5	1.4	0.0	0.0	1.5	2.9	0.0	2.9	0.5	2.8	0.0	0.0	0.0	0.0	0.0
Pashchimi Singhbhum	5.1	0.3	1.8	0.0	2.6	4.3	3.0	0.2	0.0	1.2	1.8	2.8	0.0	0.0	0.0	5.6
Koraput	1.5	1.7	0.0	6.3	16.9	13.9	13.1	13.6	0.0	0.2	1.0	0.0	0.0	0.0	0.0	0.0
Malkangiri	3.7	4.0	5.9	3.9	8.7	9.7	14.7	16.6	1.2	1.8	2.9	0.0	1.2	0.0	0.0	0.0
Rajnandgaon	22.8	26.6	28.4	44.0	15.2	17.0	15.5	16.6	1.0	2.4	3.4	8.1	0.0	0.0	0.0	2.8
Uttar Bastar Kanker	0.2	0.0	0.1	0.0	0.0	3.6	2.4	2.1	0.0	0.0	2.3	3.2	0.0	0.0	0.0	0.0
Bastar	7.0	2.1	6.6	14.0	2.3	4.9	7.0	14.0	0.0	0.5	1.2	5.8	0.0	0.0	0.0	0.0
Narayanpur	25.0	10.3	10.8	25.0	0.0	5.8	11.1	25.0	0.0	1.4	0.1	0.0	0.0	0.0	0.0	0.0
Dantewada	27.3	3.0	1.7	0.3	20.0	2.7	4.9	0.3	10.0	0.4	3.2	0.0	0.0	0.4	0.0	0.0
Bijapur	23.1	15.8	11.1	0.0	25.0	8.9	11.1	0.0	8.3	0.7	0.0	0.0	0.0	0.0	0.0	0.0
Gadchiroli	4.5	2.9	3.6	0.0	0.0	1.5	0.0	2.9	0.0	1.5	1.8	0.0	0.0	0.0	0.0	0.0
Khammam	0.0	0.0	0.0	0.0	0.0	0.0	0.5	2.5	0.0	0.0	0.0	5.0	0.0	0.0	0.0	2.5
Visakhapatnam	0.0	0.0	0.3	0.6	0.0	0.0	0.8	1.7	1.8	0.0	0.0	1.7	0.0	0.0	0.3	0.0

Table 14 Contraception discontinuation rates - By Residence (35 districts by Ministry of Home Affairs)

	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural
	Condom		Pill		IUD		inj.	
Jaisalmer	9.0	3.9	3.0	2.7	3.0	0.4	0.0	0.4
Baran	5.5	5.7	2.4	2.4	0.8	0.6	0.8	0.0
Muzaffarpur	0.0	0.5	5.6	1.7	0.0	0.8	0.0	0.3
Banka	0.0	1.5	0.0	0.7	0.0	0.3	0.0	0.0
Aurangabad	1.4	0.3	1.4	1.5	0.1	0.2	0.0	0.5
Gaya	0.5	0.8	4.2	1.1	0.5	0.3	0.0	0.2
Nawada	2.4	1.2	3.6	1.9	1.2	0.7	2.4	0.7
Jamui	0.0	1.4	0.0	2.0	2.4	0.0	0.0	0.2
Garhwa	0.1	1.2	0.0	2.0	0.0	0.5	0.1	0.3
Chatra	13.2	1.3	8.7	1.7	0.2	0.1	0.0	0.4
Giridih	5.9	3.1	8.5	2.8	5.2	0.3	2.6	0.2
Bokaro	3.7	0.8	5.9	0.7	1.2	0.3	0.0	0.1
Lohardaga	3.2	0.5	0.0	2.7	3.3	0.5	0.0	0.0
Purbi Singhbhum	1.5	0.1	1.8	1.6	0.5	0.0	0.1	0.0
Palamu	2.6	1.2	3.2	1.4	2.6	0.4	0.0	0.0
Latehar	7.4	0.8	3.7	1.0	0.0	0.3	0.0	0.3
Hazaribagh	4.8	2.9	7.1	3.1	2.4	0.7	0.0	0.1
Ramgarh	3.1	1.2	3.5	2.1	1.5	1.5	0.8	0.3
Dumka	0.0	0.9	6.3	2.6	0.0	0.1	0.0	0.0
Ranchi	3.5	2.1	4.9	3.4	1.3	1.2	0.7	0.4
Khunti	3.7	1.1	0.0	3.2	0.0	1.1	0.0	0.0
Gumla	0.0	1.8	4.8	4.0	2.4	1.4	2.4	0.6
Simdega	3.2	0.7	0.1	1.8	6.1	0.4	0.0	0.0
Pashchimi Singhbhum	0.0	0.8	3.3	4.0	3.3	1.0	1.6	0.0
Koraput	4.0	1.7	14.5	14.0	1.6	0.2	0.0	0.0
Malkangiri	3.7	3.5	7.5	10.6	3.4	1.8	3.4	0.0
Rajnandgaon	31.0	27.2	15.0	15.9	5.6	2.4	0.5	0.0
Uttar Bastar	0.0	0.0	4.1	2.7	4.1	0.5	0.0	0.0
Bastar	11.3	3.0	8.9	5.5	3.0	0.4	0.0	0.0
Narayanpur	25.0	8.9	18.8	5.1	0.0	0.0	0.0	0.0
Dantewada	3.4	3.1	6.9	2.7	5.2	0.7	0.0	0.3
Bijapur	20.0	15.0	10.0	9.4	4.5	0.6	0.0	0.0
Gadchiroli	13.2	1.9	0.0	1.3	0.1	0.6	0.0	0.0
Khammam	0.0	0.0	1.7	0.0	1.8	0.0	0.0	0.3
Visakhapatnam	0.3	0.3	0.8	0.6	1.1	0.0	0.0	0.3

Table 15 Contraception discontinuation rates - By Education (35 districts by Ministry of Home Affairs)

	No edu.	Primary	Secondary	Higher	No edu.	Primary	Secondary	Higher	No edu.	Primary	Secondary	Higher	No edu.	Primary	Secondary	Higher
	Condom				Pill				IUD				inj.			
Jaisalmer	2.6	7.3	9.2	12.5	2.1	1.7	2.3	12.5	0.5	1.9	0.1	0.0	0.5	0.0	0.0	0.0
Baran	3.5	3.5	9.5	14.0	1.6	2.7	4.1	3.8	0.3	0.0	1.2	0.0	0.0	0.0	1.2	0.0
Muzaffarpur	0.0	1.1	1.2	0.0	0.7	1.1	4.2	3.3	0.0	1.1	2.0	0.0	0.5	0.0	0.0	0.0
Banka	0.9	2.9	1.9	0.3	0.7	1.4	0.5	0.2	0.2	0.0	0.5	0.2	0.0	0.0	0.0	0.0
Aurangabad	0.3	0.0	0.7	0.2	0.0	1.5	2.8	2.9	0.6	0.0	0.0	0.0	0.0	0.0	1.0	0.0
Gaya	0.0	0.8	0.8	8.7	1.1	3.1	2.2	0.0	0.1	0.8	0.6	0.0	0.1	0.0	0.2	0.0
Nawada	0.3	1.4	2.8	9.7	0.3	5.7	5.1	0.0	0.5	0.0	1.7	0.0	0.3	0.0	2.8	0.0
Jamui	0.6	1.4	1.9	9.8	1.1	1.4	3.8	0.8	0.0	0.0	0.0	0.8	0.0	1.4	0.0	0.0
Garhwa	0.0	3.3	2.1	4.3	2.0	1.6	1.5	0.0	0.2	0.0	0.9	0.0	0.2	0.0	0.3	4.3
Chatra	0.5	2.1	3.8	8.1	0.5	2.1	4.7	5.4	0.0	2.1	0.0	0.0	0.3	0.0	1.3	0.0
Giridih	1.4	5.2	4.9	11.5	2.8	1.3	4.6	6.0	0.0	1.7	0.9	7.7	0.2	0.0	0.7	0.0
Bokaro	1.6	2.7	2.2	5.0	2.8	3.3	3.3	5.0	0.2	0.7	0.7	3.4	0.0	0.0	0.2	0.0
Lohardaga	0.0	0.0	1.1	0.0	1.7	9.1	2.2	4.7	0.0	4.5	1.1	0.3	0.0	0.0	0.0	0.0
Purbi Singhbhum	0.6	0.0	0.9	2.8	0.6	2.7	2.0	3.2	0.0	0.0	0.4	0.5	0.0	0.0	0.1	0.0
Palamu	1.1	0.0	2.7	0.0	0.9	3.4	1.6	5.0	0.4	0.0	0.8	3.3	0.0	0.0	0.0	0.0
Latehar	0.0	0.0	0.9	13.3	0.0	0.0	3.6	6.3	0.0	0.0	0.9	0.0	0.0	0.0	0.0	0.0
Hazaribagh	0.8	3.1	5.0	6.3	2.9	1.9	5.0	5.3	0.6	0.6	1.0	3.2	0.0	0.6	0.0	0.0
Ramgarh	0.5	1.4	2.7	7.5	1.0	2.8	3.1	7.6	1.4	1.4	1.9	1.9	0.0	0.0	1.1	0.0
Dumka	0.2	0.6	1.4	7.2	3.1	0.6	4.3	3.9	0.0	0.0	0.4	0.0	0.0	0.0	0.0	0.0
Ranchi	1.0	3.7	3.1	3.9	3.5	6.2	3.9	3.9	0.4	0.0	1.5	3.0	0.2	0.0	0.6	0.9
Khunti	0.0	0.1	2.5	7.6	0.7	3.5	6.0	0.0	0.0	0.2	2.5	0.0	0.0	0.0	0.0	0.0
Gumla	0.4	1.6	2.3	4.5	3.0	6.6	5.5	0.0	0.9	3.3	0.9	8.7	0.9	1.7	0.5	0.0
Simdega	0.7	0.0	0.8	0.0	1.4	2.7	0.8	9.1	0.7	2.6	0.9	0.0	0.0	0.0	0.0	0.0
Pashchimi Singhbhum	0.0	3.2	1.9	0.0	1.3	8.1	6.4	14.3	1.3	0.0	1.1	10.7	0.0	0.0	0.0	3.8
Koraput	1.4	0.0	2.5	16.3	14.3	14.0	12.2	24.6	0.2	0.0	0.6	4.3	0.0	0.0	0.0	0.0
Malkangiri	2.3	9.4	6.6	33.3	8.9	6.3	16.7	0.0	1.5	0.0	1.3	0.0	0.0	3.0	0.0	0.0
Rajnandgaon	14.1	22.9	33.2	50.9	11.0	16.2	18.3	12.7	1.5	0.5	3.5	12.9	0.0	0.0	0.2	0.0
Uttar Bastar	0.0	0.0	0.6	0.0	1.3	1.0	5.2	3.3	0.7	0.0	0.6	3.6	0.0	0.0	0.0	0.0
Bastar	2.0	2.3	8.7	17.5	4.3	5.2	9.1	12.8	0.0	1.5	1.4	7.6	0.0	0.0	0.0	0.0
Narayanpur	5.9	9.4	22.3	0.0	3.9	10.0	13.6	0.0	2.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0
Dantewada	1.7	4.8	5.8	10.0	2.2	6.9	5.9	10.0	0.4	4.8	2.9	10.0	0.0	2.3	1.5	0.0
Bijapur	10.0	14.8	20.0	50.0	6.8	10.6	12.9	0.0	0.0	0.0	1.4	0.0	0.0	0.0	0.0	0.0
Gadchiroli	0.0	0.0	4.2	11.1	0.0	0.0	2.1	0.0	0.0	0.0	2.1	0.0	0.0	0.0	0.0	0.0
Khammam	0.0	0.0	0.0	0.2	0.6	0.0	0.6	0.0	0.0	0.0	1.1	0.0	0.0	0.0	0.0	3.3
Visakhapatnam	0.4	0.0	0.0	1.2	0.8	0.0	0.4	2.4	0.0	0.0	1.5	0.0	0.4	0.0	0.0	0.0

Table 16 Contraception discontinuation rates - By Wealth (35 districts by Ministry of Home Affairs)

	Poorest	Poorer	Middle	Richer	Richest	Poorest	Poorer	Middle	Richer	Richest	Poorest	Poorer	Middle	Richer	Richest	Poorest	Poorer	Middle	Richer	Richest
	Condom					**Pill**					**IUD**					**inj.**				
Jaisalmer	3.7	5.0	4.8	9.9	2.9	3.8	1.3	1.6	2.6	3.3	1.2	0.0	1.6	0.0	3.3	1.2	0.0	0.0	0.0	3.2
Baran	4.5	4.8	2.5	6.9	11.2	0.0	1.4	4.9	3.8	2.8	0.0	1.0	0.8	1.0	1.4	0.0	0.5	0.0	0.0	0.0
Muzaffarpur	0.6	0.5	0.9	0.0	0.0	0.3	1.7	2.8	8.1	6.3	0.0	1.0	2.8	1.4	0.0	0.6	0.0	0.0	0.0	0.0
Banka	1.0	2.0	1.4	3.7	0.0	0.8	0.7	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Aurangabad	0.7	0.0	0.0	1.1	0.1	0.0	1.7	0.8	5.4	3.1	0.0	0.6	0.0	1.1	0.2	0.3	0.0	0.8	1.1	0.1
Gaya	0.4	1.1	0.4	1.9	1.9	0.9	0.8	2.1	6.9	0.0	0.3	0.3	0.4	0.0	0.0	0.3	0.0	0.0	0.0	0.0
Nawada	1.0	0.6	0.0	2.6	15.0	1.0	3.1	1.1	3.9	10.0	0.0	0.6	1.1	2.6	0.2	0.3	1.8	0.0	2.6	0.0
Jamui	0.6	2.2	2.9	3.6	0.0	0.3	3.7	7.1	0.1	0.0	0.0	0.7	0.0	3.3	0.0	0.3	0.0	0.0	0.0	0.0
Garhwa	0.8	2.7	0.0	0.1	3.0	1.9	1.6	0.0	3.2	0.0	0.5	0.0	0.0	0.0	16.7	0.2	0.0	1.6	0.0	9.1
Chatra	0.4	2.7	7.4	2.9	11.1	0.9	3.3	2.9	2.9	19.2	0.2	0.7	0.0	0.0	0.3	0.4	0.0	1.5	0.0	0.0
Giridih	3.1	2.6	3.2	3.4	10.6	1.9	4.0	1.6	8.5	7.5	0.0	0.2	1.6	1.7	4.3	0.3	0.0	0.6	0.0	2.1
Bokaro	1.4	2.2	0.8	2.9	5.4	0.9	2.8	3.0	4.4	7.0	0.0	0.6	0.4	0.5	2.1	0.2	0.0	0.0	0.5	0.4
Lohardaga	0.7	0.0	0.0	4.5	0.0	2.0	1.9	9.5	0.5	0.0	0.7	1.9	0.2	4.1	0.0	0.0	0.0	0.0	0.0	0.0
Purbi Singhbhum	0.6	0.0	0.5	1.1	1.9	0.8	2.7	1.4	0.7	3.6	0.0	0.0	0.0	0.4	1.0	0.0	0.0	0.0	0.0	0.2
Palamu	0.7	2.5	2.2	3.4	0.0	1.6	1.5	2.2	1.7	2.2	0.3	0.0	2.2	0.0	6.7	0.0	0.0	0.0	0.0	0.0
Latehar	0.0	1.5	6.1	10.0	8.3	0.3	1.5	3.2	9.1	8.3	0.0	0.0	0.0	0.0	0.2	0.3	0.0	0.0	0.0	0.0
Hazaribagh	1.4	4.1	2.7	3.7	6.0	3.5	3.0	3.3	3.7	8.0	0.7	1.4	0.9	0.0	3.9	0.0	0.0	0.3	0.0	0.0
Ramgarh	0.0	1.8	2.4	4.1	4.7	1.8	1.2	3.1	4.1	4.6	1.8	0.6	1.2	3.1	3.3	0.0	0.6	0.6	1.0	1.7
Dumka	0.2	3.1	5.3	0.0	0.2	2.3	3.2	3.5	11.4	8.2	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ranchi	1.3	3.9	1.8	1.9	4.7	4.2	3.0	2.9	5.8	4.0	0.4	1.4	0.7	1.6	2.8	0.7	0.6	0.0	0.3	0.6
Khunti	1.0	0.0	0.4	0.4	20.0	3.4	3.8	0.0	5.9	0.0	1.0	1.9	0.0	0.4	0.0	0.0	0.0	0.0	0.0	0.0
Gumla	1.4	2.9	2.2	3.0	7.7	3.2	7.7	7.0	0.0	0.5	0.6	1.9	2.4	3.0	14.3	0.3	1.9	2.4	3.1	0.0
Simdega	0.4	4.3	0.0	0.2	0.0	1.7	2.1	5.9	0.0	0.0	0.4	2.1	0.0	6.3	0.0	0.0	0.0	0.0	0.0	0.0
Pashchimi Singhbhum	0.2	3.2	0.0	4.1	0.0	3.1	6.4	2.1	6.1	8.8	1.2	0.0	0.0	2.0	8.8	0.0	0.0	0.0	0.0	5.9
Koraput	1.2	0.6	6.0	4.3	2.2	14.7	14.3	14.5	10.0	14.8	0.0	0.7	1.2	0.0	2.0	0.0	0.0	0.0	0.0	0.0
Malkangiri	3.4	4.3	7.0	5.0	0.0	8.7	9.8	11.9	25.1	0.0	1.9	1.1	0.0	5.6	0.0	0.0	1.1	0.0	0.0	0.0
Rajnandgaon	27.6	22.2	33.7	24.0	37.8	10.9	17.0	13.2	16.5	21.3	1.2	3.1	0.8	1.9	8.3	0.0	0.0	0.0	0.0	0.6
Uttar Bastar Kanker	0.0	0.0	0.0	2.1	0.0	2.0	1.6	3.7	2.1	6.4	0.0	1.5	0.0	2.1	2.1	0.0	0.0	0.0	0.0	0.0
Bastar	1.7	6.0	4.0	10.7	11.4	6.1	3.7	4.1	7.0	12.8	0.0	1.4	0.0	1.7	5.1	0.0	0.0	0.0	0.0	0.0

Narayanpur	5.1	18.3	12.5	33.3	0.0	5.1	6.3	22.2	14.3	25.0	1.6	5.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Dakshin Bastar Dantewada	1.8	5.7	8.0	4.2	8.0	1.3	5.7	12.5	4.2	12.0	0.4	3.7	4.2	0.0	12.0	0.0	1.9	0.0	0.0	0.0
Bijapur	13.4	15.3	29.4	8.3	25.0	9.3	10.9	18.8	15.4	0.1	1.0	0.0	0.0	0.1	12.5	0.0	0.0	0.0	0.0	0.0
Gadchiroli	2.6	1.8	2.2	3.5	10.2	0.1	1.9	2.2	0.1	0.0	0.0	1.9	2.2	3.8	0.0	0.0	0.0	0.0	0.0	0.0
Khammam	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.6	1.4	0.0	0.0	0.0	0.6	1.4	0.0	0.0	0.0	0.0	1.4
Visakhapatnam	0.0	1.0	0.0	0.0	0.4	0.0	1.0	0.0	0.6	1.3	0.0	0.0	0.0	0.0	1.8	0.0	1.0	0.0	0.0	0.0

Table 17 Contraception discontinuation rates - By Number of living children at 1st use (35 districts by Ministry of Home Affairs)

	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5	0	1	2	3	4	5
	Condom						Pill						IUD						inj.					
Jaisalmer	11.1	21.4	5.2	4.4	2.8	0.0	0.0	13.6	8.3	2.2	0.0	0.0	0.0	4.5	2.7	0.1	0.0	0.0	0.0	0.0	2.7	0.0	0.1	5.9
Baran	66.7	28.6	6.7	2.1	1.7	0.0	0.0	10.7	4.4	1.4	3.3	4.2	33.3	1.8	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0.7	0.0	0.0
Muzaffarpur	0.0	14.8	0.0	4.3	0.0	0.0	100.0	51.9	13.5	4.3	5.6	7.4	0.0	14.8	18.9	0.0	0.0	0.0	0.0	0.0	5.4	0.0	5.6	0.0
Banka	50.0	16.7	12.3	1.4	2.1	0.0	33.3	9.5	2.4	2.8	0.0	0.1	0.0	0.5	2.4	0.0	0.0	3.4	0.0	0.0	0.0	0.0	0.0	0.0
Aurangabad	33.3	10.7	1.8	1.1	0.0	0.0	66.7	12.5	5.4	1.1	1.5	3.3	0.0	25.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.4	0.0	0.0
Gaya	0.0	16.8	2.4	1.4	0.0	0.0	0.0	18.3	5.7	1.0	1.7	5.1	0.0	2.4	0.8	0.5	0.0	1.3	0.0	2.3	1.6	0.0	0.0	0.0
Nawada	30.0	14.9	4.7	0.0	1.9	0.0	25.0	14.4	9.3	1.6	5.6	3.1	0.0	7.1	2.3	1.7	0.0	0.2	0.0	7.1	4.8	0.0	0.0	0.0
Jamui	13.9	15.4	5.4	2.0	0.0	0.0	11.1	28.0	7.8	2.0	0.1	7.7	0.0	7.1	0.0	0.0	0.0	0.0	0.0	0.0	5.2	0.0	0.1	0.0
Garhwa	25.0	23.8	1.3	1.7	0.0	0.0	0.0	4.8	2.5	4.1	6.6	10.8	0.0	0.0	3.8	0.0	1.3	0.0	0.0	4.8	1.3	0.0	0.0	2.8
Chatra	50.0	26.5	7.9	1.0	0.0	0.0	0.0	33.3	3.2	4.0	0.0	4.3	20.0	0.1	1.6	0.0	0.0	0.0	0.0	3.7	3.2	0.0	0.0	0.0
Giridih	25.8	16.3	6.1	1.1	1.2	0.0	9.7	12.1	6.2	4.7	2.9	0.0	0.0	2.8	0.9	1.8	0.0	2.5	0.0	1.4	0.9	0.7	0.0	0.0
Bokaro	28.6	18.8	1.1	1.2	0.0	0.0	42.9	21.8	5.6	1.2	1.5	0.1	0.0	4.0	0.7	1.2	0.8	0.0	0.0	1.0	0.0	0.4	0.0	0.0
Lohardaga	0.0	9.7	5.9	0.0	0.0	0.0	50.0	20.8	5.9	5.9	6.2	16.7	0.0	19.4	5.9	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Purbi Singhbhum	23.1	7.3	0.8	1.6	0.1	0.0	7.7	13.5	3.3	2.4	1.7	0.0	0.0	3.1	0.4	0.0	0.0	0.0	0.0	1.1	0.0	0.0	0.0	0.0
Palamu	18.9	17.6	1.2	3.4	0.0	0.0	0.4	17.6	3.7	6.8	0.0	10.5	0.0	2.9	2.4	0.0	7.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0
Latehar	0.0	11.1	4.8	0.0	0.1	0.0	0.0	23.3	4.1	2.4	4.0	0.0	0.0	10.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.7	0.0
Hazaribagh	55.0	20.1	2.0	1.8	0.0	0.0	28.6	19.8	6.2	1.8	4.0	0.0	0.0	8.3	2.1	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.0	0.0
Ramgarh	9.5	10.7	4.2	2.1	0.0	0.0	10.0	17.4	4.3	2.1	5.0	0.0	0.0	10.5	3.1	2.1	2.6	0.0	0.0	0.0	1.0	1.0	0.0	0.0
Dumka	44.4	7.3	1.3	0.0	0.0	0.0	44.4	19.5	1.3	7.2	4.3	6.9	0.0	2.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Ranchi	25.8	15.2	2.0	0.4	1.9	0.0	17.6	16.2	8.0	3.5	1.9	0.0	11.1	4.6	3.4	0.9	0.0	0.0	0.0	3.0	0.8	0.0	1.0	0.0
Khunti	6.7	8.0	0.2	0.0	0.0	0.0	6.7	20.0	3.8	6.5	0.1	0.0	0.0	4.0	0.4	3.0	5.5	0.1	0.0	0.0	0.0	0.0	0.0	0.0
Gumla	28.6	11.6	0.2	4.0	0.0	0.0	32.8	20.0	4.1	6.2	12.2	14.9	0.5	5.5	2.3	6.1	0.5	0.0	14.3	5.3	4.0	0.0	0.0	0.0
Simdega	0.0	12.5	5.9	0.0	0.0	0.0	100.0	6.3	5.9	2.9	0.0	0.0	0.0	6.3	11.8	2.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Pashchimi Singhbhum	0.0	7.0	5.0	5.6	0.0	0.0	100.0	40.7	17.2	11.0	0.1	15.0	0.0	10.3	6.8	5.5	7.1	5.3	0.0	3.7	0.0	0.0	0.0	0.0
Koraput	12.5	3.5	2.5	0.0	3.2	0.0	12.5	32.0	14.2	10.1	12.7	7.2	0.0	1.0	0.0	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0.0	0.0
Malkangiri	21.0	2.8	2.8	2.5	0.0	0.0	5.4	25.6	5.9	7.5	0.0	12.5	6.0	2.7	0.1	2.6	0.0	0.0	0.0	0.9	0.0	0.0	0.0	0.0
Rajnandgaon	79.3	45.1	16.2	4.1	12.3	0.0	18.3	33.8	22.1	5.3	3.1	0.0	3.5	8.5	3.2	0.0	0.0	0.0	0.0	0.4	0.0	0.0	0.0	0.0
Uttar Bastar Kanker	0.0	1.6	0.0	0.0	0.0	0.0	33.3	16.9	3.2	1.3	0.1	0.0	0.0	5.6	1.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Bastar	40.0	23.0	4.8	1.9	0.0	3.6	26.7	28.7	10.3	4.4	4.7	3.6	0.0	5.7	0.8	1.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Narayanpur	63.3	39.6	9.1	11.1	0.0	0.0	33.3	23.6	10.0	0.0	0.0	0.0	0.0	8.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Dakshin Bastar Dantewada	33.3	17.0	7.4	0.0	7.4	0.0	33.3	14.5	12.5	2.4	3.7	0.0	0.0	2.9	7.5	2.4	0.0	0.0	0.0	0.0	2.5	0.0	0.0	0.0
Bijapur	77.4	34.2	8.0	6.7	0.0	0.0	28.6	31.3	4.0	3.3	0.0	0.0	7.1	5.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Gadchiroli	0.0	19.0	2.8	0.0	0.0	0.0	0.0	6.2	1.4	0.0	0.0	0.0	0.0	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Khammam	0.0	0.0	0.0	0.0	0.0	0.0	0.0	11.4	0.0	0.0	0.0	0.0	0.0	5.3	0.5	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.0	0.0
Visakhapatnam	0.0	0.0	0.3	0.0	0.0	0.0	0.0	2.8	1.1	0.0	0.0	0.0	0.0	8.1	0.3	0.0	0.0	0.0	0.0	0.0	0.3	0.0	0.0	0.0

Table 18 Contraception discontinuation rates - By Age (35 districts by Ministry of Home Affairs)

	15-19	20-24	25-29	30-34	35-39	40-44	45-49	15-19	20-24	25-29	30-34	35-39	40-44	45-49	15-19	20-24	25-29	30-34	35-39	40-44	45-49	15-19	20-24	25-29	30-34	35-39	40-44	45-49
	Condom							Pill							IUD							inj.						
Jaisalmer	7.7	7.8	3.3	7.1	2.1	6.7	0.0	0.0	3.1	5.0	1.8	2.1	3.3	4.2	0.0	0.0	0.0	1.8	2.1	0.1	4.2	0.0	0.0	1.7	0.0	0.0	0.0	0.0
Baran	8.5	9.4	7.8	7.8	2.0	1.4	0.0	0.0	1.6	3.8	3.3	3.1	1.4	2.7	0.0	0.8	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.0	0.0	0.0
Muzaffarpur	1.7	0.8	0.0	0.8	0.9	0.0	0.0	0.0	0.8	4.8	0.8	2.7	0.0	2.7	0.0	0.8	1.8	0.8	0.9	0.0	0.0	0.0	0.0	1.2	0.0	0.0	0.0	0.0
Banka	2.0	1.3	4.8	0.7	0.0	1.1	0.0	0.0	0.7	1.6	0.7	0.9	0.0	1.1	0.0	0.0	0.8	0.0	0.0	1.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Aurangabad	0.0	0.0	0.7	1.5	0.0	0.0	0.0	0.0	0.8	2.1	1.5	0.9	2.4	2.1	0.0	0.0	0.7	0.7	0.9	0.0	0.0	0.0	0.0	0.7	0.0	0.9	1.2	0.0
Gaya	0.0	1.6	0.6	1.1	0.0	1.9	0.0	0.0	0.3	1.8	2.3	2.6	2.6	0.6	0.0	0.3	0.6	0.4	0.0	0.0	0.6	0.0	0.3	0.0	0.0	0.4	0.0	0.0
Nawada	2.0	2.9	0.9	1.1	1.0	0.0	0.0	0.0	2.2	1.7	3.2	0.0	4.7	3.8	0.0	0.8	0.8	0.0	0.0	0.0	2.5	0.0	3.0	0.0	1.0	1.0	0.0	0.0
Jamui	0.0	0.0	1.4	2.9	2.8	0.0	0.0	0.0	1.7	3.6	0.0	1.4	3.4	1.6	0.0	0.0	0.0	0.0	1.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.6
Garhwa	0.0	1.9	0.7	1.3	0.9	0.9	0.0	0.0	1.0	0.0	3.1	1.8	4.7	2.4	0.0	0.0	1.9	0.0	0.0	0.9	0.0	0.0	0.0	0.0	0.6	0.9	0.0	1.2

Chatra	0.0	1.1	3.0	2.5	3.7	1.5	0.0	0.0	2.8	0.6	3.3	4.7	1.6	1.8	0.0	0.0	0.0	0.8	0.9	0.0	0.0	0.0	0.6	0.0	0.0	0.9	0.0	1.8
Giridih	2.5	7.7	3.6	4.6	0.8	1.1	1.0	0.0	2.8	4.5	4.6	4.9	2.3	2.0	0.0	0.0	1.3	0.0	0.8	3.4	1.0	0.0	0.6	0.0	1.4	0.0	0.0	0.0
Bokaro	3.2	1.3	2.6	2.4	1.8	2.9	1.7	0.0	1.8	1.1	4.0	5.2	5.2	3.9	0.0	0.4	0.0	0.8	0.9	1.2	0.6	0.0	0.0	0.0	0.4	0.0	0.0	0.6
Lohardaga	0.0	2.0	0.0	0.0	2.6	0.0	0.0	0.0	3.9	2.0	0.0	5.3	0.0	3.8	0.0	1.9	0.0	2.2	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Purbi Singhbhum	0.0	0.9	1.3	1.2	1.3	0.5	0.6	0.0	0.9	3.5	1.3	0.9	2.2	2.5	0.0	0.0	0.0	0.6	0.3	0.0	0.6	0.0	0.5	0.0	0.0	0.0	0.0	0.0
Palamu	0.0	1.4	1.8	4.0	1.3	0.0	0.0	0.0	1.4	2.7	2.0	3.2	0.6	0.0	0.0	0.0	0.0	1.5	0.0	3.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Latehar	0.0	1.3	1.1	0.0	1.6	0.0	3.0	0.0	0.0	1.1	1.3	1.6	1.8	3.0	0.0	1.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.6	0.0	0.0	0.0
Hazaribagh	0.0	6.5	4.7	2.5	1.5	1.5	0.7	0.0	1.5	5.1	7.4	5.0	1.5	2.1	0.1	0.0	2.5	1.5	0.5	0.0	1.4	0.0	0.0	0.4	0.0	0.0	0.0	0.0
Ramgarh	0.0	2.1	1.7	3.8	1.9	1.3	1.4	0.0	1.1	1.7	3.7	3.8	2.7	4.2	0.0	1.1	1.7	2.8	1.9	1.4	1.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Dumka	0.0	2.5	1.9	0.6	0.0	0.0	0.0	0.1	3.1	1.9	2.0	7.5	4.0	2.7	0.0	0.0	0.0	0.0	0.0	0.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ranchi	0.0	4.1	2.9	3.5	0.7	3.3	2.0	2.6	3.9	2.6	5.1	4.5	3.8	5.9	0.0	1.7	1.1	1.0	1.0	1.4	2.5	0.0	1.0	0.6	0.6	0.7	0.0	0.0
Khunti	0.1	3.4	5.1	0.1	0.0	0.0	0.0	0.0	3.4	5.2	5.6	1.8	2.5	3.3	0.0	0.0	1.6	0.0	1.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Gumla	4.0	2.4	1.0	2.7	0.0	1.7	1.3	3.8	3.6	2.0	4.5	7.5	6.8	5.1	0.0	0.0	2.0	0.0	1.3	5.1	1.3	0.0	0.0	3.1	0.0	1.3	0.0	0.0
Simdega	0.0	2.6	3.0	0.0	0.0	1.8	0.0	0.0	2.6	1.5	1.8	3.4	1.7	0.0	0.0	0.0	1.6	0.1	0.0	0.1	3.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Pashchimi Singhbhum	0.0	0.0	1.5	1.5	1.4	0.0	0.0	0.0	0.0	5.5	5.4	2.9	8.1	3.4	0.0	0.0	2.5	0.0	2.2	2.3	1.1	0.0	0.0	0.0	0.0	1.4	0.0	0.0
Koraput	0.0	3.4	4.1	1.6	1.8	0.0	0.0	3.7	11.6	14.9	13.8	13.8	21.4	14.8	0.0	0.0	1.4	0.0	0.0	0.0	1.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Malkangiri	5.3	6.7	6.6	0.0	4.3	2.0	2.6	4.7	9.5	6.8	15.5	8.3	12.2	10.8	0.0	0.0	2.7	3.0	0.0	4.1	0.0	0.0	0.0	1.3	0.0	0.0	0.0	0.0
Rajnandgaon	18.3	30.2	44.7	30.3	22.3	9.2	10.9	0.0	8.5	18.1	20.4	19.2	19.3	10.2	0.0	1.5	4.8	1.6	5.4	0.8	2.9	0.0	0.0	0.0	0.5	0.0	0.0	0.0
Uttar Bastar Kanker	0.0	1.5	0.1	0.0	0.0	0.0	0.0	0.0	3.2	5.2	2.4	2.7	0.0	1.4	0.0	1.6	0.0	0.0	1.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Bastar	4.8	8.8	4.5	4.9	1.7	0.0	4.4	0.0	8.1	7.6	7.3	5.7	1.7	5.3	0.0	0.0	0.9	0.6	1.7	0.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Narayanpur	33.3	17.6	16.7	12.5	0.0	8.3	0.0	0.0	5.9	8.3	12.5	7.7	0.0	0.0	0.0	0.0	0.0	5.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Dakshin Bastar Dantewada	0.0	5.2	6.2	1.6	3.6	0.0	6.3	0.0	1.7	3.7	4.9	3.6	3.8	6.1	0.0	0.0	1.3	1.6	1.8	3.8	3.1	0.0	0.0	1.3	1.6	0.0	0.0	0.0
Bijapur	25.0	20.4	21.3	15.2	13.0	4.8	9.5	0.0	10.2	15.3	15.4	9.1	0.0	4.8	0.0	2.2	2.3	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Gadchiroli	0.0	3.7	6.0	5.9	0.1	3.8	3.7	0.0	4.0	0.2	3.2	0.0	0.0	0.0	0.0	0.0	0.0	3.2	3.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Khammam	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.3	0.0	0.0	0.0	0.0	0.0	0.0	1.1	1.4	0.0	0.0	0.0	0.0	0.0	0.0	1.4	0.0	0.0	0.0
Visakhapatnam	0.0	0.0	0.8	0.0	0.8	0.0	0.0	0.0	0.0	0.0	1.4	0.8	0.0	2.9	0.0	0.0	0.0	0.0	0.9	2.0	0.0	0.0	0.0	0.0	0.8	0.0	0.0

79

Table 19 Contraception discontinuation rates - PILL (30 districts by NITI Aayog)

Pills- Caste	Schedule Caste	Schedule Tribe	Obc	Others	
Ever Use	12.7%	10.9%	8.3%	36.7%	
Current Use	5.7%	5.3%	3.9%	20.2%	
Discontinuation	7.0%	5.6%	4.4%	16.5%	
Pills-Resi	Urban	Rural			
Ever Use	15.6%	15.2%			
Current Use	7.6%	8.9%			
Discontinuation	8.0%	6.3%			
Pills-Edu	No Education	Primary	Secondary	Higher	
Ever Use	10.8%	17.1%	21.8%	14.3%	
Current Use	6.0%	9.4%	12.8%	7.8%	
Discontinuation	4.7%	7.6%	9.0%	6.6%	
Pill- Wealth	Poorest	Poorer	Middle	Richer	Richest
Ever Use	10.7%	19.9%	18.5%	20.8%	13.7%
Current Use	6.1%	12.3%	10.4%	10.0%	6.4%
Discontinuation	4.6%	7.6%	8.1%	10.8%	7.3%
Pills - Liv Chld At 1st Use	0	1	2	3+	
Ever Use	52.5%	50.4%	29.1%	63.6%	
Current Use	24.6%	27.6%	18.3%	38.8%	
Discontinuation	27.9%	22.9%	10.9%	24.8%	
Pills – Age	15-24 Years	25-34 Years	35-49 Years		
Ever Use	24.7%	34.7%	30.8%		
Current Use	17.2%	20.6%	18.6%		
Discontinuation	7.6%	14.1%	12.3%		

Table 20 Contraception discontinuation rates - CONDOM (30 districts by NITI Aayog)

Condom/Nirodh By Caste.	Schedule Caste	Schedule Tribe	Obc	Others	
Ever Use	5.6%	3.7%	4.7%	13.5%	
Current Use	2.4%	1.3%	2.3%	7.1%	
Discontinuation	3.2%	2.5%	2.4%	6.4%	
Condom-Residence	Urban	Rural			
Ever Use	12.1%	4.8%			
Current Use	5.8%	2.0%			
Discontinuation	6.3%	2.8%			
Condom – Edu	No Education	Primary	Secondary	Higher	
Ever Use	2.6%	5.2%	9.3%	19.7%	
Current Use	.9%	2.0%	4.4%	12.6%	
Discontinuation	1.7%	3.1%	4.9%	7.1%	
Condom – Wealth	Poorest	Poorer	Middle	Richer	Richest
Ever Use	3.0%	5.2%	7.7%	11.9%	19.0%
Current Use	1.2%	2.0%	3.7%	6.1%	9.7%
Discontinuation	1.8%	3.2%	4.0%	5.8%	9.3%
Condom - - Liv Chld At 1st Use	0	1	2	3+	
Ever Use	24.0%	19.4%	8.6%	12.1%	
Current Use	7.7%	8.5%	4.8%	5.0%	
Discontinuation	16.3%	10.9%	3.8%	7.1%	
Condom – Age	15-24	25-34	35-49		
Ever Use	14.7%	13.7%	8.3%		
Current Use	7.4%	6.5%	3.4%		
Discontinuation	7.3%	7.2%	4.9%		

Table 21 Contraception discontinuation rates - IUD/PPIUD (30 districts by NITI Aayog)

Iud - Caste	Schedule Caste	Schedule Tribe	Obc	Others	
Ever Use	1.2%	1.4%	1.1%	3.5%	
Current Use	.5%	1.1%	.7%	1.8%	
Discontinuation	0.7%	0.3%	0.5%	1.7%	
Iud-Resi	Urban	Rural			
Ever Use	2.7%	1.3%			
Current Use	1.3%	.8%			
Discontinuation	1.5%	0.5%			
Iud-Edu	No Education	Primary	Secondary	Higher	
Ever Use	0.7%	1.5%	2.3%	4.6%	
Current Use	.4%	.9%	1.5%	2.7%	
Discontinuation	0.3%	0.7%	0.8%	1.9%	
Iud-Wealth	Poorest	Poorer	Middle	Richer	Richest
Ever Use	.7%	1.4%	2.3%	2.6%	4.5%
Current Use	.5%	1.0%	1.5%	1.4%	1.5%
Discontinuation	0.2%	0.4%	0.8%	1.2%	2.9%
Iud - Liv Chld At 1st Use	0	1	2	3+	
Ever Use	2.2%	4.8%	3.7%	5.7%	
Current Use	.8%	2.9%	2.5%	4.1%	
Discontinuation	1.4%	1.9%	1.2%	1.6%	
Iud- Age	15-24	25-34	35-49		
Ever Use	1.8%	3.1%	3.4%		
Current Use	1.5%	2.2%	1.8%		
Discontinuation	0.2%	0.9%	1.6%		

Table 22 Contraception discontinuation rates - PILL (50 districts by Central ministries)

Pills- Caste	Schedule Caste	Schedule Tribe	Obc	Others	
Ever Use	14.60%	15.69%	9.95%	26.90%	
Current Use	5.04%	7.73%	3.87%	8.00%	
Discontinuation	9.56%	7.95%	6.07%	18.90%	
Pills-Resi	Urban	Rural			
Ever Use	13.87%	13.33%			
Current Use	4.89%	5.55%			
Discontinuation	8.98%	7.78%			
Pills-Edu	No Education	Primary	Secondary	Higher	
Ever Use	10.15%	16.16%	16.55%	11.01%	
Current Use	3.56%	6.79%	7.26%	4.13%	
Discontinuation	6.59%	9.36%	9.29%	6.88%	
Pill- Wealth	Poorest	Poorer	Middle	Richer	Richest
Ever Use	10.75%	13.64%	14.72%	14.24%	14.40%
Current Use	4.88%	6.39%	6.08%	4.94%	3.99%
Discontinuation	5.88%	7.25%	8.64%	9.30%	10.41%
Pills - Liv Chld At 1st Use	0	1	2	3+	
Ever Use	29.93%	37.05%	19.41%	50.37%	
Current Use	8.95%	14.64%	8.25%	21.91%	
Discontinuation	20.98%	22.40%	11.16%	28.46%	
Pills – Age	15-24 Years	25-34 Years	35-49 Years		
Ever Use	15.20%	31.73%	39.10%		
Current Use	7.02%	14.63%	11.99%		
Discontinuation	8.18%	17.10%	27.11%		

Table 23 Contraception discontinuation rates - CONDOM (50 districts by Central ministries)

Condom/Nirodh By Caste.	Schedule Caste	Schedule Tribe	Obc	Others	
Ever Use	16.76%	6.13%	11.14%	32.20%	
Current Use	6.25%	2.88%	5.53%	16.70%	
Discontinuation	10.50%	3.25%	5.61%	15.50%	
Condom-Residence	Urban	Rural			
Ever Use	21.86%	10.98%			
Current Use	11.40%	4.80%			
Discontinuation	10.46%	6.18%			
Condom – Edu	No Education	Primary	Secondary	Higher	
Ever Use	8.12%	11.39%	17.00%	31.10%	
Current Use	3.20%	4.24%	8.45%	17.58%	
Discontinuation	4.92%	7.14%	8.55%	13.52%	
Condom – Wealth	Poorest	Poorer	Middle	Richer	Richest
Ever Use	4.20%	7.81%	12.53%	19.77%	31.19%
Current Use	1.58%	3.36%	5.61%	9.25%	15.91%
Discontinuation	2.62%	4.45%	6.91%	10.52%	15.27%
Condom - - Liv Chld At 1st Use	0	1	2	3+	
Ever Use	46.80%	36.30%	17.90%	32.60%	
Current Use	15.64%	15.73%	9.81%	20.12%	
Discontinuation	31.16%	20.57%	8.09%	12.48%	
Condom – Age	15-24	25-34	35-49		
Ever Use	21.97%	33.00%	30.72%		
Current Use	11.05%	17.16%	10.80%		
Discontinuation	10.93%	15.84%	19.92%		

Table 24 Contraception discontinuation rates - IUD/PPIUD (50 districts by Central ministries of GoI)

Iud - Caste	Schedule Caste	Schedule Tribe	Obc	Others	
Ever Use	3.36%	4.33%	2.38%	9.20%	
Current Use	1.23%	2.53%	0.98%	4.10%	
Discontinuation	2.13%	1.80%	1.40%	5.10%	
Iud-Resi	Urban	Rural			
Ever Use	5.56%	3.41%			
Current Use	2.22%	1.51%			
Discontinuation	3.34%	1.90%			
Iud-Edu	No Education	Primary	Secondary	Higher	
Ever Use	2.30%	3.33%	5.44%	6.20%	
Current Use	0.88%	1.43%	2.43%	3.17%	
Discontinuation	1.42%	1.89%	3.02%	3.02%	
Iud-Wealth	Poorest	Poorer	Middle	Richer	Richest
Ever Use	1.02%	2.69%	3.93%	5.66%	8.25%
Current Use	0.39%	1.29%	2.04%	2.17%	3.13%
Discontinuation	0.62%	1.41%	1.90%	3.49%	5.13%
Iud - Liv Chld At 1st Use	0	1	2	3+	
Ever Use	4.80%	10.14%	6.49%	15.70%	
Current Use	2.35%	3.75%	2.94%	7.82%	
Discontinuation	2.45%	6.38%	3.55%	7.88%	
Iud- Age	15-24	25-34	35-49		
Ever Use	2.35%	8.56%	13.63%		
Current Use	1.66%	4.43%	4.29%		
Discontinuation	0.69%	4.12%	9.34%		

Table 25 Contraception discontinuation rates - PILLS (35 districts by Ministry of Home Affairs)

Pills- Caste	Schedule Caste	Schedule Tribe	Obc	Others	
Ever Use	4.22%	7.50%	4.68%	6.58%	
Current Use	1.41%	2.79%	1.49%	3.40%	
Discontinuation	2.82%	4.71%	3.20%	3.18%	
Pills-Resi	Urban	Rural			
Ever Use	7.34%	5.09%			
Current Use	2.65%	1.76%			
Discontinuation	4.69%	3.33%			
Pills-Edu	No Education	Primary	Secondary	Higher	
Ever Use	3.84%	5.94%	7.30%	8.03%	
Current Use	1.31%	1.89%	2.56%	3.30%	
Discontinuation	2.53%	4.05%	4.74%	4.73%	
Pill- Wealth	Poorest	Poorer	Middle	Richer	Richest
Ever Use	4.20%	5.75%	5.70%	8.09%	8.35%
Current Use	1.60%	1.78%	2.05%	3.14%	2.23%
Discontinuation	2.59%	3.97%	3.65%	4.96%	6.12%
Pills - Liv Chld At 1st Use	0	1	2	3+	
Ever Use	21.38%	30.87%	10.87%	23.70%	
Current Use	3.70%	8.74%	4.73%	9.60%	
Discontinuation	17.68%	22.13%	6.14%	14.10%	
Pills – Age	15-24 Years	25-34 Years	35-49 Years		
Ever Use	6.60%	14.00%	14.70%		
Current Use	3.50%	5.30%	3.10%		
Discontinuation	3.10%	8.70%	11.60%		

Table 26 Contraception discontinuation rates - CONDOMS (35 districts by Ministry of Home Affairs)

Condom/Nirodh By Caste.	Schedule Caste	Schedule Tribe	Obc	Others	
Ever Use	4.20%	6.80%	6.90%	13.80%	
Current Use	1.24%	1.47%	2.01%	5.70%	
Discontinuation	2.96%	5.33%	4.89%	8.10%	
Condom-Residence	Urban	Rural			
Ever Use	8.40%	4.11%			
Current Use	4.30%	1.38%			
Discontinuation	4.10%	2.74%			
Condom – Edu	No Education	Primary	Secondary	Higher	
Ever Use	1.65%	4.87%	7.70%	15.60%	
Current Use	0.51%	1.35%	3.03%	8.30%	
Discontinuation	1.14%	3.51%	4.67%	7.30%	
Condom – Wealth	Poorest	Poorer	Middle	Richer	Richest
Ever Use	2.16%	5.24%	6.16%	7.40%	13.40%
Current Use	0.66%	1.52%	2.13%	3.60%	6.81%
Discontinuation	1.50%	3.72%	4.03%	3.80%	6.59%
Condom - - Liv Chld At 1st Use	0	1	2	3+	
Ever Use	51.84%	28.70%	7.20%	8.00%	
Current Use	7.41%	11.00%	3.70%	4.20%	
Discontinuation	44.44%	17.70%	3.50%	3.80%	
Condom – Age	15-24	25-34	35-49		
Ever Use	9.80%	13.90%	7.50%		
Current Use	4.10%	5.50%	2.70%		
Discontinuation	5.70%	8.40%	4.80%		

Table 27 Contraception discontinuation rates - IUD/PPIUD (35 districts by Ministry of Home Affairs)

Iud - Caste	Schedule Caste	Schedule Tribe	Obc	Others
Ever Use	1.13%	2.15%	1.57%	2.22%
Current Use	0.56%	1.46%	0.81%	1.30%
Discontinuation	0.56%	0.70%	0.76%	0.92%

Iud-Resi	Urban	Rural
Ever Use	3.09%	1.39%
Current Use	1.46%	0.82%
Discontinuation	1.63%	0.58%

Iud-Edu	No Education	Primary	Secondary	Higher
Ever Use	0.60%	1.50%	2.78%	4.93%
Current Use	0.28%	0.84%	1.64%	2.31%
Discontinuation	0.32%	0.66%	1.14%	2.62%

Iud-Wealth	Poorest	Poorer	Middle	Richer	Richest
Ever Use	0.94%	1.98%	1.99%	2.00%	4.44%
Current Use	0.61%	1.11%	1.20%	0.97%	1.60%
Discontinuation	0.33%	0.87%	0.79%	1.03%	2.84%

Iud - Liv Chld At 1st Use	0	1	2	3+
Ever Use	4.70%	9.76%	3.95%	6.20%
Current Use	2.06%	4.83%	2.26%	3.80%
Discontinuation	2.65%	4.93%	1.69%	2.40%

Iud- Age	15-24	25-34	35-49
Ever Use	2.20%	4.60%	3.80%
Current Use	1.80%	2.80%	1.10%
Discontinuation	0.40%	1.80%	2.70%

Bibliography

1. **Bradley, et. al.** *Levels, Trends, and Reasons for contraceptive discontinuation.* Calveton, Maryland : s.n., 2009.

2. *National Family Health Survey (NFHS-4).* **Mumbai, India : IIPS, 2015-16.**

3. *Contraceptive discontinuation and switching patterns.* **Singh, Kaushalendra Kumar, Roy, Tapan Kumar and Singh, Brijesh Singh. 2015.**

4. **https://niti.gov.in/content/about-aspirational-districts-programme.** *niti.gov.in.* **[Online]**

5. *The Effects of Unintended Pregnancy on Infant, Child, and Parental Health: A Review of the Literature.* **Gipson, J. D., koenig, A. M. and Hindin, M. J. 1, 2008, Studies in Family Planning, Vol. 39, pp. 18 - 38.**

6. **Sonfield, A, et al.** *The Social and Economic Benefits of Women's Ability to determine whether and when to have children.* **New York : Guttmacher Institute, 2013.**

7. *Socio-Economic Differentials in Contraceptive Discontinuation in India.* **Agrahari, K., Mohanty, S. K. and Chauhan, R. K. 2016, SAGE open, pp. 1-16.**

8. *International Institute for Population Sciences (IIPS) and ICF.* **2017.**

9. **Kishor, Sunita and Gupta, Kamal.** *Gender Equality and Women's Empowerment in India.* **Mumbai : International Institute for Population Sciences, 2009.**