

# Awareness and Practice of Contraception among Women Coming to Civil Hospital Karachi

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## ABSTRACT

**Objective:** To determine the awareness and practices of contraception among women coming to Civil Hospital Karachi.

**Methods:** A total of 196 women of reproductive age (15 to 49 years) attending the labor room, emergency room and outpatient department of Civil Hospital Karachi from 25th of November 2020 to 26th of May 2021 were included. We included Previously delivered as well as undelivered married females who were able to communicate in local language. Data was collected regarding awareness medium and husband's willingness or role regarding contraception.

**Results:** The average age of the patients was 25.91±4.48 years. Median number of children was 1 [range=1-5] and average pregnancy interval was 11.13±3.49 months. Most of the female (81.12%) were Muslims. There were 112 (57.14%) female who had previous experience of contraception. Awareness and practices of contraception among women was 87 (44%) and 107 (55%) respectively.

**Conclusion:** According to the findings of our Study, 44% of women are aware of and use contraception, whereas 55% of women use contraception. A large part of this is due to a lack of knowledge about its benefits, a lack of resources, and insufficient information about the various ways.

**Keywords:** Contraception, Family planning, contraception practices.

## INTRODUCTION

Pakistan is the world's sixth most populous country, with a population growth rate 2.1 percentage points greater than the region's developing countries.<sup>1</sup> According to the Pakistan Reproductive Health and Family Planning Survey, there is a large gap between contraceptive awareness (97%) and use among currently married women (28%).<sup>2</sup> The most significant instruments for improving family health are knowledge and practice of contraception, as well as its successful administration. The fundamental purpose of family planning is to help couples avoid undesired pregnancies while enabling desired pregnancies to occur, regulate the intervals between pregnancies, control the child's birth age in proportion to the parents' age, and determine the number of children a family desires.<sup>3</sup> Birth spacing is helpful to the mother's health in addition to limiting fertility.<sup>4</sup> It lowers financial strain on the family by guaranteeing that the family's basic necessities of food and clothing are sufficiently met. If the mother is in good health, she will be able to give her children exceptional care.<sup>5</sup>

Women in developing nations are less aware of the importance of birth spacing knowledge and are less likely to seek it out. As a result, a large number of unwanted and neglected pregnancies continue to take place in developing countries. Our country's urgent need to boost contraceptive use and birth spacing has long been recognized. Fertility rates in Pakistan have fallen more slowly than in other South Asian countries, especially among the poor.<sup>6</sup> According to several sources, there is no consensus on the actual prevalence of contraception in Pakistan.<sup>7</sup>

In Pakistan, a number of family planning programs have been established in an effort to improve the use of contraceptives. However, the results thus far have not been encouraging, with around 22% of the population using contemporary contraception, followed by 8% who use female sterilization techniques and 7% who use condoms, respectively.<sup>8</sup> There is much more to learn, and there is a compelling need to improve and promote contraception, as well as to raise awareness of the disconnect between public perception and current contraception trends. The aim of this study is to determine the awareness and practices of contraception among women coming to Civil Hospital Karachi.

## MATERIAL AND METHODS

A total of 196 women of reproductive age (15 to 49 years) attending the labor room, emergency room and outpatient department of Civil Hospital Karachi from 25th of November 2020 to 26th of May 2021 were included. We included Previously delivered as well as undelivered married females who were able to communicate in local language. The exclusion criteria were women having repeated visits with same method, and sexually inactive women. The patients were included in the study after taking written informed consent from patients or their attendant. After fulfilling all inclusion criteria, data was collected from the patients including demographic details, mode of delivery, education status and occupation of both partners, religion, socioeconomic status, number of children, religious beliefs, awareness medium and husband's willingness or role regarding contraception. Data collection was recorded on the predesigned proforma. The awareness or practices of the women was assessed by giving a score of one to a positive response and zero to a negative response, followed by calculating total awareness score of each participant. Anyone with a score of 50% or more of the total score, separately calculated for awareness and practice, was labeled as having adequate awareness or appropriate practice.

Collected data was analyzed by SPSS statistical software version 20. Mean and standard deviation was calculated for quantitative variables like age, number of children, age of youngest child born, interval pregnancy Interval while frequencies and percentages were generated for categorical variables like religion, socioeconomic status, occupations and mode of delivery and the adequateness/appropriateness of awareness and practice.

## RESULTS

The average age of the patients was 25.91±4.48 years. Median number of children was 1 [range=1-5] and average pregnancy interval was 11.13±3.49 months. Most of the female (81.12%) were Muslims. Among 196, 57 (29.08%) females had primary/secondary education, 64 (32.55%) had matric to intermediate education, and 50 (25.51%) had graduate to postgraduate education. There were 123 (62.76%) females having fair economic status. There were 57.14% female who had previous experience of contraception.

In this study, awareness and practices of contraception among women was 44% (87/196) and 55% (107%) respectively as reported in figure 1.

Table 1: Descriptive Statistics Of Characteristics Of Patients.

Variables	Value
Age (Years)	25.91±4.48
Number of Children	1 (range 1-5)
Age of youngest child born (years)	4.60±1.50
Interval Pregnancy (months)	11.13±3.49
Religion	
Muslim	159 (81.12%)
Non-Muslim	37 (18.88%)
Educational Status	
Illiterate	25 (12.75%)
Primary/Secondary	57 (29.08%)
Matric/Intermediate	64 (32.55%)
Graduate/Postgraduate	50 (25.51%)
Occupation	
House Wife	162 (82.65%)
On job	34 (17.35%)
Socioeconomic Status	
Poor	32 (16.33%)
Middle Class	41 (20.92%)
Fair Class	123 (62.76%)
History of Prior Contraception	
Yes	112 (57.14%)
No	84 (42.86%)

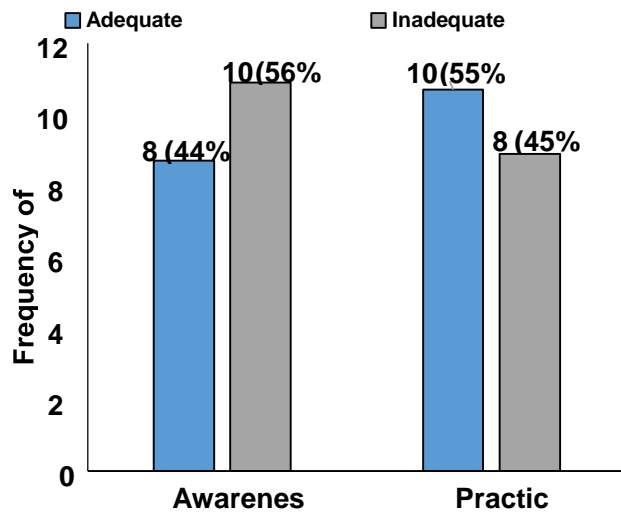


Figure 1: Awareness And Practices of Contraception.

**DISCUSSION**

The most significant instruments for improving family health are knowledge and practice of contraception, as well as its successful administration. Birth spacing has been demonstrated to boost pregnant women's health in addition to limiting fertility.<sup>9</sup>

The average age of the patients in this study was 25.914.48 years, according to the findings. Females accounted for 57.14 percent of those who had used contraception in the previous year. According to the findings of the study conducted by Jaffery et al the mean age was 28.41 years. Eighty-five percent of women were multigravida, with fourteen percent of women being primigravida, and one percent of the women were nulliparous.<sup>6</sup>

Only 44% of the women in our survey were aware of the various methods of contraception, compared to 82 percent and 87 percent in previous studies in India and Sudan, respectively. According to the Jaffery et al study, only 66 percent of women were aware of the benefits of contraception.<sup>6</sup>

Researchers in Srinagar and Uganda found even greater levels of awareness, with 91 percent and 99.6 percent knowledge and good attitudes about family planning, respectively, but

inadequate use of contraception in the field of family planning.<sup>10,11</sup> A higher rate of contraceptive knowledge does not equate to a higher incidence of contraceptive use. This is most likely owing to a lack of awareness about the benefits of family planning, as evidenced by our survey, which found that 56 percent of women were not aware of the benefits of family planning, most likely due to a lack of education on the many contraceptive methods available. Other research suggests that higher levels of education are significantly associated with increased understanding and practice of family planning.<sup>12</sup> More education means that women make better decisions about and use of contraceptives, and this is true regardless of their socioeconomic status.

Providing a selection of high-quality options that allow women to either space their births or restrict the number of children they have can help to improve the practice among women.<sup>13</sup> In our study, media in the form of written material and television only contributed 9 percent and 11 percent, respectively, to the total information. Increased rates of 22 percent have been observed in Sudan and Nepal, where electronic media has been utilized to spread information.<sup>14,15</sup> The availability of media to the entire population can play an important influence in the dissemination of information. Because the media is accessible to everyone and because women seek information on contraception from their friends and family, educating the community through the media will result in an increase in the rate of practice. Attitudes are shaped by life experiences and culturally acquired knowledge acquired through socialization.

The prevalence of contraceptive techniques among women was found to be 55 percent in this study. In South Nigeria, where 40.4 percent of the population used condoms as a contraceptive method.<sup>16</sup> According to a research conducted in Pakistan on the habits of doctors in the armed services, condoms were the favored method of contraception, with 45 percent of those surveyed using them as contraception.<sup>17</sup>

Women were completely reliant on their husbands when it came to making decisions concerning contraceptive methods. Cultural obstacles, fear of husband and family opposition, and a lack of communication between the couples may all play a role in the couple's decision not to pursue alternative possibilities. According to the findings of another study conducted in a rural area of Pakistan, just 6 percent of the women used tablets.<sup>18</sup> Despite the fact that half of those polled were aware of it, fear of negative effects made it a less popular option. Along with condoms, it was the most widely used method in developed European countries.<sup>18</sup> It was found that 35 percent of women in Spain and 63 percent of women in Germany used contraceptives.<sup>19</sup> The reliability of the pill, as prescribed by doctors, as well as its ease of use and comfort for women, were the primary reasons for its adoption. Once again, we see that culture and educational background have a role in influencing women's decisions on contraception techniques.

**CONCLUSION**

According to the findings of our Study, 44% of women are aware of and use contraception, whereas 55% of women use contraception. A large part of this is due to a lack of knowledge about its benefits, a lack of resources, and insufficient information about the various ways. When women are educated about contraceptive options in health facilities, they are more likely to make informed decisions that are most appropriate for their individual needs and circumstances.

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