

Family planning awareness and practices among women attending tertiary care hospital at Faisalabad, Pakistan

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Abstract:

Objective: To investigate the family planning awareness and practices among women attending tertiary care hospital at Faisalabad, Pakistan.

Methods: A hospital based cross sectional study was conducted at Madina Teaching Hospital Faisalabad, Pakistan. Five hundred women of reproductive age (19-40 years) were included in this survey, to check their knowledge and practices regarding contraceptives use.

Results: The results of the study showed that 92% of the women had contraceptive knowledge but practicing women were 39.4% only. Almost 67% women were belonged to rural area and 33% to urban area. Regarding use of contraception, 39.4% were using one of the contraceptive method, 33% were intending to use and 28% did not want to use any method. The most common method used for contraception was condom (male partner) 36%, followed by contraceptive pills (23%) and female sterilization (19%). About 87% of the women had no constraints in using contraceptive method. Only 5.8% did not want to use because of religious constraints. The most common fear regarding use of contraceptive method was weight gain (13%).

Conclusion: There was wide gap in knowledge and practice of contraceptive use. The three common methods of contraception were condom, contraceptive pills, and female sterilization respectively. Because of low literacy rate females had some fear, myths or misconceptions which need to be clarified.

Key words: Family planning, contraceptives, condom

Introduction

Pakistan is the 6th most populous country of world¹. According to the Population Reference Bureau 2005², the estimated population of Pakistan is 162.4 million and is expected to be 295 million in the year 2050. The fertility rate of 4.8 is showing failure to achieve our family planning strategies. Our annual growth rate is 1.9% which is much higher among other developing countries. In our country the proportion of females using contraceptives seem less as compared to other countries, which is evident by our high growth rate, and there are many barriers for the use of contraceptives.

The Government of Pakistan started an extensive family planning program in 1962 and the family planning promotion is the priority for the government of Pakistan in order to keep pace between socioeconomic growth and population expansion³. In every five year plan different governments have given importance to family planning and millions of rupees have been spent but couldn't achieve the targets to control population growth. A study suggested six major obstacles to contraceptive use: the strength of motivation to avoid pregnancy, awareness and knowledge of contraception, the social and cultural acceptability of contraception, perceptions of the husband's preferences and attitudes, health concerns,

and perceived access to services⁴. There are also misconceptions about use of contraceptive methods.

We have to accelerate our efforts to improve family planning services and in this regard key to success is to expand information and service utilization and to work more on the reasons identified for underutilization of family planning services⁵. For improving the quality and better provision of family planning services there is need of more research from all over the Pakistan to find out the reasons behind the poor utilization of family planning services by common people and why the government efforts are not successful to control fertility rate.

There is immediate and serious need for analyzing the current trends in fertility behavior and identification of factors affecting fertility preferences in order to formulate strategies for increasing contraceptive prevalence and decreasing the birth rate⁶. This study was designed to investigate the family planning awareness and practices among women residing in Faisalabad district, so that future planning can be done to improve and promote the family planning services in this area specifically and in our country generally.

Subjects and methods

This hospital based cross sectional study carried out in the year 2007 at the Gynaecology Department of Madina Teaching Hospital affiliated with the Faculty of Health Sciences University of Faisalabad. A non-probability, convenience sample of 500 married women of reproductive age (19-40 yrs) was collected, attending the OPD either as patients or their attendants. Interviews were conducted, after obtaining an informed consent. A structured questionnaire was used to obtain information on sociodemographic features, parity, education, reproductive profile, contraceptive practices.

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contraceptive knowledge, and source of contraceptive knowledge, fears and constraints regarding its use. Reasons for non utilization of contraceptive services were also asked from the respondents. The data was entered and analyzed on SPSS version 13.

Results

The subjects included in this study belonged to different reproductive age groups ranging from 19-40 years. The age distribution, parity, education of women and age groups and education of husbands are given in the table 1.

Table-1 Demographic features of married couples attending the OPD of the Madina Teaching Hospital

Variables	Frequency n =500
Age of married women in years	
19 – 24	59 (11.8 %)
25 – 29	202 (40.4 %)
30 – 34	124 (24.8%)
35 – 40	115 (23%)
Parity of the women	
Primipara	67 (13.4%)
P2 – P3	156 (31.2%)
P4 – P5	198 (39.6%)
>P5	79 (15.8%)
Education	
Illiterate	198 (39.6%)
Primary	123 (24.6%)
Secondary	119 (23.8%)
Higher	60 (12%)
Occupation	
Housewives	469 (93.8%)
Working women	31 (6.2%)
Husband Features	
Age (in years)	
19 – 24	57 (11.4%)
25 – 29	163 (32.6%)
30 – 34	131 (26.2%)
35 – 39	79 (15.8%)
> 40	70 (14%)
Education	
Illiterate	130 (26%)
Primary	161 (32.2%)
Secondary	123 (24.6%)
Higher	86 (17.2%)

The most of the women (39.6%) had 4 to 5 children and 31.2% had 2 to 3 children. The highest number of children to women was 13 and the lowest was 1. The literacy rate among female was 60% and among male was 67%, the majority of people were having only primary and secondary education. In this study 93.8% were the housewives. The women having knowledge about contraception were 92% and 8% of the women were having no knowledge regarding contraception. Table 2 is showing that 67% of study group belonged to rural area while 33% were from urban area.

Table-2 Showing distribution of knowledge and practice variables about family planning

Variables	Frequency n=500
Rural	287 (57.4%)
Urban	213(42.6%)
Ever used contraceptives	
Ever used	197 (39.4%)
Never used	303 (60.6%)
Contraceptive user practices	
Pills	49 (24.9%)
Condom	68 (34.5%)
Injectable	11 (5.6%)
Intrauterine devices	24 (12.2%)
Female sterilization	37 (18.8%)
Male sterilization	04 (2%)
Others	04 (2%)
Constraints regarding contraceptive use	
Family	6 (1.2%)
Social	14 (2.8%)
Religious	29 (5.8%)
Husband	17 (3.4%)
None	434 (86.8%)
Fear regarding contraceptive use	
Complications of operation	36 (7.2%)
Infections	23(4.6%)
Weight gain	66 (13.2%)
Bleeding	19 (3.8%)
Pain	23 (4.6%)
Perforation of Uterus	09 (1.8%)
Menstrual irregularity	29 (5.8%)
Cancer	13 (2.6%)
Failure of method	05 (1%)
Other problems	29 (5.8%)
No fear	248 (49.6%)

The women who had no intention to have more children and using contraceptive methods were 39% and 61% (305) never used any contraceptive.

The three commonly employed methods of contraception were use of condom by male partner (36%), oral contraceptive pills 23%, and female sterilization 19%. It was also interesting to know that few women had used more than one contraceptive method.

Only 13.2 % of women had some constraints regarding contraceptive use while the remaining 86.8 % had no constraints.

This study observed that females had some fear regarding contraceptive use. Three common fears were weight gain (13.2%), complications of operation (7.2%), and infections (4.6%).

Table 3 is showing that the difference between knowledge, attitude and practice. The 33.4% of the females intended to have four children while 7.2% intended to have 2, and 13.6% had 5 children while 22.12% showed no intentions. They were satisfied with whatever the number of children God has given them.

Table- 3 Showing difference between knowledge and practice

Actual number of children	Children intended to have							
	1	2	3	4	5	6	7	NI*
	No. of Women							
Women with 1 child	-	4	23	18	-	-	-	13
2	-	14	21	21	14	-	-	19
3	-	-	29	26	-	-	-	11
4	-	12	-	76	11	-	-	9
5	-	6	-	17	33	19	-	13
6	-	-	-	-	-	25	-	11
7	-	-	-	9	-	-	6	6
8	-	-	-	-	10	-	-	9
9	-	-	-	-	-	-	-	10
13	-	-	-	-	-	-	-	5

* NI : Women with no intention. They were satisfied with whatever the number of children God have given them.

Out of these 303 subjects the 54% females intended to use contraceptive and 46% did not want to use any contraceptive method.

The women who intended to use the contraception had more inclination towards female sterilization (16%) followed by oral contraceptive pills 12% (not shown in the table). They considered female sterilization safer and felt that it had least side effects with exception of few that had fear of surgery.

Discussion

Contraceptive use is not very common in our country. Pakistan is among the most populous countries of the world with a low economic growth (GDP 2.39%). Present study found that contraceptive prevalence rate (CPR) is 39.4% which is higher than the results mentioned by Population Association of Pakistan⁷ (2002) in their statistical profile ie 28%. If we compare it with CPR of neighbouring countries as 48 % in India, 58% in Bangladesh and 70 % in Srilanka², its not very encouraging. Few other studies in Pakistan found that the contraceptive use is 29 % in district Tando-Allahyar, and Jamshoro⁸, 28% in district Khairpur⁹ and 28% in Lahore¹⁰.

In this survey, it was also noticed that female were shy to talk about their sexual life, due to this reason they do not seek any help or guidance for any contraceptive method. Therefore, it is the need to provide proper knowledge to women in a very friendly atmosphere via counseling for using a method of contraception. There were women who were not using contraceptive methods because of myths they heard and fear that they developed regarding contraceptive methods.

In this study many women (34.8%) had 4 to 5 children and 25% had 2 to 3 children. It is interesting that most of the women intended to have 4 or 5 children no matter how difficult it is for them to bring up those children. The most of the women didn't plan and even not have intention to plan how many children they want. The highest number of children to women has 13 and the lowest was one. Some of the women intended to have 2 or 3 children but due to lack of knowledge about contraceptive use, constraints, and myths they have high fertility rate.

Our study showed that the predominate method of contraceptive was use of condom. A study conducted in district khairpur showed that the oral pills was the predominate method⁹. Another study at Sukker (Sindh) found that the predominate method of contraceptive was use of injections⁶. Saleem and Bobak¹¹ (2005) in the secondary analysis of national reproductive health and family planning survey 2000 found that women's education was the key factor in raising family planning practices.

Present study found that the three common contraceptive methods were condoms, pills and female sterilization. Haider¹² et al., (2009) also found the similar results in their study in Hyderabad district. It is also consistent with the findings of Pakistan fertility and family planning survey 1996-1997¹³. Pakistani women often rely on female sterilization after completion of desired family size¹⁴ as observed in present study. It shows that in different parts of our country different methods of contraception are predominates according to the availability, feasibility, education of the couple and approval of the husband

etc. The results of a study in USA suggested that men's and women's method preferences are both significantly related to the couples' method choice¹⁵.

Rise of condom use signify positive male attitude towards family planning, who were always dominant in decision making pertaining to women's fertility and birth spacing in Pakistan⁴. It shows that how important is the role of male partner in family planning. So the proper participation of a male partner is also required in family planning. In another study it was suggested that the provision of family planning advice and supplies at the doorstep of women increases contraceptive use¹⁶. We are fully agreed with this suggestion because females in our country are very much shy to take advices regarding family planning so if the female lady health workers provide the advices and contraceptives like condom at their doorsteps it would bring amazing results.

Douthwaite and Ward¹⁷ (2005) in national evaluation of lady health workers programme found that lady health workers succeeded in raising contraceptive uptake in rural Pakistan. Another national survey revealed that married women living within 5km of two community-based workers were significantly more likely to use modern reversible methods than those with no access¹⁸. Numerous studies have demonstrated a strong association between quality of care and uptake of contraceptive methods¹⁹⁻²⁰. This study found that 50.4% of the subjects had some fear regarding the use of contraceptives which reflects their poor knowledge regarding, use, efficacy and safety of contraceptives. Similar weaknessess were highlighted in a study from Karachi²¹.

It is need of the time to plan a family according to the resources otherwise it would be a burden not only for the family but also for the society and country.

Conclusion

This study found that the awareness regarding contraception in this region of study is good but practice of contraceptives as compared to awareness is low, so there is wide gap between knowledge and practice. There are many factors implicated regarding its low practice in this region like illiteracy, fear regarding use of contraceptives, social and religious constraints. It is suggested that by improving literacy level, by clarifying their misconceptions, by educating husband and families regarding contraception and giving them clear information may further improve use of contraception in our country.

Recommendations

There should be more effective lady health workers program to provide knowledge of family planning to the people that can bring this knowledge into practice.

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