



Contraceptive Awareness in Female Population of Lahore

Maimoona Munazza*¹, Hafiz Muhammad Ahmed Zaheer², Sidra Batool³

*¹ Corresponding author: Medical Officer, Nishtar Medical College, 00923214221312, maimoonamunazza@gmail.com

² Medical Officer, Akhter Saeed Medical and Dental College, Lahore, 00923214112131, zaheer@hotmail.com

³ Medical Officer, Sheikh Zayed Medical College, Rahim Yar Khan, 00923214221212, sidrabatool@hotmail.com

ABSTRACT

Objective: The assessment of awareness level about use of contraceptive in females and its long-lasting advantages.

Place and Duration of Study: This study was carried out from January 2018 to October 2018 at Gynaecology Outdoor Patient Department, Fatima Memorial Hospital, Lahore.

Materials and Methods: The size of the sample was consisted on 200 patients and for this research the spouse attendants were surveyed. Males and females below the age of 18 years and those females who have history of chronic diseases were excluded from the study. All married couples from age 18 to 40 years were included in this research.

Results: The research was carried out over 200 females along with their spouses range from 18 to 50 years with mean age of 32.13 ± 11.2 years. Females between the age of 18 to 25 years were 23(11.5%), between 26 to 30 years of age were 35(17.5%), between 31 to 35 years of age were 57(28.5%), between 36 to 40 years of age were 65(32.5%) and over the 40 years of age were 20(10%). 50% females have the pregnancy history and 80% females out of 50% were having pregnancy more than once.

Conclusion: The study has drawn the conclusion that there is awareness at moderate level among the community relating to the contraceptive use and less acceptance the new methods of contraceptive.

Key Words: child spacing, contraceptive methods, pregnancy

INTRODUCTION

Population increase is the most important issue of all the developing countries. A desire commonly prevailed in the local population is for having a big family. Developed countries have high birth and fertility rates. During the earlier decades these rates have gone down with the increase in the level of awareness relating to contraceptives. Contraceptives use is causing the reduction of unwanted fertility in all groups of age. The increased rate of fertility is associated with the under developing countries. One of the object of WHO is to obtain secure motherhood by proper birth gap. Enormously the benefits of the proper birth gap have been highlighted in the literature.

There is an inverse relationship between the total fertility rate and prevalence of contraceptive rate. Over the female population the socio-demographic pattern and elements are changing in the community.

Particularly, female's education is main element in the change of fertility believes and behaviours relating to birth gap. Increasing the level of awareness related to use of contraceptives and recognition of perceptions of women with regard to its use as required and crucial. Furthermore, the assessment of socio-demographic values the above-mentioned idea will make a positive difference.

MATERIALS AND METHODS

The study is observational/cross-sectional and was carried out from January 2018 to October 2018 at Gynaecology Outdoor Patient Department, Fatima Memorial Hospital, Lahore. The size of the sample was consisted on 200 patients and for this research the spouse attendants were surveyed. Males and females below the age of 18 years, unmarried and females who have history of chronic diseases were not included whereas females between the age 18 to 40 years were included in this research. Furthermore, physical examination, detailed medical history and demographics of the patient were recorded and electronically stored. There were two main parts of the questionnaire i.e., contraceptive knowledge and knowledge source for advanced contraceptive methods. The collected information was electronically stored and SPSS version 20 was used for analysing. Mean and standard deviation was calculated by applying the descriptive statistics. For qualitative variable such as socio-economic status, gender etc. percentage and frequency distribution was calculated. Value of P less than 0.05 was considered significant statistically.

RESULTS

The research was carried out over 200 females ranging from 18 to 40 years with mean age of 32.13 ± 11.2 years. Females between the age of 18 to 25 years were 23(11.5%), between 26 to 30 years of age were 35(17.5%), between 31 to 35 years of age were 57(28.5%), between 36 to 40



years of age were 65(32.5%) and over the 40 years of age were 20(10%). 50% females have the pregnancy history and 80% females out of 50%

were having pregnancy more than once. Table 1 shows awareness and methods of contraceptives used by participants

Table 1: Awareness and source of contraceptives

Sources and awareness of contraceptives	Frequency	Percentage
Births can be controlled		
Yes	162	81%
No	38	19%
Know contraceptives		
Yes	154	77%
No	46	23%
Use of contraceptives		
Yes	132	66%
No	68	34%
Methods to control birth		
Modern contraceptives	164	82%
Safer periods	21	10.5%
Other	15	7.5%
Contraceptive methods known		
Injectable	43	21.5%
Pills	26	13%
Norplant	51	25.5%
Condom	72	36%
Others	8	4%
Source of modern contraceptives		
TV	43	21.5%
Health workers	32	16%
Neighbours	36	18%
Family/Friends	47	23.5%
Others	42	21%

DISCUSSION

In the last decade, there is an increase in use and knowledge of contraceptives across the world with an exception of with less income earning. Scenario is always interested in Asian developing countries. We are exploring the level of contraceptive awareness and its use among the inhabitants of Lahore. The current research has observed that a big chunk of people has contraceptive awareness but practically its use is very limited. This is consistent with different researches mentioned in literature. Despite the health worker implementation by the Government and programs of awareness across the country, the aim of controlling the population has not yet been achieved. There was less knowledge of contraceptive simple method among the population under study. The commonest method among others is the use of condoms. Other commonest method reported in the current research is the oral pills because of its easy access and easy to use and considered as one of the safe methods. Similar findings have been reported by other researches. There is limited level of awareness relating to advanced contraceptives. Source of knowledge can be attributed for this. It has been observed that the

friends and family are the main source of contraceptive knowledge. The current use is mainly affected by the personal practice and experience of family women. The community due to its conservativeness does not let the health worker to give knowledge about the use of contraceptives. Although there is less knowledge about advanced contraceptives in the current findings because the earlier researches have observed around 95% married females have knowledge minimum one advanced contraceptive method. Lack of awareness has also been observed which may be due to area of living, level of education and family socio-economic status. The level of awareness relating to the contraceptive use is less among the families with low educational level and with low income. The other reason is the birth gap which is not common and does not bear the consent of women. Generally, the society is male dominated and husbands are reported less cooperative with wives. Earlier few researches based on birth gap have drawn the similar conclusion. A research carried out in the rural area of Riyadh reported that the current mean gap is around of 3 years with the growing age of women. This affects the health of a child and women. The possibility of the child gap



is subject to the contraceptive use. The current research is an strive to bring to light the requirement of awareness and use of contraceptives.

CONCLUSION

The current study has concluded that community has moderately level of awareness about the contraceptive use and there is less acceptance of new methods of contraceptives. This requires extra care at the household as well as community level.

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