Awareness, attitude and practice on contraception among the clients attending abortion service at a zonal hospital

Mithu Saud*  
Lecturer, Nobel College, Sinamangal, Kathmandu

*During study period, author was Masters of Nursing student at Lalitpur Nursing Campus, School of Nursing and Midwifery, Patan Academy of Health Sciences, Lalitpur, Nepal.

Abstract

Introduction: Contraceptive methods are important components to reduce unwanted pregnancy, abortion, maternal and child morbidity mortality. This study aim to identify awareness, attitude and practice on contraception among women attending abortion services at Seti Zonal Hospital, Nepal.

Method: Cross-sectional enumeration sampling techniques from Safe abortion Unit of Seti Zonal Hospital, Nepal, from August to September 2018 was taken for structured face to face interview using questionnaire to find out awareness, attitude and practice on contraception among women. Ethical approval was obtained. The SPSS version 16 was used to analyze data.

Result: Out of total 94 women, 59 (73.8%) had adequate awareness, 78 (83%) had positive attitude for use of contraception, 44 (46.8%) had inadequate practice of contraception and 19 (20.2%) had adequate practice. There was a significant association between types of family and level of awareness (P<0.001). There was no correlation between awareness, attitude and practice.

Conclusion: Two thirds of women attending abortion clinic were aware of and had positive attitude in regard to contraception, but less than half practiced it.

Keyword: attitude, awareness, clients, contraception, practice
Introduction

Globally, 214 million women of reproductive age are not using modern contraceptives in developing countries to avoid unwanted pregnancy. However, unmet needs for modern contraceptives was still very high, especially in South Asia at 34% and Western Asia 50%.

The contraceptive prevalence rate (CPR) among women aged 15-49 years is 53% whereas 24% reproductive age woman have an unmet need for family planning. In the Far Western Development Region (FWDR) of Nepal the use of modern CPR decreased from 42% to 38%.

Each year 25 million women around the world have unsafe abortion, among them 44,000 die or suffer serious injuries from unsafe abortion. Center for Research on Environment, Health and Population Activities (CREPHA) Nepal, estimated 42 abortions per 1,000 were performed in Nepal in 2014. The positive impact of family planning can avoid unwanted pregnancies.

The aim of the study was to identify awareness, attitude and practice on contraception among clients attending abortions services.

Method

A cross-sectional research was conducted in the abortion unit of Seti Zonal hospital, Nepal, from 12th August 2018 to 7th September 2018. All woman who attended abortion services during this period were included in the study. Health professionals were excluded from the study. Enumerative sampling technique was used to collect data.

A self-developed questionnaire was used. The interview tool was developed by reviewing pertinent literature, consulting with a research advisor and subject faculties.

Data was collected by using structured face to face interview schedule in Nepali version.

The data was collected by the researcher herself. Separate counseling room was used to collect data. The time selected for data collection was 10 am to 4 pm, after the abortion when their pain relieved (half an hour to one hour after abortion). The average time required to complete the interview was about 20 to 25 minutes, 3-6 respondents were included in the study per day. The data was collected 6 days a week excluding public holidays.

The data were processed using the Statistical Package for Social Science software (SPSS version 16). The data were analyzed using descriptive statistics such as frequency, percentage, mean, standard deviation, and quartile. The Inferential statistics, Chi-square and Pearson’s correlation test was used.

Ethical approval was obtained from the Institutional review committee (IRC) of Patan Academy of health Sciences (PAHS). Permission was obtained from the Administrative Department and safe abortion service unit of Seti Zonal Hospital, Nepal, before data collection. Verbal informed consent was taken from every woman by explaining the objectives of the study. Confidentiality of all the data was maintained.

Result

There were 94 participants who visited for abortion, 72 (76.6%) were in age group of 21-30 years, mean age 27.4 ± 4.7 years, range 18-40 years, 64 (68%) had less than two children and 62 (66%) a homemaker.

Majority of respondents 78 (82.9%) were literate, 1 (1%) was unmarried, 54 (57%) had nuclear family, 67 (71%). Two third got married before the age of 20 years, mean age was of marriage 19.3±3.12 years, minimum 12 years first pregnancy was 20.4±3.03 years.
Table 1. Awareness and meaning regarding contraception among the clients attending abortion services, N=94

| Variables                          | Frequency | Percent |
|-----------------------------------|-----------|---------|
| **Known about contraception**     |           |         |
| Yes                               | 80        | 85.1    |
| No                                | 14        | 14.9    |
| **Meaning of Contraception**      |           |         |
| Prevents unwanted pregnancy       | 75        | 79.8    |
| Prevents disease                  | 2         | 2.1     |
| Makes family happy                | 3         | 3.2     |
| **Availability of Contraception** |           |         |
| Health Post                       | 37        | 46.30   |
| Medical                           | 35        | 43.80   |
| Hospital                          | 32        | 40.00   |
| FCHV                              | 7         | 8.80    |

Note: *multiple response

Table 2. Awareness about methods of contraception among the clients attending abortion services, N=80

| Variables                          | Frequency | Percent |
|-----------------------------------|-----------|---------|
| **Methods of Contraception**      |           |         |
| Condom                            | 80        | 100     |
| Depo                              | 78        | 97.5    |
| Norplant                          | 77        | 96.25   |
| Copper T                          | 72        | 90.0    |
| Pills                             | 72        | 87.5    |
| Emergency contraceptives          | 13        | 16.3    |
| Natural methods                   | 8         | 10.0    |
| Female Permanent                  | 53        | 66.3    |
| Male Permanent                    | 55        | 68.8    |
| **Advantages of condoms**         |           |         |
| Prevents STI/HIV                  | 75        | 79.8    |
| Intended pregnancy                | 4         | 4.3     |
| Barriers                          | 1         | 1.1     |
| **Appropriate time interval for using Depo** |   |         |
| Monthly                           | 6         | 6.4     |
| Two months interval               | 2         | 2.1     |
| Three months interval             | 72        | 76.6    |

Note: *Multiple Response

Nearly half of them 44 (55.7%) had learned about contraceptive from the study. Likewise, 37 (46.8%) heard from media while 44 (55%) heard from health personnel, 25 (31%) from friends.

There is an association between types of family and level of awareness (p<0.001). There is no relationship between awareness, attitude and practice, Table 5.

Table 3. Overall level of awareness on contraception among the clients attending abortion services, N=80

| Level of Awareness               | Frequency | Percent |
|----------------------------------|-----------|---------|
| Adequate awareness (mean score≥13.5) | 59        | 73.8    |
| Inadequate awareness (mean score<13.5) | 21        | 26.3    |
Table 4. Attitude regarding contraception among the clients attending abortion services, N=94

| Attitude Statements                                                                 | SD | D | N | A | SA | Mean ± SD |
|-------------------------------------------------------------------------------------|----|---|---|---|----|-----------|
| I would use contraception for the betterment of health                               | 1  | 16| 4 | 59| 14 | 3.73±.952 |
| I believe temporary contraception is safe and effective                              | 3  | 14| 4 | 65| 8  | 3.64±.947 |
| I think temporary contraception have fewer side effects                              | 2  | 27| 9 | 54| 2  | 3.28±.979 |
| I believe that the contraceptive methods were not assumed to affect the ability to   | 1  | 26| 9 | 52| 6  | 3.38±.995 |
| become pregnant after terminating its use                                            | (1.1)| (14.9)| (4.3)| (69.1)| (8.5) | (2.1) | |
| I feel it is better to use contraception than unintended pregnancy                   | 0  | 2 | 2 | 31| 59 | 4.56±.648 |
| I think a permanent family planning method cannot make a person weak.               | 11 | 25| 12| 44| 2  | 3.01±1.14 |

Note 1: - Strongly Disagree  2: - Disagree  3: - Neutral  4: - Agree  5: - Strongly Agree

Table 5. Practice regarding Contraception among the clients attending abortion services, N=94

| Variables                                                | Frequency | % |
|----------------------------------------------------------|-----------|---|
| Ever had Abortion                                        |           |   |
| Yes                                                      | 39        | 41.5|
| No                                                       | 55        | 58.5|
| Reason for previous abortion (n=39)                      |           |   |
| Completed family                                         | 27        | 28.7|
| Bleeding due to incomplete                               | 8         | 8.5|
| Congenital anomalies                                     | 4         | 4.3|
| Ever use of Contraception after abortion                 |           |   |
| Yes                                                      | 27        | 28.7|
| No                                                       | 12        | 12.8|
| If yes method used (n=27)                                |           |   |
| Condom                                                   | 10        | 10.6|
| Depo                                                     | 9         | 9.5|
| Pills                                                    | 5         | 5.3|
| Norplant                                                 | 1         | 1.1|
| copper T                                                 | 1         | 1.1|
| Withdrawal                                               | 1         | 1.1|
| Suggestion to use Contraception (n=27)                   |           |   |
| Health person                                            | 15        | 48.4|
| Husband                                                  | 11        | 35.5|
| Friends                                                  | 4         | 12.9|
| Others                                                   | 3         | 9.7|
| Reasons to discontinue the contraception (n=27)          |           |   |
| Side effects                                             | 9         | 9.6|
| Ignorance                                                | 7         | 7.4|
| Spouse separation                                        | 5         | 5.3|
| Others                                                   | 5         | 5.3|
| Discomfort                                               | 1         | 1.1|

Note: *Multiple Response
Discussion

The present study shows majority 80 (85.1%) were aware of contraception. Similar findings of majority (98%) having knowledge of modern contraception has been reported.6

In present study all (100%) had knowledge about Condom, 78 (97.50%) of Depo, 77 (96%) Norplant, 72 (90%) Copper T and 71 (87%) of pills respectively. Similarly, findings have been reported as of best-known method as Depo (89.5%), followed by condom (88.8%) and oral pills (81.7%).6 This may be due to more government family planning initiatives.

The current study shows 69 (73%) of respondents had no idea about the meaning of emergency contraception. Similar finding is reported with only few (2%) being aware of emergency contraception.10

The present study found 59 (73.8%) had adequate awareness. In contrast the reported 32% having knowledge of contraception, among them 6% had good Knowledge.11

Among the participants, 52 (55.3%) agreed that the contraceptive methods were not assumed to affect the ability to become pregnant after terminating its use. In contrast to the study that many concerns were expressed about effects on future fertility.12

The current study showed a positive attitude towards contraception among the clients attending abortion services. Similar finding that all respondents had a positive attitude was found in other study.13

The current study shows that the reasons for previous abortion were due to completed family, bleeding and congenital anomalies respectively. Similarly, 20.68% clients reported history of abortion and the main reason was complete family.8

The current study shows, 84% had the intention to use contraception after terminating the pregnancy, similar to the findings reporting 84% woman had the intention to use contraception after terminating the pregnancy.14

The present study shows woman in nuclear family had a high level of awareness, in contrast to the findings reporting association of knowledge of emergency contraception with the place of origin, religion, occupational status and education.15

This study shows that there is no relationship between awareness and practice, similar to other reported study.15 The current study shows that there is no relationship between awareness, attitude and practice. Similarly, there was no relationship between awareness and attitude.9

The possible implication of outcomes of the present study could be the management committee of Seti Zonal hospital to improve and strengthen the awareness program regarding contraception that helps to reduce unwanted pregnancies.

The possible limitation of the study includes the use of tool that has not maintained reliability, and may affect the understanding and thinking about contraception.

Conclusion

The findings of the study show that one-third of the women who attended abortion clinic had adequate level of awareness of contraception, and more than one-third had positive attitude towards contraception.

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Author Contribution
Initiation and design of research, Data collection, analysis and writing the report and poster presentation done at National Family Planning Conference

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Supplements
Questionnaire

Part I
Demographic information
1. Age in years
2. Number of living children
   a. One
   b. Two
   c. Three & above
   d. None
3. Occupation
   a. Homemaker
   b. Student
   c. Employee
   d. Agriculture
   e. Business
4. Level of Education
   a. Illiterate
   b. If literate (can read and write)
   c. Primary
   d. Secondary
   e. Higher secondary
   f. University Degree
5. Marital Status
   a. Married
   b. Unmarried
6. Types of family
   a. Nuclear
   b. Joint
7. Age at first marriage
8. Age at first pregnancy

Part II
Question related to Awareness regarding contraception
9. Do you know about contraception?
   a. Yes
   b. No
10. What is Contraception?
    a. Methods that prevent unwanted pregnancy
    b. Methods that prevent disease
    c. Methods that used for entertainment
    d. Methods that makes family small and happy
11. Where is the facility of contraception available?
12. What type of family planning methods do you know? (Multiple Response)
    a. List of Method
       i. Temporary
       ii. Permanent
       iii. Don’t know
       iv. Condom
       v. Depo provera
       vi. Pills
       vii. IUCD
       viii. Norplant
       ix. Emergency Contraception
       x. Natural methods
       xi. Minilap
       xii. Vasectomy
13. What are the advantages of Condom?
    a. Protects STI HIV/AIDS
    b. Prevents intended Pregnancy
    c. Barriers
d. Side-effects

14. What is the appropriate time interval for using Depo?
   a. Monthly
   b. 2 months
   c. 3 monthly
   d. Always

15. How long the IUCD is effective for?
   a. 6 yrs
   b. 8 yrs
   c. 12 yrs
   d. 10 yrs

16. How long Jadelle protect the unwanted pregnancy?
   a. 5 yrs
   b. 7 yrs
   c. 3 yrs
   d. 1 yrs

17. What is emergency contraception?
   a. Methods that prevents unwanted pregnancy after unprotected sexual intercourse
   b. Reduce abortion rate
   c. Sexually transmitted disease
   d. Don’t know

18. When is the best time to use emergency contraception?
   a. Within 24 hours of unprotected sexual relationship
   b. Within 48 hours
   c. Within 72 hours
   d. Don’t know

19. What are the Sources of information? (Multiple Response)
   a. Health facilities
   b. Friends
   c. Media
   d. Study
   e. Health worker

Part III

Likert Scale related to Attitude towards contraception

| SN | Variables                                                                 | Strongly Disagree (1) | Disagree (2) | Neutral (3) | Agree (4) | Strongly Agree (5) |
|----|---------------------------------------------------------------------------|------------------------|--------------|-------------|-----------|-------------------|
| 20 | I would use contraception for betterment of health                       |                        |              |             |           |                   |
| 21 | I believe temporary contraception are safe and effective                  |                        |              |             |           |                   |
| 22 | I think temporary contraception have less side effects                   |                        |              |             |           |                   |
| 23 | I believe that the contraceptive methods were not assumed to affect ability to become pregnant after terminating its use |                        |              |             |           |                   |
| 24 | I feel it is better to use contraception than unintended pregnancy       |                        |              |             |           |                   |
| 25 | I think permanent family planning method cannot make a person weak       |                        |              |             |           |                   |

Part IV
Questions related to Practice

26. Have you ever had an abortion?
   a. Yes
   b. No

27. What are the reasons for previous termination?

28. Did you take any contraception after abortion?
   a. Yes, if yes which methods used.............
   b. No

29. Who suggested you to take contraception? (Multiple Response)
   a. Health Personnel
   b. Husband
   c. friends
   d. Others

30. Why did you discontinue the contraceptive methods?
   a. Discomfort
   b. Ignorance
   c. Unavailability
   d. Side effects
   e. Spouse separation
   f. Others

31. Do you have any intention to use contraception after abortion?
   a. Yes, if yes which method you would like to use..............................
   b. No