

Knowledge, Attitude and Practice of Contraception Methods among Childbearing Age Women in Wasit, Iraq

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ABSTRACT

Utilization of contraceptive assay can help couples to control the numbers of children through avoiding unwanted gestations and subsequently to serve their intention for stopping and/or postpone childbearing by choices. This study aimed to evaluate level of awareness and knowledge with practices of contraception throughout childbearing age women at Wasit province, Iraq. Cross-sectional survey was performed on 170 women in childbearing age. A structured questionnaire was composed of two parts; the first one was to collect basic demographic information as age, resident, education level and parity; while the second part was to estimate the knowledge, attitude and discover the practices for application the contraception tools. The results were revealed that awareness of the following methods was high: oral contraception pill (99.6%), condom (99%), intrauterine device (IUD) (95.4%) and injection (69%). Information about contraception methods were acquired mainly from social media (34%), followed by social circle (schools, institutions and friends) in 33 percent, knowledge from health care workers was 29% and the least source of information was from family in 3.5%. Among study population, 50.6% was previously applying at least one modern tool of contraception; whereas, 48.2% were currently apply one type of modern family planning method. Condom was the most popular method used among the women enrolled in our study about (31.2%), which followed by the combined oral contraception pills which was practiced in 26.5%, and the least used modern method was Implant 3.5%. In conclusion, women in Wasit province were showed a good awareness and knowledge of contraception methods. Additional effective ways are required to educate women about contraceptive methods to be provided by health care provider.

KEYWORDS: Awareness, Contraception, Knowledge, Practice, Childbearing age women

INTRODUCTION

Awareness is a case or condition for possessing knowledge about consciousnesses (Kumagai and Lypson, 2009). Contraception (birth control) is meaning the tool(s) that applied to prevent the undesired gestation through intervention with a normally way of ovulation, fertilization or implantation. These tools are usually classify based either barriers like condom, diaphragms, cervical caps and sponges; hormonal contraceptive includes orally, parenterally, transdermally, vaginal rings, and implant; intrauterine devices (IUD) or traditionally rhythm methods (periodic abstinence), withdrawal (coitus interrupt), fertility awareness-based method, and lactational amenorrhoea method (Hubacher and Trussell, 2015; Stewart et al., 2018; Guillebaud, 2019).

Emergency contraception and permanent tools can carry out by the sterilization for females and vasectomy for males (Erlenwein et al., 2015; White et al., 2020). Combined orally contraception pill can prevent pregnancy in more than 99% of case with correct use. This is the almost common applied methods (Dinger et al., 2009; Shulman, 2011). Progesterone contraception in variable forms can reach 99% of successful effectiveness when used correctly and consistently. In females, condom can be used with 90% of effectiveness when used correctly and 79% when used commonly. Two types of calendar tools or rhythm methods and withdrawal (coitus interruptus) are available, and withdrawal can reach 96% of effectiveness when used correctly and consistently. Calendar methods can reach 91% of effectiveness (Marston and Church, 2016; Sukul et al., 2018; Enfield et al., 2020).

The choosing of contraceptive tool can affect with many factors like desire of a couple as well as knowledge, accessing for and method existence, provider attitude and bias, type of cares with counseling, and costs (Sharma and Pasha, 2011). Family planning (FP) program is in usual promotes using of modern method instead of traditionally available tools that having high rate of failure. However, application of modern tools can decline while traditional tools became concern to alterations starting with investigation if the traditional tools have came expenses of modern tools (Sharma and Pasha, 2011; Agha and Williams, 2016). FP can play great roles for both maternally and neonatal healthy and achievement a progress levels to decrease poverty, and subsequently enhancement the economically status of a family (Nguyen et al., 2017). The using of contraceptive recognizes to be the key element for decreasing fertility among any age throughout several developed countries (Coll et al., 2019). A number of studies suggested that the capability of women for limiting their gestations can directly affect the health status of mother and her child. Furthermore, contraceptive application was having an importance through declining many problems like undesired gestation as well as abortions (Cleland et al., 2012; Ghodsi and Hojjatoleslami, 2012). The World Health Organization detected that FP consider as one of six fundamentally health intervention required to achievement a safe motherhood (Almualm and Khamis, 2007). However, the perfect knowledge about utilization of FP method with advantages and disadvantages depend upon activity of counseling in addition to sensitivity of population (Nansseu et al., 2015; Wiebe et al., 2015).

In Iraq, large number of families preferred to have many members; which can subsequently resulting in problems due to complication and risk factor related to grand multiparty. Worldwide, many countries reported that the total knowledge about contraception is relatively high more than the actual utilization (Khosrow-Khavar et al., 2021). Nonetheless, no previously and comprehensively studies were carried out about the knowledge, attitude and practice of FP method in Wasit province. Consequently, this study confirmed the development of the reproductive health program by increasing information about contraceptive use among in reproductive age group. Hence, this study was aimed to assessment a knowledge about contraception methods in women with estimation the women practices toward different contraception methods.

MATERIALS AND METHODS

Ethical approval

This study was approved by and performed under the license of the Scientific Committee in the College of Medicine (University of Wasit, Wasit, Iraq).

Study samples and data

A cross sectional study was conducted in Wasit province, one of the Iraqi governments situated in the eastern border of Iraq ,with total population of approximately 1,457,000 .data collection and analysis last for about 6 months between 1st of December and 1st of May 2021. In our study, 170 women approached in institutions, hospitals, families and through social media who fulfilled the inclusion criteria and consented to share their information. The study women were subjected for direct interviewer using a structured questionnaire that composed two part; the 1st to collect the basic demographic data (age, resident, education level and parity); while the 2nd was targeted for evaluation knowledge, attitude and to explore practices used for contraception.

Statistical analysis

All obtained data were documented using the Microsoft Office excel, and analyzed statistically using the SPSS Software using.

RESULTS

In our study, the total number of participants was 170 women of childbearing age, 59 girls (34.5%) were more than 40 years age, 107 of them who were equal to 62.9% between 18-40 years, while only 4 (2.4%) were less than 18 years. Regarding participant resident, 134 women (78.8%) were living in governorate center, 35 (20.6%) were living in township, while only 1 woman out of total number who was equal to (0.6%) was living in a village.

Concerning educational levels for participants in the study were as follow: 162 (95.3%) women had secondary or higher education status, 6 (3.5%) only had primary education and 2 (1.2%) were read and write. In this study, 15 women (8.8%) were nulliparous, 119(70%) were having equal or less than 3 children and 36 of them (21.2%) were having more than 3 children (**Table 1**).

Table (1): Demographic distribution of participants

Factor	Group	No.	%
Age (Year)	≤18	4	2.4
	>18-40	107	62.9
	> 40	59	34.7
Resident	Governorate center	134	78.8
	Township	35	20.6
	Village	1	0.6
Level of education	Secondary and higher	162	95.3
	Primary	6	3.5

	Read and write	2	1.2
Parity	Nulliparous	15	8.8
	≤ 3 children	119	70
	>3 children	36	21.2

Our study revealed that out of 169 women included were familiar with modern contraception methods and only 1 (0.6%) not got knowledge before. Most common popular modern contraception method was combined oral contraception pills 99.6%, followed by condom (99%) and then intra uterine device 95.4% and the least known modern method was implant 43.2%, (**Table 2**).

Table (2): Knowledge of modern contraception methods

Contraception methods	No.	%
Injection	115	69
Combined oral contraception pills	166	99.6
Progesterone only pills	101	60.6
Intra uterine device	159	95.4
Implant	72	43.2
Condom	99	168
Didn't know any of modern contraception methods	1	0.6

Information about contraception methods were acquired mainly from social media (34%), followed by social circle (schools, institutions, and friends) in 33 percent, knowledge from health care workers was 29% and the least source of information was from family in 3.5% (**Table 3**).

Table (3): Sources of knowledge of contraception methods

Sources	No.	%
Health care workers	50	29
Social circle (School, institution, and friends)	56	33
Social Media	58	34
Family	6	3.5

Our study revealed that 59.4% of women were agree with contraception methods that fundamental to help women in child bearing age to prevent unwanted pregnancy and improve maternal health, 102 women (60%) believe that modern contraception methods has a role in treatment of menstrual cycle disorders, majority of women enrolled in the study had no idea about the role of contraception methods in probability of future sterility in women currently adopted contraception and 32.4% disagree with such idea (**Table 4**).

Table (4): Attitude of contraception methods

Questions	Answer	No.	%
Contraception methods are fundamental	Agree	101	59.4
	Disagree	30	17.6
	Neutral	39	22.9
Contraception methods has a role in treatment of menstrual disturbances	Agree	102	60
	Disagree	43	25.3
	Neutral	25	14.7
Contraception methods can cause sterility	Agree	51	29.9
	Disagree	56	32.4
	Neutral	63	37

Among study population, there were totally 50.6% apply, in a previous time, at least one of modern tool of contraception, 48.2% were recently apply one modern FP method, and 1.2% did not use any of modern methods. In our study 29.4% registered failure of at least one of contraception method, they practiced before either traditional or modern methods (**Table 5**).

Table (5): Practice of modern contraception method among women

Questions	Answer	No.	%
Did you practice contraception before	Did not use at all	2	1.2
	Use in the past	86	50.6
	Currently use	82	48.2
Failure of contraception before	No	120	60.6
	Yes	50	29.4

We found that condom was the most popular method used among the women enrolled in our study about (31.2%), followed by combined oral contraception pills which was practiced in 26.5% and the least used modern method was Implant3.5% out of all participants (**Table 6**).

Table (6): Practice of contraception among childbearing age women

Contraception method	No.	%
Safe period method	3	1.8
Coitus interrupts (withdrawal)	30	17.7
Injection	7	4.1
Intra uterine device	26	15.3
Condom	53	31.2
Combined oral contraception pills	45	26.5
Implant	6	3.5
Total	170	100

DISCUSSION

The common acceptance of birth control is an important part of modern development and is necessary for the incorporation of women into economic and social life (Whaley, 2007; El Bernoussi and Dupret, 2018). The objective of this research was to explore the knowledge, attitude and practice information of a sample of females in childbearing age. Awareness and knowledge of different contraceptive methods is the key to choose different contraceptive and to practice them. For the majority of the participants, Knowledge of methods of contraception was assessed by scoring the responses of participants on the various methods of contraceptives they know. If a participant mentioned none or only one correct method of contraception, she was regarded as having poor knowledge, whereas good knowledge when a participant mentioned two or more correct methods. Of the participants who were aware of contraception, 99.6% mentioned oral contraceptives as one of the methods of contraception, 95.4% mentioned intrauterine device as a method of contraception and 43.2% mentioned the participants have mentioned implant as a least method of contraception. This is supported by other locally performed studies, in which, the findings found that 58.2% of the participants had moderate knowledge of FP (Al Abedi et al., 2020), and this showed that 61.8% of the sample knows that FP will reduce physical or emotional pressure on them in the future (Ismail et al., 2014). Comparable finding reported by Parveen (2017) reported that 93% of the women's response was positive regarding the general knowledge and awareness of contraceptive. In another study conducted in Mosul (Iraq) the findings reported that the intrauterine contraceptive device and oral pills were the most known and the most popular methods (Aldabbagh and Al-Qazaz, 2020). In contrary, Kasa et al. (2018) found 57.7% of Ethiopian women were having a poor knowledge regarding contraception methods. In other studies, the findings showed that women participating from undeveloped countries do not have enough knowledge about contraceptive methods, for example, women in Nigeria had poor knowledge of contraceptives by 34%; while in Tanzania, most women do not have sufficient knowledge about modern methods used (Aziken et al., 2003; Onwuhafua et al., 2005; Senghore et al., 2018).

Regarding sources of knowledge of our study, 34% mentioned mass media as their main source of information regarding contraception methods rather than healthcare workers, similar to a study conducted by Parveen (2017) which reported that knowledge about these methods was obtained primarily from relatives and friends. In study carried out by Jabeen et al. (2011), it has been reported that the main source of information of the respondents regarding contraceptive were relative /friends then followed by health care worker. In comparable to studies performed in south Asian countries (in India and Pakistan), it found that the media as the major source of information (Khan et al., 2011; Parveen, 2017). In contrast to findings observed by Nansseu et al. (2015) who reported that the main source of information being the health personnel; and to a study in Ghana 2016, in which, the results showed the first important source for information of contraception was hospitals and clinics (Anaman and Okailey, 2016).

Data analysis revealed that most of the participants (95.3%) were secondary or highly educated, only 3.5% of them finished primary school and, few were read and write only. This observation

shows a linear relationship of contraceptive awareness with education. Other studies conducted in near regions also reported the finding of significant correlation of contraceptive knowledge and use with participant's education level and working status which is similar to results obtained by Al Abedi et al. (2020) who showed that women who completed primary and secondary education followed more FP methods than were illiterate. Also, this is comparable to a study in Qatar revealed that knowledge of FP was associated with educational level and it increases with increasing level of education (Arbab et al., 2011) and also to a study of Nuzhat Parveen who reported that university level educated women were found to have maximum awareness regarding contraception (Parveen, 2017).

Our study revealed that the almost women were agreed contraception to prevent the unwanted pregnancy, and to improve maternal health. Also, majority of women believed that the modern contraception methods has a role in treatment of menstrual cycle disorders, and majority of women enrolled in the study had no idea about role of contraception methods in probability of future sterility in women currently adopted contraception. this is agree with Parveen (2017) who suggest that more than half of the women feel they need more knowledge and information regarding this issue .

Concerning practice of FP methods, 48.2% of participants were currently used contraception method, 50.6% practice contraception in previous period, and only 1.2 % did not practice any method before. We have moderate prevalence of contraception practice in our study, which is comparable to a study achieved by Aldabbagh and Al-Qazaz (2020) who reported high prevalence of using FP 67.3%, and comparable to a study conducted in Basrah at 2011, in which, the prevalence of contraception practice was 53.7% (Ebrahim and Muhammed, 2011). Our study was agreed with Al Abedi et al. (2020) who showed a moderate level of knowledge, attitudes, and practices related to FP, and with Alharbi et al. (2017) who suggested that two thirds of participates have reported the use of contraceptive methods.

In our study, condom was the most commonly used method of contraception (31.2%) while combined oral contraception pills was the second most common used method of contraception (26.5%). The least method of contraception used among the participants was injection and implant 4.1% and 3.5% respectively. Our study results were similar to Gosavi et al. (2016) who concluded that the condom was the method with the highest uptake in his study. This might be attributed to that condoms being widely available and highly publicized in safe sex campaigns. In contrast, Aldabbagh and Al-Qazaz (2020) reported that the intrauterine contraceptive device was the most frequently used method, which followed by oral pills, while the safe-period method was the least frequently used in her study. However, our findings were in contrast to those reported by Alharbi et al. (2017) who reported that the oral contraceptive pills is the most popular method to delay pregnancies among reproductive aged women of Hail region followed by intrauterine device, and coitus interruptus, respectively. This disagreement was found with those studies achieved in countries like United States, United Kingdom, Italy and Germany; in which, oral contraception pills was the most commonly used contraceptive method (Johnson et al., 2013).

CONCLUSION

Women in our study have good awareness, knowledge and practice of contraception methods. More effective ways are needed to educate women about the modern contraceptive methods especially types that need further intervention on application as implanon, intrauterine contraception device to be achieved by health care provider rather than social media, family, peers or social circle. It stressed the need of health personnel to be involved more for the provision of such information. Public health organizations should initiate their focus on raising awareness in both partners; facilitate the access toward the variety of the contraceptive options. Condom and Pills are the most famous form but there is a great need to promote other methods as well so that women can find more options for their contraceptive wishes.

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