

KNOWLEDGE AND AWARENESS REGARDING ANTENATAL CARE AND DELIVERY AMONG PREGNANT WOMEN

Tanveer Shafqat, Seemi Fayaz, Rehana Rahim, Shehzadi Saima

Department of Obstetrics & Gynaecology, PGMI, Lady Reading Hospital, Peshwar - Pakistan

ABSTRACT

Objectives: To assess the knowledge and awareness of pregnant women regarding antenatal care and delivery.

Material and Methods: This descriptive study was carried out in Antenatal clinic of Lady Reading Hospital Peshawar, from January 2013 to March 2013. The knowledge and awareness of pregnant women were obtained through face to face interview and by filling a questionnaire. The questions were asked by three data collectors

Results: A total of 256 women attending antenatal clinic were interviewed using non probability sampling method. The mean age of the sample was 25.15 years with $4.45 \pm SD$. Two hundred and twelve (82.81%) women had the knowledge of antenatal care and thought that it was important while 44 (17.81%) women had knowledge of antenatal care but they thought it was not important. Two hundred and fifteen (83.98%) women had awareness regarding appropriate diet and 207 (80.85%) had knowledge regarding iron and vitamin supplementation during pregnancy. Two hundred and fifty (90.65%) women believed that getting antenatal care will improve the pregnancy outcome. 130 (50.78%) women had taken folic acid supplementation in first trimester. Two hundred and twenty (88.67%) women thought that they got the expected antenatal care in hospital. Two hundred and ten (82.03%) women favoured hospital as a place of delivery while 46 (17.96%) preferred to deliver at homes and private clinics. Two hundred and eight (81.25%) women wanted a doctor to attend their labour. Only 116 (45.31%) women had antenatal care in their past pregnancies. The awareness about antenatal care was highest in primigravida (86.95%), in younger women (18-35) (84.54%), in educated couples (92.5%) with better socio-economic status (79%).

Conclusion: Knowledge about antenatal care and its importance was much higher in primigravidas, younger educated women having educated husbands and better socio economic status. Majority thought that antenatal care was important, took appropriate diet and iron, folic acid and vitamin supplement, and favoured hospital delivery by skilled personal.

Key Words: Antenatal care, Importance, Knowledge, Attitude, Practices.

INTRODUCTION

Antenatal care is considered as a back bone of obstetrical services of any health care delivery system. It is considered to be important for health of pregnant women and is the way in which maternal and fetal complications are detected and managed. Antenatal care has well established and recognised role by the pregnant patients in developed countries. In developing countries its importance is not well established and hence leads to poor attendance of antenatal clinics by the pregnant patient. The antenatal period presents important opportunities for reaching pregnant women

to the hospital with a number of interventions that may be vital to their health and well being and that of their neonates. Confidential inquiries into maternal deaths in developing countries have found a positive association with inadequate antenatal care as a risk factor for maternal mortality.^{1,2,3} According to National Demographic study of Pakistan, 70% of women do not get antenatal care, 23% get antenatal care by doctors, 3% by nurse, lady health visitors or family social worker and 4% by trained or untrained traditional birth attendant.⁴

This study was conducted in order to assess the knowledge and attitudes and practices of pregnant women attending a tertiary care hospital as it was previously observed that high percentage of women coming for antenatal care to the hospital prefer to deliver at hospital and wanted delivery by a trained personal, thus showing strong association between antenatal care and safe delivery and have reduced maternal mortality⁵.

Address for Correspondence:

Dr. Tanveer Shafqat

Associate Professor

Department of Obstetrics & Gynaecology,

PGMI, Lady Reading Hospital, Peshawar - Pakistan

Cell: 0334-9192908

Email: maple9894@yahoo.com

MATERIAL AND METHODS

This study was conducted in Lady Reading Hospital, Peshawar from January 2013 to March 2013. We selected women attending Antenatal clinic of our Obstetrics and Gynaecology OPD using Non probability sampling method. A questionnaire was designed and all the women were interviewed regarding their knowledge and awareness about antenatal care.

The questionnaire was designed to include information regarding gravidity, parity, number of alive children. Women were also asked about their previous antenatal care, previous deliveries and neonatal outcome. Information was gained about the women and their husband's educational and socioeconomic status. The patients responses regarding awareness were recorded as 'Yes' or 'No'. They were also enquired about any familial or social constraints regarding regular antenatal care and importance of hospital delivery. Their knowledge about appropriate diet, (how many times did they eat meat, vegetables, pulses, fruits, dairy products was asked. They were asked about iron and folic acid supplementation during pregnancy. The attitude of the women who actually wanted hospital delivery or they just came to have antenatal checkups by an Obstetrician to exclude any maternal and fetal complications was also noted down.

RESULTS

Two hundred and fifty six women attending antenatal clinic were interviewed. The questionnaire included all the information about demographic data and relevant factors affecting attitude and practices about antenatal care. Our results show that out of 256 women primigravida were 69 (26.95%), multigravida 153 (59.76%) and grand multigravida were 34 (13.28%). Two hundred and twenty women (86.71%) were between 18-35 years age group. Seventeen women (6.64%) were <18 years and same number were above 35 years (6.64%). The mean age of sample was 25.15 with SD 4.45.

Regarding socioeconomic status, it was found to be poor in 189 (73.82%) women, defined as monthly income of Rs 5000-10,000. Sixteen (6.25%) women had no idea about their husband's income and 8 (3.12%) had no proper source of income. Out of 256 women only 43 (16.79%) had monthly income of more than Rs. 10,000. One hundred and fifty seven (61.32%) were illiterate while 78 (30.45%) women had received education from primary to secondary level. Only 11 (4.29%)

women reached intermediate level and 5 (1.95%) were graduate. Amongst all only 4 (1.56%) were professionals. When we compared the educational status of women to their husbands status we found that 112 (43.75%) were illiterate, 104 (40.62%) received primary to secondary level education. Only seven were post graduates.

During analysis of data it was found that 102 (39.84%) and 101 (38.45%) women visited antenatal clinic during first and second trimester of pregnancy respectively. Only 53 (20.70%) women had their first antenatal visit in third trimester of their pregnancy. One hundred and fifty nine (62.10%) had only two visits in the antenatal clinic. This was because their husbands and other family members (in laws) were reluctant to bring them to hospital for antenatal care. Only 42 (16.40%) women had regular visits in antenatal clinic for 5-6 times.

Eighty three percent had proper knowledge of appropriate diet. Out of these (80.00%) and 50.78% were taking iron and folic acid supplementation respectively. Two hundred and twelve (82.81%) women knew that antenatal care is important both for mother and pregnancy outcome. Only 44 (17.18%) women had no idea about importance of antenatal care.

Two hundred and twenty women (88.67%) were satisfied with care provided in antenatal care and appreciated the behaviour and skills of the doctors. Eight (3.12%) women had no idea and twenty-eight (10.93%) women were not satisfied with the care providers. Two hundred and ten (82.03%) and 208 (81.25%) women wished to deliver at hospital and by the doctor respectively. 36 (14.06%) women wanted home delivery as they previously delivered at home. These women 18 (7.02%) were aiming to deliver at home being cared about by TBA and LHV. Twenty women (7.81%) wanted home delivery supervised by their relatives.

DISCUSSION

Our study showed the demographic variables such as age ranging from 18-35 years (86.71%) which is the major proportion of reproductive age. Gravidity of participants ranged from primigravida (26.95%) and multigravida (59.76%). Only (13.67%) of grand multigravidas visited antenatal clinic. These variables are similar to the study performed by Alam AY et al⁶.

This high percentage of women from reproductive age indicates that they had better knowledge about antenatal care. It also shows their awareness about regular

antenatal care which can reduce both maternal and fetal complications⁷. Grand multigravida (13.28%) considered that antenatal should be sought in the presence of any risk factors or pregnancy complications. However this percentage is relatively high compared to (8.72%) mentioned in a study by Rehman KMM in conducted in Bangladesh⁸. (82.81%) of women considered antenatal care is important for better pregnancy outcome while (17.81%) women visited antenatal clinic to seek remedy for their problems during pregnancy. These were the women who had previous home deliveries and did not want to come for regular visits due to illiteracy and socioeconomic constraints⁹.

Education and socioeconomic status were directly proportionate to level of awareness, regularity of antenatal visits and timing of first antenatal visit. Our results are similar to the study on utilization of maternal health care services in Kenya¹⁰ and China¹¹. Eighty percent of women in our study had awareness about appropriate diet, while (80.85%) were using iron supplementation. Similar figures are reported in KAP study by Alam AY.⁵ Two hundred and twelve women (82.81%) responded as yes to the question (is antenatal care important?) while forty four (17.81%) women said no to this question, similar results are shown in a study (Women's opinion on antenatal care in developing countries)¹².

Undoubtedly, patients and care givers perspective a mirror of the quality of the care received and provided. Out of 256 women, 207 (80.85%) were satisfied with antenatal care, information given to them by doctors about labour and delivery, family planning, pregnancy complications and emergency obstetric care. They showed satisfaction regarding the care provided by the staff. Forty nine (19.14%) women were not satisfied with care provided as they were expecting. These results are similar to the study by Langer A et al¹³.

Those women who were attending antenatal clinic regularly since start of their pregnancy and especially those who had previous hospital delivery favoured hospital delivery this time as well. There was strong association between attendance at antenatal clinic and use of skilled professional assistance at delivery. (82.03%) women opted for hospital delivery in our study group while (81.25%) wished to be delivered by a doctor. Results are similar to a Chinese study by Zhuochun et al¹⁴. Only thirty six women (14.06%) wished to have home delivery as they had good experience of delivery by TBA's and LHV'S (7.01%). Twenty women (7.81%) wanted to be cared after by their own relatives

at the time of delivery at home. These figures are in accordance with the study done in Rural Bangladesh¹⁵.

CONCLUSION

The awareness regarding the importance of antenatal care is the need of this era. The antenatal checkup are helpful to mothers as well as to the foetus.

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AUTHOR'S CONTRIBUTION

Following authors have made substantial contributions to the manuscript as under:

- Shafqat T:** Idea and operating surgeon.
Fayaz S: Data collection.
Rahim R: Bibliography.
Saima S: Statistics.

Authors agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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