Knowledge, attitude and practice of contraception among HIV positive pregnant women in CWH, Yangon

Dr Thinn Ma Ma, AP Dr Myint Thet Mon, Prof Dr Mya Thida, Prof Dr SanSan Myint

Introduction

- 36.9 million people are living with Human Immunodeficiency Virus (HIV) in 2014 (The global summary of AIDS).
- In Myanmar, HIV prevalence rate increased (0.53% in 2012 to 0.77% in 2014)
- HIV prevention, treatment, care and support services and sexual and reproductive health services available for the women

- In Myanmar, Prevention of Mother to Child Transmission (PMCT) programme was first launched in 2004.
- The PMCT service has reached to the relatively large area in the country.
- The number of women choosing to assess the service has risen continually (MOH, 2012).
- One of the fundamental components of PMCT is prevention of unwanted pregnancy.
- Available in all reproductive health services
- At these services, the risk behaviours and family planning methods were laid out

Can make informed choices

- Differences in uptake of information and services among HIV positive women
- Spectrum of responses depends on the individual's knowledge, experiences and attitude on HIV as well as birth spacing.
- Choice of contraception influenced by
 - -socio-economic status
 - educational status of women
 - -the decision and advices of husband and relatives

- In a study in Malawi, it had been shown that there were high unmet needs and low adequate knowledge on contraception among HIV positive women (Owen, 2011).
- Males were found to have higher knowledge on HIV and also regarded themselves as decision makers in condom usage in Myanmar (Htike-Myat-Phyu, 2006).
- In this study the knowledge, attitude and practice of contraception among HIV positive pregnant women were assessed during the period of 1st January to 31st December, 2015.

Objectives

- To identify the socio-demographic profile of the HIV positive pregnant women at Central Women's Hospital, Yangon
- To identify the knowledge, attitude and practice of various forms of birth spacing among HIV positive pregnant women
- To assess the association between the sociodemographic factors and knowledge and attitude related to practice on birth spacing among HIV positive pregnant women

Methods

- A hospital-based cross-sectional descriptive study
- at antenatal outpatient department and B
 Block of Central Women's Hospital (Yangon)
- From 1st January, 2015 to 31st December, 2015
- The pregnant women diagnosed as HIV positive by PMCT programme or who had already known their HIV status were included
- semi-structured questionnaires

- assess socio-demographic characteristics, the knowledge, attitude and practice on birth spacing among HIV positive pregnant women
 Knowledge
- usage of the methods
- advantages and disadvantages
- total 26 questions
- the knowledge levels were put into two categories: good knowledge and poor knowledge by using median ± SD

Attitude

- questioning about their concepts and attitudes regarding birth spacing
- and total score was eight
- the scores were put into two group: positive attitude and negative attitude using median±SD
- Practice
- the use of contraceptive methods before this pregnancy
- the reason for getting this pregnancy
- method that the women choose to use in future
- the plan for usage of condom

Results

Socio-demographic characteristics

Ν	Characteristics	Numbers	Percentage
ο			
1	Age (Year)		
	15-19	6	3.0
	20-24	34	17.0
	25-29	55	27.5
	30-34	68	34.0
	35-39	34	17.0
	40-44	3	1.5
	≥ 45	0	0
2	Gravida		
	1	94	47.0
	2	65	32.5
	3	25	12.5
	4	9	4.5
	≥5	7	3.5

Education status of respondents and husbands



HIV status of respondent's husbands

N O	HIV status of respondents' husbands	Number	Percent
1	Positive	81	40.5
2	Negative	69	34.5
3	Unknown	50	25
	Total	200	100

Awareness of different methods of contraception

No	Methods	Number of patients	Percent
1.	Oral contraceptive pills	197	98.5
2.	Depo injection	188	94.0
3.	Condom	162	81.0
4.	Female sterilization	151	75.5
5.	IUCD	89	44.5
6.	Emergency contraceptive pills	58	29.0
7.	Implants	31	15.5
8.	Exclusive breastfeeding	1	0.5
9	Other methods	1	0.5

Knowledge on usage of contraceptive methods

How to use OC Pills	Number of respondents	Percent
Right method	181	90.5
Wrong method/ Don't know	19	9.5
Total	200	100

How to use Injection Method	Number of respondents	Percent
Right method	155	77.5
Wrong method/ Don't know	45	22.5
Total	200	100

Knowledge of emergency contraception

No	Knowledge on emergency contraception	Number of respondents	Percent
1	Yes	58	29.0
2	No	142	71.0
3	Total	200	100

	Timing of emergency pill	Number of	Percent
	usage	respondents	
1	Within 24 hours	7	12.08
2	Within 48 hours	19	32.75
3	Within 72 hours	27	46.55
4	Within 120 hours	5	8.62
	Total	58	100

Distribution of source of information about birth spacing

No	Source of information	No. of respondents	Percent
1	Hospital/ Healthcare Center	62	31
2	TV	3	1.5
3	Newspaper/ Journals/ Magazine	4	2.0
4	Relatives/ Friends	115	55.5
5	Husband	16	8.0
	Total	200	100

Knowledge score of studied patients

Νο	Total knowledge score	No. of respondents	Percent
1	Good	103	51.5
2	Poor	97	48.5
	Total	200	100

Respondent's attitude towards birth spacing

	Attitudinal Questions		Agree		Disagree		Don't know	
		No	%	No	%	No	%	
1	HIV positive women should have another	30	15.0	109	54.5	61	30.5	
2		74	27.0	0.0	10.0	2.0	14.0	
2	Women should decide what method to be	/4	37.0	98	49.0	28	14.0	
	used by herself							
3	HIV positive women should use a	168	84.0	2	1.0	30	15.0	
	contraceptive method							
4	If HIV positive women get pregnant it will	141	70.5	13	6.5	46	23.0	
	be harmful to the baby							
5	HIV positive women should do sterilization	97	48.5	35	17.5	68	34.0	
6	Contraception should be used by women's	48	24.0	118	59.0	34	17.0	
	free will							
7	Birth spacing is not needed among HIV	12	6.0	157	78.5	31	15.5	
	positive women							
8	Prior to using contraceptive method, women should consult a skillful person	136	68.0	29	14.5	35	17.5	

Distribution of respondents according to usage of contraception

No	Method	Number of respondents	Percent
1	OC pills	66	49.3
2	Depo provera injection	45	33.6
3	IUCD	6	4.5
4	Condom	10	7.5
5	Emergency pills	5	3.7
6	Others	2	1.4
	Total	134	100

Distribution of respondents by reasons for having this pregnancy

Νο	Reason	Number of respondents	Percent
1	Haven't used regularly	54	44.62
2	Want to have a child	46	38.01
3	Incorrect timing	11	9.09
4	Don't know for certain	7	5.78
5	IUCD expulsion	2	1.66
6	Others	1	0.84
	Total	121	100

Contraception methods planning to use in future

No	Contraception method	Number of	Percent
		respondents	
1	OC Pills	20	10.0
2	Injection Depo Provera	58	29.0
3	IUCD	21	10.5
4	Condom	20	10.0
5	Emergency pills	2	1.0
6	Sterilization	68	34.0
7	Implant	0	0.0
8	Others	4	2.0
9	Not plan to use	7	3.5
	Total	200	100

Numbers of patient who had plan to use condom in future

No	Condom Usage	Number of	Percent
		patients	
1	No condom usage	7	3.5
2	Condom alone	20	10
3	Dual Method	173	86.5
	Total	200	100

Relationship between educational levels of respondents and KAP

	Knowledge		Attitude		Practice			
Education	Good	Poor	Positive	Negative	Condom	Sterilization	Other	
Low	25 (31.6%)	54 (68.4 %)	38 (48.1%)	41 (51.9%)	9 (11.4%)	22 (27.8%)	48 (60%)	
Medium	42 (41.6%)	59 (58.4 %)	55 (54.5%)	46 (45.5%)	10 (9.9%)	34 (33.7%)	57 (56.4%)	
High	1 (5.0%)	19 (95%)	6 (30%)	14 (70%)	1 (5%)	12 (60%)	7 (35%)	
χ2	29.	55	3.152		7.411			
P value	<0.001		0.207		0.1157			

Relationship between educational levels of husbands and KAP

Education	ducation Knowledge		Attitude		Practice			
al level	Good	Poor	Positive	Negative	Condom	Sterilization	Others	
Low	9 (20.5%)	35 (79.5%)	19 (43.2%)	25 (56.8%)	4 (9.1%)	10 (22.7%)	30 (68.2%)	
Medium	70 (53.8%)	60 (46.2%)	69 (53.1%)	61 (46.9%)	14 (10.8%)	44 (33.8%)	72 (55.4%)	
High	24 (92.3%)	2 (7.7%)	19 (73.1%)	7 (26.9%)	2 (7.7%)	14 (53.8%)	10 (38.5%)	
Total	103 (51.5%)	97 (46.5%)	103 (51.5%)	97 (46.5%)	20 (10%)	68 (34%)	112 (56.0%)	
χ2	34.599		5.898		50.46			
P value	<0.001		0.052		<0.001			

Discussion

Socio economic status

- majority of respondents -25 to 34 years (61.5%)
- In accordance with the previous studies Yin-Yin-Sein, 2004 (25-29 yrs) and Owen, 2011 (30 yrs).
- most of the women had primary and middle school education (26.5% and 35% respectively).
- lower educational level than Nway-Nway-Win (2012)

husbands – higher education than women respondents. (similar to Nway–Nway–Win 2012)

- > 40.5% of husbands were HIV positive
- > 25% of husbands had unknown HIV status.
- Male involvement in the voluntary testing of HIV infection – still unsatisfactory.

Knowledge on contraception

- Nearly all women had heard about contraceptive methods (99.5%) similar to Nway-Nway-Win, 2012.
- Oral contraceptive pills most have heard of(98.5%) similar to the two studies Myat– Myat–Wah (2003) and Wai–Phyo (2009) different from Nway–Nway–Win's study
- Knowledge about condom -higher than that of Nway-Nway-Win(81% Vs 12.5%)

- More than 75% of women knew the correct usage of OC pills and Depo inj.
- The emergency contraceptive pills 29% of women, a marked improvement from 4.5% in 2012 study.
- may be due to the availability of over-thecounter emergency contraceptive drug and spread of information of the drug
- Most didn't know the correct method of usage
- More than half of women knew methods from friends and relatives, very low from medias
- Need more HE from medias

Attitude on family planning

- Around 50% of women thought that they should not have another child
- 84% of women agreed of using contraceptive method
- Only 48.5% women thought that they should have irreversible method (sterilization).
- Women still relied on the thought and decision of people around her in choosing a method.
- strengthened the concept that the family planning programme should be directed to the whole community

Practice

- Almost all women (99.5%) had heard of contraception, only 67% had used a method.
- OC pills and Inj are most commonly used.
- No user on implant
- Only 37.8% of women had this pregnancy due to their desire
- Showed unmet needs such as incorrect method, irregular usage, etc in others.
- The available contraceptive methods and accurate information on advantages and disadvantages of each method should be distributed to the community.

- Permanent method was chosen by 68 women (34%) as future contraception
- Other 66% chose reversible methods
- 40% out of 66% chose long acting reversible contraception but none chose implant
- Still have low knowledge and usage on implant.

- The education of women had significant influence on the knowledge of contraception.
- The more important factor influencing KAP in women – the literacy of husbands (significant influence on not only knowledge but also contraception usage)
- correlate with the previous study where male regarded themselves as decision makers for family matters including health (Htike-Myat-Phyu, 2006).
- Plans on giving health education to husbands and male involvement in post test counselling and decision making will be beneficial

Thank you