

# Knowledge, Attitude and Practice of Emergency Contraception Among Youths of Parbat District

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## ABSTRACT

Unsafe/unprotected and early sexual relations which are highly responsible for the problems of unwanted pregnancy, childbirth and other adverse consequences which can be effectively minimized with the help of emergency contraception. The objective of this study was to identify the level of knowledge, attitude and practice of emergency contraception among the youths. This institutional based descriptive study was carried out among the youths of 15–24 years of Parbat district in the month of February 2011. A total of 400 students from eight higher secondary schools and three undergraduate colleges were taken as a unit of study. Multistage sampling with self administered questionnaire was used to collect the related data and information. Majority of respondents were of 15 to 17 years (66%) and unmarried (94.25%). The awareness of EC among the respondents was found only 47%, among which very few mentioned the correct definition (17.02%) and consuming time (9.58%) of EC. Overall knowledge was assessed as high level 7.98%, medium level 47.34% and low level 44.68%. Despite of inadequate knowledge on EC, attitudes was found favorable among the respondents. The practice of EC was found 8.34% among the sexually active respondents (21%). Factors like 'age', 'sex', 'educational level' and 'friends using EC' were found associated with KAP on EC. The study concludes that more than half of the youths were unaware of emergency contraception. Among the aware, very few were familiar with its correct meaning, consuming time and other related aspects. More efforts should be exerted towards arising and improving the awareness of EC among the youths.

**Key words:** *Emergency Contraception (EC), Youths, Unsafe/unprotected sexual intercourse, Knowledge, Attitude & Practice (KAP)*

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## INTRODUCTION

Unintended pregnancy, teenage pregnancy, induced abortive procedure with adverse effects and complications are some of the common reproductive health problems affecting millions of females globally, counted as some of the leading causes of maternal mortality and morbidity, the proportion of which is subsequently high in South Asian countries. Globally, some 45 million unintended pregnancies are terminated each year; of which an estimated 19 million are terminated in an unsafe condition. Approximately 40% of all unsafe abortions are performed on young women aged 15 to 24.<sup>1</sup> In developing countries, at least 5 million undergo unsafe abortion each year.<sup>2</sup> About 14% of the unsafe abortions in developing countries are among women under 20 years.<sup>3</sup>

It is estimated that among the total pregnancies each year in South and South-East Asia, about one-third are unplanned or unintended. For example, about 30 percent of pregnancies in Bangladesh, 21 percent in India, and 35 percent in Nepal are unplanned.<sup>4</sup> Many of Nepal's births are unwanted women desire an average of 2.5 births, yet give birth to an average of 4.1 births, and many result in abortion.<sup>5</sup> Female youths of Nepal, especially of rural areas are the sufferers of early marriage, early pregnancy and unsafe abortion with adverse consequences.

Emergency contraception has the potential to greatly reduce the number of unintended pregnancies. It is a safe and effective intervention to which all females should have easy access in the event of an act of unprotected intercourse. The objective of this study was to identify the level of knowledge, attitude and practice of emergency contraception among

youths along with identifying the factors associated with knowledge, attitude and practice of emergency contraception.

## MATERIAL AND METHODS

The study was institutional based descriptive type conducted among the youths of 15 to 24 years studied in higher secondary and undergraduate level of Parbat district in the month of February 2011. Out of the total eleven areas of the district, one educational institution was selected from each of the area to make it a good representative. By this eight higher secondary schools and 3 undergraduate colleges were selected. Multistage sampling was done which follows as Purposive for district selection, simple random sampling for selection of institutions, proportionate sampling to select the number of sample from each institution and finally systematic random sampling for the selection of ultimate respondents from each institution.

The sample size for the study was 400 viz. Vidhyajyoti H.S. School, Majhphat-35; Pang Dhairani H.S. School, Pang-28; Nawajagrit H.S. School, Tilahar-100; Janata Sudarshan Multiple Campus, Thulipokhari-8; Gupteshwor Multiple Campus, Shivalaya-35; Motedewal Janasanskrit H.S. School, Mudikuwa-21; Parbat Multiple Campus, Devasthan-26; Sarada H.S. School, Kurgha-28; Mahendra Jyoti H.S. School, Lunkhu-54; Paiyan Multiple Campus, Tribeni-23 and Shaligram H.S. School, Shaligram-42.

## RESULTS

Regarding the Socio-demographic profile, the study revealed that majority of respondents (66%) lies in the age group of



15–17 years, and more female size (54.5%). Majority of respondents were unmarried (94.25%) and not engaged in any type of employment (99%).

Among the total 400 respondents, only 47% (N=188) were aware (i.e. ever heard about emergency contraception). Among the respondents who were aware, only 17.02% were able to mention the correct definition of emergency contraception i.e. method to prevent pregnancy after unprotected sexual intercourse. Despite of the correct meaning, only 9.58% respondents have the knowledge of correct consuming time of EC. The knowledge on various trade names of ECPs i.e. 'e-con™, Postinor™ and i-pill™ were found 5%, 4% and 7% respectively. Regarding the various conditions of ECPs, only 39.36% knew that ECPs should not be used by pregnant women; and only 13.82% had known that ECPs cannot be used regularly like other oral contraceptive pills.

**Table 1: Percentage distribution of knowledge on emergency contraception (N=188)**

S.N.	Statement	Correct No. (%)	Incorrect No. (%)
1	Emergency contraceptive is a method to prevent pregnancy after unprotected sexual intercourse.	32 (17.02)	156 (82.98)
2	Both Pills and Copper T can be used as the devices of emergency contraceptives.	86 (45.75)	102 (54.25)
3	The correct time of using emergency contraceptive is as soon as possible or within 72 hours to maximum 5 days of unprotected sexual intercourse.	18 (9.58)	170 (90.42)
4	The side effects of emergency contraceptive are nausea/vomiting, menstrual cycle disturbance, lower abdominal pain, headache, dizziness, etc. (MR)	286 (152)	71 (38)
5	Emergency contraceptives are available in hospital, health centers and medical clinics.	175 (93.05)	13 (6.95)
6	Emergency contraceptives should not be used by pregnant women.	74 (39.36)	114 (60.64)
7	Emergency contraceptive pills should not be used regular as other contraceptive pills.	26 (13.82)	162 (86.18)
8	Emergency contraceptive pills does not protect from sexually transmitted infections.	47 (25)	141 (75)
9	Emergency contraceptives cannot be used for abortive process.	63 (33.51)	125 (66.49)
10	E-con, i-pill, unwanted-72, sunaulo gulaf, etc. are some of the brand names of emergency contraceptive pills.(MR)	95 (51)	105 (57)

As per the responses provided by respondents, the level of knowledge was assessed and the category of level of knowledge is identified as high (7 – 10), medium (4 – 6) and low (1 – 3).

**Table 2: Scoring distribution of knowledge on emergency contraception**

Knowledge score	Frequency	Percentage
High (7 – 10)	15	7.98
Medium (4 – 6)	89	47.34
Low (1 – 3)	84	44.68
Total	188	100.00
Maximum 8 Minimum 1 Mean 3.8 SD 1.9		

To identify the attitudes regarding EC and its related aspects, a set of statement was prepared following a widely accepted Likert's scale, with the help of which information was collected. The statements were differentiated as favorable and unfavorable and each was scored in terms of agree, neutral and disagree. The scoring was done as 3, 2 and 1 for agree, neutral and disagree in case of response towards favorable type statements whereas 1, 2 and 3 for agree, neutral and disagree respectively for the response towards unfavorable type statements.

**Table 3: Percentage distribution of attitudes on emergency contraception**

Attitude score	Frequency	Percentage
11 – 20 (Unfavorable)	28	14.90
21 – 30 (Favorable)	160	85.10
Total	188	100.00
Minimum 17 Maximum 30 Median 24 SD 3.16		

The study found 21% (N=84) respondents were ever had sexual experience, the median age of first sexual intercourse being 16 years. Majority of respondents 64.28% have used condom during their first sexual intercourse whereas 70.23% have used condoms during their latest sexual intercourse. Among the sexually experienced respondents (N=84), only 8.34% (N=7) have ever used any methods of emergency contraception. The known method used by respondents for the purpose of EC was only oral pills (43%, N=3); among which only 33% (N=1) had correctly consumed the pills.

**Table 4: Practice of Emergency Contraception and related aspects**

Practice	Frequency	Percentage
<b>Ever had sexual experience (N=400)</b>		
Yes	84	21
No	316	79
<b>Ever used any devices of EC (N=84)</b>		
Yes		
No	7	8
Don't know whether the partner had used or not	69	82
	8	10
<b>Reasons of using EC (N=7)</b>		
Because of having unprotected sexual relation	2	28.6
Because of having sexual relation in unsafe period	2	28.6
Because of contraceptive failure breakage of condom	1	14.2
Because of having fear of pregnancy though everything was normal	2	28.6
<b>Methods used as an EC (N=7)</b>		
Oral pills	3	43
Don't know what the partner had used	4	57
<b>Reasons of not using EC despite of unsafe/ unprotected sexual intercourse (N=69)</b>		
Because of having sexual relation in safe period	10	14.5
Because of having withdrawal method	7	10
Because of using other contraceptives	17	24.5
Thought it was not necessary	15	22
Did not know about EC	20	29
<b>Occurrence of pregnancy and use of EC and other contraceptives (N=19)</b>		
Emergency contraception not used	16	84.21
Using other contraceptives rather than EC	3	15.79



The status of using/not using emergency contraceptives and occurrence of pregnancy showed that among the respondents who had used emergency contraceptive, no one became pregnant. Among the respondents who had not used emergency contraceptive, 30% became pregnant and despite of using other contraceptives, 21% became pregnant. This implies that the effectiveness of ECPs as cent per cent; rate of pregnancy after unprotected sexual intercourse as 30% and contraceptive failure as 21%.

Analysis of the results found that factors like age, sex, education level and friends using EC are related with the knowledge, attitude and practice of EC. Bivariate analysis showed the statistical significance between knowledge of emergency contraception with age ( $P=0.000$ ), sex ( $P<0.005$ ) and friends using EC ( $P<0.05$ ). Regarding this matter, females were found more aware than males. Similarly, the analysis showed that attitudes towards emergency contraception is significantly associated with sex ( $P<0.05$ ) and educational level ( $P<0.005$ ) of respondents. Practice of emergency contraception was found significant with age ( $P<0.005$ ) and education level ( $P<0.005$ ) of respondents. Besides, no association was found between knowledge of emergency contraception and attitudes towards emergency contraception.

## DISCUSSION

Early sexual activity in young women is fraught with a relatively higher chance of unprotected sexual intercourse. This is because of the nature of their relationship with their partners, which may involve difficulties in negotiating safe sex as well as problems in having a steady relationship. Hence when young women choose to have sexual intercourse, multiple strategies are necessary to encourage them to avoid unintended pregnancies. One such strategy is to increase awareness of emergency contraception among them.<sup>6</sup>

Education could play a significant role in developing self-confidence, increasing age at first sexual intercourse and delaying marriage.<sup>7</sup> However, it also provides an opportunity for pre-marital sexual activity. Such activity may create risks of unwanted pregnancy if it is combined with a lack of knowledge about the body and contraception.<sup>8,9</sup>

It is evident from the study that respondent's attitude regarding different aspects of EC was found favorable as compared to their knowledge on EC. The awareness of EC was found 47% (188/400) which is higher than the level found in university students of Turkey (14.5%), Uganda (45%) and Nigeria (18%).<sup>10,11,12</sup> In contrast to this, it is lower than the university students in Kathmandu (66%), Mexico (60%) and India (50%).<sup>6, 13,14</sup> Among the respondents who were aware of EC, very few of them mentioned the correct definition and consuming time (17% and 10% respectively). Obi and Ozumba in their study also reported that only 17% knew the correct meaning of emergency contraception.<sup>15</sup> Puri

*et.al.*, and Aziken *et.al.*, respectively reported in their study that 14.7% and 18% knew the correct timing of emergency contraceptives.<sup>7,12</sup> In context of various brand names of ECPs, respondents had very little knowledge about the pills which are made solely for the purpose of emergency contraception like e-con, Postinor-2 and i-pill. Regarding this matter, majority of the respondents accepted combined OCPs as ECPs i.e. 35%.

Despite of availability of wide range of contraceptives, the rate of unplanned pregnancies and abortions are high in Nepal. The number of unintended pregnancies, abortions and related morbidity is preventable to a great extent through the use of suitable contraception. Introduction of EC in Nepal, as launched and marketed by Nepal CRS Company and its availability in counter has a potential to significantly change the scenario by empowering the youths in Nepal.

The study revealed that among the sexually active respondents (21%), only 8.34% had ever used any methods of EC. This finding is higher than the study done in Mexico (3%), South Nigeria (5.7%) and Nova Scotia (2%); whereas it is lesser than the study done in Nigeria (33.9%), South Africa (11.8%) and Switzerland (20%).<sup>14,16,17,18,19,20</sup> The reasons of using of EC were having unprotected sexual intercourse (28.6%), having sexual intercourse in unsafe period (28.6%), having fear of pregnancy though everything was normal (28.6%) and contraceptive failure (14.2%). The reasons of not using EC despite of unsafe/unprotected sexual intercourse ( $N=69$ ) were not knowing about emergency contraception (29%), feeling of no need of use (22%), having sexual intercourse in safe period (14.5%), having withdrawal method (10%), and because of using other contraceptives (24.5%).

It may be argued that promotion of awareness about EC may encourage premarital sex/sexual risky behavior. There is no scientific evidence, however, to substantiate any of these arguments. A wealth of research clearly demonstrates that improving the availability of EC does not increase any form of 'sexual risk'-taking behavior.<sup>21,22,23</sup> Rather, it was found that use of EC might be the stimulus that brings young women into contact with health care providers, thus providing opportunities for counseling in matters of responsible sexual behavior; contraception; and prevention of sexually transmitted diseases, including HIV/AIDS.<sup>6</sup>

One of the limitations of this study was that it was based on only youths studying higher secondary and undergraduate levels. Hence, this study may not be truly representative of all youths of Parbat district. In fact, this study was conducted to identify the KAP of EC among youths via their response to the questionnaire. The strength of this study lies in the fact that it focused on both male and female youths rather than only on females or married. Unmarried youths are important candidates for awareness generation with respect to EC.

## CONCLUSION

*Youths are one of the vulnerable groups for premarital, unsafe/unprotected sexual intercourse resulting in unintended pregnancy and exposed to STIs. EC is an effective means of preventing unwanted pregnancies but unfortunately more than half of the youths were unaware of it. Among the respondents who were aware, very few of them were familiar with its correct meaning, consuming time and other related aspects. The study finally concludes that more efforts should be exerted towards arising and improving the awareness of emergency contraception, its access and enhancing the way of usage by potential users.*



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