

KNOWLEDGE, ATTITUDE AND PRACTICES TOWARDS UTILIZATION OF EMERGENCY CONTRACEPTIVES AMONG WOMEN AGED 15-25 YEARS AT OUTPATIENT DEPARTMENT OF BWERA HOSPITAL, KASESE DISTRICT. A CROSS-SECTIONAL STUDY.

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Abstract

Background

An emergency contraceptive (EC) is a method of preventing unwanted pregnancy after unprotected sexual intercourse, contraceptive method failure, or being forced to have sex against her will. Unprotected sex may result from a lack of knowledge about access to contraception as well. This study assessed knowledge, attitude, and practices towards utilization of emergency contraceptives among women aged 15-25 years at the outpatient department of Bwera hospital, Kasese district.

Study methods

A cross-sectional study was conducted, and participants were sampled using a simple random sampling technique. A total of fifty (50) volunteers participated in the study. Interviewer-administered questionnaires were used to collect the data. Results were presented using descriptive statistics, frequencies, and percentages

Results

(89%) Among women aged 15-25 years who had ever heard of emergency contraceptives (EC), the most common source of information was from the health unit (54%). The majority of respondents (60%) knew that 72 hours was the recommended interval, and 72% knew that pills were a type of EC. Regarding attitude towards utilization of EC, 70% of the respondents reported the effectiveness of EC to be high, 62% of respondents can recommend others to use ECs, 66% were willing to use ECs, and 63.2% reported ECs increase the risk of infertility. Regarding practices towards utilization of ECs, the majority of respondents (78%) had ever used ECs, and most of the respondents (45.45%) who had never used ECs reported that their husbands refused.

Conclusion

Respondents had fairly suitable knowledge, attitude, and practices towards ECs, though a significant number of participants had misconceptions and myths associated with EC utilization.

Recommendations

The Ministry of Health should organize seminars on media platforms to increase awareness and improve utilization of ECs. Also, Bwera hospital staff should carry out extensive education programs about ECs to reduce cases of unwanted pregnancies.

Keywords: *Emergency contraceptive utilization, women aged 15-25 years, Bwera Hospital, Kasese district.*

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Background

Globally, the rates of unintended pregnancies are high (Bearak et al., 2018), which pose a major public health problem to several nations (Sedgh et al., 2014). Worldwide, about 44% of all pregnancies are unintended (Bearak et al., 2018). Previous studies have shown that even in developed countries (Ganatra et al., 2017), and more recently in Uganda (Ameyaw, 2018), the prevalence of unintended pregnancies is high. The health complications and the economic cost of unintended pregnancies are enormous (Bahk et al., 2015). For instance, unintended pregnancies are associated with increased levels of household stress (Le et al., 2014) and poor life satisfaction (Bahk et al., 2015).

Although the causes of unintended pregnancies are complex, unprotected sexual intercourse is a predisposing factor. Therefore, to prevent unintended pregnancies following unprotected sexual intercourse, the ECs are recommended. These methods are to be used within 5 days or earlier after the act of unprotected sexual intercourse. The methods include the copper-bearing intrauterine devices (IUDs) and the emergency contraceptive pills (ECPs) (World Health Organization, 2020).

Despite the availability, safety, and effectiveness of emergency contraceptive options, there exists a notable lack of awareness and utilization of these methods among women of reproductive age, as captured by Oshodi et al.

(2020). This limited awareness presents a significant global public health concern. Consequently, there has been a steady increase in the incidence of unwanted pregnancies and induced abortions worldwide. 46 million (22%) of the estimated 210 million pregnancies that take place each year are deemed undesirable, and more than 90% of these unwanted pregnancies end in induced abortions, which are frequently accompanied by difficulties (Lentiro et al., 2019). In Nigeria, unwanted pregnancy is a big problem; a large percentage of pregnancies in adolescents are unintended, resulting from unprotected sexual intercourse, and most of these pregnancies, particularly in adolescents, end up with unsafe abortion (Arisukwu et al., 2020). Due to inadequate instruction on how to use contraception properly, such as the users' incapacity to deal with their emotions, negative attitudes towards contraceptives, and lack of drive, many unplanned pregnancies and unsafe abortions take place in the nation. (Nwankwo et al., 2021). Furthermore, despite these alarming statistics, many Nigerian women lack information on the use of emergency contraception (Shields et al., 2014). While ECs are very important to the reduction of unwanted pregnancies and abortions, the level of awareness and acceptance are factors that could play a vital role in their utilization. For nations like Nigeria, which have a population policy intended to limit the number of unintended births, it is crucial to understand the knowledge, attitudes, and practices of women and girls towards EC. The USA Local Government Area, in Taraba State, shares the same national scenario regarding the use of emergency contraception.

An emergency contraceptive (EC) is a method of preventing unwanted pregnancy after unprotected sexual intercourse, contraceptive method failure, or being forced to have sex against her will. Unprotected sex may result from a lack of knowledge about access to contraception as well. ECP can prevent up to over 95% of pregnancies when taken within 5 days after intercourse and when inserted within 120 hours of unprotected intercourse. It is a copper-bearing intrauterine device (IUD) that is more than 99% effective in preventing pregnancy. Emergency contraceptive seems to be more effective when used within 72 hours of unprotected intercourse. An emergency contraceptive is not recommended as a regular family planning method; it is used occasionally. The effectiveness of emergency contraceptives reduces with a lapse of time.

The first effective regimen for emergency contraceptives started in the 1960s with the development and introduction of hormonal therapies. Globally, emergency contraception was initially developed to treat rape victims and prevent unwanted pregnancies. In the early 1970s, the Yuzpe regimen, which is a combination hormone formula, replaced the high-dose estrogen emergency contraceptive methods of the 1960s and became the gold standard of treatment for post-coital contraceptives. The options of EC have increased and started including other oral/hormonal methods as well as intrauterine device insertion. Emergency contraceptives

can prevent up to 95% of pregnancies when taken within 5 days after unprotected sexual intercourse (WHO, 2021). Although there has been a steady increase in overall contraceptive use from 29% in 1996 to 53% in 2016, the contraceptive prevalence rate for modern methods has remained almost the same from 2006(44%) to 2016(43%) in Uganda. In Uganda, the Ministry of Health approved the use of ECPs in 1998, and the method was introduced three years later as a socially marketed product to increase the public awareness of emergency contraceptives. EC pills stand at 6% (UBOS, 2017). This study assessed knowledge, attitude, and practices towards utilization of emergency contraceptives among women aged 15-25 years at the outpatient department of Bwera hospital, Kasese district.

Methodology

Study design

A cross-sectional study design was used to conduct the study because it allowed the determination of independent and dependent variables at the same point in time, with no follow-up of the participants.

Study area

The study was carried out at the outpatient department of Bwera General Hospital, Kasese district. Kasese district is located in the western region of Uganda, bordering the DRC. The study area was chosen because it receives women of low age with unintended pregnancies, which forces others to have an abortion.

Study population

The study was conducted among women aged 15-25 years attending the outpatient department of Bwera General Hospital, and this is because most of them attend with pregnancies that are not always intended.

Sample size determination

The sample size was determined using Kish and Leslie formula as stated below; $N = (Z^2 PQ) / d^2$

Where; N=the desired sample size,

Z= the standard normal deviation usually set at 1.96,
 $P=50\%=0.5$,

$Q = (1-P), 1-0.5=0.5$

$d = \text{absolute error allowed} = 0.139$

Substituting into the above equation; $N = (1.96^2 * 0.5 * 0.5) / 0.139^2$

$N = 50$

Therefore, the sample size was 50 respondents.

Sampling technique

A simple random sampling procedure was employed in the study to select the participants. This was because the sampling method was easy to administer for a big, homogenous population.

Sampling procedure

Probability sampling procedure was employed in the study to select the participants; those that consented were sampled on the basis of first come first serve.

Data collection method

Data was collected using the questionnaire method of data collection, which was prepared and pretested before the study, and ample time was provided to the respondents.

Data collection tools

The data was collected using interviewer-administered questionnaires consisting of closed-ended questions. For those who were illiterate, structured interviews were used where they were asked questions to answer while the researcher filled in the responses.

Data collection procedure

The study was carried out two weeks before the date of actual data collection, and it was done specifically to ascertain the availability of relevant materials, data, and people before the actual date reached. A sample of 5 participants was interviewed, and necessary corrections were made on the questionnaire before data collection.

Results

Bio data

Table 1: Shows the distribution of respondents according to demographic data (N=50)

Response	Frequency(f)	Percentage (%)
Age		
15-19	19	38
21-25	31	62
Tribe		
Mukonzo	32	64
Mutoro	4	8
Mukiga	11	22
Others	4	8
Marital status		
Single ever	5	10
married	30	60
Separated	11	22
Widow	4	8
Denomination		

Inclusion criteria

All women aged 15-25 years attending to the outpatient department of Bwera Hospital at the time of the study, who will consent, will be sampled.

Exclusion criteria

Women aged 15-25 years who attended at the outpatient department and were not comfortable and failed to consent were excluded from the study.

Quality control

The quality of the research was assured through adjusting the interview questions after pre-testing, translating the questionnaire to Lhukonzo (local language), then back to English, and training the research assistants before data collection.

Data analysis and presentation

Data was cleaned, sorted, and checked for completeness, and then entered into Microsoft Office. It was presented in the form of tables and figures.

Catholic	10	20
Islam	20	40
Anglican	15	30
Others	5	10
Education level		
None	2	4
Primary	5	10
Secondary	34	68
Tertiary	9	18

Table 1, the total sample of 50 respondents, most of the respondents (62%) were within the age bracket of 21-25 years, whereas the least (38%) were within the age bracket of 15-19 years. The study results depicted that more than half of the respondents (64%) were Bakonzo by tribe, whereas the least (8%) were unidentified by tribe. In regard to marital status, the majority of the respondents (60%) were

married, whereas the minority (8%) were widows. The study revealed that most of the respondents (40%) were Muslims by religion, whereas the least (12%) were under others without an identified religion. Findings from the study showed that more than half of the respondents (68%) had attained a secondary level of education, whereas the least (4%) had never gone to school.

Knowledge towards utilization of emergency contraceptives among women aged 15-25 years

Figure 1: Shows the distribution of respondents whether they had ever heard about emergency contraceptives. (N=50)

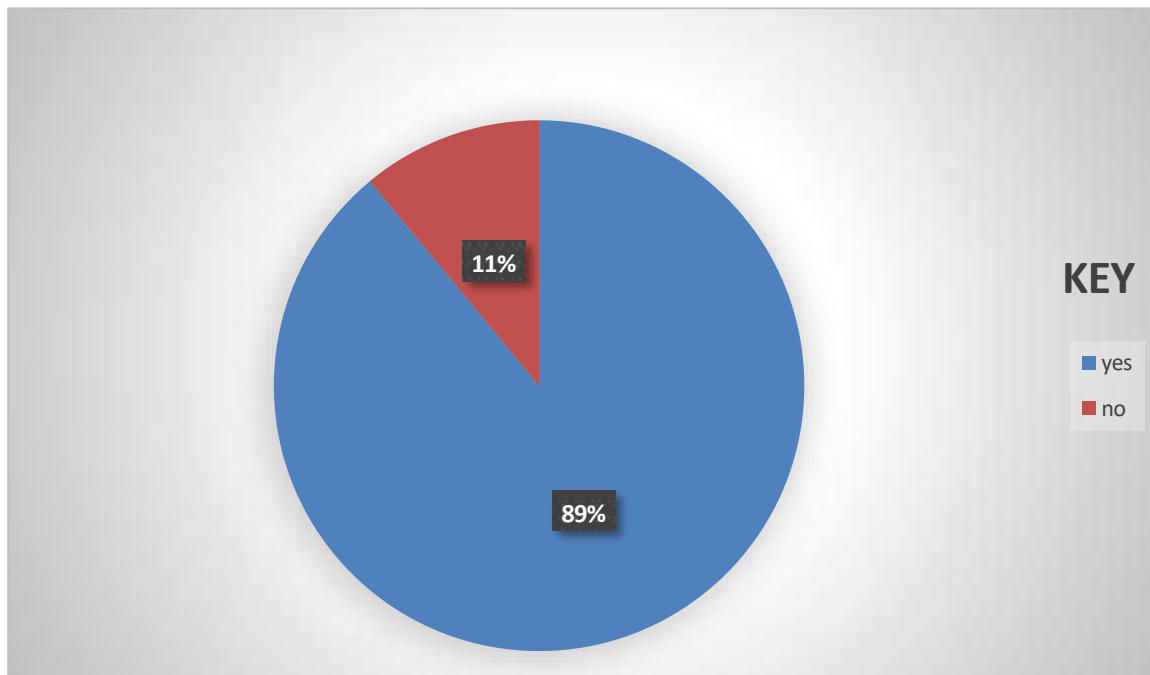


Figure 1, majority of the respondents (89%) had ever heard about emergency contraceptives whereas the least (11%) had never heard about emergency contraceptives.

Table 2: shows the sources of information where the respondents heard about emergency contraceptives (N=50)

Response	Frequency (f)	Percentage (%)
Health unit	27	54
Radio / TV	8	16
VHT	10	20
Women's meetings	5	10
Total	50	100

Table 2, more than half of the respondents (54%) obtained information about emergency contraceptives from the health unit, whereas the least (10%) obtained information from women's meetings.

Table 3: shows respondents reactions about the recommended time interval for effectiveness of emergency contraceptives. (N=50)

Response	Frequency (f)	Percentage (%)
Within 72 hours	30	60
Within 24 hours	11	22
Within five days	3	6
Others	6	12
Total	50	100

Table 3, the majority of the respondents (60%) knew within 72 hours as the recommended intervals of emergency contraceptives whereas the minority (6%) knew within five days as the recommended intervals for emergency contraceptives.

Figure 2: Shows the distribution of respondents about the types of emergency contraceptives they know (N=50)

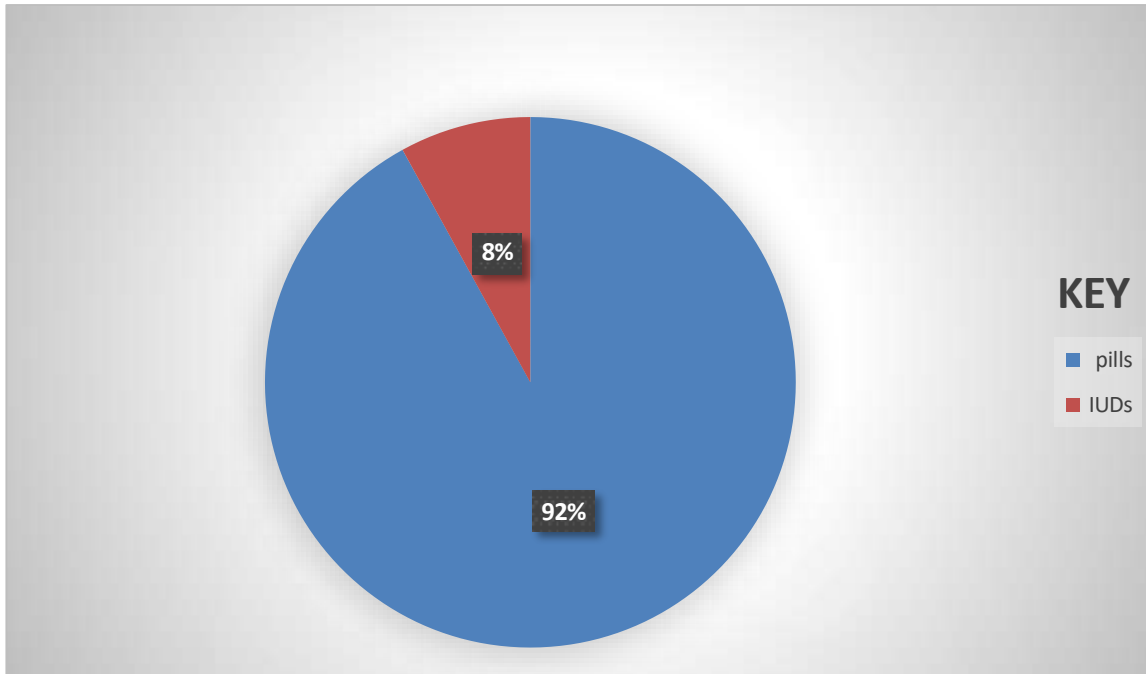


Figure 2, the majority of the respondents (92%) knew pills as the type of emergency contraceptive, whereas the minority (8%) knew IUDs as the type of emergency contraceptive.

Attitude towards utilization of emergency contraceptives among women aged 15-25 years

Figure 3: Shows how respondents rated the effectiveness of emergency contraceptives (N=50)

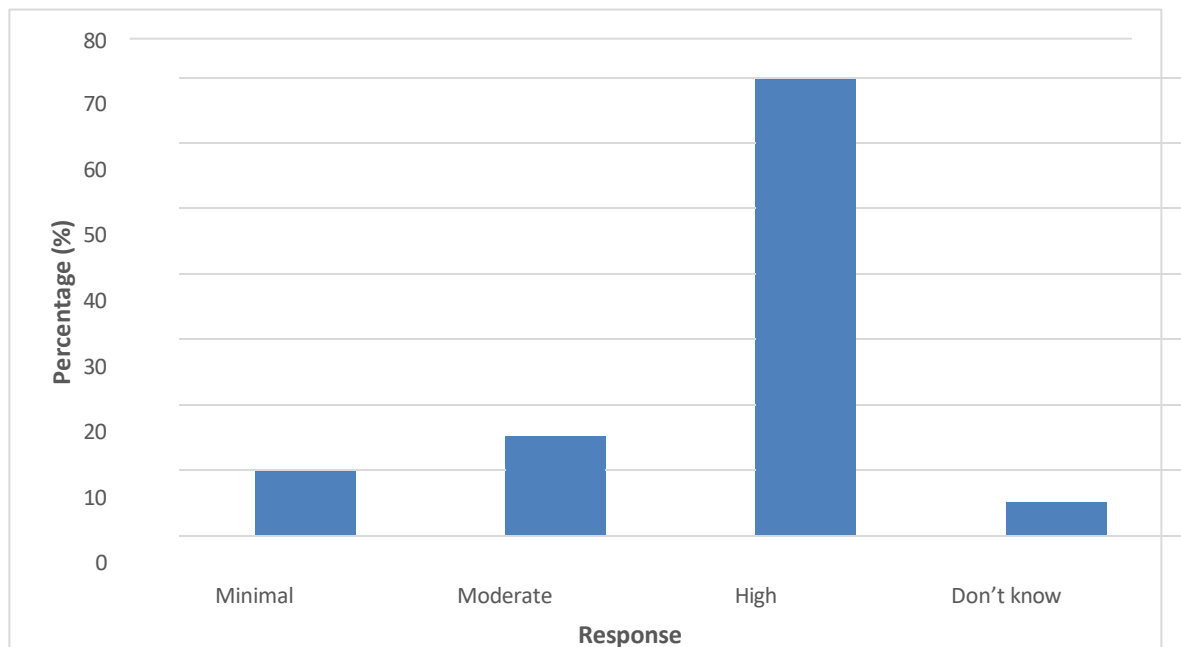


Figure 3, more than half of the respondents (70%) reported that the effectiveness of emergency contraceptives in preventing unwanted pregnancies is high, whereas the least (5%) didn't know the effectiveness of emergency contraceptives in preventing unwanted pregnancies.

Figure 4: shows the distribution of respondents whether they can recommend friends to use emergency contraceptives (N=50)

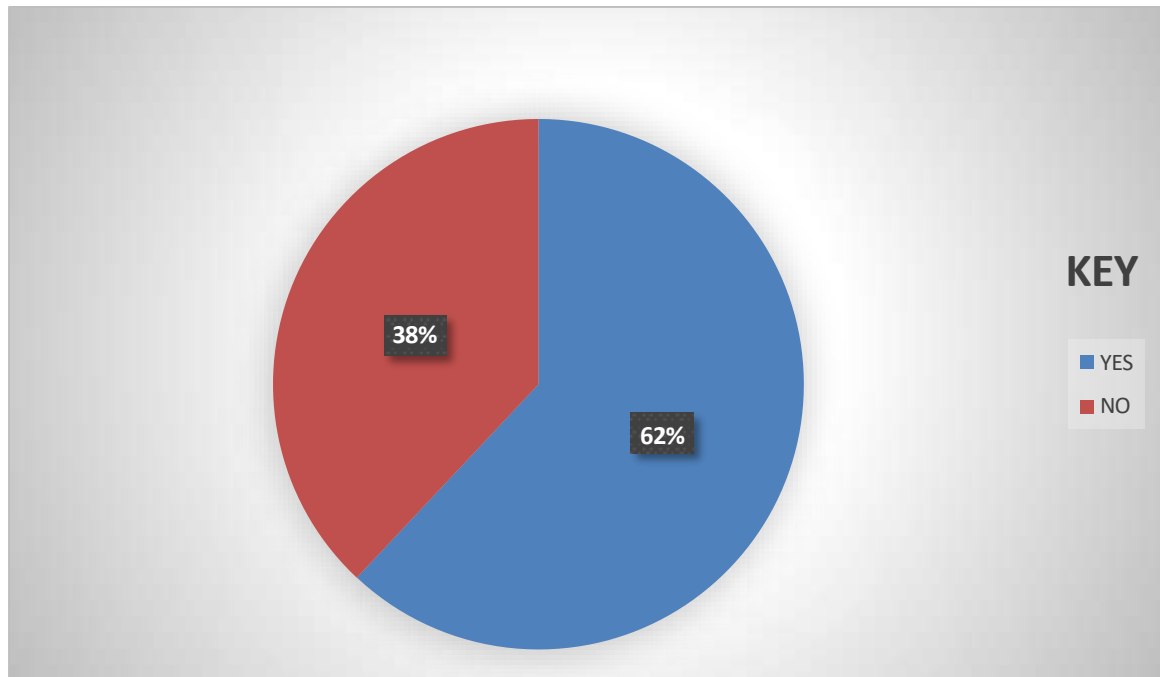


Figure 4, the majority (62%) reported that they can recommend others, whereas the minority (38%) said they cannot recommend anyone because of their own reasons.

Table 4: shows the distribution of respondents on whether they are willing to use emergency contraceptives in future. (N=50)

Response	Frequency (f)	Percentage (%)
Yes	33	66
No	17	34
Total	50	100

Table 4, more than half of the respondents (66%) were willing to use emergency contraceptives if the need arose, whereas the least (34%) were not willing to use emergency contraceptives

Table 5: shows the distribution of 38 respondents according to the reasons why they disagree with the safety and cannot recommend others (N=50)

Response	Frequency (f)	Percentage (%)
Increase infertility	24	63.2
Indicate being sinful	12	31.6

Others	2	5.3
Total	38	100

Table 5, among 38 respondents, most of them (63.2%) reported that emergency contraceptives increase the risks of infertility, whereas the least (5.3%) reported other reasons, such as reducing abstinence practices.

Practices towards utilization of emergency contraceptives among women aged 15-25 years

Table 6: shows the distribution of respondents according to whether they ever used emergency contraceptives (N=50)

Response	Frequency (f)	Percentage (%)
Yes	39	78
No	11	22
Total	50	100

Table 6, more than half of respondents (78%) had ever used emergency contraceptives, whereas the least (22%) had never used emergency contraceptives

Table 7: shows the distribution of 11 respondents according to why they do not use emergency contraceptives. (N=11)

Response	Frequency (f)	Percentage (%)
Ignorance about EC	1	9.09
Fear to cause infertility	3	27.27
Condemnation by religion	1	9.99
Husband refused	5	45.45
Others	1	9.09
Total	11	100

Table 7, among the 11 respondents who had never used ECs, most of them (45.45%) said that it was because their husbands refused, whereas the least (9.09 %) had never used emergency contraceptives because of ignorance about EC, condemnation by religion, and other reasons.

Figure 5: shows the distribution of respondents whether they can recommend friends to use emergency contraceptives N=50

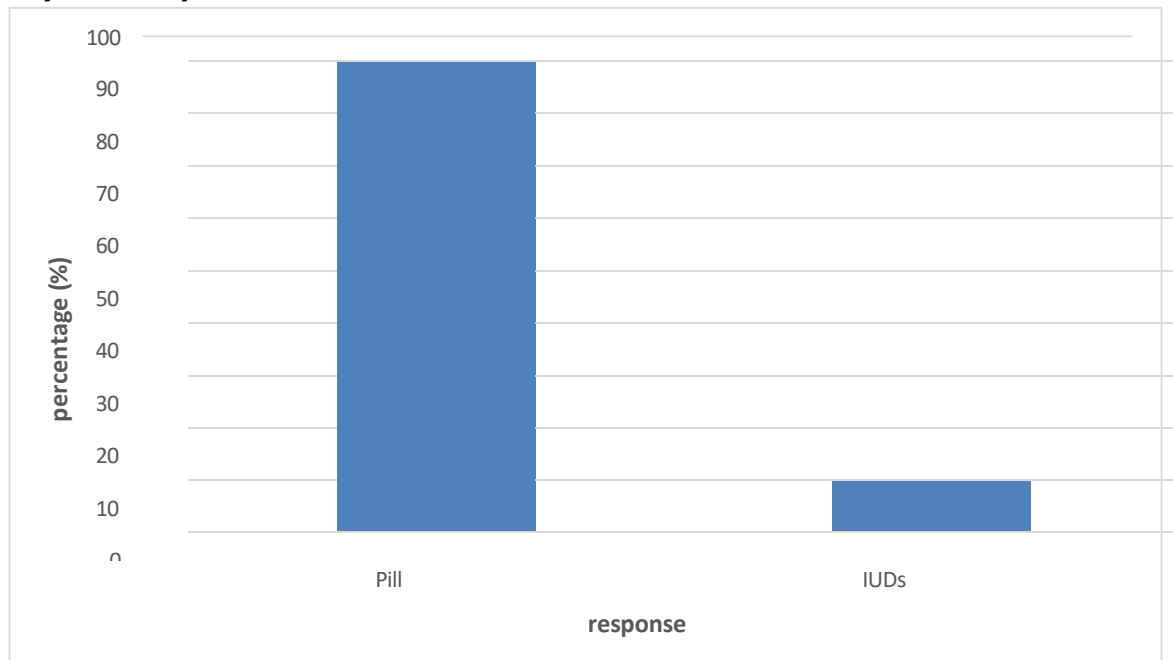


Figure 5, the majority of the respondents (90%) reported pills as the emergency contraceptive method they had ever used, whereas the minority (10%) had used IUDs as a method of emergency contraceptives.

Discussion of results

Knowledge towards utilization of emergency contraceptives among women aged 15-25 years.

From a total of 50 respondents, the majority of the respondents (89%) had ever heard about emergency contraceptives. This indicates that a considerable number of the study participants were aware of the study's perspective. The recent findings were in agreement with results from the study that was done by Bhu Dev Jha et al (2020), where findings showed that 91.4% reported that they had ever heard about emergency contraception. Additionally, half of the respondents (54%) obtained information about emergency contraceptives from the health unit. This could be attributed to the fact that within health facilities, health workers provide detailed information about sexual and reproductive health; the probability of being the most outstanding source was foreseeable. The study results were contrary to findings obtained from India by Prem et al (2020). Where the main source of information about EC among participants was the Internet, 49.7%.

The majority of the respondents (60%) knew within 72 hours the recommended intervals of emergency contraceptives. This could be attributed to the fact that a

significant number of women aged 15-25 had ever been informed about the recommended intervals of emergency contraceptives from different sources. Findings were in agreement with Chaudhary et al (2022), where 62.5% correctly answered the right time to take ECP (within 72 hours of having unprotected sex).

Correspondingly, the majority of the respondents (92%) knew pills as the type of emergency contraceptive. This could be a result of the fact that participants had never comprehended pills or used pills before, as the study was yet to discover. This is consistent with Shamsu et al (2021), where (68.4%) of the participants knew the pill methods of ECs.

Attitude towards utilization of emergency contraceptives among women aged 15-25 years

The study revealed that more than half of the respondents (70%) agreed that the effectiveness of emergency contraceptives in preventing unwanted pregnancies is high. This implies that a significant number of the participants had ever used emergency contraceptives, and they were effective. Study findings were consistent with Chaudhary et al (2022), where findings showed that the majority (94.4%)

believed that they could prevent pregnancy. The study also revealed that more than half of the respondents (62%) can recommend their friends to use emergency contraceptives to prevent unwanted pregnancies from occurring. This implies that the ECs help a lot and the benefits outweigh the dangers. This corresponds with Asmare et al (2015), where the majority (64.3%) can give advice to their friends to use ECs. The study also revealed that more than half of the respondents (66%) were willing to use emergency contraceptives whenever necessary. Such a high response rate signifies that participants were afraid of getting unwanted pregnancies. This is in line with Asmare et.al (2015), where most of the participants 73.1% agreed to use ECs after unprotected sexual intercourse to prevent unwanted pregnancies.

However, among the 38 participants who disagreed and could not recommend others to use ECs, the majority of them (63.2%) reported that emergency contraceptives increase the risks of infertility, and this implies that participants were afraid of related side effects that may result from the use of ECs. This was in disagreement with Kibir et al (2017), where findings showed that (56.1%) of the respondents agreed that widespread use of EC will increase the prevalence risk of HIV/AIDS and STIs.

Practices towards utilization of emergency contraceptives among women aged 15-25 years.

The study revealed that more than half of respondents (78%) had ever used emergency contraceptives. This signifies high uptake of emergency contraceptives. This is in line with findings from a study that was done by Daniel Sarpong et al (2022), where most of the respondents (79.67%) indicated that they had ever used emergency contraceptives. However, among the few respondents (11) who had never used ECs, most of them (45.45%) reported that their husbands refused to use ECs. This could probably be attributed to the fact that their husbands had poor perceptions about emergency contraceptives. This does not correspond with the findings of the study that was done by Chaudhary et al (2022), where the majority (48.1%) did not use ECs because they were using other contraceptive methods.

However, among the respondents who had ever used ECs (39), the majority of them (90%) reported pills as the emergency contraceptive method they had ever used. This could be attributed to the simplicity and accessibility of this method. This corresponds to a study that was done by Medhat et.al (2023), where the majority (87.5%) used pills.

Conclusion

Generally, the researcher concluded that women aged 15-25 years had fairly suitable knowledge, attitude, and practices toward emergency contraceptives, though a significant number of participants had misconceptions and myths associated with ECs utilization, which need intervention for

improvement.

Study limitations

Some respondents feared to give accurate information about their experience on emergency contraceptives.

Recommendations

The government, through the Ministry of Health, should intervene and provide comprehensive information through different ways, such as seminars on media platforms regarding emergency contraceptives to increase awareness and improve utilization of the EC method to reduce cases of unwanted pregnancies among women aged 15-25 years.

Bwera hospital administration should carry out extensive education programs about ECs to women who attend antenatal and other departments that receive women in large numbers, and also through community outreaches, especially schools, where women aged 15-25 years are easily accessible, to address many misconceptions and myths about emergency contraceptives, and to reduce cases of unwanted pregnancies.

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List of abbreviations

CPR	:	Contraceptive prevalence rate
EC	:	Emergency Contraceptives
ECPs	:	Emergency Contraceptive Pills
IUCD	:	Intrauterine contraceptive device
IUDs	:	Intrauterine Devices
KAP	:	Knowledge, Attitude and Practices
MOH	:	Ministry of Health
STIs	:	Sexually Transmitted Infections
UBOS	:	Uganda Bureau of Statistics
VHT	:	Village Health Team
WHO	:	World Health Organization

Source of funding

There is no source of funding.

Conflict of interest

No conflict of interest declared.

Availability of data

Data used in this study is available upon request from the corresponding author

Author's contribution

IB designed the study, conducted data collection, cleaned and analyzed data and draft the manuscript and CM supervised all stages of the study from conceptualization of the topic to manuscript writing.

Ethical approval

The research report was approved by the Kampala School of Health Sciences research committee. The research ethics committee introduced the researcher to the management of Bwera hospital. Permission to conduct the study at the hospital was provided by the hospital administration. Informed consent was obtained from all selected respondents before administering the questionnaire, and confidentiality was maintained.

Informed consent

Respondents were assured of maximum confidentiality, and only numbers instead of names were used to identify the respondents. The study only commenced after the objectives of the study had been well explained to participants and they had consented to participate in the study.

Author's biography

Isaac Bwambale is a student of diploma Clinical Medicine and community health at Kampala School of Health Sciences

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