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Original Research Article

Knowledge, Attitude and Practices Regarding Infertility among Child Bearing Age Females of Rural Community, Lahore

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Abstract

Introduction: Introduction: Infertility is a worldwide issue that effects between 60 million and 168 million individuals around the world. It influences 13% to 15% of couples around the world. It puts a gigantic mental weight on the barren couple, particularly on the lady, and it might prompt despondency, self-destructive inclinations, and other pathological mental conditions. The restorative meaning of barrenness is the inability to imagine following a year of unprotected sex. Essential barrenness is the powerlessness to consider following 1 year of unprotected sex with no past origination (Abolfotouh, Alabdrabalnabi, Albacker, Al-Jughaiman, & Hassan, 2013). ***Methods:*** A descriptive Cross-sectional study design is used in this study because cross sectional study design provides a better understanding about any event or situation. The duration of the study is 4 months Sep, 2017 Jan, 2018. Study population for this research work is the child bearing age female of a rural community of Lahore. The total number of child bearing age female of Hussain Abad is 270 and number of infertile women is 168. Only infertile female are considered. Close ended questionnaire was designed, checked and used to access knowledge, attitude and practice of the participant's towards infertility. ***Results:*** Response rate of this survey was not good and mean number of "Yes" answers to knowledge, attitude and practice questions were 46% and 42% respectively. ***Conclusions:*** Knowledge, attitudes and practice about infertility among adolescents was partial. Results of this study indicate lack of understanding about basics of preventive measures and prevention of infertility. The study had been determined the knowledge and attitude of people regarding infertility prevention. The level of knowledge was good among people but there was no significant association between attitude and practices regarding infertility prevention among the women. Moreover the people have poor practices toward infertility prevention. Furthermore factors (poverty,

Keywords: Infertility; prevalence; Knowledge; Attitude; Practice; Females; Lahore.

INTRODUCTION

Infertility is the failure to conceive after one year of unprotected sexual intercourse. Infertility causes can affect male and female in about 40%. Knowledge is a key factor associated with fertility self-care. Knowledge and awareness of fertility are crucial because it is not depend on personal fertility, motherhood and fatherhood experience. The couples beliefs and attitude toward infertility are based on social and culture factors but the magnitude of its effects depends on personal coping behaviors and coping strategies [1]. The failure to imagine youngsters is experienced as an upsetting circumstance by people and couples all around the globe. The outcomes of barrenness are complex and can incorporate societal repercussions and individual enduring [2]. Barrenness and issues of weakened fruitfulness have been a worry through ages and is likewise a huge clinical issue today, which influences 8– 12% of couples around the world [3].

The failure to imagine youngsters is experienced as a circumstance by people and couples all around the globe. The outcomes of fruitlessness are complex and can incorporate societal repercussions and individual enduring [4].

Multiplication is a both sided duty, yet so frequently in a great part of the world, it is viewed as completely the ladies' obligation. She bears the weight of the pregnancy and labor as well as the dangers from unreasonable youngster bearing, some duty regarding contraception, fruitlessness examination and frequently undiscovered sexually transmitted sicknesses (STDs) including AIDs [5].

Aim of the study

The purpose of this study is to assess the knowledge, attitude and practice of childe bearing age females. The knowledge about infertility may help to decrease the incidence of infertility.

After this research study female of a rural community (Hussain Abad) will get awareness regarding infertility and will also be able to get awareness about the reasons of infertility. Learner will also be able to give education to people regarding infertility. The knowledge about infertility may help to decrease the incidence of infertility.

LITERATURE REVIEW

The powerlessness to consider children is experienced as a distressing circumstance by people and couples all around the globe. The outcomes of barrenness are complex and can incorporate societal repercussions and individual enduring [2].

Fruitlessness and issues of hindered fertility have been a worry through ages and is additionally a noteworthy clinical issue today, which influences 8–12% of couples around the world [3].

Barrenness is extremely basic in created and creating nations because of occupied way of life of women's. It is by and large acknowledged that around 80 million couples on the planet are influenced by automatic fruitlessness, the greater part of whom live in alleged creating nations where barrenness administrations and artificial conceptive systems are not broadly available [6].

Fruitlessness or childlessness is a worldwide regenerative issue for both genders yet regularly ignored and not examined out in the open. It is by and large trusted that in excess of 70 million couples experience the ill effects of fruitlessness overall Women's fruitfulness potential is declining with age in view of products inherent and extraneous factors, for example, way of life, oxidation pressure or potentially endocrine disruptions and is influencing the capacity of these ladies to consider normally. This declining fruitfulness potential and the late period of parenthood is expanding fundamentally the quantity of patients counseling fruitlessness authorities. Distinctive systems of examination and administration are proposed to patients more than 40 so as to defeat their fruitlessness and enhance the live birth rate in these patients [7]. Implantation hereditary finding (PGD), developing life check and move in the wake of defrosting in ensuing normal or simulated cycles can enhance the achievement rate of ART in patients more than 40. In the meantime, oocyte and developing lives gift stay great choices for quiet more than 40 with an awful visualization and can prompt fruitful progressing pregnancies until 45 years old [8]. Effect of Infertility influences around 6.7 million ladies in the United States and the predominance of fruitlessness has expanded from roughly 8.5% of the conceptive age populace in the 1980s to 11% of every 2010.Couples with barrenness have essentially more nervousness, wretchedness, and stress that a few examinations have found could add to conjugal misery and separation. This is exacerbated by the way that right around 40% of couples experiencing helped propagation innovation still can't imagine, which can ongoing affect personal satisfaction, conjugal alteration, and sexual effect. In any case, the conjugal relationship of couples experiencing richness treatment is unmistakably unpredictable and a few investigations have really demonstrated that fruitlessness can reinforce their relationship. In light of the complex conjugal connections of couples looking for ripeness treatment, it is essential to comprehend the sexual perversion [9].

The predominance of corpulence in barren ladies is high, and it is notable that there is a relationship amongst stoutness and fruitlessness. The connection amongst weight and regenerative capacities is as yet being investigated. Overweight ladies have a higher frequency of menstrual brokenness and an ovulation. Overweight and fat ladies are at a high hazard for regenerative well-being. The danger of sub fruitfulness and barrenness, origination rates, premature delivery rates, and pregnancy confusions are expanded in these ladies. They have poor regenerative results in normal and in addition helped origination [10].

METHODS

Setting

Study setting area was rural community Hussain Abad, Lahore.

Research design

Cross sectional Descriptive Study.

Population

Target population of this study was the people (age 15 years to 45 years) rural community, Lahore. The population include only females.

Sampling

Convenient sampling technique was used for data collection.

Research instrument

A well-developed questionnaire that has been adapted from an article [11] was distributed among people Lahore community. Questionnaire was consist knowledge, attitude & practices regarding infertility.

Data gathering procedure

Questionnaire was used to collect information about the socio-demographic characteristics of respondents, knowledge towards transmission and prevention method of infertility and attitude towards

prevention infertility. Questionnaire was distributed & return from the respondents.

Methods used to analyze data

The collected data was analyzed by putting data on SPSS version 21. Analyzed the data by frequency through descriptive statistics and represented in the form of figures, tables Frequencies and percentage. The study sample was characterized by using measure of central tendency (mean, median, and mode). The descriptive data was about demographic data which include age, gender, and education. Data was taken about the knowledge, attitude & practices regarding infertility prevention and treatment in rural community.

Study timeline

The study was conducted from September 2017 to December 2017.

Ethical consideration

The study protocol was presented for review and approved by the Institutional Review Board of University of Lahore. Prior to any study related procedure, a written informed consent was obtained. Data handling was kept under confidentiality. Enough information of research was provided to participants with the help of full consent form and this will be achieved via a letter attach to the questionnaire.

RESULTS

Data collected from the rural community Hussain Abad, Lahore to assess the knowledge, attitude and practices towards infertility treatment and prevention a cross sectional study interviewed 168 females in rural community. The response rate of survey was poor and age range was 15 years to above 45 years old females. The data analysis consist of two parts, first part is demographic data which give detail about demographic variable and second part which provide descriptive analysis which provide us recurrence and rate of respondent regarding 27 questionnaire.

Profile of the respondents

Section 1: Demographic data analysis.

Table-1:

S.N	Demographic	Group	Frequency	Percent
1	Age	15-25year	48	29
		26-36year	75	46
		36-45year	38	23
		Total	100	100
2	Education	Primary	35	35
		Matric	25	25
		Above matric	13	13
		No formal education	27	27
		Total	100	100
3	Occupation	government employee	4	2
		private employee	53	32
		student	47	29
		house wife	57	35
		Total	161	100

15-26 year old participants were responded as29%, 26-36year old participants were responded as 46%, 36-45year old participants responded as 23% .The statistical report shows in table-1 that the participants between the ages of 26to36 year old percentage is high between selected age group and 45 year old is low.

Mostly participants' education was (35%) Primary, (35%) Matric, (25%) and above Matric (13%). Demographic data involve age, qualification, and occupation individually described as bellow.

Section 2: Questions analysis.

Table-2: Community Knowledge toward infertility prevention

SR. No	Question	Yes	No
1	Do you abnormal menstrual cycle (ovulatory factors)?	69%	96%
2	Do you have blocked fallopian tubes?	65%	96%
3	Do you have History of infections of genital tract?	70%	91%
4	Do you smoking?	50%	106%
5	Do have previous use of contraceptive pills?	63%	98%
6	Do you believe that causes of infertility are Jinn/supernatural?	48%	113%
7	Do you believe that Black magic is the cause of infertility?	58%	103%
8	Do you think that regular exercise is the cause of infertility?	58%	109%
9	Do you think infertility is due to psychological stress?	89%	72%

Respondent's learning towards fruitlessness Section II of poll was about learning questions and asked essential data, counteractive action and causes barrenness among members. Inquiries number 1-9 were about fundamental data and reasons for barrenness. Each inquiry reaction was scored "Yes" and "No".

Section 3: Community Attitude toward infertility.

Table-3:

S/NO	Attitude Questions	YES	NO
10	Do you think infertility is a disease?	39%	122%
11	Do you think infertility should be treated medically?	61%	100%
12	Do you think that if a couple conceives once they might have problems conceiving again?	51%	49%
13		57%	104%

Area II of poll evaluated demeanor of respondents towards barrenness and each inquiry reaction was scored "Yes" and "No". Mean number of "Yes" answers were 46%. The scope of most noteworthy and least reacted "Yes" questions were 70% and 90% individually. The majority of respondents have great states of mind about fruitlessness.

Section 4: Community Practices Towards infertility

Table-4:

S/NO	**Practice Questions**	**1**	**2**	**3**	**4**	**5**
13	If a female cannot have baby do you think this is ground for divorce?	3%	68%	54%	32%	4%
14	If a female cannot have children, do you think this is a valid reason for the man to have a second marriage?	32%	32%	30%	28%	8%
15	If a couple cannot have a baby, do you think they should adopt?	57%	52%	35%	61%	6%
16	Who is being blamed in the society?	8%	48%	67%	38%	
17	Do you think it is socially acceptable to have a test-tube baby?	25%	50%	41%	26%	20%

Segment III of poll surveyed state of mind of females towards barrenness .Each inquiry reaction was scored on Likert scale Ranging from (5) "dissent," (4), tolerably deviate (3), uncertain (2), respectably consent to (1) "concur

The present investigation tried to assess learning, state of mind and routine with regards to country group Hussain Abad females towards fruitlessness counteractive action included 161 female maturing between 15-45 years above from the group of Lahore Hussain Abad. The point of the investigation was to decide the learning and state of mind with respect to barrenness aversion among females. As indicated by this investigation, nearly individuals had confusion about preventive measure towards the anticipation of barrenness.

Segment II of poll was about learning questions and asked essential data, counteractive action from fruitlessness among members. Inquiries number 1-7 were about fundamental data and counteractive action of fruitlessness. Inquiries number 7-9 were about reasons for fruitlessness. Each inquiry reaction was scored "Yes" and "No". Mean number of "Yes" answers were 51%. The scope of most elevated and least reacted "Yes" questions 68% and 26% separately. The greater part of respondents thought about fruitlessness.

Segment III of survey evaluated state of mind of respondents towards fruitlessness and each inquiry reaction was scored "Yes" and "No". Mean number of "Yes" answers were 46%. The scope of most noteworthy and least reacted "Yes" questions were 77% and 16% separately. A large portion of respondents trust that fruitlessness is significant medical issue and also social issue and in case barrenness found the both male and female ought to be dealt with. Just 35% consider fruitlessness caused from medicinal issue more considered that barrenness cause from jinn another myths. Besides 76% respondents in country setting were ready to utilize medications to keep from fruitlessness .Though 25% respondents were consent to have test tube baby.44% female having barrenness were consented to go healing facility for treatment of fruitlessness .37% trust that barrenness is expected to jinn and different causes is ought not be dealt with therapeutically,. Hepatitis C contaminated individual however around 42% will visit hepatitis C tainted relative, 44% willing to sit near tainted individual and around 37% trust that hepatitis C influence capacity of tainted to visit others. The respondent's mentality wasn't genuinely satisfactory towards barrenness in both setting.

Limitations

This study found many limitations;

- Time duration was too short.
- This study was focus only on rural community.
- Likert scale questionnaire has been used in this study.
- Data collection was faced lot of issues.
- The respondents of the study have very careless attitude regarding filling questionnaire.

Participants of study have no idea about the importance of the filling questionnaire sincerely.

CONCLUSION

Learning, attitude and practice about infertility among females was halfway. Consequences of this examination show absence of comprehension about nuts and bolts of counteractive action of barrenness the investigation had been resolved the learning and state of mind of individuals in regards to fruitlessness anticipation. The level of knowledge was good among people but there was no significant association between attitude and practices regarding infertility prevention among the people. Moreover the people have poor practices toward infertility prevention. Furthermore factors (poverty, social context and conviction) were also influencing their conception toward infertility prevention.

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