# SOCIODEMOGRAPHIC CHARACTERISTICS AND WOMEN'S PREFERENCE FOR PLACE OF CHILDBIRTH

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# **ABSTRACT**

Background: Education is among the key social determinant of health and healthcare utilization. The educational attainment and women autonomy are directly associated with the maternal healthcare seeking behaviour. **Objective:** To determine the preference for place of child birth among married pregnant women in urban slums of Bahawalpur City and identify the sociodemographic factors that affect the preference of women for place to give birth. Methodology: This cross sectional study was conducted after taking ethical approval from Institutional Review Committee, from 1st June to 31st December 2017 at Quaid e Azam Medical College, Bahawalpur. Sample size calculated for the study was 363. Married pregnant women of reproductive age (15-49 years) were included in the study. Two slum areas, out of total 14 were selected by simple random sampling in Bahawalpur City. Out of these two slum areas 363 women of reproductive age, eligible for study were selected by non-probability consecutive method. The data was collected through a pretested questionnaire with the help of lady health workers of the areas. Data was entered and analyzed through SPSS version 17. Chi square test was applied to see any statistical difference between groups and p value < 0.05 was taken as significant. **Results:** Total 363 women were included in the study. The mean age of the respondents was  $26.8 \pm 3.8$ years. Among the respondents 44.1% were between 15-25 years of age. Majority of the participants (80.5%) were housewives in our study. The monthly income of 48.8% respondents was upto 20,000. The marriage duration of 60.8% respondents was between 1-10 years, 32.5% between 11-20 years and 6.7% had  $\geq$  21 years. The family type of 53.4% respondents was extended. The preferred place of child birth reported by 47.9% participants was home. The choice for place of delivery was significantly associated with age of women, educational level of spouse, women's occupation and monthly family income of the respondents. Conclusion: Educational level of husband, age of mother, woman occupation and family income has direct relationship with women's preference for place of child birth.

**Key Words:** Women's preference, Place, Child birth

# INTRODUCTION

In developing countries maternal mortality remains an intractable health problem and majority of the maternal deaths occur during home deliveries, due to either pregnancy related complications like maternal diabetes mellitus, hypertension and cardiovascular diseases or other contributory factors like poverty, non-availability of skilled birth attendant and poor access to healthcare system. 1,2,3 These maternal deaths are directly attributed to obstetric complications like hemorrhage, premature rupture of membranes (PROM), maternal sepsis, obstructed labor, preeclampsia and eclampsia.4 Majority of these complications are predictable before the time of delivery.5,6 Evidence suggests that skilled attendance at the time of delivery not only prevent obstetric complications at the time of delivery but also helpful in reducing maternal mortality. This is only possible if deliveries are conducted at well equipped and well organized healthcare facility. Maternal deaths and the proportion of births attended by skilled birth attendants are the main indicators to show the improvement in maternal health.1,2

The most satisfying event in a life of woman is

childbirth.<sup>2</sup> The time of delivery and purperal time are the most dangerous period for both maternal and child health.<sup>3</sup> Hence all the pregnant women should be provided a free and fully furnished delivery system at all levels and round the clock with physical, financial and social access. Assurance of healthcare for all segments of the population with special attention given to the health needs of women and children must be one of the top priorities in country's healthcare system.<sup>3</sup>

Pakistan is among the top six high burden countries, in which half of global maternal deaths occur. 8,9,10 The government of Pakistan has started many interventions to improve maternal health outcomes. A new cadre of community-based midwives (CMW) has been introduced to ensure availability and accessibility of skilled care in low-resource settings. The CMWs, which are trained to conduct home deliveries and responsible for providing individualized care to the pregnant women throughout the maternity cycle.4 In rural areas of Pakistan majority of women do not utilize the public sector healthcare services due to unidentified reasons and end up by delivering without skilled supervision. Factors that contribute to poor maternal and child health services utilization include physical and

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financial barriers, low social status of women, traditional beliefs and socio-cultural influences.<sup>5</sup> This study was aimed to assess the preference of pregnant women for the place of their childbirth and sociodemographic factors that affect their choice for place of delivery.

# **METHODOLOGY**

This cross sectional study was conducted from 1st June to 31st December 2017, after taking ethical approval from institutional review committee at Quaid-e-Azam Medical College, Bahawalpur. Sample size calculated for the study, at 95% level of confidence, 5% margin of error and 60% anticipated population proportion (institutional preference for childbirth)<sup>5</sup> was 363. Married pregnant women of reproductive age (15-49 years) were included in the study. Two slum areas, out of total 14 selected by simple random sampling in Bahawalpur City were Tibba Badar Sher and Bhatta No. 2,3 having household population of 2250 and 436 respectively. Out of these two slum areas 363 women of reproductive age, eligible for study were taken by nonprobability consecutive method. The data was collected through a preformed, pretested questionnaire with the help of lady health workers of the areas. The questionnaire comprised of two parts. First part contained socio demographic profile of the respondents sand the second was related to study variables. Data was entered and analyzed through SPSS version 17. Chi square test was applied to see any statistical difference between groups and p value <0.05 was taken as significant.

#### RESULTS

Total 363 women fulfilling the inclusion criteria were interviewed. The mean age of the respondents was  $26.8 \pm 3.8$  years. Among the respondents 44.1% were between 15-25 years, 39.9% between 26-35 years and remaining 16% were  $\geq$  36 years age. Majority of the women (80.5%) were housewives in our study. The monthly income of 48.8% respondents was upto 20,000, 35.3% between 20,000 to 30,000 and 15.9% had income of more than 30,000. The marriage duration of 60.8% respondents was between 1-10 years, 32.5% between 11-20 years and 6.7% had  $\geq$  21 years. The family type of 53.4% respondents was extended. (Table I) The preferred place of childbirth by 47.9% participants was

home, 42.1% preferred health facility and 10% had no particular choice. (Table II) Health care facility for childbirth was preferred by 45.7% respondents between 15-25 years age and 8.6% women  $\geq$  36 year preferred home for childbirth. Among women having primary and above level of education 60.1% preferred healthcare outlet for childbirth and 32.8% women with no formal education preferred home and 24.7% women having spouse with no formal education preferred home and 33.3% women who had illiterate spouse preferred healthcare outlet for child birth. Among the housewives 85% women preferred healthcare facility for giving birth to their child. Among the women having monthly family income of less than 20,000 the preferred place for childbirth was home by 46.6% respondents. (Table III)

Table I: Socio-demographic characteristics of the respondents

Variable	Frequency	Percentage		
Age		<u> </u>		
15-25	160	44.1%		
26-35	145	39.9%		
≥36	58	16%		
Women's education		<b>-</b>		
Illiterate	169	46.5%		
Primary	90	24.8%		
Secondary	78	21.5%		
Graduation & Above	26	07.2%		
Husband's education	•	•		
Illiterate	126	34.7%		
Primary	84	23.1%		
Secondary	108	29.7%		
Graduation & Above	45	12.5%		
Women's occupation				
Housewife	292	80.5%		
Working lady	71	19.5%		
Monthly income	•			
Up to 20,000	177	48.8%		
20,000-30,000	128	35.3%		
>30,000	58	15.9%		
<b>Duration of marriage</b>				
1-10 years	221	60.8%		
11-20 years	118	32.5%		
≥21 years	24	06.7%		
Family type				
Nuclear	131	36.1%		
Extended	194	53.4%		
Polygamous	38	10.5%		

Table II: Preferred place of childbirth by the respondents (n=363)

Place of delivery	Frequency	Percentage	
Home	174	47.9%	
Health care facility	153	42.1%	
No preference	36	10%	
Total	363	100%	

Table III: Sociodemographic characteristics of the respondents and preferred place of childbirth

	Preferred place of delivery						
Sociodemographic	Home		Healthcare facility		P value		
characteristics	No	%age	No	%age			
Age							
15-25	89	51.1%	70	45.7%			
26-35	70	40.3%	52	34.0%	0.010		
≥36	15	08.6%	31	20.3%			
Women's education							
No formal education	57	32.8%	61	39.9%			
Primary	43	24.7%	47	30.7%	0.069		
Secondary	51	29.3%	35	22.9%			
Graduate & Above	23	13.2%	10	06.5%			
Husband's education							
No formal education	43	24.7%	51	33.3%	0.010		
Primary	34	19.5%	43	28.1%			
Secondary	69	39.7%	36	23.5%			
Graduate & Above	28	16.1%	23	15.1%			
Women's occupation							
Housewife	128	73.6%	130	85.0%	0.011		
Working lady	46	26.4%	23	15.0%	0.011		
Monthly income							
Up to 20,000	81	46.6%	96	62.7%	0.002		
20,000-30,000	58	33.3%	43	28.1%			
>30,000	35	20.1%	14	9.2%			

#### **DISCUSSION**

This study aimed to assess the preference of reproductive age women for the place of their childbirth and sociodemographic factors that affect their choice for place of delivery.

The sociodemographic charateristics of our study participants revealed that 85% women were between 15-35 years age, 46.5% had no formal education, 34.7% spouses had no formal education, 80.5% respondents were housewives, 48.8% of the participatns has monthly family income of less than 20,000 and 53.4% women are living in extended families. These findings are

consistent with the findings of Mahdi SS and Kruk ME. 6,7

In our study, 47.9% women preferred home for birth of their child which is consistent with the findings of Tebekaw Y, et al, in which notable number of pregnant women among slum residents of Ethiopia choose to deliver at home. The preference of home for childbirth may be due to low level of education and low empowerment of women in urban slum areas. Expressions of the state of th

Our study revealed that 8.6% women of older age preferred home for birth of their child as compared to younger age group in which 45.7% women of less than 25 years age preferred health care facility for childbirth. The age of women was found to be significantly associated with women's preference for place of childbith (p=0.010), which is consistent with the findings of Yegezu RT, et al, monthly family income of the respondents in our study was significantly associated with their choice for place of delivery (p=0.002) which is similar with the findings of Tey NP and Javed SA, et al in which many Pakistani women chose to deliver at home because of financial constraints. 10,111

Education is among the key social determinant of health and healthcare utilization. The level of education and women empowerment are directly associated with the maternal healthcare seeking behaviour. Our study revealed no significant association between women's education and preference for place of child birth (p=0.069) which is contradictory to the findings of Balabonava D et al, 12 which points that power of education empower women to seek maternal healthcare. This difference in findings may be attributed to the fact that our study population belongs to urban slum areas in which literacy rate is low, more than half of the women are residing in extended family system, women are not empowered to take decisions and majority of them rely on their husband and in laws for major decisions of the family.

# **CONCLUSION**

Educational level of husband, age of mother, woman occupation and family income has direct relationship with women's preference for place of child birth.

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