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**ORIGINAL STUDY**

The Importance of Community Midwives for Delivery of Family Planning Services in Pakistan

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Abstract

Background: The objective of this study is to present contraception usage in Koohi Goth Women's Hospital and to highlight the leading role of midwives in effectively counseling patients to use modern methods of contraception, consequently, working towards sustainable development goals.

Methodology: It is a cross-sectional study conducted at Koohi Goth Women's Hospital, Landhi, Karachi from January to July 2022. All women of childbearing age who were counseled for and received contraception were included in the study.

Results: The most common contraceptive method of choice was long-term contraception with an intra-uterine copper device with an average insertion rate of 57.1% per delivery. 2nd most common method of choice was condoms for men and contraceptive surgery (bilateral tubal ligation) for women. This is far more than the overall contraceptive prevalence rate (34%) in Pakistan.

Conclusion: Midwives can play an essential and leading role in promoting contraceptive use, play a role in working effectively towards sustainable development goals, and minimize unmet needs for family planning.

Keywords

Importance, Community, Midwives, Delivery, Family Planning



Introduction

Pakistan's population growth has seen an increase of 1.85% from the year 2020 to 2021, making Pakistan the world's fifth most populous country¹. Increased population along with poverty, low literacy, high fertility, and high childhood and maternal mortality makes family planning a human rights issue. In Pakistan overall, 34% of currently married women use a method of family planning, with 25% using a modern method and 9% using a traditional method².

Studies indicate that 1 in 4 women have an unmet need for contraception³. Therefore, healthcare workers have to be well trained to provide quality family planning services that can lead to increased uptake of contraception and decrease unintended pregnancies, ultimately leading to improved health outcomes. A key factor in reducing the maternal mortality rate (MMR) is the presence of skilled birth attendants such as community midwives (CMWs) who specialize in providing timely healthcare services before the illness becomes life-threatening⁴.

Therefore, in 2006, the Pakistani government introduced rural CMWs, who received midwifery training and were sent back into their home villages to provide maternal care services^{5,6}. The notable defined roles and responsibilities of community midwives are: 1) to provide individualized care to the pregnant women and help her in self-care; 2) not only provide services to the pregnant women but also guide and counsel the community for healthy habits, involve the family in preparation for childbirth and for unexpected emergencies; 3) they are also trained to identify high-risk conditions that need medical attention and to make timely referrals for them⁷. Maternal mortality remains a critical public health challenge in most low-income countries, despite decades of targeted efforts⁵.

The sustainable development goals (SDGs) were created to improve health and gender equity among others, particularly 3.7 and 5.6 focusing on providing sexual and reproductive care, family planning services, and education to all women of

reproductive age⁸. While awareness and global commitment to safe motherhood has increased via working towards millennial and sustainable development goals, recent data show that overall progress has been slow⁵. A study has shown that the quality of care provided by CMWs is comparable to obstetricians and medical officers⁹. Therefore, community-based midwives can play a vital role in reducing the burden of maternal morbidity and mortality and achieving sustainable development goals.

Koohi Goth Women's Hospital is located in the suburban area of Karachi, Pakistan. The education level of people in this area ranges from primary education to no education at all and the majority of the population belongs to a poor socio-economic class. The hospital not only provides midwifery training on campus but also has one of the largest midwives-led units in the city. Here midwives are trained specifically on the modern methods of contraception, their importance, and the effective use of each method.

Since the community had been rejecting the word "family planning" or "mansooba bandi" (in the local language) it was decided to establish a new clinic with the name "waqfa clinic" (birth spacing clinic) and the ground of counseling was not to limit the number of children but to provide 3 to 4 years of spacing between each child to improve maternal and child health. The objective of this study is to present contraception usage in Koohi Goth Women's Hospital and to highlight the leading role of midwives in effectively counseling patients to use modern methods of contraception, consequently, working towards sustainable development goals.

Methodology

This is a cross-sectional study conducted at Koohi Goth Women's Hospital, Karachi. The data presented in this article is from January to July 2022. All women of childbearing age (15-49 years) who visited the hospital for any gynecological, obstetric, or medical issue or even as mere attendants were counseled by our midwives on the importance of family planning

and the use of different contraceptive techniques available at the hospital. Those willing for contraception are asked to fill a pro forma for family planning record maintenance, written and informed consent is taken and they are provided with the most effective method of contraception. Those who are hesitant are sent to our Family Planning Clinic (Waqfa clinic) for an in-depth discussion with our trained counselor who is a graduate and has been working in the family planning department for over 5 years. They are then asked to visit again either alone or with their partners as deemed fit by the client.

The conversion formulae to convert the number of units sold into the number of users is given in the table below (1):

Result

As seen from Tables 2 and 3, the most popular method of contraception at Koohi Goth Hospital is IUCD with an average insertion rate per month is 57.1% per delivery. 2nd most frequently used method is condoms by males and permanent sterilization for women.

Table 1: Conversion Formulae for Estimating the Number of Users

100 units of condoms	1 user
13 cycles of oral pills	1 user
1 insertion of IUD	1 user
5 vials of injectable	1 user
1 contraceptive surgery	1 user

Table 2: PPIUCD Insertion Rate per Delivery at Koohi Goth Women's Hospital

MONTH	DELIVERIES	PPIUCD	INSERTION RATE (%)
JANUARY	529	241	45.6
FEBRUARY	415	185	44.6
MARCH	392	200	51.0
APRIL	461	342	74.2
MAY	461	308	66.8
JUNE	464	283	61.0
JULY	515	292	56.7

PPIUCD: Post-Partum Intra Uterine Contraceptive Device

Table 3: Contraception Usage (Number of Users) at Koohi Goth Women's Hospital from January – July 2022

MONTH	CONDOMS	PILLS	ECP	INJECTABLE	IUCD	BTL
JANUARY	N/A	1.4	7	0.8	241	12
FEBRUARY	N/A	1.9	2	1.6	185	12
MARCH	N/A	3.2	10	3.2	200	10
APRIL	96	4.4	5	2.4	342	7
MAY	98.4	4.2	3	5.2	308	10
JUNE	67.2	6.7	12	4.8	283	10
JULY	57.6	11.8	3	3.8	292	18

IUCD: Intra Uterine Copper Device; BTL: Bilateral Tubal Ligation; Pills: combined oral contraceptive pills + progesterone-only pills; ECP: Emergency Contraceptive Pills

Discussion

Family planning is publicized and associated with birth spacing and women who want to delay or stop childbearing are said to have a demand for family planning. According to the Demographic and Health Survey (DHS) 2017-18, the demand for family planning in Pakistan is 52% while the contraceptive prevalence rate is 34%¹⁰.

This indicates the high percentage of women with unmet needs for family planning. At our hospital, the IUCD insertion rate alone is 57.1% per month making contraception usage and prevalence very high. Our study demonstrates that the most preferred mode of contraception is a post-partum intrauterine copper device (PPIUCD). This could be due to ease of insertion right after delivery and due to PPIUCD being a long-term contraceptive method. In our study, it is evident that almost every 1 in 2 women who deliver at our midwife-led unit consents for and is provided with PPIUCD. This rate is more than the overall prevalence rate of contraception in Pakistan and only became possible due to the tireless efforts of midwives who counsel patients on every visit.

Midwives not only talk about the benefits of contraception but also understand the stigmas and taboos related to them which helps them in counseling their clients and overcoming those myths. These myths varied from considering PPIUCD to be un-Islamic while others believed that PPIUCD was associated with malignancy and increased menstrual bleeding¹¹. Another popular belief was that IUCD inside the uterus can get lost in the abdomen and is associated with increased rates of infection. All of these myths and beliefs are due to inadequate counseling.

PPIUCD uptake increased when midwives from the local community were trained by our counselor and began counseling the family (patient and her mother-in-law) in their local language. The rate of uptake increased due to an increased level of trust in midwives, ease of communication, and more time spent by midwives in addressing the concerns of patients. These frequent counseling sessions have enabled

the unmet need for family planning in our suburban area to become almost zero. Our midwives are trained frequently on sustainable development goals, the anticipated difficulties associated with achieving women empowerment in Pakistani households, and how to work towards it. Young pregnant women belonging to low-income uneducated families have little to no decision-making power over their reproductive rights. Instead, the decision is made either by the husband or mother-in-law who often lack maternal care knowledge and there is a delay in treatment-seeking behavior¹². Consequently, it directly impacts maternal and childhood mortality rates¹². Therefore our target population for family planning counseling is not only women of reproductive age group but also their mothers-in-law and husbands.

Increasing the gap between two children by more than 36 months reduces the risk of infant death¹⁰. Children born less than 2 years after a previous pregnancy have a dramatically high under-5 mortality rate (122 deaths per 1000 live births) as compared with those born after 3 or more years (41 deaths per 1000 live births)¹⁰. In Pakistan, overall, 37% of children are born after less than 2 years of their elder sibling¹⁰. This led to renaming our family planning clinic as "waqfa" clinic which translates to delay or take an interval between pregnancies. This reinforced the idea of birth spacing which is beneficial for the new offspring, previous children in the family, and the mother herself. We identified the leading role midwives can play in promoting discussion on family planning as most of their clients belong to the reproductive age group.

Furthermore, midwives are respected members of society and have been creating a safe environment for women to discuss maternity-related problems, family planning, and reproductive health⁶. Therefore, providing family planning services through community midwives in our setup has shown to be a very successful approach and one that has the potential to become a pillar of the nation's overall family planning delivery program.

Conclusion

The decreased insertion rate of IUCD and contraceptive prevalence rate in the country are due to a lack of effective counseling by healthcare providers. Strengthening our community midwives via enhancing their capacity, and providing frequent training and family planning education can dramatically increase contraception usage in Pakistan. This will eventually improve health outcomes for women, newborns, infants, and children.

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