



# REPRODUCTIVE HEALTH KAP SURVEY AMONG AFGHAN WOMEN IN KABUL CITY

**ICRH**

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**ICRH**

# BACKGROUND

- **Mission ICRH + IbnSina (2002)  
for Belgian Development Cooperation  
Goal: “Options for improvement of RH care in  
Afghanistan”**
- **Objective survey:**
  - **Explore Knowledge , Attitudes and Practices  
(KAP)**
    - Antenatal care
    - Obstetrical care
    - Family Planning
    - Sexually Transmitted Infections (STI)
    - Gender Issues
  - **Assess Determinants of some RH indicators**



# METHODOLOGY

- 468 face-to-face interviews
- Women 15 – 49 Years
  - 4 Health Centres ( 2 MCH clinics + 2 polyclinics)
  - 4 areas in KABUL CITY
  - Systematic sample



# CHARACTERISTICS of STUDY POPULATION

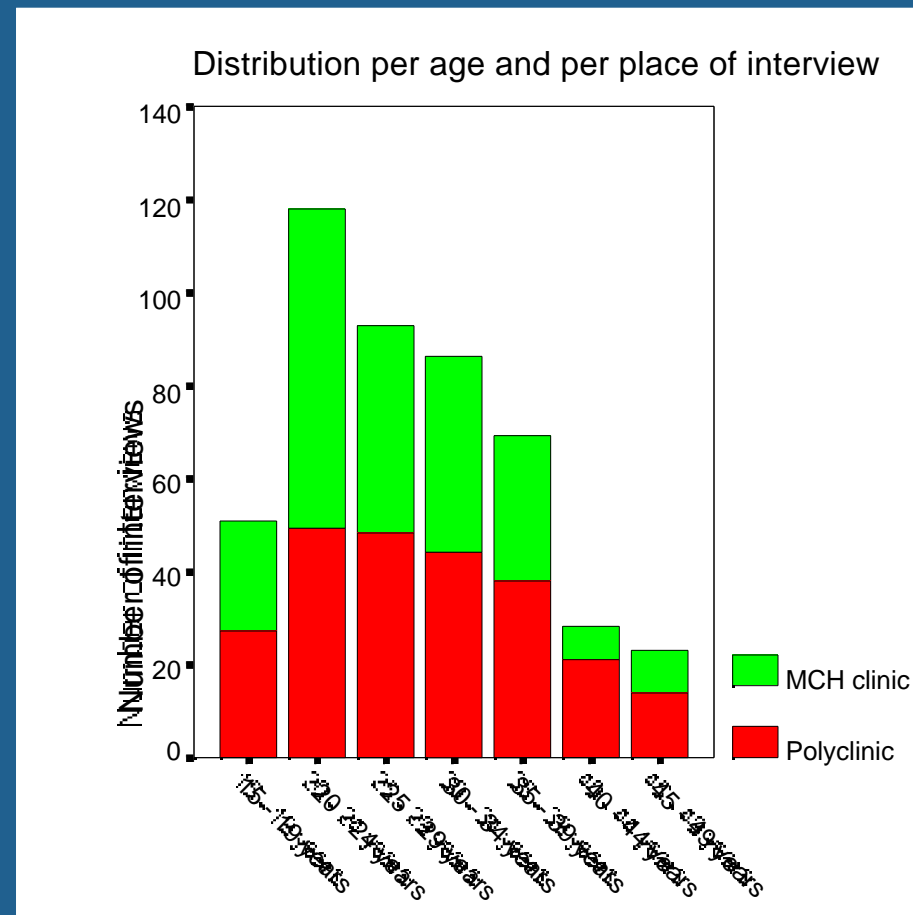
## Age:

- 15 – 49 years
- Youngsters underrepresented

## Ethnicity :

- Tajik (62%)
- Pashtun (20%)
- Hazara (17%)

Literacy: 62% illiterate



# ANTENATAL CARE

- **average 3.7 visits**  
**(>gynaecologist)**
- **Highly appreciated**
- **Reasons for going to ANC:**
  - **Health of my baby OK ?** **39%**
  - **Medical treatment for myself** **28%**
  - **Free vaccination** **13%**
  - **My health OK?** **7%**
  - **Information on pregnancy** **3%**
  - **Free medical supplements** **3%**



# DETERMINANTS of ANTENATAL CARE

Associated with:	adj OR	[95% CI]
• Schooling mother	4.78	[2.21 – 10.33]
• Last delivery < 1 y before	2.05	[1.17 – 3.61]

## NOT WITH:

- Age ; Ethnical group ; Parity ; Age at marriage
- Status: resident / displaced / returnee ; Owner of house
- Schooling, literacy, employment, profession .... of husband



# OBSTETRICAL CARE

- **CAESARIAN SECTION RATE = 1.6%**
- **AGE FIRST DELIVERY**
  - 4% before 14 years or younger
  - 63% between 15 – 19 years
- **HOME DELIVERY = 59%**
  - Skilled assistance = 26%
  - Un skilled: >female relative, <TBA
  - Obstacles institutional delivery:
    - geographical inaccessibility? (32%)
    - cultural (18%) – financial (17%)
    - own preferences (36%)



# DETERMINANTS of INSTITUTIONAL DELIVERY

Associated with:	adj OR	[95% CI]
• Schooling mother	2.29	[1.41 – 3.72]
• Attendance ANC	2.75	[1.45 – 5.23]

## NOT WITH:

- History of obstetrical problem (haemorrhage, convulsions, oedema,... before, during or just after delivery)
- Ethnical group ; resident / displaced / returnee...
- Schooling, literacy, employment, profession .... of husband



# DETERMINANTS of SKILLED BIRTH ASSISTANCE

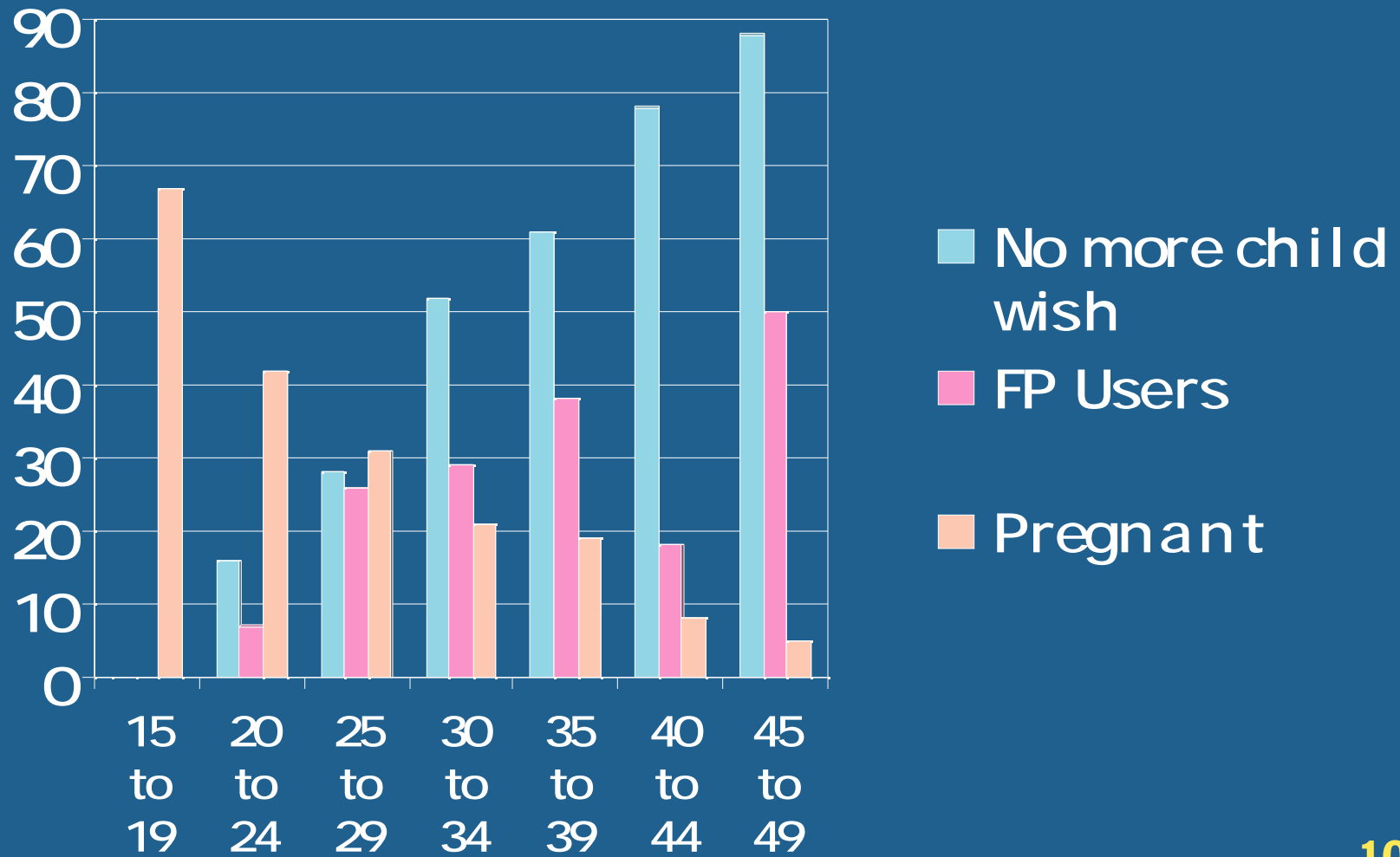
Associated with:	adj OR	[95% CI]
• Schooling mother	2.07	[1.24 – 3.46]
• Attendance ANC	3.44	[1.92 – 6.14]
• Interview at polyclinic	1.60	[1.01 – 2.54]

## NOT WITH:

- History of obstetrical problem (haemorrhage, convulsions, oedema,... before, during or just after delivery)
- Ethnical group ; resident / displaced / returnee...
- Schooling, literacy, employment, profession .... of husband



# FAMILY PLANNING



# FAMILY PLANNING

- **Most popular methods**
  - IUD (28%)
  - Pill (21%)
  - Injectable hormones (21%)
- **SPACING of pregnancies ?**
- **OBSTACLES to FP**
  - Lack of knowledge (52%)
  - Desired number of children not yet met (12%)



# DETERMINANTS of FAMILY PLANNING USE

Associated with:	adj OR	[95% CI]
•		
• No more child wish	3.88	[2.00 – 7.52]
• Age more 25 years	3.77	[1.38 – 10.31]
• Husband permanent job	2.42	[1.21 – 4.84]
• Woman involved FP decision	2.14	[1.02 – 4.49]



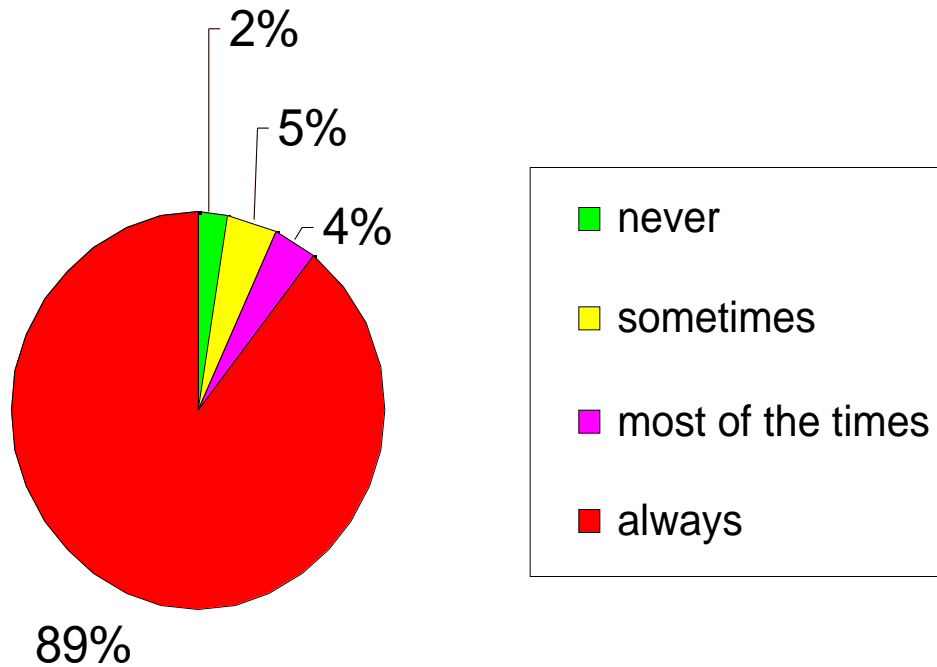
# Sexually Transmitted Infections (STI)

- 24% women knew about STI (> HIV/AIDS)
- Transmission?? (mosquito bites, kisses,...)
- Prevention?? (hygiene – bathing,...)
- Condom: NOT SEEN AS protection against STI



# GENDER ISSUES

Permission needed to go to the HC ?



**Permission  
of husband  
or male  
relative  
almost  
always  
needed.**



# GENDER ISSUES

- **“It’s a wife’s duty to have sex with her husband even if she does not want.”** 75%  
AGREE
- **“A husband has the right to beat his wife if she disobeys him.”** 57%  
AGREE
- **“A woman should have the right to decide on her number of children.”** 87%  
AGREE
- **“All girls should learn how to read and how to write.”** 98%  
AGREE





## WOMAN'S EDUCATIONAL LEVEL

• Use ANC (%)	72	89	95
• Institutional delivery (%)	32	50	62
• Skilled birth assistance (%)	46	68	77
• Use of Family Planning (%)	14	26	45
• Mean age of marriage (y)	16.5	17.7	19.5
• Mean number pregnancies	5.2	4.2	4.4
• Knowledge FP method (%)	50	61	85
• Knowledge STI (%)	12	25	58
• Heard of HIV / AIDS (%)	17	50	80
• No problem partner violence (%)	61	61	38



# SUMMARY

- **Knowledge and RH indicators are poor (although STUDY POPULATION is PRIVILEGED GROUP)**
- **Schooling of women = main determinant**
- **Cultural factors (women's position) = important barrier**



# CONCLUSIONS



- **SOCIO-CULTURAL factors = key factors in RH**
- **Reproductive Health is more than RH services**

# IMPLICATIONS

## IMPROVEMENT of RH in AFGHANISTAN REQUIRES

- **MULTI SECTORAL APPROACH**
- **LONG TERM COMMITMENT  
of AGENCIES + DONORS**



# RECOMMENDATIONS

Invest in

- **EDUCATION (Primary Schooling)**
- **PROMOTION WOMEN'S SOCIAL POSITION**
- **REPRODUCTIVE HEALTH**
  - **COMMUNITY HEALTH EDUCATION**
  - **FAMILY PLANNING (spacing)**



# ACKNOWLEDGMENTS

- **IbnSina**
- **Afghan women**
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- **All RH agencies in Afghanistan**
- **All of you**

