Knowledge and Attitude Towards Sexual Practices During Pregnancy

Sadia Fatima, Nighat Shafiq, Tabassum Muzaffar, Syed Waqar Abbas, Sadaf Zahra*, Isma Safdar

Combined Military Hospital/National University of Medical Sciences (NUMS) Rawalpindi Pakistan, *Combined Military Hospital Kohat/ National University of Medical Sciences (NUMS) Pakistan

ABSTRACT

Objective: To explore the knowledge, attitude and sexual practices among pregnant women reporting to a tertiary care hospital

Study Design: Cross-sectional analytical study.

Place and Duration of Study: Antenatal clinic of Obstetrics & Gynaecology Department, Combined Military Hospital Rawalpindi Pakistan, from Jan to Jun 2020.

Methodology: Three hundred and seventy women who attended the antenatal clinic during the study period were interviewed. The responses to chosen preferences were recorded on a structured questionnaire.

Results: The majority of participants believed that intercourse could be done throughout pregnancy, it does not result in complications, and improves marital relationships. However, it was difficult due to the changed physical appearance, but it was not unpleasant for the husband. Only 51.1% of participants agreed to decreased libido. 77.6%, 71.6% and 75.4% were of the opinion that it was not prohibited in religion, neither influence baby nor labour respectively.

Conclusion: Most pregnant women maintain sexual activity during pregnancy. The majority had adequate knowledge and a positive attitude.

Keywords: Attitude, Knowledge, Pregnancy, Sexuality.

How to Cite This Article: Fatima S, Shafiq N, Muzaffar T, Abbas SW, Zahra S, Safdar I. Knowledge and Attitude Towards Sexual Practices During Pregnancy. Pak Armed Forces Med J 2022; 72(3): 932-934. DOI: https://doi.org/10.51253/pafmj.v72i3.4693

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by-nc/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

INTRODUCTION

Emotional, psychosocial, hormonal, and anatomical factors influence sexual activity during pregnancy and differ during every trimester.1 Sexual health is a complicated biological and sociological phenomenon that involves a positive and responsible approach to sexuality and sexual relationships, according to the World Health Organization (WHO).² Discussion of sex in our society, especially during pregnancy, is probably secret because of the culture's propensity to exclude pregnant women from sexuality issues. Attitudes, cultures and religions heavily influence.³ Sexual practices during pregnancy. Ethnological studies show the variation of views and sexual behaviours of couples during pregnancy.⁴ Pregnancy creates positive feelings, such as happiness, but at the same time negative feelings, such as depression,⁵ fear and anxiety,⁶ that can have negative consequences on the sex life,^{7,8} of the expectant woman and her partners. Throughout pregnancy, changes in desire and sexual practice are common.⁸ In addition to the decline in sexual desire, reminders about sex or limits, and the fear of harming

the fetus physically, pregnancy may become a time of low sexual activity.⁹ Expectant mothers have needs, questions and fears that should be discussed during their prenatal care and education about their sexuality. ¹⁰

This study was planned to determine the knowledge and attitude towards sexual practices among pregnant women who utilize the antenatal care facility of the tertiary care hospital.

METHODOLOGY

This cross-sectional study was carried out at the antenatal clinic of CMH Rawalpindi from January to June 2020. Reference frequency of outcome factor in the population (p): 68.1%,¹¹ was taken for sample size calculation using OpenEpi Software. Data was collected from 370 pregnant women using consecutive convenient sampling who attended the antenatal clinic of the centre. Prior approval from the Hospital Ethical Committee was taken.

Inclusion Criteria: Healthy pregnant women attending the antenatal clinic were included in the study.

Exclusion Criteria: Unwilling pregnant ladies were excluded from the study. A questionnaire for this study consisted of demographic data and obstetrical history with statements for evaluating patients'

Correspondence: Dr Sadia Fatima, Department of Obs & Gynae, Combined Military Hospital Rawalpindi-Pakistan

Received: 01 Jul 2020; revision received: 10 Mar 2022; accepted: 17 Mar 2022

knowledge and attitude towards sexual practices during pregnancy.

The pregnant women filled in the questionnaires at the antenatal clinic in a room that guaranteed confidentiality. A senior Consultant Obstetrician assessed the validity of the questionnaire. The questionnaire was initially pilot tested on 20 participants to search for conceptual issues, obscurity and social acceptability. Anonymity and the confidentiality of the collected data were also guaranteed.

Participants communicated the purpose and goals of the study, and written consent was taken before administering the questionnaire. Statistical Package for Social Sciences (SPSS) version 21.0 was used for the data analysis. Qualitative variables were summarized as frequency and percentages.

RESULTS

A total of 370 pregnant women were interviewed. The mean age of women was 27.55 ± 4.166 years, with a minimum of 18 and a maximum of 40 years. The obstetric history and sociodemographic characteristics of participants were summarized in Table-I.

Table-I: Socio-demographic characteristics of participants, (n=370).

Variables	Frequency		Percent
Age (years)	≤30	298	80.5
	>30	72	19.5
Education	Till Matric	09	2.4
	Till Masters	298	80.5
	Professional	63	17.0
Parity	Primi	109	29.5
	Multi	261	70.5
Gestation	1st trimester	46	12.4
	2nd trimester	91	24.6
	3rd trimester	233	63.0

Majority of women, 245 (66.2%), were not living in the combined family system, were housewives 222 (60.0%) and were married for up to ten years 352 (95.1%).

Among the study population, 344 (93.0%) believed that intercourse could be done during pregnancy, and 294 (79.5%) believed it could be done throughout pregnancy. The knowledge and attitude responses of the participants are shown in Table-II.

DISCUSSION

In our study, 344(93.0%) of pregnant women thought it was possible to have sex during pregnancy, which was in line with study results by Darroch *et al.*¹²

In our study majority of women were in the third trimester and agreed that sex is difficult due to changed physical appearance but 294 (79.5%) were of the opinion that it can be done throughout pregnancy, a statistically significant increase in sexual satisfaction in the third trimester has also been observed by Chang *et al*,¹³ though, in comparison with the first two trimesters, Corbacioglu-Esmer *et al.* recorded significantly lower sexual function scores in the third trimester.¹⁴

The study by Babazadeh *et al*, showed that libido is decreased during pregnancy,¹⁵ which is contrary to our study where about 181 (48.9%) disagreed that libido is decreased. It is less than in a study of 500 Nigerian pregnant women. Sixty per cent of women had the same sexual desire during pregnancy as before.¹⁶

In a study in Turkey, during pregnancy, 44% of women noticed a negative shift in their husband's sexual behavior,¹⁷ which is far more than in our study, where only 6.8% agreed that it is not pleasant for the husband and 93.2% disgreed to it.

Table-II: Opinion of pregnant women about sex during pregnancy, (n=370).

Vaculadas	Frequency		Percent	
Knowledge	Agree	Disagree	Agree	Disagree
Abortion	90	280	24.3	75.7
Infection in fetus	66	304	17.8	82.2
Rupture of fetal membranes / Preterm labour	52	318	14.1	85.9
Nausea/Vomiting	114	256	30.8	69.2
Vaginal bleeding	101	269	27.3	72.7
Attitude				
Helps you to endure labour pains	91	279	24.6	75.4
Necessary for growth of baby	105	265	28.4	71.6
Prohibited in religion	83	287	22.4	77.6
Improves marital relationship	266	104	71.9	28.1
Urge is reduced	189	181	51.1	48.9
Not pleasant for husband because of my changed physical appearance	25	345	6.8	93.2
Difficult due to my changed physical appearance	218	152	58.9	41.1

The majority of women in our study were of the opinion that sex during pregnancy does not lead to pregnancy-related complications, which is similar to the study by Bahloul *et al*, from Egypt,¹⁸ but contradictory to the study by Naim *et al*,¹⁹ However, the literature showed no overall correlation between pregnancy complications in women during all stages of pregnancy and coital frequency.²⁰

In our study majority of participants disagreed that sex during pregnancy helps to endure labour pains which is the same as a study by Omar *et al*,²¹ however, Foumane et al. indicated that sexual activity increases the prognosis of labour during pregnancy.²²

Most women in our study thought that sexual activity during pregnancy was not necessary for the growth of the baby, which is also concluded by the study of Atrian et al.23

71.9% of participants in our study approved that sex during pregnancy improves marital relationships, which is similar to the study by Polomeno *et al*.²⁴

Most participants disagreed that sex during pregnancy is prohibited in religion, and a study by Bartellas *et al*,²⁵ also shows that vaginal intercourse during pregnancy is not influenced by religion.

The study was only about pregnant women. The non-inclusion of partners in the study was a constraint because it did not allow men's responses to women about sex during pregnancy to be matched. Sexuality during pregnancy was measured between different pregnant women and not between the same women.

CONCLUSION

The majority of participants were of the opinion that sex is safe during pregnancy. However, it improves marital relationships but neither influences the baby nor labour.

Conflict of Interest: None.

Authors' Contribution

SF: Discussion, NS: Basic concept, literature review, TM: Data collection, SWA: References, SZ: Material and methods, IS: Introduction.

REFERENCES:

- Anna F, Iwona C, Jerzy S, Piotr F, Milosz L, Violetta SP, et al. Sexual functioning in pregnant women. Int J. Environ Res Public Health 2019; 16(21): 4216.
- Rehab A, Abdullah KA, Asalah FH, Huda AB, Nouf MA, Maha AA. Knowledge and awareness of health practice during pregnancy among females of Jeddah City in Saudi Arabia. World Family Medicine.2019;17(12):27-34.
- Ajen SA, Okoy FN, Bulus AD, Edem BE. Frequency, perceptions and complications of sexual activity during pregnancy among a group of Nigerian women. IAIM 2015; 2(6): 54-63.

- Kiemtore S, Ouedraogo I, Ouattara A, Zamane H, Sawadogo YA, Kain PD. Sex during Pregnancy: Opinions, Attitudes and Practices among pregnant women. J Women's Health Care 2016; 5(6): 343.
- Lima MO, Tsunechiro MA, Bonadio IC, Murata M. Depressive symptoms in pregnancy and associated factors: longitudinal study. Acta Paul Enferm 2017; 30(1): 39–46.
- Silva MM, Nogueira DA, Clapis MJ, Leite EP. Anxiety in pregnancy:Prevalence and associated factors. Rev Esc Enferm USP 2017; 51(1): e03253.
- Anzaku AS, Ogbe EA, Ogbu GI, Edem BE, Ngwan SD. Evaluation of changes in sexual response and factors influencing sexuality during pregnancy among Nigerian women in Jos, Nigeria. Int J Reprod Contracept Obstet Gynecol 2016; 5(10): 3576–3582.
- De PC, Polomeno V, Bouchard L, Reissing E. What do we know about perinatal sexuality? A scoping review on sexoperinatality - Part 2.J Gynecol Obstet Biol Reprod (Paris) 2016; 45(8): 809–820.
- Fernández SC, Huankara KD, Granero M J, Carmona SE, López MM, Hernández JM et al. Sexuality throughout all the stages of pregnancy: Experiences of expectant mothers. Acta Paul Enferm 2018; 31(3): 305-312.
- Alkaabi MS, Alsenaidi LK, Mirghani H. Women's knowledge and attitude towards pregnancy in a high-income developing country. J Perinat Med 2015; 43(4): 445–448.
- 11. Kobra AG, Fatemeh N , Ehsan K , Parvin R . Demographic and obstetric factors affecting women's sexual functioning during pregnancy 2015; 12(1): 72.
- Darroch JE, Singh S.Trends in contraceptive need and use in developing countries in 2003,2008 and 2012: An analysis of national surveys.Lancet 2013; 381: 1756-62.
- Chang, S.R., Chen, K.H, Lin, H.H, Yu, H.J. Comparison of overall sexual function, sexual intercourse/activity,sexual satisfaction, and sexual desire during the three trimesters of pregnancy and assessment of theirdeterminants. J. Sex. Med 2011; 8(10): 2859–2867.
- Corbacioglu, A.; Akca, A.; Akbayir, O.; Goksedef, B.P.C.; Bakir, V.L. Female sexual function and associatedfactors during pregnancy. J. Obstet. Gynaecol. Res 2013; 39(6): 1165–1172.
- Babazadeh R,Najamabadi KM,Masomi Z.Changes in sexual desire and activity during pregnancy among women in Shahroud ,Iran.Int J Gynaecol Obst 2013; 121(3): 294.
- Orji EO, Ogunlola IO, Fasubaa OB. Sexuality among pregnant women in South West Nigeria. J Obstet Gynaecol 2002; 22(2): 166– 168.
- 17. Erbil N.Sexual function of pregnant women in the third trimester. Alexandria J. Med 2018; 54(2): 139-142.
- Bahloul M, Ahmed M. Othman, Abbas, Safwat A ,Salman, et al. Sayed. Sexual behaviour of pregnant women attending antenatal care clinic at Assiut Women's Health Hospital, Egypt. Int J Reprod Contracept Obstet Gynecol 2018; 7(9): 3446-3449.
- Naim M, Bhutto E. Sexuality during pregnancy in Pakistani women. J Pak Med Assoc 2000; 50(1): 38-44.
- Sayle AE, Savitz DA, Thorp JM Jr, Hertz-Picciotto I, Wilcox AJ. Sexual activity during late pregnancy and risk of preterm delivery. Obstet Gynecol 2001; 97(2): 283.
- Omar NS, Tan PC, Sabir N, Yusop ES, Omar SZ. Coitus to expedite the onset of labour: A randomised trial. BJOG 2013; 120(3): 338–345.
- 22. Foumane P, Mboudou ET, Sama JD, Baba S, Enama Mbatsogo BA, Ngwana L. Sexual activity during pregnancy and prognosis of labor in Cameroonian women: a cohort study. J Matern-Fetal Neonatal Med 2014; 27(13): 1305-1308.
- Atrian MK, Sadat Z, Bidgoly MR, Abbaszadeh F, Jafarabadi MA. The Association of Sexual Intercourse During Pregnancy With Labor Onset . Iran Red Crescent Med J 2015; 17(1): e16465.
- Polomeno V. Sex and Pregnancy: A Perinatal Educator's Guide. J Perinat Educ 2000; 9(4): 15-27.
- Bartellas E, Crane JMG, DaleyM, Bennett KA, Hutchens D. Sexuality and sexual activity in pregnancy. BJOG 2000; 107(8): 964-968.

.....