

FACTORS FOR LATE INITIATION OF ANTENATAL CARE



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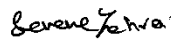
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RESEARCH COMPLETION CERTIFICATE

It is certified that Ms. Serene Zehra of BSc (Hons) (session 2019 – 2023), Department of Applied Psychology has carried out research work entitled “**Factors for Late Initiation of Antenatal Care**” under my supervision.

It is assured that research work is original and has not yet been published anywhere else.

Signature of Supervisor

Dated 16th May 2023



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I certify that this is my own research work. The work has not, in whole or in part, been presented elsewhere for assessment. Where material has been used from other sources, it has been properly acknowledged. The similarity index of the research report is 8% . If this statement is untrue and I am found guilty of plagiarism, the punitive actions against me should be taken as per Kinnaird Anti Plagiarism Policy.

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Abstract

Antenatal care is the type of care that is given by a healthcare professional/worker to a woman during her pregnancy period. Antenatal care is quite worthy of attention when it comes to pregnancy. Different healthcare workers present patients with various types of precautions that are needed during this period. The aim of the research was to assess the factors for late initiation of antenatal care. In-depth interviews were conducted in order to collect data from 6 females. Women aged between 22-35 years were selected for the study. Sample was recruited through purposive sampling. Interviews were transcribed and thematic analysis was applied to generate and evaluate the results. 17 initial themes and 6 master themes were extracted. Unsatisfactory maternity services nearby, lack of family/spouse support, unplanned pregnancy and raised expenses occurring from maternity services were the main themes that were concerning for every participant.

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List of Abbreviations

Abbreviation	Full form
ANC	Antenatal Care

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Chapter 1

Introduction

The aim of the present study was to evaluate the factors for late initiation of antenatal care.

Antenatal care:

Antenatal care is the type of care that is given by a healthcare professional/worker to a woman during her pregnancy period. Antenatal care includes a number of healthcare procedures such as, testing, screening, prevention and management of any pregnancy-related diseases (Ali et al., 2020). Furthermore, Antenatal care is a great tool for maternity health education and its promotion. Through this type of preventive medical services, women can learn from the skilled health workers about sound ways of behaving and preparing themselves during pregnancy, identifying any advance notice signs during pregnancy and labor and receiving social, close to home and mental help at this crucial time in their lives. The World Health Organization has recommended a set of guidelines to be followed for a positive pregnancy. Frequent visits to the doctor are a chance for providing health education to mothers in order to assess any risk factors and health conditions that can affect the mother and the fetus. Women are usually advised to begin their antenatal care timely in order to decrease the risk of complications during pregnancy and achieving maximum benefits of monitoring fetal and maternal health. Majority of fetus deaths and high-risk complications have been linked to poor antenatal care (Ngxongo, 2018). Four significant goals of antenatal care have reported (a) advancement and maintenance of the physical and social strength of the mother and the child, (b) identification of intricacies during pregnancy, (c) improvement of birth readiness and complication status plan and (d) arrangement of the women for ordinary postpartum period (Ekabua et al, 2011). Women are encouraged to take up Antenatal care during the first 12 weeks' of gestation (during first trimester). Healthcare

professionals describe “late initiation” as to accessing Antenatal care in the second trimester (13TH week) or even later. Late initiation of antenatal care however, may lead to complications such as low birthweight or premature birth. Healthcare workers and doctors educate women as much as possible about the benefits and significance of antenatal care and explaining that it is the best instrument for maternal and child healthcare. Women who may have had a negative experience with initiation of antenatal care in the past may not choose to take up such care in the future, but whereas women who may have had a positive experience with antenatal care in terms of frequent visits to the doctor are more likely to choose such healthcare facilities for impending pregnancies. Accessing Antenatal care on time can also be a teachable moment for many mothers where they can be educated regarding any pregnancy complications and what steps can be taken to avoid them, what to expect at the time of the birth and how the mother can take care of the baby after the birth. At times fathers also play a vital role and are equally involved in the health and care of the mother and the baby, this way antenatal care also helps to foster good relationships between families.

Antenatal care therefore can be useful tool for providing information regarding mother’s and child’s health making sure both are doing well. The antenatal care (ANC) includes a mixture of healthcare professionals who look after each and every aspect of health during the gestation period. Midwives are trained professionals to look after the mother and the child during pregnancy and even after birth. They may attend women at home or at hospital. Obstetrician is a specialist in antenatal and postnatal care for women, a midwife may refer woman to an obstetrician in case of any chronic illness or complication. He may also suggest some multivitamins which the mother can benefit from. Anesthetist, is a specialist in pain relief and anaesthesia. A pregnant woman may contact an anesthetist during her delivery when she decides between epidural or caesarean. A pediatrician specializes in

the care of babies and children in particular. A woman may contact a pediatrician if she notices any problems with her baby. Moreover, a sonographer has special training in carrying out ultrasound scans at different times during the pregnancy. An obstetric physiotherapist is a specialized trained professional which will help a woman to deal with any significant physical changes during and after gestation. Lastly antenatal care will include a dietitian which will provide a healthy eating chart and suggest some nutritional supplements that a woman should consume in the given period. A dietitian may be helpful if a woman develops gestational diabetes or high BMI. Some western countries may even provide weekly classes as a part of antenatal care so that the mothers get the best physical and psychological benefits. Besides the fact that antenatal classes can open the door to amicable help, yet you are likewise instructed on the better purposes of managing pregnancy, how your child is developing and what's in store for you when you conceive a baby.

Antenatal care also helps in providing awareness and support to the expectant mother on various topics such as healthy nutrition, exercise, stress management, and preparation for labor and birth. Women are highly encouraged to discuss any concerns or questions they may have regarding the entire process with their healthcare provider during these visits. Antenatal care help to achieve the best physical and psychological health for the expectant mother which in turn increases the chances of a normal and healthy delivery and baby.

Antenatal care holds great importance for the pregnant mother. These healthcare professionals may provide health tips time to time for the healthy growth of the developing fetus. Regular screening can help to identify any health complications that may arise. Good intake of nutritional supplements such as folic acid, fish oil and iron will ensure the healthy

wellbeing of mother and the baby. However, doctors may also provide a list of foods that the pregnant women should stay away from that can be dangerous (Jacaranda Maternity, 2021). The more regular contacts with the doctor the more the chances of achieving improved utilization and quality of antenatal care. Even if the mother feels fine, health problems can still arise therefore regular health check-ups should be done without any delays. Some serious health conditions such as pre-eclampsia and urinary tract infections may not have easy observable signs but regular blood tests and ultrasound scans can help identify any such signs. Proper immunization is also important since pregnant women are more prone to illness. Immunization against Tetanus and HIV testing is extremely important in order to prevent mother-to-child transmission of any diseases. Antibodies injections are given so that both mother and the baby can easily fight infections. Pregnancy can be life threatening and fatal for the baby and the mother if necessary, care and supervision by trained professionals is not undertaken. Some of the important tests performed during antenatal care include:

- Blood tests to check for conditions such as anemia, diabetes, and infections
- Urine tests to check for urinary tract infections and pre-eclampsia
- Ultrasound scans to monitor the growth and development of the baby
- Screening tests for genetic conditions and birth defects

Some of the common factors that have been identified universally by a number of researchers are which play a great role in the late initiation of antenatal care are financial constraints, lack of maternal education, marital status, cultural beliefs and media negligence (Simkhada et al., 2008). There are a great number of women who are not financially strong enough to be able to afford this valuable care. Cost is directly proportional to quality, the quality of the care given is extremely significant in such a sensitive period, therefore this

would also mean an increase in cost. This relies heavily on the household income. Such financial constraints may restrict women accessing antenatal care. Lack of education is also another key factor. Many women are not educated about the benefits of antenatal care and why is it so vital for the mother's and baby's health. They are completely unaware and have no knowledge which is why they are reluctant in investing time and money in such activities. Although a small sum of women may have some knowledge about antenatal care but such knowledge is usually incomplete leading to misconceptions. A single mother may have certain obstacles in acquiring antenatal care. Such women are solely dependent on themselves to support their child. Financial restrictions may not allow these women to take up the best care for themselves and their baby. Therefore, marital status may also be one of the ground reasons for late initiation of care. Some cultures and societies do not allow such activities, people belonging to such cultures strongly condemn these acts. Similarly, a small portion of these cultural beliefs do not support the idea of antenatal care and fail accept its true importance. Likewise, women being a part of these cultures are quite unwilling to adopt this type of care.

Media negligence is another notable factor. Media plays a strong role in the lives of people, this is undoubtedly a very influential tool. If media portrayed the benefits and reasons why a woman should choose such care, how early initiation and late initiation can have different effects on the mother and child's health, what are the drawbacks of not acquiring antenatal care on time, this can help to erase many negative perceptions that some women may have regarding antenatal care. Certain negative stigmas and stereotypes attached to prenatal care should be erased so women are able to make best decision for themselves. These basic underlying questions are addressed by media, so that a true informative picture can be brought forward. Although the above listed factors have been identified on a universal

level, they do not certainly represent the factors pertaining to all Pakistani urban women. Overall, regular antenatal care is essential for a healthy pregnancy outcome and should not be overlooked or delayed. Expectant mothers are encouraged to attend all scheduled appointments to keep a close check on the fetus and to seek medical attention if they experience any symptoms or changes that may indicate a problem.

In the light of economic crisis Pakistan has been going through lately, where inflation is at its peak it is highly recommended at the cost of such health services should be minimal and reasonable which can allow every female citizen of Pakistan avail and benefit from them. Minimum 7 antenatal appointments are required even if the previous pregnancy has been healthy. A thorough health check including fetal assessments and physiological assessments can foresee any complications that can arise in the future.

Theoretical background

Antenatal care is the type of health care taken by pregnant women to ensure that the mother and the baby are progressing healthily. This may include a wide classification of healthcare services, such as midwives, obstetrician and pediatrician. Self-determination theory states that people are self-determined to grow when their intrinsic and psychological needs such as competence, connection and autonomy are met (Cherry, 2021). Self-determination rises when people can make their choices and decisions in life and having control over them. When people know that their actions will have an impact on the outcome, they are more motivated to take such actions. Antenatal care is not as prevalent in the country as it should be. Pregnancy is sensitive period for women and they are usually reluctant and scared to access such healthcare options. The pressure from family and spouse restricts the woman to make her own choices in life therefore, limiting control. This lack of autonomy will result in low intrinsic motivation. Lack of knowledge leads to unawareness resulting in confusion whether to take antenatal care or not. Poor decision-making skills indicates low

competence therefore, people do not possess skills needed to achieve their goals. When women fail to develop connections with their family, they do not experience a sense of belongingness and attachment with other people leading to low levels of motivation. Self-determination theory firmly stands on the basis of motivation. Motivation is a key factor for accomplishing goals. Pregnant women may not be motivated to take up antenatal care due to many social and environmental constrictions resulting in low self-determination and women who are able to make their decisions and exercise their control over them, taking actions to achieve their goals are high in self-determination.

Literature review

Warri & George (2020) aimed to understand the reasons for late initiation of antenatal care by pregnant women in Nkwen Baptist Health Centre, Bamenda, Cameroon. The researcher used purposive sampling to recruit participants and the participation in the study was completely voluntary. 18 pregnant women and three key informants were selected for data collection. Participants were debriefed regarding the purpose of the study and an informed consent form was signed. Women who initiated antenatal care after the first trimester were part of the study. The research states that data was collected through in-depth interviews and audio-recordings of the interviews. Thematic coding analysis was applied to conclude and generate the results. The results of the following research article indicated that pregnant women tend to place a low value of initiation of early antenatal care, because they tend to believe that pregnancy is a normal health condition rather than a serious one that required attention. They believed that they could go successfully through the first trimester without accessing any type of healthcare service. Women who did not take up antenatal for their previous pregnancies and still received positive outcomes were less motivated to initiate antenatal care early. Perceived barriers included the cost of the services and the distance to

healthcare service areas which required a transport system. The absence of health awareness campaigns, lack of support from parents or spouse and stigmas due to cultural beliefs were also found to be great influential factors. Late disclosures of pregnancies were also a leading factor, many women would hide the first few months of their pregnancies due to the fear of enemies or from the resentful reaction of their parents. Moreover, the study claimed to identify 4 major themes that corresponded with the reasons for late initiation of antenatal care: perceived susceptibility, perceived health system barriers, cues for action and self-efficacy. The research further stated that midwives (key informants) and pregnant women had the same perceptions regarding the late initiation of antenatal care.

Hatherall (2016) identified the factors which influence the timing of initiation of antenatal care in women living in diverse urban setting. This qualitative study incorporated 21 in-depth with six study was conducted in Newham East London, UK. The individual interviews involved, whereas the focus group discussions consisted of 26 health staff members and 32 women from four different community groups. The women for the study were recruited from various health centers and community organizations to ensure a varied sample of women relating to different socio-demographic characteristics. All interviews and focus group discussions conducted were audio-recorded and translated. The findings of the following study claimed that the initial care seeking by women was affected due to the perception that such packages are only feasible for continuing pregnancies. Women were less motivated to initiate such services without any apparent complications or disconcerting symptoms. The major set of barriers to accessing this type of care included difficulties in locating health centers or clinics and processing of referral systems. Language barriers was another great concern, a lot of women who were not as fluent in English were reluctant in active engagement of antenatal care. Such women were found surrender considering language as crucial obstacle. Some of the women had no full knowledge regarding the

importance of antenatal care whereas some with unintended pregnancies needed time to accept this change through the first trimester. Seeking referrals for antenatal booking appointments has always been a challenge for such women. A group of women agreed on the fact that they prefer natural birth rather than artificial induction of labor.

Nisar (2016) aimed to explore the facilitators and barriers in reference to the use of antenatal care services in rural and urban communities of two selected districts in Pakistan. Only 37% of the women residing in Pakistan reported to be attending four or more visits of antenatal care during their last pregnancy. The researchers conducted in-depth interviews with women who were currently pregnant, female health workers and doctors providing antenatal care services. 10 focus group discussions were also conducted with the mothers of children 5 years or younger. This data was collected from the rural community of Swabi and urban community Islamabad. Permission was obtained before recording the interviews. All interviews in the study were transcribed verbatim in Urdu, the language spoken by the participants. In order to analyze and report the findings of the study, a list of codes of all topics relevant to the research questions was made. Therefore, the text pertaining to each code was extracted and summarized in a separate document. The results from the focus group discussion indicated that women were not aware regarding the minimum number of antenatal care visits to be made. The facilitating factors found for visits to a specific health center were: the availability of qualified healthcare workers, trust in healthcare workers, recommended by a close friend or family member, a female healthcare worker, good quality services and equipment used and easy access for all. The common barriers found limiting the healthcare visits were: financial restrictions, unawareness of health problems during pregnancy, difficulty in accessing a healthcare center, restrictions for family in laws and no previous experience of antenatal care. This study highlights the major facilitating factors and barriers following antenatal care in rural and urban areas.

Haddrill, Jones, Georgina, Mitchell, & Anumba (2014) aimed to understand why some women are late to access antenatal care. Late access to Antenatal care has been strongly associated with maternal and fetal mortality/morbidity rates. A qualitative approach was used for the study. Women who came to the hospital after completing 19 weeks for their first appointment were part of the study, hence 27 women in total were recruited from hospital settings in South Yorkshire, United Kingdom. Late booking is defined as first Hospital antenatal attendance at 20 or more weeks gestation. A semi-structured interview was conducted and was later transcribed and entered onto the NVivo 8 software. The recruitment phase involved intensive work with the health practitioners, hospital midwives and doctors. A purposive sampling strategy was used to select the maximum variety sample of women. Participants were interviewed for the study until no new themes emerged. Ethical approval for the study was obtained from the North Sheffield Ethics Committee. Informed consent was also obtained with great care from each participant. The interviews conducted revealed a number of personal and organizational reasons why women were late in accessing antenatal care. These included not recognizing the pregnancy, recognizing but delaying or postponing antenatal care and practical difficulties. The three major themes extracted were 'not knowing', 'knowing' and being 'delayed'. A huge number of women said that they did not know that they were pregnant for weeks or months. Other women, however, did perceive the pregnancy symptoms but misinterpreted them due to lack of knowledge or experience. Many women further stated that since they had not planned to become pregnant so they did not have a pregnancy mindset and were not expecting the symptoms. Women also expressed feelings of guilt at not being able to access antenatal care on time. The timing of initial access to antenatal care is dependent on four significant factors, acceptance, non-acceptance, active rejection of pregnancy and need for antenatal care.

Bakari & Mahiti, (2022) assessed the factors for late initiation of Antenatal care in Kahama Municipal, Tanzania. Many women have died due to pregnancy related complications. Late initiation of Antenatal care in underdeveloped countries is said to be a significant factor in the increasing rate of maternity mortality rate (MMR). Both individual factors and healthy policy factors were examined through this study. Permission was obtained from the KAHAMA Municipal Executive Director and all the participants in the study. A qualitative exploratory approach was adopted. 14 In-depth interviews and 2 focus group discussions were conducted for data collection. A purposive sampling technique was used, 18 pregnant women with three to nine months living in Kahama Municipal aged between 18-49 years attending antenatal health care clinics in two health facilities and 4 health care workers working in a health clinic for not less than 12 months were recruited. Data collection assured confidentiality of participants. Data was further analyzed using thematic analysis approach, data was audio recorded in the local language Swahili and then later transcribed and translated into English Language. Themes were extracted from the data after it was transcribed and translated. Different factors were reported by pregnant women and the health care workers such as education level, negligence of pregnant women to book clinic visits, unplanned pregnancies, distance to the health facility, unfriendly services provided and unequal gender power within the family. Factors reported by both groups were found to be under health behavioral modal. Although it has been stated that the government of Tanzania had invested in providing free health care services to pregnant women, but still these factors appeared which needed to be considered in order to reduce maternity mortality rates.

Rationale

Antenatal care helps women to identify and examine any high-risk health complications so that they are able to receive a healthier outcome. This may consist of frequent visits to the doctor and maintaining a healthy diet and lifestyle. Antenatal care is not widely accepted and common in Pakistan. Women living here are not educated about the significance prenatal care holds in the lives of pregnant women. The reason this study was conducted is to evaluate what causes women to initiate antenatal care late and to spread the significance of accessing antenatal care on time. Different underlying causes and factors were investigated. Since this field of healthcare is not quite prevalent in Pakistan, this is why the following topic was chosen, so that the value and influence of antenatal care can be conveyed in a proper manner. In Pakistan the female literacy rate is quite low, women are not taught or prepared in reference to prenatal care. The idea to receive healthcare during pregnancy lacks behind in Pakistan. Therefore, creating awareness about antenatal care holds great value, since most Pakistani women do not receive prenatal care, guiding them on how and why to initiate such care on time is quite important. Hence, antenatal care has immense value in Pakistan if it is conveyed in the correct manner. The research gaps that this study will aim to fill are knowledge gap, the current phenomena has not been yet explored in detail and depth particularly in reference to Pakistan. Not many studies are available that have identified this phenomenon based on the lives and experiences of Pakistani women. Disparity lies between what is known and what should be known. This research investigated the reasons for late initiation of antenatal care in order to gain a deeper insight as to why Pakistani women begin with prenatal care behind time, factors that act as obstacles in the way of accessing prenatal care timely. This area of research has not yet been explored and little is known about it. Another knowledge gap that this research aim to fill is the theoretical gap, previous

researches fail to explain this phenomenon through various theoretical models. A gap in theory lies with prior research, however this study used a theoretical model to explain the research variable/phenomenon. The variable was related to the theory to gain a deeper perspective regarding the phenomena. Another important research gap that this study aimed to cover is to recruit women who are pregnant with their second child since most women with their second pregnancy tend to be relaxed in terms of care that should be taken during this period. Unlike prior researches, comprehensive details can be collected as to why do women initiate antenatal care late for their impending pregnancies. This will further help to explore if the care in their first pregnancy influenced the type of care, they took in their second pregnancy. The research implication of the current study was to evaluate which factors are prevalent in late initiation of antenatal care and measures to minimize them. The clinical implication of the following study was to assess, how the data collected from the research can be used in medical settings to educate and inform pregnant women regarding prenatal care and its consequences.

Objectives

- To investigate the underlying causes leading to late initiation of antenatal care.
- To explore the role of socio-cultural beliefs in the late initiation of antenatal care.
- To understand how does the availability of maternity health services influence the initiation of antenatal care.
- To investigate if lack of knowledge and fear of stigma is a key factor in the late initiation of antenatal care.

Research questions

- What factors highly contribute to the late initiation of prenatal care?
- What role do family/ spousal pressure play in the late initiation of antenatal care?
- How does the availability and accessibility impact the late initiation of antenatal care?

- How does the lack of knowledge and fear of stigma contribute to the late initiation of antenatal care?

Chapter 2

Method

Research paradigm

Philosophical assumption

The current study adopted an ontological assumption since the research investigated the reasons associated with the late initiation of antenatal care (ANC). The ontological assumption includes multiple realities with multiple forms that consist of actual words from different individuals presenting different perspectives. This helps to identify how individual participants view their experiences differently (Creswell, 2013). Researchers in a qualitative study based on an ontological assumption aim to assess and evaluate multiple realities surrounding the topic (Creswell, 2013). Similarly, the following research aims to identify and study different experiences and perspectives that revolve around the late initiation of antenatal care. How differently do women perceive this concept of accessing care and how it further affects their initiation.

Interpretative framework

Since this research relies heavily on the participants view of the situation. Social constructivism is employed where subjective meanings generating from different experiences are directed towards a certain concept. These meanings can be formed through historical and cultural norms that operate in individual's lives (Creswell, 2013).

Method of inquiry

Research design

The research design of the following study was a phenomenological study. IPA describes the common meaning for several individuals of their lived experiences of a concept or a phenomenon. The phenomenologists focus on describing what they have in common as they experience a phenomenon (Creswell, 2013). This description consists of 'what' they experienced and 'how' they experienced it (Moustakas, 1994). The following study

incorporates the transcendental phenomenology which consists of identifying a phenomenon to study and bracketing out one's experiences and collecting data from several persons who have experienced the phenomenon (Moustakas, 1994). Following this the researcher develops a textural description of what participants experienced and a structural description of how they experienced it. This study also aims to collect different experiences of separate individuals surrounding a single phenomenon, without letting the researcher's own experiences influencing the results.

Sampling strategy

According to Moustakas (1994) and van Manen (1990), a heterogenous group of individuals should be identified that may vary in size from 3-4 individuals to 10 to 15. Polkinghorne (1989) recommends that researchers interview from 5 to 25 individuals. A purposive sampling strategy was employed, where participants was chosen according to the requirements of the study, on purpose. The participants were recruited from two different hospitals. Females aged between 25-35 years were selected. Women who are currently pregnant participated in the study. Informed consent was obtained from all participants from prior to the research. The data was collected through in-depth interviews. The participants were interviewed in hospital settings.

Inclusion criteria

- Women between the ages of 22-35 years were selected for the study.
- Women who are currently pregnant and have entered their second or third trimester were included in the study.
- Women living in urban settings were a part of the study.
- Women with 2nd pregnancy were included.

The inclusion criteria in this study aims to find women who have started their antenatal care can be selected. Homogeneity of the participants was maintained, by selecting the participants from the same cultural characteristics (Socio-economic status). Women who have entered their second pregnancy were recruited so that the difference between the two pregnancies can be assessed in order to see how it affects the initiation of antenatal care.

Exclusion criteria

- Women suffering from any medical or psychological illness.
- Women who are divorced or separated.
- Women pregnant with their 1st child were excluded from the study.

Table 2.1. Showing characteristics of participants

Demographic information sheet

Sr no	Age	Marital status	Gravida	Undergoing ANC	Initiation of ANC
1	25	Married	2	Yes	8 th month
2	23	Married	2	Yes	8 th month
3	26	Married	2	Yes	4 th month
4	28	Married	2	Yes	4 th month
5	24	Married	2	Yes	7 th month
6	29	Married	2	Yes	7 th month

Measures

The demographic variables included in the study in reference to all respective participants were: Age, Marital status, Gravida, undergoing ANC and initiation of ANC. Refer to the table above 2.1 above. A semi structured interview was conducted, the questions partly emerged from the responses of the participants. Opening and closing questions were included in the interview guide. The aim of the opening question was to create a rapport so

that the interviewee becomes comfortable when sharing personal information. Closing questions were designed in a way to slowly reduce the rapport and create a distance before leaving while thanking the interviewee.

Semi structured interview

A semi-structured interview is a data collection method that relies on asking questions within a predetermined thematic framework. However, the questions are not set in order or in phrasing. In research, semi-structured interviews are often qualitative in nature. They are generally used as an exploratory tool in marketing, social science, survey methodology, and other research fields (George, 2022). Such interviews help to collect rich information that covers a range of topics. They provide reliable qualitative data. A semi structured interview consists of open-ended question, key questions and probing questions. Open ended questions allow the participant/interviewee to answer freely. Such questions are phrased in a way that require the participant to elaborate and answer without any limits. They can be very helpful in gathering large amounts of data. Open ended questions also form the base for a healthy rapport between the interviewer and the interviewee, unlike close ended questions which allow a limited response and can be intimidating. Key questions in a semi structured interview helps to elicit any important pieces of information that may have been missed. They direct the attention of the researcher towards significant information that is necessary to know. Key questions can help to gain a deeper meaningful insight into the topic and explore the important aspects of the topic. For example, ‘what do you think are the causes of the problem?’. Probing questions are designed to encourage deep thought about a specific topic. Probing questions are intended to promote critical thinking as well as to get the person asked to explore their thoughts and feelings about a particular subject. Likewise, probing questions provide an excellent opportunity to reflect deeper onto the key information. They begin with words like, what, how or why to elicit a more profound answer. Probes are helpful devices to

help ensure that your participant addresses a particular aspect of a question on a sub-topic. For example, ‘what sort of impact do think late initiation of ANC will have on the mother and baby’s health?’.

The duration of the interview was 20 to 40 minutes. The duration varied from participant to participant. The interview was conducted individually in a hospital setting. Keeping the privacy of participants at the forefront, some participants are not comfortable about talking about their personal issues in the presence of other that could be uncomfortable. The interviews were conducted in Urdu language, the sample of the study was comfortable in answering in Urdu. All participants were informed regarding the details and the reason of the interview and consent was obtained.

Interview guide

Research questions

- What factors highly contribute to the late initiation of prenatal care?
- What role do family/spousal pressure play in the late initiation of antenatal care?
- How does the availability and accessibility impact the late initiation of antenatal care?
- How does the lack of knowledge and fear of stigma contribute to the late initiation of antenatal care?

Interview questions

- Neutral initial question: How do you define antenatal care?
- Do you perform exercise on a regular basis in order to reduce problems such as backaches or swelling?
- Did your doctor ask you to keep a calorie count during your pregnancy?

- Are there any systematic illnesses that suffered during your previous or current pregnancy?
- Were you interested in early gender reveal of your baby or you preferred waiting till birth?
- Did you begin with antenatal late? If yes, what were the reasons that led to late initiation of antenatal care in your case?
- Out of the reasons you just mentioned which reason/cause do you feel is the most important?
- Do you feel lack of awareness also contributes to the late initiation of antenatal care?
- Was there any significant pressure from your family or spouse that led you to initiate antenatal care late?
- Keeping in view the economic crisis of Pakistan, do you think Pakistani women are reluctant to access such services due to financial problems/constraints?
- Were there any cultural/traditional practices that you were advised to take during this period? Which ones do you feel are quite significant?
- Are maternity health services easily available in your area?
- Is the route to such service clinics safely accessible, keeping in mind the roads and distance?
- Do you feel the fear of pregnancy disclosure played a key factor that led you to access antenatal care late?
- How important do you think factors such as negative attitudes and fear of stigma are in today's time in the lives of Pakistani women accessing antenatal care? Were any of these factors also associated with your late initiation of prenatal care?
- Were there any important steps that you adopted during your first pregnancy but laid off during your second pregnancy?

- Do you feel any major changes that you would like to highlight between the two experiences?
- What impact do you think unplanned pregnancies pose on the late initiation of ANC, and do you think this could also be a reason to start antenatal care late?
- Sometimes the waiting time in hospitals is too much and, in this condition, it is difficult to sit for long hours, has this ever happened with you and what did you do in that case?
- Does your husband always accompany you to the hospital? If some day an important work shows up and he can't make it what would you do?
- Late initiation of antenatal care can be linked to many pregnancy related health difficulties such as low birthweight or premature birth which can also be the result of infections during the perinatal period and postnatal period, how significant is antenatal care in your opinion?
- Do you feel it's important to provide awareness regarding the consequences of late initiation of prenatal care? Which form of medium you think would be suitable for providing such awareness?
- Is there anything else you would like to add regarding your pregnancy?

Procedure

Pilot study

A pilot study is a small-scale feasibility study designed to test various aspects of the methods planned for a larger, more rigorous or confirmatory investigation (Arian, Campbell, & Lancaster, 2010). The pilot study was conducted guided a by qualitative research design. 1-2 participants were selected according to the requirements of the study. The participants were recruited from the Gynae Special unit in Services Hospital. The aim of the pilot study was to evaluate any changes to be made in reference to the main study. A semi structured in-

depth interview was conducted with participants and the data collected was analyzed using a thematic analysis approach. Informed consent was obtained prior to the research. The participants were explained the purpose of the study. Permission for using any audio recording device was also obtained prior to the research. The participation was voluntary. The pilot study will provide preliminary information so that an insight can be gained into the potential results of the proposed research. After conducting the pilot study, the weaknesses were corrected for the main study. A few questions from the interview guide were omitted which posed a confusion in participant's understanding and the interview guide was made more appealing and understandable so that participants would not be reluctant in answering any question. All participants were selected from the same socio-economic status to maintain homogeneity.

Main study

The main study was carried out using a phenomenological approach. Semi structured in-depth interviews (IDIs) were conducted from six participants aged between 23-35 years. The participants were approached using purposive sampling. Participants were matched according to the inclusion criteria and then recruited for the research. 4 women were recruited from the Services Hospital Antenatal ward and 2 women were selected from the OPD block in Ghurki Hospital. All participants selected for the study were currently going through their second pregnancy. 2 interviews were not included in the research since they failed to provide rich authentic data. An audio recording device was used with permission in order to transcribe the interview. Participants were informed that the sole purpose of the audio recording is to transcribe the interview and their confidentiality was maintained. The key questions and probing questions were included in the semi structured interview to grasp a clear picture of the experience relating to the phenomenon. The individual interview duration did vary since interviews were conducted in a hospital setting, participants failed to provide a

set time period. The domains or themes extracted from the transcribed interview were analyzed according to the thematic analysis. Before conducting the interviews, participants were asked if they are available and ready to participate in the study and only then they were approached. Participants were debriefed about the purpose of the study and their participation was voluntary. Permission from the institutional review board was also obtained.

Steps of analysis

The first step in conducting a thematic analysis is to become familiar with the data by re-reading the transcripts and jotting down and important points. Carefully reading the entire data script and making rough notes at this point can be helpful. Next, initial codes were generated by reducing the data into small pieces of information. An inductive thematic analysis was applied to code every text that contains relevant information regarding the research questions. An open coding method was used. In the next step the coded data helped to extract and identify themes in terms of the research questions. Then, the preliminary themes were reviewed and modified to ensure if they make sense and are relevant. Codes were fitted together to generate themes. The themes will studied deeply to review if they make sense and has all the data been put together. The themes were further refined by identifying and understanding essence of each respective theme. The way themes interact and relate with the objectives of the study was evaluated. The last step included the write-up (Maguire & Delahunt, 2017).

Data verification method**Peer review**

Prior to conducting the research, the study was approved by an expert in order to assess and evaluate the validity and quality of the proposed research. An expert opinion was taken.

Ethical considerations

Informed consent was acquired from the participants. All participants were debriefed regarding the purpose of the study. They were ensured that their confidentiality will be maintained and the information collected will only be used for research purposes. The permission to audio record the interview was also taken prior to research. A healthy rapport was established in the beginning of the interview so that the participants feel comfortable and at ease. The participants were not harmed or forced in any way and their participation was voluntary. The interview will immediately stop when the participants will feel uncomfortable or triggered by an event. All participants were welcomed to see the results.

Chapter 3

Results

Antenatal care is a significant type of healthcare service that is provided to women during pregnancy. This includes a set of healthcare services that women have access to during this period. Antenatal play a key role in assessing the health of the mother as well as the baby and preventing from any future health complications that may arise.

Initial Themes

Significant Statements

Distance to the hospital	<p>“mein late iss liye ayi thi kyun ke mera gaaoun bohat door hai yahan se 15 ghante ka safar hai, aur mujhe abhi Lahore mein hoye bhi kam time hi hoya hai sirf dou mahine hoye hain”</p> <p>“jee jee bilkul door tou bohat hai iss liye time bhi lag gaya”</p> <p>“mein chunggi-amar sadhu rehti hoon, taqreean 1 ghante ka distance hai.” “Bus door se ana mushkil ho jata hai iss kiye thori problem hoti hai”</p> <p>“kaafi door parhta hai, taqreeban samjhein ke adha pona ghanta lag hi jata hai.”</p> <p>“jee door tou bohat parhta hai, pichle dinoun mein check-up ke liye bari mushkiloun se ayi”</p> <p>“jee jee door tou parhta hai magar kya karein ana bhi tou majbori hai”</p> <p>“itni door se ana hota hai tou zaheri baat hai mushkil bari hoti hai”</p>
Unable to leave children at home alone	<p>“bete ko akele ghar par chor kar ana bhi mushkil hota hai aur us ski tabiyat bhi bohat kharab hai jiski mujhe kaafi tension hain mein bohat parehshaan hoon iss liye bhi ana mushkil ho raha tha.”</p> <p>“uper se beti ko chor kar bhi nahi aya jata har waqt.”</p> <p>“2-3 din se apne paas hi rakha hoya hai mein ne inn ko bola bhi hai ke meri beti</p>

	abhi choti hai, woh mere ya apne papa ke beghair nahi rehti”
Unsatisfactory maternity services nearby	<p>Waise barki gaaoun jahan mera susral rehta hai wahan bhi eik chota sa hospital hai magar who mujhe itna pasand nahi, saaf nahi hota aur doctors waighra bhi koi khaas nahi.</p> <p>“mein ne apne pehle baby ke time ganga ram se operate karwaya tha, mujhe wahan ka mahol aur doctors bilkul pasand nahi aye. Gaaoun mein bhi mein ne jahan se ilaaj karaya who bhi mujhe pasand nahi aya iss liye phir yahi ana para.”</p> <p>“eik tou jo hai mujhe pasand nahi, wahan ke doctor baare badtameez hain, meri behn jaati thi uss ne baatya tha, aur dosra jo hai thora aage jaa kar, woh private hai tou paise bohat lete hain.”</p> <p>“mere husband kehte hain kea mmi ke ghar ke paas koi indus hospital hai wahan chalet hain magar mujhe ye hai kea bb yahan ka card bhi banwa liya hai tasali bhi hai,”</p> <p>“jab mein susral mein rehti thi tou ganga ram kareeb parhta tha iss liye pehle bache ke time wahan gayi, mujhe wahan ka ilaaj pasand nahi aya tha tou mein ne pehle hi socha tha ke agli dafa kisi aur hospital mein jaaoun gi”</p> <p>“Mere tou agar ghar ke paas koi acha hospital hota tou shaid itni dier na hoti.”</p> <p>“hospital tou hai magar woh kehte hai ke c-section hoga, mujhe uss se bohat takleef hai, mujhe c-section nahi pasand, even mere husband ko bhi nahi pasand woh bhi kehte hain ke normal hi ho. Woh hospital wale koshish bhi nahi karte ke normal ho bare araam se keh dete hain ke c-section hi hoga.”</p>
Lack of support from family/spouse	<p>“Aise mana tou nahi karte bas kehte hain ke teesre chuothe mahine tak jao. Mere husband ki duty bohat sakht hoti hai iss kiye who kabhi mana kar dete hain.”</p> <p>“bas yahi kehte hain ke eik dafa confirm ho jaye phir hi jana itni jaldi jaane ki kya zaroorat”</p> <p>“family mein mere saas sasur nahi hai unki death hogayi hai, bare tou woh hi hote hain, bus abb jeth aur jethani hain, bus theek hain unko kabhi kabaar masla hota hai magar kya karein ghar tou nahi beth sakte na.”</p>

	<p>“Mere abu kehte thay ke jab meri beti hoyi thi, tumhe doctors ne koi aisi dawai de hai jis ki waja se ye hoya hai (laughs).”</p> <p>“bas ye tha ke mein apni saas ya husband ko Zaida baatati nahi thi ke woh ye na samjhein ke isse har din koi na koi masla rehta hai.”</p> <p>“phir mere husband yahi kehte hain ke jo petrol kharch kar ke mein ne wahan le kar jana hai uss se behter hai mein kaam par chala jaaoun”</p> <p>“nahi bas itni nahi thori thori normal si, kya karein us ski khud ke bhi itni amad nahi hai na, aur mein bojh bhi nahi daalna chahti.”</p> <p>“Aisa tha ke mere pehle baby ke time unhoun ne mujhe bari mushkil se doctor ke paas ane diya, kyun kyun pehle bacha hou tou dar Zaida lagta hai. Unko tha ke kisi ko baatana ke bajaye banda apni khudi care karle woh sahi hai.”</p> <p>“Mein ne ghar par kisi ko nahi baataya tha, meri saas ko nahi maalom tha, pehli beti ki martaba bhi uss ne bara masla kiya tha, iss liye mein ne nahi baataya”</p> <p>“unko hota hai ke itni bari baat nahi, uth kar kaam bhi karna chahiye har waqt araam zaroori nahi.”</p>
<p>Unable to take care of themselves when overburdened with work</p>	<p>“Mujhe Zaida apne husband aur apni beti ka hota hai ke unka Zaida khiyal rakhna hai who log theek hoon ge tou mera khiyal rakh lein ge, apne maamle mein mein shuru se hi careless hoon.” “Pehle rest bhi ziada karti thi, abb kyun ke ghar be choti beti hoti hai uss ko bhi dekhna hota hai tou araam karne ka bhi time nahi milta.” “magar abb second baby ke time mein bohat careless ho gayi hoon khaas tor par medicines ke maamle mein.”</p> <p>“dekhein ghar ki saari zimadari mere par hoti hai, kaam karna bhi zaroori hota hai aise mein rest kaise karoun. Beti abhi kaafi chioti hai uss ko bhi dekhna hota hai.”</p> <p>“Magar mein ne tou saare ghar ke kaam karne hoote hain”</p> <p>“time bhi itna nahi milta mera beta bhi hai chota uss ko bhi dekhna hota hai, ghar ke kaam bhi hote hai. Mein saare kaam apne khud larti hoon warna meri saas bohat bolti hain (laughs).”</p>

	<p>“Ab tou bete ke peeche peeche bhi bhaagna hota hai, ghar ke sou kaam hote hain”</p> <p>“ghar ke kaam bhi itne hote hain ke bhool jati hoon aksar.”</p>
Importance of timely antenatal care	<p>“jee jee bilkul aisi hi hai, umm mere khiyal se doctor ko baatana chahiye ye itna zaroori kyun hai. Aur jahan jahan se ilaaj diya jata hai who bhi acha hona chahiye”</p> <p>“Baki yahi hai ke check-up zaroor karwana chaahiye kisi ki baatoun mein na ayien, log aksar mana karte hain magar agar husband supportive hoon phir masla nahi hota itna.”</p> <p>“dekhein thora bohat tou insaan ko bhi khiyal karna chahiye na, akhir bache ki zindagi ka mamla hota hai, doctor ke paas ana zaroori hai bas yeh hai ke kabhi kabaar deir svear ho jati hai.”</p>
Checkup delayed due to medical card	<p>“Services mein iss liye bhi late hogayi yahan pe eik card banta hain 3-4 mahine jaa kar, phir uss card ke baad hi doctor app ka ilaaj karta hai.”</p> <p>“uper se mein ne suna hai ke ye hospital wale bhi kehte hain ke teesre mahine tak ayein, koi card banta hai uss ke baad.”</p> <p>“ye kehte hain ke medical card banwayein, card ke through hi sab hota hai yahan”</p> <p>“uper se yahan ilaaj karane ke liye card banwana parhta hai. Uss ke liye ye kuch test likh kar dete hai uss ke baad card banta hai.”</p>
Unplanned pregnancy	<p>“darasal, hamara bacha ka koi irada nahi tha ji ski waja se mein ne check hi kaafi late kiya, taqreeban dedh mahine baad jaa kar check kiya tha aur phir Zahiri baat hai ane mein mein bhi kuch time lagya.”</p> <p>“mujhe nahi pata tha ke mein pregnant hoon, mujhe laga blood ki waja menses nahi arahe, magar time ke saath jab tabiyat Zaida kharab hoyi aur kuch khane ko bhi nhi dil karta tha phir mein check-up ke liye gayi tou pata laga ke mein pregnant hoon, mujhe laga ke Zaida se Zaida teesra mahina hoga, magar doctor ne baataya ke app ko choutha mahina khatam ho kar paanchva mahina lag chuka hai.”</p> <p>“pehle dou mahine tou mujhe pata hi nahi laga, teesre mahine jab mein ne stick par check kiya tou pata laga”</p>

	<p>“haan jee, abhi meri pehli beti ko dedh saal hi hoye tha, aur operation ki waja se mein ne socha tha 3 saal baad sochoun gi”</p> <p>“sach bolon tou shuru shuru mein mujhe inta ilm hi nahi tha ke mein pregnant hoon, mujhe pata hi shaid dosre mahina laga”</p> <p>“haan jee, aisa tha ke abhi forum irada nahi tha, mujhe aur mere husband ko yahi tha ke haroon mera chota beta 2 saal ka hojaye phir koshish karein ge”</p>
<p>Evil eye/negative attitudes towards pregnancy</p>	<p>“Jee jee, darasal mere jo susar hai unko problem hoti hai who kehte hain ke jaldi baatne ki zaroorat nahi hoti nazar lag jati hai.”</p> <p>“mere susraal mein aisa nahi hai magar mere mehke mein hai, mere ami abu kehte thay ke abhi na baatana kisi ko nazar lag jaye gi. Mere gale ki waja se sab ko Zaida pareshaani hoti thi.”</p> <p>“meri saas bohat veham karti hai, who kehti thi ke kya zaroorat hai, logon ki nazaarein lag jati hai. Logon mein jaane se banda nazroun mein ajata hai”</p> <p>“inko masla tha ke beti kyun hoyi beta chahiye tha, second time yahi dart ha ke ainvayi kuch parh kar na phoonk de mere bache par iss liye nahi baataya”</p> <p>“mere saas susar dono ko nazar la bohat dar hota hai, jab bhi mein ghar se nikalti hoon doctor ke liye aur kahan jana hota hai mein ne tou kehti hai dhak kar niklo nazar na lag jaye. Mere susar kehte hain itna doctor ko dekhane se bhi nazar lag jati hai (laughs).”</p>
<p>Raised expenses occurring from healthcare services</p>	<p>“private mein kharcha bohat ho raha tha, taqreeban lakh se uper chala jata tha aur sachi baat hai itna hum nahi de sakte”</p> <p>“Dekhien agar banda shuru se ane lag jaye tou paise bhi yeh log itne maang lete hain, ohir woh bhi tou dekhna hota hai na. itne mehngi test waighira likh kar dete hain, uss mein alag paise lagte hai.”</p> <p>“Sab kuch itna mehnga hogaya hai” “jee jee aisa hi hai, paise tou bohat lag jaate hain, phir mere husband yahi kehte hain ke jo petrol kharch kar ke mein ne wahan le kar jana hai uss se behtar hai mein kaam par chala jaaoun.”</p> <p>“private bohat mehnga par raha tha, eik eik test aur medicine 7000 ka likh kar dete thay ya uss se bhi uper, fees bhi bohat lete thay,</p>

	<p>itne paise tou nahi hain hamare paas magar idhar bhi karcha tou hai pata nahi bare operate par kya kharcha ata hai”</p> <p>“petrol waise hi aasmaan pe pohnc hoya hai” “jaise mein ne baataya mein ne private iss liye chora tha ke mehnga bohat tha, dawaian aur bhi mehngi aati thi”</p> <p>“jee halat tou bohat kharab hogaye hain, pichle baby ke time mein ne apni ammi ke ghar ke paas se private clinic se check karwaya tha”</p> <p>“App ko pata hoga petro bhi itna mehnga hogaya hai tou harwaqt ana asaan bhi nahi hota.”</p>
Experience from first pregnancy	<p>“shuru shuru mein yahi hota hai ke ghar par hi ilaaj kar lou abhi baby bhi chota hai, four ya five month se doctor ke paas chali jana. Mein ne apni beti ke time bhi aisa hi kiya tha aur Alhumdulilah koi masla nahi hoya tha”</p> <p>“uper se mera ye second baby hai tou mujhe andaza bhi bhi tha ke aisi cheezein hoti rehti hain. Iss liye Zaida sar par nahi liya.”</p> <p>“pehli bache ke baad mujhe andaza hogaya hai kaafi cheezoun ka”</p> <p>“shuru shuru mein khud bhi andaza hota hai pichli pregnancy ke baad. Pehle baby ke time mein ne suna hai shuru shuru mein itna nazar bhi nahi ata”</p>
Waiting time in hospitals	<p>“Zaida nahi eik adhi baar hi hoya hai aisa, dekhein iss haalat mein Zaida betha bhi nahi jata aur jab pain start hoti hain tou condition kaafi kharab ho jati hai”</p> <p>“haan jee eik baar hoya hai, aisa tha ke mein kaafi deir se bethi thi, inko mein ne bola bhi hai ke mein bari deir se ayi hoon, bas sugar check karwani hai magar ye log kehte rahe rah eke doctor sahiba abhi masroof hain itnezar karein, phir mein uth kar chali gayi.”</p>
Route to the hospital	<p>“nahi raasta bas theek hi hota hai, bohat saaf nahi, magar ana tou parhta hai (smirks).”</p> <p>“raasta itna saaf tou nahi hai, jaise yahan hospital ke kareeb wala kuch behter hai magar mere ghar ke paas se bohat kharab hai, wahan kaafi jump lagti hai, aur jab jump lagti hai tou pain start ho jati hai.”</p>

<p>Family insisting on taking home remedies during pregnancy pains</p>	<p>“woh yahi kehte hain ke koi nahi choti moti medicine kha lou dard ke liye abhi khair hai.” “jaise mere pehle bete ke time mujhe bohat buri vomiting hoyi thi, paani bhi andar nahi tik raha tha”</p>
<p>Lack of knowledge</p>	<p>“jee bilkul care tou karni chahiye, magar insaan kabhi kabhar haalat ke haathoun majboor bhi hota hai.” “mujhe tou yahan kisi ne nahi bola ke app late ayi hain iss liye mujhe itna nahi pata tha. tabiyat se na andaza ho jata hai hai mujhe, mein test waighra nahi karwati forun, test bhi teesre mahine mein jaa kar karwati hoon confirm karne ke liye.” “mere ghar mein meri nannd aida careless abhi unka first baby hai aur unke husband ko office se chutti nahi mil rahi thi tou who doctor ke paas nahi aa sak rahi thi” “Agar tabiyat ziada deir tak kharab rahe phir test kar leti hoon confirm karne ke liye. “ “Shuru ke mahine mein tou kuch nazar bhi nahi ata itna iss liye ane ka kya faida.” “woh yahi kehte hain ke koi nahi choti moti medicine kha lou dard ke liye abhi khair hai” “apni marzi se late nahi ati, ghar mein sou masle aur hote hain, phir yeh sab itna zaroori mehsoor nahi hota,” “meri nand yahan kaam karti hain, phir jis week mein woh bolti thi ke ajao mein chali jaati thi”</p>
<p>Gender pressure</p>	<p>“magar ye tha ke gharwaloun ko tha ke iss ka beta hi hou tou uss se ghabrati thi, jaise abhi hamari family mein kisi ke dou bete hoye tou unko tha ke iss ka pehle bhi beta hai, abb bhi beta hi hona chahiye.” “pehli inhoun ne jab beti ke time pe masla kiya tha na tab se mujhe nazar ka dar laga tha, inko masla tha ke beti kyun hoyi beta chahiye tha” “Mere saas sasur iss liye bhi kehte hai ke betoun ko nazar lag jati hai iss liye nahi baatana tou mein kehti hoon ke kyun betioun ko nahi nazar lag sakti?”</p>

Master themes

Difficult accessibility to hospital	<ul style="list-style-type: none"> • Distance to the hospital, • unsatisfactory maternity services nearby, • route to the hospital.
Overburdened with household chores	<ul style="list-style-type: none"> • Unable to leave children at home alone • unable to take care of themselves due to house work.
Discouragement from family	<ul style="list-style-type: none"> • Lack of support from family/spouse, • evil eye/negative attitudes towards pregnancy • family insisting to take up home remedies during pregnancy pains, • gender pressure
Unsatisfactory hospital services	<ul style="list-style-type: none"> • Checkup delayed due to a medical card, • delayed waiting time in hospitals
Little information regarding pregnancy	<ul style="list-style-type: none"> • Lack of knowledge • unplanned pregnancies • importance of antenatal care.
Past experiences from maternity services	<ul style="list-style-type: none"> • Raised expenses occurring from maternity services • experience from first pregnancy.

Interpretation:

Initial themes were generated from the following study, along with 6 master themes.

Distance to the hospital

Distance to the hospital is the first theme that was extracted. Travelling long distances comes with huge transportation costs which can be a demotivating factor for women especially belonging to low socio-economic backgrounds. Family and spousal support is also undermined at times when they come to know that one has to travel long distances in order to access such healthcare services. Participant 1 states that “mein late iss liye ayi thi kyun ke

mera gaaoun bohat door hai yahan se 15 ghante ka safar hai, aur mujhe abhi Lahore mein hoye bhi kam time hi hoya hai sirf dou mahine hoye hain” and “jee jee bilkul door tou bohat hai iss liye time bhi lag gaya.” Participant 2 states that “mein chunggi-amar sadhu rehti hoon, taqreean 1 ghante ka distance hai” and “Bus door se ana mushkil ho jata hai iss kiye thori problem hoti hai.” Similarly participant 5 states that “jee door tou bohat parhta hai, pichle dinoun mein check-up ke liye bari mushkiloun se ayi.” Participant 6 in the end adds “jee jee door tou parhta hai magar kya karein ana bhi tou majbori hai” and “itni door se ana hota hai tou zaheri baat hai mushkil bari hoti hai.” All participants express that travelling long distances for accessing antenatal care is not always easy and feasible for them. The transport means that they use is also not suitable for such long distances.

Unsatisfied maternity services nearby

Unsatisfactory maternity services nearby, is the second theme generated which states that women do not have satisfactory health services available in their area. The healthcare services available are either too expensive incurring huge medical costs or the medical staff present is not trained properly to provide satisfied and decent services. Participant 1 states that “mein ne apne pehle baby ke time ganga ram se operate karwaya tha, mujhe wahan ka mahol aur doctors bilkul pasand nahi aye. Gaaoun mein bhi mein ne jahan se ilaaj karaya who bhi mujhe pasand nahi aya iss liye phir yahi ana para”. Participant 2 states that Waise barki gaaoun jahan mera susral rehta hai wahan bhi eik chota sa hospital hai magar who mujhe itna pasand nahi, saaf nahi hota aur doctors waighra bhi koi khaas nahi. Likewise, Participant 4 states that “eik tou jo hai mujhe pasand nahi, wahan ke doctor baare badtameez hain, meri behn jaati thi uss ne baatya tha, aur dosra jo hai thora aage jaa kar, woh private hai tou paise bohat lete hain.” Participant 5 also states that “jab mein susral mein rehti thi tou ganga ram kareeb parhta tha iss liye pehle bache ke time wahin gayi, mujhe wahan ka ilaaj

pasand nahi aya tha tou mein ne pehle hi socha tha ke agli dafa kisi aur hospital mein jaaoun gi.” Participant 6 lastly adds “hospital tou hai magar woh kehte hai ke c-section hoga, mujhe uss se bohat takleef hai, mujhe c-section nahi pasand, even mere husband ko bhi nahi pasand woh bhi kehte hain ke normal hi ho. Woh hospital wale koshish bhi nahi karte ke normal ho bare araam se keh dete hain ke c-section hi hoga.” All participants expressed their concerns regarding the unsatisfactory healthcare services provided in their area which discourages them from scheduling an appointment to see a doctor. Therefore, accessing antenatal care through satisfactory means is not available on a large scale to every women which limits their ANC attendance.

Route to healthcare services

Route to healthcare services is the third theme generated. A few participants also expressed that the route to the hospital and the infrastructure were also influential factors affecting the accessibility of antenatal care. Uneven and bumpy roads to the hospital demotivated them from visiting a doctor. When the route is not clear and smooth this automatically limits the ease of travelling which discourages women to see the doctor timely. Participant 2 states that “ferozpur road se aate hain, beech mein kahin kahin saaf hota hai aur kahin kahin kharab.

Participant 3 states that “nahi raasta bas theek hi hota hai, bohat saaf nahi, magar ana tou parhta hai (smirks).” Likewise, Participant 4 states that “raasta itna saaf tou nahi hai, jaise yahan hospital ke kareeb wala kuch behter hai magar mere ghar ke paas se bohat kharab hai, wahan kaafi jump lagti hai, aur jab jump lagti hai tou pain start ho jati hai.” Roads to the healthcare services failed to offer smooth travelling which may decrease antenatal care attendance.

Unable to leave children at home

Unable to leave children at home is the fourth theme extracted using thematic analysis. Leaving the children at home alone without adult supervision is not safe and bringing them along to the hospital is again not safe and can be unhealthy too since various types of illnesses and germs are present inside a hospital which is not hazardous for children. Participant 1 claims that “bete ko akele ghar par chor kar ana bhi mushkil hota hai aur uski tabiyat bhi bohat kharab hai jiski mujhe kaafi tension hain mein bohat parehshaan hoon iss liye bhi ana mushkil ho raha tha.” Participant 5 states that “2-3 din se apne paas hi rakha hoya hai mein ne inn ko bola bhi hai ke meri beti abhi choti hai, woh mere ya apne papa ke beghair nahi rehti”

Unable to take care of themselves due to household chores

This is the fifth theme generated. Since all participants were currently going through their second pregnancy, it became difficult to manage all the housework and look after their young one. During this process they neglected their health and did not pay much attention to it. All participants belonged to low socio-economic backgrounds and therefore could not afford maids or house help. Participant 2 states that “Mujhe Zaida apne husband aur apni beti ka hota hai ke unka Zaida khiyal rakhna hai who log theek hoon ge tou mera khiyal rakh lein ge, apne maamle mein mein shuru se hi careless hoon”, “Pehle rest bhi ziada karti thi, abh kyun ke ghar be choti beti hoti hai uss ko bhi dekhna hota hai tou araam karne ka bhi time nahi milta”, “magar abh second baby ke time mein bohat careless ho gayi hoon khaas tor par medicines ke maamle mein” and “eik tou choti beti ke saath busy bhi hoti hoon tou time kam milta hai aur bhook bhi kam lagti hai.” Participant 3 states that “dekhein ghar ki saari zimadari mere par hoti hai, kaam karna bhi zaroori hota hai aise mein rest kaise karoun. Beti

abhi kaafi chioti hai uss ko bhi dekhna hota hai.” Participant 4 states “Magar mein ne tou saare ghar ke kaam karne hoote hain.” Participant 6 adds “Ab tou bete ke peeche peeche bhi bhaagna hota hai, ghar ke sou kaam hote hain”, “ghar ke kaam bhi itne hote hain ke bhoool jati hoon aksar” and “time bhi itna nahi milta mera beta bhi hai chota uss ko bhi dekhna hota hai, ghar ke kaam bhi hote hai. Mein saare kaam apne khud larti hoon warna meri saas bohat bolti hain (laughs).” All participants express that it is difficult for them to manage their health along with household chores. They feel that since we have the burden of the entire house work on our shoulders, we cannot ignore it no matter what.

Lack of support from family/spouse

Lack of support from family /spouse is the sixth theme generated. Participants express that since our families and husbands are not very supportive of the idea of stepping outside to access such type of healthcare services. They insist that this type of care can also be achieved at home. This leads to discouragement and demotivation for the women who wish to visit a doctor during this sensitive period. Women are not allowed to travel on their own which is why they are dependent on their husbands. This factor plays an influential role in the late initiation of antenatal care. Participant 1 states that “Aise mana tou nahi karte bas kehte hain ke teesre chuothe mahine tak jao. Mere husband ki duty bohat sakht hoti hai iss kiye who kabhi mana kar dete hain.” Participant 2 states that “bas yahi kehte hain ke eik dafa confirm ho jaye phir hi jana itni jaldi jaane ki kya zaroorat.” Participant 3 adds “family mein mere saas sasur nahi hai unki death hogayi hai, bare tou woh hi hote hain, bus abb jeth aur jethani hain, bus theek hain unko kabhi kabaar masla hota hai magar kya karein ghar tou nahi beth sakte na.” Participant 4 states “bas ye tha ke mein apni saas ya husband ko Zaida baatati nahi thi ke woh ye na samjhein ke isse har din koi na koi masla rehta hai”, “phir mere husband yahi kehte hain ke jo petrol kharch kar ke mein ne wahan le kar jana hai uss se behtar hai

mein kaam par chala jaaoun” and “Aisa tha ke mere pehle baby ke time unhoun ne mujhe bari mushkil se doctor ke paas ane diya, kyun kyun pehle bacha hou tou dar Zaida lagta hai. Unko tha ke kisi ko baatana ke bajaye banda apni khudi care karle woh sahi hai.” Participant 5 further states “Mein ne ghar par kisi ko nahi baataya tha, meri saas ko nahi maalom tha, pehli beti ki martaba bhi uss ne bara masla kiya tha, iss liye mein ne nahi baataya.” And lastly participant 6 adds “unko hota hai ke itni bari baat nahi, uth kar kaam bhi karna chahiye har waqt araam zaroori nahi.”

Evil eye/negative attitudes towards pregnancy

Evil eye/negative attitudes towards pregnancy is the seventh theme extracted. Cultural beliefs play a key role here. Many families limit their support when it comes to accessing antenatal through a doctor because they feel it is against their cultural values and stepping outside during pregnancy can be harmful due to the threat of evil eye. Hence travelling to visit a doctor is looked down upon in such families. Participant 2 states that “Jee jee, darasal mere jo susar hai unko problem hoti hai who kehte hain ke jaldi baatne ki zaroorat nahi hoti nazar lag jati hai.” Participant 3 states that “mere susraal mein aisa nahi hai magar mere mehke mein hai, mere ami abu kehte thay ke abhi na baatana kisi ko nazar lag jaye gi. Mere gale ki waja se sab ko Zaida pareshaani hoti thi.” Participant 4 adds “meri saas bohat veham karti hai, who kehti thi ke kya zaroorat hai, logon ki nazaarein lag jati hai. Logon mein jaane se banda nazroun mein ajata hai.” Participant 5 states “inko masla tha ke beti kyun hoyi beta chahiye tha, second time yahi dart ha ke ainvayi kuch parh kar na phoonk de mere bache par iss liye nahi baataya.” Similarly participant 6 states “mere saas susar dono ko nazar la bohat dar hota hai, jab bhi mein ghar se nikalti hoon doctor ke liye aur kahan jana hota hai mein ne tou kehti hai dhak kar niklo nazar na lag jaye. Mere susar kehte hain itna doctor ko dekhane

se bhi nazar lag jati hai (laughs).” These statements prove that the concept of evil eye still stands strong in some families and this can be hinderance in the lives of pregnant women.

Family insisting to take up home remedies during pregnancy pains

Family insisting to take up home remedies during pregnancy pains is the eighth theme. In order to discourage women to take up care during this time families at times insist them to use some home remedies for eliminating minor pregnancy pains. This also occurs due to lack of knowledge when people are unaware that even minor pains during this period require care and attention from the doctor. Participant 4 states that “woh yahi kehte hain ke koi nahi choti moti medicine kha lou dard ke liye abhi khair hai.” Participant 6 adds “jaise mere pehle bete ke time mujhe bohat buri vomiting hoyi thi, paani bhi andar nahi tik raha tha, tou mujhe meri saas kehti thi thin ke koi nahi choorun kha lou ya phaki kha lou, hala ke meri eik dost hai uss ko jab mein ne baataya tou uss ne kaha jab tak drip nahi lagegi araam nahi aye ga.” These participants express that their families forces them at times to take up home remedies rather than going to visit a doctor.

Gender pressure

Gender pressure is another theme generated. Many families still gve importance to the concept of a baby boy, they still openly claim that they want a boy no matter what. The pressure of giving birth to a baby boy rises among women and they are afraid to see a doctor beacause if they find out it’s a girl, family will not accept this. This creates fear among pregnant women. Participant 5 states “pehli inhoun ne jab beti ke time pe masla kiya tha na tab se mujhe nazar ka dar laga tha, inko masla tha ke beti kyun hoyi beta chahiye tha” Participant 6 states “magar ye tha ke gharwaloun ko tha ke iss ka beta hi hou tou uss se ghabrati thi, jaise abhi hamari family mein kisi ke dou bete hoye tou unko tha ke iss ka pehle

bhi beta hai, abb bhi beta hi hona chahiye” and “Mere saas sasur iss liye bhi kehte hai ke betoun ko nazar lag jati hai iss liye nahi baatana tou mein kehti hoon ke kyun betioun ko nahi nazar lag sakti?”

Checkup delayed due to a medical card

Checkup delayed due to a medical card is the ninth theme extracted. Since most participants recruited for this research were from Services Hospital. Many women claimed that their check-ups were delayed due to a medical card they had to get made prior coming to see a doctor. The medical tests they had to get done for the card incurred huge costs which is why initially they had to delay this process. Participant 1 states “Services mein iss liye bhi late hogayi yahan pe eik card banta hain 3-4 mahine jaa kar, phir uss card ke baad hi doctor app ka ilaaj karta hai.” Participant 2 stated that “uper se mein ne suna hai ke ye hospital wale bhi kehte hain ke teesre mahine tak ayein, koi card banta hai uss ke baad.” Participant 4 adds “ye kehte hain ke medical card banwayein, card ke through hi sab hota hai yahan.” Participant 5 states “uper se yahan ilaaj karane ke liye card banwana parhta hai. Uss ke liye ye kuch test likh kar dete hai uss ke baad card banta hai.”

Waiting time in hospitals

Waiting time in hospitals is another theme generated. Pregnancy can be an exhausting experience, waiting for long hours in the hospital can be tiring and uncomfortable in such a condition. Participants expressed their difficulties relating to long hours which has also delayed their checkups hence hindering the accessibility of antenatal care. Participant 4 states that “Zaida nahi eik adhi baar hi hoya hai aisa, dekhein iss haalat mein Zaida betha bhi nahi jata aur jab pain start hoti hain tou condition kaafi kharab ho jati hai.” Participant 5 states that “haan jee eik baar hoya hai, aisa tha ke mein kaafi deir se bethi thi, inko mein ne

bola bhi hai ke mein bari deir se ayi hoon, bas sugar check karwani hai magar ye log kehte rahe rah eke doctor sahiba abhi masroof hain itnezar karein, phir mein uth kar chali gayi.”

Lack of knowledge

Lack of knowledge is eleventh theme generated. Women fail to recognize the true importance of antenatal care, careless attitudes can have severe health complications but they fail to accept this fact. Such women lack behind in terms of knowledge and put themselves and the baby’s health at risk. Due to environmental conditions women at time fail to put their health at the top and foremost. Participant 2 states “jee bilkul care tou karni chahiye, magar insaan kabhi kabhar haalat ke haathoun majboor bhi hota hai”, “mujhe tou yahan kisi ne nahi bola ke app late ayi hain iss liye mujhe itna nahi pata tha. tabiyat se na andaza ho jata hai hai mujhe, mein test waighra nahi karwati forun, test bhi teesre mahine mein jaa kar karwati hoon confirm karne ke liye”, “mere ghar mein meri nannd aida careless abhi unka first baby hai aur unke husband ko office se chutti nahi mil rahi thi tou who doctor ke paas nahi aa sak rahi thi”and “Agar tabiyat ziada deir tak kharab rahe phir test kar leti hoon confirm karne ke liye.” Participant 3 states “Shuru ke mahine mein tou kuch nazar bhi nahi ata itna iss liye ane ka kya faida.” Participant 4 adds “woh yahi kehte hain ke koi nahi choti moti medicine kha lou dard ke liye abhi khair hai”and “apni marzi se late nahi ati, ghar mein sou masle aur hote hain, phir yeh sab itna zaroori mehsoos nahi hota.” Participant 6 lastly adds “meri nand yahan kaam karti hain, phir jis week mein woh bolti thi ke ajao mein chali jaati thi”

Unplanned pregnancies

Unplanned pregnancies is another theme extracted. Many women claimed that another major reason for not initiating antenatal care on time was that they were unaware of their pregnancies. They did not know that they were pregnant and took the situation quite normally until a few months passed by and they visited the doctor. Lack of knowledge

regarding the pregnancy symptoms could be a reason for this. Participants claimed that they had not planned the pregnancy which is why they weren't expecting it. Participant 2 states "darasal, hamara bacha ka koi irada nahi tha ji ski waja se mein ne check hi kaafi late kiya, taqreeban dedh mahine baad jaa kar check kiya tha aur phir Zahiri baat hai ane mein mein bhi kuch time lagya." Participant 4 states "mujhe nahi pata tha ke mein pregnant hoon, mujhe laga blood ki waja menses nahi arahe, magar time ke saath jab tabiyat Zaida kharab hoyi aur kuch khane ko bhi nhi dil karta tha phir mein check-up ke liye gayi tou pata laga ke mein pregnant hoon, mujhe laga ke Zaida se Zaida teesra mahina hoga, magar doctor ne baataya ke app ko choutha mahina khatam ho kar paanchva mahina lag chuka hai." Participant 5 states "pehle dou mahine tou mujhe pata hi nahi laga, teesre mahine jab mein ne stick par check kiya tou pata laga" and "haan jee, abhi meri pehli beti ko dedh saal hi hoya tha, aur operation ki waja se mein ne socha tha 3 saal baad sochoun gi." Participant 6 adds "sach bolon tou shuru shuru mein mujhe inta ilm hi nahi tha ke mein pregnant hoon, mujhe pata hi shaid dosre mahina laga" and "haan jee, aisa tha ke abhi forum irada nahi tha, mujhe aur mere husband ko yahi tha ke haroon mera chota beta 2 saal ka hojaye phir koshish karein ge"

Importance of antenatal care

Importance of antenatal care thirteenth theme generated. A few participants did agree to the fact that antenatal care is important but they still fail to put this at the forefront and all the othr factors behind. They did seem to accept its importance but were not yet ready to practically give antenatal care its due importance. Participant 1 states "jee jee bilkul aisi hi hai, umm mere khiyal se doctor ko baatana chahiye ye itna zaroori kyun hai. Aur jahan jahan se ilaaj diya jata hai who bhi acha hona chahiye." Participant 3 states that "Baki yahi hai ke check-up zaroor karwana chaahiye kisi ki baatoun mein na ayien, log aksar mana karte hain magar agar husband supportive hoon phir masla nahi hota itna." Participant 5 adds "dekhein

thora bohat tou insaan ko bhi khiyal karna chahiye na, akhir bache ki zindagi ka mamla hota hai, doctor ke paas ana zaroori hai bas yeh hai ke kabhi kabaar deir svear ho jati hai.”

Raised expenses occurring from maternity services

Raised expenses occurring from maternity services is found to be another influential factor.

Medical expenses rising due to inflation is a burden for some people, especially for those belong to low socio-economic class. High cost for such services can be discouraging for people who may not be able to afford the expenses. Participant 3 states “private mein kharcha bohat ho raha tha, taqreeban lakh se uper chala jata tha aur sachi baat hai itna hum nahi de sakte” and “Dekhien agar banda shuru se ane lag jaye tou paise bhi yeh log itne maang lete hain, ohir woh bhi tou dekhna hota hai na. itne mehngi test waighira likh kar dete hain, uss mein alag paise lagte hai.” Participant 4 “Sab kuch itna mehnga hogaya hai” “jee jee aisa hi hai, paise tou bohat lag jaate hain, phir mere husband yahi kehte hain ke jo petrol kharch kar ke mein ne wahan le kar jana hai uss se behtar hai mein kaam par chala jaaoun.” Participant 5 adds “private bohat mehnga par raha tha, eik eik test aur medicine 7000 ka likh kar dete thay ya uss se bhi uper, fees bhi bohat lete thay, itne paise tou nahi hain hamare paas magar idhar bhi karcha tou hai pata nahi bare operate par kya kharcha ata hai”, “petrol waise hi aasmaan pe pohnc hoya hai”and “jaise mein ne baataya mein ne private iss liye chora tha ke mehnga bohat tha, dawaian aur bhi mehngi aati thi.” Participant 6 adds “jee halat tou bohat kharab hogaye hain, pichle baby ke time mein ne apni ammi ke ghar ke paas se private clinic se check karwaya tha” and “App ko pata hoga petro bhi itna mehnga hogaya hai tou harwaqt ana asaan bhi nahi hota.”

Experience from first pregnancy

Experience from first pregnancy is the last theme extracted using the thematic analysis. Participant's experiences from their previous pregnancy impacted their decision to take up antenatal care timely. They claimed that because of the experience from the first pregnancy they came to know of many factors and were able to look after themselves during the first few months without the doctor's help. The limited knowledge could also have influenced this decision. Participant 3 states "shuru shuru mein yahi hota hai ke ghar par hi ilaaj kar lou abhi baby bhi chota hai, four ya five month se doctor ke paas chali jana. Mein ne apni beti ke time bhi aisa hi kiya tha aur Alhumdulillah koi masla nahi hoya tha"

Participant 4 states that "uper se mera ye second baby hai tou mujhe andaza bhi bhi tha ke aisi cheezein hoti rehti hain. Iss liye Zaida sar par nahi liya." Participant 5 adds "pehli bache ke baad mujhe andaza hogaya hai kaafi cheezoun ka." At last Participant 6 states "shuru shuru mein khud bhi andaza hota hai pichli pregnancy ke baad. Pehle baby ke time mein ne suna hai shuru shuru mein itna nazar bhi nahi ata"

Templates

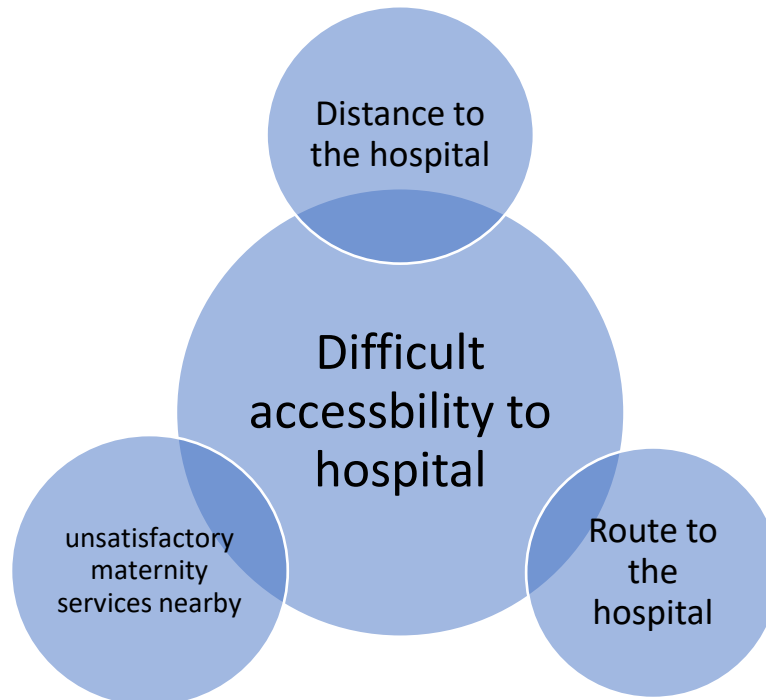


Figure 3.1

This template indicates a master theme “Difficult accessibility to the hospital” along with supporting the initial themes. These themes offer an insight into the factors that are responsible of inaccessibility of healthcare services and how they impact the initiation of antenatal care.

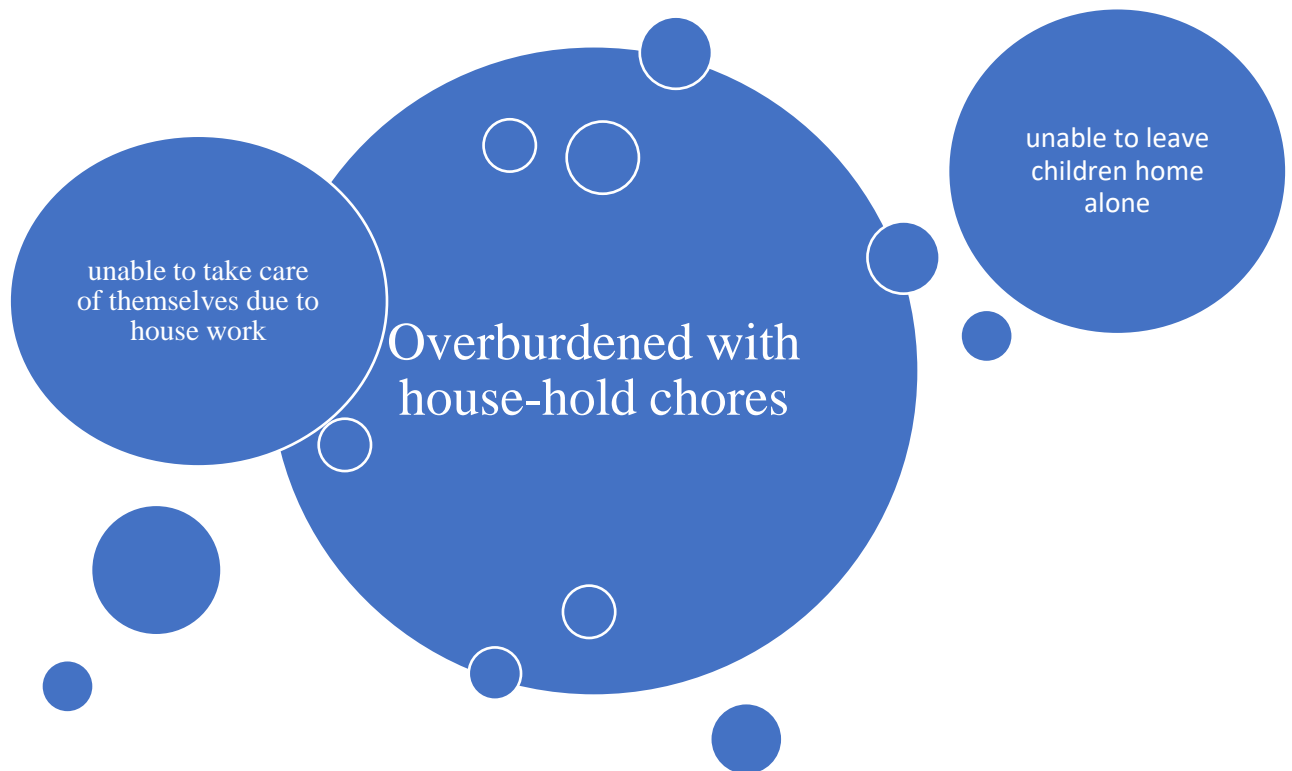


Figure 3.2

This template indicates the master theme “overburdened with household chores” along with its supporting themes. Women claim that due to an increase in house hold chores it is difficult for us to manage everything and take care of ourselves and tend overlook their health.

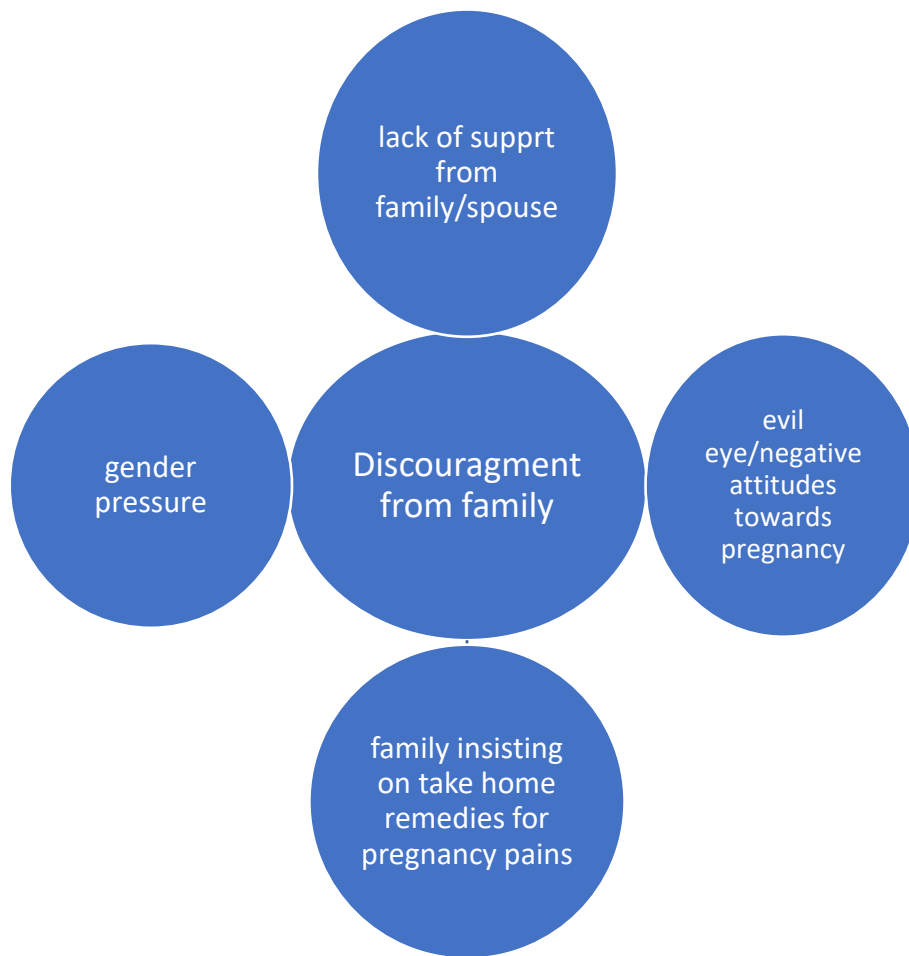


Figure 3.3

This template further indicates the master theme “Discouragement from the family” along with its supporting themes. These themes present an insight into the family/spousal factors that discourage and demotivate women from initiating antenatal care on time.

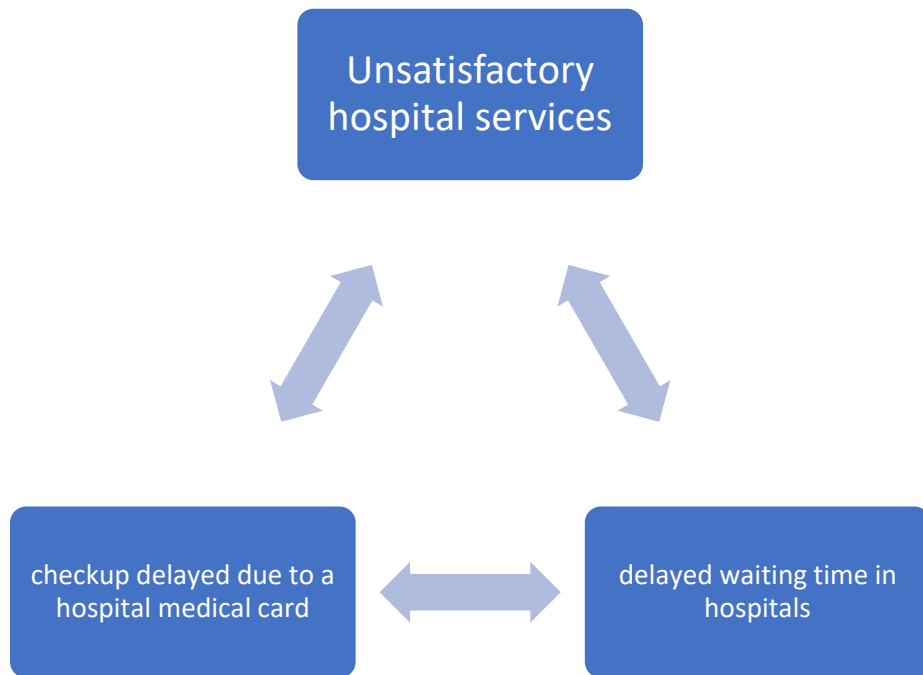


Figure 3.4

This template presents a master theme “Unsatisfactory hospital services” along with its initial themes. These themes indicate the reasons related to healthcare services which cause women to initiate antenatal care late.

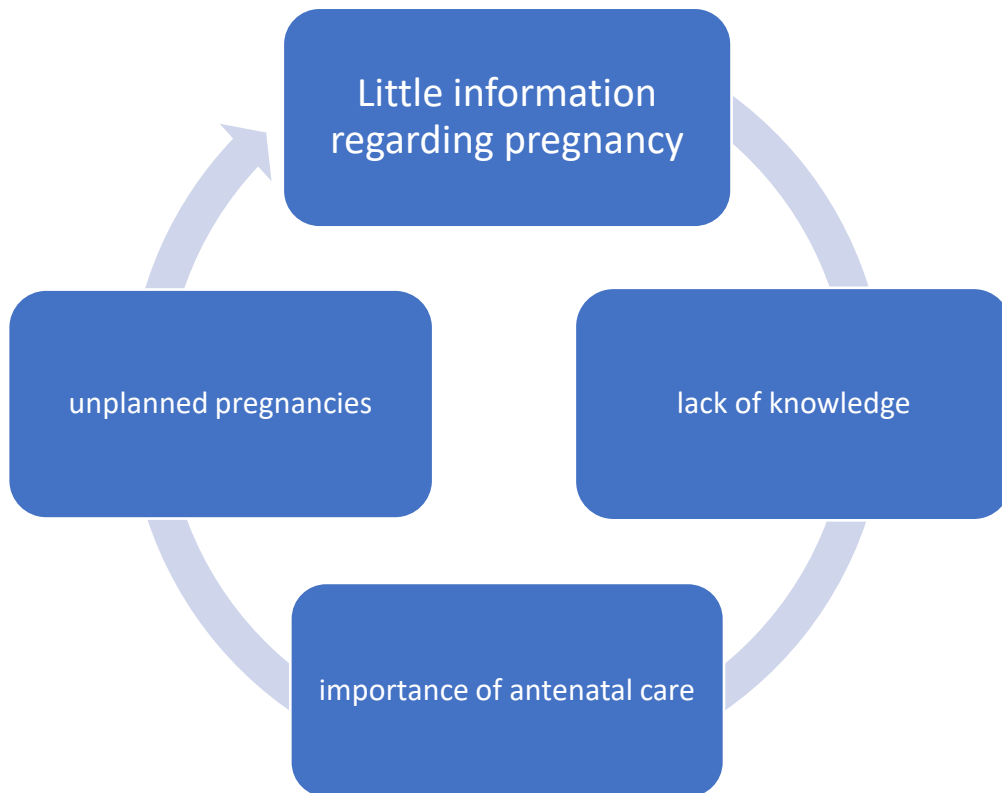


Figure 3.5

This template presents a master theme “Little information regarding pregnancy” and its initial themes. These themes put forward the idea of lack of knowledge regarding pregnancy and its symptoms, and the impact this has on the initiation of antenatal care.

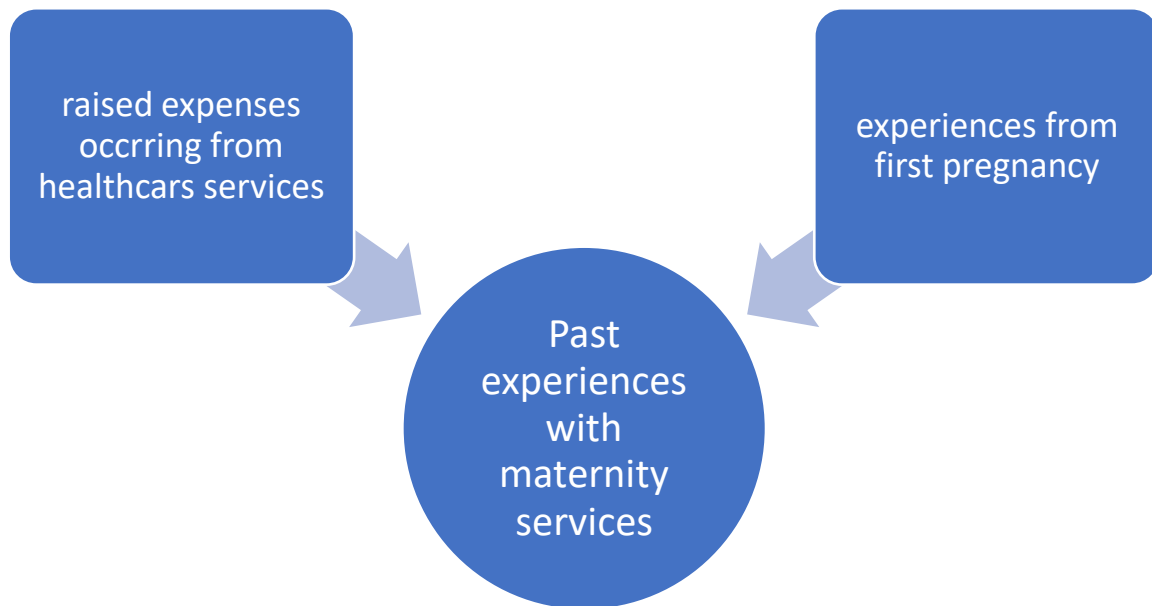


Figure 3.6

This figure illustrates a master theme “Past experiences with maternity services” and its initial themes. These themes offer an insight into the prior pregnancy experiences and the high medical costs that people have to bear during this period.

Chapter 4 Discussion

Through this study, the researcher aimed to explore what significant reasons contributing to the late initiation of antenatal care among pregnant women. A qualitative approach was used to understand and describe the phenomena surrounding the late access to such healthcare facilities. After the thematic analysis of the data collected 17 initial themes were deduced and 6 master themes. All themes generated presented a broad spectrum of reasons why women are reluctant to access antenatal care on time. In this study all, pregnant women stressed upon the raised expenses of healthcare facilities and the distance to such clinics. They were hesitant to spend large sums of money on a pregnancy, which can be easily taken care of at home. Participant 4 *“Sab kuch itna mehnga hogaya hai” “jee jee aisa hi hai, paise tou bohat lag jaate hain, phir mere husband yahi kehte hain ke jo petrol kharch kar ke mein ne wahan le kar jana hai uss se behter hai mein kaam par chala jaaoun.”* This similar finding has also been supported by, Warri & George (2020) who concluded that cost of such services and distance to healthcare clinics where the perceived barriers for accessing ANC on time.

Hatherall (2016) identified that the major set of barriers to accessing this type of care included difficulties in locating health centers or clinics and processing of referral systems. Although this study also found that the route to healthcare clinics may not be very feasible for smooth travelling, poor infrastructure can be discouraging as well. *Participant 3 states that “nahi raasta bas theek hi hota hai, bohat saaf nahi, magar ana tou parhta hai (smirks).”* Likewise, Participant 4 states that *“raasta itna saaf tou nahi hai, jaise yahan hospital ke kareeb wala kuch behter hai magar mere ghar ke paas se bohat kharab hai, wahan kaafi jump lagti hai, aur jab jump lagti hai tou pain start ho jati hai.”* This study also found that a

hospital medical card can be a little expensive for some women since it requires a set of medical tests to be conducted first, therefore spending money on such medical tests is not easy for every woman which is why scheduling doctor appointments was delayed.

Nisar (2016) also presented a similar finding stating that financial restrictions and difficulty in accessing a healthcare system can be influential factors. Another important finding that the following study highlights is that absence of satisfactory healthcare clinics nearby is also a major problem for a lot of women. Travelling long distances would not be a problem if they had easy access to satisfactory healthcare facilities in their area. Participant 2 states that *“Waise barki gaaoun jahan mera susral rehta hai wahan bhi eik chota sa hospital hai magar who mujhe itna pasand nahi, saaf nahi hota aur doctors waighra bhi koi khaas nahi”*. Likewise, Participant 4 states that *“eik tou jo hai mujhe pasand nahi, wahan ke doctor baare badtameez hain, meri behn jaati thi uss ne baatya tha, aur dosra jo hai thora aage jaa kar, woh private hai tou paise bohat lete hain.”*

The study further stated that unplanned pregnancies were also significant reason for accessing late antenatal care, they were unaware of the pregnancy symptoms in the first few months since they had not planned on getting pregnant. Women were oblivious to the signs and did not know they were pregnant. Participant 6 adds *“sach bolon tou shuru shuru mein mujhe inta ilm hi nahi tha ke mein pregnant hoon, mujhe pata hi shaid dosre mahina laga”* and *“haan jee, aisa tha ke abhi forum irada nahi tha, mujhe aur mere husband ko yahi tha ke haroon mera chota beta 2 saal ka hojaye phir koshish karein ge.”* A similar finding by Haddrill, Jones, Georgina, Mitchell, & Anumba, (2014) has supported this where they stated that a huge number of women said that they did not know that they were pregnant for weeks

or months and many women further stated that since they had not planned to become pregnant so they did not have a pregnancy mindset and were not expecting the symptoms.

Some women in the current study falsely interpreted the pregnancy symptoms as something very normal due to lack of knowledge, until a few months passed by and they took a pregnancy test. Haddrill, Jones, Georgina, Mitchell, & Anumba, (2014) also reported a similar finding that women, however, did perceive the pregnancy symptoms but misinterpreted them due to lack of knowledge or experience. Some women who may recognize the pregnancy symptoms correctly fail to access care on time due to practical difficulties.

This study further evaluates that lack of family/spouse support and fear of stigma or negative attitudes towards pregnancies can discourage women from initiating antenatal care on time. They revealed that living in a Pakistani society it is difficult taking such decisions on their own. Participant 1 states that *“Aise mana tou nahi karte bas kehte hain ke teesre chuothe mahine tak jao. Mere husband ki duty bohat sakht hoti hai iss kiye who kabhi mana kar dete hain.”* Participant 2 states that *“bas yahi kehte hain ke eik dafa confirm ho jaye phir hi jana itni jaldi jaane ki kya zaroorat.”* Some also supported that their families insisted them on using home remedies during pregnancy pains rather than travelling to see a doctor. Warri & George (2020) also support this finding stating that lack of family support and fear of stigma are two major factors impacting women during this time period and many women would hide the first few months of their pregnancies due to the fear of enemies.

The following study also indicates that women took pregnancy very lightly, and were less likely to take any such care during the first trimester after their experience with their first pregnancy. According to them they don't have to access care in the first trimester after their experience with their first pregnancy, they can handle themselves in the initial months. Participant 3 states *“shuru shuru mein yahi hota hai ke ghar par hi ilaaj kar lou abhi baby bhi chota hai, four ya five month se doctor ke paas chali jana. Mein ne apni beti ke time bhi aisa hi kiya tha aur Alhumdulilah koi masla nahi hoya tha.”* Warri & George (2020) also reported that women believed they could go successfully through the first trimester without accessing any type of healthcare service.

In this study, women indicated that leaving children home alone and the burden of household chores were also the reasons why they initiated antenatal care late. All participants in the study had children aged between 2-4 years old and it wasn't possible to leave them at home alone every time so they decided to take of themselves at home whenever they have enough time. Participant 1 claims that *“bete ko akele ghar par chor kar ana bhi mushkil hota hai aur us ski tabiyat bhi bohat kharab hai jiski mujhe kaafi tension hain mein bohat parehshaan hoon iss liye bhi ana mushkil ho raha tha.”*

Hatherall (2016) reported that some of the women included in the study had no full knowledge about the importance of antenatal care, this finding is also support by the following study where, lack of knowledge and not knowing the significance of antenatal care is a crucial obstacle in the way of accessing ANC on time. Bakari & Mahiti (2022) also found out that unplanned pregnancies, distance to the health facility, unfriendly services provided were factors reported by pregnant women of initiating late antenatal care, this finding has also been supported by the following study. Women in this study, did express guilt of not

accessing antenatal care on time and said that it is important adopt care during this period, but reported that due to their families they had no other choice. Participant 5 adds *“dekhein thora bohat tou insaan ko bhi khiyal karna chahiye na, akhir bache ki zindagi ka mamla hota hai, doctor ke paas ana zaroori hai bas yeh hai ke kabhi kabaar deir svear ho jati hai.”*

Participant 4 adds *“woh yahi kehte hain ke koi nahi choti moti medicine kha lou dard ke liye abhi khair hai”* and *“apni marzi se late nahi ati, ghar mein sou masle aur hote hain, phir yeh sab itna zaroori mehsoos nahi hota.”*

Lastly women recorded that the exceeding waiting time in hospitals can sometimes be painful which is why they prefer to sit back at home and only book a visit for their delivery in the last trimester. Participant 5 states that *“haan jee eik baar hoya hai, aisa tha ke mein kaafi deir se bethi thi, inko mein ne bola bhi hai ke mein bari deir se ayi hoon, bas sugar check karwani hai magar ye log kehte rahe rah eke doctor sahiba abhi masroof hain itnezar karein, phir mein uth kar chali gayi.”*

Conclusion

The following study aimed to explore the factors for the late initiation of antenatal care among urban women of Pakistan. The study concludes that difficult accessibility to the hospital/healthcare clinic, discouragement from the family and raised medical expenses are major influential factors that play a key role in the late initiation of antenatal care. Healthcare clinics and the medical staff attending pregnant women should repeatedly highlight the significance of timely ANC and what health complications could arise due to lack of care and attention. Awareness campaigns can help to bridge the lack of knowledge gap so that women are motivated to access care on time. Transportation and medical costs should be reduced and installation of mobile clinics can help to minimize the late initiation of prenatal care.

Strengths:

This study not only aimed to explore the reasons for late initiation of antenatal. The study included 6 participants with their second pregnancy in order to evaluate the differences between the two pregnancies (first and second) and how they influence the initiation of antenatal care on time. The study focused on the experiences and perceptions of urban women with low socioeconomic status. The research concludes a set of results that strongly pertain to the context Pakistani women who do not have many resources for accessing such healthcare facilities. Since this was a qualitative research a flexible approach was used to collect meaningful data from the participants. In- depth interviews gave the opportunity to collect important insights making the data more meaningful. All ethical guidelines were followed, participants were made comfortable and debriefed regarding the purpose of the study. Informed consent was obtained and they were given the right to withdraw from the research at any time. Participants were ensured that their data will only be used for educational/research purposes. Full confidentiality of the data was maintained. Interviews were conducted keeping in mind the ease and availability of participants so that they do not feel pressurized. All questions included in the interview were relevant and significant in collecting meaningful research information. No irrelevant questions were considered. Face to face interviews conducted in a hospital setting helps to provide significant pieces of information that otherwise may be difficult to collect, for example facial expressions cannot be evaluated through an interview conducted on a telephone call. Women approached in hospital settings were ready to give insightful information regarding their services at the current hospital and their experience.

Weaknesses:

The weaknesses of this research include that it only focuses on the experiences and perceptions of urban women, excluding the experiences of rural women. Data collected from 6 participants would not help to provide meaningful information. Many families belonging to low socio-economic status have the concept of early marriages, therefore lowering my age limit (20-35 years) would help to collect information about experiences of young women regarding late initiation of antenatal care. The interviews were conducted in a hospital setting which did include a lot of noise and distraction while conducting the interviews. Since the interviews were conducted in a hospital setting participants did not have much time for the interviews, either they had to leave or go see their doctor inside. Language barrier is another weakness where some participants kept their opinions forward entirely in Urdu language, and failed to understand some basic English words. The current research only included urban women from Lahore which can influence the reliability of the results.

Recommendations

Extending this research to the rural areas of Pakistan can offer more in-depth and meaningful information, and comparisons between urban and rural women can also put forward a complete picture of the reasons that surround Pakistani women in acquiring antenatal care beyond time. The research can also be extended to different cities of Pakistan in order to examine the reasons and factors that are influential in their case. Increasing the number of participants can help to collect varied information and the results generated can be generalizable on a greater scale. A large difference between the age limits can incorporate women from different ages in order to assess experiences of women from varied age backgrounds. Since the interviews conducted in the hospital setting did invite a lot of distraction, in order to eliminate this, doctors in the respective departments can be

approached to provide a separate room or an area to conduct the interviews where the level of noise and distraction is comparatively low. This can help participants to respond to questions easily without diverting the attention. Participants who struggle with a language barrier and are not able to answer properly, translator can be taken along when conducting interviews so that so that they can answer in their language of ease without any pressure. The interview guide can include questions which can focus on the problems faced by women which contribute to late initiation of antenatal care. Awareness campaigns can be run where at the end of the interview participants can be given pamphlets or brochures that will educate women regarding the significance of timely initiation of antenatal care and spread awareness why is it so important to contact a doctor timely preferably by 2nd month of pregnancy.

Clinical Implications

The current research can be useful and beneficial for the doctors. In clinical settings knowledge regarding why some women prefer to initiate antenatal care can help doctors or healthcare workers to educate their patients to access antenatal timely and benefits of accessing such care on time. Results of the current research indicate that healthcare expenses are a major reason for late initiation of antenatal care. Healthcare professionals or doctors can aim to reduce healthcare costs in order to promote timely initiation of prenatal care. The results of the study also indicate that women have little to no knowledge regarding the importance of antenatal care or pregnancy. Doctors can educate the patients about the severe health complication that can arise if they show lack of care during this period.

Research implication

Research regarding reasons for accessing antenatal care late has not been explored much in Pakistan. This phenomenon needs attention by conducting further research to evaluate the significant factors surrounding Pakistani women from different areas. Popular themes from the study such as difficult accessibility to the hospital and high healthcare expenses can be explored further. This research can be helpful in extracting common factors in reference to late initiation of antenatal care that pertain to Pakistani women.

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Appendix A

Interview 1

Interviewer: Assalamoalikum, Mera naam Serene Zehra hai aur ajj mein app se kuch sawal karoun gi app ki pregnancy ke hawale se. Sab se pehle app mujhe ye baataein ke app ke app iss period mein koi khaas diet follow kar rahi hain? Koi aise pehazi khane hain? Ya doctors ne kisi kisam ki dawai de ho?

Interviewee: Waalikumassalam, umm nahi aisi koi khaas diet tou nahi hai bas mein ne meetha kam kardiya hai aur phal fruit Zaida kha rahi hoon. Mujhe chawal bohat pasand hain tou woh mein khati hoon baki waise taqriban eik jaisa hi hain. Doctor ne eik parchi pe likh kar kuch dawaiyan de hain aur kaha hai ke inko jaari rakho abhi kuch din.

Interviewer: Sahi sahi, aksar iss time pe kamar mein dard aur swelling ho jati hai tou app iss ke liye koi warzish kar rahi hain.

Interviewee: jee kamar mein tou bohat dard hota hai wazan ki waja se magar meon koi dawai nahi leti. Bas walk kar leti hoon jab kabhi pain ho kahin bhi. Doctors ne waise bola hain seerian kam utarni charni hain, ziada chlana phir na nahi aur kaam bhi nahi karna.

Interviewer: kisi kisam ki bemari waighira tou nahi hoyi app ko iss time mein? Jaise bukhari ho gaya ya flu

Interviewee: nahi Alhumdulliah, aisa tou kuch nahi hoya, sab theek hi raha. Dengue bohat phela hoya tha pichle dinoun magar Alhumdulliah mujhe nahi hoya.

Interviewer: theek theek, tou app ko pata lag gaya ke larki hai ya larka?

Interviewee: jee jee, pata lag gaya hai ke ye larki hai. Ultrasound se pata laga hai ke larki hai.

Interviewer: oh acha MashAllah, tou app ko shoq tha jaan ne ka ke larki hai ke larka yaa app ne socha pedaish pe hi pata lag jaye ga?

Interviewee: jee jee, shoq tou bohat tha jaan ne ka ke larki ha ya larka waise mere husband kehte thay ke jo bhi Allah de qubool hai. Phir mein ne ye ultrasound private karwaya inhoun ne nahi baataya.

Interviewer: waise beti se khush hain app ya bete ki khawaish thi?

Interviewee: nahi nahi bohat khush hoon, mere liye bas zaroori hai ke bacha sehat mand ho larki ho ya larka farq nahi parhta. Mere husband bhi bphat khush hain, roz kehte hain meri guriya kab aye gi

Interviewer: sahi sahi, acha tou jaise app ne baataya ke app ne doctor ke paas visit aur ye care jo 8th month mein shuru ki hai, aur ye kaafi late hota hai. Sab se behtareen time care shuru karne hai 2nd month hota hai hai. App ne jo itna late shuru kiya uss ki aisi kya khaas waja thi?

Interviewee: mein late iss liye ayi thi kyun ke mera gaaoun bohat door hai yahan se 15 ghante ka safar hai, aur mujhe abhi Lahore mein hoye bhi kam time hi hoya hai sirf dou mahine hoye hain. Mein ne apne pehle baby ki martaba gaaoun se ijaaj karaya. Mein shaadi ke baad yahan

shift hoyi hoon. Mere husband Punjab police mein hote hain. Hum log yahan par hain bhi akele. Rishtedaar sab gaaoun mein hain iss waja se bete ko akele ghar par chor kar ana bhi mushkil hota hai aur uski tabiyat bhi bohat kharab hai jiski mujhe kaafi tension hain mein bohat parehshaan hoon iss liye bhi ana mushkil ho raha tha.

Interviewer: kiya hoya app ke bete ko?

Interviewee: mere beta ko bohat tez bukhar hai 102 bukhar hai aur who utar hi nahi raha aur uss ke gale mein bhi dard. Who abhi chota bhi bohat hai sirf abhi deedh saal ka hai iss liye mein kaafi pareshaan hoon

Interviewer: kab se bukhar hai app ke bete ko?

Interviewee: bukhar kaafi time se hai, doctor ke paas bhi le kar gaye hain woh kuch baatate nahi hain bas dawaiyan likh kar dete hain. Who dawaiyan hi khila rahi hoon.

Interviewer: chalein inshAllah app fikar na karein bohat jald theek ho jaye ga app ka beta. acha, tou app yahan kahan tehti hain?

Interviewee: mein ye airport ke paas rehti hoon.

Interviewer: oh acha acha tou ye hospital tou app ko door bhi bohat parhta hoga

Interviewee: jee jee bilkul door tou bohat hai iss liye time bhi lag gaya. Mein apne ghar se bike pe ati hoon husband ke saath. Petrol bhi bohat lag jata hai.

Interviewer: sahi, tou app ne apne ghar ke qareeb koi hospital kyun nahi dekha

Interviewee: mein ne apne pehle baby ke time ganga ram se operate karwaya tha, mujhe wahan ka mahol aur doctors bilkul pasand nahi aye. Gaaoun mein bhi mein ne jahan se ilaaj karaya who bhi mujhe pasand nahi aya iss liye phir yahi ana para.

Interviewer: tou app ko yahan ke doctors aur ilaaj se puri tasali waighira hai?

Interviewee: jee jee puri tasali hai, mujhe yahan ke doctors aur staff dono bohat pasand aye. Yahan ka mahol bhi behter.

Interviewer: app ko ghar waloun ke taraf se ya husband se support thi ke doctor ke paas jaa kar ye care leni chahiye ya unhoun ne mana kiya tha.

Interviewee: mere ghar wale sab gaaoun mein rehte hain, mein yahan pe akeli hoon. Aise mana tou nahi karte bas kehte hain ke teesre chuothe mahine tak jao. Mere husband ki duty bohat sakht hoti hai iss kiye who kabhi mana kar dete hain. Magar mujhe tension rehti hain waise bhi inhoun ne kaha hai ke operate hi hoga aur ghar wale kehte hain ke koshish karo normal hi hou. Yahan doctors ye bhi keh rahe hain ke shaid time thora uper ho jaye.

Interviewer: acha acha theek, tou jab app ko pata laga tha ke app pregnant hain ya umeed se hain, tou ghar par sab ko forun baata dia tha?

Interviewee: jee jee mere pehle bete ki martaba tou mein ne forum nahi baataya, pehli pehli Khushi thi tou dar lagta tha magar abb ki martaba mein ne dosre mahine tak baata diya tha. Ziada nahi baatya magar khandaan mein kuch logon ko maalom hai.

Interviewer: acha sahi, tou app ke ghar walon ne ami ya saas ne koi kisi kisam totke baataye app ko ke ye karna chahiye, ya hum apne time par ye cheezein kiya karte thay..

Interviewee: nahi aisi koi khaas cheez ka tou nahi kehte bas ye zaroor kehte hain ke walk ziada se ziada kiya karo aue ye bhi kehte hain ke (smirks) hum tou apne time par poora ghar bhi sambhalte thay, chote bachoun ko bhi paalte thay. Ajj kal ke larkiyan tou eik se doosre kaam ke baad hi thak jaati hain.

Interviewer: sahi sahi, tou jaise app ne pehle baatya ke ye hospital app ke ghar se tou kaafi door hain aur app ati bhi bike par hain , tou raasta kaisa lagta hain app ko yahan ka kisi kisam ki pareshaani tou nahi hoti?

Interviewee: raasta waighira tou taqreban saaf hi hai, safar lamba tou ho jata hai magar saaf tou hai. Mujhe kaafi logon ne kaha ke services acha hai yahan jao iss liye mein yahan ayi. Private mein tou bohat paise lag jate hain.

Interviewer: ye tou hai waise, acha aisi koi khaas cheezein thi jo app ne app ne pehle baby ke time ki hoon aur second baby ke time chor di hoon?

Interviewee: nahi aisi koi khaas cheezein tou nahi hai, routine taqriban eik jaisi hi hai. Bas pehle baby ki martaba mein ne meetha ziada khaya tha aur bb kam kardiya hai. Pehle baby ke time mein ne kaam shaam bhi kam kiya, ziada bedrest hi kiya jo doctor ne bola.

Interviewer: acha sahi, tou dono pregnancies mein app ko kisi kisam ka koi khaas farq mehsoos hoya, dono time mein koi farq laga?

Interviewee: jee farq tou bohat laga ke pehle baby ke time mujhe bohat Zaida pain thi aur mera blood bhi nahi rukta tha, mein bohat pareshaan rehti thi iss waja se, issi liye doctors ne bhi bola ke ziada wazan nahi uthana, kaam kam karna hai aur ziada se ziada bedrest karna hai. Iss dafa mere chota beta bemaar ho gaya iss liye mujhe tension hai, mein ne doctors ko bhi bola hai ke mujhe operation ki sahi date baatein de time se kyun beta chota hai tou uss ko bhi dekhna hai kaha choroun. Time lag jata hai iss liye laa nahi sakti.

Interviewer: acha app ne apne pehle baby ke time bhi care late shuru kit hi ya jaldi shuru kar di thi?

Interviewee: bete ke time tou mein ne ganga ram pe dekhaya tha, wahan mein har month jati thi, jaldi shuru hi ki thi kyun ke pehle pehle time pe ziada pata bhi nahi hota. Phir ganga ram se services ayi hoon iss liye late ho gayi. Services mein iss liye bhi late hogayi yahan pe eik card banta hain 3-4 mahine jaa kar, phir uss card ke baad hi doctor app ka ilaaj karta hai. Mein ne second baby ke time bhi gaaoun mein dekhaya tha magar mujhe pasand nahi aya iss liye Zaida nahi dekhaya.

Interviewer: card kaise hai?

Interviewee: ye kehte hain pehle kuch test hain jo likh ke diye hain hain woh karwao, jaise nazar ka test hogaya. darasal ye dekhte hain ke pehle koi complication tou nahi hai phir card dete hain. White colour ka medical card hota hai, aur phir uss ki hi base pe aage yahan pe delivery bhi hoti hai uss ke beghair nahi hoti.

Interviewer: jaise app ko pata hai app laye hogayi hain, Allah na kare kabhi kabhar kisi kisam ke infections bhi ho jate hainjo bache aur maa dono ke liye khatarnaq hote hain. App ko inka pata bhi tab hi lagta hai jan ka kisi doctor ke paas jayein gi. Time par pata lag jaye tou Zaida acha hota hai. Acha jin aurtoun ko iss ke bare mein kam pata hai unko hum ye kaise baata sakte hain app ke khiyal se?

Interviewee: jee jee bilkul aisi hi hai, umm mere khiyal se doctor ko baatana chahiye ye itna zaroori kyun hai. Aur jahan jahan se ilaaj diya jata hai who bhi acha hona chahiye, jaise agar mere gaaoun ka hospital itna acha nahi tha mujhe pasand nahu aye wahan ke doctors iss liye mein yahan aa gayi.

Interviewer: theek hai, waise app ke khiyal mein ye care kitni zaroori hai?

Interviewee: bohat zaroori hai itna tou mujhe pata hai magar deer saver ho jati hai. Majoboorian bhi hoti hai. Waise hair aurat ho doctor ke paas zaroor ana chahiye.

Interviewer: aur time se ana chahiye second month mein.

Interviewee: (Smiles) jee jee time se ana chahiye.

Interviewer: jee, bohat bohat shukriya app ke waqt aur taawun ke liye, app se mil kar bohat Khushi hoyi. Khuda hafiz.

(- shakes hands)

Interviewee: jee mujhe bhi hoyi, khuda hafiz.

Interview 2

Interviewer: Assalamoalikum, Mera naam Serene Zehra hai aur ajj mein app se kuch sawal karoun gi app ki pregnancy ke hawale se. Mein sab se pehle app se yeh poochoun gi ke app ne ye care ya doctor visits kab shuru kiye? Kis mahine mein yahan ayi?

Interviewee: mein yahan 4th month mein ayi thi, abhi mera 8th month chal raha hai.

Interviewer: acha sahi, tou app ko ye pata laga hai ke larki hai ya larka?

Interviewee: nahi, mujhe abhi nahi pata laga, ye sab Allah ke kaam hain bus pedaish ke waqt hi pata lag jaye ga aur mujhe aisa koi khaas interest bhi nahi hai.

Interviewer: tou waise app ka kya dil hai ke beti ho ya beta?

Interviewee: jo Allah de qubool hai, beti tou hai dill abb beta ka karta hai. Mujhe waise bhi bahir ke haalat dekh kar lagta hai ke beta hi behter hai. Larki ke liye bari mushkilein ho jati hain. Abb bhhi agar meri choti beti kahi bahir jaa ti hai ksis saath tou mera dill kaanp ne lag jata hai. Meri ye seconf marriage hai mein ne pehle bhi bohat kuch face kiya hoye hai iss liye Zaida dar lagta hai. Waise iss mein koi shak nahi ke beti Allah ki rehmat hai aur jo beti kar sakti hai who beta nahi kar sakta.

Interviewer: acha sahi, tou app ko doctors ki taraf se kisi kisam ki exercises batayi gayi hain jo app ghar par follow kar rahi hoon?

Interviewee: umm nahi, aisa tou kuch khaas nahi baataya bus sab yahi kehte hain ke walk ziada karo. Waise doctors kehte hain ke 9th month mein baatayein ge tou ho sakta hai agle check up pe kuch baatyein.

Interviewer: theek theek, tou ye app ki second pregnancy hai?

Interviewee: jee ye meri second pregnancy hai, iss se pehle meri eik beti hai.

Interviewer: acha sahi, jaise app ne pehle baataya ke app yahan hospital 4th month mein ayi, tou iss se pehle kyun nahi ayi? Ye time tou late hota hai

Interviewee: darasal, hamara bacha ka koi irada nahi tha ji ski waja se mein ne check hi kaafi late kiya, taqreeban dedh mahine baad jaa kar check kiya tha aur phir Zahiri baat hai ane mein mein bhi kuch time lagya. Mein rehti bhi door hoon who bhi masla hota hai.

Interviewer: app kidher rehti hain?

Interviewee: mein chunghi-amar sadhu rehti hoon, taqreeban 1 ghante ka distance hai. Pehle mein barki rehti thi apne susral ke saath abb alag shift ho gayi hoon.

Interviewer: tou wahan se hospital ka raasta saaf milta hai app ko ya kharab?

Interviewee: umm hum waise ferozpur road se aate hain, beech mein kahin kahin saf hota hai aur kahin kahin kharab.

Interviewer: tou phir app ke ghar ke qareeb aisi koi hospital nahi hai jaa app jaa sakti?

Interviewee: jee general hospital hai tou sahi, magar mere susral wale aur mere husband ko yahi hospital pasand hai tou kehte hain idher hi jao, meri nand ne bhi yahan ana hota hai tou mere husband kehte hain tum bhi wahin jao. Agar mere husband qareeb jane ki ijazat de dete tou shaid mein hospital time par ajati. Aur waise inhoun ne ye jo gynae special unit banaya hai ye sirf sarkari nokrioun waloun ke liye hai, tou yaha ye araam se check kar lete hai. Waise barki gaaoun jahan mera susral rehta hai wahan bhi eik chota sa hospital hai magar who mujhe itna pasand nahi, saaf nahi hota aur doctors waighra bhi koi khaas nahi.

Interviewer: oh acha acha, tou waise app ko yahan ke doctors se tasli hai?

Interviewee: gynae special ke doctors bohat ache hain, bare pyaar se baat karte hain. Meri nand baatai hai ke doosre ward mein jahan sab jaate hain wahan ke doctors itne ache nahi. Khair, mujhe tou tasali hai, sahi guide waighira kar dete hain.

Interviewer: acha tou jaise app ne baataya ke ye app ki second pregnancy hai, tou aisi koi zaroori ya khaas cheezein hain jo app ne pehle baby ke time ki hoon aur second time chor di hoon?

Interviewee: (laughs a little), pehle pehle mein apna bohat khiyal karti thi, husband se bhi kehti thi mein kaam kam karoun gi, magar abb second baby ke time mein bohat careless ho gayi hoon khaas tor par medicines ke maamle mein. Pehle sari medicines time par leti thi aur abb ki martaba bhool jaati hoon aksar. Pehle rest bhi ziada karti thi, abb kyun ke ghar be choti beti hoti hai uss ko bhi dekhna hota hai tou araam karne ka bhi time nahi milta.

Interviewer: sahi tou app ko dono pregnancies ke beech mein kisi kisam ka koi wazay farq mehsoos hoya hai?

Interviewee: waise koi bohat farq tou nahi laga bus yahi ke pehle baby ke time tou Zaida pata hi nahi laga time bhi jaldi guzar gaya tha, abb aisa lagta hai time hi nahi guar raha, iss dafa pain bhi Zaida hoyi hai. Pehle baby ke time mein healthy bhi ziada thi aur bb sab kehte hain ke tum itni kamzor ho gayi ho sirf belly hi nikli hai waise bilkul patli si ho. Bus jo sab se Zaida lagta hai who yahi ke mein pehle baby ki tarah araam nahi kar sakti. Husband bhi kehte hain kaam karo (laughs).

Interviewer: sahi sahi, acha waise ye jo antenatal care hoti hai jo app yahan doctors ke paas akar leti hain, iss ka sahi waqt shuru mein hota hai jaise app ko 2nd month mein le leni chahiye delay bilkul nahi karna chahiye. Kyun ke bohat si complications ho sakti hain jab tak app ko pata hi na hou app ke baby ki health kaisi hai. Infections waighira ka bhi khatra hota hai. Tou agar mein app se poochoun ke ye care app ke khiyal mein kitni zaroori hai aur hum ye message aur aurtoun tak kaise pohncha sakte hain?

Interviewee: jee bilkul care tou karni chahiye, magar insaan kabhi kabhar haalat ke haathoun majboor bhi hota hai. Mein shuru ke months doctor ke paas nahi asaki magar care karti thi apni. Doctors ko bhi chahiye ke ye baataya karein ke jaldi aur time par ana chahiye checkup ke

liye, mujhe tou yahan kisi ne nahi bola ke app late ayi hain iss liye mujhe itna nahi pata tha. tabiyat se na andaza ho jata hai hai mujhe, mein test waighra nahi karwati forun, test bhi teesre mahine mein jaa kar karwati hoon confirm karne ke liye. Magar waise mere ghar mein meri nannd aida careless abhi unka first baby hai aur unke husband ko office se chutti nahi mil rahi thi tou who doctor ke paas nahi aa sak rahi thi magar phir jab se mein ne ana shuru kiya hai tou koshish karti hoon saath le aaoun. Unke tou 2-3 mah guzur jaate thay aur who doctor ke paas nahi aate thay.

Interviewer: tou, app ki nand kaha jaati hain abb?

Interviewee: who yahin mere saath month ke month services hospital hi aati hain, yahan gynae special mein nahi who doosre mein jaati hain, darasal government employees ke liye gynae special aur jo nahi hain unke liye dosra hai, woh shaid uper ki taraf hai mere khiyal se.

Interviewer: oh acha theek, tou kya app ne pehle baby ke time bhi test nahi karwaya tha?

Interviewee: jee mein ne pehle bhi test nahi karwaya tha, tabiyat se hi pata lag jata hai. Agar tabiyat ziada deir tak kharab rahe phir test kar leti hoon confirm karne ke liye.

Interviewer: acha tou waise family ya husband ki taraf se poori support hai ya who mana karte hain ke abhi doctor ke paas nahi jana ya zaroorat nahi

Interviewee: nahi waise tou nahi mana karte, bas yahi kehte hain ke eik dafa confirm ho jaye phir hi jana itni jaldi jaane ki kya zaroorat, uper se mein ne suna hai ke ye hospital wale bhi kehte hain ke teesre mahine tak ayein, koi card banta hai uss ke baad. Bus door se ana mushkil ho jata hai iss kiye thori problem hoti hai, phir zabardasti bhi hai key ahi aao (laughs a little).

Interviewer: theek hai theek hai, app ke family mein ya app ko nazar lagne ka dar tou nahi tha jis ki waja se app ne logon ko baad mein baataya aura ne mein bhi late ho gayi.

Interviewee: Jee jee, darasal mere jo susar hai unko problem hoti hai who kehte hain ke jaldi baatne ki zaroorat nahi hoti nazar lag jati hai. Asal mein meri jo saas hai na unn ke saath kuch hoya jis se unke baby ki death bhi hogayi thi bus uss ke baad se unhe dar lagta hai iss liye who mujhe bhi mana karte hain.

Interviewer: tou phir app ne kitni deir tak chupaya tha ya nahi baataya logon ko?

Interviewee: mein ne taqreeban yahi koi 5-6 mahine chupaya tha. Khandaan mein se kisi ko nahi pata tha bus first relation waloun ko pata tha. Balke iss liye deir bhi hogayi doctor ke paas ane mein kyun ke shuru shuru mein mere susar mana karte thay. (laughs while saying) alag tou hoon gayi hoon magar unki baat maan ni tou parhti hai.

Interviewer: acha tou app ne kisi kisam ka koi ultrasound karwaya hai ya koi test?

Interviewee: jee, ultrasound mein ne private se karwaya yahan se nahi karaya.

Interviewer: private se kyun karwaya?

Interviewee: private se iss liye waha se jaldi ho jata hai, itna time nahi lagta 2-3 din mein ho jata hai. Aur agar yahan se karoun tou who 2-3 mahinoun ka time dete hain. Oper se inko chahiye bhi jaldi hota hai, kehte hain 2-3 din mein report laa kar dekhaou tou itni jaldi yahan se tou nahi ho sakta tou private hi karwana parhta hai.

Interviewer: tou app ne taqreeban kitne ultrasound karwa liye hoon ge abb tak?

Interviewee: Umm mein ne koi 2-3 ultrasound karwa chuki hoon.

Interviewer: acha jaise ko pata hai Pakistan ke jaise haalat hain, paisoun ki tangi har insaan ko hi hojati hai. Tou app ne baataya ke private se ultrasound karwaye hain wahan tou ho ga bhi mehnga, app ko tou nahi aisa koi masla nahi hoya?

Interviewee: private mein mehnga tou hota hai magar hum jab jaate tou wahan uss time par who bachoun ko sikha rahe hote hain tou phir free ho jata hai. Hum jaate hi aise hi aise time par hain.

Interviewer: warna kitna ka parhta hai private se?

Interviewee: taqreeban 3000 ka eik test hota hai.

Interviewer: yahan pe kya fees hai, zaiada tou nahi?

Interviewee: yahan gynae special mein itni nahi hai bas thori si hi hai, doosre wale mein kitne lete hain andaza nahi. Delivery ke bhi ye log Zaida nahi parhta. Sasta bhi parta hai humein aise.

Interviewer: acha tou diet kaisi hai app ki? Koi aise khaas khaane hai jin se app perhaiz kar rahi hoon aur kya cheez ziada kha rahi hain?

Interviewee: bas phal fruit Zaida kha leti hoon ya fresh juice pe leti hoon kabhi kabaar, waise itna dil nahi karta. Meri saath eik cheez hai ke mujhe iss time par bhook bohat kam lagti hai iss liye ziada khane ka dil nahi karta?

Interviewer: aisa kyun lagta hai app ko?

Interviewee: eik tou choti beti ke saath busy bhi hoti hoon tou time kam milta hai aur bhook bhi kam lagti hai.

Interviewer: tou pehle baby ke time bhi kam bhook hi lagti thi app ko?

Interviewee: jee jee uss time bhi ziada bhook nahi lagti thi magar tab tou aisa hota tha ke daant parhti thi tou kha liya karti thi. Abb daant zara kam parhti hai kyun ke mein alag bhi hogayi hoon aur husband bhi ghar late aate hain, din mein beti ke ssath akeli hoti hoon iss liye itna dil nahi karta. Nashte mein bas parhata aur makhan kha lati hoon dupher ko kuch nahi khati.

Interviewer: acha tou who kya kaam karte hain?

Interviewee: mere husband teacher hain, subha mein teach karte hain aur shaam ko tuition parhate hain.

Interviewer: sahi, tou yahan doctors ne kisi kisam ke khane se mana tou nahi kiya hai?

Interviewee: nahi waise aisa tou kuch nahi kaha, kehte hai sab hi kha sakte ho. Mein khud waise koshish karti hoon ke bahir ka khana kam khaoun sehat ke liye acha nahi hota.

Interviewer: tou waise app ki family mein ya gaaoun mein aise tou nahi koi kehta ke itne baare hospital se ilaaj karwane ki kya zaroorat hai, hum ne tou aise hi bache kar liye thay

Interviewee: jee meri chachian woh aisa kehti hain, unhoun ne apne ghar ke paas se hi kisi chote hospital se karwaya tha, who bhi sirf delivery ke liye, waise ghar par hi ilaaj karte thay. Who kehte hain ke itni dafa hospital jaane ki kya zaroorat hai, hum tou nahi jaate thay. Choti choti baatoun par pareshaan kyun hoti ho, magar mere Husband support karte hain Alhumdulilah, mana nahi karte, bas shuru shuru ka kehte hain itni jaldi kya karna hai jaa kar.

Interviewer: sahi, tou gharwaloun ne baataya ho ya app khud se koi totka follow karti jo pehle bhi ghar ki khawateen ne istemal kiya ho aur kaha ho ke aise time pe ye zaroor karna chahiye

Interviewee: aisa koi khaas cheez tou nahi bus aisa hota hai ke jab mein ghar par kaam Zaida kar leti hoon tou body mein dard hota hai phir aunty ko bulwa leti hoon malish ke liye, woh teel se malish kar deti hain tou sukoon aajata hai.

Interviewer: acha sahi, tou waise app ko pregnancy mein kisi kisam ki bemari hoyi hai? Jaise flu ya bukhar hogaya..

Interviewee: bas mujhe meri pehli beti ki martaba appendix mein pain thi aur operation bhi hoya tha. Iss dafa bemari tou nahi hoyi koi magar pain kaafi hoti hai, doctors bhi keh rahe hain ke agar app se pain bardasht na hoya tou hamein jaldli operation karna parega. Magar dua maangti rehti hoon sab theek ho aur pain thori bohat bardasht kar leti hoon.

Interviewer: tou app ko kabhi saans ki kami tou nahi hoyi, ya aisa tou nahi ke saans jaldi charh jata ho?

Interviewee: jee jee saans ki kami tou mehsoos hoti hai balke iss liye ye log khoon ki thaili lag ate hain saans ki waja se.

Interviewer: tou kya preganancy mein hi hoti hai ya waise bhi ho jati hai kami?

Interviewee: nahi waise bhi hoti hai magar pregnancy mein Zaida hoti hai, dewai waighira leti hoon kabhi kabaar magar thori careless hoon itna yaad nahi rehta. Mujhe Zaida apne husband aur apni beti ka hota hai ke unka Zaida khiyal rakhna hai who log theek hoon ge tou mera khiyal rakh lein ge, apne maamle mein mein shuru se hi careless hoon.

Interviewer: chalein sahi, waise khiyal rakha karein aisi time par app ko apbi bhi poori poori care karni chahiye, app se mil kar bohat acha laga app ke taawun ke liye shukriya.

-(shakes hands)

Interviewee: jee jee sahi, mujhe bhi acha laga bohat bohat shukriya.

Interview 3

Interviewer: Assalamoalikum, Mera naam Serene Zehra hai aur ajj mein app se kuch sawal karoun gi app ki pregnancy ke hawale se. sab se pehle mein app se poochoun gi ke iss time ke doraan doctors ne app ko koi aisi cheez se parhaiz kaha ho, jo app iss time mein kam kha rahi hain?

Interviewee: perhaiz ka bas yahi bolo hain unhoun ne ke darasal mere gala ka masla araha tha, abb aise time par who dawai bhi nahi de sakte thay aur unhoun ne khud bhi kaha tha ke aap ne koi dawai nahi leni gale ke liye abhi. Phir ye bhi keh rahe thay ke agar Zaida masla hoga tou hum baby operate kar lein ge, aisa na ho dawai se baby pe asar ho jaye. Waise test waighira kar ke who check karte rahe hain gale ke haalat.

Interviewer: acha acha sahi, tou app ne ye care ya doctor ke paas ana kab se shuru kiya tha?

Interviewee: mein yahan taqreeban 7th month mein ayi hoon, abb aate saath hi inhoun ne check kar k eagle mah operation ki date de di hai.

Interviewer: acha theek hai, tou inn saat ya aath mahinoun mein app ko kisi kisam ki bemari tou nahi hoyi? Jaise pichle dinoun dengue bohat phela hoya tha

Interviewee: nahi nahi, Allah ka shukar hai bemari tou koi nahi hoyi, bas mera ye gala ka masla raha hai iss ke ilawa kuch nahi hoya.

Interviewer: tou kya masla hai gale ka?

Interviewee: ye dekhein, ye na meri garden pe ghutli se ban gayi hai, ye mere pehle baby ke baad hoya hai, uss se pehle nahi tha. Pehle mein koshish karti thi ke dawai se araam ajaye par koi farq nahi parha. Iss mein bas takleef hoti hai agar kuch thora sab hi Thanda ya khata kha loon. Iss ke ilawa kuch mehsoos nahi hota, bus doctors keh rahe hain ke app baby se farigh ho jaye phir iss ki bhi treatment shuru karte hain, iss ka bhi shaid operate hi hoga.

Interviewer: sahi, chalein inshAllah ye bhi theek hojaye. Waise app ko pata lag gaya hai ke larki ya larka ya socha hao pedaish tak ka intezaar kar loon gi?

Interviewee: nahi humein abhi bilkul nahi pata laga, mere husband kehte hain jo Allah pak de hamein qubool hoga.

Interviewer: tou jan ne ka shoq bhi nahi hai?

Interviewee: shoq tou hota hi hai thora bohat, hum ne pata bhi karwane ki koshish kit hi magar tab baby ulta tha, abb mere husband sakhti se mana karte hain, kehte hain jo hoga pata lag jaye ga aur Allah ka shukar hai.

Interviewer: acha sahi sahi, waise agar dekha jaye app yahan saatve mahine mein ayi jo bohat late hai, iss ki kya waja thi?

Interviewee: yahan mein iss liye late ayi kyun ke mein pehle private se karwa rahi thi, who chor kar ayi hoon iss liye deir hogayi.

Interviewer: tou private app kis mahine mein jana shuru hoyi thi?

Interviewee: private bhi mein koi chouthe (4) mahine se jana shuru hoyi thi

Interviewer: tou app ne private chra kyun?

Interviewee: private mein kharcha bohat ho raha tha, taqreeban lakh se uper chala jata tha aur sachi baat hai itna hum nahi de sakte. Yahan bas yehi hai ke private se kam parhta hai.

Interviewer: haan jee, mehngai tou har taraf bohat hogayi hai, acha tou jaise app ne kaha, private chouthe month se gayi, who bhi kaafi late hai, shuru mein jaise hi pata laga tab kyun nahi ayi doctor ke paas?

Interviewee: jaise hi pata lagta hai, forun ana mushkil hojata hai, shuru shuru mein yahi hota hai ke ghar par hi ilaaj kar lou abhi baby bhi chota hai, four ya five month se doctor ke paas chali jana. Mein ne apni beti ke time bhi aisa hi kiya tha aur Alhumdulillah koi masla nahi hoya tha. Dekhien agar banda shuru se ane lag jaye tou paise bhi yeh log itne maang lete hain, ohir woh bhi tou dekhna hota hai na. itne mehngi test waighira likh kar dete hain, uss mein alag paise lagte hai. Shuru ke mahine mein tou kuch nazar bhi nahi ata itna iss liye ane ka kya faida.

Interviewer: sahi sahi, tou app ko ye hospital door tou nahi parhta?

Interviewee: itna door nahi parhta, mein samnabaad mein rehti hoon 15-20 minute lagte hain, waise ye private se kareeb parhta hai iss liye hi private chorna parha.

Interviewer: sahi, tou private kyun jaati thi app?

Interviewer: bas mujhe kuch logon ne kaha tha ke private se karwao acha rahega, wahan doctors bhi bohat ache hote hain aur who private clinic mere ghar ke bilkul paas tha, mein akeli bhi jaa sakti thi. bas issi liye chali gayi thi ke asaani hai.

Interviewer: sahi, tou yahan ane mein kisi kisam ki pareshaani tou nahi hoti? Raasta saaf milta hai?

Interviewee: nahi raasta bas theek hi hota hai, bohat saaf nahi, magar ana tou parhta hai (smirks). Mein husband ke saath bike par hi ati hoon.

Interviewer: sahi theek, tou dekhein inn hallat mein kuch khawateen hain, jin ko nahi maalom, ke sahi waqt doctor ke paas ane ka kya hai, aur agar late ho jayein tou kuch aisi problems ho sakti hain jin se maa aur bache dono ki sahte ko khatra hota sakta hai, iss liye time par ana zaroori hotra hai take ke app ko pata ho app ke baby ki sehat kais hai? App ke khiyal mein hm ye message aage aur khawateen tak kaise pohuncha sakte hain?

Interviewee: jee, app ki baat tou theek hai, magar jaise mein yahan 7th month mein ayi, issi tarah har kisi ke koi na koi masle hote hain, majboorian hoti hain. Deir sawer ho jati hai. Aur doctors ko chahiye ke iss cheez ki aagahi phelayein. Inn houn ne aisi koi cheez nahi baatayi.

Baki yahi hai ke check-up zaroor karwana chaahiye kisi ki baatoun mein na ayien, log aksar mana karte hain magar agar husband supportive hoon phir masla nahi hota itna.

Interviewer: theek hai, tou yahan bhi doctors test waighira likh kar dete hoon ge, aur mehngayi ki waja se qeematein bhi ziada hogayi hai, tou is ski waja se koi pareshaani tou nahi hoyi?

Interviewee: haan jee test ye log taqreeban har din hi koi na koi likh kar dete hai, bahir ya private se karwayein, woh kaafi mehnga parhta hai phir hum yahan se karwa lete hain, yahan ki lab mein time Zaida lagta hai magar kya karein, yahan waise bhi ye log discount bhi dete hain. bahir mehnga bohat hai. Mujhe ye log gale ke bhi test likh kar dete hain, woh yahan se nahi hota bahir se hi karwana parhta iss liye itna afford nahi kar sakte.

Interviewer: sahi sahi, tou app ko yahan ke doctors se poori tasali hai?

Interviewee: jee shuru shuru mein tou itna nahi pata tha itna, mujhe jaan pehchaan mein, kuch Mohole waloun ne kaha ke yahan sab ache se ho jata hai yahan jao. Magar abb theek hi lagta hai doctors ache hain.

Interviewer: acha tou, kuch khaandanoun mein aisa hota hai ke woh ghabrate hain baatane ne ke pregnancy ke baare mein, kuch ko ye dar hota hai ke nazar lag jati hai iss liye balke shaid unko aane mein bhi deir ho jaye. App ke saath tou nahi aisa kuch hoya tha?

Interviewee: mere susraal mein aisa nahi hai magar mere mehke mein hai, mere ami abu kehte thay ke abhi na baatana kisi ko nazar lag jaye gi. Mere gale ki waja se sab ko Zaida pareshaani hoti thi. Mere abu kehte thay ke jab meri beti hoyi thi, tumhe doctors ne koi aisi dawai de hai jis ki waja se ye hoya hai (laughs).

Interviewer: sahi, tou yahan admit hoyi hain?

Interviewee: jee mein yahan Monday se admit hoyi hoon, woh abhi discharge nahi kar rahe, keh rahe hain 2-3 mein operate ki date ajaye gi. Mere husband bhi saath hi hain, kal se bahir khare hain.

Interviewer: sahi, tou app ne inn mahioun mein kisi kisam ki warzish ki, jaise kamar mein dard ho jata hai ya swelling ho jati hai uss ke liye?

Interviewee: nahi aisa tou kuch nahi kiya, kehte tou hain ke wazan nahi uthana chahiye rest karo, walk karo, pani Zaida piyo magar dekhein ghar ki saari zimadari mere par hoti hai, kaam karna bhi zaroori hota hai aise mein rest kaise karoun. Beti abhi kaafi chioti hai uss ko bhi dekhna hota hai. Bas kabhi jab bhi kamar mein dard hota hai tou thori deir laet jati hoon. Abhi bhi end tak saara kaam kar ke aayi hoon, himmat nahi haari.

Interviewer: chalein, ye tou achi baat hai magar rest bhi karna zaroori hai, ane wale baby ka bhi khiyal karna hota hai na. acha koi khaas diet inhoun ne baatayi hai app ko ya koi app khud se ghar par le rahi hoon?

Interviewee: diet mein bas yahi baataya hai ke paani Zaida piyo, doodh piyo, phal fruit Zaida khaya karo.

Interviewer: tou app ye sab le rahi hain?

Interviewee: jee koshish tou karti hoon, har waqt nahi liya jata. Mujhe doodh bilkul nahi pasand tou uss mein mushkil hoti baki kha leti hoon jab time mile.

Interviewer: acha app ye baatayein ke jab app pehle check up ke liye aati thi tou aisa hota hai ke kabhi kabaar rush hone ki waja se aur aisi halat mein Zaida betha bhi nahi jata tou app kabhi iss ki waja se chali tou nahi gayi soch kar ke abhi rush bohat hai agli dafa aajoun gi.

Interviewee: jee rush tou bohat hota hai, magar mein time se ajaya karti thi take ye log mujhe time se free kar dein. Aise wapis jana sahi nahi, pehle hi petrol laga kar aate hain hain, phir kaam tou poora karna chahiye na.

Interviewer: acha sahi, tou jaisa app ne baataya ke app apne husband ke saath ati hain, aur kabhi aisa hoye ho ke app ke husband ne kisi aur zaroori kaam se jana hai aur unn ke paas time nahi, tou app akele ane ke chakar mein app ne doctor ke paas na ayi hoon.

Interviewee: aisa bohat kam hota hai, mere husband private job karte hai tou kabhi kabaar masla hota tha tou woh mujhe choti Bhabhi ke saath bhej diya karte thay. Magar abb kyun ke delivery kareeb hai tou inhoun ne leave le li hai take masla na ho.

Interviewer: sahi, tou app ko family aur husband ki poori support hai, mana tou nahi karte ane se?

Interviewee: jee, husband tou Alhumdulilah poori support kar rahe hain, family mein mere saas sasur nahi hai unki death hogayi hai, bare tou woh hi hote hain, bus abb jeth aur jethani hain, bus theek hain unko kabhi kabaar masla hota hai magar kya karein ghar tou nahi beth sakte na.

Interviewer: kyun who kya kehte hain?

Interviewee: darasal meri jethani ka eik hi beta hai aur inhoun ne ghar par hi pedaish di woh doctor ke paas bohat kam gayi, tou mujhe bhi yahi kehti hain ke inta jaa kar kya milta mere beta bhi tou theek hai bilkul, saath rehte hain tou baatein sun ni parhti hain (laughs a little).

Interviewer: acha tou app ko app ke pehli pregnancy aur second second pregnancy mein koi wazay farq mehsoos hoye hai?

Interviewee: aisa hoye tha ke, meri beti ke time mera achanak se operation ho gaya tha mujhe bilkul idea nahi tha. Mein ghar par thi aur meri ammi ne kaha ke tumhara time agaya hai, aur mein hospital bhagi. Wahan jaa kar doctor ne kaha humein forum operate karna parega. Uss time par mere gale ka bhi koi masla nahi tha, ye baad mein hoye. Abb ke time kehte hain ke baby ka sar bhi ulta hai aur gale ka bhi masla araha hai iss liye operate hi karna parega. Bas iss dafa mujhe gale ki tension bohat rahi hai, pichli dafa aisa kuch nahi tha.

Interviewer: dono time mein pain kab Zaida hoyi app ko?

Interviewee: pain tou dono time hi kaafi thi, magar Alhumdulilah mera yeh hai ke mein pain bardasht kar leti hoon kaafi had tak, iss liye pain mujhe dono time taqreeban eik jitni hi lagi hai. Kabui kabaar ziada ho jati hai magar khair hai kya kar saktein hain.

Interviewer: tou iss ke ilawa koi aur farq tou nahi mehsoos hoye app ko?

Interviewee: iss ke ilawa tou nahi, haan bas yeh hoye tha ke pehle baby ke time mein bohat healthy thi, aur iss dafa yeh hai meri weight uper hi nahi jaa raha. 64-63 tak hi hai iss se uper nahi jaa raha. Aur pehle khorak Zaida khayi jaati app ki baar aisa lagta hai ke bhook hi nahi lagti.

Interviewee: acha mein ne suna hai ke iss time pe bhook shaid Zaida lagti hai

Interviewee: (smiles) haan jee, magar pata nahi mere saath kya masla hai bhook jaise urh gayi ho, bilkul nahi lagti. Haan kabhi kabhi aisa lagta hai ke abhi kuch khane ko mil jaye forun aur agar nahi milta phir mein ne khana hi nahi hai.

Interviewer: kya karti hain agar eik dum se raat ko bohat bhook laage?

Interviewee: (laughs), mein ne apne paas koi na koi biscuit rakha hota hai, jab Zaida lagti hai tou uth kar kha leti hoon. Mein ne apna intezam kiya hota hai.

Interviewer: sahi yeh bhi theek hai, acha kabhi kabhi aisa hota hai ke insaan ka abhi irada nahi hota aur achanak se pata lagta hai ke app pregnant hai, aur phir is ski waja se doctor ke paas mein bhi deir ho jati hai, app ke saath tou nahi aisa kuch hoye?

Interviewee: jab mere gale ka masla shuru hoye tha, tab mujhe lagta tha ke gale ki waja conceive karna bohat mushkil hoga, hamari koshish tou hoti thi magar ho kuch nahi paa raha tha. Doctor ne dawai waighira likh kar di thi ke pehle app ye khayein, eik din bas achanak se hi pata laga ke Allah ne rehmat kardi, uss se pehle hum bohat pareshaan thay. Hamara irada tout ha magar aise itni achanak ho jaye ga iss ka pata nahi tha. Mujhe dosre mahine mein pata laga tha, phir shuru shuru ke mahine mein ne ghar par hi guzare, pehle beti ke baad kuch cheezoun ka andaza bhi tha iss liye.

Interviewer: sahi sahi, chalein bohat acha laga app se mil kar app ke taawun ka bohat shukriya. Allah hafiz

Interviewee: (smiles) jee koi masla nahi khuda hafiz.

Interview 4

Interviewer: Assalamoalikum, Mera naam Serene Zehra hai aur ajj mein app se kuch sawal karoun gi app ki pregnancy ke hawale se. sab se pehle app mujhe ye baatayein ke app ghar par kisi kisam ki warzish waighira kar rahi hain? Aisi time mein aksar kamar mein dard ya swelling waighra ho jati hai, tui uss ke liye kuch karyi hain?

Interviewee: haan jee, kamar mein tou bohat dard hota hai, wazan ki waja se phir meri bohat buri halat ho jati hai, taangoun mein se jaan si nikalna shuru ho jati hai, chakar ana shuru ho jate hain. Aur agar Zaida kaam kar lonn tou paaoun mein swelling ho jati hain magar medicine mein koi nahi leti, ignore kar deti hoon.

Interviewer: tou kya karti hain app phir? Doctor ko baataya?

Interviewee: karti tou kuch khaas nahi nahi koi na hi koi nahi warzish karti hoon, bas jab bhi dard hota hai phir apne app ko kaam mein laga leti hoon, uss par se tawajah hata leti hoon. Doctor ne kya karna haath mein dawai ka parcha pakra dena hai, phir lane mein bhi masla hota hai konsa forum ajati hai.

Interviewer: sahi, tou app ko inn mahinoun mein kisi kisam ki bemari tou nahi hoyi? Jaise flu ya bukhar

Interviewee: nahi, Alhumdulillah aisa kuch nahi hoya, theek hi rahi hoon.

Interviewer: acha tou app ko waise pata lag gaya ke larki hai ya larka?

Interviewee: jee pata lag gaya hai, larka hai MashAllah se.

Interviewer: MashAllah, tou app ko shoq tha pata karwane ka ya family ne kaha pata karwao?

Interviewee: jee shoq tou tha, magar aisa tha ke hum ne socha pedaish tak ka intezaar kar lein ge. Yahan doctor se khudi ultrasound kar ke baata diya ke larka hai hum ne nahi bola tha inn se, magar jo bhi hai Allah ka shukar hai.

Interviewer: acha sahi, tou app ne pehle baataya tha ke app se yahan 7th month mein ayi hain, itne late ane ki kya waja thi?

Interviewee: waja ye thi ke mein ne apna saara kaam yahi se karwana tha aur ye kehte hain ke medical card banwayein, card ke through hi sab hota hai yahan, phir inhouse ne kuch test waighra likh kar diya ke ye karwayein app phir card banega. Test karwate karwate deir hogayi. Sab kuch itna mehnga hogaya hai.

Interviewer: tou uss se pehle app kabhi doctor ke paas gayi thi?

Interviewee: nahi uss se pehle nahi gayi, pain hoti thi magar mein bardasht kar liya karti thi. Mein ne uss se pehle bas ultrasound hi karwaye thay aur kuch nahi. Check-up waighra kuch nahi karaya.

Interviewer: tou kya app ko zaroorat mehsoos nahi hoti thi ya kya masla tha jo app doctor ke paas nahi ati thi?

Interviewee: zaroorat tou mehsoos hoti thi, bas ye tha ke mein apni saas ya husband ko Zaida baatati nahi thi ke woh ye na samjhein ke isse har din koi na koi masla rehta hai.

Interviewer: kyun woh kuch kehte hain app ko?

Interviewee: aise kehte tou nahi bas baatein karte hain, mujhe acha nahi lagta, mein phir yahi sochti hoon ke agar eik cheez abhi bardasht mein hai tou kar leni chahiye, uper se mera ye second baby hai tou mujhe andaza bhi bhi tha ke aisi cheezein hoti rehti hain. Iss liye Zaida sar par nahi liya.

Interviewer: tou kya pain app ko bohat hoti hai?

Interviewee: jee pain tou bohat hoti hai, jaise period ki dard hoti waisi hoti hoti, kaafi Zaida hoti hai, bus yeh hai ke pehle baby ke time alag pain thi iss dafa alag hai.

Interviewer: pehle kya alag tha aur iss dafa kya alag laga app ko?

Interviewee: pehle tou itna mehsoos hi nahi hota tha, aur tab itni pain hoti bhi nahi thi. Iss dafa tou bohat pain hoyi hai, aur taqreeban eik hafta chalti hai phir uss ke baad taangoun se jo jaan nikalna shuru hota hai. Aise dil karta hai ke abhi kuch ho jaye mujhe. (laughs).

Interviewer: sahi, tou jaise Pakistan ke halaat hain, aur mehnagai har jaga hi taqreeban bar gayi hai, tou aisa tou nahi hoya kabhi ke mehngayi ki waja se bhi app ne late ana shuru kiya ho ke paise bohat lag jayiein ge.

Interviewee: jee jee aisa hi hai, paise tou bohat lag jaate hain, phir mere husband yahi kehte hain ke jo petrol kharch kar ke mein ne wahan le kar jana hai uss se behter hai mein kaam par chala jaaoun. Abb kya karein ghar bhi tou dekhna hota hai na, who yahi kehte hain ke koi nahi choti moti medicine kha lou dard ke liye abhi khair hai. Iss liye mein Zaida zidd bhi nahi karti ke mujhe le kar jao, halaat hi kuch aise hain.

Interviewer: oh acha acha, tou app rehti kahan hain?

Interviewee: mein yahan tajpur mein rehti hoon.

Interviewer: tou hospital app ko door parhta hai ya kareeb?

Interviewee: kaafi door parhta hai, taqreeban samjhein ke adha pona ghanta lag hi jata hai.

Interviewer: tou yahan ka raasta waighira saaf milta hai app ko?

Interviewee: raasta itna saaf tou nahi hai, jaise yahan hospital ke kareeb wala kuch behter hai magar mere ghar ke paas se bohat kharab hai, wahan kaafi jump lagti hai, aur jab jump lagti hai tou pain start ho jati hai.

Interviewer: tou app yahan ati kaisi hain? Kis sawari pe aati hain?

Interviewee: mein rickshaw par aati hoon, rickshaw ke karaya bhi bihat lag jata hai. 1000 rupay lag jatay hai araam se. iss liye yahi hota hai ke bhai ghar hi theek hai (laughs).

Interviewer: sahi sahi, tou app ki family ya husband support karte hain app ko ke doctor ke paas jana chahiye..

Interviewee: nahi bas itni nahi thori thori normal si, kya karein us ski khud ke bhi itni amad nahi hai na, aur mein bojh bhi nahi daalna chahti.

Interviewer: kya kaam karte hain app ke husband?

Interviewee: ye laptop pe typing ka kaam karte hain, itne paise kahan hote hain iss mein.

Interviewer: acha acha, tou dekhein kuch khaandanoun mein nazar lagne ke masle hota hai, who pasand nahi kart eke doctor ke paas jao, dar hota hai ke nazar na lag jaye. App ke ssath hoya tha aisa kuch?

Interviewee: meri saas bohat veham karti hai, who kehti thi ke kya zaroorat hai, logon ki nazaarein lag jati hai. Logon mein jaane se banda nazroun mein ajata hai, apne cover kar ke jaya karo ye sab bolti thi woh. Aisa tha ke mere pehle baby ke time unhoun ne mujhe bari mushkil se doctor ke paas ane diya, kyun kyun pehle bacha hou tou dar Zaida lagta hai. Unko tha ke kisi ko baatana ke bajaye banda apni khudi care karle woh sahi hai. Bari hain tou unki baat bhi maan ni parhti hai. Hala ke mere husband aise nahi, woh itna veham nahi karte unko bas waise hi hita hai ke kya karna hai itna door jaa kar, ghar par hi kuch karlo.

Interviewer: tou app ne khaandaan mein sab ko baataya tha?

Interviewee: nahi nahi saas nahi na baatane de thi, khaandaan mein kisi ko nahi pata, bas yeh hai ke maa ke saath tou bacha phir har dil ki baat kar leta hain an tou bas meri ammi ko pata hai iss ke ilawa kisi ko nahi.

Interviewer: acha sahi, aksar aisa bhi hota hai ke abhi insaan ka irada nahi hota aur achanak pata lagta hai ke app pregnant hain, phit kabhi kabaar iss liye bhi deir ho jati hai ane mein. App ke saath tha aisa kuch?

Interviewee: jee, mujhe nahi pata tha ke mein pregnant hoon, mujhe laga blood ki waja menses nahi arahe, magar time ke saath jab tabiyat Zaida kharab hoyi aur kuch khane ko bhi nhi dil karta tha phir mein check-up ke liye gayi tou pata laga ke mein pregnant hoon, mujhe laga ke Zaida se Zaida teesra mahina hoga, magar doctor ne baataya ke app ko choutha mahina khatam ho kar paanchva mahina lag chuka hai.

Interviewer: tou phir iss ka matlab hoya ke app ka abhi bache ka irada bhi nahi tha?

Interviewee: jee bilkul abhi koi irada nahi tha, achnak hi howa jo howa.

Interviewer: koi aisi khaas cheezein hain jo app ne apne pehle bache ke time kiya ho aur abb second time chor di ho?

Interviewee: um nahi aisa kuch khaas tou nahi hai, shaid teesre ki martaba kuch change ho (laughs), abhi tou filhaal wohi same routine hai.

Interviewer: tou dono pregnancies mein app ko koi wazay farq mehsoos hoya hai?

Interviewee: mujhe blood ki bohat kami rehti hai, tou pehle baby ke time bhi mein bohat weak ho gayi thi, taqrebaan 8 botlein blood ki lagti hain, dono time aisa hi hoya hai.

Interviewer: app yahan kab se admit hain?

Interviewee: mein yahan kal ayi thi, inhoun ne kuch test lilkh kar diye hai, blood ka arrange karwaya, aaj phir inhoun ne blood lagaya mujhe.

Interviewer: tou abhi kitni deir aur rehna hai app ne?

Interviewee: pata nahi abhi ye kuch baata hi nahi rahe, mein kaha tou hai ke mujhe discharhe kar dou magar keh rahe hain ke abhi nahi.

Interviewer: tou doctors ne bola hai ke rest karo ya ye kaam Zaida na karo?

Interviewee: jee bas who yeh kehte hain ke tumhe inti weakness hai, taaqat wali cheezein khaya karo. Ye jo saans charhta hai ye bhi ache baat nahi. Apna khiyal rakha karo. Magar mein ne tou saare ghar ke kaam karne hoote hain, bas yeh hai ke khare ho kar Zaida kaam nahi kar sakti taangoun mein dard shuru ho jati hai.

Interviewer: sahi sahi, tou aisa hoya hai ke app yahan check-up ke liye ayi hoon, rush ki waja se baari se pehle uth kar chali gayi hoon aur doctor ko naa dekhaya ho?

Interviewee: jee itnezar tou bohat karna parhta hai agar check-up ke liye aao, mujhe char paanch ghanta bhi intezaar karna parha hai, magar Zaida nahi eik adhi baar hi hoya hai aisa, dekhein iss haalat mein Zaida betha bhi nahi jata aur jab pain start hoti hain tou condition kaafi kharab ho jati hai. Magar meri koshish hoti ke itne door se ayi hoon tou kaam kar ke jaaoun.

Interviewer: waise iss hospital mein ane ka mashwara kis ne diya tha?

Interviewee: first baby mera private hoya tha, uss mein paise kaafi lag gaye thay, pehle pehle time than a itna andaza bhi nahi tha. Abb phir yahan ayi hoon, mere susraal wale bhi tahi kehte hain ke jaana hai tou yahin jao, saasta tou hai pehle se.

Interviewer: tou app ke ghar ke paas koi acha hospital nahi hai?

Interviewee: nahi, eik tou jo hai mujhe pasand nahi, wahan ke doctor baare badtameez hain, meri behn jaati thi uss ne baatya tha, aur dosra jo hai thora aage jaa kar, woh private hai tou paise bohat lete hain. Yahan ye hai ke door tu hai par sasta hai. Ghar ke kareeb koi acha sasta hospital hota tou yeh masle na hote.

Interviewer: sahi sahi, tou app yahan kis ke saath ati hain?

Interviewee: mein yahan kabhi apne husband ke saath aati hoon, ya kabhi apni ammi ke saath.

Interviewer: tou aisa kabhi hoya hai ke husband bhi na hoon aur mmi bhi na hoon le kar jaane ke liye tou app ne akele an eke chakr mein khud bhi miss kara diya ho.

Interviewee: jee dou baar hoya hai aise phir mein kehti hoon koi nahi next Friday chali jaoun gi. Yahan sirf mangal aur jume ko aate hain na. akeli mein iss liye nahi aati ke hum kabhi aise akeli bahir nahi nikle. Agar ye log na hoon phir mei nahi ati kyun key ahi hota hai akele aise bahir nahi jana.

Interviewer: tou yahan ke doctors se app ko poori tasali hai?

Interviewee: jee jee tasali hai tabhi bethe huye hain, yahan hair thori deir baad doctor akar baby ki movement dekhti rehti hain, inches tape se length dekhte rehte hain baby ki ye hai ke mein yahan se bohat agree hoon, tasali rehti hain ke kuch hoga tou ye dekh lein gi.

Interviewer: sahi bilkul, dekhein jaise app yahan late ayi, kaafi aur aisi khawateen hain, jo late aati hain aur unhe maalom nahi hota hai late ane se kaafi complication ya infection ho sakte hain jin se maa aur bache dono ki sehat ko khatra ho sakta hai, jab tak app ayein gen ahi doctor ke paas tou pata kaise laage ga ke app ko bacha kaisa hai. App ke khiyal mein hum yeh agahi aur logon tak kaise pohacha sakte hain?

Interviewee: jee mujhe andaza tou hai iss sab ka magar kya karein kabhi kabhi insaan majboor hota hai, apni marzi se late nahi ati, ghar mein sou masle aur hote hain, phir yeh sab itna zaroori mehsoor nahi hota, baki yeh hai ke jis doctor ke paas ayein unhe bhi baatana chahiye kea ne ka sahi waqt kya hai, jaise mujhe tou kisi mein nahi kaha ke app late ayi hai ya app ko time par ana chahiye. Doctor bolein ge tou pata chale ga na.

Interviewer: bilkul sahi keh rahi hain app, acha aisa hota hai ke ghar wale koi khaandani totka dete hoon, ke doctor ke paas jaa kar kya karna hai, ye karo tou theek ho jao gi?

Interviewee: jee jee bohat, meri saas hamesha yahi kehti rehti hain ke hum ne apne time par araam se khare khare bache kar liye thay ajj kal tou larkioun mein jaan hi nahi hai, hum kahan jaate thay doctor ke paas, ghar wale jo kehte thay wohi kar lete thay aur Allah ka shukar bache bhi theek hi nikle. Ajj kal ki nasal tou bigar gayi hai. Bas subha shaam yahin daant sun ni parhti hai (laughs).

Interviewer: Chalein sahi, App ke taawun ka ka bohat bohat shukriya, acha laga app se mil kar

Interviewee: jee achi baat cheet hogayi (laughs)

Interview 5

Interviewer: Assalamoalikum, Mera naam Serene Zehra hai aur ajj mein app se kuch sawal karoun gi app ki pregnancy ke hawale se. sab se pehle app mujhe ye baatayein ke app ko inn mahinoun mein kisi kisam ki koi bemari waighira hoyi hai?

Interviewee: jee bas mujhe sugar, aur tou kuch nahi hoya bas sugar ka hi issue hai wohi level pe nahi ati.

Interviewer: tou sugar ke liye koi dawai le rahi hain?

Interviewee: dawai kya, bas insulin lagi hui hai, mein ne kaha tha ke mein mein ne ghar par nahi lagwani iss liye insulin yahan lagti hai

Interviewer: sahi, tou app ghar par kisi kisam ki warzish kar rahi hain? Jaise kamar mein dard ya swelling ho jati hai uss ke liye.

Interviewee: aise warzish tou koi khaas nahi karti bas walk kar leti hoon khana kahne ke baad kabhi kabaar jab time mile ya dard Zaida mehsoos ho. Ye log walk ka bas iss liye kehte hain ke insulin check karni hoti hai?

Interviewer: kitni dier walk karti hain?

Interviewee: taqreeban 20-25 minute kar leti hoon, hamesha nahi ho pata par kar leti hoon. Who bas iss liye karni hoti hai ke sugar level pe ajaye.

Interviewer: acha app se baataya ke app yahan 8th month mein ayi, itni deir se ane ki kya waja thi, iss se pehle kyun nahi ayi?

Interviewee: iss se pehle mei private karwa rahi thi na, who chor kar ayi hoon, uper se yahan ilaaj karane ke liye card banwana parhta hai. Uss ke liye ye kuch test likh kar dete hai uss ke baad card banta hai.

Interviewer: tou private app ne kis mahine mein jana shuru kiya tha?

Interviewee: private mein gayi thi koi chouthay mahine tak.

Interviewer: wahan shuru mein kyun nahi gayi? Jaise hi pata laga tab kyun nahi gayi?

Interviewee: woh mere ghar par kuch masle hogaye thay, pehle dou mahine tou mujhe pata hi nahi laga, teesre mahine jab mein ne stick par check kiya tou pata laga. Mein ne ghar par kisi ko nahi baataya tha, meri saas ko nahi maalom tha, pehli beti ki martaba bhi uss ne bara masla kiya tha, iss liye mein ne nahi baataya, kuch time baad use pata lag gaya aur uss ne mijhe maarna shuru kar diya ke tum kuch chupa rahi ho hum se jhoot bol rahi ho, mujhe baatao phir uss ne mujhe ghar se nikal diya. Abb hum rent par rehte hain aur mere shohar berozgaar hai.

Interviewer: tou app ko pata laga hai ke iss dafa larki hai ya larka?

Interviewee: mein ne poocha tout ha magar keh rahe hain abhi confirm nahi pata

Interviewer: tou app ko shoq hai waise pata karne ka ya nahi?

Interviewee: shoq tou hai magar thora thora dar bhi lagta hai kabhi kabhi, bas yahi dua hai Allah se ke beta ho. Bohat sehna parhta hai warna.

Interviewer: app ko nazar waighira ka dar tha? Ke nazar na lag jaye iss liye bi na baataya ho?

Interviewee: pehli inhoun ne jab beti ke time pe masla kiya tha na tab se mujhe nazar ka dar laga tha, inko masla tha ke beti kyun hoyi beta chahiye tha, second time yahi dart ha ke ainvayi kuch parh kar na phoonk de mere bache par iss liye nahi baataya magar shuru mein tou mujhe khud bhi nahi pata than na

Interviewer: chalo Allah khair kare, tou app ne private kyun chora?

Interviewee: private bohat mehnga par raha tha, eik eik test aur medicine 7000 ka likh kar dete thay ya uss se bhi uper, fees bhi bohat lete thay, itne paise tou nahi hain hamare paas magar idhar bhi karcha tou hai pata nahi bare operate par kya kharcha ata hai

Interviewer: sahi sahi, tou pehle bache ke time app kahan gayi thi?

Interviewee: pehli beti ke time mein ganga ram gayi thi, wahan ka mahol bilkul pasand nahi aya mujhe iss dafa phir thora private karaya aur phir yahan agayi. Mere na jism ka thora masla ban gaya tha, iss liye wahan gayi, bachpan mein thora jal gaya tha, phir unhoun ne operate hi kiya iss dafa bhi keh rahe hain ke operate hi hou ga.

Interviewer: tou app kahan rehti hain?

Interviewee: adha pona ghanta door hai ghar

Interviewer: ye tou door parhta hoga app ko

Interviewee: jee door tou bohat parhta hai, pichle dinoun mein check-up ke liye bari mushkiloun se ayi, petrol waise hi aasmaan pe pohnc hoya hai. Ajj tou mei apni ammi ke ghar se ayi hoon.

Interviewer: woh kareeb rehti hain?

Interviewee: haan jee, mere ghar se tou kareeb hi parhta hai, woh ye sadar se aage ghaziabaad mein rehti hain.

Interviewer: tou app ati kaise hain? Apni sawari hai?

Interviewee: cousin ki bike hai uss par aati hoon husband ke saath. Pehle apni bike thi magar jab se rent par aye hain tou bech di.

Interviewer: tou waise app itni door se jab aati hain tou yahan ke doctors pasand hain? Tasali hai inn se?

Interviewee: (pauses for a while) bas ye mujhe insulin laga rahe hain 2-3 din se apne paas hi rakha hoye hai mein ne inn ko bola bhi hai ke meri beti abhi choti hai, woh mere ya apne papa ke beghair nahi rehti magar keh rahe hain insulin lagani hai pehle. Yahan ye log insulin de bhi mehngae rahe hain, mein dou bottlein khareed ti hoon bahi se pachis sou ki woh yahan laa kar lagwati hoon. Bas ye hai ke yahan check who log har thori deir baad karte hain khiyal rakhte hain hala ke mere husband kehte hain kea mmi ke ghar ke paas koi indus hospital hai wahan chalet hain magar mujhe ye hai kea bb yahan ka card bhi banwa liya hai tasali bhi hai, iss time par uth kar nahi jana.

Interviewer: app ko waise iss hospital mein ane ka mashwara kis ne diye?

Interviewee: meri choti behn ke dono bache yahan hoye hain uss ne bola tha ke yahin ajao, ye ache hain wazan waghira bhi karte hain ache se check karte hain.

Interviewer: Paksitan ke haalat ki waja se jahan mehngayi har jaga ho gayi hai app ko bhi mushkil hoyi ho gi?

Interviewee: jee bikul bohat hoyi hai, jaise mein ne baataya mein ne private iss liye chora tha ke mehnga bohat tha, dawaian aur bhi mehngi aati thi, kahin bhi jao paise utne hi lag jaate hain.

Interviewer: app ke ghar ke paas koi aise hospital nahi tha jahan app jaa sakti?

Interviewee: jab mein susral mein rehti thi tou ganga ram kareeb parhta tha iss liye pehle bache ke time wahin gayi, mujhe wahan ka ilaaj pasand nahi aya tha tou mein ne pehle hi socha tha ke agli dafa kisi aur hospital mein jaaoun gi. Uss ke baad abb jahan rent par rehte hain wahan se private wala kareeb parhta hai magar who chorna para.

Interviewer: ganga ram mein aisa khaas kiya tha jo app ko pasand nahi aya?

Interviewee: inhoun ne na mera operate kharab kar diya tha, eik din mera operate kiya aur agle din discharge kar diya bas eik hi din rakha mujhe. Phir kaha ke ghar jaa kar zakham drip ke paani se dhoona hai mein ne ghar jaa drip ke paani se dhoti rahi tou kuch deir baad khul ke phat gaya mera zakham, phir mein ne private se medicine li aur uss ke baad jaa kar kahin thee khoya mera zakham.

Interviewer: sahi sahi, tou app ko inn dono pregnancies ke doraan koi wazay farq mehsoos hoye hai?

Interviewee: farq tou bas yahi laga tha ke pehle baby ke time meri halaat kuch kharab ho gayi thi tou mera inhoun ne jaldi operate kiya ke bache ki dharkan ka masla hai, iss dafa Allak ka shukar hai abhi tak koi masla nahi. Baki yahi hai ke mera mera dedh saal ka farq hai dono bachoun mein, kehte hain ke agar pehle operation ho tou taqreeban 3 saal ka farq dena chahiye. Iss waja se shuru shuru mein mere taangoun mein aur kamar mein bohat shadeed dard rehta tha, pehle aisa nahi tha. Pehle mujhe bleeding bhi bohat hoyi thi.

Interviewer: oh acha acha, tou jaise app ne pehle baataya ke shuru ke time mein app ko pata bhi nahi tha ke app se pregnant hain, aisa tou nahi tha ke abhi itni jaldi bache ka irada nahi tha iss liye bhi doctor ke paas ane mein deir ho gayi?

Interviewee: haan jee, abhi meri pehli beti ko dedh saal hi hoye tha, aur operation ki waja se mein ne socha tha 3 saal baad sochoun gi, magar yeh tou Allah ke kaam hote hain hum kya kar saktein.

Interviewer: theek, tou aisa hota hai ke kabhi app ke husband masroof hain ya unhe kisi aur kaam se jana hai tou who mana kar dein ke mein aaj nahi le kar jaa sakta.

Interviewee: who kam hi aise kehte hain kyun ke unhe pata hai ke unse pehe mein hi mana kar doon gi (laughs). Woh nahi kehte aise shaid eik hi dafa aisa hoye ho ke unhoun ne mana kiya ho. Mein tou abhi bhi nahi arahi thi phir inhoun ne bola ke app ko dakhil kar ke operate karna hai iss liye ana para.

Interviewer: tou app kyun mana karti hain?

Interviewee: mujhe bas itni door se ana mushkil lagta hai who bhi bike par beth ka rana iss halat mein. Thak jati hoon iss se behtar hai ke ghar bethi rahoun, pehli bache ke baad mujhe andaza hogaya hai kaafi cheezoun ka, uper se beti ko chor kar bhi nahi aya jata har waqt.

Interviewer: yahan kab se admit hoyi hain?

Interviewee: kal se ayi hoyi hoon, who keh rahe hain peer wale din operate hai.

Interviewer: aise koi khaas ya zaroori cheezein hain jo app ne apne pehle baby ke time kiye hoon aur abb ki dafa chor diya ho?

Interviewee: pehel baby ke time mein diet poori leti thi, sab khati thi uss waqt nahi tha pata mujhe ke sugar hai, meri ammi ko hai par iss baat ka nahi pata tha ke mujhe bhi hai. Uss chakr mein kaafi kuch chorna para, jaise chawal bilkul chor diye hain mein, pheki chai aur pheka doodh peti hoon, ghar ki roti khani hai meetha kuch bhi nahi khana. Pehle mujhe nahi tha pata ke sugar mein kitna parhaiz hota hai iss liye beti ke time tou mein ne koi parhaiz nahi kiya sab khaya tha. Agar mein phele parhaiz kiya hota thora tou aaj sugar ke ye halat na hoti, na parhaiz karne ki waja se hi aaj insulin lag gayi hai. Mujhe ganga ram iss liye bhi nahi pasand unhe ne mujhe kuch nahi baataya sugar ke baare mein aur phir operate bhi kharab kar diya tha. Bilkul care nahi ki meri. Kaash mein uss waqt kisi achi jaga par chli jati.

Interviewer: bhook waise iss dafa app ko Zaida lag rahi hai ya kam?

Interviewee: kabhi kabhi Zaida lagti hai aur kabhi kam, abhi tou jab se admit hooyi hoon bilkul bhook nahi lag rahi

Interviewer: sahi sahi, jaise aaj kal laafi kahwateen hain aisi jinhe nahi pata ye doctor ke paas ane ka sahi waqt kya hota hai ya jaldi kyu nana chahiye take bache aur maa ki sehat ko kisi kism ka koi khatra na ho. App ke khiyal se hum ye paigham unn tak kaisi pohncha sakte hain?

Interviewee: dekhein thora bohat tou insaan ko bhi khiyal karna chahiye na, akhir bache ki zindagi ka mamla hota hai, doctor ke paas ana zaroori hai bas yeh hai ke kabhi kabaar deir svear ho jati hai. Mere tou agar ghar ke paas koi acha hospital hota tou shaid itni dier na hoti. Har kisi ke apne masle hote hain magar baatana zaroor chahiye.

Interviewer: hmm acha, jaise iss time mein kehte hain rest Zaida se ziada karna chahiye, aur app yahan check-up ke liye ayi hoon, rush bohat ho betha bhi na ja raha ho aur check-up karaye beghair hi chali gayi hoon. Aisa hoye hai kabhi app ke saath?

Interviewee: haan jee eik baar hoye hai, aisa tha ke mein kaafi deir se bethi thi, inko mein ne bola bhi hai ke mein bari deir se ayi hoon, bas sugar check karwani hai magar ye log kehte rahe rah eke doctor sahiba abhi masroof hain itnezar karein, phir mein uth kar chali gayi.

Interviewer: sahi, tou jaise app ne baataya ke late aane ki dou khaas waja ye thi ke eik tou yahan ka card banwana parhta hai aur phir app ke ghar mein kuch masle hogaye thay

Interviewee: jee aisa hi hai, card ke liye ye log bolte hain saare test karwa kar lao, har cheez ka, abb eik dum se nahi hote itne pasie ke saare test kar lein forun, aur uper se meri saas ke saath bhi laarayi hogayi thi. Kaafi choti choti cheezein akhati ho jati hain.

Interviewer: theek theek, tou koi aise cheezein hain ya koi khaandani totke jo app ko gharwale kehte hoon ya app khud karti hoon iss doraan?

Interviewee: meri ammi aisi cheezein bohat karti hain, pata nahi garam doodh mein kuch daal kar deti hain kehti hain iss se bache ki sehat achi hogi, mahine mein eik dafa malish bhi karwa leti hoon ammi kehne par, darasal teeka lagne ki waja se kamar mein Zaida dard hota hai iss liye malish se araam ajata hai thora.

Interviewer: tou dawai nahi leti kamar ke liye koi?

Interviewee: nahi, dawai koi nahi leti mein, sugar ke baad se saari dawaian chor di hain mein ne.

Interviewer: sahi sahi, chalein bohat acha laga app se baat kar ke, app ke taawun ka shukriya. Allah hafiz (smiles).

Interviewee: koi baat nahi, Allah hafiz (smiles back)

Interview 6

Interviewer: jee Assalmoalikum, mere naam serene hai, ajj mein app se kuch sawalat karna chahongi pregnancy se related.

Interviewee: jee waalaikumassalam

Interviewer: sab se pehle app mujhe ye baatayein ke ghra par kisi kisam ki koi warzish waighira kar rahi hain? Jaise iss time mein aksar kamar mein dard ho jata hai uss ke liye.

Interviewee: nahi, koi warzish tou nahi karti, bas walk kar leti hoon kabhi kabar, baki iss dafa mujhe waise bhi kamar mein dard kam hoye hai banisbat pehle se. time bhi itna nahi milta mera beta bhi hai chota uss ko bhi dekhna hota hai, ghar ke kaam bhi hote hai. Mein saare kaam apne khud larti hoon warna meri saas bohat bolti hain (laughs).

Interviewer: sahi, tou walk kab karti hain?

Interviewee: mein shaam ke time kar leti hoon walk taqreeban yehi koi 20 minute ke liye.

Interviewer: iss time ke doraan app ko kisi kisam ki koi bemari hoyi hai? Flu ya bukhar?

Interviewee: nahi, aisi tou koi bemari nahi hoyi Allah ka shukar hai, bas ye hai ke cravings hoti rehti hain thande ya garam ki tou is ski waja se ajj kal gale mein halki se kharash hai warna sab theek hai.

Interviewer: sahi, tou app ko pata lag gaya ke larka hai ya larki?

Interviewee: jee jee pata lag gaya, larki hai MashAllah se

Interviewer: MashAllah, tou app ko khud shoq tha jaan ne ka ya ghar waloun ne koi zabardasti ki?

Interviewee: jee shoq tout ha, magar ye tha ke gharwaloun ko tha ke iss ka beta hi hou tou uss se ghabrati thi, jaise abhi hamari family mein kisi ke dou bete hoye tou unko tha ke iss ka pehle bhi beta hai, abb bhi beta hi hona chahiye.

Interviewer: oh, tou app khush hai ke beti hai?

Interviewee: jee jee bohat mujhe bohat Khushi hai, mujhe apne pehle beta ka itna intezaar nahi tha jitna beti ka hai (smiles).

Interviewer: ye tou bohat achi baat hai, tou app ke husband support karte hain ya who bhi kehte hain mujhe beta chahiye

Interviewee: nahi, pehle shuru shuru mein unko bhi yahi hota tha, magar abb kuch nahi kehte, mujhe beti ka bohat shoq tha shaid iss liye chup kar gaye (laughs). Pehle waise ye loh confirm nahi baata rahe thay ke beta hai ke beti aur mein bari pareshaan rehti thi, abb confirm baataya hai ke beti hai Alhumdulillah.

Interviewer: sahi sahi, tou abhi app ka konsa month chal raha hai?

Interviewee: mere abhi 8th month chal raha hai aur kuch week uper hain

Interviewer: tou app yahan doctor ke paas kis month mein ayi?

Interviewee: mein yahan 13th week mein ayi thi

Interviewer: 13th week 4th month banta hai, tou shuru mein kyun nahi ayi jab pata laga tha?

Interviewee: sach bolon tou shuru shuru mein mujhe inta ilm hi nahi tha ke mein pregnant hoon, mujhe pata hi shaid dosre mahina laga hai phir iss hospital mein meri nand kaam karti hai, tou shuru mein agar koi masla hota tha tou mein uss k bol diya karti thi who yahan doctor se pooch kar baata diya karti thi, waise tou awal, shuru shuru mein khud bhi andaza hota hai pichli pregnancy ke baad. Pehle baby ke time mein ne suna hai shuru shuru mein itna nazar bhi nahi ata

Interviewer: Pakistan ke halat dekhte hoye jahan mehngayi itni bar gayi haim aksar paision ki waja se bhi mushkil hoti hai jis ki waja se banda late bhi hota hai kyun ke test aur doctor ke fees sab mehngi ho jati hai, app ke saath tha aisa koi masla?

Interviewee: jee halat tou bohat kharab hogaye hain, pichle baby ke time mein ne apni ammi ke ghar ke paas se private clinic se check karwaya tha, who bhi kaafi mehnga parha tha, iss dafa ye tha ke kyun ke meri nand yahan kaam karti hain tou uski asaani hogayi thi uper se second time hai mujhe bhi thora bohat andaza hogaya hai.

Interviewer: sahi, jaise kuch khaandanoun mein kuch khaas totke kahe jaate hain, ya hamari ammiyan kehti hain ke hamare waqt par hum aise karte thay tou tum bhi ye kiya karo, tou phir karti hain kuch.

Interviewee: meri saas bohat kehti hai, unko hota hai ke hamein tou apna waqt pe pata bhi nahi hota tha ke hum pregnant hai tume log aaj kal kitna shor macha kar rakhte ho, ab hamein pata lagta hai tou kya karein. Phir yeh bhi saath kehti hain ke bahir nikalti hou tou sou log dekhte hain bache ka mamla hai nazar utar liya karo ghar akar.

Interviewer: mera agla sawal yahi hai ke gharwale mana tou nahi karte ke nazar lag jati hain, iss tarah aurtein nahi nikala karti apni pregnancy mein.

Interviewee: mere saas susar dono ko nazar la bohat dar hota hai, jab bhi mein ghar se nikalti hoon doctor ke liye aur kahan jana hota hai mein ne tou kehti hai dhak kar niklo nazar na lag jaye. Mere susar kehte hain itna doctor ko dekhane se bhi nazar lag jati hai (laughs). Dekhein nazar ka dar tou rehta hi hai magar veham tak nahi jana chahiye, mere husband bhi unhi ke saath mil jaate hain. Mere saas sasur iss liye bhi kehte hai ke betoun ko nazar lag jati hai iss liye nahi baatana tou mein kehti hoon ke kyun betioun ko nahi nazar lag sakti?

Interviewer: tou app ko khud ko lagta hai nazar ka dar?

Interviewee: jee zaheri baat hai maa hoon aur maa bane wali hoon, dar tou lagta hai magar itna nahi kitna baki ghar waloun ko lagta hai.

Interviewee: theek theek, tou koi khaas diet follow kar rahi hai? Koi aise parhaizi khane?

Interviewer: kha tou waise sab kuch hi rahi hoon, bas yeh hai ke ajj kal iftarian ho rahi hain tou doctor ne kaha ke pokare ya samosa Zaida nahi khane. Iss ke ilawa kuch nahi.

Interviewee: sahi, tou app ko waise yahan ke doctors se tasali hai?

Interviewee: jee jee tasali hai, ache se bolte hain

Interviewer: app yahan kahan rehti hain?

Interviewee: raiwind ke paas eik ilaqa hai wahan rehti hoon

Interviewer: tou ye hospital tou app ko bohat door parhta hoga

Interviewee: jee jee door tou parhta hai magar kya karein ana bhi tou majbori hai

Interviewer: aati kis tarah hain app? Apni sawari hai?

Interviewee: mein bike par aati hoon apne husband ke saath

Interviewer: tou raasta waighira app ko saaf milta hai? Mushkil tou nahi hoti?

Interviewee raasta taqreeban saaf hi hai, bas mere ghar ke paas se thora kharab hai. Baki ye hai ke ajj kal garmi itni ho gayi hai tou nikalna bara mushkil lagta hai.

Interviewer: tou app ke ghar ke paas mein aur koi hospital nahi tha jo tasali baksh ho?

Interviewee: hospital tou hai magar woh kehte hai ke c-section hoga, mujhe uss se bohat takleef hai, mujhe c-section nahi pasand, even mere husband ko bhi nahi pasand woh bhi kehte hain ke normal hi ho. Woh hospital wale koshish bhi nahi karte ke normal ho bare araam se keh dete hain ke c-section hi hoga.

Interviewer: sahi tou ye dono jo app ki pregnancies rahi hain, inn mein koi wazay farq mehsoos hoye hai app ko? Kisi bhi kisam ka

Interviewee: sab se bara farq mere khiyal se yahi hai ke, pehle mere pe kaam ka itna burden nahi tha, bache ki koi zimadari nahi thi, jab dil karta tha souti thi jab dil karta tha uthti thi. Ab tou bete ke peeche peeche bhi bhaagna hota hai, ghar ke sou kaam hote hain. First mein tou ye bhi than a meri saas aur gharwale bhi bare khiyal karte thay, nayi nayi shaadi bhi hoyi thi na iss liye.

Interviewer: tou abb kam khiyal karte hain?

Interviewee: haan jee pehle se tou kam hi karte hain, unko hota hai ke itni bari baat nahi, uth kar kaam bhi karna chahiye har waqt araam zaroori nahi. Mein ne pehle baataya than a meri saas warna bohat baatein karti hain, mujhe bhi acha nahi lagta mein iss liye mouqa nahi deti Zaida saath saath saare kam kar leti hoon.

Interviewer: tou pain ka kya haal hai? Pehle Zaida thi ya abb?

Interviewee: pain mujhe first time tou bikul nahi hoyi aisa tha ke pata hi nahi chala, uss waqt bas vomiting ka issue rehta tha dil kharab rehta tha aur kuch nahi. Iss dafa ye hai ke pain bohat hoti hai karwat tak nahi li jati, taangoun aur sides mein bhi bohat dard hota hai.

Interviewer: aise phir koi khaas ya zaroori cheezein hain jo app pehle karti thi aur baad second time chor di hoon?

Interviewee: umm bas ye hai ke bete ki time par mein dawaian time par leti thi jo doctor likh kar deta thay, abb ki baar shaid thori careless hogayi hoon itna yaad nahi rehta abb, ghar ke kaam bhi itne hote hain ke bhool jati hoon aksar. Bas yahi hai mere khiyal baki sab taqreeban waisa hi hai

Interviewer: acha tou aksar aisa bhi hita hai ke abhi bache ka ya pregnancy ka koi irada nahi hota aur eik dum se ya achanak se pata lgta hai ke pregnant hogaye, kya app ke saath aisa hoya tha?

Interviewee: haan jee, aisa tha ke abhi forum irada nahi tha, mujhe aur mere husband ko yahi tha ke haroon mera chota beta 2 saal ka hojaye phir koshish karein ge magar uss se pehle hi pata laga ke mein pregnant hogayi hoon. Mujhe feel hoya ke mere periods nahi aarahe tab shak hoya tha par confirm nahi thi. Dedh 2 mahine baad jaa kar pata chala ke pregnant hoon, mere na periods ka shuru se hi masla rehta tha, tou mujhe laga tha ke shaid uss ka koi masla hoga.

Interviewer: acha acha sahi, waise iss condition mein aksar beth kar wait karna mushkil lagta hai, kabhi yahan bohat rush ho aur app se betha nahi jaa raha tou app wapis chali gayi hoon ke baad mein aakar dekha doon gi.

Interviewee: aisa hota tou jab ke mera abb 8th month chal raha hai tou aur mushkil hoti hai, magar mere husband kehte hain ke itni door se aye hain poora kaam karwa kar jao, phir unko bhi bohat mushkil hoti hai aur mujhe acha nahi lagta tou matlab ke koshish yahi hoti hai ke jab aa gayi hoon tou kaam poora karoun. App ko pata hoga petro bhi itna mehnga hogaya hai tou harwaqt ana asaan bhi nahi hota.

Interviewer: bilkul sahi, tou aisa hoya hai kabhi ke husband ko achanak koi bohat zaroori kam parh gaya ho aur who naa le kar aa saktein ho phir akele an eke chakar mein app ne bhi socha agli dafa chali jaaoun gi.

Interviewee: itni door se ana hota hai tou zaheri baat hai mushkil bari hoti hai, mere husband job karte hain tou aksar unhe hota ke mein subha hi le kar jaa sakta hoon phir kaam par jana hota hai, mein phir unhi ke time se aati hoon. Eik adhi baar hoya ke husband ko jaldi jana tha job pe tou mein bhi nahi ayi check-up ke liye, dekhein itni door se akeli aurat ka ana bhi theek nahi na aur husband aise akele jaane bhi nahi dete.

Interviewer: sahi sahi, waise kuch families mein ne gharwale mana bhi karte hain ke kya zaroorat hai doctor ke paas jaane ki ghar par hi ilaaj karlou, hum ne tou aise hi bache paida kiye hain, tou app ke family mein tou nahi kehta aisa?

Interviewee: jee bas meri saas hain issi type ki, unko hota hai ke baar baar iss halat mein boahr nahi nikalna ghar par hi kuch kha lou, jaise mere pehle bete ke time mujhe bohat buri vomiting hoyi thi, paani bhi andar nahi tik raha tha, tou mujhe meri saas kehti thi thin ke koi

nahi choorun kha lou ya phaki kha lou, hala ke meri eik dost hai uss ko jab mein ne baataya tou uss ne kaha jab tak drip nahi lagegi araam nahi aye ga. Darsal mere husband bhi sab chote hain na, tou unki bhi saas susar itni nahi sunte, phir wohi karna parhta hai jo wohi kehte hain.

Interviewer: theek theek, jaise dekhein agar time par doctor ke paas na ayein tou bohat complication ho sakti hain, infection ho sakte hain jis se maa aur bache dono ki sahet ko khatra hota hai, app ke khiyal mein jin khaawateen ko nahi pata iss bare mein, ke doctor ke paas ane ka sahi waqt kya hai unhe hum ye paigham kaise pohncha sakte hain?

Interviewee: doctor ke paas ana chahiye, aksar aisa hota hai ke ghar mein kuch masle hote hain jin ki waja se nahi aya jata time par, aur mere ye bhi tha na ke meri nand yahan kaam karti hain, phir jis week mein woh bolti thi ke ajao mein chali jaati thi. Mere khiyal se doctors ko bhi baatana chahiye iss bare mein, who baateyin ge tou humein pata chale ga na.

Interviewer: acha tou app ne baataya ke app ke late aane ki dou bare wajohat ye thay ke eik pata thori deir se chala aur dosra ke aap kin and yahan kaam karti hain tou baata diya karti thi ke kab ana hai, shuru mein unhoun ne nahi bulaya.

Interviewee: haan jee bilkul, dekhein mera ghar door bhi bohat hai iss liye har waqt nahi aya jata, phir mein yahi karti thi ke shuru shuru mein tou unko phone kar ke pooch liya karti thi, phir mere husband bhi yahi kehte thay ke iqra ko call kar ke pooch lou.

Interviewer: waise app kin and yahan kya karti hain? Doctor hain?

Interviewee: nahi nahi doctor nahi hain, nurse hain samjh lein, koi masla hota hai tou woh yahan doctor se pooch kar baata deti hai.

Interviewer: acha acha, sahi chalein bohat acha laga app se baat kar ke, khiyal rakhaye ga Allah hafiz

(shakes hands)

Interviewee: jee bari Khushi hoyi, Allah hafiz.

APPENDIX B

INTERVIEW GUIDE

RESEARCH QUESTIONS:

- What factors highly contribute to the late initiation of prenatal care?
- What role do family/spousal play in late initiation of antenatal care
- How does the availability and accessibility impact the late initiation of antenatal care?
- How does the lack of knowledge and fear of stigma contribute to the late initiation of antenatal care?

INTERVIEW QUESTIONS:

- Neutral initial question: How do you define antenatal care?
- Do you perform exercise on a regular basis in order to reduce problems such as backaches or swelling?
- Did your doctor ask you to keep a calorie count during your pregnancy?
- Are there any systematic illnesses that suffered during your previous or current pregnancy?
- Were you interested in early gender reveal of your baby or you preferred waiting till birth?
- Did you begin with antenatal late? If yes, what were the reasons that led to late initiation of antenatal care in your case?
- Out of the reasons you just mentioned which reason/cause do you feel is the most important?
- Do you feel lack of awareness also contributes to the late initiation of antenatal care?
- Was there any significant pressure from your family or spouse that led you to initiate antenatal care late?

- Keeping in view the economical crisis of Pakistan, do you think Pakistani women are reluctant to access such services due to financial problems/constraints?
- Were there any cultural/traditional practices that you were advised to take during this period? Which ones do you feel are quite significant?
- Are maternity health services easily available in your area?
- Is the route to such service clinics safely accessible, keeping in mind the roads and distance?
- Do you feel the fear of pregnancy disclosure played a key factor that led you to access antenatal care late?
- How important do you think factors such as negative attitudes and fear of stigma are in today's time in the lives of Pakistani women accessing antenatal care? Were any of these factors also associated with your late initiation of prenatal care?
- Were there any important steps that you adopted during your first pregnancy but laid off during your second pregnancy?
- Do you feel any major changes that you would like to highlight between the two experiences? On the late initiation of ANC, and do you think this could also be a reason to start antenatal care late?
- What impact do you think unplanned pregnancies pose on the late initiation of ANC, and do you think this could also be a reason to start antenatal care late?
- Sometimes waiting time in hospitals is too much, and in this condition, it is difficult to sit for long hours, has this ever happened to you and what did you do in this case?
- Does your husband always accompany you to the hospital? If some day an important work shows up and he cannot make it what would you do?
- Late initiation of antenatal care can be linked to many pregnancy related health difficulties such as low birthweight or premature birth which can also be the result of

infections during the perinatal period and postnatal period, how significant is antenatal care in your opinion?

- Do you feel its important to provide awareness regarding the consequences of late initiation of prenatal care? Which form of medium you think would be suitable for providing such awareness?
- Is there anything else you would like to add in reference to antenatal care?

APPENDIX C

KINNAIRD COLLEGE FOR WOMEN



Date 19 April / 2015

PERMISSION LETTER

To

Gurkhi Hospital

Our student, Sangeeta Zanka of B.Sc. Clinical Applied Psychology Program, Kinnaird College for Women, Lahore, is conducting her research on Factors for late initiation of prenatal care (PNC).

She is intended to carry out the study in your institution/hospital with pregnant women. She will be administering her research questionnaire to identify the possible reasons for starting late. I request you to grant her permission to conduct research work in your prestigious institution. Your cooperation in providing the necessary facilities for collecting data will be highly appreciated. Your support in this respect will also promote research work in Pakistan.

Thanking in anticipation

Dr. Afsana Gul
Head of Applied Psychology Department
Kinnaird College for Women, Lahore



DR. AFSANA GUL
Head of Applied Psychology Department
Kinnaird College for Women
Lahore

Afsana Gul
19 April 15

KENNAIRD COLLEGE FOR WOMEN



Date: 25/2/23

PERMISSION LETTER

To: Services Hospital

Our student, Saara Zehra, of B.Sc. (Hons) Applied Psychology Program, Kennaird College for Women, Lahore, is conducting her research on:
Factors for late initiation

She is interested to carry out the study in your institution/organization/hospital with pregnant women. She will be administering her research questionnaire to identify the notable reasons for starting ANC late. I request you to grant her permission to conduct research work at your prestigious institution. Your cooperation/help in providing the necessary facilities for collecting data will be highly appreciated. Your support in this regard will also promote research work in Pakistan.

Thanking in anticipation

Afreen
Dr. Afreen Gul
Head of Applied Psychology Department
Kennaird College for Women, Lahore



[Signature]
Dr. Saadia Masood
Head of Services Hospital
Lahore

KENNAIRD COLLEGE FOR WOMEN



20th April 2008

PERMISSION LETTER

To Services Hospital

Our student Seena Jitka of B.Sc. (Hons) Applied Psychology Program, Kennaird College for Women, Lahore is conducting her research on:
Factors for late initiation of Antenatal care (ANC)

She is interested to carry out the study in your institution/hospital among pregnant women. She will be administering her research questionnaire to identify the notable factors for starting ANC late. I request you to grant her permission to conduct research work at your prestigious institution. Your cooperation/help in providing the necessary facilities for collecting data will be highly appreciated. Your support in this regard will also promote research work in Pakistan.

Thanking in anticipation

Dr. Afsana Gul
 Head of Applied Psychology Department
 Kennaird College for Women, Lahore



DR. FATIMA HAROON

Senior Women Medical Officer (SB-16)
 Obstetrics & Gynaecology
 Services Hospital, Lahore

APPENDIX D



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BA/BSc June Defense 2023

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