Pakistan Journal of Applied Social Sciences
Vol. 13(1), 2022, pp.45-63, ISSN: 2409-0077(Print), ISSN: 2663-8894(Online)

Working and Non- Working Women Exposure to Mass Media and Usage of Family Planning Methods: Perceptions and Experiences of Maternal Health

Ayesha Sadiqa
Faculty of Media & Communication Studies
University of Central Punjab

Faiza Shahid
Government Graduate College for Women Ali Pur Chattha

Abstract

Healthy married women are an asset for any society as they perform household chores and other professional responsibilities. Media brings them latest information about their maternal health care while providing knowledge of diverse methods of family planning. The study was an effort to explore the health care perceptions of women and applications of different methods used for reproductive health. Qualitative research method was applied through in-depth interviews of married women. These were working and non-working women. Purposive sampling, a type of non-probability sampling was used to select the most relevant thirty participants from Lahore, Pakistan. Themes and sub themes were derived from data. The research concluded that working women had a controlled choice to choose any family planning methods whereas non-working women face hurdles in this regard. Only a small segment of women in society is well aware of their maternal. Ignorance and societal pressure also contribute to the worst health conditions of non-working women. The study recommended that mass media has to work actively while providing dedicated health programs for women health.

Keywords: Family Planning Methods, Housewives, Maternal Health, Mass Media, Working Women

تلخیص

صحت مند شادی شدہ خواتین کسی بھی معاشرے کا اثاثہ ہوتی ہیں کیونکہ وہ گھر کے کام اور دیگر پیشہ ورانہ ذمہ داریاں انجام دیتی ہیں۔ میڈیا انہیں اپنی تولیدی صحت کی دیکھ بھال کے بارے میں تازہ ترین معلومات فراہم کرتا ہے جبکہ خاندانی منصوبہ بندی کے متنوع طریقوں کا علم فراہم کرتا ہے۔ یہ مطالعہ خواتین کی صحت کی دیکھ بھال کے تصورات اور تولیدی صحت کے لیے استعمال ہونے والے مختلف طریقوں کے استعمال کو تلاش کرنے کی ایک کوشش تھی۔ کیفیتی تحقیق کے ایک طریقہ کار کو استعمال کر کے لاہور سے شادی شدہ گھریلو اور جاب کرنے والی تیسخواتین کے انٹرویو کیے گے۔ مواد کو کوڈز سے اہم سرخیوں میں تقسیم کیا گیا۔ تحقیق سے یہ نتیجہ اخذ کیا گیا کہ بر سر روزگار خواتین کے پاس خاندانی منصوبہ بندی کے کسی بھی طریقے کو منتخب کرنے کا اختیار ہوتا ہے جبکہ گھریلو خواتینکو اس سلسلے میں رکاوٹوں کا سامنا کرنا پڑتا ہے۔ معاشرے میں خواتین کا ایک چھوٹا سا طبقہ ہی اپنی تولیدی صحت سے بخوبی واقف ہے۔ جہالت اور معاشرتی دباؤ بھی گھریلو خواتین کی

This work is Licensed under a Creative Commons Attribution-Non-Commercial 4.0 International License

صحت کی خراب صورتحال میں معاون ہے۔ تحقیق کی سفارشات میں یہ بات پیش کی گئی کہ خواتین کی صحت کے لیے معلومات پر مخصوص صحت پروگرام فراہم کرتے ہوئے میڈیا کو فعال طور پر کام کرنا چاہیے۔

کلیدی الفاظ: خاندانی منصوبہ بندی کے طریقے، گھریلو خواتین، تولیدی صحت، ذرائع ابلاغ، برسرروزگار خواتین

Introduction

Reproductive maternal health of married women is an increasing apprehension in the health sector throughout the world. The majority of women do not know about emergency maternal care and even they lack the understanding of the symptoms of the issue. Voluntary family planning facilities have been declared as one of the couple's rights and basic human rights by the International Conference on Population and Development (ICPD). Since Pakistan has a high total fertility rate and in turn a higher maternal and infant mortality rate (Agarwal et al., 2007). Because less emphasis has been given to the family planning and reproductive health of women the ratio of premature death is high in developing countries. Mother's health is damaged to a great extent because of the small gap in family planning (Asif & Pervaiz, 2019).

The knowledge of reproductive health and capacity of childbearing has increased globally whereas the deep indulgence of maternal health care of women has been marked beneficial for society. The majority of women have suffered because of inadequate care for reproductive health and childbearing. Similarly, maternal reproductive health has been mostly studied with regards to birth and child health outcome from a health point of view. The importance of working on maternal health has raised during the last decade (Ali et al., 2021). The mental, physical and social well-being of women, all are related to reproductive health. It is linked to the reproductive function and system and not just confined to not having any disease, comprehensively, (Ali &Rizvi, 2010). Other than this, childbearing is linked to a woman's ability that is supplementary associated to the family's continuity, social group, links between societies and environment.

This study has been done to know the attitude, awareness, and practices of reproductive health-related methods among married women in the urban area of Pakistan. Only a few women have known the methods of contraceptives and very few implemented them. The study also aims to find the awareness level, usage of contraceptive methods, check the ways of acquiring information, and also finding that why these methods are not accepted. The certain aspects that affect the attitude and understanding of housewives are family type (nuclear, joint), education level, previously observed family planning method in people around them, and their source of information to get awareness about different methods (Mubarik et al., 2016).

Moreover, unusual changes in the body, looks, and psychological effects of reproductive health need to be handled properly but along with that selection of food items should also be right. Women overlook a balanced diet the best maternal health care services which bring serious health issues (Rizvi et al., 2014). This condition can be made better if women are offered various free choices of effective contraceptives with proper counseling and the best services for their maternal health. It would encourage the women to look after their health and stay away from traditional unsafe ways. Although, some conventional and modern ways are more effective than others women should be informed first to take care of their reproductive health issues (Ayub et al., 2015). Other than this, marital status, cultural norms, and religious beliefs of housewives are reasons to hinder their chances of taking part in health-related decisions.

The wellbeing of married women can be seen through their knowledge and attitude regarding reproductive health. Providing health-related information and changing attitudes towards maternal health can be used to control the big family size with limited resources and unplanned pregnancies. This situation can play a role in the development of society. Consequently, it is crucial to give adequate information relating to up-to-date, effective, and safe contraceptive methods to women using media, like TV, radio, newspapers, magazines, and social media (Khan, 2000). At the start of the 21st century, drastic changes in technology, tilt in the global economy, and vast choices for media platforms have paved the way for immense opportunities with new kinds of challenges. People have more access to the general and specific things of their interest due to the addition of social media. Similarly, mass media has proven to provide health education in turn strengthening the utilization of contraceptive methods. Similarly, media usage can alter the attitude of women regarding reproductive health practices (Shaikh, & Rahim, 2006).

Other than this, to provide awareness regarding reproductive health among housewives, media exposure is taken as a great tool. Mass media can implant messages about maternal health in dramas, news reports, songs, advertising, documentaries, and films. The material shown on mass media affects the behavior and attitudes of people having problems that have a traditional background (Odesanya et al., 2015). Similarly, TV and radio in Bangladesh are still taken as the usual types of media exposure. However, the majority of young women had also come across any kind of mass media, that shows the significance of media sources for spreading knowledge about reproductive health (Barkat&Majid, 2003).

Nevertheless, women from developed countries have a longer lifespan and there are fewer chances for them to go through premature mortality and ill-health as compared to those women living in developing countries. Just like this, Brault

(2015) described the situation of young housewives after their marriage, they had to put up with health issues, mostly the problems of reproductive health. Almost 600 million pubescent wives in poverty-affected societies have gone through the critical problems of mortality, maternal sickness, confined education, and access to media about health awareness. Low socioeconomic status is related to massive various behavioral and medical risk possibilities that may lead to having premature birth and also some other unfavorable pregnancy outcomes (Agha, 2011). Other than this, family pressure and distress worsen the health conditions of housewives as Khan (2000) stated that many women refused family planning techniques because of being afraid of their husbands and family. Although, a lot of women know these methods, very few implement them.

Objectives of the Study

- To explore the differences between housewives and working women's maternal health practices.
- To find the role of mass media exposure in bringing awareness of reproductive health in women

Therefore, the main focus of the article was to know the opinions, experiences of married women about their maternal health care while keeping in mind the difference between working women and the women who did not work anywhere rather stay at home and perform household chores.

Literature Review

Fatema andLariscy (2020) described that media has been an effective tool for raising awareness among housewives about the importance of being involved in family size decisions, and they can even ask for their rights in this regard. Nonetheless, society's level of social justice for women is seen in the availability of reproductive health services. Igbinoba et al. (2020) stated that women's health has been claimed as a top priority in public health in a few developing countries, but the ground realities are not so good. As a result, Lalneizo and Reddy (2010) stated that family planning programs condense natal rates has been connected to a decrease in child high mortality. Mass media has been measured as an active device in creating a compassionate environment. Similarly, World Health Organization (2011) indicated that presumption caution should be delivered to improve females' health. It entails healthiness promotion, instruction, and early screening amongst women to reduce harmful effects that could lead to maltreatment forthcoming pregnancies.

Igbinoba et al. (2020) indicated that struggles were required to get consciousness and to clear the misapprehensions about reproductive health. A substantial ratio of married women reflected misunderstandings concerning the fertility period. A variety of factors prejudiced their information of maternal health that also included their qualification level, area of residence, and use of various kinds of mass media platforms. It was recommended to take well-organized measures to raise awareness and to make clear the false impression regarding reproductive health. It was also endorsed to provide easy access to many sources of media and the availability of well-prepared health programs.

Apart from this, The Pakistan Reproductive Health and Family Planning Survey acknowledged the gigantic gap between awareness and practice of family planning methods. A substantial majority of married women knew very few methods while only twenty percent of these married women had used any family planning methods. Awareness meetings were desirable to be mutual and frequent for the usage of safe methods for better maternal health results (Juliastuti et al., 2020). Similarly, Afulani (2015) had suggested the use of diverse media sources for instructing couples and advised by elder influential members of the concerned families just to emphasize the idea of contraceptive facilities. Media was proved as an active tool to spread consciousness amongst housewives so that they would be involved in the decisions making process regarding the size of their family.

However,the accessibility of reproductive well-being facilities exposed the amount of societal impartiality for women in any culture and society.

Asif and Pervaiz, (2019) clarified that in very few developing countries, women's maternal health had been appealed as the topmost priority amongst public health whereas the actual ground realities were not so different. Hence, Lalneizo and Reddy (2010) defined that reproductive health planning programs could help to lessen the birth rate and also be linked with decreased child mortality. Therefore, media was considered as an active instrument in establishing a helpful surrounding. According to the World Health Organization (WHO, 2011), women with better health facilities had positive effects especially while performing other professional duties at the workplace. Education, health campaigns, and peer could play a significant role in bringing awareness among women. It could also help in minimizing the negative effects of traditional methods to promote safe latest health facilities.

Similarly, Mason (2010) found that a sizable proportion of married women have misconceptions about their menstrual cycle. A variety of dynamics influenced women's awareness of parental health, including place of residence, qualification, and use of various media new and traditional platforms. It was recommended that effective actions could be taken to raise consciousness and dispel myths about the generative health of women. It was also proposed that informal and improved access to numerous mass media sources be provided, as well as the approachability of health programs. Besides this, "The Pakistan Reproductive Health and Family Planning Survey" discovered a significant gap in knowledge and use of family planning methods. A substantial number of married women are aware of a few of these methods, but only 25% of them use any method. To improve maternal health, more people must be educated about the use of safe methods (Hakim, Sultan, & Ahmed, 2001). Similarly, Igbinoba et al. (2020) advocated for the usage of broadcasting and newspapers to educate couples and elder influential members of concerned families about contraceptive services.

Furthermore, Nasir and Al-Qutob, (2018) stated that because of the suggestion of implant by a doctor, one-third of the women chose the implant method. Sources of information about parental health, followed by birth control clinics and regular appointments by lady health workers were some key factors that played a key role in the discontinuation or acceptance of any family planning method, such as knowledge. Similarly, Mason (2010) correctly stated that improvements in the health of women, children, and society can be made by giving proper attention to mothers' reproductive health. It is important to note that babies should be delivered by highly skilled providers who are adequately medically cared for and supervised. Women should be educated about proper medical attention, and the importance of hygienic conditions (Juliastuti et al., 2020).

Furthermore, the media is regarded as a critical mediator of transformation for the audience, particularly for married women in attaining their owed rights, which gives them confidence. People are well-versed of the up-to-date trends and problems as a result of media exposure (Ali et al., 2010). More specifically, media captures people's attention while providing them with a diverse variety of content options via, magazines, newspapers, television, radio, various options available through social media and films (Dasgupta, 2019). Similarly, women who spend four or more hours a day watching media are considered heavy viewers; to satisfy their information needs they consume a large amount of content of their choice. Women accept the mediated version of reality depicted in the media as the real thing. Similarly, women who had a lot of media exposure had more opportunities to make decisions than those who didn't have a lot of media exposure or didn't consume any media content at all (Zaheen et al., 2021). Similarly, after satisfying their health information needs through various media sources, housewives can make better choices for their maternal health.

Other than this, media coverage raises awareness about the importance of maternal health and provides information about the various types of contraceptive methods that are available. On the contrary, it is also believed is insufficient to use only media coverage to reduce maternal and infant mortality (Afulani, 2015). Socio-economic factors are considered to play a significant role in reproductive health. Saad et al. (2018) advocated that education with awareness has durable effects on women's health. Health care services are in high demand to prevent unwanted pregnancy, preventable death, and injury during childbirth (Naved&Persson 2008). Women in developing countries face sickness, fatigue, disparity, and repression. Women's reproductive health concerns are associated with contemporary circumstances besides discrimination. Moreover, domestic abuse has adverse parental wellbeing consequences. Their health is bargained through violence, undesirable pregnancy, and miscarriage. In a worldwide state, a huge number of women report having experienced family fierceness in their prenatal period (Kishor& Johnson 2004).

Similarly, it had also been identified in research that married women in Pakistan were more persuaded to their decent appearance and spent a significant amount of time for improving their physical look. The cognitive changes which could be part of their rationality were not found so common. Though women's health was dependent on various dynamics that filter the process to take an independent decision for their family planning methods. At the same time, this study revealed that the impact of media was responsible for creating a difference to change the environment to a smaller extent (Sadiqa&Saleem 2021).

As women who had high exposure to mass media tended to more agree with the mediated reality presented by media and they had some knowledge of

their rights. They were greatly influenced by the content that was provided through mass media where they could precisely express their distresses and become vocal for their rights. It was found that women got a significant amount of information about their health however cultural norms and rituals were very dominant. They had to face penalties if they opposed the rigid mindset of society. Thus, married women who were especially stayed at home and did not do anything outside the homes were dependent on their families for the fulfillment of their health-related rights. The opinion of women selected for the study indicated that they did not have complete authority to make the decision, many of them, not even aware of their reproductive rights. They spent their leisure time on mass media for entertainment, to get information, to educate themselves. Regardless of that, they had information regarding a few of their maternal health rights through media but still, that gained information did not modify their behavior for helping them to make the right decisions for their reproductive health as society was more dominant to resist their independent choices (Sadiqa&Saleem 2021).

The reproductive health of working women was better especially among those mothers who were highly sensitive to their family well-being. They not only took great care of their health but also paid close attention to their children and spouse. They met their doctors regularly and spent money for better health results. Because in developing countries married women usually did not show much interest in spending money for their reproductive health facilities. Sometimes, they got help from lady health workers but mostly they had to depend on traditional ways to handle their pregnancy-related issues. Likewise, areas with limited health services did not provide proper guidance and facilities to housewives which led them to face unwanted pregnancy and poor health (Mason, 2010). It was suggested to promote health awareness for women so they could have good health conditions.

Methodology

Research Design

Qualitative research methodology with the use of in-depth interviews as a research method has been used in this research. In the study, housewives having maximum exposure to media were included. Housewives were chosen by purposive sampling.

In-Depth Interviews

Many of the housewives were highly educated and some of them were uneducated so the respondent belonged to different socio-economic backgrounds. Thirty participants, fifteen housewives, and fifteen working women from various towns of Lahore had been gathered to be part of this study. Every selected woman

had immense media exposure, they were chosen because they had more than four hours' exposure to various mediums in a day. In-depth interviews were carried out in English, Urdu, and Punjabi languages, and the time length is between 60-90 minutes for each interview.

Data Analysis

A digital voice recorder and a diary were used to get sustained details of talk during interviews. In the same way, the first data was reproduced later translated from Punjabi, Urdu to English to grasp the main codes, themes and subthemes gathered from data through interviews. Coded data were divided into several groups, to analyze the collected information the technique of thematic analysis has been used.

Ethical Consideration of the Study

The qualitative nature of the study, the time frame for the interview, the location for the interview, and the goal of the research were already told to all respondents. They were told that their participation was entirely optional and that they could opt-out at any time. Before the interview, working women and housewives between the ages of 18 and 49 provided verbal agreement.

Findings and Discussion

Media exposure was considered as a crucial factor of change and to make women aware of their reproductive maternal health by all the participants. Media exposure has links to television, radio, various sources of print and social media. Interestingly, the material on media is more welcomed when it does not have differences with existing norms of society.

Family support and Motherhood

The social interaction of married women is mostly affected by family, peers, and the general environment of society. Maternal health is affected by the decisions of in-laws. As one of the housewives in the interview mentioned,

> My parents were highly encouraging and took great care of their offspring. I had surety in my decisions, I was taught to take complete authority over my actions. When I got married the situation had taken a turn. I am dependent on my in-laws, especially my mother-in-law regarding maternal health. I am not allowed to see my doctor without her consent. She believed old health practices are safer and less expensive to adopt.

Similarly, many married women go through this change before and after marriage. Parents are more consoling and concerned for their daughters instead of daughter in law. Supportive families tend to be more caring for the reproductive health of women. They thoroughly plan everything which means physical activities, intake of balanced food, visiting the doctor for accurate information and guidance. One of the respondents of working women explained the experience of her reproductive maternal health

> Education is a source of awareness; my family is highly educated. They are more concerned for the health of the mother and child. In my family, there are certain rules to be followed by a pregnant woman. When I got pregnant, I was advised to follow the food chart provided by the doctor, I visited my gynecologist multiple times whenever it was needed. My husband was very caring in this regard. Every time he took me to the clinic despite having a busy routine. This was because our elders made us ready to accept new parental roles.

The cooperative family provides easiness for women to go through the sensitive period of their life. They are not burdened with any extra duties rather their responsibilities are shared by other family members.

Nevertheless, one of the housewives remembered her experience and said

> It does not matter how good you are to other members of in-laws, some people give you a tough time when you live in a joint family. I was forced to clean the house and share household heavy responsibilities with my sister-in-law just after two weeks of Cesarean section. As it was my first baby and I had no idea for health complications and I suffered later after doing household chores, I wish I would have refused to her.

Likewise, the role of peers is also important in getting awareness about maternal health. It is found that housewives are more likely to be largely affected by peers and family for accepting or rejecting new ideas in health issues. One woman in the study described, "I have an opinion leader in my friend's circle, she is an educated lady, having enough information about contraceptive methods, she guides me a lot, whenever I need to ask anything about reproductive health, I find her suggestions practical". Peers play a prominent role in decision-making for health-related matters. In Lahore, the majority of housewives do not take health concerns very seriously until something unusual happens.

Impact of Social Class on the Status of Women

The social fabric is woven by the collective efforts of individuals in a society. Different social layers have certain characteristics to distinguish from each other. The socio-economic status of married women is directly linked with their maternal health of them. For instance, the women who are a part of the lower class always have issues with money. They are hesitant to get a medical checkup, tests, or medicine as they cannot afford the expenses of the hospital. They normally go to public hospitals where the doctors and patient ratio is highly imbalanced. Contrary to this, women from the high class go to the private clinics of doctors and get proper attention individually which gives them more knowledge relating to their health issues. Conversely, another participant elaborated that it is the responsibility of the government to provide inexpensive health facilities to women for their maternal health.

Other than this, age is another important factor that affects women's health, it is considered, women learn about their health problems and home remedies at the first stage and later with medical treatment with time. One of the respondents said," I did not have much information about maternal health issues during my first pregnancy, I got confused for every change in my body, for my third baby I was quite aware of my maternal reproductive health". Likewise, the newlywed women are guided by elderly women about their health issues.

Evolving Styles on Mass Media and Inclinations of Women

The study found the significant role of media exposure in the awareness of health issues. As one of the working women said that

> It gives me satisfaction to spend time-consuming information from various sources of media. I watch, films, documentaries, dramas, I love to have conservation with my friends through social media using graphics, emojis. Sometimes, I also discuss my reproductive health issues and find the best solutions. Even we can make an appointment to see a doctor virtually. Many videos on social media have increased my awareness about maternal health.

Whereas another participant said,

> A dedicated health segment needs to be presented by the media for the awareness of women regarding their reproductive health. In this modern era, many couples do not know the usage of contraceptive methods. Some of them use sub-standard material which does not work and creates another health issue.

The media is not raising its voice on these issues and women have to suffer for this ignorance.

Health Consciousness

A family planning campaign titled Green Star was started that explained the role of media. Success was seen in small size family, in which stable mother health was considered with proper time to every child". Only a few people in society were motivated to have a small family after this campaign. The usefulness of media advertisement about pads showed that "women had traditional ways to manage their special days with the unhygienic condition, information about pads change their habit. Now the majority of women use pads and perform their duties" further, media should plan proper effective health campaigns for women". Other than this, another participant communicated that the media's role is depressive in giving awareness among women about their health rights. It is more inclined towards the fancy look of women and materialistic things. To spread health awareness, health campaigns in various areas of the country should be launched with effective media tools.

Impact of Rituals

The most crucial issue regarding the acceptance of new ideas to cope with maternal health issues of women is also highlighted by a majority of participants. One of the participants described, "nothing should be in clash with societal norms, otherwise it would be opposed strongly". The ritual of society should also be a responsibility to be followed by the opposite gender too. Women are stopped from growth because of the many taboos for them. It is disliked to mention prohibitions openly which is why women themselves feel shy while discussing health issues. The development of the country is ultimately at stake because of the rigid mentality of people so it has to be changed. If women are aware of their rights, they are an integral part of society and they can live a healthy life.

One of the housewives shared her personal experience stating;

> When I got pregnant for the first time, my sister-in-law was also pregnant. I had experienced a rigid and biased attitude of my family. My mother-in-law used to send her daughter to visit the doctor regularly, she took great care of her food whereas I was not allowed to visit the gynecologists other than lady health workers, I was not given a proper nutritionally balanced diet. That was a very tough time as I suffered physically and I had a comparison all the time in mind with my sister-in-law. The biased attitude of the family made me suffer psychologically as well.

It has seen people are good to their daughter and take care of their reproductive health, for their daughter-in-law people show less concern which makes them more sensitive. Women have to face strong restrictions to their health as housewives; therefore the rigid attitude of society has to be changed for the better outcomes of reproductive maternal health and overall well-being of housewives.

Women have the right to education, health care, and access to reasonable, safe, and accepted family planning techniques, and are a vital part of society. The findings are in line with the findings of Shaikh et al. (2021) who stated that convenient access can improve maternal health. Furthermore, raising awareness about reproductive health would significantly contribute to women's empowerment. A big majority of housewives are unaware of their general health morbidity's precise information. Whereas working women find some ways to tackle their health issues.Westoff and Koffman (2011) discovered a high connection between TV and radio and reproductive behavior in married women using various media sources. There is a disparity between the prevalence of family planning methods and the fertility rate. More notably, when comparing high-performing areas to low-performing areas, the conservativeness of society, limited access to maternal health care information, and shortage of health services are the key features of high-performing areas (Ijeoma&Chikaike, 2020). Moreover, changes in family structure determine changes in women's well-being.

Married women get pregnant because of their ignorance of the reproduction system and do not plan their pregnancies. The high level of education makes them able to know more about their health issues and small family size (Kohan et al., 2012). More crucially, in some situations, women were unknown to the fact that they were pregnant throughout the early stages of their first pregnancy. Contraceptive methods are not used correctly; couples are unaware of safe methods that use high-quality materials (Nasir, & Al-Qutob, 2018).

According to Ardiansyah (2016) and Piotrowski (2013), the main reasons for not using contraceptive methods include family, a lack of awareness, and a restricted budget for health. Housewives do not have a thorough understanding of childbearing. Similarly, family, peers, and socioeconomic position are characteristics related to maternal reproductive health knowledge. The findings of the role of media are identical toAgarwal et al. (2007) who claimed that mass media can assist women in raising awareness through well-planned health programs purely focused on maternal health.

Conclusion

Women should choose the number of children they want and the spacing period. Couples must be allowed to make voluntary, educated decisions about the safe use of contraceptive techniques. It can improve their understanding of maternal health by utilizing the finest accessible materials. Traditional ideas about the helpful and detrimental food choices for maternal health play a significant role. Women just cannot resist the advice of elders in this regard, it has a significant impact on women. Agha (2011) proposed that to have a successful maternal reproductive outcome, pregnant women consume the optimal amount of best food. Food ingested by a large proportion of women throughout their reproductive cycle is lacking in protein, caloric content, and other essential nutrients. These deficiencies have an impact on maternal health and childbearing. The government must recognize the barriers to efficient family planning, health facilities, the proper use of diverse contraception techniques, and the promotion of innovative ideas with maternal health care safety precautions. The media may play an important role in disseminating information on reproductive health, how to care for oneself, and how to avoid reproductive disorders. People's perceptions can be adjusted tactfully to create a suitable health environment for maternal health care through carefully planned media campaigns even in traditional civilizations where socioeconomic factors are dominant. It is best to avoid preferring a son over a daughter. Maternal and newborn mortality rates rise when fertility rates are high. As a result, maternal reproductive health should be a top priority for health officials. This significant disparity in knowledge and execution of maternal health care has sparked substantial interest in the factors that influence a couple's decision. There is a genuine need in the country to improve contraceptive practice. Furthermore, health care providers should be trained and supported to improve maternal health outcomes for women right at their doorstep. It has the potential to increase people's living standards while also raising family finances.

Recommendations

With substantial health education about reproduction and culturally appropriate messages, behavioral change communication initiatives can be increased. These messages should include information about reproductive maternal health, hygiene behaviors, and how, when, and where to obtain relevant health care. Because educational levels, areas of residence, and socioeconomic status of housewives differ, information should be delivered through a combination of health care providers and mass media to ensure potential accessibility of broadcasting of radio, TV, availability of print media, and leaflets for informal programs. Better access to health care services, combined with community-based health education, could help to raise reproductive health

awareness. The media can also be a useful approach for reaching out to housewives. Nonetheless, the current study's findings can help health care practitioners, government officials in charge of health programs, and policymakers carry out their responsibilities more effectively. It can aid in the development of appropriate interventions for increasing housewives' awareness of reproductive and maternal health care in Pakistan. The government should expand maternal health services and use a broader range of ways. Involving the husband in the counseling process can help with long-term contraceptive techniques. The media can air special programming about women's reproductive health. Lady health workers should be widely supported and trained in the most up-to-date approaches.

References

Afulani, P. A. E. (2015). *Determinants of maternal health and health-seeking behavior in sub-Saharan Africa: The role of quality of care*. University of California, Los Angeles.

Agarwal, P., Singh, M. M., &Garg, S. (2007). Maternal health-care utilization among women in an urban slum in Delhi. *Indian Journal of Community Medicine*, *32*(3), 203.

Agha, S. (2011).Impact of a maternal health voucher scheme on institutional delivery among low income women in Pakistan. *Reproductive health*, *8*(1), 1-14.

Ali, H., Ali, A., & Begum, F. (2021). Utilization of family planning methods among currently married women in Pakistan: Insight from Pakistan Demographic and Health Survey 2017–2018. *Health Care for Women International*, 1-16.

Ali, W., Fani, M. I., Afzal, S., &Yasin, G. (2010). Cultural barriers in women empowerment: a sociological analysis of Multan, Pakistan. *European Journal of Social Sciences*, *18*(1), 147-155.

Ali, T. S., &Rizvi, S. N. (2010).Menstrual knowledge and practices of female adolescents in urban Karachi, Pakistan. *Journal of adolescence*, *33*(4), 531-541.

Ardiansyah, B. (2016). Effect of Mass Media on Family Planning Choices in Indonesia.

Asif, M. F., &Pervaiz, Z. (2019). Socio-demographic determinants of unmet need for family planning among married women in Pakistan. *BMC public health*, *19*(1), 1-8

Ayub, A., Kibria, Z., & Khan, F. (2015).Assessment of knowledge, attitude and contraceptive use in married women of Peshawar. *J Dow Univ Health Sci*, *9*(1), 89-93.

Barkat, A., &Majid, M. (2003). Adolescent and youth reproductive health in Bangladesh: Status, issues, policies and programmes. *Population Council*.

Brault, M. A. (2015). Married young women's sexual and reproductive health in low-income communities in Mumbai, India.

Dasgupta, S. (2019). Impact of exposure to mass media on female empowerment: Evidence from India. *International Journal of Development Issues*.

Fatema, K., &Lariscy, J. T. (2020).Mass media exposure and maternal healthcare utilization in South Asia. *SSM-Population Health*, *11*, 100614.

Hakim, A., Sultan, M., & Ahmad, F. (2001). Pakistan Reproductive Health and Family Planning Survey (2000-01): Preliminary report. *Islamabad, National Institute of Population Studies*.

Igbinoba, A. O., Soola, E. O., Omojola, O., Odukoya, J., Adekeye, O., &Salau, O. P. (2020).Women's mass media exposure and maternal health awareness in Ota, Nigeria. *Cogent Social Sciences*, *6*(1), 1766260.

Ijeoma, N. E. E., &Chikaike, W. F. (2020).A ten year review of Jadelle contraceptive use at Rivers State University Teaching Hospital, south south Nigeria. *World Journal of Advanced Research and Reviews*, *5*(1), 116-121.

Juliastuti, D., Dean, J., & Fitzgerald, L. (2020). Sexual and reproductive health of women living with HIV in Muslim-majority countries: a systematic mixed studies review. *BMC international health and human rights*, *20*(1), 1-12.

Khan, A. (2000). Adolescents and reproductive health in Pakistan: A literature review Research report No. 11. *Islamabad: Population Council and UNFPA*.

Kishor, S., & Johnson, K. (2004).*Profiling Domestic Violence: A Multi- Country Study*.Calverton, Maryland: ORC Macro.

Kohan, S., Simbar, M., &Taleghani, F. (2012). Empowerment in family planning as viewed by Iranian women: A qualitative study. *Journal of biosocial science*, *44*(2), 209-219.

Lalneizo, D., & Reddy, S. (2010). Health status of children in North Eastern states of India. *Indian Anthropologist*, 37-52. Mason, E. J. (2010). *Identifying factors of influence on family planning practices among rural Haitian women* (Doctoral dissertation, University of Pittsburgh).

Mason, J. E. (2010). Identifying Factors of Influence on Family Planning Practicesamong Rural Haitian Women, http://dscholarship.pitt.edu/7071/1/Mason2010etd.pdf

Mubarik, M., Jameel, N., & Khalil, R. (2016).Knowledge, attitude and utilisation of sub-dermal birth control implants among married rural women of Pakistan. *Int J Res Med Sci*, *4*, 2229-39.

Nasir, L. S., & Al-Qutob, R. (2018).Gender and health.In *Caring for Arab Patients* (pp. 27-59).CRC Press.

Naved, R. T., &Persson, L. Å. (2008). Factors associated with physical spousal abuse of women during pregnancy in Bangladesh. *International family planning perspectives*, 71-78.

Odesanya, A., Hassan, S., &Olaluwoye, D. (2015). Mass media and maternal healthcare: A critical discourse. *New Media and Mass Communication*, *34*, 63-71.

Piotrowski, M. (2013). Mass Media and Rural Out-Migration in the Context of Social Change: Evidence from Nepal. *International Migration*, *51*(3), 169-193.

Radkar, A., &Parasuraman, S. (2007). Maternal deaths in India: an exploration. *Economic and Political Weekly*, 3259-3263.

Rizvi, N., Khan, K. S., &Shaikh, B. T. (2014). Gender: shaping personality, lives and health of women in Pakistan. *BMC women's health*, *14*(1), 1-8.

Saad, A., Akinsulie, B., Ega, C., Akiode, A., &Awaisu, A. (2018).Misconceptions and current use of contraception among women of reproductive age in six major cities in Nigeria. *The European Journal of Contraception & Reproductive Health Care*, *23*(6), 415-420.

Sadiqa, A., &Saleem, N. (2021). Exploring Media Exposure and Perception of Married Urban Women about their Empowerment in Lahore, Pakistan: A Qualitative Study. *VFAST Transactions on Education and Social Sciences*, *9*(4), 01-08.

Shaikh, I. B., Jafry, S. I. A., Naqvi, S. M. Z. H., &Firdous, S. N. (2021).Knowledge, attitude and practices regarding implants among women of childbearing age. *Journal of the Pakistan Medical Association*, 1-9.

Shaikh, B. T., & Rahim, S. T. (2006).Assessing knowledge, exploring needs: A reproductive health survey of adolescents and young adults in Pakistan. *The European Journal of Contraception & Reproductive Health Care*, *11*(2), 132-137.

Westoff, C. F., &Koffman, D. A. (2011).The association of television and radio with reproductive behavior. *Population and Development Review*, *37*(4), 749-759.

World Health Organization. (2011). *Strengthening country office capacity to support sexual and reproductive health in the new aid environment: report of a technical consultation meeting: wrap-up assessment of the 2008-2011 UNFPA-WHO collaborative project, Glion, Switzerland, 21-23 March 2011* (No. WHO/RHR/11.29). World Health Organization.

Zaheen, B., Safdar, A., &Riaz, M. (2021). Impact of Soap Operas on the Television Viewers:Experience from Pakistani Society. Journal of Business and Social Review in Emerging Economies, 7(1), 45-56.

Ayesha Sadiqa is affiliated with Faculty of Media & Communication Studies University of Central Punjab

Faiza Shahid affiliated with Government Graduate College for Women Ali Pur Chattha