

Factors Affecting Contraceptives Use In a Sample of Women Attending Primary Health Center⁺

العوامل المؤثرة لاستخدام موانع الحمل لعينه من النساء المراجعات لمركز الرعاية الصحية الاولى

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Abstract:

The aim of this study is to determine the rate of contraceptive use and factors that might be related to this rate in a sample of women .The study was cross-sectional conducted in primary health center in Al-kadhmyia .The data was collected by direct interview and special questionnaire and the sample was randomly chosen.

Analysis of these sample showed that (397) women (50.7%) were using contraception, while (386), (49.3%) not using contraception.

Oral contraceptive pills were the most commonly used contraception (35.8%) followed by intrauterine device IUD (34.8%). The rate of oral contraception was higher in age group (30-39).While the IUD was more frequently used by age group (<20).Contraceptive was used more by women who had (4-6) live baby. Analysis of results by Chi – square test show that (age group, type of contraceptive, live baby and parity) was significant factors associated with contraceptive used.

Key words: - contraceptive, parity, oral pill, IUD, BSI.

Abbreviations: IUD= Intra-Uterine Device, BSI=Birth Space Interval

المستخلص:

الهدف من الدراسة هو تحديد معدل استخدام موانع الحمل والعوامل المؤثرة به لعينة من النساء وهي دراسة مقطعية شملت مجموعة من النساء المراجعات لمركز الرعاية الصحية الاولى في مدينة الكاظمية. حيث جمعت المعلومات والبيانات باستخدام الاسئلة المباشرة للعينة عشوائيا .

اظهرت نتيجة تحليل العينة ان (397) امرأة تستخدم مانع الحمل (50,7%) بينما بلغت نسبة النساء اللواتي لا يستخدمن فيها موانع الحمل (386) (49,3%).

حبوب منع الحمل هي الاكثر استخداما من باقي الطرق حيث بلغت نسبة استخدامة (35,8%) ويلية اللولب الرحمي حيث بلغت نسبته (34,8%) وكانت معدل استخدام حبوب منع الحمل هو الاعلى في الفئة العمرية (30-39) سنة اما اللولب الرحمي فكان استخدامة في الفئة العمرية (اقل من 20) سنة. موانع الحمل استخدمت بكثرة للنساء الذين لديهم (4-6) ولادات.

بعد تحليل النتائج بطريقة (Chi – square test) تبين وجود فرق معنوي واضح بين استخدام موانع الحمل و) العمر، انواع موانع الحمل، عدد الولادات).

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Introduction:

Family planning is an important strategy in promoting maternal and child health. It improves health through adequate spacing and avoiding pregnancy at high-risk maternal ages and high parities [1].

The quality of family planning services is an important determinant of contraceptive use because it is likely to affect contraceptive continuation by controlling reproduction; women will be able to reach other goals besides having children [2].

Contraception, which is often referred to as birth control, is the Prevention of the fertilization of the human ovum. Contraception works either by suppressing, blocking, or destroying fertility[3].

The means of Contraception include devices, which serve as barriers to the human cells of reproduction (e.g., the male condom or the female diaphragm); chemicals which destroy or incapacitate the human cells of reproduction (e.g., spermicidal); chemicals or hormones which suppress ovulation ,thicken the cervical mucus, or alter the female reproductive system (e.g., the oral contraceptive pill or injectable female hormones); and the destruction of fertility altogether through surgical sterilization (i.e., tubal ligation or vasectomy) [4, 5].

Aim of the study:

- To determine rate of contraceptive uses among sample of women at child bearing age.
- To identify factors associated with the use of contraceptive age, parity, job, and education.

Subject and method

Data collection

Al-kadhymia primary health center was chosen for this study and the design of the study was cross-sectional. The sample was selected randomly and sample size was (783) women at childbearing age. The study started from 1st July till 30th of November 2008 .The data were collected by direct interview and special questionnaire obtained socio-demographic information (age, education, and occupation) types of contraceptive, parity, and birth space interval.

Statistical data analysis

Chi – square test for independence with two samples:

$$\chi^2 = \sum_{i=1}^r \frac{(O_i - E_i)^2}{E_i}$$

O: observed frequency

E: expected frequency

Frequencies and tabulations were obtained and proportion calculated by using computer package SPSS and the P-value of more than 0.01 was considered significant to test the result .

Results :

Table (1): Distribution of sample according to demographic data

Age(years)	Frequency	Percentage
<20	195	24.9
20-29	405	51.7
30-39	152	19.4
40-49	31	4
Total	783	100%

Education	Frequency	Percentage
Illiterate	28	3.6
Primary school	241	30.8
Secondary school	355	45.3
College	159	20.3
Total	783	100%

Occupation	Frequency	Percentage
House wife	623	79.6
Working	160	20.4
Total	783	100%

Table (1): Shows of the (783) married women at the bearing age there were (51.7%) in age group (20-29) years. As for education (45.3%) were secondary school while (20.3%) were college. The occupations of most women (79.6%) were housewife.

Table (2): Distribution of sample according to contraceptive uses

Contraceptive uses	NO.	%
Yes	397	50.7
No	386	49.3
Total	783	100%

Table (2): Shows that (50.7%) of all married women were contraceptive users.

Table (3): relationship between ages group (years) and type contraceptive uses.

Age Groups (years)	Type of Contraceptive use				Total	p.value
	Oral	IUD	Injection	Condom		
< 20	25 25.5%	38 38.8%	10 10.2%	25 25.5%	98 100%	X ² =26.2 p≤ .000 HS
20 - 29	70 40.2%	63 36.2%	9 5.2%	32 18.4%	174 100%	
30 - 39	36 41.9%	30 34.9%	5 5.8%	15 17.4%	86 100%	
40 - 50	11 28.2%	7 17.9%	9 23.1%	12 30.8%	39 100%	
Total	142 35.8%	138 34.8%	33 8.3%	84 21.2%	397 100%	

H.S= high significant

Table (3): Shows that oral contraceptive pills are the most used by the study sample (35.8%), followed by intra uterine device (IUD) (34.8%), while the injection was used (8.3%) of the study sample only. distribution of age groups according to the types of contraception used shows that oral contraceptive are the most commonly used method in (30-39) years follow by (20-29) years. this table shows the relationship between the several types of contraceptive uses and different age groups of the studies sample. It presents that there was a highly significant interaction between the two factors at (p<.000) through using the chi-square test.

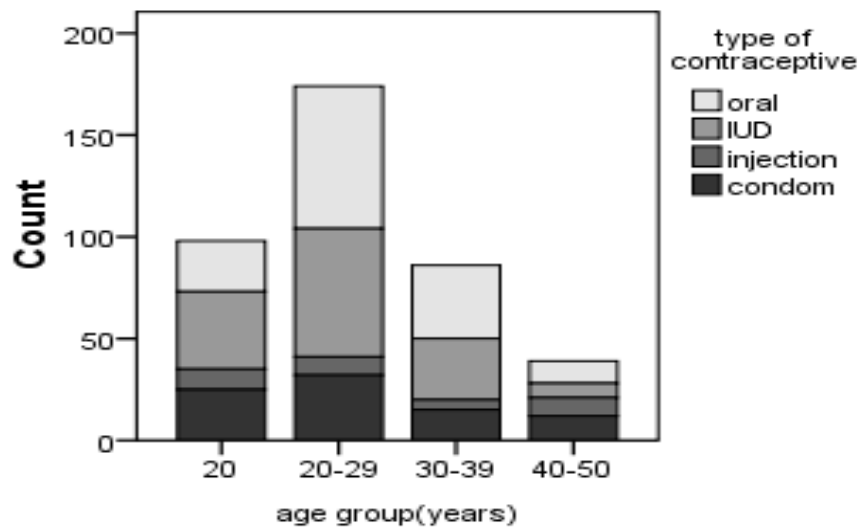


Fig (1): distribution type of contraceptive use according age group.

Table (4): distribution of complication according to study sample.

Complication	No.	%
Bleeding	184	46.3
Psychology	101	25.4
Pain	86	21.7
Obesity	66	16.6
Total	397	110%

Table (4): Showed that (46.3%) of the study sample suffered from bleeding complication followed by (25.4%) of psychological complication.

Table (5): Relationship between birth space interval and contraceptive uses

BSI (years)	Contraceptive use		Total	P .value
	Yes	No		
< 1 year	74 20.6%	285 79.4%	359 100%	X ² =241.8 p≤ .000 H.S
1-2 year	200 73.8%	71 26.2%	271 100%	
>3 year	123 80.4%	30 19.6%	153 100%	
Total	397 50.7%	386 49.3%	783 100%	

H.S= high significant

Table (5): this table shows the relationship between the contraceptive uses and birth space interval of the studies sample. It presents that there was a highly significant interaction between the two factors at (p<.000) through using the chi-square test. The rate of contraceptive use was highest among those with >3 year birth space interval (80.4%) and lowest among those with< 1 year birth space interval.

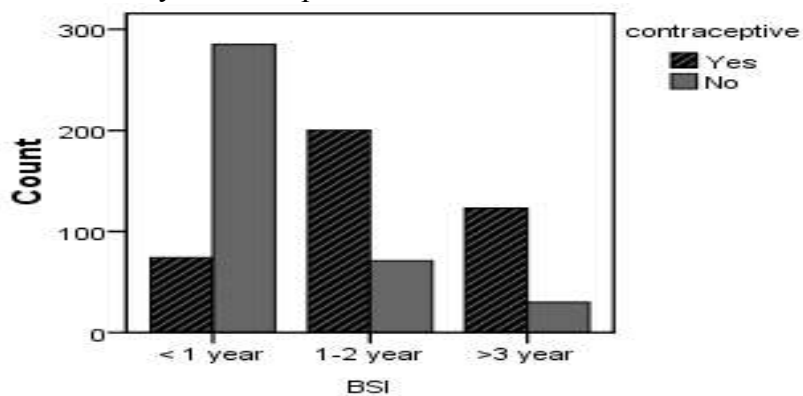


Fig (2): distribution type of contraceptive use according to the birth space interval (BSI).

Table (6): Relationship between contraceptive use and parity (live baby).

parity (live baby)	Contraceptive use		Total	P - value
	Yes	No		
1-3 live baby	260 43.8%	334 56.2%	594 100%	X ² = 47.4 p≤.000 H.S
4-6 live baby	124 72.1%	48 27.9%	172 100%	
7-9 live baby	13 76.5%	4 23.5%	17 100%	
Total	397 50.7%	386 49.3%	783 100%	

H.S= high significant

Table (6): this table shows the relationship between the contraceptive uses and parity (live baby) of the studies sample. It presents that there was a highly significant interaction between the two factors at (p<.000) through using the chi-square test. The rate of contraceptive use is lowest among those with small parity size (43.8%).

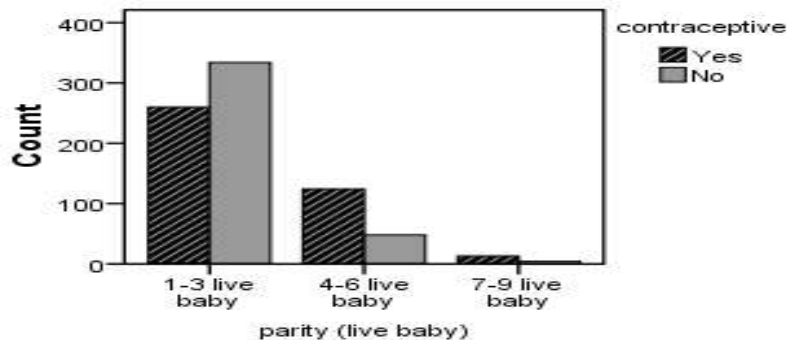


Fig (3): distribution type of contraceptive use according to parity (live baby).

Discussion:

The contraception methods that are available include methods that are short or long acting permanent or reversible method, hormonal or non-hormonal type, and used by women or men [6]. When the more effective forms of modern contraception (especially - the pill) became available, many predicted that contraception would be a great benefit to society. Projections were that the pill would free wome, provide women with reproductive control, help Women to pursue career and educational goals, strengthen marriage and Decrease population [7,8]. Modern contraceptive methods (like the birth control pill, the IUD, and sterilization) are very effective in helping a woman or a couple prevents pregnancy [9]. Oral contraceptive pills are widely used and are generally safe and effective for many women these pills have been widely used in the United States for almost 40 years. Recent data indicate that approximately 10 million U.S. women [10] use oral contraceptive pills annually. The result of this study show quite clearly that ,in the study area increase contraceptive pills uses among

379 women in age group (30-39)years. This finding disagrees with that of the ministry of health in its survey on family planning usage as they found out that Iraqi women used IUD more than other method followed by oral pills [13] and this is similar to the United States of America [11,12] and 15 Asia countries [2] and Morocco [14] and latest survey in Iraq [15]. This may be because of their availability, affordability, reputation and the perception by users they produce only minor complications [16]. Women who are users of contraceptive had longer birth space interval because they perform control of their pregnancy spacing. While non users are mainly getting pregnant within a year which indicates bad knowledge importance of birth space interval for their health and their infant. Contraceptive method had caused mainly irregular bleeding and psychological symptoms these two conditions are the usual side effect of IUD and oral pills used [17]. Condoms on the other hand were used by 21.1% of the sample only in spite of their being a safe contraceptive mean. Condom use was highest in Iraq (29%), followed by Lebanon (11%) and Palestine (4%) [6].

It was found that there was significant association between parity and contraceptive used $p < 0.01$. The same result was seen in Saudi Arabia [18] and not seen in Indonesia and China [19, 20] the possible reasons summarized as: lack of good information of family planning, difficult with access to and quality of family planning services and supplies, desire for children and lack of community participations.

Conclusion:

1. The rate of contraception use was 50.7%.
2. The highest rate of contraceptive used was pills followed by IUD.
3. The highest rate of users was among age group (20-29) of factors that might be related to use of contraceptive was age group, parity, type of contraceptive and number of live baby.

Recommendation:

1. Improve the safety and effectiveness of contraceptive methods.
2. Health education programmes to the women attending to the family planning centre.

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