

PREVALENCE AND ASSOCIATED FACTORS OF CONTRACEPTIVES ACCEPTANCE AMONG REPRODUCTIVE AGE WOMEN ATTENDING FAMILY HEALTH CLINIC

*Norsa'adah Bachok, *Tengku Norbanee Tengku Hamzah, *Zainoremi Che Zakaria, **Aidawani Abdullah & *Nyi Nyi Naing

ABSTRACT

Contraceptives have effects on the population's fertility and mortality as well as sexually transmitted diseases. The aims of this study were to determine the prevalence and its associated factors of contraceptives acceptance among women attending family health clinic. HUSM. Married women in reproductive age 15 to 49 years old were selected by systematic random sampling. Standardized questionnaires were used to interview 411 women. The prevalence of ever-used contraceptive was 41.8% (95% CI: 37.1, 46.6). The percentages of acceptance were 17.5% (pills), 8.8% (injectables), 8.5% (condom), 6.1% (IUD) and 6.1% (traditional methods). The main reasons of using contraceptives were for birth spacing (77.9%) and prevent unintended pregnancy (61.6%). There were no significant differences between contraceptive users and non-users in the mean age of subjects, age at first marriage, menarche, number of birth, abortion and occupation and husbands' age, education and occupation. However there were significant differences between groups in the family income ($p = 0.009$), subjects' education ($p = 0.001$) and occupation ($p < 0.001$). The prevalence of contraceptive acceptance in this study was lower compared to other studies. Hormonal method was the most popular method. Employed or students, higher income and higher educated women were identified as the significant contraceptive acceptors. Health education is needed especially for housewives, lower income and lower educated women.

Keyword: associated factors, contraceptives, family planning, prevalence

INTRODUCTION

Contraceptives allow couples to plan the desired family size and birth spacing. It is not only affecting the women's fertility but also the countries' vital statistics such as maternal and children morbidity and mortality rates, as well as socio-economic and nutritional status of the family and health care of infants, children and women. Barrier methods also provide protection from sexually transmitted diseases. The aims of this study were to determine the prevalence and associated factors of contraceptives acceptance among reproductive age women who attended family health clinic, Hospital Universiti Sains Malaysia (HUSM).

METHODS

This was a cross-sectional study, in which the subjects were married women in reproductive

age (15 - 49 years old), consented to the study and attended family health clinic of HUSM. We excluded nulliparous and menopausal women. The eligible women were selected using systematic random sampling. Data were collected in March to June 2004 by self-administered questionnaire and analysed by SPSS version 11.0. Differences between groups for numerical data were analysed using independent t test while for categorical data using chi-square tests.

RESULTS

Four hundreds and eleven (411) women participated in this study. The prevalence of ever taken contraceptives was 41.8% (95% CI: 37.1-46.6). Pills was the most popular method with 72 (17.5%), followed by injectables - 36 (8.8%), condom - 35 (8.5%), intra-uterine device (IUD)- 25 (6.1%), traditional methods - 25 (6.1%), withdrawal - 16 (3.9%), tubal ligation - 6 (1.5%) and calendar method - 6 (1.5%). The reasons of taking contraception were for birth spacing - 134 (77.9%), prevent unintended pregnancy - 106 (61.6%), persuaded by husband - 25 (14.5%), having health problems - 16 (8.3%) and advice from medical staffs - 11 (6.4%). There were no significant differences between contraceptive users and non-users in the mean age of subjects,

* Unit of Biostatistics and Research Methodology, School of Medical Sciences, Universiti Sains Malaysia, 16150 Kubang Kerian, Kelantan.

** Faculty of Information Technology and Quantitative Sciences, Universiti Teknologi MARA, 40450 Shah Alam, Selangor.

age at first marriage, menarche, number of birth, abortion and occupation and husbands' age, education and occupation. However there were significant differences in the family income ($p =$

0.009), subjects' education ($p = 0.001$) and occupation ($p < 0.001$) between users and non-users of contraceptives (see table I).

Table I. Socio-demographic comparison between users and non-users of contraceptives method

Socio-demographic characteristics	User (n=172)		Non-users (n=239)		p value
	n (%)	Mean (sd)	n (%)	Mean (sd)	
Age of subject (year)	-	36.5(7.8)	-	36.8(7.7)	0.667 ^a
Age of husband (year)	-	39.3(7.9)	-	39.9(8.2)	0.413 ^a
Age at first marriage (year)	-	22.9(2.6)	-	22.5(3.0)	0.123 ^a
Age at menarche	-	13.5(1.4)	-	13.6(1.5)	0.577 ^a
Number of birth	-	4.0(2.2)	-	4.1(2.4)	0.793 ^a
Number of abortion	-	1.5(0.9)	-	1.4(0.6)	0.292 ^a
Monthly family income (RM)	-	2038.0 (1721.9)	-	1632.7 (1394.3)	0.009 ^a
Education of subject					0.001 ^b
Diploma/Degree	42(62.7)		25(37.3)		
Secondary School	124(39.0)		194(61.0)		
Primary School	5(21.7)		18(78.3)		
No Formal Education	1(33.3)		2(66.7)		
Education of husband					0.215 ^b
Diploma/Degree	54(49.1)		56(50.9)		
Secondary School	110(40.0)		165(60.0)		
Primary School	8(32.0)		17(68.0)		
Occupation of subject					<0.001 ^b
Housewife	80(33.9)		156(66.1)		
Employed	86(51.5)		81(48.5)		
Student	6(75.0)		2(25.0)		
Occupation of husband					0.221 ^b
Professional	13(59.1)		9(40.9)		
Skilled	51(45.9)		60(54.1)		
Manual	100(39.8)		151(60.2)		
Unemployed	5(33.3)		10(66.7)		
Others	2(25.0)		9(75.0)		
No Formal Education	0(0.0)		1(100.0)		

^a Independent t test

^b Chi-square test

DISCUSSION

The prevalence of contraceptive acceptors among reproductive age women in this study was lower compared to other studies in Canada¹, Kuwait² and China³. The main reasons of taking contraception in this study were for birth spacing and to prevent unintended pregnancy. Other

study reported the main reasons were spacing as well as to limit family size⁴. This study found that contraceptive acceptance was significantly associated with higher family income, better educational level and being employed or students. Women in higher socio-economic status tend to utilise contraceptives because of better knowledge and awareness regarding the

choices of contraceptive methods and more accessible to the service. Age, education and familiarity about the methods influenced the contraceptive acceptance in Tehran⁵. Women decision about the use and method of contraceptives is affected by perceptions of its risks, benefits and effectiveness; concern about side effects; the methods effect on the relationships with husband; the duration of contraception is desired; history of medical conditions and personal preferences. The choice of methods varies according to the community because of the influence of culture, religion and beliefs. Data from Family Planning Service reported that 83.5% chose pills, 9% - condom and 3.5% - injectable⁶. The most popular contraceptive method in this study was pills followed by injectables. Spermicide, implant, diaphragm and vasectomy were not used at all. Implants is relatively new in Malaysia. IUD and implants, which are highly effective, are among the least utilized, possibly due to their high initial costs; yet over time these might be the least costly methods. Despite uncertain effectiveness, traditional and natural methods remain among the favourites because of the acceptance by some religions. Female sterilization followed by the pills and condoms were the most used methods among women ages 15-44 years old in the United states⁷. In South Africa, the commonest method was injectables because it was promoted by the family planning program as it was easy and cost-effective to administered⁸. In China, IUD was the most popular, followed by female and male sterilization; and pills was one of the least common³. This pattern was probably related to the one child policy of China that required women to take more effective contraceptive methods. In conclusion, this study provides an important contribution to the knowledge concerning preferences for certain contraceptive methods, reasons of using contraceptives and factors associated to the acceptance. Prevalence of ever use of contraceptives were lower compared to other countries. Hormonal method was the most popular method. Employed or

students, higher income and higher educated women were identified as the significant contraceptive acceptors. Health education is needed especially for housewives, lower income and lower educated women.

REFERENCES

- Martin K and Wu Z. Contraceptive use in Canada: 1984-1995. *Family Planning Perspectives* 2000; 32(2): 65-73.
- Shah MA, Shah NM, Chowdhury RJ and Menon I. A profile of contraceptive non-use in Kuwait: implications for health and health care. *Eur J Contracept Reprod Health Care* 2003; 8: 99-108.
- Wang D and Altmann DR. Socio-demographic determinants of intrauterine device use and failure in China. *Human Reproduction* 2002; 17(5): 1226-1232.
- Steele F and Curtis S. Appropriate methods for analysing the effect of method choice on contraceptive discontinuation. *Demography* 2003; 40(1): 1-22.
- Tehrani FR, Farahani FKA and Hashemi MS. Factors influencing contraceptive use in Tehran. *Fam Prac* 2001; 18: 204-208.
- Ministry of Health Malaysia. 2000 Family Planning. Sub System-Health Management Information System. Information and Documentation System Unit, Planning and Development Division, Ministry of Health Malaysia. May, 2001.
- Abma J, Chandra A, Mosher W, Peterson L and Piccinino L. Fertility, family planning and women's health: new data from the 1995 National Survey of Family Growth, National Center for Health Statistics. *Vital statistics* 1997; 23(19), 1-125.
- Kaufman CE. Contraceptive use in South Africa under apartheid. *Demography* 1998; 35:4:421-434.