

EVALUATION OF ATTITUDES REGARDING CONTRACEPTIVE METHODS

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Abstract. Aim. The aim of the study was to identify the degrees of contraceptive methods evaluation, as well as their implications. **Method.** There was used a questionnaire that was applied to women who appealed to family planning and gynaecologic offices from Iași. **Results.** It were investigated 100 women within family planning office, especially from age groups 25 – 29 and 30 – 34 years (respectively 26%) and 100 women, within gynaecologic office, by age 25 – 29 (33%) and 35 – 39 years (26%). The debut of using contraceptives methods was predominant on age groups 20 – 24 years (26% vs 52%) and under 20 years (24% vs 12%). In the first group women with secondary studies were more numerous (68% vs 40%), and in the second one, those with superior studies (22% vs 59%). The most known modern contraceptive methods in both types of offices were: condoms (67% vs 57%); pills (63% vs 56%); cervical cap (55% vs 46%) etc. and as those traditional, coitus interruptus (28% vs 22%); calendar method (45% vs 36%) etc. Up to the interview, most of women did not use any contraceptive method (39% vs 54%). Among family planning services to who women appealed before, family planning offices were 35% vs 21% and gynaecologic ones 34% vs 60%. Women declared as information sources: physician (44% vs 61%), mass-media (36% vs 46%), and supplying sources: pharmacy (39% vs 60%), family doctor office/health unit (20% vs 11%) and declared as unknown 33%. **Conclusions.** At the two types of offices appealed especially young women (25 – 39 years old). Age of debut of using contraceptive methods using, it proved to be more and more younger (average age for the first group being 16,51 years and for the second, 18,2 years.). More younger women use contraceptive methods (average age of debut being for the first group 16.51 years and for the second, 18.2 years).

Key words: family planning office, gynaecologic office, contraceptive methods

Rezumat: Scopul studiului a fost să identifice gradele de evaluare a metodelor contraceptive, ca și implicațiile acestora. **Metodă.** S-a utilizat un chestionar aplicat femeilor care se adresează cabinetelor de planning familial și ginecologice din Municipiul Iași. **Rezultate.** Au fost investigate 100 femei care s-au adresat unui cabinet de planning familial (în special grupele de vârstă 25 – 29 ani: 26% și 30 – 34 ani: 26%) și 100 femei, care s-au adresat unui cabinet ginecologic, de 25 – 29 ani (33%) și 35 – 39 ani (26%). Debutul utilizării metodele contraceptive a predominant la grupele de vârstă 20 – 24 ani (26% vs 52%) și sub 20 ani (24% vs 12%). În primul grup femeile cu studii medii au fost mai numeroase (68% vs 40%), iar în al doilea, cele cu studiile superioare (22% vs 59%). Metodele contraceptive mai cunoscute în cele două tipuri de cabinete au fost: prezervativ (67% vs 57%); pilule (63% vs 56%); sterilet (55% vs 46%) etc. și dintre cele tradiționale, coitus interruptus (28% vs 22%); metoda calendarului (45% vs 36%) etc. Conform interviului, majoritatea femeilor nu foloseau nici o metodă (39% vs 54%). Dintre serviciile de planificare familială la care au apelat femeile înainte, cabinetul de planificare familială a reprezentat 35% vs 21 % și cel ginecologic 34% vs 60%. Femeile au declarat ca surse de informare: medic (44% vs 61%), mass-media (36% vs 46%), iar sursele de aprovizionare: farmacia (39% vs 60%), cabinet medic de

familie/dispensar (20% vs 11%), și declarată ca necunoscută 33%. **Concluzii.** La cele două tipuri de cabinete au apelat în special femeii tinere (25 – 39 ani). Vârsta de debut a utilizării metodelor contraceptive s-a dovedit a fi din ce în ce mai tânără (vârsta medie pentru primul grup fiind de 16,51 ani și pentru al doilea, 18,2 ani). Femeii din ce în ce mai tinere utilizează metode contraceptive (vârsta medie de debut fiind pentru primul grup de 16,51 ani și pentru al doilea de 18,2 ani).

Cuvinte cheie: cabinet de planning familial, cabinet ginecologic, metode contraceptive

INTRODUCTION

The literature in the field specifies as **contraceptive methods:** injectables, implanted, female and male sterilization, new intrauterine devices, oral contraceptives, condoms, spermicides, diaphragms, cervical cupolas, vasectomy, methods of fertile period, of lactational amenorrhea (MLA), recurrent abstinence (1).

The utility significance of different methods derives from their different results:

- decreasing number of maternal deaths,
- pregnancy prevention,
- decreasing of pelvis inflammatory diseases, of menstrual pains intensity, prevention of some types of cancer (combined oral contraceptives),
- prevention of sexual communicable diseases and of other infections (condoms, spermicides, diaphragms and cupolas) (1).

The choice of contraceptive methods is usually influenced by: age under 16 and over 40 years, lactation period, smoke, nulliparity, cardiovascular diseases, diabetes mellitus, cephalalgia, genital diseases, breast cancer, sexual communicable diseases, hepatitis, obesity, tuberculosis, chronic treatments (with phenitoin, carbamazepin, barbiturics, rifampicin) (2, 4).

At international level, a great number of institutions showed the importance

of family planning as part of health reproduction. In 2005 it was performed a study made by Ministry of Health in 2005, in collaboration with United Nations Fund for Population (UNFPA), UNICEF (United Nations Fund for Children), United States Agency for International Development (USAID), Institute for Research and Formating John Snow, Inc. (ISI R& T), Swiss Agency for Development and Cooperation (SDC), WHO, Institute for Mother and Child Protection "Alfred Rusescu" (IMCP). After 1990, there were developed programs of health reproduction and family planning. Even with all these methods and a high number of family planning units, maternal, as well as infant mortality remain however among of the highest level in Europe (3).

The mentioned study was performed on a group of 4500 women with ages between 15 – 44 years old, especially age groups 25 – 29 (17.7%) and 30 – 34 (17.5%) and 2500 men between 15 – 49 years, especially groups 35 – 39 (16.9%) and 45 – 49 (16.7%).

The percentage of women who used contraceptive methods increased from 1993 (40.5%, with 10% as modern), to 58.1% (in 2004, 34% being modern).

Regarding civil status, using modern contraceptive methods increased from 29.5% (married), 12.2% (divorced),

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respectively 12.7% (unmarried) in 1999, to 38.2%, 34.3%, respectively 26.2% in 2004. Traditional methods had the same trend, increasing from 7.7% (divorced), respectively 7.1% (unmarried) in 1999, to 22.9%, respectively 9.7% in 2004, the only exception being married women, who used less methods in 2004 (32.2%), comparative with 1999 (34.3%) (3).

Although the modern methods increased, the traditional ones prevailed, especially coitus interruptus 25.5%, comparative to condom 12.1% and pills 14.1% (on couple women), respectively 14.6% *versus* 11.1% and 14.2%, exception being unmarried women, to whom prevail modern methods – condom 15.4%, pill 9.8%, comparative to traditional ones (coitus interruptus 7.4%) (3).

According to the same study, 99% of interviewed women know contraceptive methods, in different degrees, especially coupled or divorced, respectively with high level of instruction, percentages being: condom 99%, pills 93%, intrauterine devices 89%, periodical abstinence 87%, coitus interruptus 82% etc.

Tubal occlusion, spermicides, vasectomy, urgent contraception and injectable contraceptives are known better to women with high level of study. Among those with primary studies, condom is known by 88% of women (3).

As information source about contraceptive methods, friends, colleges or acquaintances prevail (79%) in 2004, followed by doctor 39%, partner 36%, television or radio 31%, relatives 24%, parents 24% etc., and regarding age

groups: at 15 – 24 years friends and colleges, followed by parents and television, at 25 – 34 and 35 – 44 years, friends and colleges, doctor and partner.

From the point of view of method type, prevalent sources were friends, colleges or acquaintances and physicians (3):

- pills – friends and colleges 44% and physicians 21%
- cervical cap – friends and colleges 36% and physicians 27%
- spermicides – friends and colleges 49% and physicians 14%
- calendar method – friends 45% and parents 20%
- coitus interruptus – partner 40%, friends 34% etc.
- Supplying sources with modern contraceptive methods for women were pharmacy and hospital:
- condom – pharmacy 65% and market 22%
- spermicides – pharmacy 88%
- pills – pharmacy 63% and health sector 36%
- cervical cap – hospital 50% etc.
- Among positive effects of contraceptive methods known by interviewed women:
- pills – menstruation regulation 54%, prevention for some forms of genital cancer 49%, decrease blood loss 39% and menstrual pains 38%,
- intrauterine devices – increase pleasure of sexual act 32%, cost relatively low 29%.

Another aspect is represented by factors which can influence contraceptive methods using: secondary effects 69%, partners preferences 52%, absence of knowledge about other methods 39%,

cost 38%, availability of modern methods 35%, believe that she can not be pregnant 28%, pregnancy or confinement status 19%, etc. Secondary effects which can occur following contraceptive methods were: for condom – nausea and vomiting 21%, cephalalgia or dizzy 17%, weight increasing 17% and for injectable methods – absence of menstruation 30%, cephalalgia and dizzy 23%, nausea and vomiting 20%. 57% of women who use not the methods don't want to use in future, the wish decreasing with increasing of number of live children.

MATERIAL AND METHODS

The study is a descriptive epidemiological type achieved by a questionnaire, during the period 2005 – 2007, with

22 questions, that was applied to women who appealed to family planning and gynaecologic offices from Iași.

RESULTS AND DISCUSSIONS

There were investigated 100 women who appealed to family planning office of Cuza Vodă Maternity, comparative to 100 women who appealed to a gynaecologic office, through a questionnaire by interview.

In the first group, the average age of women was the same with the median age 29 years old. Prevailing age groups were 25 – 29 and 30 – 34 years (both 26%). In the second group, the average age was 31 years, the median was 30 years, prevailing age groups 25 – 29 years (33%) and 35 – 39 years (26%) (fig. 1).

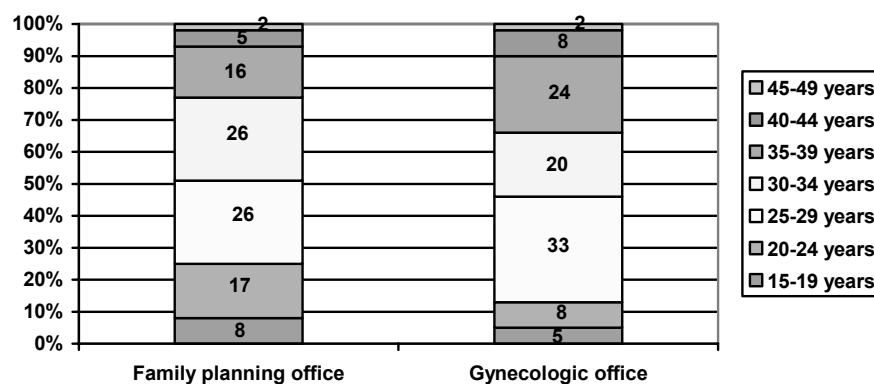


Fig. 1. Women repartition in the two groups, by age groups

Women used contraceptive methods for average 5 years, in the first group and for average 7 years in the second. It prevailed married women, in the both groups (50% vs 80%, more numerous in the second, $p = 0,0008112$),

followed by unmarried ones (38% vs 17%, $p = 0,0015390$).

To the family planning office appealed especially women with secondary studies, comparative with gynaecologic office, where prevailed women with

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superior studies (68% vs 40%, $p = 0,0001278$, respectively 22% vs 59%, $p < 0,001$) (fig. 2). As occupation, prevailed employed women (56% vs

88%; $p = 0,0001278$), with a higher proportion of household in the first group (31% vs 4%; $p < 0,001$) (fig. 3).

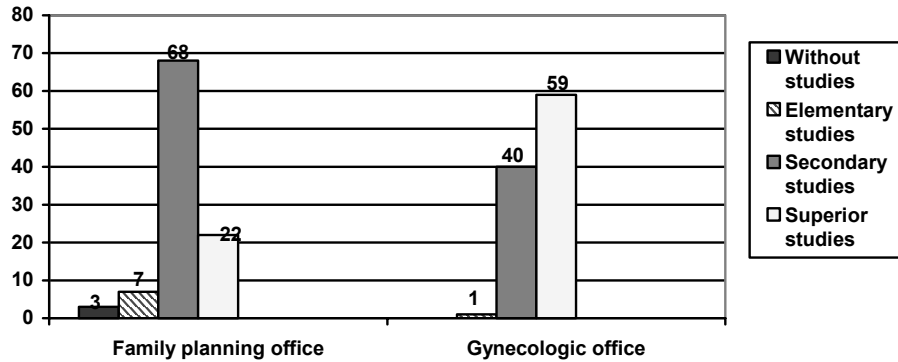


Fig. 2. Women repartition in the two groups, by level of studies

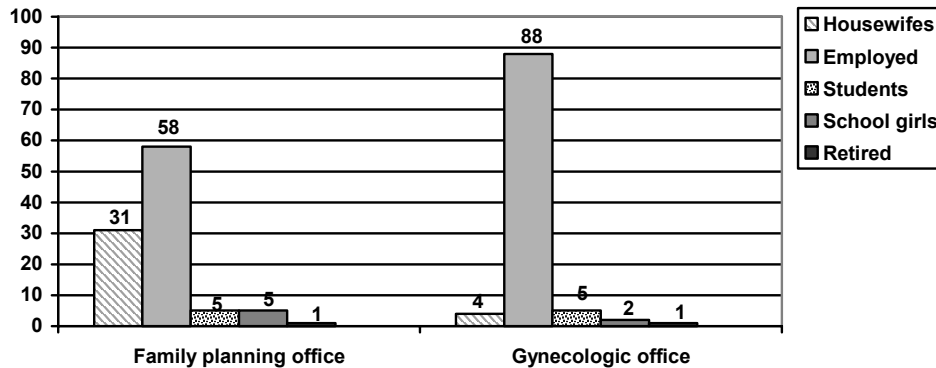


Fig. 3. Women repartition in the two groups, by occupational level

The most known modern contraceptive methods were: condom (67% vs 57%); pills (63% vs 56%); cervical cap (55% vs 46%). From traditional ones, is mentioned coitus interruptus (28% vs 22%); calendar method (45% vs 36%)

etc. (table 1). A percentage of 5% from women of the first group and 39% from the second one had information about all these methods ($p < 0,001$).

Table 1. Women frequency in two groups, by known contraceptive methods

Known contraceptive methods	Family planning office (%)	Gynaecologic office (%)
condoms	67	57
pills	63	56
cervical cap	55	46
tubal occlusion	30	27
other modern methods	22	20
coitus interruptus	28	22
calendar method	45	36
other traditional methods	8	1
all methods	2	39

Women with secondary studies had knowledge about condoms (49% vs 28%, more numerous in the first group, $p = 0,0036568$), pills (44% vs 28%, $p = 0,0271254$), cervical cap (37% vs 22%, $p = 0,0299510$), tubal occlusion (23% vs 15%) and calendar method (31% vs 15%, $p = 0,0117226$) and women with superior studies: condom (14% vs 28%, $p = 0,0240166$), pills (16% vs 26%), cervical cap (14% vs 23%), tubal occlusion (7% vs 11%) and calendar method (12% vs 20%). Women which have information about all methods were 3% vs 30% ($p < 0,001$) (tab. 2). As seen in table 2, using contraceptive methods is correlated with level of

studies, condoms, pills and cervical cap being used in higher proportion. Also, women who appeal to family planning office have better knowledge about contraceptive methods and they are more aware about using them.

Among contraceptive methods used on the moment of questionnaire, prevailed in the both groups, pills (24% vs 20%) and condoms (18% vs 12%) (fig.4), some women using two methods in the same time (6% in the first group and 4% in the second), but the most women did not used any method at that time (39% vs 54%, $p = 0,0471703$).

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Table 2. Repartition of contraceptive methods known by women, by level of studies

Contraceptive methods	Level of studies (%)					
	Secondary			Superior		
	First group	Second group	Statistic significance	First group	Second group	Statistic significance
1. Condoms	49	28	$\chi^2_c = 8,45, p = 0,0036568$	14	28	$\chi^2_c = 5,09, p = 0,0240166$
2. Pills	44	28	$\chi^2_c = 4,88, p = 0,0271254$	16	26	-
3. Cervical cap	37	22	$\chi^2_c = 4,71, p = 0,0299510$	14	23	-
4. Spermicides	9	4	-	6	8	-
5. Tubal occlusion	23	15	-	7	11	-
6. Other modern methods	5	2	-	1	5	-
7. Coitus interruptus	17	8	-	9	14	-
8. Calendar method	31	15	$X^2_c=6,35, p = 0,0117226$	12	20	-
9. Other traditional methods	4	-	-	3	1	-
10. No methods	2	-	-	6	-	-
11. All methods	-	9	-	3	30	$X^2_c = 24,53, p < 0,001$

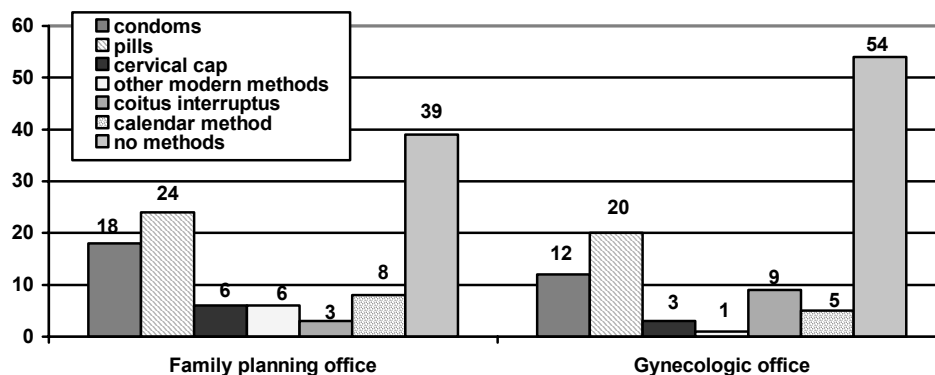


Fig. 4. Women frequencies in the two groups, by the present use of contraceptive methods

Among causes of avoiding these methods were fear for own health (20% vs 11%), secondary effects (8% vs 16%), pregnancy or confinement (2% vs 15%), wish to be pregnant (17% vs 15%), wish to

be pregnant (17% for second group), and "don't know" (55% vs 41%). 10% in the first group and the same proportion in the second had more than two reason (fig. 5).

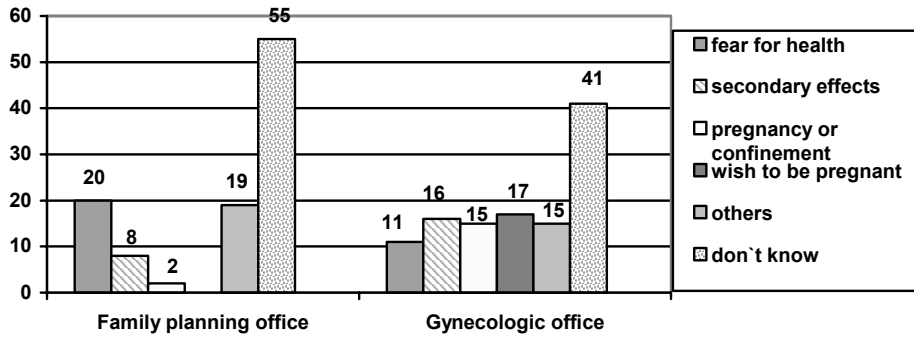


Fig. 5. Women repartition in the two groups, by causes of avoiding contraceptive methods

Debut of using contraceptive methods prevailed, for both groups, on age groups 20 – 24 years (26% vs 54%, $p < 0,001$) and under 20 years (24% vs 12%, $p = 0,0429107$), and 28% in the first group and 19% in the second did

not used any methods until the questionnaire. Average age for debut of sexual life for de first group was 16,51 years, respectively 18,2 for the second (fig. 6).

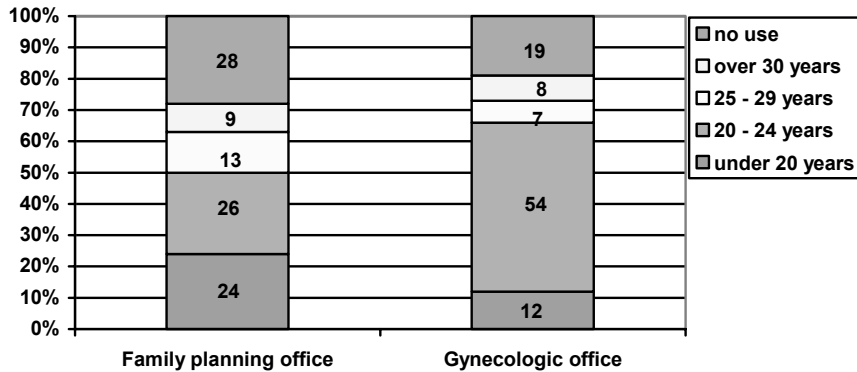


Fig. 6. Women repartition by age debut of using contraceptive methods

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Reason for abandoning contraceptive methods were different: "nausea and vomiting" (10% vs 4%), "cephalalgia and dizzy" (10% vs 7%), "weight increasing" (11% vs 10%), "menstruation absence" (7% vs 2%), others (absence of partner, insecurity in preventing

pregnancy, pregnancy, antecedents of trombophlebitis, absence from pharmacies etc.: 15% vs 36%, $p = 0,0011760$) and "don't know" (59% vs 47%). 10% women in the first group and 3% in the second had more than two reason for abandoning (fig. 7).

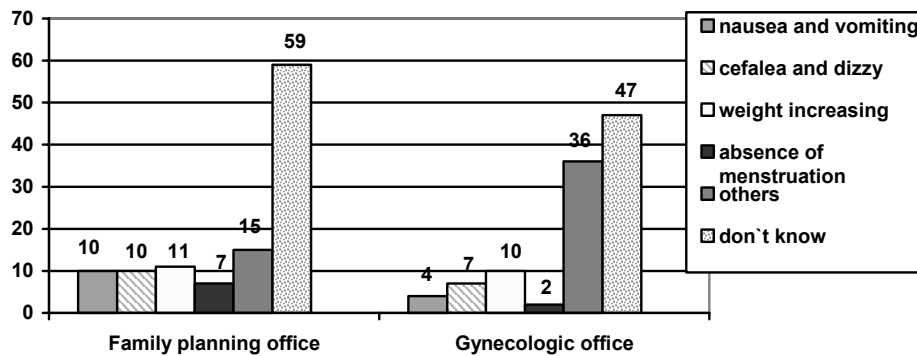


Fig. 7. Women frequencies by reason of abandoning contraceptive methods

Regarding efficiency of contraceptive methods, 25% vs 39% were considered "very efficient" ($p = 0,0487694$), 23% vs 34% "efficient", 1% vs 2% "inefficient" and 49% vs 25% "don't know" ($p = 0,0007557$).

Regarding advantages of contraceptive methods, women answered: women who not known or did not want to answer (28% vs 2%), knew some information about pill (10% vs 12%), condom (14% vs 15%), both (29% vs 57%), (women who know about advantages of two types being more numerous in the second: $p = 0,00012$) and about all three types 15% vs 13%. As disadvantages of contraceptive methods, for both groups: women who not known or did not want to answer

(62% vs 50%), knew about pill (4% vs 13%), condom 3% in both groups, IUD (1% vs 12%), pill and condom (8% vs 12%), etc. (women who know disadvantages of two types being more numerous in the second: $p = 0,0004705$) and about all three types both 16%.

Family planning services to whom appealed questioned women were: family planning office (35% vs 21%, $p = 0,0406279$), family doctor office (23% vs 27%), gynecologic office (34% vs 60%, $p = 0,0003972$), hospital (10% vs 13%) and 33% vs 28% declared that they did not appeal up to the moment of questionnaire. 22% of women in the first group and 36% in the second appealed to more

than two types of family planning services (fig. 8).

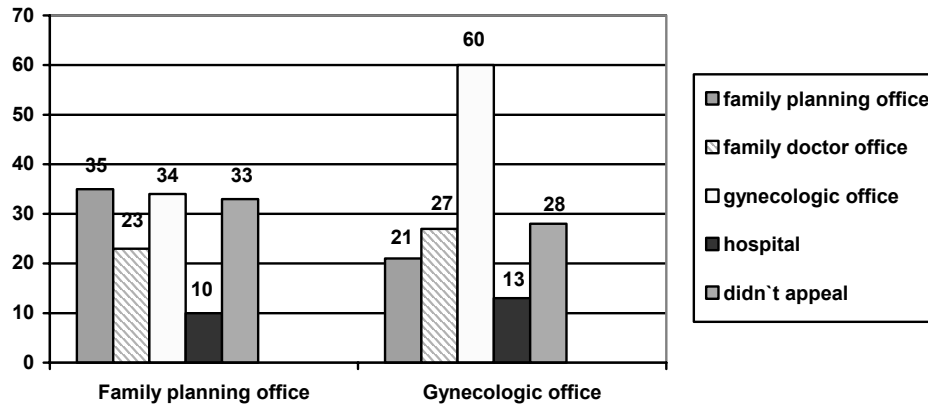


Fig. 8. Women frequencies by types of family planning services

Among reason of appealing to these services, periodical control represented 34% (23% with secondary studies and 11% superior) for the first group and 35% (12%, respectively 24%) for the second one, information 12% in first (7%, respectively 4%) and 9% in second (3%, respectively 6%), wish do not have children 12% (7%, respectively 3%) in the first and 1% (p = 0,0041270), caution 9% (4%, respectively 5%) in the first and 7%

wish to remain pregnant, in the second group. Information sources about contraceptive methods were: physician (44% vs 61%, p = 0,0223774), mass-media 36% vs 46%, Internet (18% vs 42%, p = 0,0003867), friend/acquaintance or college (38% vs 23%, p = 0,0315426) (Fig. 9). 58% of women in the first group and 75% in the second used more than two information sources (table 3).

Table 3. Women frequencies in the two groups by number of family planning services to who appealed

Number of family planning services to whom appealed women	Family planning office	Gynaecologic office
Did not appeal	24	-
One service	18	25
Two services	14	23
Three services	12	16
Four services and over	32	36

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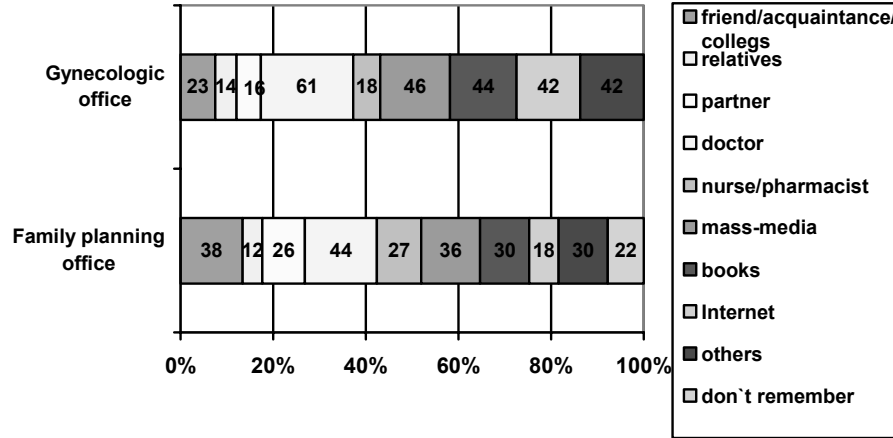


Fig. 9. Women frequencies by information sources regarding contraceptive methods

Supplying sources with contraceptives were: pharmacy 39% (29% with secondary studies and 10% superior) vs 60% (21%, respectively 39%, $p = 0,0046757$), hospital/maternity/gynacologic department 3% (2%, respectively 1%) vs 12% (8%, respectively 4%, $p =$

0,0317376), family doctor office/health unit 20% (12%, respectively 6%) vs 11% (3%, respectively 8%), family planning office or clinic 19% (13%, respectively 6%) vs 6% ($p = 0,0102965$) and undeclared 33% (22%, respectively 5%) vs 20% (7%, respectively 13%) (fig. 10).

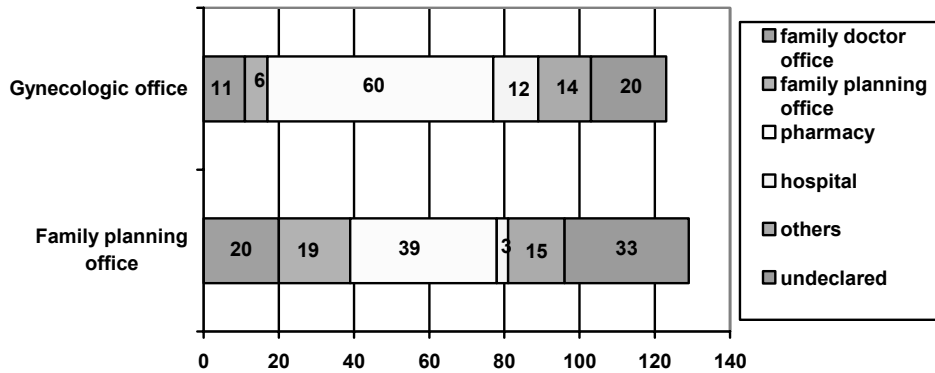


Fig. 10. Women frequencies by supplying sources with contraceptive methods

In general, women intended to use contraceptive methods in the future: condom (11% vs 18%), pills (28% vs 41%), cervical cap (15% vs 8%), tubal occlusion (2% for both), other modern methods (5% vs 1%), coitus interruptus (2% for both), calendar method (1% vs 5%), don't know (6% vs 17%, $p = 0,0266584$) and want to use abstinence (37% vs 16%, $p = 0,0013534$).

Regarding partner opinion for the two samples about contraceptive methods,

the answers were as follows: 35% vs 15% don't have any opinion ($p = 0,0019177$), have very good opinion (17% vs 19%), good enough (4% for both groups), good (25% vs 38%), not so good (6% vs 3%), don't concern (6% vs 14%) and don't know (5% vs 6%) (fig. 11). 44% of women from the first group and 63% from the second used one supplying source ($p = 0,0107154$) and 22% vs 17% more than two.

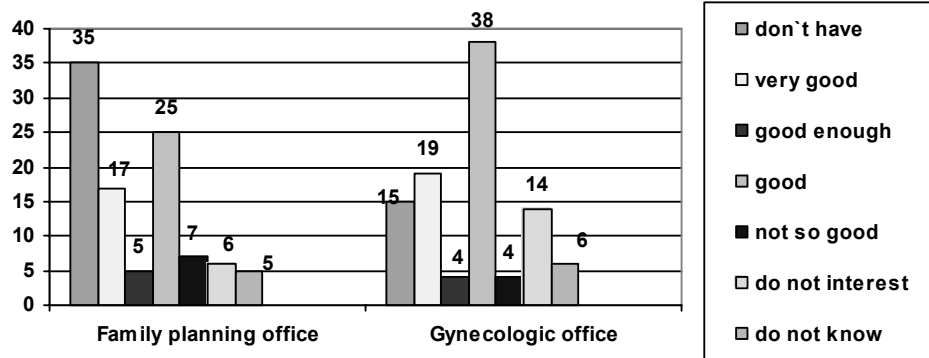


Fig. 11. Women repartition by partner opinion regarding contraceptive methods

CONCLUSIONS

There were investigated 100 women who appealed to family planning office, comparative to 100 women who appealed to a gynaecologic office, through a questionnaire by interview.

Women were investigated regarding age groups (with prevalence of group 25 – 34). Average age was 29 years in the first group and 31 years in the second one.

Women with secondary studies prevailed in the first group and those with superior studies in the second one.

Over 50% had knowledge's about condoms, pills, cervical cap and/or calendar method, either of one, many or all method, up to the interview prevailing using pills and condom.

One third of these women did not use contraceptive methods up to the interview, among reason prevailing

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secondary effects, or wish to remain pregnant.

Debut of using contraceptive methods was at age groups 20 – 24 and under 20 years. Beginning of sexual life was at average age of 16.51 years in first group and 18.2 in second one.

The prevailing reason of abandoning contraceptive methods was "don't know" – 20%.

Most of women have knowledge about advantages and disadvantages of contraceptive methods.

In most cases, women appealed especially to family planning and gynaecologic offices, for periodical control.

The main information sources about contraceptive methods were physician, company and mass-media.

Most of women use as supplying sources with contraceptives: pharmacy, family doctor or hospital.

Also the women's partners have been in most cases admittedly with the use of contraceptives.

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