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RESEARCH ARTICLE

EFFECT OF EDUCATION AND PARITY ON THE USE OF CONTRACEPTION IN TAIF REGION.

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Abstract

Introduction: Saudi women are using contraception for child spacing rather than limiting fertility, especially after having a certain number of children. Effect of education and parity on prevalence of contraceptives use was not studied in this region of Saudi Arabia. Thus, the present study was conducted to identify the effect of education and parity on prevalence of contraceptives use by women of this region.

Research Methodology: A descriptive cross-sectional study was conducted in Obstetrics and Gynecology outpatient clinic in King Abdul Aziz Specialist Hospital, Taif, Saudi Arabia from January to March, 2015. Married women living with spouse, aged 18 to 49 years and having at least one child were invited to participate in the study through convenience sampling method. The data was collected on socio demographic characteristics as well as contraceptive use from all enrolled participants after informed consent. The data was analyzed using SPSS21 statistical software (IBM SPSS Inc., Chicago, IL, USA).

Results: Among four hundred and fifty four participants, majority (52.6%) were non users of contraceptives. The most common method of contraceptive use was pills (74%), followed by IUCD (16.7%), and male condoms (4.7%). Significant difference was found in comparison of education between the two groups, where around eighty five percent of contraceptive users had education of secondary level or above compared to only sixty five percent among non-contraceptive users (p-value < 0.001). Moreover, parity also showed significant difference, where slightly more than fifty percent of contraceptive users had parity greater than two, compared to around seventy five percent in non-contraceptive users (p-value < 0.001).

Conclusion: There is significant increase in using contraception among Saudi women in Taif region in reproductive age group and this intention to use of different contraceptive methods was found associated with the increase level of education and parity.

Introduction:-

According to World Health Organization (WHO), the prevalence of contraceptive use among a society is one of the determinants of women's health and empowerment in that society.[1] Some societies are using contraceptives to regulate pregnancies and birth spacing.[2]Birth spacing has been identified as one of the six essential health

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interventions needed to achieve safe motherhood by the World Health Organization.[3]Contraceptive use has increased in nearly every country in recent decades.[4] Among developing countries fertility and contraceptive use have been associated with various markers of socioeconomic status, most important of which is women's education. There is a well-documented link between female education and use of contraception which can play an important role in development of family planning policies in lower income countries.[5]Saudi Arabia is a country of population who have the desire for large family and high rate of birth in comparison to those in developed countries. However, the overall rapid change in the socio-demographic pattern of the Saudi Arabian community, notably the changes associated with women's education and work could be an important factor in changing fertility beliefs and behaviors about contraception. On account of these transitions Saudi women have more tendencies towards birth spacing and consequently, the use of contraception.[6] Contraceptive use can have an impact on increased spacing between children, better child care, improvement of children's health and preservation of the mother's health. Therefore when women is educated she will be in a better position for decision-making and it means that educations a key indicator of women's status. By reviewing the literature, it was found that Saudi women were using contraception for child spacing rather than limiting fertility, especially after having a certain number of children.[7,8] Effect of education and parity on prevalence of contraceptives use was not studied in this region of Saudi Arabia before, so this study was conducted to find the association of education and parity on prevalence of contraception use by women of this region.

Methods:-

A descriptive cross-sectional study was conducted in Obstetrics and Gynecology outpatient clinic in King Abdul Aziz Specialist Hospital, Taif, Saudi Arabia from January to March, 2015. Married women living with spouse, aged 18 to 49 years and having at least one child were invited to participate in the study through convenience sampling method. Participants with psychiatric illness, speech defects, medical/ surgical illness and not willing to give informed consent were excluded. Prior to enrollment in the study a written informed consent was obtained from all eligible participants. Participation in this study was voluntary and the study participants had the right to withdraw during any stage of the research or not to respond to any one or more questions. Anonymity and confidentiality of the participant's response was maintained throughout the research project. The study was approved by the Institutional Review Board (IRB) of King Abdul Aziz Hospital.

Data was collected using a structured questionnaire. The Questionnaire was developed both in English and Arabic language and was used accordingly based on the language understood by the participants. The questionnaire consisted of two parts; the first part of the questionnaire collected socio-demographic information (i.e. age, education, residence as rural or urban, employment status and parity) of the participants while the second part collected information on contraceptive use.

Data Analysis:-

Then SPSS 21.0 statistical software (IBM SPSS Inc., Chicago, IL, USA) was used for statistical analyses. The data was entered and validated twice for incorrect entries. Questions with missing responses were excluded from analysis. Descriptive statistics were performed. Qualitative variables (i.e. age categories, residence, education, employment status, parity and contraceptive use) were presented as frequency and percentage. Chi square statistics was used to test an association between contraceptive use with education and parity. For the level of significance, p-value < 0.05 was considered significant.

Results:-

The questionnaire was distributed to 510 eligible participants. The response rate was around eighty three percent (94.1%) with four hundred and eighty participants completed the questionnaire. Among those twenty six questionnaires were incomplete or with missing responses which were excluded. Finally, the data of four hundred and fifty four ($n = 454$) was analyzed.

The table 1 gives details of the socio demographic characteristics of the study participants. Majority (43.2%) of the participants were in age category 31-40 years, followed age category of 20-30 years (36.3%). Among the participants, only around forty one percent had education above secondary level. Majority (87.2%) of the study participants belonged to urban areas. Predominantly, the participants were house wives where only ninety seven participants (21.4%) were employed. Slightly, less than three quarter of the participants (70.9%) had parity 1-4.

Table 1:- Socio Demographic characteristics of the study participants (N = 454)

Socio demographic characteristics	n (%)
Age categories (years)	
< 20 years	12 (2.6)
20 - 30 years	165 (36.3)
31 - 40 years	196 (43.2)
41 – 49 years	81 (17.8)
Education level	
Uneducated	25 (5.5)
Primary level	91 (20.0)
Secondary level	151 (33.3)
Higher level	187 (41.2)
Residence	
Urban	396 (87.2)
Rural	58 (12.8)
Parity	
1-2	167 (36.8)
3-4	155 (34.1)
5-6	91 (20.0)
7 and more	41 (9.0)
Employment status	
Employed	97 (21.4)
Non employed	357 (78.6)

Among four hundred and fifty four participants, majority (52.6%) were non users of contraceptives. Among, two hundred and fifteen participants who affirmed the use of contraceptive, the most common method of contraceptive use was pills (74%), followed by IUCD (16.7%), and male condoms (4.7%). The traditional methods (i.e. rhythm and withdrawal) were less common and practiced by only by less than five percent. Table 2 give details of the contraceptive use.

Table 2:- Use of Contraceptives

Use of Contraceptives	n (%)
Contraceptive use	
User	215 (47.4)
Non user	239 (52.6)
Modern	
Pills	159 (74)
Intrauterine contraceptive device (IUCD)	36 (16.7)
Male condoms	10 (4.7)
Traditional	
Rhythm	7 (3.3)
Withdrawal	3 (1.4)

The table 3 gives details of the comparison of socio demographic characteristics between contraceptive users and non-users. Significant difference was found in age categories, education level and parity. Significantly, greater proportion of participants (45.1%) in age category (20-30 years) was contraceptive users compared to only 28.5% in the similar category. No significant difference was found in residence and employment status, although slightly greater proportion of contraceptive users were residing in urban areas and working. Importantly, significant difference was found in comparison of education between the two groups, where around eighty five percent of contraceptive users had education of secondary level or above compared to only sixty five percent among non-contraceptive users. Finally, parity also showed significant difference, where slightly more than fifty percent of contraceptive users had parity greater than two, compared to around seventy five percent in non-contraceptive users.

Table 3:- Comparison of Socio Demographic characteristics between users and non users of contraceptives

Socio demographic characteristics	Users(n = 215)	Non Users(n = 239)	p-value
Age categories (years)			
< 20 years	5 (2.3)	7 (2.9)	0.0026
20 - 30 years	97 (45.1)	68 (28.5)	
31 - 40 years	83 (38.6)	113 (47.3)	
41 – 49 years	30 (14.0)	51 (21.3)	
Education level			
Uneducated	4 (1.9)	21 (8.8)	0.001
Primary level	29 (13.5)	62 (25.9)	
Secondary level	78 (36.3)	73 (30.5)	
Higher level	104 (48.4)	83 (34.7)	
Residence			
Urban	191 (88.8)	205 (85.8)	0.408
Rural	24 (11.2)	34 (14.2)	
Parity			
1-2	105 (48.8)	62 (25.9)	0.001
3-4	66 (30.7)	89 (37.2)	
5-6	41 (19.1)	50 (20.9)	
7 and more	3 (1.4)	38 (15.9)	
Employment status			
Employed	51 (23.7)	46 (19.2)	0.294
Non employed	164 (76.3)	193 (81.8)	

Discussion:-

The results of the present study conducted among the married women of reproductive age residing in Taif, Saudi Arabia reported the prevalence of contraceptive use slightly less than fifty percent. Moreover, the study also emphasized that modern methods of contraception (pills, IUCD and male condoms) were more commonly used. Finally, this study suggested that there is a strong relationship between current use of contraception with parity and education of women indecision making about use of contraception.

The present study conducted among the married women of reproductive age residing in Taif, Saudi Arabia reported the prevalence of contraceptive use as around forty seven percent. The reported prevalence of contraceptive use was found far lower than the global rates (63.1%) as well as in developed countries (67.4%) and other countries of Middle East i.e. Syria (58.3%) and Bahrain (61.8%).[9]The result of the present study is slightly higher with the previously conducted study in Saudi Arabia which reported the contraceptive prevalence rate as 40%.[3]

The present study identified that the most common method of contraceptive use was pills followed by IUCD. The findings are consistent with another study conducted in the Qassim region in 2010, which reported that modern contraceptive methods were more used, with pills (70.2%), followed by IUCD (12%) and male condoms as (7%).[3] None of the participants reported the use of female sterilization. This can be accounted the participants traditions and Islamic culture that accept only temporary delay of pregnancy and reject permanent sterilization.

There was a strong association between the participants' age and the use of contraceptives. This could suggest that the mother may be satisfied by the number of children she has had and feels that she needs more spacing for preserving her health. This notion is consistent with the results of the indigenous study in a rural area near Riyadh[6], which reported that parity and current age of the mother were the only significant predictors of birth intervals. The present study highlighted a significant association between current use of contraception with parity and education of women. Women with higher level of education and parity had increased likelihood to adapt to contraceptive use. As in the present study around eighty five percent of contraceptive users had education of secondary level or above compared to only sixty five percent among non-contraceptive users. Previous study from Saudi Arabia also reported that utilization of contraception also increased significantly with the increasing level of education with women with the highest level of education used contraceptives more than twice with odds ratio of 2.7 than the non-educated ones.[3] A recent study from India also reported a significant association between parity and contraceptive use, among the women who had 2 children, 37.2% were users of contraceptives as compared to 15% who had more than 2

children.[10]Another study from India reported that educating women and their respective husbands about proper use and benefits of modern contraceptives is important to solve the problem of high unmet need for family planning among these tribal women.[11] A study from Pakistan also reported similar findings, with contraceptive use increased with increasing age of mother, parity and number of living children.[12] Another study from Pakistan reported that women who had a secondary or higher level of education and three or more children had elevated odds of using contraceptives.[13]Moreover, more than fifty percent of contraceptive users had parity greater than two, compared to around seventy five percent in non-contraceptive users. The previous study from Saudi Arabia conducted in 2010 also reported that women with higher parity (7 and more) were using contraceptives twice as much as those with 1-3 children.[3] The study conducted in Chennai, India also reported that increased parity is a significant factors for non-usage of contraceptives.[10] Another study conducted in Cambodia has shown that women who are old, more educated, have higher income and live in urban areas are more likely to use modern contraceptive methods.[14]

Limitations of the Study:-

The study has few limitations. Firstly, being a cross-sectional survey conducted at single tertiary care setting of Taif region, the findings could not be generalizable. Moreover, only Saudi women who can understand Arabic language were recruited in the study which not be the representative community of the region. Moreover, the participants were recruited through convenience sampling, thus induces the chances of sampling bias. Thus, in future multicenter study will be beneficial in more realistic and precise estimate of association of education and parity with contraceptive use in the Saudi population.

Conclusion:-

There is significant increase in using contraception among Saudi women in Taif region in reproductive age group (18-49) and this intention to use of different contraceptive methods is associated with the increase level of education and parity. Therefore, increasing awareness about different contraceptive methods, their advantages and limitations among reproductive age women with lower education was deemed essential.

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