

# Family planning attitudes of women and affecting factors

*Kadınların aile planlamasına ilişkin tutumları ve etkileyen faktörler*

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## Abstract

**Objective:** This descriptive research was conducted to determine the attitudes of women towards family planning and the factors affecting these attitudes.

**Material and Methods:** Universe of the study has been composed of women who are married and older than 15 years and living in Ankara Kale district. 300 women were included. Kale district is a low socioeconomical slum area of the capital city of Turkey. Questionnaire and Family Planning Attitude Scale were used to collect data.

**Results:** 38% of the women were in the 30-39 years age group and 66.7% of them were graduates of primary school. 73.3% of the women had information about some contraceptive method and 53% of them had used an effective method. Mean score taken from the Family Planning Attitude Scale was  $120.11 \pm 13.8$ . The scores obtained from the scale were significantly higher in the women who were graduates of elementary school, whose husbands were graduates from high school and higher, who had heard about any contraceptive method and had been using some method and who had had 1-3 pregnancies ( $p < 0.05$ ). Economical status, family type, presence of a chronic disease, using regular medicine and smoking have not affected family planning attitude ( $p > 0.05$ ).

**Conclusion:** It was found that the attitudes of the women towards family planning were at a good level, nearly half of the women were using an effective method, and the level of education, number of pregnancies, unwillingness to have another child in the future, having information about contraceptive methods and using some contraceptive method had influenced family planning attitudes. In order to turn this attitude into practice with high rate, family planning education programs and consultancy services must be planned and implemented.

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**Key words:** Family planning, woman, family planning attitude

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## Özet

**Amaç:** Bu araştırma, evli kadınların aile planlamasına ilişkin tutumlarını ve etkileyen etkenleri belirlemek amacıyla tanımlayıcı nitelikte yapılmıştır.

**Gereç ve Yöntemler:** Araştırmanın evrenini, Ankara kalesi bölgesinde yaşayan 15 yaşından büyük ve evli kadınlar oluşturmuştur. Örneklemde 300 kadın alınmıştır. Kale bölgesi, Türkiye'nin başkentinde yer alan düşük sosyoekonomik statüye sahip bir gecekondu bölgesidir. Verilerin toplanmasında anket formu ve Aile Planlaması Tutum Ölçeği kullanılmıştır.

**Bulgular:** Kadınların %38'i 30-39 yaş grubunda, %66.7'si ilkokul mezunudur. Kadınların %73.3'ünün daha önce herhangi bir aile planlaması yöntemi duydugu, %53'ünün etkili bir yöntem kullandığı belirlenmiştir. Kadınların aile planlaması tutum ölçüğinden aldığı ortalama puan  $120.11 \pm 13.8$  'dır. Ortaokul ve üzeri mezunu olan, eşi lise ve üzeri mezunu olan, herhangi bir aile planlaması yöntemi duyan ve kullanan, 1-3 gebelik geçiren, gelecekte çocuk istemeyen kadınların aile planlaması tutum ölçüğinden aldığı puanların anlamlı şekilde daha yüksek olduğu belirlenmiştir ( $p < 0.05$ ). Kadınların ekonomik durumu, aile tipi, kronik hastalığının olması, sürekli ilaç kullanımı, sigara içmesi gibi özellikleri aile planlaması tutumunu etkilememiştir ( $p > 0.05$ ).

**Sonuç:** Kadınların aile planlamasına yönelik tutumlarının iyi düzeyde olduğu; yaklaşık yarısının etkili bir aile planlaması yöntemi kullandığı ve öğrenim düzeyi, gebelik sayısı, gelecekte çocuk isteme, herhangi bir aile planlaması yöntemi duyma ve kullanma gibi özelliklerinin aile planlamasına yönelik tutumlarını etkilediği sonucuna varılmıştır. Kadınların aile planlamasına ilişkin tutumlarının yüksek oranda davranışa dönüştürülmesi için aile planlaması eğitim programları ve danışmanlık hizmetleri planlanması ve uygulanması önerilmektedir.

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**Anahtar kelimeler:** Aile planlaması, kadın, aile planlaması tutumu

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## Introduction

In recent years, although there have been significant developments in our country, the effects of these developments on the indicators of population and health are not yet sufficient. According to the results of the Turkey, Population and Health Research; both the birth and abortion statistics are still at high levels. It is indicated that 15% of the pregnancies are terminated because they are unwanted and the undesired, and

unplanned pregnancies lead to 20 million unsafe abortions besides 80.000 deaths (1).

Each year, use of contraceptive methods increase, but the necessity for family planning services still continues. The unmet rate of contraceptive necessity is 7.9% (1). Women are influenced by several factors while preferring contraceptive methods. These can be summarized as the reliability of the method, false beliefs and incorrect applications of the methods, expectations of the society, attitudes of the individual

and the family (2). Spouse's demand for using a contraceptive method and avoidance of the method by the woman because of religious beliefs can be given as examples of these factors (3, 4). Though the negative effects of undesired/unplanned pregnancies on woman/child health are known, there are still high rates of undesired/unplanned pregnancies. In order to prevent the undesired/unplanned pregnancies, effective contraceptive methods are preferred as the first choice. For planning the training and consultancy services to be given to the women and for effective presentation of those services, it is necessary to determine the attitudes and behaviors of women which are playing the key role in family planning activities.

## Material and Method

This research was conducted on women above 15 years and married who live in the Ankara Kale district to determine their attitudes, behaviors related to family planning and the factors affecting these attitudes.

### Sample

The sample group comprised of women who are older than 15 years, married and living in the Ankara Kale district. In this district the population of women is estimated as approximately 2000 (5). 300 women were included in the research. This survey has been conducted in accordance with the principles of the Helsinki Declaration. Before filling the questionnaire form, the women were informed about the purpose of the research. Participation in this study was voluntary.

The Kale district, where we performed our research, is a low socioeconomic slum area of the capital city of Turkey. In this area, half of the population (49.3%) is female (3257 women). The majority of those women are illiterate/literate/primary school graduates (83%) (5). The Kale district is a slum area that keeps the traditional structure and receives migration from all over Turkey.

The significance of this study is limited by the fact that it pertains to only one area of Turkey and only married women were taken into consideration. Therefore the findings cannot be generalized to all Turkish women.

### Data Collection

A questionnaire form prepared by researchers was used for data collection. The questionnaire form consisted of two parts. The first part included questions about the socio-demographic characteristics of women such as age, education level, working status, economical status; the fertility characteristics and family planning applications. The second part consisted of Family Planning Attitude Scale.

### Family Planning Attitude Scale

Family Planning Attitude Scale was developed by Örsal and Kibilay and validity and reliability was performed by them. The Cronbach alpha value was found as 0.87 (2).

The scale was evaluated in three subgroups. These are; attitudes toward methods (12 items), attitudes toward pregnancy (8 items) and attitudes of the society toward family planning (14 items). The scale was graded as, "Completely Agree: 1",

"Agree: 2", "Neither agree nor disagree: 3", "Disagree: 4", and "Completely Disagree: 5". By adding all the item scores in every subgroup, the subgroup total and by adding the subgroup totals, the total score of the scale was obtained. The lowest score in the scale was 34 and the highest score was 170. The higher score indicated the positive attitude toward family planning.

### Data Analysis

The Statistical Package for the Social Sciences (SPSS, version 11.5 for Windows) was used to analyze the data. The percentage, mean, student t-test, and one-way variance analysis (ANOVA) were used to evaluate the data. The p value 0.05 (95% confidence interval) was accepted as significant.

## Results

38% of the women were in the 30-39 years age group, 66.7% of them were primary school graduates, 79% lived in a nuclear family and 57.3% of them evaluated their socio-economic status as a moderate level (Table 1).

It was determined that 73.3% of the women had heard about a method of contraceptive, 68.7% of them had already used one of the methods and 53% of them used an effective method of contraceptive. It was also determined that 60% of the women had had 3 or more pregnancies, 36% of them had one male child, and 74.3% of them did not want any children in the future. 24.2% of the women who did not use any contraceptive method expressed that they wished children in the future and 14.2% of them were pregnant during the study so they neither wanted nor needed to apply contraceptive methods (Table 2).

The mean score of the Family Planning Attitude Scale was  $120.1 \pm 13.8$ . In regard to the mean scores taken from subgroups of the scale, the mean score of attitude of society towards family planning was  $54.80 \pm 8.1$ , the mean score of attitude towards methods was  $36.81 \pm 5.2$  and the mean score of attitude towards pregnancy was  $28.50 \pm 4.2$ .

It was determined that the number of women who were elementary school and higher graduates, whose husbands were graduates of high school or higher, who had ever heard about contraceptive method and used any contraceptive method, who had had 1-3 pregnancies, who did not wish any more children in the future had higher scores and the difference between the groups was statistically significant ( $p < 0.05$ ) (Table 3).

The characteristics of the women such as economical status, family type, having a chronic illness, using regular medicine and smoking did not affect the family planning attitudes ( $p > 0.05$ ).

## Discussion

Family planning services in our country are still developing and parallel to this, there are some advances in the health indicators, but the need for family planning which cannot be met still stands out as an important health problem. In this study as well, the fact that about half of the women (47%) were not using an effective contraceptive method points out the significance of the subject. Supporting this finding, in Kaya et al's study (6) 39.9%; Aydin and Aytékin's study (7) 47.1%; Özdemir et al's

**Table 1. Sociodemographic characteristics of the women**

Sociodemographic characteristics	n	%
Age groups		
<20 years	16	5.3
20-29 years	88	29.3
30-39 years	114	38.0
≥40 years	82	27.3
Education level		
Not illiterate	45	15.0
Primary school graduate	200	66.7
Elementary school graduate and higher	55	18.3
Education level of husband		
Not illiterate	17	5.6
Primary school graduate	194	64.7
Elementary school graduate	47	15.7
High school graduate and higher	42	14.0
Having social insurance		
Yes	248	82.7
No	52	17.3
Family type		
Nuclear family	237	79.0
Broad family	63	21.0
Socioeconomic status		
Good	38	12.7
Moderate	172	57.3
Poor	90	30.0
Any chronic illness		
Yes	66	22.0
No	234	78.0
Using regular medicine		
Using	57	19.0
Not using	243	81.0
Cigarette smoking		
Smoking	63	21.0
Not smoking	247	79.0

study (8) 46.1%; Özgür et al's study (9) 45.3%; and Tanrıverdi et al's study, 39.2% of the women do not use an effective contraceptive method. In other studies conducted in Turkey, it was also seen that the rate of family planning use was not at the desired level. According to the results of the Turkey, Population and Health Research, it was determined that only 42.5% of the women use an effective method (1). When the rates in our country are compared with the others, it is seen that rates of using an effective contraceptive method in developed countries

**Table 2. Characteristics of Attitude to Fertility and Family Planning Implementations**

Characteristics About Fertility and Family Planning Implementations	N	%
Spontaneous abortus		
Yes	71	23.7
No	229	76.3
Medical abortus		
Yes	61	20.3
No	240	79.7
Gravity		
Null gravity	47	15.7
1-2	73	24.3
≥3	180	60.0
Ever hearing about a contraceptive method		
Yes	219	73.3
No	81	26.7
Using any contraceptive method		
Using	206	68.7
Not using	94	31.3
Using effective contraceptive method		
Yes	159	53.0

are higher (10-12) and in underdeveloped countries are lower (13-15) than our country.

Family planning applications can be affected by many factors such as traditional beliefs, religion, family type, knowledge about contraceptive and problems in provision of health services. These affecting factors lead the formation of family planning behaviors. Norms, habits, learning processes, environmental conditions, and attitudes influence the behavior. Attitude is a notional concept and although it cannot be observed directly, the effects on behavior are well known (2). In this study, women's attitudes towards family planning were evaluated and the level of attitude is quite high. However, approximately half of the women's avoidance of using any effective method for contraceptive indicates that the attitudes do not turn into behaviors sufficiently. Similar to this, Agyei and Migadde (16) determined that women's use of contraceptive methods is much lower than their attitudes. Chopra and Dhaliwal (14) also determined that, although their attitudes were positive, women's use of effective contraceptive methods for long term were low.

Environmental conditions, habits, and expectations have effects on turning the attitudes into behaviors (17). Even when women have developed positive attitudes towards family planning, it is thought that the beliefs on this subject, the level of information and environmental factors have effects on turning the attitudes into behaviors. In our country, although many studies considering the knowledge and behaviors on family planning have been conducted, the studies considering the attitudes are not sufficient. Attitude is a concept that develops and transforms in time.

**Table 3.** Mean Scores Obtained From Family Planning Attitude Scale According to Some Characteristics

Characteristics	N	X ± SS	p
Education level			
Not illiterate	45	111.09 ± 11.8	F: 22.859 <0.05
Primary school graduate	200	119.81 ± 13.1	
Elementary school graduate and higher	55	128.58 ± 12.9	
Husband's education level			
Not illiterate	17	114.24 ± 11.7	F: 13.218 <0.05
Primary school graduate	194	117.32 ± 13.5	
Elementary school graduate	47	126.57 ± 12.9	
High school graduate and higher	42	128.12 ± 11.7	
Ever hearing about a contraceptive method			
Yes	219	121.21 ± 14.3	F: 5.237 <0.05
No	81	117.12 ± 12.2	
Using any contraceptive method			
Yes	206	122.56 ± 13.6	F: 22.215 <0.05
No	94	114.72 ± 12.9	
Parity			
Nulliparous	8	109.13 ± 11.5	F: 8.383 <0.05
1-3	189	122.37 ± 13.7	
4 and more	103	116.81 ± 13.2	
Wishing a child in the future			
Yes	61	116.46 ± 11.3	F: 3.381 <0.05
No	223	121.31 ± 14.5	
Hesitant	16	117.19 ± 11.2	

Attitudes are not gained by birth, they are learned and adopted by experiences and culturally gained during socialization (17). Attitudes of women towards family planning are influenced by education and experiences such as pregnancy. It was determined that women who are graduates of elementary school or higher, who had experienced 1-3 pregnancies and who did not want any more children in the future got higher scores from the family planning attitude scale. As the education level increases, the number of children desired decreases (1). The higher score of higher level educated women can be explained by more possibilities of obtaining knowledge on family planning and having more awareness about the subject. Similar to this, Tuladhae & Marahatta (18) determined that women's awareness increases as their education level increases. Higher scores from family planning attitude in women who have had 1-3 pregnancies and who did not want any more children in the future, is an expected result. Many and frequent pregnancies may affect the

mother-child health negatively and increase the risk of maternal mortality (19). It is thought that the attitude level is higher because women do not want to have more children than they desire and also they demand for more effective contraception. It was determined that, besides the education level and pregnancy situation, the level of awareness about contraceptive also affects the attitudes of women. In this study, the higher attitude towards family planning of the women who have heard about family planning and/or apply any method of contraceptive is notable. This finding can be explained by easy access to the contraceptive methods by women and having more information about the subject.

Family planning attitude scale is evaluated in three subgroups, attitudes towards methods, attitudes towards pregnancy and attitudes of the society towards family planning. In this study, it was determined that, for all the subgroups, the scores of women were at a moderate level.

The moderate level of attitude of the women towards the methods can be evaluated as a positive finding. This finding can show that women want to use contraceptive methods. The rate of 24% wish to have a baby in the study group and the rate of pregnancy of 14% during the study supports this finding.

The attitudes related to pregnancy exist on the basis of attitudes related to family planning (2). Pregnancy brings social status to woman in traditional societies. Also in this study, the moderate level of attitude towards pregnancy can originate from the feelings of desire to feel worthy and wish to earn status by the women. It is thought that the traditional structure and the lower status of women in this district affect the results of the attitudes of the women. Three or more pregnancy rate of 60 % in the district also supports this result.

On the development of family planning attitudes of the society, socio-cultural characteristics play important role. Since the number of children indicates the power of the male, giving importance and precedence to male child can be examples of this situation (2). Society's moderate level of family planning attitude can be explained by the families' desire to have more male children. The rate of 25.3% not having a male child and the rate of 36% having one male child may affect the attitude of the society. It is thought that probably this can be caused by the district's traditional structure, namely the husband or mother-in-law is closely involved with the decision about contraceptives. In conclusion, women's attitudes towards family planning were at a proper level; approximately half of them use an effective contraceptive method and the characteristics of the level of education, the number of pregnancies, desire to have a baby in the future, having heard about contraceptive methods and using any contraceptive method all affect the family planning attitudes. According to these results, it is suggested that, in order to transform the women's attitudes towards family planning into behavior, family planning training programs and consultancy services should be planned and applied. The implications for research include the need for replication of this study in other geographic areas that also represent a diverse sample of women with a wide range of education, income and other socio-demographic characteristics.

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