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Selected factors conditioning decisions of married couples in terms of family planning

Wybrane czynniki warunkujące podejmowanie przez pary małżeńskie decyzji w zakresie planowania rodziny

Fertility is an inalienable trait of human beings. As a feature of maturity and part of the essence of being, it constitutes the basic function of sexuality.

Fertility as a feature of marital love, in turn, comprises a number of common achievements of a human couple. In the biological sense it means the capability of conceiving and giving birth to children. It is conditioned by anatomy and physiology of the reproductive system of a woman and a man, including the ability of gonads to produce reproductive cells, as well as external factors influencing conception, innidation, delivering and giving birth to a child [14]. Fertility of a married couple consists of the cyclical fertility of a woman overlapping the constant fertility of a man [5].

Responsible parenthood, i.e. an attitude of directing one's actions with sensibility and fully predicting the results of one's behaviour gives a married couple the perspective of responsibility, also in the sexual sphere. One of the ethical norms applied here is the awareness of one's body [3]. The knowledge about one's general and current fertility enables the couple to make decisions concerning their sexual initiative, family planning with taking into account the previous mutual choices and their family, health and social situation [15]. Responsible parenthhood is thus thinking about the child as early as before the possibility of conception.

Birth planning is therefore a significant issue in the everyday life of a married couple. The choice among the whole range of available methods and means should not be random. Due to reliable knowledge and involvement in authentically responsible parenthood, the choice of methods and means of planning will not bring any threat to the person using them, the bond between the spouses, and the child that can be conceived.

In everyday life the reality is quite different. Married couples choose various methods of protection – from natural methods based on the rules of fertility of a human couple to contraception or even induced abortion. It is suspected that the choice is related to different views on treating fertility. Various scientific environments popularise different behaviour concerning ways of conception control, from propagating the so called "responsible parenting" in the form of contraception [1] or abortion [16], such as the position of IPPF (International Planned Parenthood Federation), through the ideas of PTG (*Polskie Towarzystwo Ginekologiczne*, the Polish Gynaecological Association), which creates standards for and popularises contraceptive means and methods [10]. WHO (the World Health Organization), presents the full spectrum of possibilities of family planning and points to a number of contraindications of using oral contraceptives [8] promoting natural methods [17] together with appropriate postulates [18]. There are also approaches opting for an ecological view

on the character of fertility and the ways of managing fertility rationally, i.e. the views of Ecological Procreation [6] and the ones propagated by the Catholic Church [7].

Studies pertaining to the factors influencing the choice of methods of managing fertility are not particularly popular. The ones connected with preferences in the choice of methods, mainly those concerning women, have been found. One of the studies was carried out by A. Sierporzewska [13]. Similar empirical analyses connected with the subject matter of conception control have also been found in the papers of M. Kuciarska-Ciesielska [9], E. Baszak, R. Sikorski, T. Paszkowski [2], U. Dudziak, B. Gulanowska-Gędek, A. Borowiec-Blinowska [4] as well as A. Sadurska and H. Skórzyńska [12].

The intention to find the answer to the question what methods and means are selected by married couples and what the motivations behind particular choices are has become the leitmotiv of the present study. Thus, the aim of the research carried out has been to present the methods of birth regulation and the potential influence of some socio-demographic factors on decisions of married couples concerning responsible parenting.

MATERIAL AND METHODS

The study group consisted of married couples. The criteria of including a given couple in the research were the following: aged between 20 to 55, sexually active, no diagnosed infertility, place of residence: Lublin and its surroundings, having at least one child, the questionnaire completed sufficiently to analyse the data.

The following factors were taken into consideration as the ones which could have influence on the choice of methods of conception control: age, marriage duration, cohabitation, number of children, place of residence, involvement in education, occupation, attitude towards religion and financial situation. The groups were compared on the basis of the aforementioned variables.

In the research the method of diagnostic survey was used, where the research technique enabling to gather required information was a questionnaire prepared by the author. The married couples were surveyed in State Healthcare Centres in Lublin, Opole Lubelskie and neighbouring localities in the summer 2006.

The questionnaire contained questions on the use of methods and means of conception control, which were grouped into two sets. The group of unnatural interference with human procreation included: contraceptives, abortifacients and intermediate methods (barrier methods, chemical methods, coitus interruptus, hormonal methods in different forms, including early abortifacients, intrauterine devices and sterilisation) as well as abortion. The second group consisted of Natural Family Planning (NFP), which included: the thermal method, the mucus observation method, symptothermal methods, e.g. LAM (Lactational Amenorrhea Method), i.e. the lack of menstruation during breastfeeding, and modern technologies of recognising fertility. There were also questions concerning the use of the calendar-based method, which now is not included in any scientific classification and has only historical significance in the development of the scientific approach relating to methods based on the rules of fertility. The questions also concerned periodic sexual abstinence and the lack of using any methods or means.

For the statistical analysis and the analysis of correspondences between parametric data, the program Statistica and the U-Mann Whitney test were used.

RESULTS

122 married couples qualified for the survey. The youngest man taking part in the survey was 22, while the oldest was 55 (the average age amounted to 35.6). The age of the women was between 23 and 50 (the average age amounted to 34.1). The average age of the whole surveyed group was 34.9. The average marriage duration amounted to 10.5 years. The shortest marriage lasted for a year, while the longest -31 years.

Most couples, i.e. 109 (83%) resided together with children and the other spouse in one household. 8 couples (6.6%) lived without children, and 5 (4.1%) without the spouse, who was temporarily absent.

Above 1/3 of the surveyed had one or two children, while one married couple in five had three children. Only 4.1% of the investigated couples had four or more children. On average, the number of children for one married couple amounted to 1.9.

Over a half of the surveyed, i.e. 63 persons (51.6%) resided in a capital of a voivodeship, 25 persons (20.5%) in a village, 19 spouses (15.6%) lived in a capital of a commune, and the lowest number of persons, i.e. 15 (12.3%) resided in a capital of a district. The persons residing in a village or in a capital of a commune constituted jointly 36.1% of all respondents, while the persons living in cities/towns accounted for 63.9%.

As demonstrated in Figure 1, nearly half of the surveyed completed higher education (47.9%), similarly as in the case of secondary education (34.9%). One in seven persons (14.3%) completed vocational education, and 2.5% respondents had only primary education. The analysis of the level of education with the age breakdown has shown that almost one and a half times more men than women completed basic vocational education. A slightly higher percentage of the men, compared to the women, had secondary education, while a greater number of the surveyed women in comparison to the men completed higher education.

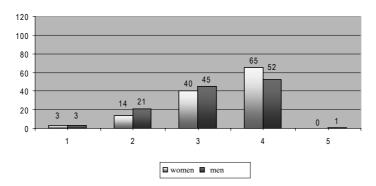


Fig. 1. Structure of education of the surveyed women and men (the number proportion is given above the columns)

(1 – primary, 2 – vocational / basic vocational, 3 – secondary, 4 – higher, 5 – no answer)

The following occupational groups were separated within the analysed population: 58% persons performed mental work, 28.7% were physical workers, 8.2% worked in the household, the unemployed accounted for 2% of the population, while the persons receiving retirement or pension benefits – for 1.6%. Most of the women performed mental work (63.2%), and less than half of the men were physical workers. There was a large group of women taking care of the household (11.5%), and the percentage of women and men receiving retirement or pension benefits was equal (1.6%).

In order to achieve the goal of the present study, it was vital to find out the respondents' religious views. A great majority of the surveyed (94.9%), without any significant difference between the women and the men, declared to be Catholics, and an inconsiderable percentage of the persons were of other denomination. The majority of the persons declared to be believers (80.3%), and the shares among both sexes were quite similar. In the group of deep believers there were more women (23.8%) than men (13.9%). The percentage of persons practicing their faith amounted to 91.8%, with the group of men slightly bigger than that of women. Among the non-practicing persons there were more men (10.7%) and fewer women (4.1%). In order to single out the persons who deeply experience their religious life, a distinction was made between believers and deep believers. The believers constituted approx. 70%, while deep believers accounted for 30%. The share of non-believers and undecided persons was minor.

Self-assessment of the financial situation of the surveyed brought the following results. The largest group was formed by the persons with sufficient financial means (41.4% respondents). The persons with their finances burdened with loans accounted for 21.7% of the total population. The proportion of persons who described their financial situation as insufficient and as satisfactory was equal (both 17.6%).

The methods and means of controlling conceptions used in marriages are presented in Figure 2.

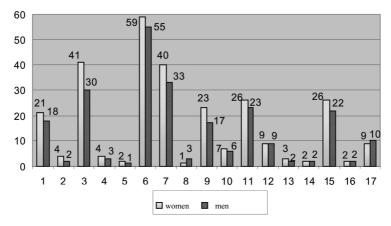


Fig. 2. 1 – contraceptive pill, 2 – hormonal contraceptive plasters, 3 –calendar-based method, 4 – intrauterine coil, 5 – spermicidal agents, 6 – condom, 7 – coitus interruptus, 8 – douching the vagina after the intercourse, 9 – Billings method, 10 – thermal method, 11 – sympto-thermal method, 12 –multi-indicator method, 13 – LAM method, 14 – tubal ligation, 15 – temporary sexual abstinence, 16 – emergency contraception (hormonal emergency pill), 17 – no methods or means used The methods and means of conception control. In the table only the methods which obtained at least one positive answer are included. The proportion is given above the columns.

When it comes to hormonal methods, the greatest number of women admitted to using the following: the contraceptive pill (17.2% women and 14.75% men), hormonal contraceptive plasters (3.3% women and 1.63% men). As far as natural methods are concerned, 18.85% women and 13.93% men claimed to use the Billings method, while 17.2% women and 14.75% men chose the symptothermal method.

Significant correspondences between the age of a given married couple and the applied methods of conception control were found only in two cases. Older persons indeed used coitus interruptus

more often (p=0.042, with the statistical significance threshold p<0.05) as compared to younger persons. Another important parameter, which is connected with age and was important in the choice of coitus interruptus, was the duration of marriage (Fig. 3).

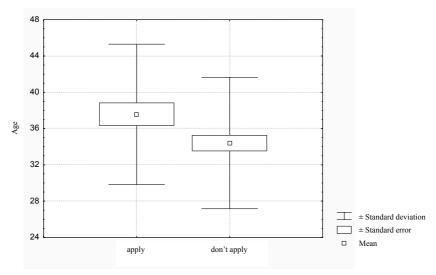


Fig. 3. Coitus interruptus versus age

Persons with a longer duration of their marriage in fact more often (p=0.0019) decided to choose coitus interruptus as a conception control method, as compared to younger persons (Fig. 4).

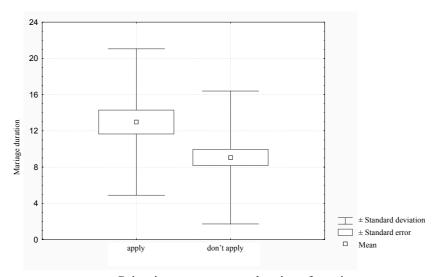


Fig. 4. Coitus interruptus versus duration of marriage

However, older persons indeed more often (p=0.034) applied one of the most effective and popular in Poland NFP methods, i.e. the sympto-thermal method (Fig. 5).

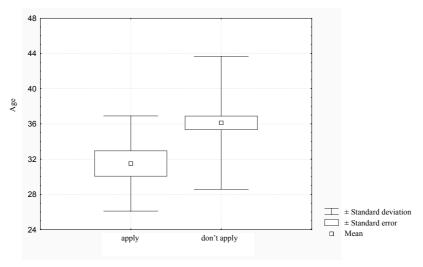


Fig. 5. The sympto-thermal method versus age

Age and duration of marriage was thus a significant variable conditioning only the choice of coitus interruptus and the sympto-thermal method. The value of correlation between age and the use of the contraceptive pill also approached the threshold of statistical significance (p=0.08).

The next variable was place of residence. The analysis of the results allowed for formulating the statement that contraceptive pills are more often used in cities/towns than in villages (cities/towns 17.9% vs. villages 15.9%), as well as contraceptive plasters (3 women in cities/towns and 1 women in a village) and hormonal injections (only one woman in a city/town). The presented percentages were calculated for women since the frequency of using hormonal agents reported by women is more reliable than the one given by men. A similar assumption was made in relation to NFP; the analysed percentage values concerned women. Here, also the frequency of using NFP was higher in cities/towns than in villages (the Billings method – 24.3% vs. 9.1%, the sympto-thermal method – 25.6% vs. 13.6%, the multi-indicator method – 10.2% vs. 2.3%, respectively for women in cities/towns and in villages). The LAM method was used by only 3 women in cities/towns. A significant difference concerning coitus interruptus could be noticed. This method was mentioned by only 26.9% of persons residing in cities/towns and as many as 40.9% inhabitants of villages (Fig. 6).

The inhabitants of cities/towns more often used NFP and hormonal methods. A similar number of persons living in cities/towns and villages claimed to use condoms. This method is one of the least effective but at the same time it is the least demanding and costly.

Education seemed to have influence on the frequency of using hormonal and mechanical methods. The contraceptive pill was applied by 14.2% women with vocational education, 25% women with secondary and 12.3% with higher education. However, the percentages of women using barrier methods were even more similar. The greatest differences could be observed in the case of methods belonging to NFP. The Billings method was used by, respectively, 7.1% women with vocational education, 10% women with secondary education and 26.1% who completed higher education. With respect to the sympto-thermal method the proportions were the following: 9.5%, 7.5% and 32.3%. The data indicate that persons with higher education, as compared to persons with vocational and basic vocational education, prefer natural methods.

The means and methods of conception control most frequently used by persons belonging to particular occupational groups are presented in Fig. 7.

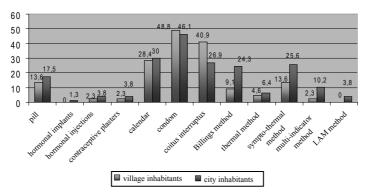


Fig. 6. The most common methods of conception control in relation to place of residence

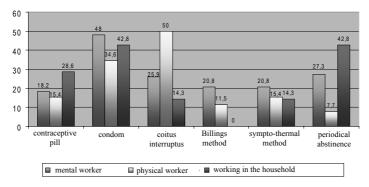


Fig. 7. Means and methods of conception control by occupational group. The answers do not sum up to 100 due to the possibility of choosing more than one answer

Women connected with the medical profession chose the contraceptive pill more often than persons from outside the medical branch (21.4% vs. 16.1%). On the other hand, a reverse correlation was observed in the case of the Billings method (14.3% persons connected with the medical profession against 20.4% persons not associated with it). The remaining methods from the NFP group as well as mechanical means and hormonal methods did not display similar correlations.

Due to the fact that the vast majority of the persons declared to be Catholics (95%), there seemed to be no purpose in comparing Catholics with persons of different denominations. The number of non-believers was also too small in order to look for correlations. In the group of believers there were more women who used hormonal methods, as compared to persons declaring to be deep believers (17.2% vs. 10.3%). The methods not interfering with a woman's system, yet not recommended by the Catholic Church, such as temporary sexual abstinence or the calendar-based method as well as the methods from the NFP group, were more often used by the persons declaring to be deep believers. The percentages of the most commonly used methods according to religious declarations have been presented in Fig. 8.

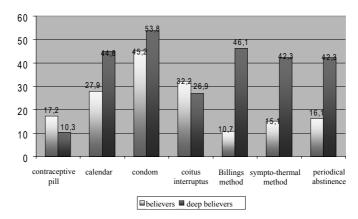


Fig. 8. Percentage of women using selected conception control methods versus the depth of the declared faith

Some differences in decisions concerning family planning could be noticed by comparing the groups which declared extreme financial situations. Considerably more persons regarding their financial situation as poor used the contraceptive pill, the calendar-base method, condoms and coitus interruptus. NFP, in turn, especially the Billings method, was applied by persons who declared to be well-off. The methods most commonly selected by women according by their financial situation are presented in Fig. 9.

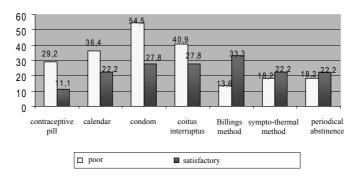


Fig. 9. The financial situation versus the selected conception control methods

DISCUSSION AND CONCLUSIONS

The analysis of the obtained data allows to formulate a statement that most married couples used conception control methods, i.e. 92.2%. The most commonly used methods and means are the following: condoms, coitus interruptus and the calendar method. It was previously assumed that due to the low effectiveness of these methods they would not find as many supporters. The symptothermal method was applied by only 1/5 of the surveyed, and a similar proportion permanently abandoned sexual intercourses. The contraceptive pill, in turn, was used by 16.4%.

Women were more involved in the choice of methods than men. It is significant that they selected more methods and means in the questionnaire than men. The age of the spouses and the duration of marriage considerably influenced the considered choices. Persons with longer duration of marriage indeed more often used coitus interruptus and the sympto-thermal method. The threshold of statistical significance was also approached by the value of correlation of age and the use of the contraceptive pill, which was selected more often by the younger group of the surveyed.

Place of residence was also one of important factors. The analysis of the results allowed to claim that in cities/towns contraceptive pills were used more often than in villages. Condoms were used by approximately the same number of inhabitants cities/towns and villages. The persons living in cities/towns more often admitted to coitus interruptus. This method is one of the least effective methods of preventing pregnancy but at the same time does not require much effort or costs.

Education had quite a significant influence on the use of hormonal methods. The women who completed secondary education chose the contraceptive pill most willingly. Large differences were observed in methods included in the NFP group. The married couples with higher education, as compared to the persons who completed vocational and secondary education, preferred natural methods (especially the sympto-thermal method, with a slightly lower percentage of persons using the Billings method). The women connected with medicine, in turn, more often chose the contraceptive pill as compared to the persons not related to this profession.

Among the believers, more women used hormonal means than among the persons who declared to be deep believers. The methods not interfering with a woman's system, yet not recommended by the Catholic Church, i.e. temporary sexual abstinence and the methods belonging to the NFP group were more willingly used by the persons from the group of deep believers.

The financial situation subjectively assessed by women and men seemed to have a considerable importance in the choice of conception control methods. Some differences could be found when comparing the groups declaring extreme financial situations. More persons with a poor financial situation applied the contraceptive pill, the calendar-based method, condoms and coitus interruptus, while NFP, especially the Billings method, was chosen by the persons who declared to be well-off.

FINAL COMMENTS

Conception planning in marriage and the intimacy connected with it, although being a rarely discussed subject, constitutes an interesting area of study, especially today. Married couples can decide on the time of conception and the number of children due to a wide range of possibilities, from scientific studies of the rules of cooperation with the fertility cycle in order to conceive a child or to prevent conception, through a number of modern techniques of determining fertility to pharmacological possibilities of changing the functioning of the system, together with a lot of different methods.

The presented study has demonstrated some factors influencing conception control. Here some practical conclusions are presented. First, it seems necessary to revise the state and sources of knowledge on fertility control, especially among medical staff and persons declaring a particular attitude towards conception control. Moreover, it seems vital to prepare educational standards and verify widely spread stereotypes in the area of fertility. The importance of involvement of both spouses in self-education concerning scientific advancements and new technologies in the field of human fertility is also worth emphasizing.

The full understanding and responsibility in terms of marital sex and family planning will contribute to ensuring health, i.e. biopsychosocial well-being, of not only the spouses and the families but also the whole society.

REFERENCES

- 1. B. A.: Zdrowie reprodukcyjne... [Definicje IPPF]. Problemy Rodziny, 1, 44, 2001.
- 2. Baszak E., Sikorski R., Paszkowski T.: Preferencje kobiet karmiących piersią w odniesieniu do metod planowania rodziny w okresie poporodowym, Naturalne Planowanie Rodziny, 2, 18, 1998.
- 3. Buttiglione R.: Etyka w kryzysie. TN KUL, 33, Lublin 1994.
- 4. Dudziak U., Gulanowska-Gędek B., Borowiec-Blinowska A.: Metody planowania rodziny u kobiet rodzących pierwsze i kolejne dziecko. Ginekologia Polska, 12, 1273, 1998.
- Fijałkowski W.: Ludzka płciowość. Płodność. W: Naturalne planowanie rodziny. Podręcznik dla nauczycieli naturalnego planowania rodziny. Red. M. Troszyński, Wyd. Bonami, 15, Warszawa 2006.
- 6. Fijałkowski W.: Perspektywa ekologicznej odnowy rodziny. Naturalne Planowanie Rodziny, 5, 3, 2002.
- Jan Paweł II: Znaczenie naturalnych metod planowania rodziny. Do uczestników sesji naukowej zorganizowanej przez Papieską Akademię Nauk, 18 IX 1994, Naturalne Planowanie Rodziny, 3, 2, 1995.
- 8. K n i l e M.: Naturalne planowanie rodziny na świecie. W: Naturalne planowanie rodziny. Podręcznik dla nauczycieli naturalnego planowania rodziny. Red. M. Troszyński, Wyd. Bonami, 223. Warszawa 2005.
- 9. Kuciarska-Ciesielska M.: Postawy młodych małżonków wobec planowania rodziny. Problemy Rodziny, 4, 17, 1990.
- 10. Rekomendacje Polskiego Towarzystwa Ginekologicznego w sprawie antykoncepcji. Ginekologia Polska, 4, 1, 2004.
- 11. Rekomendacje Polskiego Towarzystwa Ginekologicznego i Funduszu Ludnościowego Narodów w sprawie zdrowia reprodukcyjnego. Ginekologia Praktyczna, 12, 2, 2004.
- 12. Sadurska A., Skórzyńska H.: Metody planowania rodziny i wiedza na ich temat. "Pielęgniarka i Położna". 8, 17, 2002.
- 13. Sierporzewska A.: Czynniki decydujące o stosowaniu antykoncepcji przez kobiety, Problemy Rodziny, 1, 23, 1994.
- 14. Skrzypczak J., Pawelczyk L., Pisarski T.: Zaburzenia czynności rozrodczych. W: Położnictwo i ginekologia, T. Pisarski, PZWL, 301, Warszawa 2002.
- Sujak E.: Kontakt psychiczny w małżeństwie, Wydawnictwo Diecezjalne, 56, Wrocław 1991.
- 16. Terki F., Malthotra U.: Poradnictwo medyczne i świadczenie usług. Przewodnik w zakresie zdrowia seksualnego i reprodukcyjnego. TOR, Warszawa 2004.
- 17. Zalecenia Światowej Organizacji Zdrowia dotyczące naturalnego planowania rodziny. Naturalne Planowanie Rodziny, 1, 4, 2002.
- 18. Zalecenia Światowej Organizacji Zdrowia dotyczące naturalnego planowania rodziny. Naturalne Planowanie Rodziny, 1, 4, 2002.

SUMMARY

Fertility as a feature of marital love comprises a number of achievements of a human couple, especially in the field of procreation. It is a significant issue in the everyday life of a married couple

due to the applied family planning and the choices of conception control methods or means. The aim of the study is to demonstrate the methods of conception regulation and to assess the influence of selected factors on decisions of married couples in the scope of family planning. 122 married couples took part in the study. Their age was from 22 to 55, and the average age amounted to 34.9. The spouses were selected for the study on the basis of the following criteria: aged between 20 to 55, sexually active, not infertile, residing in Lublin or its surroundings, having at least one child. The obtained results make it possible to determine the statistical significance (with the significance threshold amounting to <0.05) of the age of the spouses and the methods used as well as the choice of the methods, including the significantly more frequent choices of the sympto-thermal method. The statistical significance threshold has also been approached by the value of correlation between age and the use of oral contraception.

STRESZCZENIE

Płodność jako cecha miłości małżeńskiej stanowi obszar wielu wspólnych dokonań pary ludzkiej, zwłaszcza w dziedzinie prokreacji. Jest ważnym zagadnieniem w codzienności małżeńskiej ze względu na planowanie rodziny i związane z nim wybory stosowanych przez małżonków metod czy środków. Celem pracy było ukazanie sposobów regulacji poczęć oraz ocena wpływu wybranych czynników na decyzje małżonków w zakresie planowania rodziny. Do badań włączono 122 pary małżonków w wieku od 22 do 55 lat, gdzie średnia wyniosła 34,9 lat. Małżonków włączono do badań na podstawie następujących kryteriów: wiek 20–55 lat, podejmowanie współżycia małżeńskiego, brak niepłodności, zamieszkanie w Lublinie lub okolicach, posiadanie przynajmniej jednego dziecka. Uzyskane wyniki pozwalają stwierdzić istotność statyczną (przy poziomie istotności p<0,05) pomiędzy wiekiem małżonków a stosowanymi metodami oraz stażem małżeńskim i wyborem metod, a także istotnie częstsze wybory metody objawowo-termicznej. Do granicy istotności zbliżyła się również wartość korelacji wieku z doustną antykoncepcją.