

## **RESULTS**

**The results of the present study were presented in the following parts:**

**Part (I):** Demographic characteristics of the studied sample, their reproductive history, women knowledge, and husband's role towards utilization of contraceptive, (Tables 1- 5 & fig.1).

**Part (II):** Cultural factors of the studied sample related to beliefs and attitudes of women, (Tables 6- 7).

**Part (III):** Reasons for stopping utilization of contraceptive and reasons for not using contraceptive, (Table 8).

**Part (IV):** Women needs and opinions toward utilization of contraceptive, (Tables 9-11 & fig. 2).

**Part (V):** Relation between sociodemographic characteristics of the studied sample and their utilization of contraceptive, (Tables 12-13 & fig. 3)

## Part (1): Demographic Characteristic of the Studied Sample, their Reproductive History and Role of Husband

**Table (1):** Distribution of the studied sample regarding to their demographic characteristics (n=200).

Demographic Characteristics	No.	%
<b>Age ( in years):</b>		
20 -	19	9.5
30 -	85	42.5
40 +	96	48.0
<b>Duration of marriage ( in years):</b>		
5-	19	9.5
5-<10	74	37.0
10+	107	53.5
<b>Age at marriage of women:</b>		
< 20 -	41	20.5
30 +	131	65.5
4+	28	14.0
<b>Level of education:</b>		
Illiterate	35	17.5
Basic education	2	1.0
Secondary education	97	48.5
University education	66	43.00
<b>Wife's occupation</b>		
Working	83	41.5
Housewife	117	58.5
<b>Husband's occupation</b>		
Worker	36	18.0
Employee	110	55.0
Free business	54	27.0
<b>Income</b>		
Enough	82	41.0
Not enough	118	59.0

**Table (1)** shows the demographic characteristics of the studied sample that, 48 % of the studied sample age was 40 years and over, while for 53.5% the duration of marriage was 10 years and over .The table indicates that 48.5% had secondary level of education while 58.5% were housewives, 55% of husbands were employees ,and 59 % of them had not enough income.



**Table (2): Distribution of studied sample regarding to their reproductive history (n=200).**

Items	No.	%
<b>number of pregnancy</b>		
None	2	1.0
Once	18	9.0
Twice	55	27.5
Three	74	37.0
More than three times	51	25.5
<b>Number of abortion</b>		
None	160	80.0
Once	31	15.5
Twice	4	2.0
More than two times	5	2.5
<b>Number of children in the family</b>		
One	29	14.5
Two	45	22.5
Three	82	41.0
Four or more	44	22.5
<b>Problems during pregnancy</b>		
Persistent vomiting	101	50.5
Bleeding	30	15.0
Eclampsia	14	7.0
Diabetic during pregnancy	5	2.5
Hypertension	30	14
Other (dizziness- back pain- limbs fluid - hypotension).	20	10
<b>Place of birth</b>		
Home	12	6.00
Governmental hospital	89	44.50
MCH center	-	-
Private Hospital/clinic	99	49.5
<b>Problems during birth</b>		
Hypertension (Eclampsia).	78	39.0
Placenta previa	12	6.0
Bleeding	24	12.0
Cord prolapses	14	7.0
Others (Toxemia-pre eclampsia –abnormal position –increase birth weigh-truknot)	5	2.5
<b>Type of Birth</b>		
Normal	98	49.0
Caesarean section	84	42.0
Ventose	18	9.0



**Table (2)** shows that 37% of the studied sample had three times of pregnancy and 80% hadn't abortion. As well, 41% had three children, while 50.5% had persistent vomiting in pregnancy, 49.5% delivered in private hospitals/clinics and 39% of the problems of birth were hypertention, and 49. % of the sample had normal birth

**Table (3):** Distribution of the studied sample according to their correct knowledge about family planning (n=200).

Knowledge Items	Correct	
	No.	%
Definition of family planning	47	23.5
Types of family planning methods	44	22.0
Places of family planning services	43	21.5
Services provided through FP centers	45	22.5
Overcome the complications	62	31.0
Precautions during use of localized methods	32	16.0
Precautions during use of hormonal methods	94	47.0
Precautions during use of natural methods	55	27.5
Precautions during use of surgical methods	44	22.0
Sources of information	42	21.0

**Table (3):** reveals that of the studied sample, 47% had correct answer about precautions during use of hormonal methods, 31% overcome the complications, 27.5% used precautions during use of natural methods, 23.5% knew the meaning of FP, 22.5% chose the services provided through FP centers, 22% knew types of FP methods, 22% used precautions during surgical methods, 21% knew sources of information, and 16% used precautions during use of localized methods.

**According to research question number (2): What is the husband's role regarding utilization of the contraceptive?**

**Table (4):** Distribution of the studied sample regarding positive role of husband toward utilization of contraceptive (n=200).

Items	Positive	
	No.	%
- Agreed to use FP methods.	179	89.5
- Participated in the use of a certain type of contraceptive	109	54.5
- Interested to use contraceptive.	165	82.5

**Table (4):** Shows that the husbands agreed to the use of contraceptive, were interested to use contraceptive, and participated in the use of certain types of contraceptive representing, 89.5%, 82.5%, and 54.5%, respectively.

Distribution of the studied sample regarding positive role of husband toward utilization of contraceptive

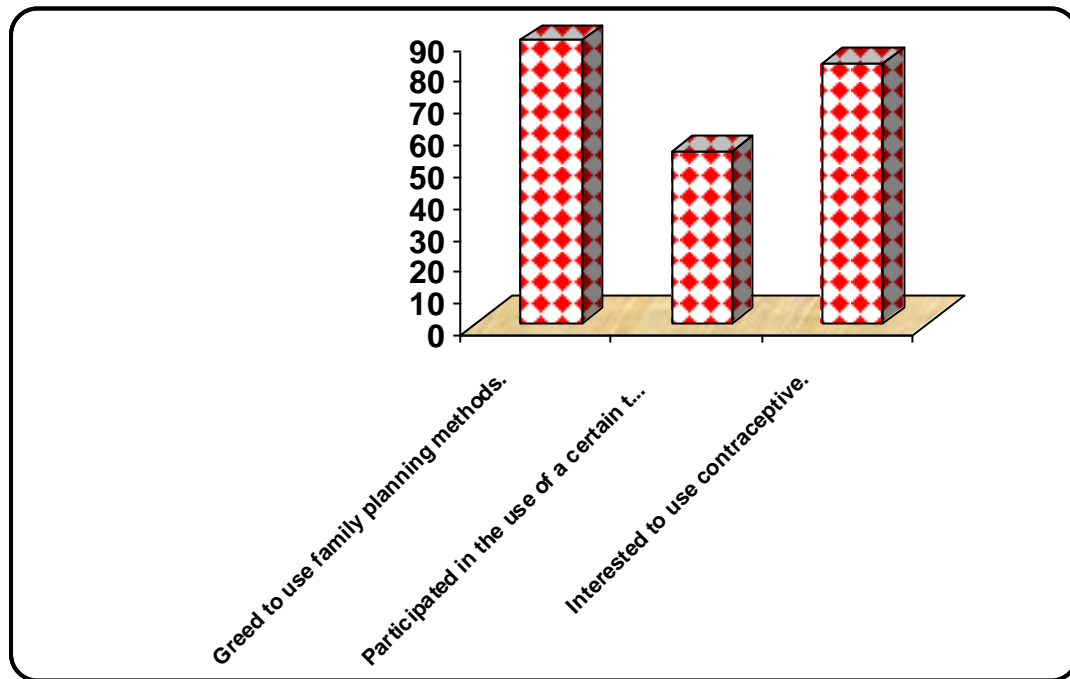


Fig. (1): shows the positive role of husbands toward utilization of contraceptive as 89.5% agreed to use FP methods 82.5%, were interested to use contraceptive methods, and 54.5% participated in the use of certain types of contraceptive methods.

**Table (5):** Distribution of the studied sample regarding to their negative role of the husband (n=200).

Items	Negative	
	No.	%
Desires to have more children.	46	23
Prevents for going to doctor.	36	18
Requires his presence during check up.	56	28
Forces to use a certain way.	44	22
Changes behavior when heard getting the contraceptive methods.	42	21
Insists to have a certain number of children.	58	29
Prevent to take contraceptive because of difficulty of pregnancy.	56	28
Refuses to use contraceptive because of their high price.	30	15
Needs to take his advice when choosing methods.	98	49
Has the first and last decision to use family planning methods.	111	55.5
Feels pain during intercourse because of the IUD.	72	36
Loses a sense of pleasure during intercourse when using condom.	85	42.5

**Table (5)** shows the negative role of husband as he had the first and last decision to use contraceptive method, the woman needed to take his advice when taking a method and the husband loses sense of pleasure during intercourse when using condom, ( 55.5%, 49%, & 42.5%, respectively).



**Part (2): Cultural Factors of the Studied Sample Related to Beliefs and Attitudes.**

**Table (6):** Distribution of the studied sample regarding the positive beliefs and attitudes towards use of contraceptive (n=200).

Positive Beliefs and Attitude	Positive		Chi-square	
	No.	%	X <sup>2</sup>	P-value
TV has a role in using family planning method.	144	72	38.720	0.000
Prefer taking contraceptive method with breast feeding.	177	88.5	118.580	0.000
Follow up at family planning at center regularly.	148	74	46.080	0.000
Prefer the spacing between pregnancies two years at least.	180	90	128.000	0.000

**Table (6)** shows that the preferred spacing between pregnancies was at least two years, they preferred to take contraceptive method with breast feeding ,follow up at family planning center regularly and the TV had role in using family planning method, ( 90%, 88.5% ,74% , &72%, respectively).

Table (7): Distribution of the studied sample regarding to women negative beliefs and attitudes toward use of family planning methods (n=200).

Negative Beliefs and Attitude	Negative		Chi-square	
	No.	%	X <sup>2</sup>	P-value
Methods of FP causing sterility.	58	29	35.280	0.000
False beliefs in rural areas about family planning methods	117	58.5	5.780	0.016
Contraceptive methods cause psychological problem.	41	20.5	69.620	0.000
Using a method without consulting physician	48	24	54.080	0.000
Heard previously about FP methods.	159	79.5	69.620	0.000
Family planning is forbidden.	56	28	38.720	0.000
Stopping contraceptive when fear delayed pregnancy.	74	37	13.520	0.000
Stop taking contraceptive if affecting on the relation with husband.	133	66.5	21.780	0.000
IUD can move to the heart.	68	34	20.480	0.000
Injections and pills cause cancer.	100	50	0.000	1.000
Tubal ligation prevents the descent of the menstrual cycle	86	43	3.920	0.048
Desire to have more children.	66	33	23.120	0.000

**Table (7)** shows that the women heard previously about FP methods, stop taking if affecting on the relationship with husband ,learned false beliefs in the rural areas about FP methods , and beliefs that injections and pills caused cancer (79.5%, 66.5%, 58.5% ,&50%, respectively).

### Part (3) Reasons for Stopping Utilization of Contraceptive and Reasons for Non Using Contraceptive.

**Table (8):** Distribution of the studied sample regarding their causes of stopping contraceptive (n=200).

Items	No.	%
<b>Method used</b>		
Pills	47	23.50
Injection	39	19.50
capsules	12	6.00
IUD	94	47.00
Localized method	6	3.00
Others (condom –safe period).	2	1.00
<b>Period of use in months</b>		
12	21	10.50
24	64	32.00
36	69	34.50
36+	46	23.00
<b>Problems and complications from using contraceptive</b>		
Bleeding	52	26.00
Joint pain	55	27.50
Weight gain	53	26.50
Dizziness	6	3.00
Headache	23	11.50
Vomiting	8	4.00
Not desiring pregnancy	3	1.50
<b>Cause of pregnancy during use of contraceptive</b>		
Forget effectiveness of the method.	26	13.00
Forgot to take pills	87	43.50
IUD was not in its place	87	43.50
<b>Family planning liked to be used in the future</b>		
Hormonal methods	19	9.50
Localized natural methods	102	51.00
Normal methods	73	36.50
Surgical methods	6	3.00
<b>Expect to start using contraceptive</b>		
Within days	53	26.50
During the month	39	19.50
Within a year	42	21.00
More than one year	32	16.00
Not use at all	34	17.00



**Table (8)** shows that of the studied sample, 47.0% used IUD and 34.5% used the method for 36 months. For 27.5% problems and complications of contraceptive were joint pain, and 43.5% of them had pregnancy during the use of methods due to forgetting to take pills, the same table shows that 51%, of them like to take in the future localized method and 26.5% of them expected to start using the method within days.

### Part (4): Women's Needs and Opinions toward Utilization of Contraceptive.

**Table (9):** Distribution of the studied sample regarding needs for the use of family planning method (n=200).

Items Need toward Services	Yes		Chi-square	
	No.	%	X <sup>2</sup>	P-value
All contraceptive methods are available at centers	171	85.5	102.759	0.000
The cost of the service is suitable.	174	87	109.520	0.000
Get an appropriate contraceptive method is easy	166	83	87.120	0.000
Center is available when having a problem	167	83.5	89.780	0.000
Suffered from trouble after use.	150	75	50.000	0.000
Get appropriate care when deciding to stop the use of method.	167	83.5	89.780	0.000
Time of clinic is suitable	132	66	20.480	0.000
Counseling done in privacy	168	84	92.480	0.000
Get all needs from service.	168	84	92.480	0.000
Need Toward Follow Up	Yes		Chi-square	
	No.	%	X <sup>2</sup>	P-value
Have appropriate follow-up care.	174	87	109.520	0.000
Strengthen and support family decision.	180	90	128.000	0.000
Have a follow –up card	184	92	141.120	0.000
Need Toward Waiting Area and Place	Yes		Chi-square	
	No.	%	X <sup>2</sup>	P-value
Service is near home.	117	58.5	5.780	0.016
Transport is easy to reach the service.	139	69.5	30.420	0.000
Suitable time for waiting doctor.	116	58	5.120	0.024
The service center is easy to reach	135	67.5	24.500	0.000
Waiting in comfortable place	136	68	25.920	0.000
Waiting in ventilated place	136	68	25.920	0.000
The clinic is clean.	136	68	25.920	0.000

**Table (9)** shows that the studied sample find the cost of the services suitable all contraceptive methods are available at the center, counseling is done in privacy with top secret, the center available at time of troubles, found care when deciding to stop use of contraceptive method, get appropriate method easily when suffered from trouble after use, and the time of clinic appropriate (87%, 85.5%, 84%, 83.5%, 83.5%, 83%, 75%, & 66%, respectively). The nurse gives follow up card, strengthens and supports decision and explain follow up care (2%, 90%, & 87% respectively) . The means of transport is easy to reach the service at the center, comfortable place, ventilated place, the clinic always clean, the service is easily and feel safe, service is near home, long waiting for entry to the doctor (69.5%, 68%, 68%, 68%, 67.5, 58.5%, & 58%, respectively).

**Table (10):** Distribution of the studied sample in relation to their opinions toward role of physician (n=200).

Items	Yes		Chi-square	
	No.	%	X <sup>2</sup>	P-value
Meeting done with empathy and respect	189	94.5	158.420	0.000
Taking the medical history.	179	89.5	124.820	0.000
Examining thoroughly investigations.	158	79	67.280	0.000
Encouraging counseling and recognition.	178	89	121.680	0.000
Helping to use the appropriate method.	109	54.5	1.620	0.203
Giving all advices for each method.	173	86.5	106.580	0.000
Explaining how to uses all the method.	170	85	98.000	0.000
Explaining the effectiveness of each method.	163	81.5	79.380	0.000
Explaining the contraception used.	167	83.5	89.780	0.000
Explain the side effects.	169	84.5	95.220	0.000
Explain the advantages and disadvantages of each method	166	83	87.120	0.000
Keeping privacy during examination.	183	91.5	137.780	0.000

**Table (10)** shows that the interview was done with empathy and respect, , privacy is kept during examination, physician takes the medical history, encourages counseling, helps to use the appropriate method , explains how to use all methods, give all advice for each , explain side effects explains the contraception used, explain the side effects, explains the advantages and disadvantages of each method, examines thoroughly investigations, and explains the effectiveness of each method ( 94.5%, 91.5%, 89.5%, 89%, 86.5%, 85%, 84.5%83.5%, 83%, 81.5%, 79%,& 54.5%, respectively).

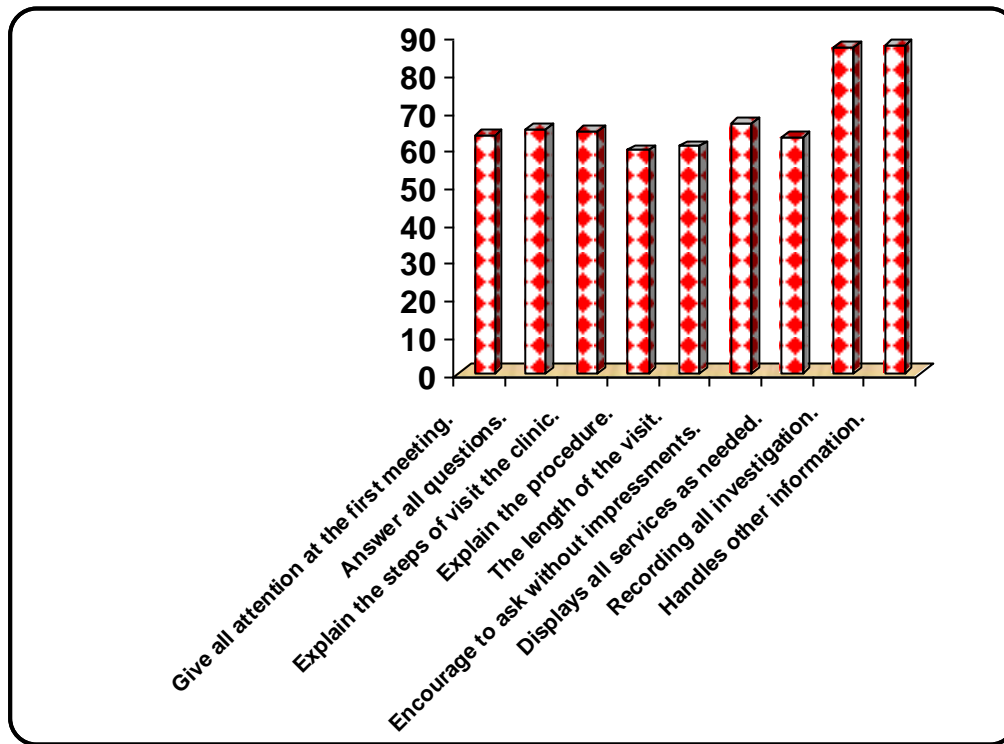
**Table (11):** Distribution of the studied sample regarding their opinion about role of nurse toward family planning method (n=200).

Items	Yes		Chi-square	
	No.	%	X <sup>2</sup>	P-value
Giving all attention at the first meeting.	127	63.5	14.580	0.000
Answering all questions.	130	65	18.000	0.000
Explaining the steps of visit in the clinic.	129	64.5	16.820	0.000
Explaining the procedure.	119	59.5	7.220	0.007
Length of visit.	121	60.5	8.820	0.003
Encourage asking without impressments.	133	66.5	21.780	0.000
Displaying all services as needed.	126	63	13.520	0.000
Recording all investigations.	174	87	109.520	0.000
Handling other information.	175	87.5	112.500	0.000

**Table (11):** Shows that nurses are handling other information, recording all investigations, encourage asking without impressments ,answering all questions, explaining the steps of visit in the clinic , give all the attention at the first meeting, displaying all services as needed, length of visit , explaining the procedure , (87.5%, 87%, 66.5%, 65%, 64.5%63.5%, 63%, 60.5%, &59.5%respectivly).



Distribution of the studied sample regarding their opinions about role of nurse toward family planning method (n=200).



**Fig. (2):** demonstrated that 87.5%, of nurses are handling other information, 87% recording all investigations , 66.5% encourage asking without impressments, 65% answering all questions, 64.5% explaining the steps of visit in the clinic , 63.5% give all the attention at the first meeting, 63.0% were displaying all services as needed, 59.5% were explaining the procedure.

**According to research question No (1): Is there a relation between socio-demographic characteristic of the studied women and their utilization of contraceptive? (Table (12):**

**Table (12):** Statistical relation between utilization of contraceptive among women and the age at marriage (n=200).

Items		Age at Marriage (in year)			ANOVA	
		< 20	20<30	30 +	F	P-value
Requirements for the use of family planning methods	Mean	7.146	7.282	7.714	0.462	0.631
	SD					
Need for follow-up	Mean	2.265	2.600	2.323	1.824	0.184
	SD	2.756	2.626	2.893		
Need for a waiting place	Mean	0.538	0.817	0.315	2.633	0.054
	SD	4.049	4.534	5.536		
		2.792	2.718	2.168		

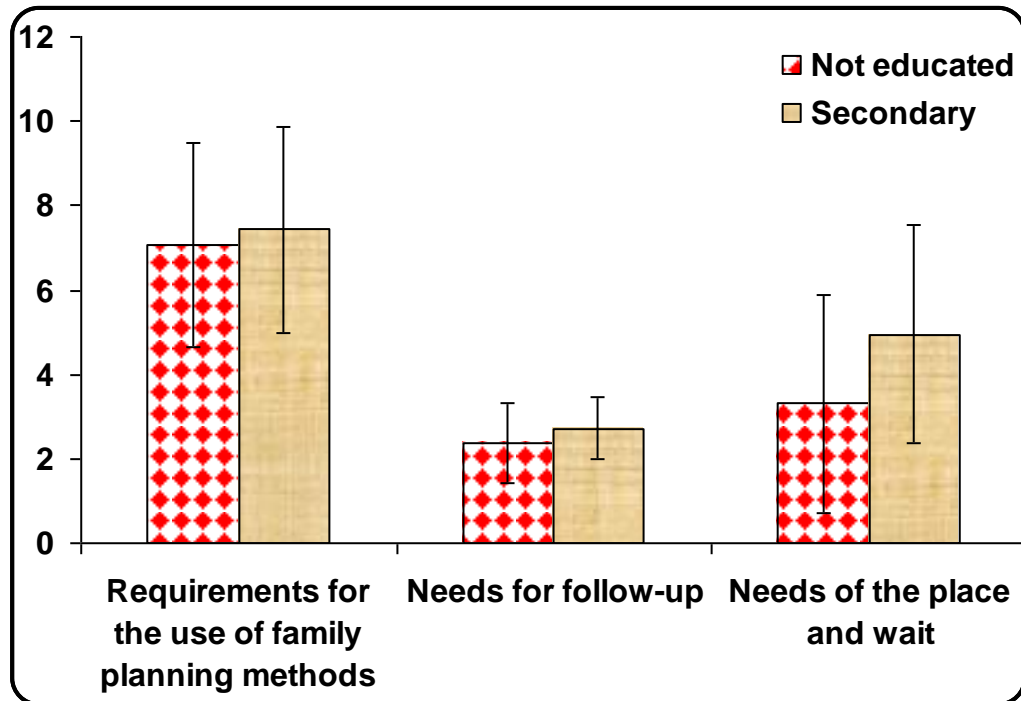
**Table (12):** demonstrates that there was statistically significant relation between age of marriage of the studied sample and their needs for a waiting place.

**Table (13):** Statistical relation between utilization of contraceptive among women and the level of education (n=200).

Utilization of contraceptive	Level of Education							
	Not Educated			Secondary			T-test	
	Mean	±	SD	Mean	±	SD	t	P-value
Requirements for the use of family planning methods	7.086	±	2.418	7.433	±	2.436	-0.724	0.470
Need for follow-up	2.371	±	0.942	2.722	±	0.718	-2.269	0.025
Need for a waiting place	3.314	±	2.587	4.948	±	2.575	-3.214	0.002

**Table (13):** shows that there were highly statistically significant relations between level of education and, needs of women for follow up, needs of women for and a waiting place.

Relation between utilization of contraceptive among women and the level of education



**Fig. (3).:** Indicates that there was highly statistically significant relation between level of education and needs of women for follow up, and their needs of women's for the a waiting place.