

Effect of Gender Relations on Women's Acquisition and Use of Contraception

This paper discusses how gender relations affect contraceptive decision making and use. Increasingly, the reproductive health literature calls on programs to consider the sexually active couple as an appropriate unit for addressing reproductive health issues (Becker and Robinson, 1998; Koo et al., 2005). Beckman and Harvey comment that reproductive health decisions are frequently couple rather than individual decisions raising issues about power in intimate relationships and women's ability to negotiate with their partners (2005). Clients concur -- one study reports that young women using Planned Parenthood services in New York found relationships to be the central issue in their lives (Miller et al., 2000). Research suggests that the context of a woman's relationship is a significant factor in method use. According to one study, women whose partners share in family planning decisions are more likely to protect themselves from both pregnancy and STDs than are women who make these decisions on their own (Riehm et al., 1998).

Although contraceptive decisions and behaviors take place within the couple context, scant attention has been given to couple-focused approaches for family planning, and many providers are unconvinced that a focus on the couple would be effective or feasible. Very few studies of couple interventions have been conducted, and further research is considered by many to be a priority. Improved understanding of the role of men in family planning decision making and relationship factors that help determine male involvement and influence would be useful for providers and policy makers.

Georgetown University is conducting a study with Planned Parenthood of San Diego & Riverside Counties (PPSDRC) in southern California and Tri-City Health Center in Fremont, California to determine whether integrating a couple-focused approach into family planning services, including adding the Standard Days Method® (SDM) to the selection of methods offered, is feasible and beneficial. The SDM is a simple and effective Fertility Awareness-based method that helps women identify the fertile days of their cycle and avoid unprotected sex if they do not want to become pregnant. The Institute has found that introducing the SDM is a good way of sensitizing providers to the importance of and the issues surrounding a couple-focused approach, as it requires couple communication and cooperation, and providers are taught to routinely address with their clients the role of men in SDM use.

Study Design and Methods

Interviews were conducted with 265 new pill, condom, and injectable users recruited from six clinics in southern California and the Bay area. Participants were interviewed by phone or in person within a month of receiving services. The

interviews explored partner communication and involvement in birth control decision-making, as well as satisfaction with clinic services. Study participants were also asked about their demographic and social characteristics, reproductive and contraceptive history, and fertility desires. Some 69 respondents were interviewed again three months later and were asked about correct method use and continuation. Other base-line participants could not be found or refused to be interviewed for the follow-up

Results

Women reported a high degree of couple communication about family planning and much significant male involvement in method selection and use, although women usually have the final say. Most couples make family planning decisions jointly, and partner opinion often influences contraceptive decisions. Over 90% of women reported discussing with their partners the clinic visit, their partners' feelings about contraception, and plans in case of method failure. One quarter of women reported that their partners accompany them to services, and 75% reported partner assistance in method use. Two-thirds of women stated that joint family planning decision-making is very important to them.

Analysis showed that language, education, method choice, marital status, and time in union had a statistically significant influence on male involvement. For example, women who usually spoke Spanish at home and less educated women (Tables 1 and 2, respectively) were more likely to report partner involvement. These results were confirmed in multi-variate analysis which will be shared in the presentation.

Table 1: Language and partner involvement

Language usually spoken at home:	Spanish (n = 67)	English or Both (n = 127)
Partner helped learn about methods**	46%	23%
Partner helped decide which method to use*	54%	30%
Consider joint decision-making very important*	84%	63%

* $p < .05$

** $p < .01$

Table 2: Education and partner involvement

	High school and below	University
Consider joint decision-making very important*	78% (n = 115)	59% (n = 79)
Partner influenced woman's decision to use their current method*	51% (n = 76)	33% (n = 52)

* $p < .05$

Through the follow up interviews, we were able to examine method continuation and problems with method use, and how male involvement may have positively or negatively affected these factors. Approximately 80% of pill and condom users interviewed were still using the method after three months; most of those discontinuing had switched to another method. However, results show that correct use is of concern. Among pill users, 15% reported that they did not take the pill daily and 52% reported that they had forgotten a pill at least once. Condom use was also problematic; slightly less than half of users reported that they used the condom every time they had sex, and only 74% reported that they used it at last intercourse. Further, 14% of the pill users and 25% of the condom users reported problems using their method. Emergency contraception (EC) is one strategy for addressing inconsistent and incorrect family planning use. Over 80% of respondents reported that they had been offered EC during their clinic visit and 85% stated that they knew how to use it. The majority (60%) reported that they had used EC in the past.

The results of the follow up interviews support findings from the initial interviews suggesting that men are actively involved in contraception; 76% of pill users and all condom users reported talking about their chosen method with their partner and most shared the materials they received during the clinic visit with their partner. All condom users and 80% of pill users reported that men and women have equal responsibility for contraception.

Preliminary analysis suggests that gender-related indices such as shared decision making, partner communication and partner involvement are associated with successful contraceptive use, when controlling for acculturation and education.

Conclusions

Women consider contraception an equal responsibility between men and women and most discuss family planning with their partners, despite provider perceptions to the contrary. Further analysis suggesting male involvement is associated with correct and consistent method use indicates the importance of developing and testing innovative, feasible ways to reach men.