

Original Article**Contraception Experiences of Young Women in Their First Years of Marriage***N. Fathizadeh**, *Sh.Tashi***, *H.A. Abedi****, *A. Kazemi*******Abstract**

BACKGROUND: Pregnancy prevention is an important factor in women's life changing in various periods. Selection of contraception method is personally unique and can bridge between their experiences and their unmet needs. The aim of this study was to determine contraception experiences in the first years of marriage.

METHODS: This was a qualitative phenomenological study. The studied population was composed of young women in their first years of marriage (before their first delivery). The data were collected with in-depth and unstructured interviews and analyzed by Collaizi method.

RESULTS: The findings of the study were classified in 75 codes and four categories as following; Impedimental factors, Motivating factors, Exchanging factors, Abandon factors.

CONCLUSIONS: Young women mentioned their positive and negative experiences of the first years of marriage. Their experiences are useful to promote the quality of services to fulfill their needs.

KEY WORDS: Experiences, contraception methods, first years of marriage

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Contraception which is considered as a new phenomenon in human life refers to a further past ⁽¹⁾. 90 percent of women who are in reproductive age may become pregnant during their first year of marriage. So, the best advice for young women who have no tendency to have a baby is to use contraceptive methods contemporaneous with sexual activities ⁽²⁾. Pregnancy prevention is an important factor in women's life that its need changes in different stages of life ⁽³⁾. Moreover, reproductive age of women affects their method of contraception, so that different methods are used after marriage and before the birth of first child ⁽⁴⁾ and to delay pregnancy more effective methods would be used ⁽⁵⁾. As days of youth and first years of marriage considered as important stages in both social and individual life and also most of people experience sensitive events like marriage, first sexual in-

tercourse and first parental period, they should be able to protect themselves from unwanted sexual contact, unplanned pregnancy, delivery in low ages, criminal abortion and putrefaction resulted from venereal disease ⁽⁶⁾. In spite of that, understanding parental experience at the first years of marriage would make a great change in spouses' life and success in it is related to spouses' adaptation with their relations and specific roles before parenting ⁽⁷⁾. On the other hand, pregnancy before the first or second years of marriage may result in low correspondence between spouses and some psychiatric problems for parents and child ⁽⁴⁾. So spouses should acknowledge suitable mental, moral and spiritual conditions to fulfill parental duties before having any child ⁽⁸⁾. According to above mentioned notes, it seems that pregnancy prevention especially unwanted one is very impor-

* MSc, Department of Midwifery, School of Nursing & Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran.

** MSc, School of Nursing & Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran.

*** PhD, Associate Professor, Department of Health, School of Nursing & Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran.

**** MSc, Department of Midwifery, School of Nursing & Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran.

Correspondence to: Nahid Fathizadeh MSc.

E-mail: fathizadeh@nm.mui.ac.ir

Research Article of Vice Chancellor of Isfahan University of Medical Sciences, No: 83242.

tant in these years and precise planning before the birth of first child and during the first years of marriage is completely essential. The main factor which can help this planning is precise use of effective methods to prevent pregnancy. Therefore study on young women can clarify their contraceptive experiences and show them the way to coordinate their experiences and needs. Perceiving complicated factors which affect the use of contraceptive methods should be examined in tangible experiences of this group⁽⁹⁾ and because family health is based on the first years of marriage, the use of concrete experiences of young women about pregnancy prevention can improve family health and present better family planning services.

Methods

This study was a qualitative phenomenological carried out from 15.8.2004 to 30.10.2004. The studied populations were women in their first years of marriage and before the first delivery living in Isfahan and experiencing one of the contraceptive methods. The samples were selected from women desired to participate in interview and was able to cite her experiences about contraceptive methods. Sampling was done by referring to participant's houses, private clinics and also health and treatment centers of Isfahan. To select high potential samples and to enrich the information, sampling was done till data saturation with 11 participants. In this study, the data were collected through in-depth and unstructured interviews. The interviews were recorded on cassette tapes. Each interview would be more completed by researcher perception from the previous interview. To complete data, the interview was done during two stages in some of the participants. After getting informed consent the interviewer went to the research places and introduced herself to samples and interviewed with them privately. The interview was done in a calm and private environment. Time of each interview was variable between 30 to 60 minutes based on the participants' patience. Every interview

was transferred on a paper after listening several times by the researcher. Data were analyzed by Collaizzi method. Based on seven stages of this method, participants' descriptions were assessed by the researcher to perceive and feel them. After review the content of the interview, the important ones related to studied phenomenon were extracted and then categories and clusters were organized. By combining all concluded ideas, a comprehensive and complete description of studied phenomenon were obtained. This description was given back to the participants to obtain reliable results. Validity and reliability of the data was confirmed by giving the results back to the participants and their approval and also team analysis.

Results

Mean of age and duration of marriage in participated women was 24 years old (19-34) and 16 months (4 - 36 months), respectively. The range of their education differs from guidance school level to bachelor's degree. Findings based on experiences of women who used contraceptive methods such as tablets, dysfunctional sexual intercourse and condom were classified in 75 cods, 11 groups and four categories as following; impedimental factors, motivating factors, exchanging factors, abandon factors. For instance some examples of impedimental factors to choose tablet were fear of barrenness, getting angry, decrease of sexual lust, vomiting and feeling giddy; to select condom were fear of condom, failure (breakage and slippage), putrefaction, sexual dissatisfaction, fear of pregnancy and to select dysfunctional sexual intercourse were men's depression, lack of sexual desire in women, possibility of putrefaction and premature senility. Among motivating factors to choose the tablet we can enumerate these items: reducing menstrual bleeding and pain, treating ovarian cyst; to choose condom: sexual satisfaction, preventing sexually transmitted disease, having no side effect, previous positive experience of husband; to choose dysfunctional sexual intercourse: having no effect on humor

and menstrual cycle, creating no sensitiveness, considering this way to be the only existed way before the first pregnancy.

Based on this study, some factors result in changing contraceptive methods like obesity, depression, decrease of sexual lust, being nervous, nausea and severe vomiting, using backache tablet and rare sexual satisfaction of husbands accompanied with dysfunctional sexual intercourse, sensitivity, putrefaction and condom failure accompanied with condom impedimental method. The main reason for giving up the method in this group was tendency to have a baby (for some different reasons such as the urge of associates, unemployment and being alone at home).

Discussion

Results of this study cleared some important matters that are necessary to be discussed. First, young women in their first years of marriage and before first pregnancy select less effective methods such as dysfunctional sexual intercourse and condom. This group use hormonal methods like edible contraception tablets for other reasons such as reducing menstruation pain, decreasing menstrual bleeding, treating oval cyst, etc. Rosenberg stated that from 43 percent of couples in china that used contraceptive methods before first pregnancy, more than half of them use traditional methods and 22-37 percent use condom. He believed using these methods take root of both social function and the fact that new contraceptive methods need to be presented to medical and family planning centers⁽¹⁰⁾.

Ergocman considered dysfunctional sexual method as a major one among Turkish couples. He propounded the age of women, education of men and having experience of first selected method by couples, are significant reasons to choose this method⁽¹¹⁾.

Also, Shivanandan believed that experience of couples in using natural contraceptive methods and their recent interest in these methods were increasing in United States of America. He stated their reasons derived from fear of side effects which followed by artificial

methods and desire to ecological and natural materials in recent years. Moreover, he considered cooperation of couples in using these methods more essential than other methods⁽¹²⁾. Brehney and Stephenes in their qualitative study assessed experiences of contraceptive methods in nine young mothers before their first delivery. These authors believed impedimental factors were the most effective method before the birth of first child. They mentioned invincibility of this method; impossibility of pregnancy and no need of daily use were some reasons of their selection⁽⁹⁾. Second, selection of these methods and their changes were more influenced by some factors such as fear of their side effects, confidence on a special method, experiencing the method by themselves or one of their relatives. Side effects and effortlessness are two significant factors for choosing a method⁽¹³⁾. In universal assessments, most of women have also mentioned that their reasons of using no contraceptive methods were fear of their outcomes and dangerous side effects⁽¹⁴⁾. As an example, one of the researchers assessed the relationship between using tablets and gaining weight. He believed that gaining weight in young women takes root of being older and mentioned women who were fat in childhood and have been overweighed during their first pregnancy were at higher risk to gain weight⁽¹⁵⁾.

Moreover, analysis of a study on 25 groups in Lebanon showed most reasons of inconsistent and discontinuous use of condom were five factors included: idle beliefs, decrease of sexual lust, bad experiences, fear and anxiety during sexual intercourse and negative social look on condom users, and a reason of its using was having no physiological side effects⁽¹⁶⁾. So, increasing patients' satisfaction and removing their anxiety about side effects of the method should be performed through counseling, evaluating continuation for the next using and considering the quality of helper - help seeker relationship. Because patients' satisfactions encourage them to choose the method again, suggest it to others and perceive advantages

and disadvantages of the method ⁽¹⁷⁾. Third, giving up the method in the first years of marriage derived from tendency to be pregnant in this group. Ergocman classified the reasons of discontinuation into five categories: failure of the method, tendency to pregnancy, side effects or effect on health, some dependent reasons of the method (such as husband's disagreement, using a more effective method and its availability), and diverse reasons (such as discontinuous sexual activity, barrenness and etc) ⁽¹¹⁾. Rosenberg stated the possibility of leaving contraceptive methods from marriage until the first birth to be 55% which 29% of it resulted from tendency to pregnancy ⁽¹⁰⁾.

Some researchers believed that a few number of pregnancies in young mothers derived from lacking proper contraceptive knowledge or finding a method hard, but most of them are accompanied with positive or binary feelings to pregnancy which interferes with effective use of contraceptive methods ⁽⁹⁾. It is no-

ticeable that using contraceptive methods was low in women who were pregnant without any planning, and it reflected this group was not completely opposite to have child but they did not plan for it actively ⁽¹⁸⁾. Save reported that below one percent of Turkish women use contraceptive methods before the birth of their first child, because they were expected to be pregnant during the first year of their marriage ⁽¹⁹⁾. Therefore, it concluded that an adequate contraceptive method should be selected with complete attention of help-seeker and her motivation accompanying an overall counseling during first years of marriage. Advantages and disadvantages of the method should be explained precisely to increase its efficiency with more familiarity.

Also, the quality of care services should be promoted for this group to accept the idea of family planning in their first years of marriage.

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