

# Attitude towards Contraceptives Use among Saudi Women

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**Abstract:** Studies conducted in Saudi Arabia showed low levels of use of contraceptives. Low use of contraceptives among Saudi women might be due to religious issues. Aim of the study was to assess attitudes towards contraceptives use among Saudi women. Study design was descriptive cross sectional of ever married Saudi females living in Riyadh city. Study procedure was through self administered questionnaire uploaded via Google drive and was distributed via twitter and Facebook. Sample size was 305 ever married females (who responded to the online questionnaire). It was found that 86.6% of women have ever used contraception, and the most commonly used method were contraceptive pills (64.9%). Attitude of females towards contraception was affected by their working status. Also, husband approval was a significant factor improving female attitude towards contraceptives. It is worth mentioning that living in extended family, having chronic disease or education of either the women or her husband had no effect on women's attitude towards contraceptives. It is recommended to conduct health education programs regarding contraceptives; their side effects and safety in all primary care clinics in Saudi Arabia. Sustained efforts should be done to increase awareness and motivation for proper contraceptive use. Men should not be ignored in receiving education on birth control methods. Initiation of specialized family planning clinics that offers better counseling might raise the rate of contraceptive use based on good decision making and choice of suitable method.

**Keywords:** Contraceptives Use, Saudi women.

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## I. INTRODUCTION

The World Health Organization (WHO) considers the prevalence of contraceptive use among a society as one of the determinants of women's health and empowerment in that society. Some societies, however, use contraceptives to regulate pregnancies and in birth spacing. <sup>(1)</sup>

Many countries have budgets with millions of dollars in funding to support birth control related programs, including family planning, distribution of condoms or various female contraceptives (in countries that support the use of contraceptives), and the wide spread education in countries on the different methods of birth control. <sup>(2)</sup>

As for the use of contraceptives among Saudi females, it was found to be unrelated to fertility. This is probably because of the low use of contraceptives and the tendency to use them for child spacing rather than limiting fertility, especially after having a certain number of children. <sup>(3)</sup>

Al-Ateeg, F Et al conducted a research about Natural Family Planning. The article focuses on the role of natural family planning (NFP) as a component of reproductive health. It distinguishes NFP from the concept of fertility awareness method. Educations on various methods of birth control, as well as the distribution of contraceptives are a major concern for the international community. Research showed that many people in developing countries continue to have fears and misconceptions on modern contraceptives. Religious issues may also play a large role in determining how couples view such issues as contraception. Certain religions do not permit the use of contraception and children from religious families may not even know the essentials on birth control methods. <sup>(2)</sup>

Studies conducted in Saudi Arabia showed low levels of use of contraceptives with only (27%) of women in Abha and (44%) of women in Qassim region. The national data of the Kingdom shows (31.8%) contraceptive use rate in 1996. This percentage has fallen down in 2007 to be (23.8%)<sup>(1)</sup>. In contrast, a study that was conducted in Al-Khobar showed high use of contraceptives among the Saudi Arabian females with (74.8%).<sup>(4)</sup> In another study in Taif those who never used any contraceptives represented about (34.1%) of the sample. While the national data shows contraceptive prevalence to be only (31.8%) in 1996. This percentage has fallen down in 2007 to be (23.8%).<sup>(1)</sup>

According to the previous statistics, we might be able to say that low use of contraceptives among Saudi Arabian women might be one of the factors that positively affect fertility in the country. Low use of contraceptives among Saudi women might be affected by their faith of Islam, although no study proved that.<sup>(5)</sup>

In a study about the attitude of using contraceptive among Saudi women in AlKhobar conducted by Al-Turki, A, the study showed that a woman's decision whether to use contraceptives or not is affected by multiple factors including: education, age of the woman, living in rural or urban area, health concerns, religious concerns and the desire to have large families.<sup>(4)</sup> These factors can be generalized among the whole Kingdom, since another study conducted by Farheen, in 2013 in Abha stated that women show a desire to have large families.<sup>(1)</sup>

**Aim of the study:** Assessment of attitudes towards contraceptives use among Saudi women.

**Objectives:**

1. Assessment of attitudes of Saudi females towards contraceptive use.
2. Studying factors affecting their attitudes towards contraceptive use.

**II. METHODOLOGY**

**Study design:** Descriptive cross sectional.

**Study population:** Ever married Saudi females living in Riyadh city.

**Study procedure:** Self administered questionnaire. The questionnaire was uploaded via Google drive and was distributed via twitter and facebook.

**Sample size:** 305 ever married females (who responded to the online questionnaire).

**Statistical analysis :**

Data collected were coded, tabulated and analyzed using the statistical package of social science (SPSS) version 16.0. The applied tests were chi-square, t test and ANOVA and 0.05 levels were used as a cutoff point of significance. Multiple associations were evaluated in a multiple linear regression model based on forward stepwise selection. This procedure allowed the estimation of the strength of the association between each independent variable and the dependent variable taking into account the potential confounding effects of the other independent variables .

**III. RESULTS**

**Table (1): Demographic characteristics of studied sample**

	No.	%
<b>Age:</b>		
- 17-25 years old	64	21.1
- 26-35 years old	124	40.9
- 36-50 years old	100	33.0
- Above 50 years old	15	5.0
<b>Educational level:</b>		
- Intermediate and below	14	4.6
- High school	52	17.2
- Bachelor and above	236	78.1
<b>Marital status:</b>		
- Married	288	94.4

- Divorced	11	3.6
- widowed	6	2.0
<b>Occupational status:</b>		
- Working	159	52.1
- Not working	146	47.9
<b>Family Income:</b>		
- Less than 3000	12	3.9
- 3000-7000	50	16.4
- 8000-13000	108	35.5
- More than 13000	134	44.1
<b>Residence Location:</b>		
- Middle	23	7.5
- North	118	38.7
- South	31	10.2
- East	84	27.5
- West	49	16.1
<b>Family Type:</b>		
- Extended	103	33.9
- Nuclear	200	65.8

**Table (1)** demonstrates socio-demographic characteristics of study participants, most of them aged 26-35 (40.9%) and the lowest percentage were above 50 years old (5%). As regard the levels of education, the majority of participants had bachelor degree or higher (78.1%) and only (4.6%) had Intermediate school education or less. The majority of the sample were married (94.4%). More than half were working (52.1%) and only 3.9% of participants had income less than 3000 riyals/month, while 44.1% had income higher than 13000 riyals/month. As for residence, (38.7%) of the participants are living in North of Riyadh City, and only (7.5%) are in Middle of Riyadh. Two-thirds of the sample were living in nuclear family (65.8%) and the other one third were within extended families (33.9%).

**Table (2): Frequency and pattern of contraceptive use**

Variable		No. (305)	%
<b>Ever use of contraception</b>	Yes	264	87.1
	No	39	12.9
<b>Cause of not using contraception</b>	Religious concerns	1	2.9
	Medical Reasons	16	47.1
	Husband's Approval	11	32.4
	Other	6	17.6
<b>Type of contraceptive</b>	Pills	198	78.3
	IUD	51	20.2
	Injection	1	0.4
	Vaginal ring	3	1.2
	Others	17	5.6
<b>Duration of use</b>	Less than 12 months	117	47.8
	13-24 months	50	20.4
	25-36 months	25	10.2
	More than 36 months	53	21.6

<b>Fixed space between children</b>	Yes	80	26.7
	No	220	73.3
<b>Length of space</b>	Less than 2 years	25	32.5
	2-4 years	42	54.5
	more than 4 years	10	12.9
<b>Did you use contraception by prescription</b>	Yes	197	70.4
	No	83	29.6
<b>Does your husband know</b>	Yes	266	97.4
	No	7	2.6
<b>Does your husband approve</b>	Yes	262	94.9
	No	14	5.1

Frequency and pattern of contraceptive use were demonstrated in **table (2)**, it shows that 87.1% of the samples have used contraception, and 50% of those who did not use it reported the cause to be medical reasons. The preferable type of contraception was pills (78.3%) then IUD (20.2%), and injection was least preferable (0.4%). The duration of contraception use was mostly less than 12 months (47.8%), with only (21.6%) used it for more than 36 months.

73.3% of the Participant didn't have a fixed space between their children and among those who have fixed space between children, about 55% preferred 2-4 years in-between. About two third of women used contraception had it by doctors prescription.

Regarding husband approval of contraceptive use, 5% did not approve use of contraception. It was also found that about 3% of participants using contraception did not tell their husbands about their use.

Use of different types of contraception according to age was illustrated in **figure (1)** that revealed that young females preferred use of vaginal rings and old ones preferred either IUD or pills.

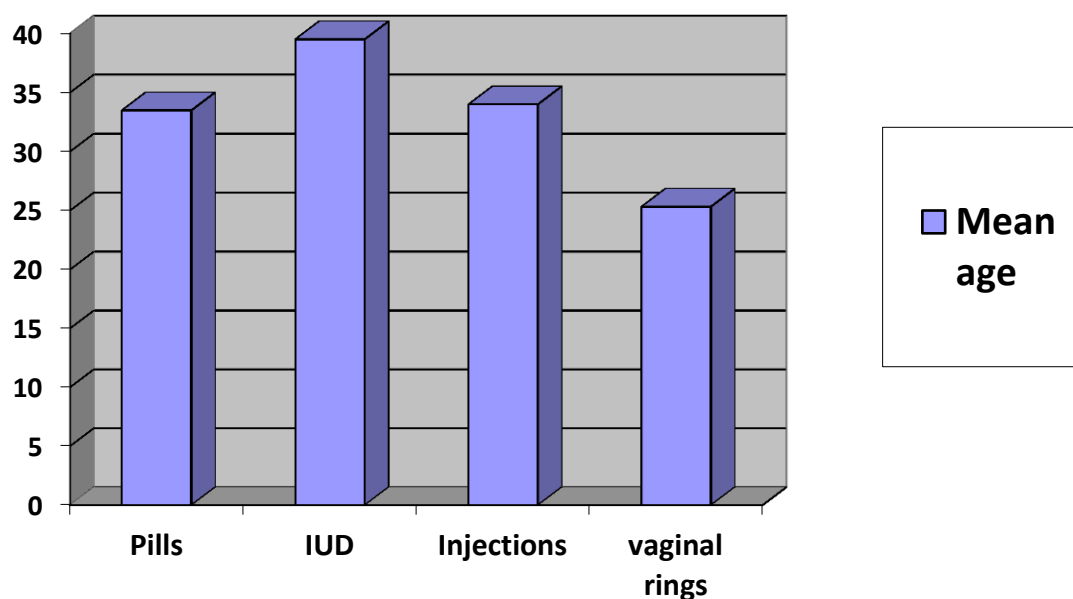
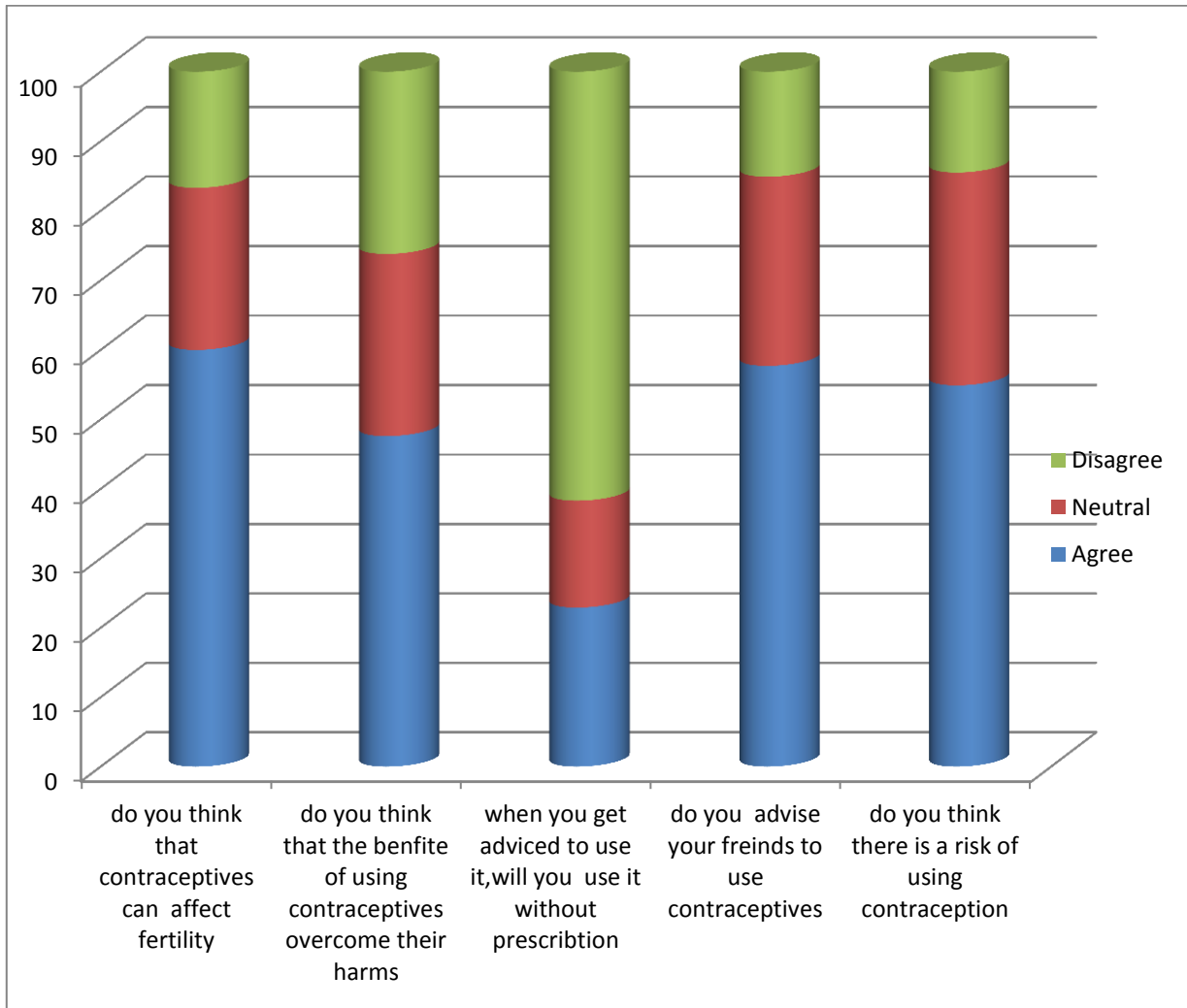


Figure (1): Use of contraceptives according to age



**Figure (2): Attitude of studied sample towards contraception**

**Table (3)** demonstrates attitude of the studied sample towards contraception. Only one fifth of them had a positive attitude and **figure (2)** demonstrates their attitude in details, more than half of them agreed that contraceptives have health risks and about 60% thinks that contraceptives can affect their fertility.

**Table (3): Attitude of studied sample towards contraception**

		Frequency	Percent
Attitude	Negative	28	9.2
	Neutral	211	69.4
	Positive	65	21.4
	Total	304	100.0

Table (4): Factors that affect attitude towards contraceptive use

	Attitude
<b>Chronic diseases</b>	
- Yes	1.82 ± 0.48
- No	1.84 ± 0.41
ANOVA	.655
<b>Family type</b>	
- Extended	1.86 ± 0.42
- Nuclear	1.83 ± 0.43
ANOVA	.802
<b>Income</b>	
- Less than 3000	1.63 ± 0.50
- 3000-7000	1.94 ± 0.42
- 8000-12000	1.82 ± 0.40
- 13000 or more	1.85 ± 0.43
ANOVA	.146
<b>Work</b>	
- Yes	1.79 ± 0.46
- No	1.89 ± 0.38
ANOVA	.042 **
<b>Participant education</b>	
- Intermediate or less	1.76 ± 0.43
- High school	1.90 ± 0.40
- Bachelor and above	1.84 ± 0.42
ANOVA	.508
<b>Husband education</b>	
- Intermediate or less	1.77 ± 0.44
- High school	1.78 ± 0.41
- Bachelor and above	1.86 ± 0.43
ANOVA	.339
<b>Age</b>	
- 17-25 y.o.	1.84 ± 0.44
- 26-35 y.o.	1.87 ± 0.39
- 36-50 y.o.	1.82 ± 0.43
- 50 years and above	1.73 ± 0.59
ANOVA	.559
<b>Husband's approval</b>	
- Yes	1.89 ± 0.38
- No	1.64 ± 0.63
ANOVA	.024 **

Table (4) demonstrates that attitude of females towards contraception was affected by their working status, it was better among housewives (p=0.042). Also, husband approval was a significant factor improving female attitude towards contraceptives (p=0.024). It is worth mentioning that living in extended family, having chronic disease or education of either the women or her husband had no effect on women's attitude towards contraceptives.

**Table (5): Time interval between stopping different types of contraception and getting pregnant again**

	N	Mean (in month)	Std. Deviation	Sig
<b>pills</b>	159	7.2642	13.19448	p>0.05
<b>IUD</b>	37	5.5676	5.71324	
<b>virginal ring</b>	3	1.6667	1.52753	

On studying the time interval between stopping of contraception and getting pregnant again it was less than 12 months among 90.2% of females, and those who took more than 36 months were only 1.7%. Analyzing these findings according to type of contraception in **table (5)**, it was found that the longest mean time was for pills (7.3 months) followed by IUD (5.6 months) and the least was for vaginal rings (1.7 months).

#### IV. DISCUSSION

Given the large numbers of contraceptive users, reports in public and scientific media of life and health threatening effects of pharmacological or mechanical contraceptives have the potential to alarm many people. Concern on possible side effects of pharmacological contraceptives is the most common reason given for not using a method by women who are at risk of unintended pregnancy. The majority of contraceptive methods available must be practiced by women. <sup>(2)</sup> About two thirds of women in the current study used contraception provided by doctor's prescription. The study in Abha 2013 showed that women with obstetric/medical history preferred pills. The study recommended that different methods of contraception and their benefits on both mother and children must be emphasized. <sup>(1)</sup>

The current study shows that the preferable type of contraception was pills (78.3%) then IUD (20.2%), and injection was least preferable (0.4%). In a study conducted among Jordanian women in 2001 revealed that 43% of Jordanian women were using Intra Uterine Device (IUD), and 12% were using pills in 1997. <sup>(10-6)</sup> A similar study in Egypt in 2012 showed that IUD and pills were common among urban women. A study in Abha in 2013 showed that 62.9% of women used pills and 37.1% used Intra Uterine Device (IUD). <sup>(1)</sup> Another study in Al-Khobar said that 36.6% of women preferred pills and 19.9% used IUD. The other 43.5% used other methods including condoms, calendar, external ejaculation and breast feeding. <sup>(4)</sup>

Use of different types of contraception according to age in the current study revealed that young females preferred use of vaginal rings and old ones preferred either IUD or pills. In a study conducted among Jordanian women in 2001 revealed that the percentage of use was increasing with increasing age in women aged less than 40 years. <sup>(6)</sup>

The current study illustrates that attitude of females towards contraception was affected by their working status, it was better among housewives. The study in Abha, showed that women who preferred IUD were mostly working women. As for women with obstetric/medical history preferred pills. The study concluded that different methods of contraception and their benefits on both mother and children must be emphasized. <sup>(1)</sup> Alsheeha. M conducted a research in 2010, there was a significant increase in contraceptives use among workingwomen, 30 years and older, with a higher level of education, and those having large number of children. Multiple regression models revealed that the significant determinants of the use of contraceptives were women's working and education. <sup>(7)</sup>

Alsheeha. M in 2010 about the awareness and use of contraceptives among Saudi women. The overall rapid change in the socio-demographic pattern of the Saudi Arabian community, especially the change concerned with women's education and work will be an important factor in changing fertility beliefs and behaviors with more tendencies to birth spacing and, consequently the use of contraceptives. The study aimed to identify the perception of Saudi women regarding the use of contraceptives. A cross-sectional study was conducted among Saudi women attending primary care centers of Al-Qassim region. A structured questionnaire was developed to cover the research objectives. The dependent variable was the utilization of contraceptives methods and the socioeconomic variables were independent variables. The results identified

the low knowledge level of the participant women regarding the variety of the contraceptives methods. They intended to have from 5 to 10 children. <sup>(7)</sup>

Religious issues may also play a large role in determining how couples view such issues as contraception. Certain religions do not permit the use of contraception and children from religious families may not even know the essentials on birth control methods. <sup>(2)</sup>

On studying the time interval between stopping of contraception and getting pregnant again it was less than 12 months among 90.2% of females, and those who took more than 36 months were only 1.7%. Analyzing these findings according to type of contraception, it was found that the longest mean time was for pills (7.3 months) followed by IUD (5.6 months) and the least was for vaginal rings (1.7 months). 73.3% of the Participant didn't have a fixed space between their children and among those who have fixed space between children, about 55% preferred 2-4 years in-between. The duration of contraception use was mostly less than 12 months (47.8%), with only (21.6%) used it for more than 36 months. Alsheeha. M in 2010 about the awareness and use of contraceptives among Saudi women found that most participants and their husbands showed acceptance to the use of contraceptives for birth spacing. They preferred birth interval of 2-3 years. <sup>(7)</sup> Khraif (2001) found that use of contraceptive was not wide spread in Saudi Arabia and its use was mainly for spacing rather than desire to limit family size. <sup>(3)</sup>

Regarding husband approval of contraceptive use, 5% did not approve use of contraception. It was also found that about 3% of participants using contraception did not tell their husbands about their use. Husband approval was a significant factor improving female attitude towards contraceptives. Statistics have shown that men are often less willing to wear a condom than females are to take the pill. Therefore, women often make the decisions on which contraceptive methods to use. <sup>(2)</sup>

The current study showed that living in extended family, having chronic disease or education of either the women or her husband had no effect on women's attitude towards contraceptives. However, 50% of those who did not use it reported the cause to be medical reasons. Al Ateeg et al mentioned that women in Malaysian study reported fear of side effects which was the most important reason for not using contraceptives. A study in Turkey found that many women believed that intrauterine devices (IUDs) involved a procedure to "tie up" fallopian tubes, a belief which could be affecting IUD acceptance in Turkey. Another study found that Chinese couples believed that male sterilizations were less effective than female sterilization and that male sterilization has negative effects on physical activity. <sup>(2)</sup>

The current study shows no association between type of contraception used with time to get pregnant. So we might say contraception method has no effect on fertility. Al-Riyami, A et al conducted a study in 2003 about the determinants of women's fertility in Oman to study the association of women education, and empowerment with some of the fertility determinants in a community based survey. Results say that about 31% of the sample was considered highly empowered in decision-making. Women of higher score of decision-making index were more likely to have longer closed birth interval. Those scored low in the decision-making index were more likely to get a child at an earlier age. <sup>(8)</sup>

## V. CONCLUSION

It was found that 86.6% of women have ever used contraception, and the most commonly used method were contraceptive pills (64.9%).

Attitude of females towards contraception was affected by their working status. Also, husband approval was a significant factor improving female attitude towards contraceptives. It is worth mentioning that living in extended family, having chronic disease or education of either the women or her husband had no effect on women's attitude towards contraceptives.

## VI. RECOMMENDATIONS

- It could be helpful to conduct health education programs regarding contraceptives; their side effects and safety in all primary care clinics in Saudi Arabia .
- Sustained efforts to increase awareness and motivation for proper contraceptive use.
- Men should not be ignored in receiving education on birth control methods.
- Initiation of specialized family planning clinics that offers better counseling might raise the rate of contraceptive use based on good decision making and choice of suitable method.



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