FACTORS ASSOCIATED WITH THE PERCEPTION OF SIDE-EFFECTS RELATING TO THE USE OF CONTRACEPTIVE METHODS

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OPSOMMING

Die doel met die ondersoek was om gebruikers van moderne kliniese kontraseptiewe (orale pil, hormonale inspuiting en IUT) se persepsies van newe-effekte wat met gebruik gepaard gaan te bepaal, en om faktore wat met hierdie persepsies verband hou te identifiseer. Die studie is onder Swart vroue in 'n woonbuurt van Benoni gedoen. 'n Steekproef van tweehonderd gebruikers van elke metode is op ewekansige wyse uit die rekords van die plaaslike gesondheidskliniek getrek.

Daar is bevind dat 'n aansienlike persentasie gebruikers van elke metode te kenne gegee het dat hulle voorheen of tans newe-effekte ervaar het wat hulle met die besondere kontraseptief in verband gebring het. Probleme is ondervind deur 39,5 % van die inspuitinggebruikers, ietwat minder IUT-gebruikers (35,0 %) en 'n aansienlike laer persentasie pilgebruikers (21,5 %).

Die meervoudige stapsgewyse regressie-analises het getoon dat uiteenlopende verklarende veranderlikes 'n statistiese beduidende verband met die persepsie van newe-effekte by die gebruikers van die onderskeie metodes gehad het. By gebruikers van die pil was dit die veranderlikes ekonomiese aktiwiteit, ouderdom en aantal metodes wat reeds gebruik is; in die geval van die inspuiting was dit kindertal en tydperk wat die metode gebruik is, terwyl slegs een veranderlike, naamlik aantal metodes wat reeds gebruik is by IUT-gebruikers uitgesonder is.

Ofskoon daar wel veranderlikes behoort te wees wat met die voorkoms van newe-effekte verband hou en nie by die ondersoek ingesluit is nie, kan dit uit die huidige ondersoek afgelei word dat die persepsie van newe-effekte in groter mate die gevolg van psigologiese as fisiologiese faktore kan wees.

INTRODUCTION

Limited research has been done in South Africa regarding the incidence of side-effects and perceptions of these among users of contraceptives. Numerous knowledge, attitude and practice (KAP) surveys have been conducted by the Human Sciences Research Council (Erasmus 1981a; Erasmus 1981b; Erasmus 1982; Groenewald 1978; Lötter, Van Tonder 1976; Mostert, Malherbe 1974; Mostert 1974; Strydom 1981; Van der Merwe 1982) and in some of these studies questions concerning side-effects were included to determine reasons for discontinuation of specific contraceptive methods. The literature concerning research on side-effects related to contraceptive use usually pertains either to clinical studies aimed at determining types of side-effects associated with specific methods or to the influence of these effects on the discontinuation of contraceptive use.

The present study was conducted in order to determine (a) the incidence of perceived side-effects amongst users of the intra-uterine device, the hormonal pill and the injection, and (b) factors associated with these perceptions.

RESEARCH DESIGN

The study was conducted in Daveyton, a Black residential township near Benoni. Three samples of 200 respondents for each of the three contraceptive methods were drawn from the records of a health clinic situated in the township. As the study was not focused on the influence of side-effects on continuation of a specific method, a lower limit of one year of continuous use of a specific method was set in order to exclude women who would be unable to give reliable responses due to a short period of use.

This condition also excluded women who might be experimenting with a method; who were not strongly motivated to prevent a pregnancy; who were unhappy with their method and were contemplating changing to another method; and for whom one or more of the methods were contra-indicated because they had recently given birth or were breastfeeding. The fieldwork was undertaken during 1980. Interviews were conducted by trained fieldworkers in the language of the respondent.

INCIDENCE OF SIDE-EFFECTS

A list of side-effects or problems associated with the use of each of the three methods was compiled after consultation with medical and nursing personnel attached to the national Family Planning Programme. The list contained side-effects referred to in scientific literature and problems and complaints associated with the use of contraceptives that are frequently heard from clients at family planning clinics.

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During the interviews the respondents were asked whether they experienced any of the listed side-effects or problems from the contraceptive they were using, and if so, to elaborate on these. Notes were made of problems that respondents mentioned which were not included in the schedule.

The percentage users of the three methods who indicated that they had or were experiencing side-effects which they associated with the use of the contraceptive varied substantially. Whereas 21,5 % of pill users reported side-effects, the incidence amongst users of the IUD and injection were considerably higher, 35,0 % and 39,5 % respectively.

FACTORS RELATED TO THE PERCEPTION OF SIDE-EFFECTS

As relatively little research has been done in South Africa concerning factors related to perceived side-effects of contraceptive use, it was decided to include explanatory variables which are usually used in KAP surveys in the analyses.

Three demographic variables — age, parity and desire for more children — were selected. Educational level and economic activity were included as socio-economic variables. Variables related to contraceptive use that were included were: parity at which a clinical method was first accepted; reason for first acceptance and present use being for spacing or for termination of fertility; the number of clinical methods ever used; whether contraceptive use began on own initiative or was motivated by another person; period since the last birth; and duration which the present method was being used.

Exploratory multivariate analyses showed that four of the explanatory variables, desire for more children, period since last birth, parity at which a clinical method was first accepted, and whether the reason for first acceptance was to space or terminate fertility, did not have a statistically significant relationship ($p > 0,05$) with the dependent variable (side-effects) among all three of the samples of method users.

The relationships between the dependent variables and the remaining eight explanatory variables were subsequently analysed by means of multivariate stepwise regression analyses. In the case of the oral pill users, three of the eight explanatory variables (age ($p < 0,025$), economic activity ($p < 0,005$) and number of methods used ($p < 0,001$)) had a statistically significant relationship with the dependent variable (side-effects). The analyses regarding IUD users resulted in only one explanatory variable (number of methods used ($p < 0,025$)), and in the case of the injection two variables (parity ($p < 0,025$) and period of method use ($p < 0,025$) being statistically significant.

The percentages of women reporting side-effects are shown only for explanatory variables that were statistically significant. The percentages were adjusted in order to eliminate the influence of all other explanatory variables included in the original regression models.

In the case of pill users perceptions of side-effects were far more prevalent among older women, women who were economically active, and women who had used methods in addition to the pill. In the case of injection users, the percentages of women reporting side-effects in the parity categories 3 - 4 and 5 +, were more than double than that for women with parity 0 - 2. More than half of the women who had used the injection for the shortest period reported side-effects as against slightly more than one quarter for the categories with longer use. As with pill users, side-effects were more prevalent among women who had used methods in addition to the IUD.

DISCUSSION

Although it is not possible from this research to conclude whether the perceived side-effects had physiological or psychological origins, it seems that most of the complaints could be related to the latter rather than the former. Older women and women with higher parity may be more anxious to prevent pregnancies, more concerned about the effectiveness of the method, and thus more method-conscious than younger and lower parity women.

Adjusted percentages of respondents who perceived side-effects associated with contraceptive use by indicated explanatory variables

Explanatory variable	Pill	Injection	IUD
Age			
< 30	16,3		
⩾ 30	29,7		
Parity			
0 - 2		20,5	
3 - 4		53,4	
5 +		43,8	
Economic activity			
Not active	17,4		
Active	26,2		
Number of methods ever used			
One	12,6		30,9
More than one	31,7		46,2
Period of use (months)			
12 - 21		51,2	
22 - 39		27,3	
40 +		27,6	
Mean	21,5	30,5	39,5

The same argument may hold for economically active users for whom an unplanned pregnancy may hold considerable financial implications. With an increase in the period of method use, confidence in the method may improve and fewer symptoms perceived as related to the method *per se*.

Women who have used more than one method could be regarded as more prone or hypersensitive to the somatic effects of medicines and changed methods for that reason. However, the fact that these trends are not similar for each of the three methods, suggests that the perception of side-effects should not only be related to psychological factors.

The findings indicate, furthermore, that the presence and perception of side-effects relating to modern contraception are not clearly understood. It is suggested that in-depth multidisciplinary research be undertaken in order to understand why women, specifically Blacks, react to contraceptive use the way they do. The existence and perceptions of side-effects among considerable percentages of women must be important factors in the discontinuation of contraceptive use, leading to unwanted pregnancies and high fertility.

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