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Factors That Explain the Contraceptive Behavior of the Couple

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Purpose:

Explain how previous related experience (previous use of MPF), personal factors (age, gender, contraceptive attitude, schooling, marital status, religion, occupation, monthly income, couple relationship time and number of children), the perceived benefits of the contraceptive behavior of the couple (CBC), perceived barriers, self-efficacy and interpersonal influences for the CBC (family support, partner and health providers) influence the CAP

Methods:

The sample consisted of 300 heterosexual couples from 18 to 35 years of age who attended a second level health unit of the Guanajuato Ministry of Health. The sample was calculated with $R^2 = .08$, with a test power of 90% for a multivariate linear regression model with 16 variables. The study design is mainly a model check and the sampling was systematic with random start (1 out of 3 couples). The information was collected using scales that presented acceptable validity and reliability. The analysis of the results was carried out using SPSS version 22, with which the Kolmogorov-Smirnov test with Lilliefors correction showed no normality in the variables, so non-parametric tests were calculated, such as Spearman correlation, Mann-U test Whitney and Chi-square. We also adjusted linear regression models with and without Bootstrap.

Results:

The mean age of the population was 26.1 years of age, showing a difference between the genders ($U = -3.42$, $p < .001$). 44.2% of the couples were married and 55.8% in free union, the level of studies corresponds theoretically at the beginning of a university career. 26.3% of women and 18.7% of men were unemployed. More than 90% of the couples profess the Catholic religion, of which most of the participants do not perceive interference for the use or not of FPM. In relation to the previous use of FPM 67% of the women reported that they had not previously used any method, followed by 22.3% who reported that they used the male condom and 5% the oral hormones. In the case of men, 63.7% reported no previous use of FPM; however, 33.3% used the male condom. In relation to the current use of FPM, 22.7% of women reported not using MPF, while 31.3% said they were using the male condom, followed by 15.3% of the IUD and 13.7% of the subdermal implant. Regarding men, 31% reported not using FPM now, and those who used 56% used a male condom, followed by the IUD by 6%. Of the 32.8% of the couples that did not have previous experience with the use of FPM, they still do not do so at present, however, 67.2% kept using them until now. In relation to those who did previously use MPF 84.1% continue using them, but 15.9% of them abandoned this behavior ($X^2 = 176.217$, $p < .001$). Regarding the current use of FPM and the state of the participants, 54.4% of married women do not currently use FPM, a percentage that exceeds that of married men and single-sex couples. However, in a higher percentage, 59.9% of men and 59.6% of women in free union use some MPF at present. The number of children of the couple ranged from one to five ($M = 1.03$, $SD = 1.13$). In relation to their desire to have more children, 55.7% of women said that if it is their desire, contrary to 44.3% who said no. For their part, 59.7% of men expressed this desire, unlike the 40.3% who said that it was not. Regarding the intention to use FPM of the participants that currently 17.7% of women and 23.7% of men expressed that it is not their intention to

use them. It is observed that the gender of the participants has a positive effect favoring the CBC, as well as the age ($\beta = 4.02$, $p = .002$) the CBC. There is an association of the contraceptive attitude and religion on the perceived benefits of CBC, that is, for each favorable point of contraceptive attitude, it increases .516 ($p = .002$) the perception of benefits for the CAP and for each point in the perception of the influence of religion for the use of FPM, decreases -3,801 ($p = .017$) the perception of perceived benefits of the CAP. For each favorable point of contraceptive attitude, decreases -.301 ($p = .002$), the perception of barriers for the CBC and for each year of schooling decreases -1.216 ($p = .002$) said perception of perceived barriers for the CBC. On the other hand, for each favorable point of contraceptive attitude increases .693 ($p = .002$) the self-efficacy for the CBC, the same happens with the schooling and the time of relationship of couple, for which for each year, self-efficacy increases .750 ($p = .002$) and .391 ($p = .007$) respectively. Being married or free union have a positive effect on the dependent variable ($\beta = 3.109$, $p = .015$), contrary to the occupation that has a negative effect on self-efficacy for CBC ($\beta = -.284$, $p = .028$). The more favorable the contraceptive attitude score, the .379 ($p = .002$) increases the interpersonal influences. For each year of schooling and years of relationship, the perception of interpersonal influences increased .958 ($p = .002$) and .448 ($p = .003$) respectively. For each point of perceived benefits of the CBC, it increases .429 ($p = .002$) the self-efficacy for the CBC. The exploratory and confirmatory factorial analysis of contraceptive attitude scale, contraceptive self-efficacy and contraceptive behavior yielded adequate indexes that indicate the appropriate use of these instruments

Conclusion:

The factors that are associated with the contraceptive behavior of the couple are directly the age and gender of the participants. Likewise, the contraceptive attitude, schooling, marital status, religion, occupation, monthly income and relationship time positively influenced the benefits, barriers, self-efficacy and interpersonal influences for CAP, considered as predictors of said behavior. The results invite us to investigate more the factors that explain the CAP, on which the scientific basis for the development of specific SRH interventions for the nursing professional is felt.

Title:

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Keywords:

Contraceptive behavior, Couple and Factors

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Abstract Summary:

The aim is to understand the factors that intervene in the decision of the couple about the use or not of family planning methods, in order to reduce preventable maternal deaths. We wish to share our results in order to reorient current health strategies focused on this serious problem.

Content Outline:

Introduction: Every day around 830 women die in the world from complications related to pregnancy, childbirth and induced abortions and many of them could have been avoided. There is an international commitment to reduce this problem, promoting Family Planning. (PF).

Aim. Explain how previous experience, personal factors, benefits, barriers, self-efficacy and perceived interpersonal influences influence the Contraceptive Behavior of the Couple (CBC).

Material and methods: Sample: 300 couples from 18 to 35 years old Place: Second level health unit in Guanajuato. Study design: model checking. Systematic sampling: random start. The information was

collected using valid and reliable scales, and analyzed through SPSS 22. Ethics. General Health Law on health in humans 1987.

Results. They explain how the variables that explain the contraceptive conduct of the couple are related to each other. These results will be shown through a scheme of interrelations based on the Nola Pender Health Promotion Model in which it turned out that age and gender are variables that directly explain said behavior.

Conclusions: Age and gender should guide the design of interventions that encourage the use of Family planning methods. Consider personal biological, psychological and social factors. Consider the perception of benefits, barriers, self-efficacy and interpersonal influences for CAP. The promotion strategies of the FP should consider the specific characteristics of the population.

Topic Selection:

Research Poster Session 1

Slot (superslotted):

RSC PST1: Friday, 26 July 2019: 9:30 AM-10:00 AM

Slot (superslotted):

RSC PST1: Friday, 26 July 2019: 2:30 PM-3:30 PM

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