



International Journal of Current Research and Academic Review

ISSN: 2347-3215 Volume 4 Number 2 (February-2016) pp. 1-8

Journal home page: <http://www.ijcrar.com>

doi: <http://dx.doi.org/10.20546/ijcrar.2016.402.001>



Investigating the Relationship between Contraceptive Method and the Quantity of Sexual Intercourse in Reproductive Aged Women

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KEYWORDS

Contraceptive methods, Quantity of sexual Intercourse, Women in childbearing age

A B S T R A C T

In recent years, using birth control methods has increased as a way to decrease population growth. However its effect on sexual relations has attracted the attention of many researchers. This research aimed to investigate the impact of contraceptive methods on the quantity of sexual intercourse. This was a cross-sectional study. The study sample included all women aged 18-45 referring to health centers 1 and 8 placed in the west of Ahvaz city in Iran in 2014. Among all people referring to health centers, 135 married women were randomly selected and data using a researcher-made questionnaire in a self-report way were gathered. To calculate its validity and reliability, content validity and Cronbach alpha coefficient were respectively used. To analyze data, descriptive statistics methods (mean and standard deviation) and analytic descriptive methods (analysis of variance, chi-square test, correlation Pearson test) and SPSS software, version 18 were used.

Introduction

Family planning as a way to cope with the population growth has been accepted by most countries (1). According to definition of World Health Organization, family planning includes measures that help individuals and couples to avoid having unwanted children and they can have children only when they want to, determine the distance between their children, adapt the time of their children's birth with their

age and life conditions and decide about the number of their children consciously. Since in recent years using contraceptive methods among women have increased, considering the quantity of sexual intercourse has got very important (2).

Statistics show that today about 85% of third world countries has family planning programs, and nearly 95% of their

population support the family planning main services. So that only one out of every 3 women uses effectively contraceptive methods (3). By the way, Regional differences can be seen in contraception uses, so that in developing countries, sterilization and IUD method and in developed countries condoms and pills are more used (4).

Selection, acceptance and satisfaction of the various methods of contraception are affected with the impact of such methods on quality of life and quantity of sexual intercourse in women. In addition to concerning the use of contraceptive methods to birth control, unpleasant complications of these methods is one of the important points to use of each of them (5). Studies show that 300 million couples in the world are dissatisfied with the method of contraception. Meanwhile, changing the contraception methods is a reason to stop using such methods (7). Estimated the rate of two-year changes of using contraceptive methods due to their complications was estimated 31% by Grady *et al.*, (7).

Various physical and mental complications of different contraceptive methods are concerned. In fact, disorders of sexual intercourse quantity are created after using variety of contraceptive methods; serious consequences such as depression, anger, the prevalence of drug use and physical and mental imbalance and after sexual disorders are followed by physical problems, isolation, anxiety, fear, emotional instability and duality of feelings will occur which all are effective on the quantity of sexual intercourse as one of the components of providing sexual health (8).

Results of a study on two groups of women in America showed that oral contraceptives was a healthy, effective, and reversible

method. At the same time, a group of women reported increasing sexual energy and another group reported little changes in their sexual energy during using this method (9). The results of another study indicated that following vasectomy in a spouse, no change in the quantity of sexual intercourse in women was observed but following tubal ligation, the quantity of sexual intercourse was increased in women (10).

In this study, it was attempted to investigate the quantity of sexual intercourse after using different contraceptive methods in women in reproductive age so that women can choose a method of contraception which has the least disturbance in the quantity of their sexual intercourse. Considering the issues mentioned above, this study aimed to investigate the relationship between contraceptive method and quantity of sexual intercourse in women in childbearing age.

Materials and Methods

This was a cross-sectional study in which women referring to the health centers 1 and 8 in the West of Ahvaz city in Iran to use suitable contraceptive methods in 2014 were investigated. Simple random sampling was carried out during 4 months. The volume of the research community was determined 127 people using Cochran formula. Then considering 10% loss, 140 were again determined. For some reasons such as unwillingness and illiteracy, some individuals did not participate. Eventually, 135 people were entered in the study. The research community included all women eligible for the study: married women who were 18-45 years old, living with their husband at the time of the study, willingness to participate in research, literacy. And those persons who had conditions such as menopause, history of infertility, history of chronic medical illnesses, history of

hysterectomy, pregnancy or breast-feeding during the study, drug addiction, drug use affecting sexual intercourse, mental health problems diagnosed in each of the spouses and motor problems, history of surgery during six months before the study, not using two methods of contraception simultaneously were excluded.

The data collection instrument was a self-report researcher-made questionnaire included individual characteristics and types of contraceptive methods and the quantity of their sexual relationship which was developed by studying articles and various books by experts. To determine the scientific validity of the questionnaire, content validity and to determine the reliability of the questionnaire, Cronbach α 0.73 were used. Written informed consent was obtained from all subjects and to provide the confidentiality of information their names were not mentioned in the questionnaire. Statistical analysis was done using SPSS software version 81 and descriptive statistical indexes (mean and standard deviation) and analytic statistical indexes (analysis of variance, chi-square test, Pearson correlation coefficient) were used.

Findings

The average age of women was 33.86 ± 7.48 years (18-45 years old), the average age of spouses 38.91 ± 9.50 years (23-60 years old), the average of length of marriage 11.99 ± 7.37 years (2-32 years), the average of age gap between spouses 5.47 ± 3.36 years (1-19 years old), the average of number of birth 2.41 ± 1.32 (0-6), the average of number of children 2.53 ± 1.40 (0-6). 27.4 percent of conceptive methods was Vasectomies, tubal ligation, interrupting (Natural); 25.2 percent condom; 22.2 percent IUD; 15.6 percent

birth control pill and 9.6 percent was injectable ampules (Table 1).

In using vasectomies, tubal ligation, interrupted and condoms, the quantity of sexual intercourse increases. It means that people are more prepared to have several intercourses in non-hormonal methods. However in using the mechanical methods such as Audi, an almost the same quantity of sexual intercourse was observed which means that the individuals did not have much sensitivity toward the intrauterine device. But in hormonal methods such as pill and ampules, the quantity of sexual intercourse decreases which means that the individuals were less prepared to have several sexual intercourses (Table 2).

Analysis of Variance showed that the average age of women, husband's age, length of marriage, age gap with their husband, number of birth and children were different in three groups of sexual intercourse quantity: less than 4 times, 4 to 8 times and more than 9 times in a month.

The results of statistical Pearson test also showed that there was a reverse relationship between age ($p=0.000$ and $r=0.478$), age of husband ($p=0.000$ and $r=0.536$), length of marriage ($p=0.002$ and $r=0.260$), number of births ($p=0.000$ and $r=0.427$), number of children ($p=0.001$ and $r=0.284$), age gap between spouses ($p=0.000$ and $r=0.299$) with the quantity of sexual intercourse.

These results also indicated that there was a direct relationship between economic status and quantity of sexual intercourse ($p=0.000$ and $r=0.426$). In other words, individuals with better economic status reported higher quantity of sexual intercourse than individuals with low and moderate economic status.

There was a significant relationship between occupation and the quantity of sexual intercourse ($p=0.001$). 44.7 percent of individuals who were employed reported the lowest quantity of sexual intercourse. While housewife women (68.8 percent) had a high quantity of sexual intercourse.

There was also a significant relationship between husband's occupation and the quantity of sexual intercourse ($p=0.044$). 47.9 percent of individuals whose husbands were self-employed reported the lowest quantity of sexual intercourse while those who had government job had 50 percent quantity of sexual intercourse.

A significant relationship between education and quantity of sexual intercourse was also reported ($p=0.000$). 73.5 percent of individuals who were under diploma reported the lowest quantity of sexual intercourse while women with academic education (72.4 percent of them) had a high quantity of sexual intercourse. There was also a significant relationship between husband's education and quantity of sexual intercourse ($p=0.000$). 56.6 percent of individuals who were under diploma reported the lowest quantity of sexual intercourse while men with academic education (71.1 percent of them) had a high quantity of sexual intercourse.

This study was conducted to determine the relationship between different types of contraceptive methods and quantity of sexual intercourse in women who were in productive age. The results showed that the most contraceptive methods used by the subjects of this study were respectively vasectomies, tubal ligation, interrupted and condoms. Halford believes that the most individuals who used vasectomies and tubal ligation had the highest number of sexual intercourse (11). The study of Rahmani *et*

al., (2010) indicated that the highest quantity of sexual intercourse was for users of oral contraceptives and the lowest rate was for users of IUD and no relationship was found between none of the contraceptive methods and quantity of sexual intercourse which was not consistent without study (12). Davis *et al.*, also in a research titled using oral contraceptives and libido showed that in general, some women experienced positive and some other experienced negative effects in the quantity of their sexual intercourses and there were individuals who did not experience any changes in the quantity of their sexual intercourses during using oral contraceptives (12). It is inferred that when women do not use any contraceptive methods they have more pleasure from sexual intercourse and one of its reasons can be because of irresponsibility in using such methods. And, the reason of increasing of using intrauterine devices and permanent methods of birth control can be absence of pregnancy.

In the present study, there was a reversal and significant relationship between age increasing and marriage length with quantity of sexual intercourse. So that people in lower ages and with less length of marriage have higher quantity of sexual intercourse. Addis *et al.*, (2006) in their study concluded that younger women are sexually more active and they have higher quantity of sexual intercourse. Aboo Ali *et al.*, (2009) also confirmed this result (14). It seems that increasing the length of marriage makes sexual intercourse routine and it becomes a usual action.

The findings of the present study also showed that there was a direct relationship between economic status and quantity of sexual intercourse. So that better economic status leads to increasing the quantity of sexual intercourse in women. Because the

most individuals had good economic status, they showed higher sexual intercourses. Barrientos *et al.*, (2006) found out that better economic social status was related to quantity of sexual intercourse in women not in men (15). It seems that families with good economic status are less involved in mental problems and in terms of sexual intercourse they are fresher and more satisfied.

The findings also showed that there was a reversal relationship between number of births and children and quantity of sexual intercourse. So that increasing the number of children and births decreases the quantity of sexual intercourse. Rahmani *et al.*, (2010) in their study proved that the quantity of sexual intercourse in individuals who had two

children was more than those who had three or more (12). This study was not consistent with the study of Witting and colleagues (2008) (16). It seems that as women have more children, they more spend time for them therefore they can spend less time for themselves and their husband, thus the number of their sexual intercourses decreases. In this regard, the study of Broumandfar (2010) showed that the number of sexual intercourses is less than those who had experienced more than one birth (17). It means that increasing the number of births leads to less quantity of sexual intercourses. Also, by increasing the number of births, changes are created in the genital systems which lead to more restorative surgeries that can be effective.

Table.1 Description of Some Demographic Characteristics of the Research Units

Variables		Number (percent)
Education level in women	under diploma	49 (36.3)
	diploma	28 (20.7)
	academic	58 (43)
Education level in men	under diploma	53 (39.3)
	diploma	44 (32.6)
	academic	38 (28.1)
occupation status in women	housewife	118 (4.87)
	employed	17 (12.6)
occupation status in men	self-employed	82 (60.7)
	clerk	53 (39.3)
Economic status	weak	28 (20.7)
	moderate	42 (31.1)
	good	65 (48.1)
Quantity of sexual intercourse in each month	standard deviation ± variance	6.53±3.57

Table.2 Distribution of Frequency and Percentage of Quantity of Sexual Intercourse in Women in Terms of Contraceptive Method

Number of sexual intercourse Contraceptive method	Less than 4 times Number (percent)	5 to 8 times Number (percent)	More than 9 times Number (percent)	Total Number (percent)
Birth control pill	18 (34.6)	1 (3.6)	2 (3.6)	21 (15.6)
Ampoule	10 (19.2)	2 (7.1)	1 (1.8)	13 (6.9)
IUD	12 (23.1)	8 (28.6)	10 (18.2)	30 (22.2)
Condoms	9 (17.3)	10 (35.7)	15 (27.3)	34 (25.2)
(Naturally, vasectomy, tubal ligation)	3 (8.50)	7 (25)	27 (49.1)	37 (27.4)
Total	52 (100)	28 (100)	55 (100)	135 (100)

P=0.000, $\chi^2=50.311$

According to findings, there was a reversal relationship between gap age between spouses and the quantity of sexual intercourse. So that increasing the gap age decreased the quantity of sexual intercourse. Arno according to Bernard writes: the highest quantity of sexual intercourse is for women who have married a man who is 5-6 years older than them. This finding was inconsistent with the study of Harold et al (2003) (12). It seems that this issue can be defined within each culture and it may change according to special social criteria and custom of each nation.

The other finding of this study proved that there was also a significant relationship between education of women and also education of their husband with the quantity of sexual intercourse. Barrientos *et al.*, (2006) pointed out that there was a relationship between education and occupation and income that this relationship affected the quantity of sexual intercourse (15).

Bani Jamal *et al.*, (2005) and Ghadiri *et al.*, (2007) also confirmed this issue (18). It looks that higher education helps people to have a better understanding and higher knowledge of the manner of correct sexual intercourse.

The other finding of this study was a significant relationship between the individual's and husband's occupation and the quantity of sexual intercourse. Oginz *et al.*, (2004) in their study found out that more income leads to less number of sexual intercourses (19). The results of the study of Jian Jun et al (2004) were inconsistent with our study (20). The reason of such result was interpreted by them in this way that this decrease may be due to fatigue resulted from much work which can be followed with less number of intercourses.

The results showed that, non-hormonal methods such as vasectomy, tubal ligation, interrupted and condoms, in which women have no involvement and responsibility for their birth control and no side effects and disadvantages caused by hormone consuming are also followed, due to relaxation and confidence, were known as the most acceptable with the least complications effective methods on the quantity of sexual intercourse among Iranian women. Therefore, given this issue that disorder in the quantity of sexual intercourse in contraceptive methods users is considered as a big problem, the results of the present study can increase the knowledge and awareness of health care workers in countries to identify the related problems;

because a desirable sexual intercourse is a factor to promote family health and community health. Finally, as the limitations of this research these issues can be mentioned that due to this fact that this is a cross-sectional study and also because of the lack of causal relationship, short period of time and small sample volume, the results mentioned above cannot be generalized. Furthermore, it is suggested that in next researches this issue be considered.

Acknowledgment

All rights are reserved and belonged to research deputy of Arvand Medical Sciences University in Abadan which funded the project. And also dear teachers and subjects, colleagues and health centers are appreciated.

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How to cite this article:

Firoozeh Tadayon Nejad, Poorandokht Afshari and Mitra Tadayon. 2016. Investigating the Relationship between Contraceptive Method and the Quantity of Sexual Intercourse in Reproductive Aged Women. *Int.J.Curr.Res.Aca.Rev.* 2016.4(2): 1-8
doi: <http://dx.doi.org/10.20546/ijcrar.2016.402.001>