

**Effect of spousal communication on use of contraceptives among rural women of
Bangladesh**

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Extended Abstract

Context: The International Conference on Population and Development, 1994 (ICPD-94) emphasized on a broader context of reproductive health with a centrality on family planning and on the empowerment of couples in deciding their own reproductive health issues in a free but responsive manner. Empowerment of couples on the issues of desired family size and /or number of children can only be generated through effective interaction and communication with each other. But in a developing country limited communication between spouses set barriers towards a better understanding of the couples themselves and in making a responsible decision towards achieving the desired family size. Since ICPD-94, there has been increasing interest directed towards spousal communication and reproductive health. In recent time, a number of studies, mostly in Africa, and a few in South Asia have emerged with some useful insights into the dynamics of spousal communication and its role on achieving the desired number of children through use of contraceptives. However, studies incorporating spousal communication and its impact on contraceptive use are rather scant in Bangladesh.

Objectives: Present study using a longitudinal data from Matlab, examined three forms of spousal communication and its association with the achievement of desired family size through effective use of contraceptives. In addition, study also examines how the level of spousal communication is changing overtime and its changing effect on women's use of contraceptives. While empowering spouses is undoubtedly important for using contraceptives, in a traditional society, it is unclear yet what type of communication is more crucial for taking a responsible decision in the selection of appropriate technologies.

Data and Methods: The above questions will be addressed in this article, using longitudinal data for the period of 1984-1994 from Matlab, a rural area of Bangladesh where contraceptive prevalence is very high considering its socio-economic development and cultural environment. The study comprises about 6600 married women of reproductive age from Matlab, a research site of the International Centre for Diarrhoeal

Disease Research, Bangladesh (ICDDR,B) that has maintained a Maternal Child Health and Family Planning (MCH-FP) programme since 1977. Three forms of communication have been used in the analysis: i) discussion between spouses on fertility control measures, ii) number of children wanted and iii) approval of family planning programme. Multivariate analysis was undertaken, using “Current Contraceptive use” as the dependent variable, with above mentioned forms of communication between partners forming the explanatory variables. The analysis controlled for a wide range of socio-economic and demographic factors. In the analysis, 1984 and 1994 data were specially designed to examine whether the impact of three forms of communication on contraceptive use has changed during the study period. In the regression analysis, two best fit models: one main effect and one interaction model were selected from a series of models to identify the change that has occurred in the effect of spousal communication on current use of contraceptives of women during the study period. Finally, a decomposition of the regression coefficients was calculated to separate the effect of each of the communication variables on women’s contraceptive use.

Results: Results of the analysis reveals that communication between spouses in the 1980s was not very high in this area. But the use of contraceptives was very high among women who discussed fertility control measures with their spouses. During the 10 years study period, substantial increase in communication between spouses in all three aspects was evident.

The results of the multivariate analysis presented in the table demonstrated that all three-communication factors appeared to have had significant relationships with current contraceptive use of women. The logit coefficient of not discussing fertility control measures is -0.949 producing an odds ratio of 0.387 . This figure indicates that the current use of contraceptives is 2.6 times higher among women who discussed family planning matters with their husband compared to those who did not discussed matters with their spouses. The relationship is stronger between current contraceptives use and communication between spouses on family planning approval. The logit of the variable is -1.259 , which yields an odds ratio of 0.284 meaning that the current use of

contraceptives is more than three times higher among women whose husband approved of the family planning programme. The last spousal communication factors, that is, communication on desired number of children with husband also showed a significant relationship with current contraceptive use. The logit of currently using contraceptives is -0.56 yielding an odds ratio of 0.57 among women who thought their husband wanted more children or that they did not know their husbands' expected number of children.

In terms of the changing effect of spousal communication over the 10 years study period, results show that a quiet change has taken place. Decomposition of the regression coefficients demonstrates that three spousal communication factors explained 29 percent of the total logit change in the main effect model. During the study period, the effect of two of the three spousal communication has significantly changed and this change explained 52 percent of the total logit change in the interaction model.

Thus, the results of the multivariate analysis demonstrated two major findings. Firstly, in 1984, the attitude of the husband towards family planning was less favourable and fewer women discussed desired number of children with their spouses. However, contraceptive prevalence was significantly higher among wives who discussed family planning matters with their husband. Coefficient of this variable is the largest. Secondly, within the last 10 years, women reported to have higher support of their spouses towards family planning and greater agreement on the number of desired children with a concomitant increase in contraceptive prevalence among all women irrespective of whether they discussed family planning with their husband or not. In other words, results suggest that increases in three forms of communication between spouses' empowered women in independent decision on family building and family formation strategies.

Policy implication: Findings from the study again supports the ICPD-94 resolution of increasing effective communication between spouses. Moreover, it has policy implication in the context of recent global outbreak of HIV/AIDS. Though Bangladesh has been considered as one of the low HIV/AIDS prevalence country, several latest studies have documented an epidemic of AIDS infection among the high risk groups and indicated the

possibility of rapid spread across the overall population as has been observed in other African and Asian countries. In this context, increasing communication between spouses in this society can act as a positive force to encounter the spread of diseases or to face the danger by sharing knowledge, care and responsibilities.

Table 1: Logistic regression coefficients of current contraceptive use of two preferred models , both areas of Matlab, 1984-1994

Variables	Main effect model		Interaction model	
	Co-efficient	Odds ratio	Co-efficient	Odds ratio
Constant	0.28	1.32	0.761***	2.141
Year of Survey				
1984	--		--	
1994	1.029***	2.798	-0.340	0.712
Area of intervention				
MCH-FP	--		--	
Control	-0.715***	0.489	-0.708***	0.493
Employment. women				
Paid employment	0.289**	1.334	0.314**	1.369
Housework	--			
Occupation, husband				
Farming	--		--	
Skilled and unskilled labour	-0.253***	0.776	-0.248***	0.780
Professional and Business	-0.119	0.888	-0.130	0.878
Fishermen	-0.465***	0.628	-0.496***	0.609
Education, women				
No education	--		--	
1-5 yrs	-0.084	0.919	-0.068	0.934
6 or more years	-0.037	0.964	0.032	1.033
Education, household head				
No education	--		--	
1-5 yrs	0.073	1.076	0.064	1.066
6-9 yrs	0.123	1.131	0.103	1.108
10 or more years	0.464***	1.590	0.388***	1.474
Religion				
Islam	--		--	
Hindus	0.376***	1.457	0.387***	1.472
Sex composition, children				
One son & one daughter	--		--	
1-2 son only	-0.410***	0.664	-0.408***	0.665
1-2 daughter only	-0.684***	0.505	-0.667***	0.513
Children >2 but son=>daughter	0.314**	1.369	0.296**	1.344
Children >2 but daughter>son	-0.091	0.913	-0.101	0.904
No living children	-2.125***	0.119	-1.925***	0.146
Age, women				
<20	--		--	
20-24	-0.228	0.796	-0.555**	0.574
25-29	-0.057	0.945	-0.452*	0.636
30-39	0.330*	1.391	-0.130	0.878
40-49	0.319*	1.376	-0.212	0.809

Variables	Main effect model		Interaction model	
	Co-efficient	Odds ratio	Co-efficient	Odds ratio
Discussion of family planning between spouses				
Yes	--		--	
No	-0.949***	0.387	-1.804***	0.165
Women perception of husband approval of family planning				
Approved	--		--	
Disapproved	-1.259***	0.284	-1.470***	0.230
Women perception of agreed number of expected children with husband				
Same or less	--		--	
More or unknown	-0.56***	0.570	-0.591***	0.554
Sources of contraceptives known				
Less than three	-0.62***	0.540	-0.547***	0.579
Three sources	-0.16*	0.856	-0.169**	0.845
More than three	--		--	
CHW and FWA visit				
In month	0.514***	1.672	0.299***	1.348
Once in six months	0.422***	1.526	0.058	1.060
More than 6 months/never	--		--	
Interaction				
Year X women age				
Year X 20-24			0.356	1.427
Year X 25-29			0.517*	1.677
Year X 30-39			0.678**	1.970
Year X 40-49			0.984***	2.676
Discussion of family planning between spouses				
Yes				
No			1.438***	4.214
Women's perception of husband's approval of family planning				
Approved				
Disapproved			0.439***	1.551
Year X FPW visit				
Year X In month			0.655***	1.926
Year X once in six months			0.785***	2.191

*** p<01, **p<05, *p<10; -- Reference categories