

7 CHAPTER

ATTITUDES AND OPINIONS TOWARD CONTRACEPTION AND ABORTION

The countries of Eastern Europe and the former Soviet Union have experienced a sharp decline in fertility while abortion, although declining in some countries, has remained an important method of fertility control. This region's isolation from the West prevented both women and health providers from becoming aware of developments in modern contraception. The lack of awareness and availability of quality contraceptives reinforced dependence upon abortion to limit family size (Remenick L, 1991; Popov A, 1996).

The RHS measured women's perceptions of the advantages and disadvantages of contraceptive pill use in the Czech Republic, Moldova, Romania, Ukraine, Azerbaijan, Georgia, and selected areas of Russia. (The sub-national survey in Russia was conducted in three primarily urban sites in central Russia.) Assorted subsets of the RHS measured women's desire for more information about contraception, perceptions of the advantages and disadvantages of using an IUD, perceptions of the health risk associated with contraceptive use and abortion, whether they believe abortion is a woman's personal decision and under which circumstances abortion was acceptable, discussion of contraception with their spouses, and their husband's attitudes toward family planning. Not all questions were asked in all countries. The DHS measured women's perceptions of their partners' attitudes and the percentage of women in union who had discussed contraception with their partner.

7.1 Desire for More Information about Contraception

In this area of the world, where information about contraception has not always been available and may still be difficult to obtain, it is important to know whether women feel they

need more information and which segments of the population have the greatest need. The RHS surveys in Moldova, Romania, Azerbaijan, and Georgia addressed this issue with the question, “Do you want to have more information about contraceptive methods?”

More than 70% of all women responded that they wanted more information about contraception in every country but Georgia,

where just over half expressed a desire for more contraceptive information (Table 7.1). Desire for family planning information was evenly distributed between urban and rural areas, with some greater interest among urban women in Georgia. In general, the need for information was higher among younger women. In all of the countries, both never-married and currently married women reported a greater need for information than previously

Table 7.1				
Percent Who Desire More Information About Contraception by Selected Characteristics				
Among Women Aged 15–44				
Eastern Europe and Eurasia: A Comparative Report				
Characteristic	Eastern Europe		Caucasus	
	Moldova, 1997	Romania, 1999	Azerbaijan, 2001	Georgia, 1999
Total	75	72	73	53
Residence				
<i>Urban</i>	73	72	74	57
<i>Rural</i>	77	73	72	48
Age Group				
15–19	94	88	70	57
20–24	91	89	86	68
25–29	83	79	83	64
30–34	72	74	78	55
35–39	61	57	69	43
40–44	42	39	51	27
Marital Status				
<i>Currently Married</i>	71	67	77	53
<i>Previously Married</i>	55	57	48	33
<i>Never Married</i>	92	88	71	57
Number of Living Children				
0	86	84	71	56
1	75	74	78	60
2	68	62	76	51
3+	62	50	72	41
Education Level				
<i>Secondary Incomplete</i>	77	67	70	43
<i>Secondary Complete</i>	73	76	73	53
<i>Technicum</i>	74	*	76	52
<i>University</i>	77	81	76	61
Current Method Used[†]				
<i>IUD</i>	72	69	82	57
<i>Condom</i>	82	88	88	73
<i>Pill</i>	73	86	88	71
<i>Traditional</i>	75	69	82	59
<i>None</i>	78	70	69	51
No. of Cases	5,412	6,888	7,668	7,798

† Excludes a small percentage of women who were using other modern methods.

married women, but in Moldova (92%) and Romania (88%) the need was greatest among never-married women.

In all countries except Azerbaijan interest in information about contraception increased with the number of living children. Among current users of contraception, those with IUDs in Moldova, Romania, and Georgia were less interested in more contraceptive information. In Moldova, condom users and respondents who were using no method were the most interested in learning more about contraception, while in Romania and Georgia condom and pill users were the most interested. In Azerbaijan, interest was very high (82% to 88%) except among those not using any method (69%).

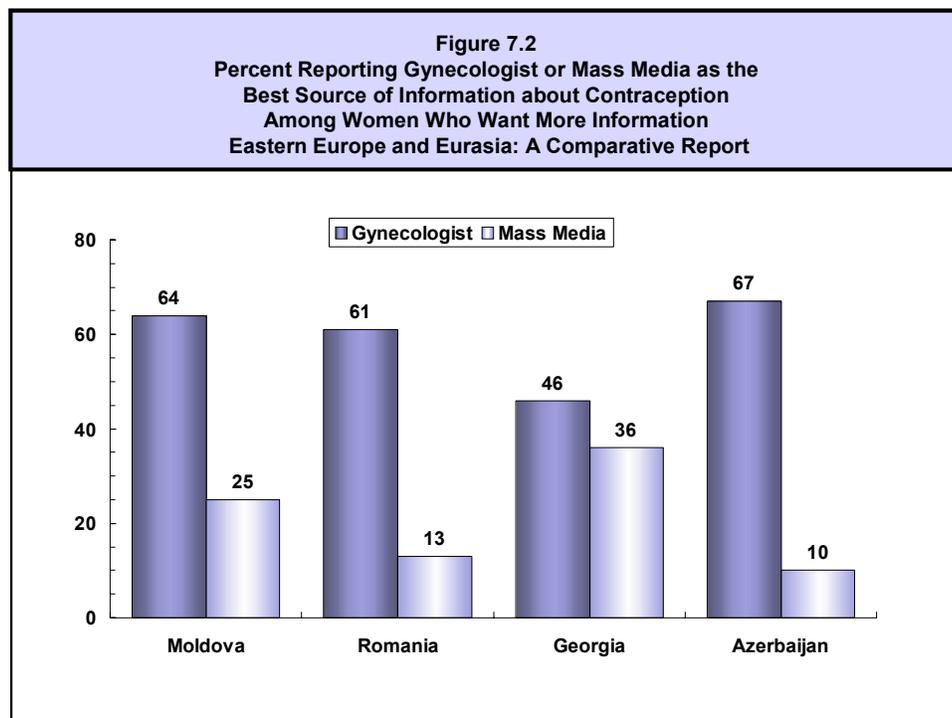
7.2 Opinion on the Best Source of Information About Contraception

In the countries where women were asked about their interest in receiving more information about contraception, those women

who answered “yes” were then asked their opinion on the “best source of information about contraceptive methods.” As shown in Figure 7.2, in all four countries, gynecologists were identified as the best source of information, followed by mass media. Women in Moldova, Romania, and Azerbaijan overwhelmingly preferred to receive information on contraception from gynecologists (64%, 61%, and 67%). Georgian women were more evenly split with 46% preferring to learn about contraception from a gynecologist and 36% preferring to hear about it through the mass media.

7.3 Opinions Regarding the Advantages and Disadvantages of the Pill and IUD

The RHS surveys in the Czech Republic, Moldova, Romania, Russia, Ukraine, Azerbaijan, and Georgia included statements of perceived advantages and disadvantages to using oral contraceptives. In four countries (Moldova, Romania, Azerbaijan, and Georgia)



similar statements appropriate to IUD use were included. Respondents who had heard of the pill and IUD were asked if they agreed with these statements (Table 7.3). The exact makeup of the statements varied among the questionnaires, as not every statement was included in every survey.

Women in the Czech Republic (53%), Romania (47%) and the surveyed areas of Russia (47%) were more likely than women in the other four countries to agree that the pill makes menstrual periods more regular. Women in Georgia were the least likely to agree with this statement (17%). Romanian women were more likely than women in the other countries to agree with positive statements that pills are easy to use (79%), easy to get (80%), and allow for spontaneity of intercourse (51%). Less than one third of women surveyed in any country were aware that pills protect against some gynecological cancers (8% to 27%), decrease blood loss during menstruation (11% to 30%), and decrease menstrual cramps and pain (10% to 29%). Georgian women were least aware of all of these advantages of contraceptive pills.

When asked if they agreed that pills cause weight gain, Russian women (67%) were most likely to agree, Georgian (31%), and Azeri (32%) women were least likely to agree. Russian (29%) and Ukrainian (35%) women were more likely to believe that prolonged pill use can cause infertility than women of the Czech Republic (16%). Belief that oral contraceptives can cause cancer was nearly equal among Russian, Czech and Ukrainian women (24% to 28%). Very few Georgian (10%) and Romanian (11%) women agreed that the pill is bad for blood circulation, but agreement was twice as high among women in Azerbaijan, Czech Republic, the Russian areas surveyed, and Ukraine (20% to 26%). About one quarter of women surveyed in the mostly urban Russian sites, in the Czech

Republic, and in Ukraine felt that the pill increases a woman's chance of getting cancer. Nearly half of the women in Moldova agreed that pills are too expensive, while approximately one woman in seven agreed with that statement in Georgia. About two out of every five women in Azerbaijan, Moldova, and Georgia felt that it was stressful to remember to take the pill every day, while fewer than one in three said so in Romania.

In general, agreement with the advantages of pill use was greater than agreement with the disadvantages. Georgian women showed less awareness of the advantages of pill use than the women in other countries, although more than half felt that pills are easy to get and use. Romanian women appeared to be more enthusiastic about the pill than the women of Moldova, Azerbaijan, and Georgia. Because Russia, Ukraine, and Czech Republic had fewer statements of advantages of pill use to compare, less can be inferred about the opinions of women in these countries.

The advantages of IUD use, asked about in Romania, Azerbaijan, and Georgia surveys, are that it is relatively inexpensive, easy to use, and decreases the risk of ectopic pregnancy. The Moldovan questionnaire included only the statement regarding expense. Again, these respondents were limited to those women who had heard of the IUD. Nearly three quarters of women in Moldova agreed that the IUD is inexpensive, while agreement in the other surveyed countries was much less (34% to 43%). Agreement that the IUD is easy to use was about a third in Azerbaijan and somewhat higher in Georgia (44%) and Romania (46%). Knowledge that the IUD decreases the risk of ectopic pregnancy was highest in Azerbaijan (33%) and lowest in Georgia (13%).

The disadvantages of IUD use asked about in the questionnaires included increased

Table 7.3 Percent Who Agree With Selected Statements Concerning Advantages and Disadvantages of the Pill and IUD Among Women Aged 15–44 Who Have Heard of the Pill or IUD Eastern Europe and Eurasia: A Comparative Report									
	Pill						IUD		
	Eastern Europe			Caucasus			Caucasus Region		
<u>Advantages</u>	Czech Rep. 1993	Moldova 1997	Romania 1999	Russia 1999*	Ukraine 1999	Azerbaijan 2001	Georgia 1999	Azerbaijan 2001	Georgia 1999
<i>The Pill Makes Periods More Regular.</i>	53	30	47	47	34	29	17		
<i>Pills Are Easy To Use.</i>	†	52	79	†	†	53	56		
<i>Pills Are Easy To Get.</i>	†	48	80	†	†	55	55		
<i>Pills Allow Spontaneity of Sexual Intercourse.</i>	†	36	51	†	†	†	45		
<i>Pills Protect Against Some Gynecological Cancers.</i>	†	27	26	†	†	20	8		
<i>Pills Decrease Blood Loss During Menstruation.</i>	†	30	28	†	†	23	11		
<i>Pills Decrease Menstrual Cramps And Pain.</i>	†	29	27	†	†	26	10		
<u>Disadvantages</u>									
<i>The Pill Makes You Gain Weight.</i>	42	†	54	67	48	32	31		
<i>Taking the Pill For Too Long Can Cause Infertility.</i>	16	†	†	29	35	†	†		
<i>Women Who Take the Pill Have a Higher Risk of Getting Cancer.</i>	25	†	†	24	28	†	†		
<i>The Pill Is Bad For Blood Circulation.</i>	21	†	11	23	26	20	10		
<i>Pills Are Too Expensive.</i>	†	48	21	†	†	26	14		
<i>It Is Stressful To Remember To Take the Pill Every Day.</i>	†	41	29	†	†	45	40		
<u>No. of Cases</u>	4,497	5,412	6,319	6,004	7,128	4,263	5,470		
<u>Advantages</u>	Eastern Europe			Caucasus Region					
	Moldova 1997	Romania 1999		Azerbaijan 2001	Georgia 1999				
<i>The IUD Is A Relatively Inexpensive Method To Use.</i>	72	37		34	43				
<i>IUD Is Easy to Use.</i>	†	46		35	44				
<i>IUD Decreases the Risk of Ectopic Pregnancy.</i>	†	23		33	13				
<u>Disadvantages</u>									
<i>The Use of IUD Can Cause Spotting Between Periods.</i>	†	34		47	28				
<i>The Use of IUD Increases Menstrual Pain.</i>	64	24		48	20				
<i>IUD Increases the Risk of Pelvic Inflammatory Disease.</i>	†	41		50	39				
<i>IUD Increases the Loss of Blood During Menses.</i>	53	28		50	27				
<u>No. of Cases</u>	5,412	6,340		6,688	7,395				

* Data for Russia pertain to three primarily urban areas as described in Chapter 2.

† Statement was not included in the questionnaire.

menstrual pain, increased menstrual flow, spotting between periods, and increased risk of pelvic inflammatory disease (PID). The last two statements were not part of the Moldovan questionnaire. Half of Moldovan woman agreed that the IUD increases blood loss during menses and nearly two thirds agreed that IUD increases menstrual pain. Approximately half of the women in Azerbaijan who had heard of the IUD agreed with all statements concerning disadvantages (47% to 50%). Agreement with disadvantages of the IUD was less for women in Romania and Georgia.

7.4 Opinions on Risks to Women's Health Due to Contraceptive Use

The RHS asked women in Moldova, Romania, the surveyed areas of Russia, Ukraine, Azerbaijan, and Georgia to rate selected methods of contraception with regard to their risk of health problems. Table 7.4 shows the percentage of women who rated the pill, IUD, condoms, tubal ligation and injectables as having a high risk of health problems for users,

and the percentage of those who either did not know or who had never heard of the method in question. A considerable proportion of women who are shown in the "Don't Know" column had never heard of the method.

The perception of risk associated with oral contraceptives is much higher in Ukraine (29%) than it is in the other countries (10% to 17%). The IUD is rated as a health risk by more women in Moldova (22%) and Ukraine (23%). Less than 9% of women in any of these countries feel there is a health risk with using condoms. One out of three women in Moldova, Russia, and Ukraine think that tubal ligation has a high risk of health problems. The perception of risk associated with injectables is highest in Ukraine (30%) and lowest in Romania (1%), where 84% of women do not know enough to rate risk of this method.

Of the countries of Eastern Europe, Romania had the largest percentage of women who were unable to rate the health risks of every method of contraception, indicating that women in Romania are the least knowledgeable about

Region and Country	Method										No. of Cases
	Pill		IUD		Condom		Tubal Ligation		Injectables		
	High Risk	Don't Know	High Risk	Don't Know	High Risk	Don't Know	High Risk	Don't Know	High Risk	Don't Know	
Eastern Europe											
Moldova, 1997	17	30	22	8	2	12	33	30	11	66	5,412
Romania, 1999	13	27	11	34	2	21	5	53	1	84	6,888
Russia, 1999†	17	12	15	11	3	6	32	33	20	47	6,004
Ukraine, 1999	29	18	23	16	8	12	35	40	30	43	7,128
Caucasus											
Azerbaijan, 2001	12	63	19	40	2	67	12	76	‡	‡	7,668
Georgia, 1999	10	47	10	25	1	32	U	U	U	U	7,798

* The majority of women in the "Don't Know" category have never heard of the method.

† Data for Russia pertain to three primarily urban areas as described in Chapter 2.

‡ The questionnaire for Azerbaijan did not include a question about the health risks of injectables.

U = Unavailable.

the health implications of contraceptive methods. The women of Ukraine have the highest rates of perception of risk for every method of contraception listed. Compared to Eastern Europe, the countries of the Caucasus have higher percentages of women who do not know whether contraceptive methods have health risks. The highest percentages of “Don’t Know” for every method occur in Azerbaijan.

7.5 Opinions About Abortion

In the Czech Republic, Moldova, Romania, Russia, Azerbaijan, and Georgia the RHS surveys questioned women about whether they believe that a woman always has the right

to make decisions about her pregnancy, including whether to have an abortion. The inclusion of questions about opinions of abortion was based on the fact that the abortion rate in these countries is high, despite the development of family planning programs and the efforts of non-governmental organizations to educate women on the use of contraceptive methods. Agreement that women have a right to make choices about abortion is greater than 75% in almost every country where this question was asked (Table 7.5.1).

Overall agreement was greatest in Czech Republic (85%) and lowest in Russia (72%).

Characteristic	Eastern Europe				Caucasus	
	Czech Rep. 1993	Moldova 1997	Romania 1999	Russia 1996†	Azerbaijan 2001	Georgia 1999
Total	85	81	78	72	80	79
Residence						
Urban	86	82	79	†	80	80
Rural	84	79	76	†	80	79
Age Group						
15–19	83	78	74	72	73	69
20–24	84	81	79	73	80	79
25–29	87	81	77	71	81	80
30–34	88	80	80	71	83	82
35–39	85	84	80	72	84	85
40–44	86	81	78	73	81	82
Marital Status						
Currently Married	86	81	78	71	82	83
Previously Married	88	85	78	73	80	86
Never Married	83	79	77	75	76	71
Education Level						
Secondary Incomplete	82	79	78	71	79	70
Secondary Complete	89	83	76	70	80	81
Technicum	‡	80	‡	71	81	85
University	91	79	81	76	81	78
No. of cases	4,497	5,412	6,888	5,997	7,668	7,798

* Do you think that (in any situation) a woman always has (or should have) the right to decide about her (own) pregnancy, including whether to have an abortion?

† Data for Russia pertain to three primarily urban areas as described in Chapter 2.

‡ Technicum, specific to former Soviet Union countries, does not exist in the Czech Republic or Romania.

Within most countries there were no significant differences between urban and rural women, between age groups, or according to marital status, level of education, or number of living children. In Georgia, acceptance of abortion under any circumstance had the greatest variation, with lowest percentages among women 15-19 (69%), never married women (71%), and those with less than complete secondary education (70%), three variables that are highly correlated. The pattern was similar but less pronounced in Azerbaijan.

With the exception of the Russian RHS, the minority of women who did not agree that abortion is always a woman's personal decision were asked if abortion would be acceptable under selected circumstances, including danger to the mother's life, deformity of the fetus, danger to the mother's health, pregnancy resulting from rape, inability to support the child financially, and pregnancy outside of marriage. Many of the circumstances have high rates of acceptance (Table 7.5.2).

In the Czech Republic, Azerbaijan, and Georgia the circumstance with the highest rate of acceptance of abortion was when the

pregnancy endangered the mother's life. In Romania and Georgia, acceptance of abortion was nearly equal for danger to the mother's life and fetal malformation. In Moldova, fetal malformation generated the highest rate of abortion acceptance. Across all countries except Azerbaijan, a pregnancy outside of marriage was least likely to be considered an acceptable reason for abortion.

In each country, different levels of acceptance of abortion were apparent for groups of circumstances. While the groupings varied somewhat between countries, generally, danger to the woman was the most acceptable circumstance. With the exception of the Czech Republic, fetal malformation was nearly as acceptable a reason or more so. The next level of acceptance was when there was danger to a woman's health, although it is only 38% of those who do not agree that a woman always has the right to have an abortion in Moldova. In every country but Georgia, rape was an acceptable reason to at least 40% of women who do not agree that a woman always has the right to decide to abort, and in Azerbaijan economic reasons were acceptable as well, to two-thirds of women. Generally, the situation resulting in the least acceptance for abortion was that of an unmarried woman.

Table 7.5.2
Percent Who Think that Abortion Is Acceptable Under Selected Circumstances
Among Women Aged 15–44 Who Do Not Believe Abortion Is Always Acceptable:
Eastern Europe and Eurasia: A Comparative Report

Circumstance	Eastern Europe			Caucasus	
	Czech Rep. 1993	Moldova 1997	Romania 1999	Azerbaijan 2001	Georgia 1999
<i>If the Pregnancy Endangers Woman's Life</i>	91	71	69	83	80
<i>If the Child Might Be Born Deformed</i>	74	88	70	80	80
<i>If Pregnancy Endangers Woman's Health</i>	72	38	52	70	70
<i>If Pregnancy Resulted from Rape</i>	71	43	42	67	40
<i>If Family Cannot Afford to Support the Child</i>	16	32	29	65	23
<i>If the Woman is Not Married</i>	8	16	23	66	22
No. of Cases	657	1,021	1,562	1,456	1,500

The Czech Republic had the greatest variation in acceptance rates depending on circumstance. While nine out of ten women who disagree that a woman always has the right to an abortion felt that danger to a woman's life was a good reason for an abortion, acceptance fell drastically for financial reasons (16%) and just 8% felt that being unmarried was an appropriate reason for abortion. Women in Azerbaijan exhibited the least variation in acceptance of abortion for any of the listed reasons, with 83% for danger to a woman's life and 65% as the lowest acceptance rate, for inability to support the child.

DHS surveys conducted in Central Asia included a different question: "Do you approve or disapprove of a woman having an abortion?" An analysis of the 1995 and 1999 DHS in Kazakhstan concluded that "as contraception gains in acceptance and prevalence, opposition to abortion as the primary form of birth control is rising" (Agadjanian V, 2002). The same analysis also found differences in approval of abortion across ethnocultural groups in Kazakhstan, with less approval among Kazakhs compared with Europeans.

7.6 Opinions on Risks to Women's Health Due to Abortion

In the RHS of Moldova, Romania, Russia, Ukraine, Azerbaijan, and Georgia, all women were questioned about their perception of the level of risk to a woman's health due to abortion (Table 7.6). Compared to the methods of contraception discussed in Table 7.4.1, few women had either not heard of abortion or did not have an opinion on the risks associated with abortion (5% to 31%). In Eastern Europe, Moldovan women (90%) showed the greatest fear of health problems resulting from abortion, and Romanian women showed the least (65%), although even in that country a clear majority perceived abortion as risky. In the Caucasus, about half of women surveyed saw a high level of risk in abortion.

The dependence on abortion in this region of the world exists despite the fact that anywhere from 50% to 90% of women in these countries feel that abortion presents a high level of risk to a woman's health. The belief of women in these countries that abortion is a risk to a woman's health is a sign that, with greater

Table 7.6 Opinion Regarding the Level of Health Risk Associated with Abortion Among Women Aged 15–44 (Percent Distribution) Eastern Europe and Eurasia: A Comparative Report							
Region and Country	Perception of Risk					Total	No. of Cases
	No Risk	Low Risk	Medium Risk	High Risk	Don't Know		
Eastern Europe							
Moldova, 1997	*	1	4	90	5	100	5,412
Romania, 1999	6	6	12	65	11	100	6,888
Russia, 1999 ^{†‡}	2	2	6	83	8	100	6,004
Ukraine 1999 [§]	2	2	5	84	8	100	7,128
Caucasus							
Azerbaijan, 2001	*	5	13	51	31	100	7,668
Georgia, 1999	1	5	25	50	19	100	7,798

* "No Risk" was not a response option in this question in Moldova and Azerbaijan.

† Data for Russia pertain to three primarily urban areas as described in Chapter 2.

‡ Opinion was measured on a ten-point Likert scale which was converted as follows for the purpose of this report: 10 = No Risk, 7–9 = Low Risk, 4–6 = Medium Risk and 1–3 = High Risk.

§ Opinion was measured on a five-point Likert scale which was converted as follows for the purpose of this report: 5 = No Risk, 4 = Low Risk, 3 = Medium Risk and 1–2 = High Risk.

efforts to disseminate both more information on contraception and more contraceptive supplies, abortion rates can be reduced.

7.7 Discussion of Contraception Between Partners

Reproductive health and family planning programs often target women without including men, which can reduce their effectiveness. The decision to use contraception and which form to use may depend on the husband, especially in countries with Muslim traditions. Because contraceptive use is greater among couples who have discussed family planning, DHS and

RHS surveys, in five and four countries, respectively, asked currently married women if they had discussed contraception with a partner in the last year (Bawah, 2002; Kimuna & Adamchak, 2001).

On the whole, women in Kyrgyz Republic (71%), Turkmenistan (70%), and Uzbekistan (73%) were most likely to have discussed contraception with their husbands in the last twelve months while women in Georgia (33%) were least likely to have done so (Table 7.7). On average, about half of the women in Moldova, Romania, Armenia, Azerbaijan, and Kazakhstan had talked about family planning with their partners.

Table 7.7
Percent Who Discussed Contraception With A Partner in the Last Year
Among Currently Married Women Aged 15–44
Eastern Europe and Eurasia: A Comparative Report

Characteristic	Eastern Europe		Caucasus			Central Asia			
	Moldova 1997	Romania 1999	Armenia 2000	Azerbaijan 2001	Georgia 1999	Kazakhstan 1999	Kyrgyz Rep. 1997	Turkmenistan 2000	Uzbekistan 1996
Total	57	51	47	43	33	53	71	70	73
Residence									
Urban	58	52	50	42	36	56	72	71	76
Rural	55	49	43	45	29	50	71	70	71
Age Group									
15–19	64	66	39	35	18	52	58	42	47
20–24	70	70	53	53	37	67	77	71	63
25–29	61	62	57	54	43	62	79	75	75
30–34	60	53	48	50	38	54	77	74	79
35–39	50	44	45	40	32	54	68	67	80
40–44	44	29	38	25	19	35	55	65	74
Education Level									
Secondary Incomplete	54	45	34	39	22	52	54	59	67
Secondary Complete	53	57	43	43	29	46	71	68	70
Technicum	58	*	48	45	34	56	74	77	77
University	67	61	59	47	40	59	74	81	81
Current Method Used[†]									
IUD	88	54	54	53	39	51	73	77	88
Condom	54	82	64	81	81	80	92	94	90
Pill	90	76	71	57	44	74	99	92	90
Traditional	77	57	51	55	63	63	88	79	91
None	37	32	36	27	15	47	61	56	52
No. of Cases	4,433	4,846	3,566	5,146	5,177	2,567	2,418	4,282	2,804

* Technicum, specific to former Soviet Union countries, does not exist in Romania.

† Excludes a small percentage of women who were using other modern methods.

The percentage of women who had discussed contraception with their partners was distributed fairly evenly between urban and rural areas, with the greatest difference in the in the Caucasus. The rates of women reporting such discussion was lowest at the ends of the age spectrum surveyed, with women aged 15–19 (18% to 66%) and aged 40–44 (19% to 74%) less likely to have talked to their partners about family planning. The younger women may be more likely to want to get pregnant and the older women to believe they can no longer become pregnant. Among young women, family planning discussions were more frequently reported in Moldova (64%) and Romania (66%). Among women aged 40–44, talking about contraception was reported most often by women in Turkmenistan (65%) and Uzbekistan (74%). Women currently not using any method of contraception were the least likely to have discussed it with their husbands in the last year.

7.8 Perception of Husbands' Opinion of Contraception

In DHS and RHS surveys married women were also asked about their husbands' attitudes towards contraception. In RHS this question was answered only if a woman had discussed contraception with her husband in the last year. In DHS it was posed to all married women. Accordingly, the data are presented in two separate tables, as they are not exactly comparable.

The question of husbands' attitude toward contraception was included in the RHS of Moldova, Romania, Azerbaijan, and Georgia. In all four countries a large percentage of women reported that their husband approved of the use of contraceptive methods in general (Table 7.8.1). In Moldova, 95% of women reported that their husband approved of contraception, while the lowest percentage of

Table 7.8.1 Perception of Husbands' Attitudes Toward Contraception Among Currently Married Women Aged 15–44 Who Have Discussed Contraception With a Partner in the Last Year* (Percent Distribution) Eastern Europe and Eurasia: A Comparative Report						
Region and Country	Perception of Husband's Attitude				Total	No. of Cases
	Approves	Disapproves	Neither	Don't Know		
Eastern Europe						
Moldova, 1997 [†]	95	5	‡	§	100	2,275
Romania 1999 [†]	94	5	0	1	100	2,424
Caucasus						
Azerbaijan 2001	86	8	5	0	100	2,334
Georgia 1999 [†]	71	14	13	2	100	1,730

* Asked after the question about discussing contraception with a husband or partner in the last year.

† Generally, does your husband/partner approve or disapprove of the use of contraceptive methods?

‡ "Neither approve nor disapprove" was not an option in Moldova.

§ Less than 0.5%.

|| Generally, does your husband/partner agree or disagree with the use of contraceptive methods?

women reporting so was in Georgia, where nearly three quarters of women said their husbands approved of it. Women in Georgia were nearly twice as likely as those in Azerbaijan and almost three times as likely as those in Moldova or Romania to report that their partners disapproved of contraception. When women do discuss contraception with their husbands, they find that the men do not object in large numbers.

In Armenia, Kazakhstan, Kyrgyz Republic, Turkmenistan, and Uzbekistan, where DHS asked all currently married women their opinion of their husbands' attitude towards contraception, a majority believed that their husbands approved of pregnancy prevention (Table 7.8.2). Women in Kyrgyz Republic (85%) and Turkmenistan (84%) were most likely to believe that their husbands agreed with the use of contraception. The main difference between the RHS and DHS findings was in the area of unknown opinion. The women of Armenia (18%) and Uzbekistan (21%) (DHS respondents) were most likely to respond that they did not know their husbands' opinion, considerably higher than the 1–2% of RHS respondents who didn't know their husbands'

opinion. This difference could be due either to the placement of the question in the questionnaire, or to cultural differences.

7.9 Summary of Findings

Although there have been sub-national studies and qualitative research conducted in Eastern Europe and Eurasia, the RHS and DHS surveys provide the first national level population-based data in this region on attitudes and opinions toward contraception and abortion. As previously stated, since information about contraception has not always been available in this area of the world, the attitudes and opinions of women can be very important in designing information programs and improving the quality of care from health providers. A summary of findings from this chapter is listed below:

- ◆ About three-fourths of women in Moldova, Romania, and Azerbaijan desire more information about contraception; in Georgia, 53% desired more information. In general, a greater proportion of young women, never married women, and women using condoms desired more information,

Table 7.8.2 Perception of Husbands' Attitudes Toward Contraception* Among Currently Married Women Aged 15–44 (Percent Distribution) Eastern Europe and Eurasia: A Comparative Report					
Region and Country	Perception of Husband's Attitude			Total	No. of Cases
	Approves	Disapproves	Don't Know		
Caucasus					
Armenia, 2000	70	12	18	100	3,566
Central Asia					
Kazakhstan, 1999	77	12	11	100	2,567
Kyrgyz Rep., 1997	85	9	6	100	2,418
Turkmenistan, 2000	84	5	12	100	4,282
Uzbekistan, 1996	70	9	21	100	2,804

* "Do you think that your husband/partner approves or disapproves of couples using a method to avoid pregnancy?", asked before the question about discussing family planning shown in Table 7.7.

emphasizing the need for sex education programs and services designed for young adults.

- ◆ In the countries where respondents were asked whether they agree with statements about the pill and IUD, it is obvious that a high level of misconceptions and misinformation are common among women in Eastern Europe and the Caucasus. In three of four countries about one-half of women disagreed with the statement that “pills are easy to obtain”.
- ◆ The Caucasus countries have higher percentages than Eastern Europe of women who do not know whether contraceptive method use is associated with health risks.
- ◆ Most women agree that abortion is a woman’s personal decision (75%–85%). Of the women who do not believe abortion is a personal decision, most agree that

pregnancy termination is acceptable if the woman’s life is endangered (69%–91%) or if the child might be born deformed (70%–88%).

- ◆ In Central Asia, with the exception of Kazakhstan, about 70% of couples had recently discussed contraception. From 51% to 57% of couples had discussed contraception in Romania, Kazakhstan, and Moldova, but in the Caucasus region, only 33% to 47% had such discussions. As women’s education increased, the proportion discussing contraception increased.
- ◆ Although the questions in the RHS and DHS were sequenced differently, 70% or more of married women in all surveys said that their husband approves of contraception. Approval was greater than 90% in Moldova and Romania and ranged between 70% and 86% in the seven countries in the Caucasus and Central Asia.

