Contraception at age 35+: Evidence from the Generations and Gender Survey

Mean age at childbearing in the European countries has been increasing over the past three decades (see Fig.1).



Fig.1 Recent trend in mean age at childbearing in the European countries (cross-national median, 1st and 3rd quartiles)

However, women after 35 years of age still have children very rarely. According to the Generations and Gender Survey held in several European countries in 2004-2006, 80 to 90% of fecund women aged 35-49 who are in a stable union do not want to have any more children (Table 1).

In such a social and demographic context women aged over 35 represent a group at high risk of unplanned pregnancy and, as a consequence, of induced abortion. The use of modern contraceptive methods (IUDs and pills) reduces this risk.

In the proposed paper the authors compare the contraceptive behaviour of women older than 35 years living in five European countries: Bulgaria, France, Georgia, Lithuania and Russia. The investigation is based on the data from the first wave of the Generations and Gender Survey (GGS) held in the above-mentioned countries in 2004-2006. About 5 200 female respondents at age 35-49, physically capable to become pregnant and living with a partner at the moment of the interview were chosen for the statistical analysis of their contraceptive behaviour.

Table 1. Proportions of female respondents aged 35-49 who are in union, physicallyable to have children and want to stop childbearing

	Bulgaria	France	Georgia	Lithuania	Russia
Number of women in union aged 35-49 in the sample *)	1 786	1 244	1 291	1 017	1 533
Proportion of those who are physically able to have children **)	81.1%	80.5%	66.9%	82.3%	67.4%
Among them: do not want to have any more children	93.1%	80.9%	92.6%	91.6%	84.1%

^{*)} in all countries, except of France and Lithuania, the question about physical ability to have children and about fertility intentions was asked to the respondents who had a partner at the moment of the interview

^{**)} those who answered «Probably yes» and «Definitely yes» the question about their physical ability to have children

The main goals of our study were 1) to estimate contraceptive prevalence and unmet need for contraception in the ex-socialist countries of the Eastern Europe (Bulgaria, Georgia, Lithuania and Russia) where the level of induced abortion has historically been very high, and 2) to estimate the differences in the socio-demographic patterns of use of modern contraceptive methods within this group of countries as well as in comparison with the Western Europe (represented by France at this stage of our project).

The results show a significant differentiation between the countries. Contraceptive prevalence, i.e. proportion of users among women aged 35-49 who have a partner varies from about 80% in France and Russia to 65% in Bulgaria and Lithuania; the lowest prevalence is estimated at 45% in Georgia. Besides, respondents from the Eastern Europe, in comparison with France, demonstrate a contraceptive behaviour which is characterized by a lower proportion of users of modern methods and a higher unmet need for contraception (Figures 2 and 3).



Figure 2. Percentage distribution of certain contraceptive methods among all users

In France contraceptive method mix with a very high proportion of pills and IUD radically differs from the four Eastern European countries which form more or less homogenous group in respect of the use of these methods: total proportion of users relying on pills and IUD ranges from 47% in Georgia to 25% in Bulgaria (Fig.2). In France as well as in Lithuania pills prevail over IUD, whereas in Bulgaria, Georgia and Russia women use more often IUD than pills.

In all the five countries unmet need for contraception defined as a proportion of fecund women who are living in a union, want to postpone or stop childbearing and do not use any contraception rises with age (Fig.3). The question is whether non-use of contraceptive method in older ages is a result of a deliberate choice or rather caused by unavailability of methods and services for some economic, social or even moral reasons.

The levels of unmet need in the Eastern European countries vary considerably. Proportion of respondents aged 35-49 with an unmet need for contraception ranges from about 15% in Russia (as in France) to about 25% in Bulgaria and Lithuania, whereas in Georgia over 50% of women aged 35-49 under a risk of unwanted pregnancy do not use any method of birth control.

However, if we used another definition which considers traditional methods of contraception to contribute into unmet need, the levels of unmet need in Bulgaria, Lithuania and Russia would be much higher.



Figure 3. Unmet need for contraception

Part of female respondents used several contraceptive methods in combination. Condom was a method the most often combined with the others (Table 2). The combination of condom with calendar method or withdrawal is probably used by respondents who have not yet chosen any highly effective modern method and use the coitus-related methods depending on situation. The use of condom in combination with the pills rather corresponds to the concept of "dual protection", when condom prevents an unwanted pregnancy and, in a larger extent, the sexually transmitted diseases.

	Bulgaria	France	Georgia	Russia	Lithuania
Average N of methods used	1.17	1.05	-	1.26	1.26
Proportion of respondents using more than one method	14.6%	4.1%	-	18.6%	20.3%
The most common combinations of methods (condom as a base)	Withdrawal Pills Calendar	Pills Withdrawal	-	Calendar Withdrawal Pills	Withdrawal Pills Calendar
N of cases	341	35	-	441	473

Table 2. Combination of several contraceptive methods, females aged 35+

* Georgia is excluded because of a negligible percentage of respondents who reported a combination of several methods

For the analysis of the influence of socio-demographic factors such as educational level, type of partnership, place of residence or parity on the use of modern contraceptive methods, logistic regression was employed.

Despite an obvious distinction in the mix of methods between the countries compared, the differences in socio-demographic patterns of use of modern contraception seem to be less pronounced, and a geographical grouping of countries becomes doubtful (Table 3).

Table 3. Influence of respondents' socio-demographic characteristics on the use
of modern methods (pills + IUD): logistic regression

Independent variables	Bulgaria	France	Georgia	Russia	Lithuania
Type of partnership					
Married (ref.)	1	1	1	1	1
Cohabiting	1.21	1.36**	0.85	0.93	2.08
Live apart together	0.52	1.61***	0.27**	0.73**	-
<u>Parity</u>					
0	0.29**	1.18	0.30*	0.59***	0.75
1 (ref.)	1	1	1	1	1
2	1.09	2.00***	1.49**	1.01	1.46
3+	0.86	1.65***	1.28	1.06	1.47
Place of residence					
Big cities	1	0.88	0.74**	0.74***	0.79
Other urban (ref.)	1	1	1	1	1
Rural	0.92	1.01	0.65***	1.14	0.75
Educational level					
Less than secondary	0.36***	0.57***	0.75	0.82	0.8
Secondary (ref.)	1	1	1	1	1
Higher than secondary	1.34**	1.07	1.18	0.98	0.85
Employment status					
Employed (ref.)		1	1	1	1
Unemployed		0.80**	1.14	0.79**	0.74

*** - $p \le 0.001$; ** - $p \le 0.05$; * - $p \le 0.1$

In Bulgaria, France and Lithuania cohabitation appears to be a factor increasing the probability that a respondent will use a modern contraception, whereas in Georgia and Russia women living in this type of union are more prone to use either traditional methods or condom.

Surprisingly in France, contrary to the Eastern European countries, childless women have a higher propensity to use modern contraceptive methods. Is it a manifestation of the deliberate childlessness or a very strong control of the future birth?

As to educational level, Bulgaria is the only country where education seems to be an important determinant of use of modern contraception. In France women at age over 35 without secondary education most likely belong to some marginal group of population, and this fact may partially explain a significantly lower probability of use of modern contraception by these respondents.

Unexpectedly, in all the five countries residence in the big cities is a factor decreasing the use of modern contraception. In France and especially in Russia rural respondents tend to use modern methods more often than urban residents. The influence of such variables as employment, parity and, in less extent, education is quite ambiguous.

The preliminary results of analysis of contraceptive behaviour at age 35+ show that in the Eastern European countries women at older ages form a high risk group with regard to unwanted pregnancy and abortion. Therefore, the efforts of family planning programs and public health services have to focus more attention on the needs and demands of this group of population. In France the problem of contraception at older ages also exists, even though is not that burning.