

Effectiveness of an Instructional Program on Female Secondary Schools Teachers' Attitudes Concerning Contraceptive Methods at Baghdad City

Khulood D.Y. Mohammed; ; MSc *, Dr.Fatin Abdul Amir Al – Saffar;PhD**

* *phD student, Maternal and Child Health Nursing Department,, College of Nursing, University of Baghdad*

***Assistant Professor, Maternal and Child Health Nursing Department, College of Nursing, University of Baghdad*

Abstract:

Objective: *The study aims to assess the effectiveness of an Instructional Program on Female Secondary Schools Teachers' Attitudes Concerning Contraceptive Methods at Baghdad City.*

Methodology: *A Self-controlled and crossover trials study design, included (100) Female married Secondary Schools Teachers aged between (20-49) years,(25)schools in Al Russafa sector, and (25) in Al Karkh sector, from May 22th , 2014 to September 25th 2015, to assess the effectiveness of an instructional program on female secondary schools teacher's attitudes concerning contraceptive methods .A non-probability (purposive) sample of (100) female married teachers, as two from each school were selected. The questionnaire validity was determined through a panel of experts. The reliability was estimated through a pilot study. The data was analyzed through the application of descriptive and inferential statistics approaches. All the procedures were tested at $p \leq 0.05$.*

Results: *The study reveals that most teachers aged 20-49 years, have 6-10 years of experiences in teaching field, the majority have bachelor degree, and married at (24-28) years old, have (1-3) pregnancy and delivery respectively. History of previous abortion constitute for 24% of teachers, third of these were induced abortion. Regarding teachers' attitudes, the result of this study showed that female teachers had positive attitudes concerning contraceptive methods used and were benefited from the implementation of health instructional program; however, their attitudes, were adequately improved and developed, with respect to the total relative sufficiency (RS) which was changing from (67.0%) in pre- test to (83.3%) in posttest -1, to (85.7%) in post-test 2 respectively.*

Recommendations: *The study recommends that there is a need for continuous health education in the field of family planning which is necessary to promote the positive attitudes toward contraceptive methods used. It is very important to authorship and teaching of family planning subject and contraceptive methods topics in all secondary schools of Iraq for girls and boys students to promote their attitudes toward contraceptive methods used.*

Keyword: *Effectiveness, Instructional Program, Attitude, Contraceptive methods*

I. Introduction:

WHO defined family planning program as" a program that allows individuals and couples to anticipate and attain their desired number of children and the spacing and timing of their births⁽¹⁾. Attitudes towards fertility regulation, access to the means of fertility regulation and communication between husband and wife about desired family size and timing of pregnancy are essential for effective family planning⁽²⁾.

Acceptance of family planning methods varies within and between societies⁽³⁾ and is influenced by a complex interaction among many socio-cultural and demographic factors at the level of individual, family and society⁽⁴⁾. Children are a blessing from God, was the main reason for the refusal of contraceptive use⁽⁵⁾. Religion plays an important role in determining the attitude of the people in limiting the fertility⁽⁶⁾.

Education, on other hand, is the most dynamic and influential tool for inducing a positive attitude among couples towards the methods and measures of family planning^{(4), (7), (8)}.

Knowledge and practice of family planning is strongly related to higher level of education⁽⁹⁾. In most of the studies it was found that education is the prime influencing factor and education affects the attitudinal and behavioral patterns of the individuals⁽¹⁰⁾.

II. Methodology:

The study is conducted at four education directorates in Baghdad City which were chosen randomly, two in Al Russafa sector, and two in Al Karkh sector. The study included (100) married teachers in female secondary schools which were 50 in Al Russafa sector, and 50 in Al Karkh sector which were chosen randomly two, each school nominated two teachers. The study conducted through the period from May 22th , 2014 to September 25th 2015, carried on to assess the effectiveness of an instructional program on female secondary schools teacher's attitude concerning contraceptive methods. A questionnaire format was used for data collection. The validity of questionnaire was estimated through a penal of experts related to the field of study, and its reliability was estimated through a pilot study which included 10 teachers from October 10th 2014 to October 24th 2014.

A questionnaire format was used for data collection which consisted three major parts; the first part is concerned with teachers' socio- demographic characteristics of (age, level of education, years of experience in teaching, Economic level). The second part is concerned with teachers' reproductive characteristics and the third part concerned with teachers' attitudes concerning contraceptive methods, include (31) items.

Reliability of the questionnaire was estimated through the use of Alpha Cronbach for the test-retest approach⁽¹¹⁾. Analysis of data was performed through the application of descriptive statistics (frequency, percentage Cum. Percent, Mean of score (M.S.), Standard Deviation (SD), and Relative Sufficiency (R.S.)) and inferential statistics (Alpha Cronbach, Reliability Coefficient, Chi Square, Z-test and Wilcoxon test). The items of attitude were rated on three levels Likert scale; (I agree, I'm not sure, and I don't agree) in light of scale is scored as (3, 2, and 1) respectively. ⁽¹²⁾. Relative sufficiency (RS) Less than (66.66) was considered low level of attitude, (66.66- 77.77) was considered pass, (77.78-88.88) was considered moderate, while (88.89- 100) was considered high level of attitude.

III. Results of the study:

Table (1): Distribution of Teachers by Their Demographic Characteristics with Comparisons Significant.(N=100).

SDCv.	Group	No.	%	Cum. %	C.S. ^(*) P-value
Age Group	20 - 29	9	9	9	P=0.000 (HS)
	30 - 39	60	60	69	
	40 - 49	31	31	100	
Educational level	Diploma	1	1	1	P=0.000 (HS)
	Bachelor's degree	93	93	94	
	High diploma	1	1	95	
	Master Degree	5	5	100	
	Widow	0	0	100	
	Separate	0	0	100	
	Divorce	0	0	100	
Experience in teaching	1 - 5	8	8	8	P=0.000 (HS)
	6 - 10	48	48	56	
	11 - 15	24	24	80	
	16 - 20	7	7	87	
	21 - 25	12	12	99	
	≥ 26	1	1	100	
Socio-economic level	High	8	8	8	P=0.000 (HS)
	Middle	66	66	74	
	Low	26	26	100	

(*)HS: Highly Sig. at P<0.01; Sig. at <0.05 NS: Non Sig. at P>0.05; Testing based on One-Sample Chi-Square test

Table (1) shows that 60% of the study sample are between (30 – 39) years old, while (31 %) were between (40 – 49) years old. Regarding to the level of education, the vast majority (93%) are Bachelor degree, while only (5%) of them were master degree. Furthermore, this table shows that (48%) of teachers in sample study had (6 – 10) years of experience in teaching.

Concerning economic level, (66%) of them are (moderate) level while (poor) level constitute (26%) of the study sample.

Table (2) Distribution of Teachers by Information of Pregnancy & Childbirth variables with Comparisons Significant. (N=100).

Information of Pregnancy&childbirth	Group	No.	%	Cum. %	C.S. (*) P-value
Age at Marriage	19 – 23	34	34	34	P=0.000 HS
	24 - 28	45	45	79	
	29 - 33	12	12	91	
	34 - 38	9	9	100	
Age at first Pregnancy	19 - 23	25	25	25	P=0.000 HS
	24 - 28	49	49	74	
	30 - 34	15	15	89	
	≥ 35	11	11	100	
Number of Pregnancy	1 - 3	53	53	53	P=0.000 HS
	4 - 6	33	33	86	
	7 - 9	14	14	100	
Duration between the present and last Pregnancy/years	<1	41	41	41	P=0.000 HS
	1 - 2	40	40	81	
	3 - 4	10	10	91	
	≥ 5	9	9	100	
Number of Birth	1 - 3	85	85	85	P=0.000 HS
	4 - 6	15	15	100	
Type of delivery	N.D.	44	44	44	P=0.000 (HS)
	C.S.	48	48	92	
	Both	8	8	100	
Number of Dead births	No	88	88	88	P=0.000 HS
	Yes	12	12	100	
Number of living Children	1 - 3	1	1	1	P=0.000 HS
	4 - 6	86	86	87	
	7 - 9	13	13	100	
Number of Abortion	No Applicable	76	75	75	P=0.000 HS
	One time	20	83.3	83.3	
	≥ 2 times	4	16.7	100	
Type of Abortion	Non Applicable	76	76	76	P=0.000 (HS)
	Spontaneous	16	66.7	66.7	
	Induce	8	33.3	100	
Would you like to become pregnant again?	Yes	68	68	68	P=0.000 HS
	No	32	32	100	

(*)HS: Highly Sig. at P<0.01; Testing based on One-Sample Chi-Square and Binomial tests.

Table (2) shows the distribution of females' teachers in sample study concerning information about marriage, pregnancy, and childbirth which reveals that (45%) of them were married between (24 – 28) years old, and nearly half of them get first pregnancy between (24 – 28) years old, and (53%) of them had (1-3) pregnancies until the time of study. Concerning the duration between the present and last pregnancy, (41%) of teachers the duration was between < 1years, while (40%) of them was between 1-2 years.

Furthermore, (85%) of teachers had 1-3 childbirths. With regard to type of delivery, (48%) of them had Caesarean section delivery, while (44%) of them had normal delivery. Concerning to the number of dead births (88%) of them did not get dead birth. Furthermore, this table shows that (86%) of them had from (1-3) living children,24% had abortion which mostly was spontaneous (66.7%) and (33.3%) was induced. Moreover about two third of the study sample (68%) stated that they want to be pregnant again.

Table (3) : Assessment of females' teachers attitudes concerning contraceptive methods used (before & after the Instructional Program).

Attitudes	Period	No.	MS	SD	RS%	Z-value	P-value	C.S.
1. I think it's wrong to use contraception	Pre	100	2.38	0.80	79.3	-3.140	0.002	HS
	Post-1	100	2.71	0.54	90.3	-3.884	0.000	HS
	Post-2	100	2.76	0.45	92.0	-2.236	0.025	S
2. The use of contraception is much better than abortion	Pre	100	2.20	0.82	73.3	-2.724	0.006	HS
	Post-1	100	2.49	0.66	83.0	-3.824	0.000	HS
	Post-2	100	2.60	0.55	86.7	-2.598	0.009	HS
3. Contraceptives may cause	Pre	100	2.13	0.77	71.0	-5.390	0.000	HS

damage to the mother	Post-1	100	2.77	0.49	92.3	-5.675	0.000	HS
	Post-2	100	2.79	0.46	93.0	-1.414	0.157	NS
4. I think contraception is completely cut off birth	Pre	100	2.38	0.80	79.3	-3.140	0.002	HS
	Post-1	100	2.71	0.54	90.3	-3.884	0.000	HS
	Post-2	100	2.76	0.45	92.0	-2.236	0.025	S
5. I think contraception is used to kill the fetus	Pre	100	1.99	0.92	66.3	-2.536	0.011	HS
	Post-1	100	2.36	0.86	78.7	-3.081	0.002	HS
	Post-2	100	2.42	0.81	80.7	-2.121	0.034	S
6. I encourage my friends to use contraception	Pre	100	2.44	2.99	81.3	-4.989	0.000	HS
	Post-1	100	2.74	0.52	91.3	-5.393	0.000	HS
	Post-2	100	2.77	0.49	92.3	-1.732	0.083	NS
7. I do not want a sexual relationship if contraceptives are not available	Pre	100	1.85	0.86	61.7	-2.332	0.020	S
	Post-1	100	2.21	0.84	73.7	-3.282	0.001	HS
	Post-2	100	2.34	0.79	78.0	-2.919	0.004	HS
8. Contraceptive methods really prevent pregnancy	Pre	100	2.20	0.82	73.3	-2.724	0.006	HS
	Post-1	100	2.49	0.66	83.0	-3.824	0.000	HS
	Post-2	100	2.60	0.55	86.7	-2.598	0.009	HS
9. The use of contraceptive methods is a way to show interest for the partner	Pre	100	1.75	0.82	58.3	-3.377	0.001	HS
	Post-1	100	2.26	0.82	75.3	-3.523	0.000	HS
	Post-2	100	2.27	0.81	75.7	-1.000	0.317	NS
10. I feel embarrassed when discussing the contraceptive methods with my friends	Pre	100	2.15	0.86	71.7	-3.120	0.002	HS
	Post-1	100	2.49	0.58	83.0	-4.017	0.000	HS
	Post-2	100	2.60	0.53	86.7	-3.317	0.001	HS
11. The most appropriate age for the mother to have children is between (20-35 years) and the risk of pregnancy increases when mother's age is outside the borders of this age.	Pre	100	2.13	0.77	71.0	-5.390	0.000	HS
	Post-1	100	2.77	0.49	92.3	-5.675	0.000	HS
	Post-2	100	2.79	0.46	93.0	-1.414	0.157	NS
12. I think the probability of exposure to the risk of maternal morbidity and mortality increases in the case of pregnancy before the age of eighteen years .	Pre	100	2.44	2.99	81.3	-4.989	0.000	HS
	Post-1	100	2.74	0.52	91.3	-5.393	0.000	HS
	Post-2	100	2.77	0.49	92.3	-1.732	0.083	NS
13. I think that the likelihood of mother's risk of illness and death in the case of pregnancy increases at the age of five and thirty years and over.	Pre	100	1.91	0.65	63.7	-5.539	0.000	HS
	Post-1	100	2.59	0.65	86.3	-6.495	0.000	HS
	Post-2	100	2.71	0.50	90.3	-3.464	0.001	HS
14. The likelihood of mother's risk of illness and death in the case of getting pregnant after four births	Pre	100	2.13	0.68	71.0	-1.809	0.070	NS
	Post-1	100	2.37	0.72	79.0	-3.853	0.000	HS
	Post-2	100	2.55	0.59	85.0	-4.243	0.000	HS
15. The likelihood of mother's risk of illness and death in the case of pregnancy increases before the lapse of two years from the previous birth.	Pre	100	2.38	0.80	79.3	-3.140	0.002	HS
	Post-1	100	2.71	0.54	90.3	-3.884	0.000	HS
	Post-2	100	2.76	0.45	92.0	-2.236	0.025	S
16. I think Contraceptives can make sexual intercourse more pleasure	Pre	100	1.83	0.75	61.0	-2.582	0.010	S
	Post-1	100	2.22	0.77	74.0	-3.657	0.000	HS
	Post-2	100	2.32	0.68	77.3	-3.162	0.002	HS
Attitudes	Period	No.	MS	SD	RS%	Z-value	P-value	C.S.
17. I feel that the use of contraceptives is only the responsibility of my husband	Pre	100	2.38	0.80	79.3	-3.140	0.002	HS
	Post-1	100	2.71	0.54	90.3	-3.884	0.000	HS
	Post-2	100	2.76	0.45	92.0	-2.236	0.025	S
18. I feel comfortable during sexual intercourse if we use contraceptives	Pre	100	1.72	0.79	57.3	-4.022	0.000	HS
	Post-1	100	2.35	0.80	78.3	-4.370	0.000	HS
	Post-2	100	2.39	0.75	79.7	-2.000	0.046	S
19. I will plan in the future to use methods of contraception in the sexual relationship	Pre	100	1.83	0.80	61.0	-3.157	0.002	HS
	Post-1	100	2.37	0.80	79.0	-4.343	0.000	HS
	Post-2	100	2.50	0.72	83.3	-2.739	0.006	HS
20. I would like to use contraceptive methods , even my husband refuses to do so	Pre	100	1.98	0.89	66.0	-0.713	0.476	NS
	Post-1	100	2.10	0.90	70.0	-2.040	0.041	S
	Post-2	100	2.30	0.82	76.7	-3.397	0.001	HS
21. There is no problem for the use of contraceptive methods	Pre	100	1.59	0.73	53.0	-6.164	0.000	HS
	Post-1	100	2.58	0.68	86.0	-6.195	0.000	HS

	Post-2	100	2.59	0.68	86.3	-1.000	0.317	NS
22. The use of contraceptive methods make the marital relationship permanent	Pre	100	1.76	0.73	58.7	-4.223	0.000	HS
	Post-1	100	2.40	0.77	80.0	-4.654	0.000	HS
	Post-2	100	2.45	0.72	81.7	-2.236	0.025	S
23. We should use contraception even if the monetary cost is high	Pre	100	1.83	0.83	61.0	-3.241	0.001	HS
	Post-1	100	2.32	0.84	77.3	-4.026	0.000	HS
	Post-2	100	2.41	0.79	80.3	-2.121	0.034	S
24. The family planning requires the consent of both spouses , not the consent of one..	Pre	100	2.20	0.82	73.3	-2.724	0.006	HS
	Post-1	100	2.49	0.66	83.0	-3.824	0.000	HS
	Post-2	100	2.60	0.55	86.7	-2.598	0.009	HS
25. The couple agree on ways to prevent pregnancy before marriage is better	Pre	100	2.31	0.81	77.0	-4.638	0.000	HS
	Post-1	100	2.82	0.46	94.0	-5.134	0.000	HS
	Post-2	100	2.85	0.36	95.0	-1.732	0.083	NS
26. Choose a second method to prevent pregnancy in the case of existence of side effects.	Pre	100	1.85	0.86	61.7	-2.332	0.020	S
	Post-1	100	2.21	0.84	73.7	-3.282	0.001	HS
	Post-2	100	2.34	0.79	78.0	-2.919	0.004	HS
27. I feel satisfied when I use methods of contraception	Pre	100	1.67	0.75	55.7	-5.812	0.000	HS
	Post-1	100	2.58	0.65	86.0	-6.225	0.000	HS
	Post-2	100	2.62	0.60	87.3	-2.000	0.046	S
28. I think that the religion is not forbidden to use family planning and use of contraceptive methods.	Pre	100	1.77	0.63	59.0	-4.562	0.000	HS
	Post-1	100	2.39	0.67	79.7	-4.952	0.000	HS
	Post-2	100	2.44	0.62	81.3	-2.236	0.025	S
29. The injection to prevent pregnancy poses for women vaginal bleeding	Pre	100	2.02	0.53	67.3	-2.791	0.005	HS
	Post-1	100	2.28	0.62	76.0	-3.351	0.001	HS
	Post-2	100	2.34	0.61	78.0	-2.121	0.034	S
30. I think that breastfeeding is un safe method that exposed the mother for pregnancy	Pre	100	1.55	0.70	51.7	-7.243	0.000	HS
	Post-1	100	2.67	0.57	89.0	-7.281	0.000	HS
	Post-2	100	2.68	0.55	89.3	-1.000	0.317	NS
31. There is no real risk of the use of family planning methods, but certainly the danger lies in the frequent pregnancies, which are bleeding after childbirth, puerperal fever, or anemia ...etc	Pre	100	1.73	0.74	57.7	-7.113	0.000	HS
	Post-1	100	2.73	0.45	91.0	-7.113	0.000	HS
	Post-2	100	2.73	0.45	91.0	0.000	1.000	NS
Total attitude	Pre	100	2.01	0.243	67.0	-7.992	0.000	HS
	Post-1	100	2.50	0.209	83.3	-8.342	0.000	HS
	Post-2	100	2.57	0.195	85.7	-7.778	0.000	HS

(*) HS: Highly Sig. at P<0.01; S: Sig. at P<0.05; NS: Non Sig. at P>0.05

MS= Mean of score, Low = Less than (66.66), Pass (66.66- 77.77), moderate (77.78- 88.88), and high (88.89- 100).

Table (3) demonstrates the total mean of scores for teachers' attitude which indicate that there is high level (good attitude or positive attitudes) for them after implementing the instructional program, while their attitude in pretest was moderate, with respect to the total mean of mean score (MS) and to the relative sufficiency (RS) which was changing from (67.0%) in pre- test to (83.3%) in posttest -1, to (85.7%) in post-test 2 respectively.

The results show that all items of attitudes are reported extremely good assessments as a result of applying the suggested program indeed, as well as some items had reported no significant differences at P>0.05 in light of (pre X post-1, preXpost-2, and post-1 X post-2) since having initially good assessments, and their relative sufficiency recorded upper cut of point, which means studied sample (secondary school's teachers) owned some good information before applying the studied program.

IV. Discussion

1. Discussion of teachers' demographic characteristics and reproductive health information.

As it has been shown in table (1) most teachers (60%) their ages ranged between (30-39) years. Regarding to the vast level of education, the vast majority of the study sample (93%) were Bachelor degree. Furthermore, table (1) shows that (48%) of teachers had (6 – 10) years of experience in teaching.

This results are disagree with study had done to assess the impact of education program about family planning among (140) Yemeni Women on their “Knowledge and Attitude” in Sana’a city. It was found that nearly half of the studied women (48.6%) aged 20 years and less than 30 years⁽¹³⁾.

Also this result is disagree with study had done to determine the factor affecting contraceptives use in a sample of women attending Al-kadhymia Primary Health Center, in Baghdad City, the result showed that from(783) married women at the bearing age there were (51.7%) in age group (20-29) years. As foreducation (45.3%) were secondary school while (20.3%) were college. The occupations of most women (79.6%) were housewife⁽¹⁴⁾.

Concerning socio- economic level of the family, (66 %) of them said that the economic level for their families was moderate, while (26%) was low level.

This result is disagree with a study had done in the urban slums in Bangladesh, who found with regard to socioeconomic status measured by household wealth index, that almost two-thirds (65.0%) were poor, one-fifth (19.5%) was middle class and the rest 15.1% was rich⁽¹⁵⁾.

The result in table (2) reveals that (45%) of teachers were married between (24 – 28) years old, and nearly half of them get first pregnancy between (24 – 28) years old, while (53%) of them had (1-3) pregnancies until the time of study .

This result is disagree with a study had done to assess the knowledge, attitudes, and practices of family planning among (500) women of rural Karachi, Pakistan, which found that 345 (69%) of sample study their age at marriage was between 20-24years old.⁽¹⁶⁾

Concerning to the duration between the present and of last Pregnancy, (41%) of teachers the duration was less than 1years, while (40%) of them was between 1-2 years.

Furthermore, (85%) of teachers had 1-3 childbirths. With regard to type of delivery, (48%) of them had Caesarean section delivery, while (44%) of them had normal delivery. Concerning to the number of dead births (88%) of them did not get dead birth. Furthermore, this table shows that (86%) of them had from (1-3) living children. Also the study depicted that (24%) of them had abortion, which accounted 66.7(66.7%) for spontaneous type, and 33.3(33.3%) for induce type.

This result is disagree with a study had don on,2011 in Basrah, Iraq, to assess the knowledge, attitudes, and practices of family planning among (900) married women in south of Iraq. the results indicated that. 51.4% of the women had 4 children and more⁽¹⁷⁾.

Also this result is disagree with a study had done to assess KAP of (500) Palestinian women in refugee camps of Nablus area towards family planning, The mean age was 31years and mean age of first marriage was 18.7 years, 50% were elementary educational level, and 33.8% were with secondary level, 81.8% their income is not enough, the average family size was 5.9⁽¹⁸⁾.

Moreover about two third of the study sample (68%), mentioned that they want to be pregnant again. Knowledge and practice of family planning is strongly related to higher level of education⁽¹⁹⁾. In most studies it was found that education is the prime influencing factor and education affects the attitudinal and behavioral patterns of the individuals⁽¹⁰⁾

2. Discussion of teachers ' attitude concerning contraceptive methods.

Result of this study showed that female teachers had positive attitudes concerning contraceptive methods used, and, with respect to the total relative sufficiency (RS) which was changing from (67.0%) in pre-test to (83.3%) in posttest -1, to (85.7%) in post-test 2 respectively,, table (3).

This result is agree with a study had done to assess the impact of education program about family planning among (140) Yemeni Women, on their “Knowledge and Attitude” in Sana’a city. The study found that women attitudes scores, were positive (57.1%, 91.4%, and 94.3% respectively) on pretest, immediate posttest, and on follow up test respectively after implementation the educational program⁽¹³⁾.

With respect to the relative sufficiency (RS) the finding in table (3) indicated that, (90.3%) of sample think that it is not wrong to use contraception after program, and that was positive attitudes. Also (83.0%) of sample thing that use of contraceptives is much better than abortion. And (92.3%) of them think that Contraceptives not cause damage to the mother, and (90.3%) of them thing that contraception is not completely cut off birth control, while (78.7%) of them think that contraception is not kill the fetus, (91.3%) of female teachers encourage their friends to use contraception, and (73.7%) of them do not want sexual relationship if contraceptives are not available ,and (83.0%) of them think that contraception really prevent pregnancy, and (75.3%) of female think that the use of contraceptive methods is a way to show care for the partner. And

(83.0%) of them think that they do not feel with embarrassed when discussing ways to prevent pregnancy with their friends.

Furthermore, the finding in table (3) indicated that (92.3%) of female teachers think that the most appropriate age for the mother to have children is between (20-35 years) and increases the risk of pregnancy outside the borders of this age, and (91.3%) of them think that the probability of exposure to the risk of maternal morbidity and mortality increases in the case of pregnancy before the age of eighteen years of age, while (86.3%) of them think that the likelihood of the mother's risk of illness and death in the case of pregnancy increases at the age of thirty-five years of age. And (79.0%) of them think that the likelihood of the mother's risk of illness and death in the case of getting pregnant after four births. Also (90.3%) of them think that the possibility of the mother's risk for illness and death in the case of pregnancy increases before the period of two years from the previous birth.

This positive attitude is also indicated in other items, where (74.0%) of sample feel that Contraceptives can make sexual intercourse more fun, and (90.3%) of them think that the use of contraceptives is not only the responsibility of husband, and (78.3%) of them feel comfortable during sexual intercourse if they use it, and (79.0%) of them will plan in the future to use methods of contraception in the sexual relationship, and (70.0%) like to use contraceptive methods, even though my husband refuses to do so, while (86.0%) think that there is no problem for the use of contraceptive methods, and (80.0%) of them think that the use of contraceptive methods make the marital relationship permanent. And (77.3%) use contraception even if the monetary cost high.

Furthermore, the finding indicated that (79.7%) of them think that the religion is not forbidden to use family planning and use of contraceptive methods.

This study is disagree with the study had done in Riyadh, Arabia Saudi, to assess attitude towards Contraceptives use among 305 married females, the study showed low levels of use of contraceptives, might be due to religious issues. It was found that 86.6% of women have ever used contraception, Attitude of females towards contraception was affected by their working status, it was better among housewives. Also, husband approval was a significant factor to improving female attitude towards contraceptives. The study mentioned that living in extended family, having chronic disease or education of either the women or her husband had no effect on women's attitude towards contraceptives⁽²⁰⁾.

The present study is agree with the study had done in rural tertiary health care center, Madhya Pradesh, India, 58% of these women were aware of contraceptive methods, Although majority (71%) of women showed positive attitude towards use contraceptive methods⁽²¹⁾.

Also this result is disagree with the study had done to assess the knowledge, attitude & practices of contraceptives among (200) married women of reproductive age group. Meghalaya, India, majority of male 55.5% and female 51.5% were showing negative attitude towards family planning, because of large family norm, religious myth, cultural & political barrier⁽²²⁾.

Also this result is supported by a study had done to assess KAP of (500) Palestinian women towards family planning. Attitudes towards FP seem to be positively high as 95% of study population agreed strongly and encourage it. It was also found that 85.6% of survived women believed that their spouses encourage FB as well. On the other hand 97% of them agree that FP is a joint partner decisions and 80% believed that religion encourages FP which is contradictory to what is reported in some Muslims communities⁽¹⁸⁾.

Also this result is supported by a study had done in Erbil, Iraq to assess Knowledge, attitudes, and practices regarding family planning among two groups of women. Most of the women had a positive attitude toward family planning, and knew at least one benefit of family planning to mothers and/or children. The result shows that around half (47.6%) (of the sample desire a family composed of four children. Regarding husbands' attitude (79.6%) of them had positive attitude toward FB. Reasons behind positive attitude of husbands toward FP (70.4%) says that the reason was better health for mother and better care for children⁽²³⁾.

In study had done in Basrah, Iraq, included 400 married women between (15-47) years, Women had considerable knowledge and attitude toward contraception method. The aim of using contraception was for spacing of births and the cause of stopping it was to achieve pregnancy⁽²⁴⁾.

This result is supported by a study had done to assess knowledge, practice and attitude of women towards family planning methods in Tafila city –Jordan. About 67% of women showed positive attitude toward using contraceptive methods that was approved by husbands⁽²⁵⁾.

V. Recommendations:

1. The study recommended that a continuous health education in the field of family planning is necessary to promote the positive attitudes toward contraceptive methods used for men and women.
2. Men should not be ignored in receiving health education programs on birth control methods. Family planning program should involve men as well as women. Men involvement in Family Planning counseling will reduce opposition to Family planning programs and also encourage their wives to use contraceptive methods.

3. It is very important to authorship and teaching of family planning subject and contraceptive methods topics in all secondary schools of Iraq for girls and boys students to promote their attitudes toward contraceptive methods used.

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