

MOTIVATIONAL FACTORS ASSOCIATED WITH
CONTRACEPTIVE USAGE: THE CASE OF
LIMITERS VERSUS THE SPACERS

TRINIDAD S. OSTERIA, D.Sc. *

In the analysis of data from survey of acceptors at three family planning clinics, some information was obtained concerning differential pill and IUD use-continuation.¹ It was observed that continuation rates for limiters were far higher than the spacers (Table 1) and pregnancy rates were far lower for the former (Table 2). Such differentials indicated the need for a better understanding of the characteristics of the spacers and limiters.

Table 1

AVERAGE ALL METHOD CONTINUATION RATES,
SPACERS AND LIMITERS *
(PGH, CALAMBA AND SUMC, 1970)

<i>Year</i>	<i>Spacer</i>	<i>Limiter</i>
First	.645	.779
Second	.468	.640

- * The rates for pills and IUD were weighted in the same proportion in which they were accepted in 1971 by the formula:
 $c = .7P$ (pill rate) + $.3I$ (IUD rate).

Table 2

PREGNANCY RATES, SPACERS AND LIMITERS
(PGH, 1970)

<i>Year</i>	<i>Spacer</i>	<i>Limiter</i>
First	.269	.126
Second	.513	.233

* Assistant Professor, U.P. Population Institute.

¹ See "Preliminary Continuation and Pregnancy Rates from Follow-Up Surveys at Three Philippine Family Planning Clinics," Family Planning Evaluation Office, U.P. Population Institute, April, 1971 (mimeographed).

One would suspect that the differential termination is due to the different methods used by the limiters and spacers. However, it was observed that among IUD users, spacers have relatively higher 2-year termination than limiters. The same relationship holds true for pill acceptors.

Table 3

AVERAGE CONTINUATION RATES
FOR PILLS and IUD, (PGH, CALAMBA AND SUMC, 1970)

Year	IUD		PILLS	
	Spacer	Limiter	Spacer	Limiter
First	.876	.897	.599	.691
Second	.677	.696	.459	.558

The Study

This paper aims to provide a descriptive analysis of spacers and limiters based on a 10 per cent sample of April-June, 1971 family planning clinic acceptors in the Philippines. Limiters are distinguished from the spacers by the number of additional children desired. Those women who did not desire any additional child are called the limiters and those who wanted one or more children are treated as spacers. In 1970 (April-June), there were 2,431 limiters and 974 spacers while in 1971, 6,112 were limiters and 2,283 were spacers. While the absolute numbers more than doubled, the proportions of limiters and spacers did not change markedly between 1970 and 1971.

Table 4

DISTRIBUTION OF LIMITERS AND SPACERS,
APRIL-JUNE, 1970 AND 1971

	1970		1971	
	no.	%	no.	%
Limiters	2,431	71.4	6,112	72.8
Spacers	974	28.6	2,283	27.2
	3,405	100.0	8,395	100.0

It was originally planned to show trends in spacer-limiter differentials between 1970 and 1971. However, patterns were observed to be similar for both. Hence, it was decided to exclude the 1970 acceptors.

CHARACTERISTICS OF THE LIMITERS AND SPACERS

A. Age Distribution

Age is an important aspect of any demographic study. It can be shown that the limiters are quite older than the spacers. The average age of the limiters in 1971 was 32.5 years while that of the spacers was 25.8 years. While almost half of the spacers were below 25 years of age, only 11% of the limiters belong to this age group. A substantial portion of the limiters belong to the 30 years and over age category.

It is to be expected that women who are well along in years would wish to limit family size. The data contained in Table 5 support this expectation. On the other hand, women who are in their early childbearing years, would understandably desire to produce more children and would therefore, be interested merely in spacing births.

Table 5

DISTRIBUTION OF LIMITERS AND SPACERS BY AGE, APRIL-JUNE, 1971

Age of the Client (Years)	Limiters		Spacers	
	no.	%	no.	%
15-19	44	.7	192	8.4
20-24	629	10.3	921	40.3
25-29	1,527	25.0	741	32.5
30-34	1,762	28.8	322	14.1
35-39	1,438	23.5	81	3.6
40-44	614	10.1	13	.6
45+	82	1.3	2	.1
No. Info	16	.3	11	.5
TOTAL	6,112	100.0	2,283	100.0
Average Age (Yrs.)	32.5		25.8	

B. Method Accepted

The success of any family planning program depends on the efficacy of the device utilized. In table 6 it can be seen that pills are the most common method used. While its clinical effectiveness is higher than the IUD, its termination rate is greater.

Table 6
 DISTRIBUTION OF LIMITERS AND SPACERS
 BY METHOD ACCEPTED, APRIL-JUNE, 1971

Method Accepted	Limiters		Spacers	
	no.	%	no.	%
Rhythm	841	13.8	351	15.4
Pill	3,489	57.0	1,420	62.2
IUD	1,344	22.0	390	17.1
Others	438	7.2	122	5.3
No Info	—	—	—	—
TOTAL			2,283	100.0

Compared to the spacers, there were more IUD users among the limiters (22.0% vs. 17.1% in 1971). In 1971, the proportions of those who used other methods were 7.2% among limiters and 5.3% among spacers.

C. Number of Living Children

It has been felt that motivation for contraceptive use would vary with the number of living children. As expected, more than half of the wives have 4 or more children among the limiters while among the spacers, 65 per cent have 1-2 children in 1971 (Table 7). It also indicates that as soon as replacement levels are reached, most wives would like to space their child-

Table 7
 DISTRIBUTION OF LIMITERS AND SPACERS
 BY NUMBER OF LIVING CHILDREN, APRIL-JUNE, 1971

Number of Living Children	Limiters		Spacers	
	no.	%	no.	%
0	5	.1	34	1.5
1	78	1.3	707	31.1
2	511	8.4	756	33.1
3-4	1,997	32.7	644	28.2
5-6	1,807	29.6	111	4.9
7+	1,717	28.0	19	.8
No Info	3	.1	12	.5
TOTAL	6,112	100.0	2,283	100.0
Average No. of Children		5.84		2.31

ren. In Taiwan, continuation rates were found to be higher among wives with more children due to deep motivation.

D. Previous Use of Family Planning

More than three-fourths of the acceptors have never used any family planning method at all. The proportions of those who had attempted to use any of the family planning methods were slightly higher for the limiters than the spacers. This is expected since the need to effectively control family size is felt more by the limiters (Table 8).

Table 8
DISTRIBUTION OF LIMITERS AND SPACERS
BY PREVIOUS CONTRACEPTIVE USE, APRIL-JUNE, 1971

Previous Use of Family Planning Methods	Limiters		Spacers	
	no.	%	no.	%
No	4,631	75.8	1,816	79.5
Yes	1,385	22.7	419	18.4
No Info	96	1.5	48	2.1
TOTAL	6,112	100.0	2,283	100.00

$$\chi^2 = 17.2^{**} \text{ significant at 5\% and 1\%}$$

Since more information was obtained from the 1971 record keeping system, it would be worthwhile to examine the methods that were previously used.

Table 9
DISTRIBUTION OF LIMITERS AND SPACERS
BY PREVIOUS METHOD USED, APRIL-JUNE, 1971

Previous Method Used	Limiters		Spacers	
	no.	%	no.	%
None	4,631	75.8	1,816	79.5
Rhythm	316	5.1	111	4.9
Pills	551	9.0	177	7.8
IUD	208	3.4	42	1.8
Others	310	5.1	89	3.9
No. Info	96	1.6	48	2.1
TOTAL	6,112	100.0	2,283	100.0

* This result was revealed by Hermalin and Chow in the Second Taiwan IUD follow-up survey based on acceptors between March, 1965 and June, 1966. See Albert Hermalin and L.P. Chow, "Motivational Factors in IUD Termination," Data from the Second Taiwan IUD Follow-Up Survey, 1970.

$\chi^2 = 24.9^{**}$ significant at 5% and 1%

While there is no spacer-limiter differential in the use of rhythm method, more of the limiters had used pills and IUD as compared to the spacers. The Chi square test revealed significant differences in methods accepted by limiters and spacers.

E. Education of the Wife

More of the limiters have lower education than their spacer counterparts. About 59 per cent of the limiters have elementary education as compared to 47 per cent among the spacers. In a similar vein, 24 per cent of the spacers have acquired some college education as compared to 11.6% among the limiters. However, the proportion of those who obtained a high school education among spacers and limiters remained the same. This finding somewhat contradicts the previous findings which showed positive relationships between method continuation and age as well as the number of living children.

Table 10

PERCENTAGE DISTRIBUTION OF SPACERS AND LIMITERS BY EDUCATIONAL ATTAINMENT, APRIL-JUNE, 1971

Education of Wife	Limiters		Spacers	
	no.	%	no.	%
None	108	1.8	20	.9
Primary	1,066	17.4	259	11.3
Intermediate	2,545	41.7	817	35.8
High School	1,634	26.7	616	27.0
College	711	11.6	558	24.4
No Info	48	.8	13	.6
TOTAL	6,112	100.0	2,283	100.0
Median Years of Schooling	5.96		6.74	

However, younger wives, who are highly educated would have many channels of communication and would attempt to plan their families at an early stage of the family building cycle which could account for a higher rate of termination with the resumption of childbearing.

F. Residence

It was felt that wives who would be motivated to control their fertility at an earlier stage of childbearing would be those

who are staying in the same place as the clinic. However, results obtained revealed no difference in residence pattern for the spacers and limiters.

Table 11
PERCENTAGE DISTRIBUTION OF CLINIC ACCEPTORS
BY RESIDENCE, APRIL-JUNE, 1971

Residence	Limiters		Spacers	
	no.	%	no.	%
same town as clinic	4,455	72.9	1,718	75.3
same prov. as clinic	1,470	24.1	494	21.6
different province	134	2.2	55	2.4
no info	53	.8	16	.7
TOTAL	6,112	100.0	2,283	100.0

G. Source of Information

The April-June, 1971 reports showed that a greater bulk of the acceptors got their information from the clinic staff—chiefly the nurse and the widwife. Other sources (field motivator, friends, etc.) constituted only 20.8% of the total sources. The mass media contributed a very small proportion (approximately 7%). There was no substantial difference between the limiters and spacers.

Table 12
PERCENTAGE DISTRIBUTION OF THE APRIL-JUNE,
1971 CLIENTS BY SOURCE OF INFORMATION

Source of Information	Limiters		Spacers	
	no.	%	no.	%
Mass Media	439	7.2	150	6.6
Clinic Staff	4,398	72.0	1,660	72.6
Other Services	1,275	20.8	473	20.8
TOTAL	6,112	100.0	2,283	100.0

SUMMARY

In a study of differential IUD and pill use-continuation in three family planning clinics in the Philippines it was observed that a higher termination rate occurred among the spacers than the limiters. It was felt that it would be worthwhile to examine the characteristics of the spacers and limiters based on the

10% sample obtained from the 1971 family planning clinic acceptors records in the Philippines. The main findings can be specified as follows:

1. A separate analysis of pill and IUD use continuation revealed that spacers have higher termination rates irrespective of the method used.
2. The spacers are much younger than the limiters.
3. More of the limiters use the IUD whose continuation is known to be longer.
4. The limiters have on the average 6 children as compared to an average of 2 among the spacers.
5. Spacers have higher education than the limiters.
6. Spacers and limiters did not differ by previous contraceptive use, residence, and source of information about the clinic. However, among those who had used a method prior to the present usage, there were more pill and IUD users among the limiters.
7. Differentials in age, method used, and the number of living children contributed to the high continuation rates among the limiters. Education detracts from the pattern observed.
8. Pregnancy rates are higher among spacers than limiters.
9. The proportions of spacers and limiters did not differ in 1970 and 1971.