

The influences of sexual and reproductive health service-seeking behavior among women at late reproductive ages (40-49) in rural china

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Background

Since 1994 ICPD conference, China initiated a nationwide quality of care project integrated sexual and reproductive health services into its existing family planning program for all women at reproductive ages, with a free gynecological exam for screening contraceptive use effects and women's diseases. However, the project mainly focused on married young women aged 20-39 who were considered more sexually active and a high-risk population to have unwanted pregnancy and reproductive track infections (RTI), so that the access to sexual and reproductive health services under this program was relatively limited for women aged 40-49, especially in rural areas. Among those women, little is known about their seeking behavior for the sexual and reproductive health services.

We therefore undertook this large, population-based survey in seven provinces of China to examine the service-seeking behavior for sexual and reproductive health among women aged 40-49 in rural community of China. This study asked women about sexual and reproductive health issues, current health status, cognition and attitude towards using family planning and reproductive health services, access to existing health services and quality of services. The purpose was to identify the influence factors for service-seeking behavior and provide information to improve services for women at later reproductive ages.

Method

A cross-sectional, questionnaire-based study was conducted in a representative sample of women aged 40-49 from rural areas of seven provinces in China: Jiangsu, Liaoning, Jiangxi, Chongqing, Hainan, Guizhou and Qinghai. These provinces were selected to represent different geographic and socioeconomic and cultural spectrums. A 30-min 45-item questionnaire was designed for face-to-face interview administration and pre-tested by the research assistants and then revised. A total of 1811 individuals completed interviews.

We first present descriptive data for the study population and examined demographic characteristics, sexual and reproductive behaviors, health status around menopause and service-seeking for sexual and reproductive health services. For the service-seeking behavior, we examined with multiple logistic regression the association of receiving a free gynecological exam in the past 2 years as a dichotomous outcome with the participant's age, education, vocation, migrant experience, medical insurance status, distance to medical institution, knowledge of menopause, services received, formal health education received, contraceptive services received and abortion experience. Analysis was performed using SPSS version 17.0

Results

53.0% were aged 40-44, while 46.6% were aged 45-49. 96.7% were currently married, 49.9% and 6.7% had finished junior high school and senior high school or beyond. Majority of them (66.2% and 22.4%) were currently farmers and housewife, and more than one-fourth (27.7%) had working experience as migrant workers in cities. One-third of the participants had induced abortion experiences: 26.5% had one abortion, 10.4% had two or more. Almost all participants (94.5%) used contraceptives: 51.0% used female sterilization as permanent contraception and 38.1% had ever had an IUD, only 5.3% used condom or pill. The mean sex frequency last month was 3.63. 75.9% had knowledge about menopause and 18.7% no longer had their menstrual cycle. 63% admitted that still required sex after menopause. The proportion correctly answering the question about the best time for IUD removal was only 34.1%, and almost half of them (48.7%) were unclear if an IUD should be removed after menopause. 22.7% did not receive any gynecological exam and 31.2% did not receive any health education during the past two years.

In multivariate regression, younger age group, education completed, migrant working experiences, formal health education received, awareness of correct IUD removal time, awareness of need to see doctor when having menopause symptoms, preference to see doctor at township hospital, shorter distance to the township hospital and the attitude willing to do health examination were significantly associated with service-seeking for sexual and reproductive health. Among these influence factors, formal health education received in the last two years and awareness of correct IUD removal time were the most important influence factors on seeking free gynecological exam service among women aged 40-49 in Rural China.

Conclusions

The late reproductive-age women in rural China still lacked quality sexual and reproductive health services. Immediate actions that should be considered include initiating a community-based promotion program focusing on sexual and reproductive health for those women and effective inclusion in the framework of the family planning program that should increase these women's motivation to use existing services for sexual and reproductive health.

Keywords

service-seeking; sexual and reproductive health; late reproductive-age women; China