Dynamics of IUD use in Viet Nam: implications for family planning services at primary healthcare level

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Outline

- Country context and background
- Study design
  - Objectives
  - Methods
- Key findings
- Conclusion
Country context

Population
- 86.92 million people
- Density: 263 per square kilometer
- 70.4% of population resides in rural areas
- Poverty rate (percentage poor, national poverty line, 2009): 12%

Reproductive health
- Infant mortality rate per 1,000 live births (2009): 16
- Fertility rate (births per woman, 2009): 2.03
- Maternal mortality rate (deaths per 100,000 live births, 2009): 69
- CPR (modern methods) in 2010: 67.5% (: urban 63.3% vs. rural 69.2%)
Background

- The intrauterine device (IUD) is a long-term contraceptive method that is suitable for women of all reproductive ages, and represents the most cost-effective reversible method (Deans and Grimes, 2009) & (Chiou et al., 2003)

- In Viet Nam
  - IUD is used by 44% of married women (the 12-month IUD failure rate is 3%, the 12-month discontinuation rate is 12.5%) (United Nations, 2009)
  - Free family planning (FP) services are provided through the local commune health station (CHS),
  - However, Viet Nam has one of the highest abortion rates in the world, at 26 abortions per 1,000 women (http://www.guttmacher.org/pubs/journals/25s3099.html)
The aim of study

- The overall goal of this retrospective study is to identify the reasons and determinants for IUD discontinuation among women who received IUDs contraceptive method from 2006-2009.

- The specific objectives
  - To measure the IUD discontinuation rate among women living in selected sites who attended Family Planning outreach camps in 2006, 2007, 2008 and 2009
  - To identify the reasons and determinants for IUD removal.
  - To determine switching behaviors among women who discontinued
Methods

- **Study design:** Retrospective study

- **Study participants:** women of reproductive age who had received IUD services at CHSs between 2006 and 2009

- **Study sites:** 3 provinces which represent to North, Mid and South Vietnam

- **Survey instrument & data collection**
  - Questionnaire
  - A face to face interview

- **Sampling and sample size:**
Criteria for recruiting
- aged 15–49 years at time of IUD insertion;
- had an IUD insertion in 2006–2009;
- willing to give informed consent; and
- resident in the province.

Data analysis: Survival methods were used to analyse rates of IUD discontinuation at 12, 24 and 36 months.

(http://en.wikipedia.org/wiki/Survival_analysis)
Key findings

- **Profile of IUD users**
  - N: 1316 women
  - The median age: 33 years

- **Occupational status**
  - 38% Farmers
  - 29% Housewives
  - 19% manual workers
  - 14% worked in Gov/business

- **Number of children**
  - 50% No children
  - 23% A child
  - 19% 2 children
  - 8% 3-9 children

- **Educational status**
  - 47% Primary
  - 36% secondary
  - 17% from high school
Reasons for choosing the IUD

Main reason for choosing an IUD
- Convenience: 92%
- Gov encouragement: 3%
- Others: 5%

Who made a decision to use FP method in the family
- with husband: 90%
- alone: 9%
- husband: 1%
IUD Discontinuation

- Women in the oldest age group (>40 years) had more than two times the risk of discontinuing IUD use at 12, 24 and 36 months than women aged ≤25 years.
- Housewives were less likely to discontinue IUD use than other women.
Main reasons for IUD discontinuation

- **Health concerns**: 49%
  - Excessive menstrual bleeding: 43.4%
  - Weight loss: 18.9%
  - Infections: 14.1%
  - Discomfort during sexual intercourse: 3.3%
  - Other: 19.4%

- Switched FP method or method failure: 17%
- Expulsion IUD: 6%
- Menopause or widowed: 4%
- Desire for children: 10%
- IUD of out date or replacement: 14%
Switching behaviours and time to switching

Switching among removed IUD women

- 29% switching to another method
- 71% no switching

<table>
<thead>
<tr>
<th>Time to switching</th>
<th>% (N=382)</th>
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<tbody>
<tr>
<td>one week of removal</td>
<td>50%</td>
</tr>
<tr>
<td>two weeks</td>
<td>10%</td>
</tr>
<tr>
<td>one month</td>
<td>28%</td>
</tr>
<tr>
<td>≥3 months</td>
<td>12%</td>
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FP methods

<table>
<thead>
<tr>
<th>Method</th>
<th>% (N=382)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral contraception</td>
<td>28.28%</td>
</tr>
<tr>
<td>Male condoms</td>
<td>17.17%</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>15.15%</td>
</tr>
<tr>
<td>Injectables</td>
<td>2%</td>
</tr>
<tr>
<td>Sterilization</td>
<td>1%</td>
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</tbody>
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Satisfaction with IUD services

- Dissatisfaction with IUD services was strongly associated with discontinuation
  - Women not satisfied with IUD services at CHS were more likely to discontinue after 3 years (91%) compared to women who were satisfied or very satisfied with the service (23%)
  - Women who said that they would not use IUD services again were more likely to discontinue after 3 years (73%) compared to women who said they would readily use the services again (19%)
Conclusions

- Early discontinuation of IUDs is common in Vietnam (27% of women discontinued use within 3 years)

- The majority of Vietnamese women discontinue IUD use due to health concerns → We need focus on high quality follow up care

- Because a high rate of women wait for more than a week before switching to an alternative method after discontinuation
  - → place women at risk of pregnancy → risk of abortion
  - → a need for improved contraceptive counseling and access to alternative contraceptive methods.

- Satisfaction with IUD services is an important factor in discontinuation.


Thank you

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