

Contraception use in Malta

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Abstract

Temporal surveys of family control methods being used within the Maltese setting carried out in the 1970's and 1990's had shown a definite shift towards the more effective methods of contraception. The present study was carried out on a mixed gender population of 211 individuals with a strong bias towards the highly educated sector of the population. The respondents reported a higher rate of family control that in previous studies with a greater reliance on the effective methods particularly the barrier method, hormonal manipulation, and sterilisation. The latter appeared to be an option limited to the older age groups rather than in the young. There has been a further significant decrease in reliance to the natural methods of contraception including the rhythm method supported by the Roman Catholic Church and *coitus interruptus*. The study further confirms the increasing secularisation and distancing from traditional values that is occurring in the Maltese population.

Keywords

Contraception, barrier methods, natural methods, hormonal, Malta

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Introduction

The Maltese population traditionally harbours Roman Catholic beliefs that have permeated to the social aspects of sexuality practiced within the community. This influence was well documented by a survey carried out in 1971 that assessed the contraceptive attitudes of the Maltese population. This survey showed that only about 16% of the population were using an effective method of contraception; while about 40% of women were using the rhythm method accepted by the Roman Catholic Church.¹ The subsequent decades have seen a trend within the community towards more liberal sexual attitudes associated with the gradual move towards secularisation.² The change in sexual attitudes is expected to have been associated with a change in contraceptive practices. This present study sets out to assess the current contraceptive practices used by the Maltese population.

Methods

The study was conducted as an anonymous self-administered internet-based survey utilising the online survey tool SurveyMonkey®. Information about the survey was distributed electronically among medical practitioners, and among all the personnel working within the government health [using KURA] and university services [using NOC]. This e-newsletter circulation was supplemented by a request to respondents to circulate this invitation to participate among their email contacts. The respondent population numbered 211 individuals (86 males; 125 females). Besides information related to contraception methods used by each respondent, the questionnaire requested further information pertaining to the respondent age, marital and educational status. The data were mainly assessed using descriptive statistics. The population was subsequently divided into two groups by age and the reported contraceptive practices of individuals born before and after 1970 were compared using the chi square test. The cut-off was chosen since the 1970's can be considered the period when the "sexual revolution" reached Maltese shores.

Results

The large majority of respondents ($n=120$; 56.9%) were aged less than 40 years. Most had a tertiary degree of education with 83.4% having attended university. Only 2.4% had received only a secondary level of education, the remainder received a post-secondary education. A total of 124 individuals (58.8%) were married and living with their legal spouse. The remainder

Table 1: Methods of contraception as reported by 211 respondents

Contraceptive method used	No	%
No contraception used	19	9.0
Abstinence	26	12.3
Rhythm method	22	10.4
Coitus interruptus or mutual masturbation	50	23.7
Condom used by male partner	83	39.3
Female condom or diaphragm	0	0.0
Combined oral contraceptive pill	27	12.8
Progesterone only pill	6	2.8
Mirena IUS	13	6.2
Copper IUCD	1	0.5
Female sterilisation	5	2.4
Male sterilisation	7	3.3
Abortion	0	0.0
Other method	16	7.6
Total respondents	211	

was unmarried or separated and living alone or with a partner.

A total of 192 (91.0%) respondents reported that they were regularly using some method of family control; with 64 individuals reporting using multiple methods. Effective methods of contraception that including barrier, hormonal, intrauterine devices, and sterilisation were reportedly used by 142 (67.3%) respondents; 98 respondents (46.4%) reported using less effective natural methods including the rhythm method and coitus interruptus, or avoidance of vaginal penetration (Table 1).

The respondents aged less than 40 years appeared to be less frequently resorting to some form of contraception when compared to their older counterparts. However the differences were not statistically significant (89.2% vs 93.4%; $p=0.4$). There did however appear to be a definite statistically significant difference ($p=0.0004$) in the choice of methods being chosen by the different age groups, this difference being mainly due to the fact that the older generation were more likely to have resorted to more permanent methods of contraception (Table 2).

Discussion

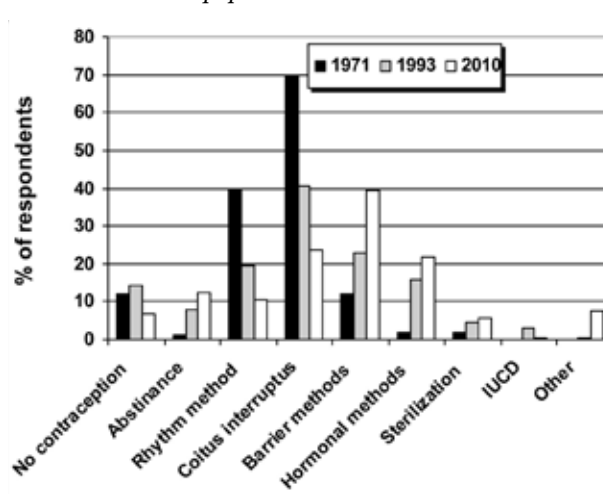
The fertility rate in Malta has decreased significantly in the last five decades from 3.5 in 1960 to 1.4 in 2008. The larger part of the observed fall in fertility rate occurred during the early 1970's.³ The fall noted in the 1970's has been associated with the introduction of family control methods, partly promulgated by the Roman Catholic Church in Malta.⁵ A survey carried out in 1971 among 321 women aged 45 years or less showed that while 87% of the respondents stated that they used some form of contraception, only a low proportion used a reliable method.

Table 2: Methods of contraception by age

Contraception method	< 40 years		> or = 40 years	
	No	%	No	%
No method	13	10.8	6	6.6
Natural: abstinence, rhythm, etc	64	53.3	34	37.4
Barrier method	56	46.7	27	29.7
Hormonal including OCs, progesterone pill or IUS	30	25.0	16	17.6
Sterilization	0	0	12	13.2
Other including Cu-IUCD	10	8.3	7	7.7
Total respondents		120		91

The barrier method, mainly the male condom, was reportedly used by 12% of the women, while hormonal contraception was used by only 2% of women. Sterilisation of the male or female was resorted to by a further 2% of these women. The remainder resorted to natural methods including abstinence, rhythm method and coitus interruptus.¹ A follow-up survey conducted on 1011 women aged 20-44 years was carried out in 1993. This study showed very little change from the previous survey in the proportion of women who used some form of contraception now reported at 85.8%. However, there was a definitely increasing reliance towards the use of more effective measures of contraception. Barrier methods were resorted to by 22.9% of women; while hormonal methods of contraception were reportedly used by 15.8%. Male or female sterilisation was resorted to by 4.4%; while the copper-IUCD was used by 2.9%.⁴

Figure 1: Temporal trends in contraception use in the Maltese population



The present survey reports an increasing rate of contraception use with about 91.0% of the respondents reporting taking family size control measures. A larger proportion of the population now resort to more effective measures. Barrier methods are resorted to by 39.3% of respondents; while hormonal methods of contraception were reportedly used by 21.8%. Male or female sterilisation was resorted to by 5.7%. The copper-IUCD was used by only one individual. The noted fall in IUCD use reflects local market forces that in recent years have promoted the use of the progesterone-releasing IUS. This hormone-based contraceptive was relied upon by 6.2% of the respondents. The temporal trends in contraception practices in the last five decades are outlined in Figure 1.

Market forces may be an important determinant of contraceptive choice. The Maltese pharmaceutical market is a very small one that must carefully balance cost versus gain to achieve an overall profit. This limitation has in part determined the availability of contraceptive methods. The copper-IUCD is one example, but the same can be said for spermicidal creams, the vaginal diaphragm and female condom, and the range of hormonal contraceptive medications available.

The present study design cannot be considered to be truly representative of the Maltese population. The study respondent characteristics do suggest a bias towards individuals pertaining to a high educational attainment than represented in the general Maltese population. The 2005 national census reports that only 9.6% of the population aged 15 years or more has actually received a university education, contrasting to the 83.4% figure reported in the study population. There was a similar bias in the study respondents towards the younger age group.⁶ This

bias was not surprising considering that internet-based survey systems were used. The present study therefore addresses the contraceptive practices of the higher-educated sector of the population and cannot be extended to reflect the contraceptive practices of individuals attaining a lower level of education.

A population-representative study is long overdue to assess the true family control practices in the Maltese community. The results however can be considered to reflect the increasing rate of secularisation that is occurring within the Maltese community with an increasing distancing from the moral and ethical values promulgated by the Roman Catholic Church. This distancing from Catholic norms is further reflected by an analysis of the reproductive and sexual health indicators reported in the Maltese population. These data confirm that sexual behaviour in the Maltese population has changed significantly and is converging on European norms.² The educational support to deal with these altered practices is in place but needs to be reinforced to truly empower the individual in controlling fertility and protect oneself against sexually transmitted disease.²

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