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1996 RUSSIA WOMEN'S

**REPRODUCTIVE HEALTH SURVEY:
A Study of Three Cities**

Preliminary Report

Russian Centre for Public Opinion and Market Research

Centers for Disease Control and Prevention, USA

United States Agency for International Development

January, 1997

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1. Introduction

From February through May of 1996, the 1996 Russian Women's Reproductive Health Survey (RWRHS) was carried out in three locations in Russia. The survey was done in conjunction with the USAID-sponsored Russian Women's Reproductive Health Project, which consists of a variety of components intended to expand and improve the use of effective contraception, reduce the reliance on abortion as a means of birth prevention, and generally to improve the reproductive health of Russian women. The project, which is active in six sites across Russia, includes, among other interventions, the establishment of model family planning centers, provision of contraceptives, information/education/communication activities, and training of family planning providers.

The primary objective of the 1996 RWRHS, and a follow-up survey planned for 1998, is to help measure the impact of the Russian Women's Reproductive Health Project. The 1996 survey is a baseline, while the 1998 effort will be a follow-up. The general approach used in these surveys is a quasi-experimental one. The surveys are being carried out in three sites, two of them included in the project and a third that is not covered by the project. The two project sites are Ivanovo Oblast (province) and the city of Yekaterinburg (formerly known as Sverdlovsk). The non-project site is the city of Perm, selected because of its proximity and similarity in many respects (size, location, economic characteristics) to Yekaterinburg. The 1996 baseline survey data are being used to compare these sites in regard to many aspects of reproductive health. The sites will again be compared using the 1998 follow-up survey data to see if there has been greater improvement in the project sites relative to Perm. Components of the project that seem to have made a positive impact might then be implemented in other places in Russia and perhaps elsewhere.

A second principal objective of the 1996 survey is to examine current aspects of reproductive health status and needs in the cities examined. The information collected on reproductive health in the sites examined can be used to help direct or modify project interventions during the early stages of the project. Because no nationwide reproductive health surveys have been conducted in Russia, these data may be of considerable value in describing reproductive health in much of Russia. Since the organization of health services and levels of resources devoted to health were fairly standardized throughout Russia in the Soviet era, there is likely to be considerable generalizability of the data collected in this survey to much of the country, particularly to urban areas of European Russia.

There are several principal issues that the survey was designed to address. One is the use of abortion, which has been very widespread in Russia for many years. One objective of the project is to bring about a reduction in abortion through increased availability and improved use of modern contraceptive methods. Another important topic examined is the use of contraception, to look at levels and trends in contraceptive prevalence and method selection and at the extent to which family planning methods are being used effectively. Also, we are interested in women's opinions and attitudes regarding specific contraceptive methods and

abortion, and in women's knowledge of reproductive health, to see how well informed the population is and to assist in the development of information, education, and communication (IEC) messages. There is interest as well in the reproductive health services women are using and their opinions about those services. These are just a few of the many topics into which the survey will provide insight.

This Preliminary Report describes some of the key initial findings from the 1996 Russian Women's Reproductive Health Survey, but is not intended to be constitute a thorough treatment of the survey data. It should be kept in mind that all results presented here are preliminary and are subject to change in the final analysis. The final survey report, to be issued in 1997, will contain much greater detail and will include results and discussion of virtually all topics addressed in the survey.

2. Methodology

Organizational Structure

The United States Agency for International Development (USAID) was the motivating force behind the survey, as well as the source of all funding for the undertaking. Implementation of the survey was done by the Russian Centre for Public Opinion and Market research (VCIOM), a large nationwide organization with a national office in Moscow and 27 local offices across Russia. VCIOM was responsible for selecting the sample of households and individuals, recruiting and training interviewers, conducting field work, processing of the data, and performing part of the data analysis. Technical assistance for all phases of the survey was provided by the Division of Reproductive Health of the U.S. Centers for Disease Control and Prevention (DRH/CDC). DRH/CDC was the lead agency in development of the overall survey design, questionnaire construction, coordination of all survey activities, and much of the data analysis. The participation of DRH/CDC was funded by USAID/Moscow through a Participating Agency Service Agreement (PASA) between USAID's Office of Population and CDC/DRH. Other cooperating agencies involved in the Russian Women's Reproductive Health Project contributed significantly to questionnaire development and survey design.

Questionnaire Content

The 1996 RWRHS questionnaire covered a wide range of topics related to reproductive health status and needs in the Russian Federation. The major topic areas addressed were:

- Social, demographic, and economic characteristics of respondents
- Pregnancy, abortion, and fertility
- Maternal and child health issues
- Contraception
- Information, education, and communication concerning family planning

- Young adult sexuality
- Women's health
- Sexually transmitted diseases.

As mentioned previously, the purpose of this report is to disseminate preliminary survey results on the topics considered to be of greatest interest, not to present all survey findings.

Survey Design

The survey was carried out in three locations: the city of Yekaterinburg (formerly Sverdlovsk), Ivanovo Oblast, and the city of Perm. The first two were project sites for the Russian Women's Reproductive Health Project, while Perm was a control site, selected because of its similarities to Yekaterinburg. The survey was designed to obtain completed interviews with representative samples of about 2,000 women between the ages of 15 and 44 in each of the three survey sites. In Yekaterinburg and Perm the survey was to cover only the cities. In Ivanovo, women were sampled from throughout the oblast. Three-stage cluster sampling was used to select respondents.

The first stage of sampling consisted of a selection of electoral districts, which served as the survey's primary sampling units (PSU). One hundred PSUs were selected in each of the three sites. Within the cities, PSUs were selected randomly within city districts. The number of PSUs in each district was proportional to the district's population to ensure proportionality within cities. In Ivanovo oblast, the selection of PSUs was based on the population of towns, rather than the population of districts. The sample was geographically self-weighting in Yekaterinburg and Perm. In Ivanovo, half of the PSUs were in Ivanovo city, where family planning activity and access is thought to be greatest, while the other half were in the remainder of the oblast, which contains an estimated 65 percent of the population. Thus, in analysis of Ivanovo data geographic sample weights must be applied to the data.

The second stage of sampling consisted of the selection of dwelling units from the selected PSUs. After a random starting point was chosen, selection of contiguous dwelling units was done using listings of addresses published for the selected electoral districts. Each time a residence with no 15-44 year-old women was encountered, the interviewer added the next residence on the address list. Within each selected PSU, about 20 interviews were expected.

The final stage of sampling consisted of the random selection of one woman between the ages of 15 and 44 in each selected residence where more than one woman of in that age range lived.

The number of interviews completed was very close to the number projected. In Ivanovo, 2,016 interviews were completed; in Yekaterinburg, 1,974; and in Perm 2,007 (Table 1). Response rates were high. In Yekaterinburg 90 percent of selected women were successfully interviewed and in Perm the figure was 88 percent. (Final figures for Ivanovo have not yet been tabulated, but are thought to be similar.)

3. Characteristics of the Population

Distributions of selected social and demographic characteristics of survey respondents in each of the three survey sites are displayed in Table 2. With a few notable exceptions, we will see throughout this report that the differences between respondents in the survey sites do not tend to be great. Many of the differences that exist are likely a result of the fact that the Ivanovo sample included rural areas, while the Perm and Yekaterinburg samples were completely urban.

Five-year age distributions are shown in Table 2 for both the survey sample and for the population as a whole according to the latest official statistics. Note that the age distributions from both sources for all three locations are very similar, never differing from each other by more than more than 2.2 percentage points, and usually much less than that (95% confidence intervals for five-year age groups are approximately 2.1%). This similarity is a very encouraging result, indicating that, at least in regard to age, the survey samples were highly representative of the populations being studied. The largest cohorts tend to be the oldest ones, with the fewest women in the 15-19 group.

In each location about two-thirds of respondents were currently living in either a registered or unregistered (i.e., consensual union) marriage. About one of every five women had never been in a formal or informal union. Just under two-thirds of women had finished their secondary education, but had not received any post-secondary schooling. In Yekaterinburg and Perm about 90% of women described themselves as ethnically Russian, while the figure was 95% in Ivanovo Oblast. From 59 to 71 percent of respondents said they were Russian Orthodox, while most others described themselves as having no religion, with very small percentages saying they were Muslim or belonging to some other religion.

Table 3 shows distributions of selected economic characteristics of survey respondents. About three of every five women were either currently employed outside the home and another 6-7 percent were on maternity leave at the time of interview. The proportion describing themselves as unemployed (i.e., not working, but wishing to do so) in Ivanovo was 18%, more than twice as high as in Perm or Yekaterinburg. The bottom panel of Table 3 displays the percentages of women living in homes containing various possessions. Between 81 and 89 percent of homes had a color television. The proportions with a telephone, an automatic washing machine, and a VCR were between 30% and 50%, while just under one-fourth of homes owned automobiles.

Table 4 presents marital status distributions by age group for the survey sites. It appears that most first marriages take place when women are in their early twenties, but that a substantial proportion of 15-19 year-old women are already in registered or unregistered marriages. In the oldest cohorts the proportions of women who had never been in union is very low, especially in Ivanovo Oblast, where the figure was only about 2%. Also, in the oldest cohorts, about one of every six women was currently divorced or separated.

4. Fertility, Abortion, and Pregnancy

The 1996 RWRHS sought information regarding the termination date, duration, outcome and other information on all pregnancies each respondent had ever experienced. In addition, for births and abortions concluding since the beginning of 1991, more detailed information was collected regarding such topics as whether pregnancies were intended, breastfeeding, and abortion complications.

Fertility

Tables 5A-5C present selected age-specific estimates of childbearing for the three survey populations. Table 5A, showing mean numbers of live births, indicates that, as in much of eastern Europe, childbearing tends to start at a relatively early age. Among 20-24 year-olds, the average number of live births is already about 0.5. Completed family size for the oldest cohorts was slightly less than two births per woman. Although this rate is below replacement level and is low compared to most of the world, it is considerably higher than current fertility rates, shown in Table 5B. The current total fertility rates (i.e., the mean number of children per woman based on current age-specific fertility) ranges from 1.24 in Yekaterinburg to 1.46 in Ivanovo. These rates are very low, but do correspond well with official Russian statistics. Table 5C, showing the percentage of women by age who have had any live births, confirms the generally early start of childbearing among respondents, but indicates that relatively few women reported births before the age of 20. By ages 25-29, only 12 to 20 percent of women still had not borne any children. Childlessness, at least in the older cohorts, was still uncommon, with only 5 to 8 percent reporting that they had had no live births.

Abortion

The incidence of induced abortion in Russia has been among the highest in the world for many decades. However, official statistics have indicated that rates have been declining in recent years. Tables 6A-6C display various age-specific abortion indicators from the 1996 RWRHS. The oldest cohorts of women reported an average of about two lifetime abortions apiece in Perm and Yekaterinburg and about 1.5 in Ivanovo Oblast (Table 6A). These figures are considerably lower than according to the conventional wisdom regarding the abortion experience of these cohorts, raising the possibility of underreporting of abortions that did not occur very recently.

Just over half of respondents in all three locations reported that they had ever had an induced abortion (Table 6B). Among women in the 40-44 year-old cohort, the percentage who reported at least one abortion ranged from 72 in Ivanovo to 85 in Yekaterinburg. Among 20-24 year-olds, about one of every three women reported that they had already had at least one abortion.

According to Table 6C, the total abortion rate (i.e., the mean number of lifetime abortions per woman based on current age-specific abortion rates) was lowest in Yekaterinburg (2.28 abortions) and highest in Perm (2.80 abortions). The abortion rate (i.e., the probability that a

woman reported having an abortion during the previous 12 months) ranged from .078 to .095, meaning that slightly less than one in ten women of childbearing age have an abortion each year. The abortion ratio (i.e., the ratio of induced abortions to live births) varied between 1.64, in Ivanovo, and 2.12, in Perm.

Women were asked about complications and health problems resulting from each induced abortion (including miniabortions) since the beginning of 1991, both soon after and at least six months after the procedure. Table 7 reveals that between 14 and 18 percent of abortions resulted in what women described as “complications requiring treatment” immediately after or soon after the procedure. The most commonly mentioned complication was excessive bleeding or hemorrhage, followed by pelvic pain. A large proportion of those complications also fell into the “other” category, a group requiring further examination.

Table 8 presents data on the proportion of abortions resulting in short-term complications, additional hospitalization, and long-term complications. For all three, rates tended to be lowest in Ivanovo, with little difference between Yekaterinburg and Perm. It appears that rates of reported complication do not differ appreciably between conventional abortions and miniabortions in any of the sites. However these figures do not take the seriousness of complications into account. In two of the locations (Ivanovo and Yekaterinburg), more than half of conventional abortions with complications resulted in extended hospitalization or rehospitalization, much higher than the figures for miniabortions there.

Pregnancy Outcomes

Only about one-third of all reported pregnancies ending since the beginning of 1994 resulted in a live birth (Table 9). About one in ten pregnancies ended in miscarriage or still birth. The majority of pregnancies in all three sites were terminated by abortion (either conventional or mini-abortion). The ratio of conventional abortions to miniabortions was on the order of 2:1. The proportion of pregnancies resulting in a live birth tended to decline sharply after age 20-24, supporting the theory that most couples still want to have their children while they are still young. The ratio of regular abortion to miniabortion stays fairly constant across ages, except in a few cells with relatively small numbers of pregnancies.

Pregnancy Intentions

As shown in Table 10, in all three sites, the majority of pregnancies that ended since the beginning of 1991 were reportedly unintended. The percent reported as planned ranged from only 34 in Perm to 43 in Ivanovo. In each location about one-third of pregnancies were said to be unwanted, i.e., they occurred when women already had all the children they wanted. An additional one out of every five pregnancies was mistimed, i.e., sooner than intended. Most pregnancies occurring when women had no children were intended, while very few were unwanted. On the other hand, among women with two or more living children, from 67% to 73% were unwanted. Only about 2% of pregnancies resulting in a live birth were classified as

unwanted, a clear indication that very few unwanted pregnancies are not terminated by induced abortion.

Table 11 presents the proportion of recent pregnancies resulting in a live birth, according to the planning status of pregnancies. More than three-fourths of planned pregnancies resulted in a live birth, compared with only 2 percent of unwanted pregnancies. Based on pregnancy outcomes, it appears that few of the pregnancies women were reportedly unsure about were wanted.

Respondents who reported that they were able to become pregnant were asked how many more children they would like to have. Overall, from 59%, in Perm, to 67%, in Ivanovo, said they wanted no more children (Table 12). Proportions wanting no more children increased sharply with the number of living children, from 10-13% for women with no children to at least 89% for women with two or more children. Even among women with only one child, about half wanted no more. Within categories of numbers of living children, differences between the three sites were small.

5. Contraception

One of the principal reasons for doing the RWRHS was to carry out an in-depth examination of contraceptive practices among women in the survey sites. Conventional wisdom has held that the prevalence of use of modern contraception in Russia is quite low, leading to high levels of unintended pregnancy and induced abortion there. This survey collected information on a broad array of topics related to contraception, including knowledge and use of contraceptive methods, source of methods, contraceptive failure and discontinuation, side effects, reasons for nonuse of contraception, and others.

Knowledge of Methods

Almost all respondents were familiar with oral contraceptives, the IUD, and condoms, the most widely used contraceptive methods in the surveyed populations (Table 13). Substantial majorities also were familiar with the diaphragm, female sterilization, and vasectomy. The only method asked about for which knowledge remained very low was Norplant, known to only 10-17% of respondents. Among non-supplied methods, both periodic abstinence and withdrawal were known by over 90% of women in each location. Women's knowledge of where contraceptive methods are available was also high. In every instance, the percentage of women reporting that they know where to obtain a given method was only slightly lower than the percentage saying they knew of the method.

Current Contraceptive Prevalence

Table 14 shows that contraceptive prevalence among women in registered or unregistered marriages to be very high in all three survey locations, ranging from 69% in Perm to 78% in

Ivanovo. Table 14 also reveals that far more users employ modern methods of contraception than traditional methods by a ratio of 3:1 or higher. Modern method prevalence was between 50 and 60 percent everywhere. Traditional methods (mainly periodic abstinence and withdrawal) were being practiced by between 14 and 18 percent of couples. Overall contraceptive prevalence was between 40 and 50 percent among women with no living children and rose to levels of about 70% or more for those with any living children.

The IUD was by far the most widely used contraceptive method by women in union in each of the three locations, accounting for more than half of all modern method use (Table 15). The only other modern methods that were commonly used were condoms (12-14%) and oral contraceptives (5-11%). Use of female sterilization was only 1-2%, despite the fact that most respondents wanted to have no more children. Periodic abstinence was used by 9-14% of married respondents. Reported use of withdrawal was uncommon in Yekaterinburg and Perm, but was as widely practiced as periodic abstinence in Ivanovo.

Table 16 shows the contraceptive method mix according to numbers of living children. The use of IUDs increases very markedly with increasing numbers of children, most notably in Ivanovo. On the other hand, use of oral contraceptives (OC) decreases with increasing numbers of children, except in Perm, where OC use was quite low. Periodic abstinence use increased everywhere with the number children, an unexpected finding, warranting further investigation. Contraceptive use among women in union was directly correlated with women's educational attainment (Table 17). Most of the difference between women of different educational levels was in condom, OC, and periodic abstinence use, all of which increased with education. Among the approximately two of every ten women never in union who were using contraception at the time of interview, most used condoms, OCs, or periodic abstinence (Table 18). Among women previously, but not currently, in union, slightly fewer than half were using a contraceptive method. As with women in union, the IUD was overwhelmingly the method of choice in all three sites.

Percentage distributions of sources of OCs, IUDs and condoms are displayed in Table 19. Pharmacies were the predominant source of OCs everywhere, with women's consultations far behind as the second most common source. Women's consultations were the leading source of IUDs, accounting for from 48% to 60%. Most of the remainder were supplied by hospitals or pharmacies. As expected pharmacies supplied most of the condoms used. Along with other commercial outlets they accounted for all but a small proportion of condoms. Unfortunately, the survey questionnaire did not differentiate between sources of prescriptions, places of purchase, and (for the IUD) place of insertion.

Reasons for not Using Contraception

In all three sites slightly more than half of married non-users of contraception cited the inability to become pregnant, current pregnancy, the desire to become pregnant, or lack of sexual activity as their reason for non-use (Table 20). The most commonly given other reasons were difficulty

getting pregnant, only occasional sexual activity, and fear of health effects. Just as importantly, reasons such as method cost or availability, lack of information regarding contraception, preference for abortion, and objections by the woman's partner were not very common. Neither were these reasons frequently mentioned by women who were not in union at the time of interview. Not surprisingly, the absence or infrequency of sexual activity were the reasons most commonly given by these women.

Unmet Need for Contraception

Table 21 presents estimates of the percentage of women in need of family planning services according to two definitions. By the first definition, women who are sexually active, not pregnant, able to become pregnant, do not want to become pregnant, and are not using any contraceptive method are considered to be in need of contraception. By this definition, unmet need ranges from 11% in Ivanovo up to 15% in Perm. The second definition includes users of periodic abstinence and withdrawal (methods with typically low use-effectiveness) as being in need. This approximately doubles the proportion in need to about one woman in four. Women with no living children are slightly less likely to be in need than those with children. It should be kept in mind, however, that these indicators do not take into account such factors as consistency of use and method effectiveness.

Preference for Other Methods

Current users of contraception were asked if they would prefer to be using some other method of preventing pregnancy. Table 22 shows that from 33% to 39% said they would prefer to be using another method, but the percentages differed considerably according to the method being used. Withdrawal was the method that women were the most likely to want to switch from (56% to 71%), followed by condoms (53% to 57%). Very few of the small number of women who had been sterilized indicated a preference for another method. Users of the IUD were also unlikely to say they preferred another method. The method most commonly mentioned as being the one women preferred to use, among women preferring a different method, was the IUD (data not shown).

Family Planning Referrals

Women with recent deliveries or induced abortions were asked about family planning discussions or referrals following those events (Table 23). About half of women with recent abortions reported that a doctor or nurse discussed family planning with them afterward. About one-third were referred for family planning services or counseling. About one-fourth left the health facility with a contraceptive method or a prescription for a method. The figures are substantially lower following deliveries than abortions. Between 31% and 41% had a doctor or nurse offer to discuss family planning with them. Only 4% to 6% left the facility with a family planning method or a prescription.

Communication with Family Planning Providers

Fewer than half of women (42% to 49%) who had ever used oral contraceptives, IUDs, or injectable contraceptives reported that the last time they started one of those contraceptives their provider discussed with them the variety of family planning methods available and which would be most appropriate for her (Table 24). Among ever-users of those methods, almost three-fourths reported that the choice of method was made by the woman herself or in conjunction with her provider. In the remaining cases, the women reported that the choice of method had been made solely by the provider. Of women who had such discussions, nearly all (93% to 95%) said they had received that information from a physician, rather than from other service providers such as feldshers, nurses, or midwives (data not shown).

The type of information conveyed by a provider in his/her interaction with a client can affect client satisfaction with services, as well as method continuation rates and correct method use. Of the women who said they had discussed family planning methods with a provider, only 49% to 59% reported that the provider had explained the possible side effects of the method chosen (Table 24). Between 58% and 68% of women reported that the provider had explained when to return to the service site for removal, resupply, or follow-up services. In both of these cases, women in Ivanovo were the most likely to report being given these important types of information.

Opinions about Fertility Control Methods

Respondents were asked to rate a number of birth prevention methods with regard to safety, naturalness, and cost, as well as to give each method an overall rating. For each characteristic women rated each method between 1 (extremely negative) and 10 (extremely positive). Table 25 shows the percentage of women who gave very low ratings (1,2, or 3) for each of seven methods. Probably the most noteworthy results are the extremely negative opinions held by respondents about both conventional abortion and miniabortion. The overall opinions about both, as well as the ratings with regard to safety, were almost universally negative at all three sites. With the exception of the IUD, every method was rated negatively overall by at least 40% of respondents in each location. After abortion and miniabortion, female sterilization and injectables were the methods most frequently viewed negatively. These two methods were also considered to be unsafe by about half of respondents who had an opinion. Condoms were considered the safest method, followed by the IUD. With regard to cost, tubal ligation and abortion were viewed by most women as expensive, while roughly half of respondents with an opinion on the subject felt that injectables and oral contraceptives were expensive. All methods about which women were asked in the survey were generally considered to be highly effective. (Not included in these tabulations are women who did not have an opinion about particular characteristics for a given method. For some methods, particularly injectables and tubal ligation, the proportions of women with no opinion were very high.)

Summary of Results Regarding Contraception

The fact that reported contraceptive prevalence is already quite high and unmet need for family planning services does not appear to be extremely widespread in the survey sites might give the initial impression that there is little need for interventions to improve contraceptive use in those places. However, looking only at the percentage of women or couples using a method of contraception neglects to take into account some very important information. Most importantly, despite high contraceptive prevalence, the rate of abortion in Russia is still among the highest in the world, with women averaging between two and three lifetime abortions in the survey sites. Also, in all three sites a minority of pregnancies were categorized as planned. In addition, about one-fourth of contraceptive users were employing methods that typically have very high failure rates (withdrawal and periodic abstinence). Still to be examined are patterns of use of contraception, in order to determine method-specific contraceptive failure and discontinuation rates, to see the extent to which high unintended pregnancy rates are the result of poor or inconsistent use, as opposed to nonuse of contraception.

6. Young Women's Sexual Experience

A series of questions regarding the start of sexual activity was asked of respondents between the ages of 15 and 24. Table 26 shows the percentage of young women at each age who reported ever having sexual intercourse. The median reported age at first intercourse is about 18 years, with very little difference between the three sites. There is little increase apparent after about age 21 in the percentage of women who are sexually experienced. Relatively few 15-year-olds (no more than one in ten) reported that they had ever had sexual intercourse.

Table 27 shows the percentage of young women who first had intercourse before marriage who used a contraceptive method on that occasion. Between 42% and 53% reported that they or their partner used contraception. Condoms were the method most often used, followed by withdrawal and oral contraceptives.

7. Maternal and Child Health

Each respondent who had given birth since the beginning of 1991 was asked a series of questions regarding her most recent pregnancy and delivery. This included questions on prenatal care, utilization of various health services, conditions and practices at the facility where she delivered, and infant feeding. Here we present some results regarding prenatal care and breastfeeding. Table 28 shows that the percentage of women who received no prenatal care during their last pregnancy leading to a live birth differed substantially, ranging from 4 (in Ivanovo) to 12 (in Yekaterinburg). Between 72% (Yekaterinburg) and 82% (Ivanovo) of mothers obtained prenatal care during the first trimester of pregnancy. It was rare for women to wait until the third trimester to begin prenatal care.

According to the survey, breastfeeding is a common practice in all three locations studied. The figures in Table 29 reveal that about nine of every ten women with a birth since January 1991 reported that they breastfed their most recently born child. They also show that the mean duration of breastfeeding, for those who did breastfeed, ranged from 5.5 months in Ivanovo to 8.8 months in Perm. A majority of infants under six months of age were still being breastfed, as were from 14% to 29% of infants between six months and one year of age. Although the prevalence of breastfeeding is high, further analysis of the infant feeding data collected in the survey is being carried out to look at the extent of exclusive breastfeeding, since some of the health and contraceptive benefits of breastfeeding may be diminished by the early introduction of other foods and liquids.

8. Sexually Transmitted Diseases

Sexually transmitted diseases (STDs) have been a growing problem in recent years in much of Russia. The 1996 RWRHS included a module on knowledge about and diagnosis of specific STDs and conditions often related to STDs. Table 30 shows the proportions of respondents who had ever heard of and the proportions ever diagnosed with selected conditions. Knowledge of gonorrhea and syphilis was nearly universal. The conditions known by the fewest respondents were human papilloma virus (12%-21%), genital herpes (16%-28%), genital ulcers (36%-47%) and chlamydia (27%-52%). High percentages of women reported having had pelvic inflammatory disease at some time during their life (31%-37%). From 4% to 9% of women said they had ever been diagnosed with genital ulcers. Reported lifetime incidence of gonorrhea and chlamydia were virtually identical in each of the locations, ranging from 1% to 4%. About 1% of women in each site said they had ever been diagnosed with syphilis. It should be kept in mind that, since these estimates are based on self-reports, there is a likelihood that the occurrence of STDs is underreported, owing to undiagnosed conditions and unwillingness to report them.

Among all respondents, only between 21% (Ivanovo) to 28% (Perm) said they had ever discussed the prevention of STDs with a health worker (data not shown).

9. Information, Education, and Communication (IEC)

The 1996 RWRHS included a series of questions regarding communication habits, preferences, and attitudes of survey respondents. This included questions on television viewing, radio listening, and newspaper reading. In addition, exposure to health information on television and in print in the 6 months prior to the survey was assessed, as was the acceptability of family planning and STD prevention information on television and radio. Finally, women's communication with health care providers was examined. These findings have programmatic implications for the development and placement of IEC messages in future interventions to improve reproductive health and utilization of services..

Television viewing habits

Ninety to 95% of women said they watch television virtually every day (Table 31). Daily viewing was higher in Ivanovo than in the other two sites, but in all three locations very few respondents did not watch television at least once a week. Television, especially using national channels, is clearly a promising means for reaching women with health information.

ORT and the All-Russia Channel were the national television stations watched by the largest proportion of women in all three sites, although ORT was most popular in Ivanovo and the All-Russia Channel was considerably less popular in Perm (Table 31). Another popular national television station, St. Petersburg TV, was watched by 52% in Perm and 65% in Ivanovo, but only by 35% in Yekaterinburg. Table 31 also shows the proportion of viewers who reported watching various local channels.

Table 32 shows that the most popular types of television programs in all three sites were entertainment programs, watched by 73% to 78% of viewers, and soap operas (68%-82%), followed by music programs/videos (63%-66%) and news (56%-65%). Women's programs and children's programs were also quite popular, each watched by about one-fourth to one-third of regular viewers.

The heaviest viewing times for television were in the evening, with between 63% and 73% of viewers reporting that they watched television between 8 p.m. and 10 p.m. (Table 32) Viewing after 8 p.m. was significantly lower in Ivanovo than in the other two sites, although still heavier than at other times of the day. In all three survey sites, viewing was spread out over more of the day during weekends, although viewing was still heaviest during evenings.

Radio listening habits

Between 55% and 60% of women said that they listen to the radio daily (Table 33). Another 8% to 10% listen to the radio at least once a week. Between one-fourth and one-third of respondents said that they rarely or never listen to the radio. The most listened to radio station in all three sites was Radio Russia, varying from 38% in Perm to 66% in Ivanovo. Radio Mayk was also a frequently listened-to station, especially in Yekaterinburg and Ivanovo. The bottom of Table 33 lists the proportion of listeners who reported listening to various local stations.

Music and news programs are far and away the most popular content choices among radio listeners in all three sites (Table 34). Between 76% and 82 % of female radio users said they listen to music programs and between 66% and 75% said they listen to the radio news. From 23% to 32% of listeners reported that they listen to women's programs, with slightly fewer listening to health programs. Health programs were most likely to be listened to in Ivanovo.

Radio listening times were fairly evenly spread throughout the day, although more women said they listen to the radio from 6-8 a.m. and from 6-8 p.m. than at other times of the day.

Newspaper readership

Only about one-fourth of women in each site said they never or almost never read newspapers (Table 35). Daily newspaper reading was most common in Ivanovo where 33% of the women said they read a newspaper every day, compared with about half as many in Yekaterinburg and Perm. The two nationally distributed newspapers that were most frequently read are *Arguments & Facts* (read by 22% to 42% of women, highest in Yekaterinburg) and *Komsomol Pravda* (read by 22% to 36% of women, highest in Perm). Between 71% and 81% of women who read newspapers said they read a local newspaper.

Exposure to and attitudes about health messages in the media

Exposure to family planning and sexually transmitted disease (STD) information in the media within the six months prior to the survey was fairly low. Only 22% to 23% of respondents reported seeing anything about family planning on television during that time (Table 36). Exposure to STD information was higher, from 47% to 49% of women said they had seen anything on television about STDs in the past six months.

Exposure to such information in print was also fairly low. Between 16% and 33% of women said they had seen a pamphlet, poster, or medical brochure on family planning in the past six months. Exposure was substantially higher in Perm than in the other two sites. Between 27% and 36% (lowest in Ivanovo) said they had seen anything about family planning in a newspaper or magazine in the past six months.

Even though exposure to family planning and STD information is fairly low, the vast majority of women said that such information should be available in the media. Support for STD prevention information is slightly stronger than for contraceptive information. Between 85% and 89% of women said that information on contraception should be broadcast on radio and television, while 90% to 95% said that STD prevention information should be broadcast.

TABLE 1
 Final Interview Status of Women Selected for Interview
 (Percentage Distribution)
 1996 Russian Women's Reproductive Health Survey

Final Interview Status	Ivanovo*	Yekaterinburg	Perm
Completed Interview		90.7	87.8
Selected Woman Not at Home		1.7	0.9
Selected Woman Refusal		4.1	4.1
Other		3.5	7.2
Total	100.0	100.0	100.0
<i>Number of Completed Interviews</i>	2016	1974	2007

*Data for Ivanovo not yet available.

TABLE 2
 Socio-Demographic Characteristics of Respondents
 (Percentage Distributions)
 1996 Russian Women's Reproductive Health Survey and
 Official Statistics (for Age)

Characteristics	Ivanovo		Yekaterinburg		Perm	
	Survey	Official Statistics	Survey	Official Statistics	Survey	Official Statistics
<u>Age</u>						
15-19	13.2	13.8	13.0	14.3	13.2	14.3
20-24	17.2	15.6	16.9	16.2	18.5	16.8
25-29	16.3	15.4	16.4	14.9	15.7	15.1
30-34	19.1	18.5	18.6	16.4	16.7	16.0
35-39	16.9	17.5	17.4	18.5	19.5	19.9
40-44	17.4	19.2	17.6	19.6	16.5	17.9
<u>Marital Status</u>						
Registered Marriage	62.0		57.8		55.3	
Unregistered Marriage	6.6		8.1		11.7	
Divorced/Separated	12.4		11.5		12.6	
Widowed	1.8		1.7		1.7	
Never Married	17.3		21.0		18.7	
<u>Education</u>						
< Complete Secondary	11.5		7.8		8.9	
Complete Secondary	65.6		60.6		63.2	
> Complete Secondary	22.9		31.6		27.9	
<u>Nationality</u>						
Russian	95.3		89.3		90.1	
Non-Russian	4.7		10.7		9.9	
<u>Religion</u>						
Orthodox	70.7		58.6		69.4	
Muslim	1.0		2.6		2.6	
Other	0.6		1.8		1.3	
None	27.7		37.0		26.8	
Total	100.0	100.0	100.0	100.0	100.0	100.0
<i>Number of Respondents</i>	2016		1974		2007	

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TABLE 3
 Percentage Distributions of Current Employment Status and Home Ownership
 and Percent of Women Who Live in Homes with Selected Possessions
 1996 Russian Women's Reproductive Health Survey

Characteristics	Ivanovo	Yekaterinburg	Perm
<u>Current Employment</u>			
Employed	60.2	63.3	64.2
On Maternity Leave	7.6	6.4	6.8
Not Employed*	32.2	30.3	29.1
Unemployed**	17.5	6.4	8.3
<u>Home Ownership</u>			
Cooperative	66.6	84.2	79.3
Own Home	23.3	1.0	1.1
Communal	3.8	3.7	5.9
Rent	4.2	3.2	5.1
Other	2.2	8.0	8.5
<u>Possessions in Home</u>			
Bathroom/Shower	65.4	94.4	95.5
Color Television	81.2	88.6	83.3
VCR	35.0	37.5	39.3
Telephone	31.1	41.4	42.0
Automatic Washing Machine	31.9	29.9	40.9
Automobile	22.1	24.3	22.2
Personal Computer	4.2	7.5	4.4
<i>Number of Respondents</i>	<i>2016</i>	<i>1974</i>	<i>2007</i>

*Does not currently have a job, regardless of reason.

**Does not have a job due to inability to find a job.

TABLE 4
Current Marital Status by Age of Respondent
(Percentage Distributions)
1996 Russian Women's Reproductive Health Survey

Marital Status	Age of respondent						
	15-19	20-24	25-29	30-34	35-39	40-44	15-44
Ivanovo							
Married	13.2	58.4	66.8	73.5	77.1	70.9	62.0
Unreg. Marriage	6.4	8.7	10.4	4.9	4.4	5.1	6.6
Divorced/Sep.	1.1	6.7	15.9	16.1	15.0	16.6	12.4
Widowed	0.0	0.9	0.6	2.3	1.2	5.1	1.8
Never married	79.3	25.4	6.4	3.1	2.4	2.3	17.3
<i>Number of women</i>	<i>266</i>	<i>346</i>	<i>328</i>	<i>385</i>	<i>341</i>	<i>350</i>	<i>2016</i>
Yekaterinburg							
Married	6.6	41.9	68.8	73.1	72.4	69.9	57.8
Unreg. Marriage	7.4	14.1	9.3	6.0	5.2	6.6	8.1
Divorced/Sep.	1.2	10.5	12.0	11.7	15.1	15.5	11.5
Widowed	0.0	0.3	0.9	2.2	2.6	3.5	1.7
Never married	84.8	33.2	9.0	7.1	4.7	4.6	21.0
<i>Number of women</i>	<i>256</i>	<i>334</i>	<i>324</i>	<i>368</i>	<i>344</i>	<i>348</i>	<i>1974</i>
Perm							
Married	7.2	47.9	60.8	71.6	64.5	69.5	55.3
Unreg. Marriage	14.4	18.9	12.1	9.3	9.0	7.0	11.7
Divorced/Sep.	2.7	7.3	17.2	13.1	16.9	16.6	12.6
Widowed	0.0	0.5	1.3	1.5	3.1	3.6	1.7
Never married	75.8	25.8	8.6	4.5	6.7	3.3	18.7
<i>Number of women</i>	<i>264</i>	<i>372</i>	<i>314</i>	<i>335</i>	<i>391</i>	<i>331</i>	<i>2007</i>
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

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TABLE 5A
 Mean Number of Live Births by Age of Respondent
 1996 Russian Women's Reproductive Health Baseline Survey

Age of Respondent	Ivanovo	Yekaterinburg	Perm
15-19	0.1	0.1	0.1
20-24	0.7	0.5	0.5
25-29	1.2	1.1	1.1
30-34	1.6	1.4	1.5
35-39	1.9	1.7	1.6
40-44	1.9	1.7	1.8
15-44	1.3	1.1	1.1

TABLE 5B
 Age-Specific and Total Fertility Rates*
 1996 Russian Women's Reproductive Health Survey

Age of Respondent	Ivanovo	Yekaterinburg	Perm
15-19	.062	.034	.038
20-24	.136	.100	.111
25-29	.060	.071	.064
30-34	.027	.034	.030
35-39	.007	.004	.012
40-44	.000	.003	.004
Total Fertility Rate	1.46	1.24	1.30

*Rates are for the 2-year period preceding date of interview.

TABLE 5C
 Percent of Women with at Least One Live Birth by Age of Respondent
 1996 Russian Women's Reproductive Health Survey

Age of Respondent	Ivanovo	Yekaterinburg	Perm
15-19	8.7	3.9	8.0
20-24	55.2	36.5	41.1
25-29	87.5	80.3	79.9
30-34	94.6	87.5	91.3
35-39	94.1	91.0	89.8
40-44	94.9	91.7	92.5
15-44	75.3	68.2	69.2

TABLE 6A
Mean Number of Abortions (Including Miniabortions) by Age of Respondent
1996 Russian Women's Reproductive Health Survey

Age of Respondent	Ivanovo	Yekaterinburg	Perm
15-19	0.1	0.1	0.1
20-24	0.5	0.5	0.5
25-29	1.0	1.2	1.3
30-34	1.4	1.6	1.6
35-39	1.4	1.9	1.9
40-44	1.5	2.1	2.1
15-44	1.0	1.3	1.3

TABLE 6B
Percent of Women with at Least One Abortion (Including Miniabortions) by Age of Respondent
1996 Russian Women's Reproductive Health Survey

Age of Respondent	Ivanovo	Yekaterinburg	Perm
15-19	7.1	8.2	11.0
20-24	35.6	35.3	36.6
25-29	61.9	62.0	65.3
30-34	74.3	71.7	72.2
35-39	74.2	79.7	79.0
40-44	72.3	85.1	80.4
15-44	56.4	59.5	59.1

TABLE 6C
Age-Specific Abortion Rates and Other Selected Measures of Induced Abortion*
1996 Russian Women's Reproductive Health Survey

Age of Respondent	Ivanovo	Yekaterinburg	Perm
15-19	.034	.045	.061
20-24	.145	.108	.133
25-29	.131	.118	.157
30-34	.084	.095	.105
35-39	.055	.059	.062
40-44	.021	.030	.041
Total Abortion Rate	2.36	2.28	2.80
Abortion Rate**	.083	.078	.095
Abortion Ratio***	1.64	1.87	2.12

*All rates are for the two year period preceding the date of interview.

**Proportion of women 15-44 years of age having induced abortions in one year.

***Ratio of induced abortions to live births

TABLE 7
 Reported Complications Requiring Medical Treatment
 Associated with Induced Abortions since January 1991
 (Percentage Distributions)
 1996 Russian Women's Reproductive Health Survey

Abortion Complications*	Ivanovo	Yekaterinburg	Perm
Any Complications	13.9	16.1	17.6
Bleeding/Hemorrhage	4.0	6.8	6.8
Pelvic Pain	2.6	2.3	3.1
Fever	1.6	1.5	2.1
Discharge	1.3	1.2	1.7
Other/Don't Remember	4.5	4.4	3.9
No Complications	86.1	83.9	82.4
Total	100.0	100.0	100.0
<i>Number of Abortions</i>	696	753	896

*Complications "soon after abortion".

TABLE 8
 Percent of Induced Abortions with Complications Requiring Medical Treatment,
 Percent of Those with Complications That Required Additional Hospitalization
 and Percent of Abortions Resulting in Health Problems at Least six Months Later,
 by Type of Abortion
 1996 Russian Women's Reproductive Health Survey

Type of Abortion	% with Complications Requiring Medical Treatment "Soon After Abortion"	% Receiving Additional Hospitalization	% of All Abortions with Related Long-Term Health Problems*
Ivanovo			
All Abortions	13.9	40.0	4.2
Regular Abortions	13.8	60.0	3.5
Miniabortions	14.0	31.2	5.3
Yekaterinburg			
All Abortions	16.1	49.2	7.3
Regular Abortions	17.7	54.8	8.1
Miniabortions	13.3	35.1	6.0
Perm			
All Abortions	17.6	43.0	8.4
Regular Abortions	18.1	41.6	9.2
Miniabortions	17.5	44.0	6.8

*At least six months after abortion.

TABLE 10
 Planning Status of Pregnancies Ending since January 1991
 by Number of Living Children at the Time of Pregnancy and Pregnancy Outcome
 (Percentage Distributions)
 1996 Russian Women's Reproductive Health Survey

Characteristics	Planning Status of Pregnancy				Total	(N)
	Planned	Mistimed	Unwanted	Unsure		
Ivanovo						
Total	43.0	18.9	30.7	7.4	100.0	1339
Living Children						
0	75.7	18.4	1.3	4.6	100.0	461
1	32.6	26.1	30.6	10.7	100.0	559
2+	14.1	6.9	73.4	5.6	100.0	319
Pregnancy Outcome						
Live Birth	88.6	6.2	1.9	3.4	100.0	535
Not Live Birth	12.3	26.9	50.6	10.2	100.0	788*
Yekaterinburg						
Total	36.9	20.4	34.4	8.3	100.0	1322
Living Children						
0	69.5	22.5	2.1	6.0	100.0	436
1	26.9	25.6	36.5	11.1	100.0	551
2+	11.0	9.0	73.1	6.9	100.0	335
Pregnancy Outcome						
Live Birth	88.3	5.5	2.2	4.1	100.0	418
Not Live Birth	12.8	26.6	50.6	9.9	100.0	875*
Perm						
Total	33.9	21.8	34.1	10.2	100.0	1530
Living Children						
0	62.8	23.9	2.9	10.4	100.0	527
1	24.2	25.3	40.5	9.9	100.0	624
2+	9.9	12.9	67.0	10.3	100.0	379
Pregnancy Outcome						
Live Birth	83.8	7.6	1.9	6.7	100.0	475
Not Live Birth	11.3	27.3	49.8	11.7	100.0	1027*

*Current pregnancies excluded from tabulations for pregnancy outcome.

TABLE 11
 Percent of Pregnancies Resulting in a Live Birth since the Beginning of 1991
 by Planning Status of Pregnancy
 1996 Russian Women's Reproductive Health Survey

Planning Status of Pregnancy	Ivanovo		Yekaterinburg		Perm	
	Percent	<i>Number of Pregs.</i>	Percent	<i>Number of Pregs.</i>	Percent	<i>Number of Pregs.</i>
Planned	82.8	564	76.5	477	77.1	506
Mistimed	13.1	244	9.0	256	11.4	316
Unwanted	2.4	409	2.0	452	1.7	520
Unsure	18.4	98	16.4	104	21.1	152
Total	40.1	1315	32.1	1289	31.3	1494

TABLE 12
 Percent of Fecund Women in Union Who Want to Have No More Children
 by Number of Living Children and Educational Level of Respondent
 1996 Russian Women's Reproductive Health Survey

Educational Level	Number of Living Children				
	Total	0	1	2	3+
Ivanovo, total	66.7	13.7	49.8	92.7	92.5
LE Complete Secondary	69.1	14.9	50.6	93.3	93.6
> Complete Secondary	59.6	11.4	47.7	90.7	*
Yekaterinburg, total	62.5	10.7	48.5	91.8	90.1
LE Complete Secondary	64.4	10.9	50.6	91.2	88.3
> Complete Secondary	58.5	10.5	44.2	93.2	*
Perm, total	58.5	13.1	43.0	89.3	90.0
LE Complete Secondary	59.5	14.3	42.4	88.5	89.6
> Complete Secondary	56.5	10.6	44.2	91.1	*

*Fewer than 25 cases.

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TABLE 13
 Percent of Respondents Who Know of Specific Contraceptive Methods and Percent Who Know Where to Obtain Those Methods
 1996 Russian Women's Reproductive Health Survey

Contraceptive Method	Percent Who Know of Method			Percent Who Know Where to Obtain Method		
	Ivanovo	Yekaterinburg	Perm	Ivanovo	Yekaterinburg	Perm
Condoms	99.3	99.2	98.9	98.8	98.0	98.3
IUD	98.9	99.2	99.6	96.4	98.2	98.0
Oral Contraceptives	97.8	98.7	98.8	94.8	96.3	97.0
Diaphragm	77.9	84.2	82.1	72.2	80.5	74.6
Female Sterilization	66.9	81.2	78.1	54.9	68.1	61.8
Vasectomy	53.4	70.5	64.3	42.7	56.2	48.1
Spermicide	45.0	64.9	67.3	40.3	59.8	61.8
Injections	36.2	51.5	47.4	31.3	42.5	38.7
Norplant	9.8	16.5	14.2	7.6	12.5	9.9
Periodic Abstinence	91.8	95.6	96.5	86.5*	91.5*	93.2*
Withdrawal	92.0	91.5	91.6	NA	NA	NA
<i>Number of Women</i>	<i>1383</i>	<i>1300</i>	<i>1344</i>	<i>1383</i>	<i>1300</i>	<i>1344</i>

*Percent who know where to get information on natural family planning methods

TABLE 14
 Percent Using Any Contraception, Modern Contraception, or Traditional Contraception*
 by the Number of Living Children, Women in Union
 1996 Russian Women's Reproductive Health Survey

Living Children	Current Contraceptive Use				No. of Women
	No Method*	Any Method	Modern	Trad. Method	
Ivanovo					
0	54.5	45.5	29.7	15.9	145
1	23.0	77.0	59.1	18.0	579
2+	14.5	85.5	67.1	18.4	657
Total	22.2	77.7	59.8	18.0	1381
Yekaterinburg					
0	59.9	40.1	28.7	10.4	202
1	28.8	71.2	59.9	12.3	521
2+	20.4	79.6	63.3	16.4	575
Total	29.5	70.5	54.0	13.9	1298
Perm					
0	54.3	45.7	33.0	12.7	221
1	31.0	69.0	52.1	16.9	545
2+	22.1	77.9	58.0	19.9	578
Total	31.0	69.0	51.5	17.5	1344

*Includes users of douche and folk methods.

TABLE 15
 Current Contraceptive Method, Women in Union
 (Percentage Distributions)
 1996 Russian Women's Reproductive Health Survey

Current Contraceptive Method	Ivanovo	Yekaterinburg	Perm
Using Any Method	77.7	70.5	69.0
Using A Modern Method	59.8	54.0	51.5
IUD	35.3	27.4	28.5
Condoms	13.2	11.9	13.6
Oral Contraceptives	8.0	10.6	5.4
Female Sterilization	1.9	1.8	1.3
Vaginal Methods	1.0	0.6	1.0
Morning-After Pills	0.1	0.2	0.5
Combinations of Methods	0.1	2.7	0.7
Other Methods	0.1	1.3	0.6
Using A Traditional Method	18.0	13.9	17.5
Periodic abstinence	8.9	11.4	13.8
Withdrawal	9.1	2.5	3.7
Using No Method*	22.2	29.5	31.0
Total	100.0	100.0	100.0
<i>Number of Respondents</i>	1381	1298	1344

*Includes users of douche and folk methods.

TABLE 16
 Current Contraceptive Method by Number of Living Children, Women in Union
 (Percentage Distributions)
 1996 Russian Women's Reproductive Health Survey

Current Contraceptive Method	Number of Living Children								
	Ivanovo			Yekaterinburg			Perm		
	0	1	2+	0	1	2+	0	1	2+
Using Any Method	45.5	77.0	85.5	40.1	71.2	79.6	45.7	69.0	77.9
Using Modern Method	29.7	59.1	67.1	28.7	59.9	63.3	33.0	52.1	58.0
IUD	6.2	31.1	45.5	4.0	27.6	35.5	9.1	27.2	37.2
Condoms	10.3	16.4	11.0	5.5	14.8	11.7	15.8	14.7	11.8
Oral Contraceptives	13.1	9.2	5.9	17.8	10.9	7.8	3.6	7.3	4.2
Female Sterilization	0.0	0.5	3.5	0.5	1.3	2.6	0.5	0.7	2.1
Vaginal Methods	0.0	1.2	1.1	0.0	1.2	0.4	0.5	1.1	1.2
Morning-After Pills	0.0	0.2	0.0	0.0	0.2	0.2	1.4	0.2	0.4
Combinations of Methods	0.0	0.4	0.0	1.0	2.5	3.5	1.8	0.2	0.7
Other Methods	0.0	0.2	0.2	0.0	1.3	1.7	0.5	0.7	0.5
Using Traditional Method	15.9	18.0	18.4	10.4	12.3	16.4	12.7	16.9	19.9
Periodic abstinence	5.5	9.3	9.3	6.4	9.4	15.0	7.2	12.8	17.3
Withdrawal	10.3	8.6	9.1	5.0	2.9	1.4	5.4	4.0	2.6
Using No Method*	54.5	23.0	14.5	59.9	28.8	20.4	54.3	31.0	22.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<i>Number of Respondents</i>	145	579	657	202	521	575	221	545	578

*Includes users of douche and folk methods

TABLE 17
 Current Contraceptive Method by Educational Level, Women in Union
 (Percentage Distributions)
 1996 Russian Women's Reproductive Health Survey

Current Contraceptive Method	Educational Level								
	Ivanovo			Yekaterinburg			Perm		
	<Comp. Sec.	Comp. Sec.	>Comp. Sec.	<Comp. Sec.	Comp. Sec.	>Comp. Sec.	<Comp. Sec.	Comp. Sec.	>Comp. Sec.
Using Any Method	63.8	76.4	85.4	50.9	67.9	78.4	51.8	66.0	78.8
Using Modern Method	48.9	59.4	64.0	37.7	54.5	63.2	32.1	51.7	54.9
IUD	31.9	35.8	35.1	24.5	28.4	25.7	11.1	30.5	27.7
Condoms	9.6	11.8	18.1	1.9	11.0	15.2	11.1	12.0	17.7
Oral Contraceptives	2.1	8.4	8.7	5.7	8.8	15.0	3.7	5.3	5.7
Female Sterilization	3.2	2.2	0.6	3.8	1.8	1.5	3.7	1.5	0.3
Vaginal Methods	2.1	1.0	0.9	0.0	0.7	0.5	1.2	0.8	1.5
Morning-After Pills	0.0	0.1	0.0	0.0	0.2	0.0	0.0	0.5	0.5
Combinations of Methods	0.0	0.1	0.3	1.9	2.0	4.2	1.2	0.5	1.0
Other Methods	0.0	0.1	0.3	0.0	1.4	1.2	0.0	0.7	0.5
Using Traditional Method	14.9	17.0	21.3	13.2	13.4	15.2	19.8	14.4	23.9
Periodic abstinence	4.3	8.2	12.3	7.6	11.7	11.3	14.8	10.9	20.0
Withdrawal	10.6	8.9	9.1	5.7	1.7	3.9	4.9	3.4	4.0
Using No Method*	36.2	23.6	14.6	49.1	32.1	21.6	48.2	34.0	21.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<i>Number of Respondents</i>	<i>94</i>	<i>945</i>	<i>342</i>	<i>53</i>	<i>837</i>	<i>408</i>	<i>81</i>	<i>862</i>	<i>401</i>

*Includes users of douche and folk methods

TABLE 18
 Current Contraceptive Method by Marital Status, All Women
 (Percentage Distributions)
 1996 Russian Women's Reproductive Health Survey

Current Contraceptive Method	Marital Status								
	Ivanovo			Yekaterinburg			Perm		
	In Union	Div./ Wid.	Never Marr.	In Union	Div./ Wid.	Never Marr.	In Union	Div./ Wid.	Never Marr.
Using Any Method	77.7	45.6	20.7	70.5	49.2	25.1	69.0	49.3	26.4
Using Modern Method	59.8	40.3	14.7	56.6	39.2	19.8	51.5	36.4	18.9
IUD	35.3	27.0	0.9	27.4	22.8	3.1	28.5	20.1	2.1
Condoms	13.2	4.6	6.0	11.9	7.7	6.8	13.6	6.6	9.9
Oral Contraceptives	8.0	6.7	6.3	10.6	6.2	8.4	5.4	5.6	5.3
Female Sterilization	1.9	1.4	0.3	1.8	0.8	0.0	1.3	0.7	0.0
Vaginal Methods	1.0	0.0	0.0	0.6	0.4	0.5	1.0	1.4	0.5
Morning-After Pills	0.1	0.4	0.9	0.2	0.4	0.7	0.5	1.4	0.5
Combinations of Methods	0.1	0.0	0.0	2.7	0.4	0.0	0.7	0.0	0.3
Other Methods	0.1	0.4	0.3	1.3	0.8	0.0	0.6	0.7	0.0
Using Traditional Method	18.0	5.3	6.0	13.9	10.0	5.3	17.5	12.9	7.5
Periodic abstinence	8.9	3.2	2.0	11.4	9.3	3.9	13.8	10.4	5.1
Withdrawal	9.1	2.1	4.0	2.5	0.8	1.5	3.7	2.4	2.4
Using No Method*	22.3	54.4	79.3	29.5	50.6	74.9	31.0	50.7	73.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<i>Number of Respondents</i>	<i>1381</i>	<i>285</i>	<i>348</i>	<i>1298</i>	<i>259</i>	<i>415</i>	<i>1344</i>	<i>288</i>	<i>375</i>

*Includes users of douche and folk methods

TABLE 19
 Source of Contraception for Current Users of Oral Contraceptives, IUD, and Condoms
 (Percentage Distributions)
 1996 Russian Women's Reproductive Health Survey

Source of Method	Contraceptive Method								
	Ivanovo			Yekaterinburg			Perm		
	OCs	IUD	Condom	OCs	IUD	Condom	OCs	IUD	Condom
Pharmacy	58.5	23.2	88.4	83.6	25.9	82.3	85.2	8.9	74.7
Women's Consultation	25.7	48.1	1.4	9.0	57.0	0.5	7.4	60.4	1.3
MCH Center	7.2	2.6	0.9	0.5	0.0	0.0	0.0	0.2	0.0
Hospital	3.3	19.5	1.4	1.6	12.6	0.0	3.7	24.7	0.0
Drug Kiosk	2.6	0.9	3.2	4.2	0.5	3.9	1.9	0.0	7.5
Private Clinic/Physician	0.7	0.4	0.0	0.0	0.5	0.5	0.9	1.3	0.0
Maternity House	0.0	2.1	0.0	0.0	1.4	0.0	0.0	2.2	0.0
Other Source	2.0	3.2	4.6	1.1	2.1	12.8	0.9	2.2	16.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<i>Number of Respondents</i>	<i>152</i>	<i>568</i>	<i>216</i>	<i>189</i>	<i>428</i>	<i>203</i>	<i>108</i>	<i>449</i>	<i>239</i>

TABLE 20
 Primary Reason for Not Using Contraception by Marital Status
 (Percentage Distributions)
 1996 Russian Women's Reproductive Health Survey

Reason For Not Using Contraception	Ivanovo			Yekaterinburg			Perm		
	In Union	Prev. Marr.	Never Marr.	In Union	Prev. Marr.	Never Marr.	In Union	Prev. Marr.	Never Marr.
Reasons Related to Pregnancy, Fecundity, or Sexual Activity									
Not Sexually Active	5.3	60.8	89.8	4.9	51.6	79.5	6.0	42.6	82.2
Pregnant	17.8	3.4	0.4	19.2	0.8	1.3	15.3	4.3	0.0
Subfecund	24.5	13.5	1.1	25.9	14.1	2.3	23.1	15.6	1.5
Want Pregnancy	9.8	5.4	2.6	15.1	6.3	0.7	14.3	5.0	2.2
Other Reasons									
Occasional Sex Only	7.7	10.1	4.4	3.2	10.2	9.6	5.7	16.3	9.1
Difficult to Get Preg.	11.5	0.7	0.7	14.0	6.3	0.7	9.6	7.1	0.7
Fear of Health Effects	5.6	2.0	0.4	3.2	1.6	2.0	6.2	0.7	0.4
Haven't Bothered	6.3	1.4	0.0	3.5	3.9	1.7	3.9	0.7	2.6
Breastfeeding/Postpart.	3.2	0.0	0.0	1.7	0.0	0.0	4.2	0.7	0.0
Cost/Availability	2.8	0.7	0.0	0.6	0.0	0.3	1.3	3.6	0.0
Previous Side Effects	0.7	0.7	0.4	2.0	0.0	0.0	1.3	0.7	0.0
Partner Objections	1.8	0.7	0.0	0.9	0.0	1.3	1.0	0.0	0.4
Dr. Will Not Prescribe	1.1	0.0	0.0	1.5	0.8	0.0	1.6	0.0	0.0
Prefer Abortion	1.1	0.0	0.0	0.9	0.0	0.0	0.5	0.0	0.4
Religion	0.0	0.0	0.4	0.0	0.0	0.0	0.8	0.0	0.0
Other	1.1	0.7	0.0	3.5	4.7	0.7	5.2	2.8	0.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of Respondents	286	148	275	344	128	303	385	141	275

TABLE 21
 Percent of Women in Need of Family Planning Services, According to Two Definitions*
 1996 Russian Women's Reproductive Health Survey

Unmet Need Definition	Ivanovo	Yekaterinburg	Perm
<u>Definition I</u>			
Total	11.0	14.8	15.3
Living Children			
0	8.4	12.7	11.5
1	13.4	16.6	17.7
2+	10.3	14.9	16.1
<u>Definition II</u>			
Total	23.6	25.2	28.3
Living Children			
0	16.3	19.6	18.4
1	27.1	26.2	31.9
2+	24.9	29.6	33.4

*Definition I: Women are considered to be in need if they are sexually active or in union, not pregnant, fecund, did not want to get pregnant at the time of interview, and are not using any type of contraception. Definition II is the same as definition I, except that it also includes women using typically less effective methods of contraception (withdrawal, periodic abstinence, douche, and folk methods).

TABLE 22
 Percent of Contraceptive Users Who Would Prefer Using a Different Method of Contraception
 1996 Russian Women's Reproductive Health Survey

Current Contraceptive Method	Ivanovo		Yekaterinburg		Perm	
	%	(N)	%	(N)	%	(N)
Withdrawal	55.9	145	70.7	41	67.7	65
Condoms	52.8	216	57.4	202	57.3	239
Oral Contraceptives	43.4	152	42.3	189	55.6	108
Periodic Abstinence	46.0	139	33.5	188	40.9	235
IUD	15.5	567	22.7	428	21.6	449
Female Sterilization	0.0	30	13.0	23*	0.0	19*
All Methods	32.8	1,294	36.9	1,185	39.2	1,208

*Fewer than 25 cases.

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TABLE 23
 Percent of Women Who Received Various Family Planning Services
 After Their Most Recent Delivery or Abortion
 Among Women Who Had A Delivery or Abortion Since January 1991
 1996 Russian Women's Reproductive Health Survey

Type of Service	Ivanovo		Yekaterinburg		Perm	
	%	(N)	%	(N)	%	(N)
<u>Post-Abortion</u>						
Talked to About Ways to Prevent Pregnancy	51.1	519	58.4	541	49.5	602
Referred for Contraceptive Services or Counseling	30.3	519	33.3	543	31.9	602
Left Facility with Contraceptive Method or Prescription	23.8	518	26.9	542	21.3	600
<u>Post-Delivery</u>						
Doctor or Nurse Offered to Discuss Contraception	30.9	387	37.0	387	40.9	438
Left Facility with Contraceptive Method or Prescription	5.6	387	4.1	387	3.7	437

TABLE 24
 Percent of Women Who Received Various Types of Counselling*
 Among Women Who Have Ever Used Oral Contraceptives, the IUD, or Injectable Contraceptives
 1996 Russian Women's Reproductive Health Baseline Survey

	Yekaterinburg	Perm	Ivanovo
Percent with whom health provider discussed various methods of FP	42.4	42.1	48.9
Percent to whom provider explained possible side effects of the selected method	49.0	53.8	59.1
Percent to whom provider explained when to return for removal, refill, follow-up	58.2	66.3	67.8
<i>Number of Respondents</i>	<i>972</i>	<i>944</i>	<i>973</i>
Percentage distribution of the person selecting respondent's most recent contraceptive method:			
Respondent	60.6	62.6	61.0
Provider	27.6	27.6	29.2
Both	11.8	10.4	9.8
Total	100.0	100.0	100.0
<i>Number of Respondents</i>	<i>960</i>	<i>938</i>	<i>969</i>

*Counselling during the most recent visit concerning family planning.

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TABLE 25
Percent of Respondents Giving Various Fertility Control Methods Low Ratings
Overall and with Regard to Selected Characteristics of Method
1996 Russian Women's Reproductive Health Survey

Characteristic	Method of Controlling Fertility						
	Oral Contracept.	IUD	Injectables	Condoms	Female Sterilization	Induced Abortion	Mini- Abortion
<u>Overall</u>							
Ivanovo	53.0	26.3	67.9	41.9	69.4	97.4	96.3
Yekaterinburg	49.2	35.4	68.2	45.5	80.8	98.1	96.5
Perm	50.6	31.4	69.1	42.7	73.2	97.2	95.7
<u>Safety/Health</u>							
Ivanovo	32.3	17.7	49.1	2.7	52.0	92.0	88.5
Yekaterinburg	26.9	22.0	50.9	2.3	54.8	93.5	87.0
Perm	27.4	20.8	49.1	2.9	42.9	89.9	83.3
<u>Effectiveness</u>							
Ivanovo	8.9	4.4	9.5	5.0	3.1	NA	NA
Yekaterinburg	6.2	4.7	7.1	3.9	2.4	NA	NA
Perm	8.1	4.7	9.0	3.6	2.5	NA	NA
<u>Cost</u>							
Ivanovo	52.1	28.3	62.3	16.8	74.8	68.4	71.2
Yekaterinburg	36.4	15.2	51.8	8.2	74.2	71.8	64.4
Perm	36.0	17.6	47.3	11.4	70.6	56.8	54.8

NOTE: Respondents with no opinion have been deleted from the estimates for the corresponding cells.

TABLE 26
 Percent of Respondents Between the Ages of 15 and 24
 Who Have Ever Had Sexual Intercourse, by Current Age
 1996 Russian Women's Reproductive Health Survey

Current Age	Ivanovo	Yekaterinburg	Perm
15	9.1	6.8	10.0
16	26.2	18.6	26.8
17	19.2	43.8	45.3
18	61.8	50.9	65.5
19	73.5	68.8	75.0
20	80.7	80.8	78.4
21	91.9	88.2	93.7
22	88.5	89.1	90.0
23	93.0	90.3	93.5
24	94.6	100.0	98.4
15-17	18.1	23.7	29.1
18-19	68.3	60.5	70.6
20-24	90.4	89.1	90.6
15-24	69.4	68.2	73.4

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TABLE 27
Contraceptive Method Used at First Sexual Intercourse
Among Respondents Between the Ages of 15 and 24 with Premarital Sexual Experience
(Percentage Distributions)
1996 Russian Women's Reproductive Health Survey

Contraceptive Method	Ivanovo	Yekaterinburg	Perm
Used Any Contraception	42.1	52.5	46.8
Condoms	17.0	30.1	26.8
Withdrawal	14.2	8.0	8.4
Oral Contraceptives	5.5	7.4	4.8
Periodic Abstinence	5.2	5.6	5.1
Other Methods	0.0	0.9	0.8
Don't Remember Method	0.3	0.6	1.0
Used No Contraception	57.9	47.5	53.2
Total	100.0	100.0	100.0
<i>Number of Respondents</i>	<i>330</i>	<i>339</i>	<i>395</i>

TABLE 28
 When Prenatal Care Began and Primary Provider of Prenatal Care
 for the Most Recent Pregnancy Resulting in a Live Birth Since January 1991
 (Percentage Distributions)
 1996 Russian Women's Reproductive Health Survey

When Prenatal Care Began	Ivanovo	Yekaterinburg	Perm
First Trimester	81.6	72.3	79.2
Second Trimester	13.6	11.4	12.5
Third Trimester	1.2	0.8	0.5
No Prenatal Care	3.7	11.5	7.8
Total	100.0	100.0	100.0
<i>Number of Pregnancies</i>	435	361	385

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TABLE 29
 Percent of Most Recently Born Children, Born Since January 1991, Who Were Ever Breastfed,
 Percent of Babies Under Two Years of Age Still Being Breastfed by Current Age,
 and Mean Duration of Breastfeeding
 1996 Russian Women's Reproductive Health Survey

	Ivanovo		Yekaterinburg		Perm	
	%	(N)	%	(N)	%	(N)
% Ever Breastfed	86.2	499	92.5	389	91.5	435
% Currently Breastfed*						
<6 Months Old	71.9	32	59.4	32	63.3	49
6-11 Months Old	14.0	50	20.9	43	29.2	24
12-23 Months Old	7.4	108	6.0	73	16.3	92
Total (<24 Months Old)	22.0	190	22.5	142	32.1	165
Mean Duration (Months)**	5.5		5.8		8.8	

*Percent of all living children currently breastfed.

**Mean duration only for children who were ever breastfed, calculated using current status data.

TABLE 30
 Percent of Respondents Who Have Ever Heard of Selected Conditions and
 Percent Who Report Ever Having Been Diagnosed With Those Conditions
 1996 Russian Women's Reproductive Health Survey

Condition	Ivanovo		Yekaterinburg		Perm	
	Heard of	Diagnosed With	Heard of	Diagnosed With	Heard of	Diagnosed With
Syphilis	98.1	0.6	98.8	0.8	98.3	0.9
Gonorrhea	94.4	1.2	97.2	2.0	96.8	3.2
Pelvic Inflammatory Disease	90.8	31.0	92.5	32.4	92.0	37.3
Trichomoniasis	71.9	5.5	79.0	6.9	86.5	12.0
Genital Ulcers	47.2	9.3	36.0	4.9	35.5	4.2
Chlamydia	27.2	1.0	52.0	2.6	46.5	3.9
Genital Herpes	15.7	0.7	28.4	1.0	26.7	1.1
Human Papilloma Virus	11.7	0.7	19.3	0.9	21.0	1.3
Vaginal Discharge	88.0	29.7	90.2	41.4	92.5	45.3
<i>Number of Respondents</i>	2016		1974		2007	

TABLE 31
Television Viewing Frequency and Channels Regularly Watched
1996 Russian Women's Reproductive Health Baseline Survey

	Yekaterinburg	Perm	Ivanovo
Frequency of television viewing			
Every day	89.5	90.1	95.1
At least once a week	7.3	7.7	2.5
At least once a month	0.7	0.3	0.3
Less than once a month/Never	2.3	1.5	1.7
<i>Number of Respondents</i>	1972	2006	2013
Percent who watch specific TV channels*			
<u>National channels</u>			
ORT	87.7	84.1	94.0
All-Russia Channel	71.8	60.5	77.9
St. Petersburg TV	34.9	51.5	65.3
NTV	30.7	28.9	36.3
<u>Local channels</u>			
Yekaterinburg			
ASV	53.8	--	--
Channel 4	53.0	--	--
Channel 51	41.0	--	--
Channel 10	23.4	--	--
URT	22.9	--	--
ASV	17.4	--	--
STK-24	15.9	--	--
Ehra-TV	10.6	--	--
Perm			
Rifad	--	63.7	--
Yepa	--	34.7	--
TV-Maksima	--	28.3	--
Perm oblast TV "P"	--	25.9	--
Ivanovo			
Bars	--	--	31.7
IPRK	--	--	25.2
Diart	--	--	23.6
Channel 37	--	--	17.8
<i>Number of Respondents</i>	1928	1978	1983

*Of respondents who watch television at least once per month.

TABLE 32
Types of Television Programs Preferred and Most Frequent Viewing Times
1996 Russian Women's Reproductive Health Baseline Survey

	Yekaterinburg	Perm	Ivanovo
Programs Watched Most Often			
Entertainment	73.2	72.7	77.8
Soap operas	68.4	76.5	81.7
Music programs/Videos	66.0	63.0	65.8
News	65.1	56.1	61.4
Women's programs	46.8	44.2	35.9
Health programs	32.4	24.8	34.4
Children's programs	31.3	26.2	37.4
Political events	29.1	26.0	26.4
Plays/Dramas	16.3	11.4	15.1
Sports	12.4	8.9	16.9
Business programs	8.7	6.3	10.9
Church/Religious programs	7.6	4.4	9.0
Other	15.8	12.2	6.2
Weekday times most often watch TV			
6-8 am	4.5	5.6	4.9
8-10 am	7.6	7.7	11.1
10 am-noon	7.4	9.3	10.2
Noon-2 pm	4.3	5.2	8.6
2-4 pm	5.5	6.0	8.9
4-6 pm	11.4	12.2	15.5
6-8 pm	51.5	52.6	56.1
8-10 pm	72.2	72.6	63.1
After 10 pm	46.0	48.3	38.2
No regular times	18.6	15.5	26.3
Weekend times most often watch TV			
6-8 am	2.1	1.2	2.0
8-10 am	7.7	5.8	9.9
10 am-noon	21.4	23.3	26.1
Noon-2 pm	19.1	19.4	21.5
2-4 pm	19.4	17.9	19.7
4-6 pm	22.5	21.1	23.1
6-8 pm	37.9	38.7	40.7
8-10 pm	43.0	45.6	46.3
After 10 pm	32.1	34.0	31.8
No regular times	47.8	45.5	45.9
<i>Number of Respondents</i>	1928	1978	1983

TABLE 33
Radio Viewing Frequency and Stations Regularly Listened to
1996 Russian Women's Reproductive Health Baseline Survey

	Yekaterinburg	Perm	Ivanovo
Frequency of radio listening			
Every day	55.5	59.9	59.5
At least once a week	8.4	9.6	7.2
At least once a month	1.8	2.2	1.6
Less than once a month/Never	33.2	27.1	26.2
<i>Number of Respondents</i>	<i>1967</i>	<i>2002</i>	<i>2016</i>
% who listen to specific stations			
<u>National stations</u>			
Radio Russia	49.2	37.8	66.0
Radio Mayk	38.7	13.1	31.8
Europa Plus	25.5	8.9	18.0
Radio-1	7.9	3.1	14.1
<u>Local stations</u>			
Yekaterinburg			
Sverdlovsk Oblast Radio	30.5	--	--
Radio Siity	27.3	--	--
Studio City	20.7	--	--
Radio Daytime	18.4	--	--
Radio "Style FM"	3.6	--	--
Perm			
Artoradio	--	44.4	--
Perm Oblast Radio	--	37.0	--
Radio Maksima	--	36.9	--
Music Radio	--	14.5	--
Radio Mediana	--	7.5	--
Radiodom-City Radio	--	3.9	--
Ivanovo			
Ivanovo Oblast Radio	--	--	46.4
Radio Reks	--	--	20.0
Radio Uzel	--	--	15.8
<i>Number of Respondents</i>	<i>1320</i>	<i>1467</i>	<i>1489</i>

*Of respondents who listen to the radio at least once per month.

TABLE 34
Types of Radio Programs Preferred and Most Frequent Listening Times
1996 Russian Women's Reproductive Health Baseline Survey

	Yekaterinburg	Perm	Ivanovo
Programs Listened to Most			
Music	81.8	78.1	76.2
News	74.4	66.1	75.2
Women's programs	29.2	23.3	32.2
Commercials	27.4	26.5	28.4
Personal announcements	27.4	24.4	37.1
Political events	27.4	21.3	25.9
Plays/Dramas	21.5	17.9	24.0
Health programs	19.6	20.3	32.6
Church/Religious programs	9.6	4.7	10.7
Business programs	9.3	6.4	10.0
Sports	8.5	7.4	13.2
Other	9.0	8.7	4.4
Times most often listen to radio			
	28.4	28.4	31.3
6-8 am	13.6	15.3	14.8
8-10 am	10.8	12.9	7.7
10 am-noon	11.5	12.4	10.3
Noon-2 pm	10.9	12.5	8.4
2-4 pm	11.8	12.9	8.8
4-6 pm	17.4	19.1	17.6
6-8 pm	13.3	16.1	12.2
8-10 pm	8.2	10.2	6.9
After 10 pm	24.8	26.3	38.9
No regular times			
<i>Number of Respondents</i>	<i>1320</i>	<i>1467</i>	<i>1489</i>

TABLE 35
 Percentage Distribution of Frequency of Reading Newspapers and
 Percent of Women Who Read Specific Newspapers*
 1996 Russian Women's Reproductive Health Baseline Survey

	Yekaterinburg	Perm	Ivanovo
Frequency of reading newspapers			
Every day	17.9	15.8	33.4
3-4 times per week	12.3	14.3	12.5
1-2 times per week	30.4	36.0	20.8
Less than once per week	14.6	10.5	9.8
Never/almost never	24.6	23.3	23.5
<i>Number of Respondents</i>	1974	2008	2016
% who read specific newspapers			
Arguments & Facts	41.9	30.6	21.7
Komsomol Pravda	21.9	35.9	19.9
Izvestia	5.2	2.1	2.0
Russian Newspaper	4.8	7.9	4.0
Commercant	3.4	1.6	1.9
Labor	3.2	3.9	4.7
Independent	1.3	1.0	1.7
Pravda	0.9	0.7	0.6
Soviet Russia	0.6	1.2	1.7
Today	0.3	0.4	1.3
Red Star	0.1	1.2	0.6
Other national newspapers	25.0	19.2	8.6
Local newspapers	71.2	74.2	81.0
<i>Number of Respondents</i>	1488	1540	1566

*Of respondents who read newspapers

TABLE 36
 Women's Exposure to Family Planning and STD Messages and
 Attitudes about Broadcast Information on Family Planning and STDs
 1996 Russian Women's Reproductive Health Baseline Survey

	Yekaterinburg	Perm	Ivanovo
Percent who had seen anything on television within the previous six months about:			
Family planning	22.4	22.0	23.2
Sexually transmitted diseases	47.2	48.9	41.8
Percent who had seen FP information within the previous six months in:			
Pamphlets/Posters/Brochures	25.1	32.9	16.2
Newspapers/Magazines	35.9	35.4	27.4
Percent who think information should be broadcast on radio and television about:*			
Contraception	85.1	88.7	85.7
Ways to prevent STDs	91.8	94.6	89.9
<i>Number of Respondents</i>	<i>1974</i>	<i>2008</i>	<i>2017</i>

*Missing information for 14 women regarding whether information should be broadcast.