



Rural Montanans' attitudes toward birth control correlated with selected personal factors
by Pauline Odegard Johnson

A thesis submitted to the Graduate Faculty in partial fulfillment of the requirements for the degree of
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Abstract:

The purpose of this study was to discover what attitudes rural Montanans have toward birth control and to correlate this finding with their attitudes toward marital roles, marital communication and their knowledge of sex and methods of birth control. The random sample included a total of 332 men and women 18 years or older, who lived in cities, towns, or on farms in 12 randomly selected counties in Montana. A survey booklet was used to collect the data. Five instruments were used to elicit information for this study: an instrument that collected personal background information, a scale developed by Wang and Thurstone to obtain attitudes toward birth control, an inventory designed by the investigator to gather family planning and sex knowledge, the Marriage Role Expectation Inventory developed by Marie S. Dunn, and an attitude scale of marital communication created by Millard J. Bienvenu, Sr. Several significant relationships were found to exist, some of which were: as age went up, attitudes toward birth control were less favorable; the less one attended church, the less favorable were his attitudes toward birth control; as the number of children a family had increased, attitudes toward birth control became less favorable; the less education one had the less favorable were his attitudes toward birth control; as education increased, sex knowledge increased; and marital communication increased as knowledge of birth control increased. In addition the mean scores for this sample indicated that: their attitudes were quite favorable toward birth control, their attitudes toward marital roles were traditional, their level of marital communication was relatively high, and they answered more than half of the questions on the sex inventory correctly.

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CORRELATED WITH SELECTED PERSONAL FACTORS

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A thesis submitted to the Graduate Faculty in partial
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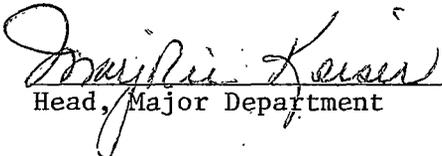
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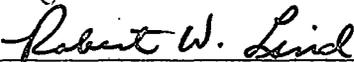
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ABSTRACT

The purpose of this study was to discover what attitudes rural Montanans have toward birth control and to correlate this finding with their attitudes toward marital roles, marital communication and their knowledge of sex and methods of birth control. The random sample included a total of 332 men and women 18 years or older, who lived in cities, towns, or on farms in 12 randomly selected counties in Montana. A survey booklet was used to collect the data. Five instruments were used to elicit information for this study: an instrument that collected personal background information, a scale developed by Wang and Thurstone to obtain attitudes toward birth control, an inventory designed by the investigator to gather family planning and sex knowledge, the Marriage Role Expectation Inventory developed by Marie S. Dunn, and an attitude scale of marital communication created by Millard J. Bienvenu, Sr. Several significant relationships were found to exist, some of which were: as age went up, attitudes toward birth control were less favorable; the less one attended church, the less favorable were his attitudes toward birth control; as the number of children a family had increased, attitudes toward birth control became less favorable; the less education one had the less favorable were his attitudes toward birth control; as education increased, sex knowledge increased; and marital communication increased as knowledge of birth control increased. In addition the mean scores for this sample indicated that: their attitudes were quite favorable toward birth control, their attitudes toward marital roles were traditional, their level of marital communication was relatively high, and they answered more than half of the questions on the sex inventory correctly.

CHAPTER I

INTRODUCTION

Background Information

Metropolitan areas and the urban poor have been the focal point of most family life research. As a result there has been little emphasis on studying the rural family and virtually no research has been done on the life styles of rural Montanans. In the rural west a vast majority of the research funded by state agricultural experiment stations is aimed at crop and livestock production.

It was therefore an especially important step when in June of 1972 the Montana Agriculture Experiment Station at Montana State University, Bozeman, Montana approved a research proposal submitted by Dr. Robert W. Lind, titled "Rural Family Life Styles in Montana." The purpose of the study was to learn the attitudes, practices, and degree of knowledge of rural Montanans in various areas pertaining to family life styles.

The total survey instrument, besides providing general background information on the subjects, dealt with housing and homemaking, marital roles, marital communication, family planning and sex knowledge, child rearing, nutrition knowledge, consumer knowledge, education, social life and recreation.

Purpose

The present study focuses on only a small portion of the total study. The specific purpose addressed by this research is to determine

the influence of certain personal and demographic variables on four major indices: attitudes toward birth control, marital roles, marital communication, and sex knowledge.

Specifically the variables are: age, occupation, number of children, educational attainment, income, marital status, and the church attendance of a rural Montana sample.

In addition to the purpose mentioned above, any inter-relationships that exist between attitudes toward birth control, marital roles, marital communication, and general sex knowledge will be determined.

Justifications

Very often when agencies and people in the helping professions are planning programs for the people they will be serving they fail to do research about them. Instead, they decide what is best for the consumers, what they need, and what they should know. An effort must be made to determine who the consumers really are, their attitudes, practices, and knowledge. Without this information the programs planned would only be guessing at the needs of the people.

Knowledge derived on birth control could be utilized in many ways. For example, the State Department of Health, the public health departments, and the family planning clinics would be aided by this information in designing programs of activity, education, and information which will meet the real needs of Montanans and enhance their lives.

The information could also be used by schools, extension agents, churches, youth leaders and any other interested community organizations.

The U. S. Department of Health, Education and Welfare has made a request for information that would provide direction and guidance to administrators in the field of family planning at the national, regional, state, and local levels (U. S. Government Printing Office, 1971). This study could provide such information.

Finally, this research is addressed to a major goal established for home economics research by 82 professionals in 1970. This group of professionals included representatives from 39 colleges and universities, business and industry, social services and welfare, consumer institutes, the Cooperative State Research Service and the Agricultural Research Service divisions of the U. S. Department of Agriculture, the U. S. Department of Health, Education and Welfare, regional Agricultural Experiment Station Directors, the Experiment Station Committee on Organization and Policy, the Extension Committee on Policy, the American Home Economics Association, the Home Economics Commission of the National Association of State Universities and Land Grant Colleges, and the National Council of Administrators of Home Economics. Other college home economics administrators and researchers also contributed by outlining goals, examining resources, and establishing priorities of needed research in the area of home economics.

The following research goals were formulated:

- Goal I. IMPROVE THE CONDITIONS CONTRIBUTING TO MAN'S PSYCHOLOGICAL AND SOCIAL DEVELOPMENT
- Goal II. IMPROVE THE CONDITIONS CONTRIBUTING TO MAN'S PHYSIOLOGICAL HEALTH AND DEVELOPMENT
- Goal III. IMPROVE THE PHYSICAL COMPONENTS OF MAN'S NEAR ENVIRONMENT
- Goal IV. IMPROVE CONSUMER COMPETENCE AND FAMILY RESOURCE USE
- Goal V. IMPROVE THE QUALITY AND AVAILABILITY OF COMMUNITY SERVICES WHICH ENRICH FAMILY LIFE

This research is primarily concerned with Goal I, Research Problem Area 7--Family Planning, although the research makes some contributions to all give of the goals (Schlater, 1970: 15-26).

CHAPTER II

REVIEW OF LITERATURE

The Meaning of Family Planning

Family planning is often misconstrued by the general public as meaning just reduction of family size. This is the goal in some cases, but the essential idea of family planning is that it is a health measure that enables a couple to have the number of children they want, and at the time they want them. It is parenthood by choice rather than by chance and it is completely voluntary. The ultimate goal is the elimination of all unwanted births.

History of Family Planning

According to Norman Himes, who has recorded the history of contraception, limiting the number of children that are born is not a modern idea (Westoff and Westoff, 1971). Himes found that abortion and infanticide were the main means of limiting births in primitive societies.

Other primitive methods of limiting births, many of which are still in use, follow: in East Africa women placed certain roots under their heads at night or wore a magic cord tied tightly around their stomach; in North Africa some women used herbs and walked over a grave and ate castor beans; in Central Africa women plugged their vaginas with rags or grass; in North America, Cherokee women chewed and swallowed the musquash root for four consecutive days; the women of Guiana douched with a solution of lemon juice and juice from the husks of the mahogany

nut; the women Bush Negroes of Dutch Guiana inserted an okra-like seed pod about five inches long with the end snipped off into their vaginas; in Australia the primitive natives drank herbs and roots mixed with spider's eggs and snakeskins; the Australian aborigines made an incision above the penis so that during intercourse the semen came out this incision rather than entering the female's vagina (Westoff et. al., 1971).

Himes points out that the oldest written medical prescriptions mentioning contraception are from the Petri Papyrus dating back to 1850 B. C. Crocodile dung mixed with a pastelike substance and put into the vagina was advised. In 1500 B. C. a tampon covered with honey and gum arabic was prescribed (Westoff et al., 1971).

Even Greek philosophers, Aristotle and Plato, were concerned about limiting births. Plato believed that the age during which a couple could have children should be set by law (Westoff et al., 1971).

In addition superstition and physical action, such as jumping and sneezing were used. A method mentioned in the Old Testament and still used today is withdrawal (Jones, Shainberg, and Byer, 1969). The early Egyptians used protectors similar to the present day condom. The ancient desert travelers in Africa used a crude form of the IUD, inserting stones into their camels' uterus so the animals could not conceive on their long journeys. Casanova provided his women with used lemon halves to use as diaphragms (Wood, 1971).

English writers B. E. Finch and Hugh Green noted another ancient technique suggested to women by the first Chinese philosophers who urged an attitude of complete passivity during intercourse, because to enjoy intercourse was satanical in origin and often resulted in pregnancy (Finch and Green, 1971).

In 1820, an Englishman named Francis Place, and father of 15 children urged women to place a piece of sponge with a string attached into the vagina before intercourse. He is credited with being the founder of the English birth control movement (Westoff et al., 1971).

The American birth control movement followed the English movement in 1828. It was begun by two doctors, Robert Dale Owen and Charles Knowlton, author of The Fruits of Philosophy which was the first book published in the United States dealing with contraception. Probably the most famous crusader for birth control in America was Margaret Sanger, who devoted herself to teaching women about contraception so they could escape the burden of unwanted pregnancies. In 1914, The Voluntary Parenthood League, today known as Planned Parenthood/World Population, was founded by a group of feminists led by Margaret Sanger (Westoff et al., 1971).

The Necessity for Family Planning

Margaret Sanger believed that, "The first right of every child is to be wanted, to be desired, to be planned with an intensity of love that gives it its title to being (Planned Parenthood of Missoula, Inc.,

1971)." According to Dr. Karl Menninger, the world famous psychiatrist, "Nothing is more tragic, more fateful in its ultimate consequences, than the realization by a child that he was unwanted (Wood, 1971: 141)." Princeton University population expert, Dr. Charles F. Westoff et al., reported that 35 to 45 percent of the population growth in the United States is accounted for by unwanted births (Wood, 1971).

The Westoffs in their book, From Now To Zero, state that,

Most of the unwanted children are probably loved and happily raised; however, many of the children may grow up suffering the consequences of their parents' inability to control pregnancies. At one possible extreme, there are the thousands of children in pitifully battered condition in children's wards of local hospitals, having received broken bones and beatings from mothers and fathers who cannot cope with them. Other children no doubt, bear the strain of overcrowded living conditions and lack of personal care and attention; many may add to the emotional tension in a family that did not plan for them or want them; many may inadvertently contribute to the breakup of marriages and must thus be raised without fathers in a matriarchal world of overwork, fatigue and depression. Many such children later on surely turn to harmful drugs, become mentally ill or criminally aggressive because of the atmosphere they innocently enter (Westoff et al., 1971: 295).

Dr. E. James Lieberman, a psychiatrist at the Center for Studies of Child and Family Mental Health at the National Institute of Mental Health has done research on the effect family size has on children. He concluded that there are biological differences between youngsters from small and large families. Children in smaller families are brighter, bigger and taller, and more creative than children from large families. In addition children from large families very often do

not have their emotional needs met, because their mother is too busy or tired; very often older brothers and sisters are given the responsibilities of caring for the younger children (Westoff et al., 1971).

In a number of studies reviewed by Edward Pohlman it was suggested that a developing fetus may be affected by a mother's negative feelings towards the developing baby. One study suggests that a baby born to a mother that is unhappy about the birth is more likely to be hyperactive and irritable and later have personal, social and intellectual problems. A study of 103 delinquents supported these findings. In 84 percent of the cases the mother of the delinquent admitted her child had been unwanted. An important piece of research completed in this area was done by Professors Hans Forssman and Inga Thuwe in Sweden. One hundred and twenty children born to women who had applied for a legal abortion, but were denied, were observed for 21 years. The researchers compared these children to 120 who were born wanted. Sixty percent of the unwanted children grew up under undesirable circumstances, compared to 28 percent for the control group. More of the unwanted children had received psychiatric care, more had records of delinquency, more had received public assistance, more had been declared unfit for military service, fewer had attended college, and more had married and had children at an earlier age (Westoff et al., 1971).

Research on Rural Attitudes, Practices, and Knowledge

As stated in the introduction of this paper very little research

has been done on the attitudes of rural people in the western United States and virtually no research has been done with rural Montanans and their attitudes. During the investigator's review of literature a 1967 masters thesis in nursing titled "A Survey of Knowledge And Use of Family Planning Methods In A Selected Group of Mothers" by Mary Ingalls Brown was found. Her sample included mothers living in married student housing in Bozeman, Montana. Mrs. Brown found that these mothers learned more about contraception before marriage than after marriage; and the more education the mother had, the more methods she knew. The study also showed that age and education of the mother and number of children did not affect the use of family planning.

Editor Donald Bogue, Professor of Sociology at the University of Chicago said in his book that family planning research is just beginning. The family planning research presented in his book was performed by his graduate students at the Community and Family Study Center. No research, however, was done with the rural populations in the United States or in the areas of interest related to in this paper (Bogue, 1970). A book edited by Clyde Kiser on family planning research also failed to provide information on family planning in the United States' rural areas (1962).

In the spring of 1955 the Survey Research Center of the University of Michigan and the Scripps Foundation for Research in Population Problems, Miami University, Oxford, Ohio conducted the first nationwide

effort to find out about family planning attitudes and practices. In the summer of 1960 the same research centers conducted a second survey. The results of this second study are the subject of Pascal Whelpton, Arthur Campbell, and John Patterson's book Fertility and Family Planning in the United States (1966).

According to Whelpton, Campbell and Patterson rural couples have been having more children than urban couples in the United States ever since the Colonial period. This existed of economic necessity because children were a good source of labor. The 1960 study showed that the rural farm wives wanted as well as expected more children than the other wives. As a group, rural wives said they wanted an average of 3.1-3.4 children; whereas, rural husbands reported they wanted an average of 3.1-3.2 children. Wives who lived in rural areas but not on farms anticipated having the same size families as wives who lived in cities and towns. Data also showed that wives who had lived on farms at some time since they were first married but were now living in a city or town, expected to have almost as many children as women living on farms.

The studies found that education and religion are two socio-economic characteristics that are strongly related to attitudes toward birth control. It was found that the better educated had more favorable attitudes toward birth control than the less educated. Ninety-three percent of the college educated wives had used or expected to use

contraception in comparison to 72 percent for those with a grade-school education. Also college educated wives used the more effective methods of contraception sooner and more effectively in married life than grade-school wives. The proportion of wives who were against any form of fertility control was one percent for those with a high school or college education and eight percent for those with a grade-school education.

David Van Vleck in his book The Crucial Generation stated that the rate of unwanted births is highest among those that were less educated (1971). Whelpton et al., (1966) said that a higher proportion of less educated couples live in rural areas. It would therefore appear that rural couples have more unwanted children, if what Whelpton et al. and Van Vleck state is true.

Charles and Leslie Westoff were hopeful that the rural areas would become more accepting of birth control as people with more education replaced the older women (1971). Findings from Whelpton, Campbell, and Patterson's book agree with this; he found more of the young and recently married couples using contraception (1966).

As for religion, Whelpton and associates wrote that Protestants had more favorable attitudes toward birth control than Catholics and that the Jewish had even more favorable attitudes towards family planning than Protestants. Among Catholics, it was found that the greater a member's participation in church attendance and the sacraments

the more unfavorable were his attitudes toward birth control. Whelpton et al. believed that poor education was more responsible for extreme feelings against contraception than was religion (1966).

Husband's occupation was found to be directly related to number of children. In the study Whelpton, Campbell, and Patterson related it was found that the wives of farmers and farm laborers expected 13 percent more births than the wives of husbands in other occupations.

Westoff and Westoff found that people of all incomes want a similar number of children but the poorer people expect more. Whelpton et al. showed that the higher a husband's income the sooner contraception was used in the couple's marriage and also that it was used longer before the first birth and less children were born.

In an article titled "Family Size and Sex Role Stereotypes" results indicated that women who accept more masculine roles for themselves have fewer children than women who see themselves as possessing socially feminine or the traditional female roles (Clarkson, Vogel, Broverman, and Rosenkrantz, 1971). Whelpton and co-authors reported that wives who worked because they wanted to expected fewer children than those who worked out of necessity. Wood (1971) suggested that our society's basic attitudes toward parenthood and reproduction need to change. This change would enable women to work if that is what they choose without feeling a sense of disapproval from family, friends, and the rest of society. President Nixon's 24 member Commission on

Population Growth agreed. They stated that it would be "particularly helpful if marriage, childbearing, and childrearing could come to be viewed as more deliberate and serious commitments rather than as traditional almost compulsory, behavior (Lincoln, 1972: 18)." Westoff and Westoff believe that today's young people, now of marriageable age, will have fewer children because of inflation and increased competition for good jobs.

The review of literature revealed very little in the way of research findings that deal with the relationship between marital communication and birth control. Yahraes stated that couples with birth control knowledge are relieved of much worry and tension over the fear of an unwanted child (1948). Westoff and Westoff said that birth control has created happier marriages and more satisfying sexual enjoyment because the worry over pregnancy doesn't exist if effective methods of contraception are used (1971). Lawrence Lader (1955) believed that the impact of birth control on family life and the relations between the husband and wife is extremely crucial. Kenneth Jones expressed that the number of children a couple had and when they had them would have a great effect on marriage happiness (1969).

Two interesting findings regarding methods of birth control were cited by Whelpton, Campbell, and Patterson (1966) and Westoff and Westoff (1971). Whelpton and associates reported that sterilization was more commonly practiced in the rural areas and among the less

educated than by educated people living in cities of 50,000 or more. The reasons for this are not known; however, it could be due to differences in medical practice or to different tendencies of rural and city couples or a difference in reporting a sterilization. Westoff and Westoff stated that the use of the contraceptive pill is greatest for Westerners. Their explanation was Westerners are less traditional and more willing to try new things.

According to a 1971 report by the Department of Health, Education and Welfare (HEW), rural couples need and want family planning. However, lack of access to family planning services because of great distances has caused them to use less effective, nonmedical methods, often resulting in method failures. HEW strongly recommended expansion of services to these people (U. S. Government Printing Office, 1971). In a pamphlet distributed by Planned Parenthood of Missoula, Inc. it was shown that only one in eight of the 15,800 medically indigent Montana women in need of family planning were served (Planned Parenthood of Missoula, Inc., 1971). However, Whelpton et al. found that the use of contraception has increased even among rural couples and that their birth rate no longer differs significantly from that for couples in towns and cities (1971).

CHAPTER III

METHODOLOGY

Sample

Definition of Sample

The sample, for this study, is rural Montanans. By definition all of Montana is rural, so the potential sample included all men and women 18 years or older, who live in cities, towns, or on farms, regardless of occupation.

Selection of Sample

A stratified random sampling process was used to obtain the population of rural Montanans. A map of Montana, which the Cooperative Extension Service at Montana State University had divided into six areas, was used to subdivide the state. Two counties from each of the six districts were randomly drawn from a hat. When completed a total of twelve counties were selected: Fergus, Musselshell, Powder River, McCone, Roosevelt, Phillips, Blaine, Teton, Madison, Meagher, Flathead, and Sanders.

The names of all the towns and cities within each of the twelve counties were obtained. Towns and cities were randomly chosen from each county, until enough to obtain a survey population of at least 60 from each county was reached.

The names of possible participants were gathered from the telephone directories of each of the towns and cities chosen. Twenty

numbers were put in a hat and the number four was drawn, meaning that every fourth name listed would be contacted to participate.

By random process no counties were drawn that had major cities, and in the counties drawn no larger towns were drawn first, except for Roundup, Montana, population 2116. This makes the sample most decidedly rural in the strongest sense of the term.

Communication With Sample

A letter was sent to all potential participants. It explained who the survey was sponsored by, the areas of knowledge that would be investigated, the approximate time required to complete the survey, the importance of an individual's participation, the number of people asked to participate, and how the results would be used. If they or any members of their family, over 18 years of age, agreed to participate in this study, they were asked to send their names on the enclosed acceptance sheet (see Appendix A).

Another motivational technique used to encourage participation was a write-up that appeared in all the state newspapers. This article appeared before the letters were sent to the potential participants and helped to familiarize the people with the study. A total of 720 families were contacted, 60 families from each of the 12 counties.

Instrument

Purpose of Instrument

The instrument was designed to elicit the attitudes rural Montanans have toward birth control, to determine their sexual knowledge, and to determine their knowledge of contraception.

Birth Control Attitude Scale

The 20-item scale developed by Wang and Thurstone was used. The items question the value of birth control on both moral and pragmatic bases. The investigator used this scale because it elicited the information desired, and the reliability (ranging from .62 to .93) and the validity were established (Shaw and Wright, 1967).

Family Planning and Sex Knowledge

The questions pertaining to this area were designed after a review of existing instruments dealing with sexual knowledge and family planning was made. The questions were pretested by several experts in the field.

This portion of the instrument included 40 questions. Only questions 16-35, however, were used by the investigator in the final analysis of this material. Questions 1-15 were omitted because a significant number of individuals did not answer these questions pertaining to personal family planning practices. The 20 questions

dealt with contraceptive methods, the male and female reproductive systems, and venereal disease.

Additional Instruments Used

As explained in the introduction, the instrument on birth control family planning, and sexual knowledge was only one part of a larger study. Data from three other parts of the survey were used: the personal background information, the attitude scale of marital roles, and the attitude scale on marital communication.

Personal background information. The information the investigator was interested in was: sex, age, marital status, total number of children, educational attainment, occupation of chief wage-earner, income, and church attendance. These personal variables were chosen because it was felt that they would be the most useful means of determining the basis for any differences that might exist with respect to the four major indices in the study.

Attitude scale of marital roles. The Marriage Role Expectation Inventory used in this study was developed by Marie S. Dunn. The validity differentiated at the .05 level of significance, between high scoring and low scoring respondents. Also the reliability (.95) was established. The scale measured equalitarian versus authoritarian marital roles (Family Life Publications, Inc., 1963).

Attitude scale on marital communication. A marital communication inventory developed by Millard J. Bienvenu, Sr. was used. The instrument showed the level of communication between spouses. The

reliability (.93) and validity (.01 level) were acceptable (Family Life Publications, Inc., 1969).

Procedures

Coding

After the data were gathered the survey booklets were coded for transfer to electronic data processing equipment at the Montana State University Computer Center, where the statistical analyses were done.

Scoring

Birth control attitude scale. This scale was scored in the following manner: a positive response to a question on birth control was scored as one, a question that was answered undecided was scored as two, and a negative response to a question on birth control was scored as three. The 20 score numbers were totaled and a score from 20-60 was recorded for that individual. A high score constituted an anti-birth control attitude. A low score showed a favorable attitude towards birth control.

Family planning and sex knowledge. One item (No. 16) dealt with methods of contraception. The participants listed the number with which they were familiar. The coded score for this item was the number of methods named.

There were 19 items (Nos. 17-35) which had one correct answer. A correct answer was scored as one, an incorrect answer was scored

as zero. The total of the numbers was the score. This permitted a range from 0-19 for each individual. A higher score equaled a greater knowledge of family planning and sexual matters.

Attitude scale of marital roles. The 20 items in this scale were scored as one if the question was answered in a nontraditional, equalitarian way; two if the participant was undecided; and three if the question was answered in a traditional, authoritarian manner. The numbers were totaled and a score from 20-60 was recorded. A high score designated a traditional attitude about marital roles and a low score an equalitarian attitude.

Attitude scale on marital communication. A question was scored as one when the participant responded that communication with spouse was not high, as a two when communication about a particular topic occurred only sometimes, and as a three when communication between spouses was high. The 20 numbers were totaled and the participant received a score between 20-60. A higher score showed better communication between spouses than a lower one.

Statistical Analyses

There were a total of 20 variables considered: sex, age, occupation of chief wage earner, engaged, times engaged, married, times married, divorced, times divorced, widowed, times widowed, income, frequency of church attendance, number of children, level of education, methods of birth control, total on attitudes toward birth control,

total on attitudes of marital roles, total of attitudes on marital communication, and total knowledge of physiology and reproduction.

The following statistical analyses were used: frequency distributions and crosstabulations were done on the 20 variables; the Pearson product-moment correlation coefficients and the analysis of variance correlated the personal background information with the total scores on the birth control attitude scale, the marital roles scale, the marital communication scale, and the total on the sex knowledge inventory; the Duncan multiple range test was performed on the significant F values derived from the analysis of variance tests; and a correlation matrix correlated the total scores on the three attitude scales and the sex knowledge inventory.

Level of Significance

The .05 level of significance was used throughout the study as the criterion for identifying significant relationships.

CHAPTER IV

RESULTS AND DISCUSSION

Description of Sample

A letter was sent to 720 rural Montana families living in cities, towns, or on farms in the 12 randomly selected counties in Montana. The letter invited the participation of all family members 18 years or older regardless of occupation. Any individuals who wished to participate were asked to return the acceptance sheet enclosed in the letter (see Appendix A).

Replies were received from 248 families confirming their desire to participate, a total of 479 individuals. Forty-two people replied and expressed that they did not want to participate for a variety of reasons. Thirty-three letters were returned by the U. S. Post Office undelivered for several reasons.

Survey booklets were sent to the 479 people who agreed to cooperate. Three hundred and thirty-two booklets were completed and returned, a total of 69.3 percent.

After a reasonable length of time two follow-up letters were sent out, as reminders, to the individuals who agreed to participate but had not returned the booklets. The letters re-emphasized the purpose of the study, the importance of their participation, and how the information gathered would be used. These letters were very helpful and added 15-20 percent to the return (see Appendix B).

Sex

More females than males participated in this study; 60 percent (198) of the respondents were females and 40 percent (134) were males.

Age

An older population made up the sample. The mode occurred in the 51-65 age group. The median was found in the 36-65 age group. The under 21 and the 22-28 age groups combined accounted for only 18 percent of the sample.

Occupation

Four percent (14) of the participants were professionals. This group included engineers, doctors, lawyers, and biologists, etc. The largest occupational group represented was the farm and ranch group 141 (43%). Anyone who owned, managed, or worked on a farm or ranch was included in this group. The commercial business group was comprised of owners and managers of small businesses. There were less people in social services (postmasters, highway patrolmen, Federal officers, etc.) than any other group 8, or (2%). The white collar group included clerks, typists, telephone technicians, and the like. The laborers were truckdrivers, electricians, loggers, etc. The last group, 33 retired and disabled persons comprised 10 percent of the sample.

Marital Status

Ninety-three percent of the sample were or had been married, eight percent were or had been divorced, and nine percent were or had been widowed.

Income

The mean, median, and mode for income all occurred in the \$10,000-14,999 income bracket. Fourteen percent of the sample (45) had an income over \$25,000. Eight percent of the population (26) had an income under \$3,000.

Church Attendance

The largest percentage of people attended church three or more times per month (38%). The smallest percentage never attended church (14%).

Number of Children

Twenty-four percent of the sample had families with two children. Two families had nine children. The mean was three children.

Education

The mean level of education for this sample was college attendance, without a college degree. The mode was a high school education.

