Awareness Regarding Family Planning Methods Among Final Year Medical Students

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Abstract

A cross-sectional awareness survey was conducted among final year MBBS students of ISRA University, Hyderabad from May 2017 to November 2017. After checking eligibility and taking verbal informed consent, 100 participants were included in the study and interviewed using a self-administered questionnaire. Data was analyzed on Statistical Package for Social Sciences version 21. The study results showed that 29 (29%) of the study participants got information about family planning methods from health care providers, 27 (27%) through social circle, 24 (24%) through mediawhile 20 (20%) through conference, meetings and events. Furthermore, 42 (42%) of the participants correctly identified all permanent family planning methods, 65 (65%) correctly identified temporary family planning methods, 47 (47%) correctly identified short-term family planning methods whereas 54 (54%) correctly identified long term family planning methods. Efforts by both public and private sector to enhance awareness regarding family planning methods among medical students are recommended.

Keywords: Awareness, family planning services, students, medical

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Introduction

Like many other countries undergoing demographic transition, Pakistan is facing a period of rapid population growth that has become a huge burden on the limited resources available to our population. According to United Nations projections, the population of Pakistan will grow to over 364 million by the year 2050, surpassing that of United

States, Indonesia, Nigeria, and Russia to become world's third most populous country behind India and China, with the highest population growth rate for any large Asian nation¹.

Despite these projections, the contraceptive prevalence rate in Pakistan is currently only 35.4%², which is very low compared to those of other South Asian nations. The reasons behind this low contraceptive prevalence rate may be many, ranging from a low literacy level, inadequate awareness about the importance of family planning, and a limited access to family planning services. In has been found that women with unintended pregnancies are more likely to have unhealthy perinatal behaviours³. These women are therefore prone to receiving inadequate prenatal care and thus their children may suffer from poorer health outcomes like

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low birth weight, malnutrition, increased morbidity and mortality.

This largely unchecked population growth is resulting in many undesirable outcomes with regards to the burden on healthcare system and the wellbeing of the population such as increased shortage of healthcare personnel and inability of health infrastructure to meet the population needs. Although both government and private organizations are constantly putting in resources to boost up family planning awareness and to ensure provision of family planning services with increased ease of access, the need to disseminate the relevant information to the general population still persists as reflected by the lower contraceptive prevalence rate in Pakistan⁴.

The role of the counseling by healthcare providers as the method of choice in this regard has been documented earlier and literature shows that counseling by healthcare professionals, especially doctors, results in greater acceptance of family planning services by their patients⁴. A relationship of trust between the patients and their care givers exists almost universally and it can play a vital role in increasing awareness, modifying attitudes and ultimately influencing practices of the patients in a meaningful way. It is therefore imperative that the healthcare providers, both current and future, of this country have adequate relevant awareness so that they can play their role in removing misconceptions regarding family planning services and in increasing their usage among masses.

Despite this need, the recent local literature evaluating the knowledge of future medical professionals regarding family planning, as revealed by a thorough literature review by the investigators, was scarce at best. In the given context, and in order to develop a local database that can be utilized in devising any future targeted interventions, this survey was therefore carried out with the objective of evaluating the awareness regarding family planning methods among final year students of a medical university in Hyderabad.

Methods

After taking ethical approval, a cross-sectional awareness survey was conducted among final year MBBS students, from May to November, 2017. Using the percentage of awareness of medical students regarding family planning as 72% from a previous study⁵, with 95% confidence interval and 9% precision, the minimum required sample size was calculated to be 96 participants. From a sampling list consisting of all final year MBBS students of Isra University Hyderabad, 100 students were approached using systematic random sampling i.e. using a random start by means of a random number table and then selecting every 2nd student for interview after checking their eligibility. Being the final year MBBS student of Isra University was the inclusion criterion whereas refusal to give verbal informed consent and being a foreign student of Isra University were the exclusion criteria of the study.

The participants were interviewed using a selfadministered questionnaire given by the principal investigator. The questionnaire was developed after a review of the relevant literature, and was checked for both face and content validity by a field expert. It had two sections: the first section included guestions about demographics features of the participants while the second section included questions regarding awareness of the participants regarding family planning methods. It was circulated and collected from participants on the same day after being filled out by them. The data were analyzed on statistical package for social sciences (SPSS) version 21. Descriptive analysis was performed by calculating frequencies and percentages for all study variables.

Results

A total of 100 participants were included in the study with a response rate of 100%. Out of them, 51 (51%) were female, 58 (58%) were aged 23-24 years whereas 38 (38%)and 36 (36%) of them were Urdu and Sindhi speakers respectively. The study results further showed that all 100 (100%) of the participants knew about family planning; 79 (79%)

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did not think that family planning methods are appropriately covered in course; 29 (29%) of them got this information from health providers, 27 (27%) through social circle, 24 (24%) through media while 20 (20%) through conference, meetings and events; 64 (64%) were of the view that appropriate counseling by health provider can result in increased usage of family planning methods whereas 78 (78%) agreed that use of family planning methods can result in decreased maternal mortality rate.

Moreover, 42 (42%) of the participants correctly identified all permanent family planning methods, 65 (65%) correctly identified temporary family planning methods, 47 (47%) correctly identified all short-term family planning methods whereas 54 (54%) of them correctly identified long term family planning methods. Furthermore, 56 (56%) of them correctly responded that a single oral pill should be taken per day whereas only 27 (27%) correctly knew that emergency contraceptive pills can be taken twice in a month; 26 (26%) of them correctly knew that a single hormonal injection can prevent pregnancy for 2 months while a similar percentage correctly responded that a double hormonal injection can prevent pregnancy for 3 months. Also, 87 (87%) of them had knowledge about post-partumintra-uterine contraceptive device, 29 (29%) correctly knew that post-partumintra-uterine contraceptive device can be inserted 24 hours after a normal vaginal delivery whereas 31 (31%) correctly responded that postpartumintra-uterine contraceptive device can be inserted 24-36 hours after a C-section (Table 1).

It was further seen that 63 (63%) of them correctly knew about the term contraceptive prevalence rate, 35 (35%) of them had accurate knowledge that a rural woman can access comprehensive family planning services from a population welfare center whereas 43 (43%) of them correctly knew that family planning association of Pakistan is responsible for providing family planning services in Pakistan.

Table 1. Awareness Profile

Variable (n=100)	Count (%)
Which are permanent family planning methods?	
Tubal ligation only/Vasectomy only	17 (17.0)
Tubal ligation and vasectomy	42 (42.0)
Others	41 (41.0)
Which are temporary family planning methods?	` '
Oral pills, injection, IUCD, implant, condoms	65 (65.0)
Oral pills, injection, condoms/ Oral pills,	
IUCD, condoms	13 (13.0)
Others	22 (22.0)
Which are short term family planning methods?	` '
Oral pills, IUCD, implant	9 (9.0)
Oral pills, injection, condoms	47 (47.0)
Injection, condoms/Condoms only	44 (44.0)
Which are long term family planning methods?	` ,
Oral pills, IUCD, implant/ Injection,	
IUCD, implant	22 (22.0)
IUCD, implant	54 (54.0)
Implant only/IUCD only	24 (24.0)
How many oral pills should be taken per day?	` '
Half	28 (28.0)
1	56 (56.0)
2 or more	16 (16.0)
Emergency contraceptive pills can be taken within a m	nonth?
Once	40 (40.0)
Twice	27 (27.0)
More than twice	33 (33.0)
For how long a single hormone injection prevents preg	gnancy?
One month	44 (44.0)
Two months	26 (26.0)
Three months/Four months	30 (30.0)
For how long a double hormone injection prevents pre	gnancy?
One month/Two months	26 (26.0)
Three months	26 (26.0)
Four months	48 (48.0)
Do you know about post-partum intra-uterine contraceptive device?	
Yes	87 (87.0)
No	13 (13.0)
Following a normal vaginal delivery, post-partum intra-t	uterine
contraceptive device canbe inserted within?	
24 Hours	29 (29.0)
36 Hours	10 (10.0)
72 Hours or more	61 (61.0)
Following a C-section, post-partum intra-uterine contractions can be inserted within?	ceptive device
Up to 72 hours	30 (30.0)
24 to 36 Hours	31 (31.0)
Not more than 48 hours/1 week	39 (39.0)
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Discussion

It was found that all (100%) of the medical students knew about family planning. Likewise, Dinas K et al., in 2008 reported 91.2% of the medical students to be informed about family planning⁶.

The study findings revealed that 27% of the students interviewed got information about family methods through media. Hagan JE & Buxton C in 2012 found that 60% of the respondents obtained knowledge about family planning methods through media⁷ while Kakani A and Jaiswal A in 2012 reported that 72% of individuals got information about family planning through media8. The study results also showed that 29% of the respondents got this information through health care providers. Puri S et al., in 2007 though reported that 89% of the respondents got the information about family planning methods through health providers⁹. This difference in findings could be attributed to differences in sample size, gender of the study population and different settings of both the studies. The study results further revealed that 21% got this information through social circle. Similarly, Hagan JE & Buxton C in 2012 found that 30% of the respondents obtained knowledge about family planning methods through peers7. Abdul-Zahra NH in 2016 though reported 58% of the individuals interviewed to get awareness regarding family planning through social circle⁵.

The results also showed that 31% of participants in our study knew correct use of emergency contraceptive pills whereas Hoque ME et al., in 2014 reported that 10% of the participants had accurate knowledge regarding use of emergency contraceptive pills¹⁰. Kongnyuy E Jet al., in 2007 reported that only 5.7% of the participants had accurate knowledge regarding use of emergency contraceptive pills¹¹. Giri PA et al., in 2013 though reported that 83.4% of the participants had accurate knowledge regarding use of emergency contraceptive pills¹². This difference in findings could be attributed to difference in the study population of above mentioned studies.

In our study 65% of the participants correctly knew regarding temporary methods. Likewise, Sadiq S et al., in 2017 reported that 78% of the participants had accurate knowledge about temporary methods¹³.

Moreover, 46% of the study participants were found to have correct knowledge about availability of contraceptive methods. Unlike the study results, Puri S et al., in 2007 reported that 89% of the participants had correct knowledge about availability of contraceptive methods⁹. This difference in findings could be attributed to difference in the study population of above studies as the later study was conducted in India and on female students only.

The study findings revealed that 42% of the participants knew about permanent methods family planning. Contrary to the study results though, Renjhen Pet al., in 2010 reported that 12% of the participants knew about permanent methods of family planning¹⁴. Moreover, Puri S et al., in 2007 reported that only 2.4% of the participants knew about permanent methods of family planning⁹.

With regard to the rest of study findings a meaningful comparison could not be made due to unavailability of recent local published literature.

The limitations of the study included a smaller sample size and a questionnaire that was not checked for reliability due to time constraints.

Conclusion

The knowledge of the medical students regarding different family planning methods was far from satisfactory. In light of the study results, efforts by both public and private sector to enhance awareness regarding family planning methods among medical students are recommended. This may be achieved by making appropriate changes to the course material, by using all available means of communication such as conducting seminars, arranging workshops and field visits and by ensuring effective communication by teachers during lectures. Moreover, capacity building of teaching pro-

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fessionals through continued medical education should also be made a priority.

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Conflict of Interests

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