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Original Research Article

Knowledge, Attitude And Practices About Emergency Contraception Among Hospital Nursing Staff of the Obst & Gynae Department, SMS Medical College, Jaipur

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Abstract: Emergency contraception is a grossly underutilized option of prevention of pregnancy. Knowledge and attitude of nursing personnel who are both service provider and health educators to the community can influence the contraceptive behavior of the people exposed to them. So knowledge and awareness about emergency contraception and their availability are necessary to increase the acceptance of this method. The objective is to determine the knowledge and attitude regarding emergency contraception among hospital nursing personnel in Obstetrics & Gynaecology Department, SMS Medical College, Jaipur. It was a hospital based observational study. 50 hospital nursing personnel and nursing students were interviewed using a pre-structural questionnaire; answers were noted and analyzed to assess their knowledge, attitude and practice regarding emergency contraception. In our study textbooks were the main source of knowledge in 78%. And 90% were aware of time limit of administration and only 30% (15) had knowledge about the single dose method. More than 96% of participants had correctly said that emergency contraception could not be used in regular basis and only one staff has accepted that use of emergency contraception will discourage the regular use of contraceptives. Most of them (96%) had agreed that emergency contraception is better than abortion. Even though knowledge and attitude towards emergency contraception among the participants was good, they had many misconceptions regarding specific aspects of emergency contraception. More awareness programmes would be needed for further enhancement and encouragement, so they can help in spreading the knowledge and awareness about emergency contraception in general population.

Keywords: Knowledge, attitude, practice, emergency contraception.

INTRODUCTION

Emergency contraception refers to method that woman can use to prevent pregnancy after unprotected sexual intercourse or in case of failure or incorrect use of contraceptive methods [1]. Unwanted pregnancy followed by unsafe abortion can be avoided by using different contraceptive methods including emergency contraception. Unintended pregnancy poses a major challenge to the reproductive health of women. Most of them are from nonuse of contraception or from contraceptive failure (such as broken condom), which could be prevented by use of emergency contraception [2].

Incidence of induced abortion in India is about 12 million and maternal mortality due to unsafe abortion is

about 13%. Most of the induced abortion is due to unwanted pregnancy. Practice of contraception is pivotal in reducing the incidence of abortion but the estimated couple protection rate is only 40.4% [1].

Emergency contraception is a safe and extremely effective method to reduce the rate of unintended pregnancies, induced abortion and unwanted childbirth. In spite of being introduced in National Family Welfare Programme in 2003 and later declared as an OTC(over the counter) products in 2005 it is still remain a grossly underutilized option in prevention of pregnancy [3].

There are three types of ECPs availablecombined ECPs containing both estrogen and progestin, progestin-only ECPs, and ECPs containing an antiprogestin (either mifepristone or ulipristal acetate). The Yuzpe Regimen is a method of emergency contraception using a combination of estrogen and progestogen hormones (100 mcg ethinyl estradiol and 0.5mg of levonorgestrel and again in 12 hrs) [4] and started within 72 hours of sexual intercourse. It has been superseded by a progestogen-only hormonal regimen (1.5 mg of levonorgestrel).

Emergency contraception can be used when no contraception has been used during sexual act, contraceptive failure or incorrect use or in case of sexual assault in a woman not protected by contraception [5]. Knowledge and awareness about types of emergency contraception and their availability are necessary to increase the acceptance of this method.

Nursing personnel are integral part of any health care system. They acts as reliable source of information for the general public who are exposed to them. The knowledge and attitude of nursing personnel towards contraception can grossly influence the contraceptive practices of the community as they act as both health educators and service provider. Lack of awareness, misconceptions and negative attitude towards emergency contraception in nursing personnel can both acts as a barrier for their personal use and also prevent them from promoting emergency contraception to the beneficiary [3]. So keeping this in mind the present study was done to assess the knowledge, attitude and practices regarding emergency contraception among hospital nursing personnel working in Department of Obstetrics & Gynaecology, SMS Medical College, and Jaipur.

MATERIAL & METHODS

This was an observational study done in Department of Obstetrics & Gynaecology, SMS Medical College, and Jaipur to assess knowledge, attitude and practices regarding emergency contraception among hospital nursing personnel

50 nursing staff working in our Department was included irrespective to their marital status. They were briefed about the objectives of the study and informed consent was taken. The staffs, willing to participate, were given a preformed questionnaire proforma. The questionnaire contained information about the age, marital status, years of exposure, knowledge regarding emergency contraception like indications and side effects for emergency contraception, knowledge about source of emergency contraception, safety, willingness to use and willingness to attend awareness programme on emergency contraception. The questionnaire proforma were collected back and data were entered in Microsoft Excel sheet and analyzed statistically.

RESULTS

In our study it is observed that text books (78%) was the main source of information about emergency contraception followed by media (14%). Only 2% nursing staff got information from doctors (Table-1).

Table 1. Source of knowledge about Emergency Contraception				
Source of knowledge	No.	%		
Doctors	1	2.00		
Friends and relatives	3	6.00		
Media	7	14.00		
Text Book	39	78.00		
Total	50	100.00		

 Table 1: Source of knowledge about Emergency Contraception

96% of the total staff was sure about the indication for emergency contraception. Nearly 90% were aware of time limit for administration but only 70% were correct about time interval for repeat dose. 68% responded that emergency contraception is contraindicated in early pregnancy as it does not act as abortifacient and only 44% were correct about mode of action of emergency contraception pills. Only 30% of the staff knew that nowadays single dose is available for EC (Table-2).

Table 3 shows the knowledge of EC among nursing staff. Majority of them knew that EC are

available in Government supply of contraceptive basket (96%) and use of EC does not protect from STI (90%). Only 40% were aware that IUCD could be used as emergency contraception and 80 % of them agreed that Cu T can be continued as ongoing regular contraceptive method. 60% knows that Mefipristone can be used as emergency contraception. Majority of them (96%) knew that EC cannot be used for regular contraception and 80% agreed that EC is safe to use. 60 % of the staff knew the exact mechanism of action of EC (Table-3).

Table 2: Response to Statements Regarding Knowledge of Emergency Contraception				
Statements Regarding Knowledge of Emergency	Correct Response	Wrong Response		

Contraception	No.	%	No.	%
1. Indication of Emergency Contraception	48	96.00	2	4.00
2. Mechanism of Action of Emergency Contraception	22	44.00	28	56.00
3. Time Limit for Administering Emergency Contraception Pills (72 hrs)	45	90.00	5	10.00
4. Common Side Effects (Nausea)	44	88.00	6	12.00
5. Time Interval for Repeat Dose of Emergency Contraception (12 hrs)	35	70.00	15	30.00
6. Contraindication of Emergency Contraception (Confirmed Pregnancy)	34	68.00	16	32.00
7. Knowledge About Single Dose Method of Emergency Contraception Pills	15	30.00	35	70.00

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 Table 3: Response to Statements Regarding Knowledge of Emergency Contraception

Statements	No.	%
1. IUCD is used as EC (Yes)	20	40.00
2. Mifepristone is used as EC (Yes)	30	60.00
3. LNG is available in pharmacy as an OTD drug (Yes)	35	70.00
4. Availability of EC in Govt. Supply (Yes)	48	96.00
5. EC protects against STI (No)	45	90.00
6. CuT can be used as an ongoing method of contraception (Yes)	16/20	80.00
7. Mode of action is by causing abortion (No)	30	60.00
8. EC can be used in regular basis (No)	48	96.00
9. EC is safe to use (Yes)	40	80.00

Table 4: Statements to Assess Attitude Regarding Emergency Contraception

Statements		Positive Response		Negative Response	
		%	No.	%	
1. EC is safe to use	40	80.00	10	20.0	
2. Willing to use EC	35	70.00	5	10.00	
3. Will recommended EC to others	48	96.00	2	41.00	
4. Awareness programmes to be promoted by Govt.	48	96.00	2	4.00	
5. Using EC is better than abortion	48	96.00	2	4.00	
6. EC will encourage high risk behavior	35	70.00	15	30.00	
7. Willingness to attend awareness programmes	50	100.00	0	0.00	
8. Purchase of EC OTC will be embarrassing	26	52.00	24	48.00	
9. EC will discourage regular use of contraception	49	98.00	1	2.00	
10. EC is good for reproductive health	40	80.00	10	20.00	

Table 4 reflects the attitude of nursing staff about EC. Emergency contraception was felt safe by 80% for its uses and most of them (70%) were ready to use emergency contraception personally. About 96% of staff accepted that emergency contraception is better than abortion. 96% wanted more awareness programmes by the government and 100% were willing

to attend them. 96% responded positively that using emergency contraception was better than undergoing abortion but only 80% had a positive attitude that emergency contraception was good for reproductive health (Table-4). Positive attitude towards emergency contraception was found in only 80% nursing personnel (Table-5).

Table 5: Fositive Attitude towards Emergency Contraception			
Knowledge and Attitude	No.	Percentage	
Good	40	80.00	
Poor	10	20.00	
Total	50	100.00	

Table 6: Contraception practices among nursing staff			
Contraception	Number	Percentage	
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Tubal ligation	10	20
IUCD	6	12
Condoms	17	34
O C Pills	2	4
Natural Methods or none	15	30
E C Pills	6	12

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Table 6 shows contraceptive practices among nursing staff. 34% were using condoms. 20% adopted tubal ligation as contraceptive methods, only 4 % were using O C pills as method of contraception. 30% were using either natural methods or no contraceptives. When enquired about the use of EC pill in the past only 12% had use EC.

DISCUSSION

In our study 80% participants had good knowledge on the general information and 60% had a positive attitude towards emergency contraception still only 12 % had used EC. The finding is in contrast to other studies conducted in India and abroad (Takkar *et al.;* [6], Ikeme AC [7], Byamugisha JK [8], Rahaman H [2], Thapa B [9] and Kaveri SB *et al.;* [10]). Where a low level of knowledge and attitude of emergency contraception among the nursing students was observed.

In our study 70% of the participants were aware that emergency contraception is available OTC. 90% of the staff knew about the dosage and administration of EC and only 40 % knew that Cu T can be used as EC while in a study done in Nepal on nursing personnel 65.5% know about the dosage and administration of emergency contraception and 88.78% were aware that IUCD can be used as emergency contraception [11].

It was observed in our study 80% of the respondent considered EC as safe and only 70% were ready to use emergency contraception. Thaper in his study also reported that 78.18% of their participants had a positive attitude towards emergency contraception. 80% of their participants said that emergency contraception was safe for its uses and 91.7% were ready to use emergency contraception [11] 60 % of the staff in our study correctly knew that EC does not act by causing abortion and 90% had knowledge that EC does not protect from STI while in a study of nursing students, who would be further service provider showed that 25.5% thought that emergency contraception acts as an abortificient and 52.14% were not sure whether emergency contraception prevents STD [12]. In a study carried out in Govt. Dispensaries in Delhi which also included nursing personnel along with doctor and pharmacists. 6% of ANM and 5.6% of LHV knew about the correct constituents whereas right dose was known to 27.8% of staff nurse and 28% of ANM. Only 7.7% knew that it should not be given to those with confirmed pregnancy [13].

It is noticeable than 70% of the participant in our study were using temporary or permanent method of contraception. 80% had a positive attitude towards emergency contraception, the actual use of emergency contraception was very low only 12%. Our results were in accordance with the results observed by Nivedita K and Shanthini N [14]. This indicates that participants despite having good knowledge about EC they may have apprehension regarding its use. 96% of participants wanted government to create more awareness programmes and all of them (100%) had expressed willingness to attend these programmes which should be utilized to create awareness among them. National Demographic and health Survey shows that only 1% of married woman had ever used emergency contraception pills and less than 1/3 of unmarried women knew about emergency contraception pills [15].

The various sources of information about EC are shown in table 1. Text books were the main source of information while doctors were source of information in only 2% while doctors and television were the main source of information in the study conducted by Kaveri SB *et al.*; [10].

Along with mass media, health care providers especially working at family planning center can educate women and encourage them to use emergency contraception which is an effective and safe method to prevent unwanted pregnancy and induced abortion.

CONCLUSION

Knowledge combined with positive attitude is very much essential to improve the dispensing practice of EC pills. Based on the findings, it is concluded that on an average majority of nursing personnel have good knowledge and a positive attitude towards EC. With slight motivation and encouragement they can act as an effective counsellor to the public to create awareness, improve their understanding and change their attitude towards emergency contraception. So training programmes to nursing personnel on emergency contraception is mandatory and regular updates are also essential to them regarding various aspects of contraception.

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