Original Article

Role of Nursing Staff in Providing Effective Emergency Contraceptive Care at The Tertiary Care Facility.

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Abbreviation:

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Emergency Contraceptive	EC
Greet, Ask, Tell, help, Explain, Return	GATHER approach
Out Patient Department	OPD
National Family Health Survey 5	(NFHS-5)

ABSTRACT: BACKGROUND:

The world is beset by unintended pregnancies, which frequently lead to complications and self-medication for abortion. It led to a low quality of life for the family and couple. Physician counselling about EC is given less time in busy contraception clinics. The goal of this study was to determine whether nursing staff could deliver quality care in crowded public OPD settings.

METHODS:

It is a cross-sectional study based on a 16-point questionnaire that has been pretested and validated. Nursing staff were given a data collection tool via Google Forms, and responses were electronically

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collected. The collected data was analysed for their awareness of and prescription desire for emergency contraceptives, and results were calculated in percentages and tabulated.

RESULTS:

The majority of the study's participants are young adults, 36% of whom are single. 98% of nursing staff members rated it as safe and effective (EC). 96% of respondents claim that EC is having fewer side effects. 96% of those surveyed who had experience with the medication said it was simple to use, and 98% said they would recommend it to friends and family who were in need. 94% are very confident in their ability to recommend this medication to Gynae OPD's general clientele.

CONCLUSIONS: Nursing staff could be a helpful source for emergency contraceptives in a busy OPD where doctors have less time to speak with the couple in need of the EC pill and the answers to their questions at the tertiary care centre.

Key words: Emergency contraception, levonorgestrel, Nurses

INTRODUCTION:

Unintended pregnancy is a global burden, which leads to self-medication for abortion and related complications which further led to poor quality of life for the couple and family. Emergency contraception (EC) is the method of contraception after unprotected sexual intercourse. It has also been called a post-coital pill or morning after pill. When used within five days of unprotected sexual activity, emergency contraceptives can prevent up to 95% of unintended pregnancies. in order to avoid unintended pregnancy Through the national family welfare programme, the Indian

government first made emergency contraceptive pills available in 2003. The government has made it clear that emergency contraception is not a regular family planning method and is only meant to be used in an emergency.³

Levonorgestrel has been approved by India's drug regulator as an emergency contraceptive in a 1.5 mg dosage with a special pack of two 0.75 mg pills. At clinics for family welfare, it is freely accessible.³

Every patient needs a good time for counselling, which should be done using the GATHER approach (Greet, Ask, Tell, help, Explain, Return) when providing advice on emergency contraceptives.⁴

The number of unintended pregnancies could theoretically decline if women and service providers are much more aware of emergency contraceptives. (5) doctors have less time to counsel patients about EC in busy contraception clinics. Well-informed medical professionals such as doctors, paramedical staff, midwives, and pharmacists can provide counselling and emergency contraception. ⁶⁷

In order to define the role of nursing staff as efficient service providers for emergency contraceptives in a busy outpatient department (OPD) at the tertiary care centre, this cross-sectional study was planned.

METHODS:

Hypothesis: Nursing personnel could be an effective service provider for emergency contraceptives.

Study Question: whether nursing personnel could be an effective service provider for emergency contraceptives?

Study objective:

- 1. to assess the awareness of emergency contraceptives among nursing personnel of a tertiary care centre
- 2. To study whether nursing personnel are confident enough to prescribe emergency contraceptives.

Type of study and design: cross-sectional study

Place of study: Department of Obstetrics and Gynecology, PGIMS, Rohtak.

Characteristics of the sample: 50 staff nurses of the department of Obstetrics and gynaecology.

Duration of study: 2 months (may- June 2021)

MATERIAL AND METHODS:

The 50 staff nurses of the obstetrics and gynaecology department at Pt. B.D. Sharma PGIMS, Rohtak, Haryana, a tertiary care hospital in the Indian state of Haryana, participated in this cross-sectional study over the course of a month.

The study aimed to ascertain whether they could be an effective service provider for EC in a busy OPD setting by assessing the nursing staff at a tertiary care facility and their knowledge of emergency contraceptives and level of confidence in prescribing EC.

A valid pretested questionnaire with sixteen questions covering knowledge of EC, its application, and reflections on EC was given to the study group. With consent, the questionnaire was distributed via Google Form, and responses were recorded.

The survey questionnaire was divided into three major sections: demographic information, knowledge awareness, and reflections on EC. Knowledge awareness was further broken down into sources of knowledge, knowledge of the indication of EC, knowledge of the timing of uses, different emergency contraceptive options, and knowledge of the drug's efficacy.

All 50 nursing staff members responded to the electronic Google form after stating their willingness to participate in the study voluntarily and that their confidentiality would not be compromised at any time. The instructions state that you can select the same response for all multiple-choice questions. The gathered data were examined for awareness and prescription desire on an Excel sheet and a Google form display of data analysis. Inferences for emergency contraception were computed in percentages and tabulated.

RESULTS AND OBSERVATIONS:

Table 1. Demographic Profile

Demographic Profile					
Parameters	No.	%			
	Age (years)				
20-30	34	66%			
31-40	13	26%			
41-50	03	06%			
>50		0			
	Marital Status				
Yes	32	64%			
No	18	36%			
Residence					
Urban	43	86%			
Rural	7	14%			
	Parity				
P1	16	32%			
P2	16	32%			
>P2		0			

	Not Applicable	18	36%
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 Table 2: Awareness of Knowledge for emergency contraception

S No	Knowledge Awareness			
1.	Source of Knowledge	(n)	(%)	
	Classroom	33	66 %	
	Doctor	12	24%	
	Friends	15	30%	
	media	5	10%	
2.	Awareness about Indication			
	Yes	47	94%	
	No	3	6%	
3.	Awareness about timing of use			
	Within 72 hours	45	90%	
	Immediate	49	98%	
	Up to 5 days	1	2%	
4.	Awareness of various Options for emergency contraception			
	Levonorgestrel	36	72%	
	Oral contraception pills	15	30%	
	Intra uterine contraception device	18	36%	
	Ulipristal acetate	2	4%	
	Know only trade name	3	6%	
5. Awa	reness about Drug (only Levonorgestrel)	·	·	
	Safety			
	Yes	48	96%	
	No	1	2%	
	Not sure	1	2%	
	effectiveness			
	Yes	48	96%	
	No	1	2%	
	Not Sure	1	2%	
	side-effects			
	Headache	9	18%	
	Vomiting	3	6%	
	Nausea	9	18%	
	Irregular menses	6	1%	
	Feel uneasy	9	18%	
·	Disrupts your quality of life		0	

Table 3: reflections towards EC

Tuble 3. Tellections towards 120	_		
Have you ever used EC	response		
	Yes	25	50%
	no	25	50%
Find it cumbersome to consume	Response(n=25)		
	Yes	1	4%
	no	24	96%
Faced any side effects	response		
	Yes	2	8%
	no	23	92%
	Not applicable	25	12.5%
Would like to prescribe it to your friend/relative in need.	response		
	Yes	49	98%
	No	1	2%
Confident about drug to prescribe to general population	Response		•
	Yes	47	94%
	No	3	6%

Most of the participants belongs to 20-30 years, 64% were married, with 86% residing in urban areas. (Table 1)

Most of them learned about emergency contraceptives from their curricula, and they are aware of how to use them, when to use them, and what options are available. Ninety-eight percent of nursing staff found emergency contraceptives to be effective. With fewer side effects, 96% of people have found it to be safe. (Table 2)

96% of respondents who were asked to comment on the drug did so. It is simple to use, and 98% of people would be willing to recommend it to friends and family who were in need. Additionally, 94% of people are very confident in recommending this medication to the general public who attend Gynaecology OPD. (Table 3)

DISCUSSION:

The current study, which was cross-sectional in nature, provides a glimpse into the knowledge and awareness of nursing staff regarding their potential to be effectively utilised in a busy setting of a contraceptive clinic as a provider of emergency contraception. Our study found that most nursing staff (96% of them) have good knowledge of the emergency contraceptive Levonorgestrel as a whole and have a fair understanding of its safety profile and side effects. They were discovered to be at ease prescribing the EC to their family, friends, and at the gynaecology OPD.

Nurses play a significant role in the healthcare system. As they are more empathetic, patient-focused, and prepared to understand their patients' needs. Laurant M. et al. conducted a meta-analysis and systematic review to determine whether nurses could replace medical care providers. After analysis, they discovered that trained nurses likely give patients more health advice, though the results cannot be generalised due to the types of studies and diseases taken into consideration.

According to the National Family Health Survey 5 (NFHS-5 2019–2021), only 0.0–0.2% of Indians use emergency contraceptives, despite their availability in publicly funded hospitals and availability as an over-the-counter medication without a prescription since 2005. In India, the unmet need for contraception is 9.4%. 9,10

Even though, according to NFHS-5, 50–60% of Indian women aged 15–49 is aware that emergency contraceptives can be used as a method of preventing pregnancy, little research has been done on

the drug. It has also been noted from the data that most women depend on the public health sector to use contraceptive services.⁹

Our public hospitals and clinics see more patients than number of doctors, which leaves less time for one-on-one counselling and communication with each patient. There is also less time for educating patients about voluntarily available options like emergency contraception.

As well-informed service providers, nurses may be a better option for the dispensing of emergency contraceptives at a contraception clinic. Nurses are posted in OPD to provide various services. (11) In the study by Lindberg C.E. supported this and found that nurses can play a key role in the prescription of emergency contraceptives. Similarly, in our study, 98% of nursing staff agreed to safely prescribe EC to their family members and friends while 94% agreed to do so at the OPD for the general population . ¹²

In a related study, Najafi-Sharjabad F et al. examined the knowledge, attitudes, and practises of 170 members of the medical community in Bushehr State, South Iran. Moreover, they discovered that family health workers and midwives counsel women more than doctors do.¹³

A multi-centre investigation by M. Bildircin and N. Hotun Sahin conducted a study on 41 family planning service providers in Istanbul's European region, including 21 centres, Authors concluded that service providers are well-versed in emergency contraception knowledge and have positive attitudes toward EC like our study, although only one centre was used for our study, the number of service providers tested (41 vs. 50) was nearly identical.¹⁴

In our study, 24% of the nursing personnel knew about emergency contraception (EC) as a means of preventing unintended pregnancy during discussions with doctors while 66% of nursing staff were aware of EC since their college days. In the very similar study, conducted by Thapa B, it was discovered that nursing staff members knew 96.33% of the basics about EC and had 78.18% of them having positive attitude towards EC. ¹⁵

Our study's findings did not align with those of a questionnaire-based study on emergency contraception awareness conducted at a private medical college in Himachal Pradesh by Jindal M et al. It revealed that service care providers need awareness training the most.¹⁶

The results of a cross-sectional study by Sharma C at AIIMS Jodhpur on nurses' understanding of emergency contraception revealed that nurses have good knowledge and awareness of EC. Sharma C also concluded that nurses could serve as effective counsellors to the public, like our study in which 94% of the study population felt confident enough to prescribe the EC.¹⁷

At Sree Mankulavinayagar Medical College and Hospital, Puducherry, India, Nivedita K and Fatima Shanthini N conducted a cross-sectional survey to understand the knowledge attitude and practise of EC among nursing personnel. The results agree with our study that knowledge of EC among nursing personnel is marginally good, though the authors feel that training programmes are necessary to update their knowledge about EC. The authors also concluded that nurses with complete knowledge about EC seem to be good enough.¹⁸

CONCLUSION:

The results of the current study are favourable and suggest that nursing staff members have adequate knowledge of EC and are aware of its indication, timing of use, effectiveness, safety, and side effects. The results also suggest that nursing staff members are confident enough to prescribe it. Therefore, according to our theory, nursing staff could be a useful resource for emergency contraceptives at busy OPDs where doctors have less time to interact with the couple in need of an EC pill and provide them with answers to their questions at tertiary care centres.

Conflicts of Interest: The authors certify that there is no conflict of interest with any financial organization regarding the material discussed in the manuscript.

Funding: The authors report no involvement in the research by the sponsor that could have influenced the outcome of this work.

Authors' contributions: All authors have participated to drafting the manuscript, author 1, revised it critically. All authors contributed equally to the manuscript and read and approved the final version of the manuscript.

Acknowledgements: Authors acknowledge the enriched, enthusiastic participation of staff nurses of the hospital to make this study possible.

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