

A Look at Nursing and Family Planning

By

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EACH and every nurse in India is an important health worker in family planning. Dr. Dipak Bhatia, Commissioner of Family Planning, recently wrote that "At the local level, emphasis is on the welfare of the family, and family planning services are provided as a part of integrated health service programmes." Nurses along with other health workers, provide these integrated health services.

It does not seem necessary to enumerate the reasons why family planning is important; each one of you is well aware of the results of overpopulation because in your daily work you see the physical hazards of too many pregnancies too close together; you see families suffering from malnutrition leading to deficiency diseases and high infant mortality rate; and you see the numerous social and economic problems such as low per capita income resulting in inadequate housing, clothing and education.

To overcome these health, social and economic problems require mobilization of health and social workers in an effort to control population; this includes each one of the approximately 50,000 nurses in India. Some of you may be thinking that you are an exception because you do not work in a family planning clinic but rather on a surgical ward, in a medical clinic, or perhaps in a tuberculosis treatment centre. Others of you may be thinking "How can I add another service to my already busy work day." Perhaps if we take a look at **WHAT, WHERE and HOW** we will discover answers to the ways in which each nurse can make an important contribution to her country's efforts to reduce the birth rate. To do that we will take a look at nursing functions in family

planning. These functions are two-fold: the non-clinical nursing aspects and the clinical nursing aspects of family planning.

Non-Clinical Nursing Aspects

It is the non-clinical nursing aspects of family planning that we need to look at first because this involves each one of you wherever you are providing nursing services. What are these nursing duties? There are three:

The first is to **IDENTIFY** your eligible patients. Who are the patients who are eligible for family planning? Those patients who are interested in spacing their children, those patients who have three or more children, those patients who have an infectious or chronic disease and those couples who have no children. Where are these eligible patients? They are on all hospital wards; in maternity hospitals, in special hospitals, such as tuberculosis or leprosy; and they are in their homes. How do you identify patients? There are two ways: one is by reviewing patient records, the other is by talking with patients while you are giving nursing care.

The second nursing duty is to **INFORM** eligible patients of the various methods of contraception. The selection of the method, however, is the decision of the couple. As nurses you can describe the different methods of preventing pregnancy and answer questions about the reliability of each and the advantages and disadvantages of the various contraceptive methods. As nurses, you can help them to overcome their fears, doubts and superstitions regarding ways of preventing pregnancy. Here again, the best time to do this is while you are giving care. Your attitude and your approach to discussions of methods

of contraception with your patients is the key to success. The subject is personal; it is a "delicate" subject, but have you thought, that as a nurse you have the needed skills, already developed for this subject because of the very nature of the services you provide patients? You have learned the art of putting patients at ease when you conduct very personal nursing procedures, such as: pre-operative preparations, catheterizations, deliveries and enemas. Providing patients with information on prevention of pregnancy can be another personal service you give for the benefit and well being of your patients. Initiating the subject can be done with the same tact and sensitivity for your patients' feeling as in any other nursing service of a personal nature.

You are probably wondering "What do I have to know about contraceptives so that I can answer their questions?" Family Planning clinic personnel and physicians are available for detailed and specific information. You are not expected to have all the answers. You can, however, give patients basic general information. Let us briefly review the general information about the various methods of preventing pregnancy which will help you in talking with your patients.

CONDOM (NIRODH)

What Is It?

It is a thin sheath made of rubber which comes rolled into a small ring.

How Is It Used?

It is unrolled over the penis when it has become hard and erect.

How Does It Prevent Pregnancy?

At the climax the semen will be deposited in the condom.

How Reliable Is It ?

If the condom is properly used it is a safe method and if it is used along with foam tablets, jelly or cream it is an even more reliable method.

What Are The Advantages ?

It is inexpensive, easy to use and it can be purchased on the local market without prescription.

What Are The Disadvantages ?

The use of the condom may interfere with intercourse ; some men say that it reduces the pleasure of intercourse ; some women complain of discomfort, especially if it is not used with a lubricant ; women may also experience a burning sensation in the vagina.

FOAM TABLET

What Is It ?

It is a small tablet about the size of a 25 paise.

How Is It Used ?

After moistening the tablet with water it is placed as deep in the vagina as possible.

When Is It Used ?

It should be inserted 3—5 minutes before coitus.

How Does It Prevent Pregnancy ?

The tablet dissolves almost immediately in the vagina and forms a foam which blocks the entrance to the uterus and also chemically destroys the sperm.

How Safe Is It ?

The foam tablet does not provide a safe family planning method.

What Are The Advantages ?

It is harmless, inexpensive, easy to use and available on the local market without prescription.

What Are The Disadvantages ?

The tablet may give a chemical irritation which can cause a burning or heating sensation in the sexual organs of wife and husband ; after intercourse the foam may produce a discharge from the vagina which a woman may consider unpleasant ; after long use tablets may cause erosions and itching.

Tablets deteriorate in time and lose their effectiveness ; there may be misunderstanding of how the tablet should be used.

CREAM AND JELLY

How Is It Used ?

An applicator has to be filled with cream or jelly and then inserted as deep as possible into the vagina where it is deposited.

When Is It Used ?

It should be inserted immediately before each act of intercourse.

How Does It Prevent Pregnancy ?

It prevents the sperm from entering the woman's body and also may destroy the sperm.

How Safe Is It ?

It does not provide a reliable family planning method.

What Are The Advantages ?

It is harmless and can be purchased on the open market without prescription.

What Are The Disadvantages ?

Sometimes the creams and jellies may not melt ; they may cause slight local irritation or soreness for the wife or husband ; conscientious use and proper application is necessary ; the proper amount must be inserted ; allergic reaction may occur ; and there may be an objectionable odour.

DIAPHRAGM

What Is It ?

It is a rubber dome with a spring around the rim.

How Is It Used ?

Jelly or cream is put on the outer rim of the diaphragm and spread over the dome with the fingers. Jelly is also placed inside the dome in the area which will have contact with the cervical os. The diaphragm is then inserted into the vagina so that it will cover the cervical os. It is not removed for at least 8 hours following intercourse.

How Does It Prevent Pregnancy ?

It prevents sperm from entering the uterus and it also destroys sperm.

How Effective Is The Diaphragm ?

If it is properly used it is a fairly reliable method.

What Are The Advantages ?

It is a fairly reliable method.

What Are The Disadvantages ?

The diaphragm must be well fitted

in order to be effective ; selection of size and fitting must be done by a physician ; instructions must be conscientiously carried out ; it must be frequently checked for holes, and a new diaphragm fitted when this occurs ; and refitting by a physician is essential following a delivery.

INTRA UTERINE CONTRACEPTIVE DEVICE (I.U.C.D.)

What Is It ?

It is a loop made of a plastic material called Polyethylene.

How Is It Used ?

With the aid of a special loop inserter it is placed in the uterus by a physician.

How Does It Prevent Pregnancy ?

The loop prevents a fertilized ovum from becoming implanted in the uterine cavity.

How Safe Is It ?

The IUCD is one of the most effective birth control methods developed.

What are The Advantages ?

It is safe, economical, effective, aesthetic, reversible, a one-time method, non-interfering, simple and painless ; no storage or disposal is required, and it provides opportunity for detection of pelvic pathology.

What Are The Counter-indications for IUCD Insertion ?

Pregnancy, acute or sub-acute pelvic infection, large fibroids or sub-mucous fibroids, suspicion of a carcinoma in the genital tract, unexplained menorrhagia or metrorrhagia ; and extensive erosions.

What Are The Possible Side Effects ?

Cramp-like pains, backache, intra-menstrual bleeding, spotting ; menorrhagia. These side effects may be troublesome but are not signs of serious complications and the symptoms usually disappear after a few months.

ORAL CONTRACEPTIVES

What Is It ?

It is a small pill composed of estrogens and progestogens.

How Is It Used ?

One pill is taken every day for 20

to 21 days starting on the 5th day after the beginning of menstruation.

How Does It Prevent Pregnancy ?

Ovulation is inhibited.

How Reliable Is It ?

If taken according to instructions it is a very reliable method of family planning.

What Are The Side Effects ?

During the first few months of use there may be slight nausea or headache, slight breast tenderness and a moderate increase of weight. Occasionally spotting or bleeding may occur.

What Are The Disadvantages ?

The woman may forget to take them. Compared to the other contraceptives, the pills are expensive.

MALE STERILIZATION (VASECTOMY)

What Is It ?

It is a minor surgical procedure in which a small piece of the vas deferens is removed.

How Does A Vasectomy Prevent Pregnancy ?

The passage of the sperm is blocked so that the sperm and ovum cannot meet.

How Safe Is It ?

If the procedure is properly done it is a 100% safe method.

What Are The Disadvantages ?

If children are wanted in the future the chances for a successful reunion of the vas deferens is poor.

What Are The Results of Vasectomy ?

Surgery only involves the vas deferens. The testicles will not be touched and will continue to produce sex hormones which will go directly into the blood so that the sexual desire and ability to have intercourse will remain unchanged. The seminal vesicles will not be affected.

Where Can Male Sterilization Be Done ?

In a hospital, family planning clinic, physician's office, primary health centre or in a vasectomy camp.

Which Men Are Potential Candidates ?

Those who do not want more children and who understand that it is a permanent birth control

method. It is preferable that the couple have children with one or more of them sons.

FEMALE STERILIZATION (TUBAL LIGATION, RESECTION OR TUBECTOMY)

What Is It ?

An abdominal operation in which resection of a small piece of each Fallopian tube is performed.

How Does It Prevent Pregnancy ?

It blocks the passage of the ovum through the tube so that the ovum and sperm cannot meet.

How Safe Is It ?

Spontaneous reunion may occur but it is rare. It is considered to be a 100% safe method.

What Are The Disadvantages ?

Female sterilization is a major surgical procedure compared to Vasectomy. If future pregnancy should be wanted, the chances for surgical reunion of the tubes is very poor.

What Are The Results of Female Sterilization ?

Surgery only involves the Fallopian tubes. The ovaries are not touched so she will continue to produce sex hormones which will go directly into the blood so that sexual desire and ability to have intercourse remains unchanged. The uterus remains

intact so that menstruation will continue as usual.

Where Can Female Sterilization Be Done ?

Because it is an abdominal surgical procedure, it may be done only (with rare exceptions) in a hospital.

When Can Female Sterilization Be Done ?

The usual time is 48—72 hours after child birth. It is desirable that a woman be hospitalized for delivery and that the tubal ligation be done following delivery.

Which Women Are Potential Candidates for Sterilization ?

Those women who do not want more children and understand that it is a permanent birth control method. Female sterilization should only be done if for some reason, the husband cannot be sterilized. It is preferable that the couple have children with one or more of them sons.

RHYTHM METHOD

As you are aware, menstrual cycles are of different lengths so that the fertile days will be different for each cycle. The shorter the cycle the shorter will be the number of safe days. The safest time for intercourse is six or seven days before the onset of menses.

Cycle of 30 days

XXXXXXX													XXXXXXX			
XXXXXXX	SAFE DAYS					FERTILE DAYS					SAFE DAYS					XXXXXXX
0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	

Cycle of 28 days

XXXXXXX	SAFE											XXXXXXXX		
XXXXXXX	DAYS	FERTILE DAYS				SAFE DAYS				XXXXXXXX				
0	2	4	6	8	10	12	14	16	18	20	22	24	26	28

Cycle of 26 days

XXXXXXXX	SAFE													XXXXXXXX
XXXXXXXX	DAYS	FERTILE DAYS								SAFE DAYS				XXXXXXXX
0	2	4	6	8	10	12	14	16	18	20	22	24	26	

Cycle of 24 days

XXXXXXX	SAFE											XXXXXXXXXX
XXXXXXX	DAYS	FERTILE DAYS					SAFE DAYS					XXXXXXXXXX
0	2	4	6	8	10	12	14	16	18	20	22	24

The rhythm method is not a perfect method of family planning. It can only be effective in those women whose cycles are regular. Among women who normally have a regular cycle it is not uncommon for their cycles to be irregular for a few months after childbirth, during lactation and around the period of menopause.

The third nursing duty is to REFER your patients to a family planning service. Do you realize that you have a distinct advantage over many of the other health workers in that you have often established rapport with patients and for this reason they often have confidence in you because of the other health services you provide? It is for this reason that nurses can be effective health workers who assist patients in securing family planning services. To be able to provide maximum assistance to patients in these important nursing duties, the nurse must, first of all know the local health and social agencies and the location of the family planning clinics in the areas where her patients live; secondly, she must know the days and hours of service; and thirdly, she must be confident when making a referral that patients have correct and adequate information and that they understand the instructions. In hospitals which have a referral system the nurses must be careful in completing all the necessary information on the referral form. Provision should be made for recording the referral and date on the patient record. This is important so that on future contacts there will be follow-up on the referral. The nurse should be interested in knowing whether or not the patient went to the clinic and if not, whether the patient needs encouragement or perhaps additional information. If the initial referral resulted in a visit to a family planning facility, the nurse will want to know if the patient understands and is following the instructions given at the clinic and if she keeps follow-up appointments. She will also want to encourage the

patient to return to the family planning clinic if there is any indication of need for a return visit. However, it is important that all patients go to a physician or family planning clinic for an initial visit so that more specific information can be given on each of the various methods of contraception which will help couples select a personally acceptable method which meets the individual couple's needs and so that couples will be taught the correct use of the method selected. The methods of prevention of pregnancy which require physician's services, both initial and periodic follow-up, are diaphragm, oral contraception and the IUCD.

An equally important role you as a nurse, play in referral of your

patients to family planning clinics is to (i) identify and refer those who do not have children and direct them to the infertility services of the clinic and (ii) refer couples to the clinic for marriage counselling.

All nurses, in whatever setting you are working, can contribute to improvement of community and individual health services by actively providing patients with nursing services in the non-clinical nursing aspects of family planning, that is (1) identification of eligible persons (2) informing eligible patients of the various methods of contraception and (3) referring eligible patients to family planning services.

(The clinical nursing aspects will appear in a future issue).
—Ed.

Letter to the Editor

Dear Madam,

Now that I am not in Delhi, where the TNAI Branch is so active, I look forward more eagerly to receiving the *Nursing Journal of India* and reading the various articles, particularly on the activities in the various States.

The October *Journal* is full of interest. The graph on the "TNAI Membership Post" is enlightening and I hope it will stir all the States to increase their membership and make nurses realise the importance of joining their professional organisation.

It was a joy to see that Orissa State Branch is going ahead and that a modern school of nursing

and hostel has been opened in Berhampur.

But what interested me most was that a Study Tour was organised by the Victoria Hospital School of Nursing, Bangalore, for its 4th year student nurses, and I hope that other States will follow this example.

Visiting Training Schools and Hospitals and meeting nurses in States other than their own will broaden the outlook of our young nurses, and promote a greater professional understanding of Nursing and mutual goodwill.

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