Issues in discussing about family planning
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Abstract
This paper highlights the concept of family planning and issues a healthcare provider faces. Further, it will discuss the causes that are responsible for it such as cultural constraints, lacking theoretical knowledge, low self-confidence and fear of non-acceptance from society. Along with this, to cater all these causes and hurdles, practical recommendations are shared to reduce this problem including self-awareness about own culture, keeping family-focused approach, being master-rapport builders etc. Research journals from 2007-2012 were chosen and considered to discover reliable and divergent analysis. Family values, self-awareness and family planning are the topics that were preferred to read. These topics will come across throughout this literature review. It was clearly understood that family planning holds great importance for having a holistic health approach. It is vital to have self-awareness and knowledge about societal values on family planning to cater issues arising in this arena. This attempt will assist in rising public knowledge. It will also endorse efficient care to women and eventually the whole family. Concluding that, sensitive topics are always hidden matter in most of the cultures but the concerns attached to it cannot be ignored. Thus, it’s the basic responsibility of a nurse and other health care providers to cater these concerns through better communication skills, good rapport building, latest theoretical knowledge etc.

Key words
Family planning, society values, self-awareness, culture, self-decision

Background
Advocator, Teacher, Collaborator, confident leader so on and so forth; these are the respected responsibilities on the shoulder of a nurse. But do nurses perform all their roles? Are nurses culturally competent enough to dig out the concerns those are very sensitive to them? Do nurses feel confident in discussing about each detail of a client’s life? These questions often arise in healthcare provider’s mind whenever they found themselves stuck in an awkward situation regarding reproductive health.

Case study
A situation was encountered by a nurse at a community health clinical rotation. There was a family comprised of four members including husband, wife and two sons. Initially, interview and overall rapport building went great as it was the comfortable part but the situation turned off when discussion about family planning component and about sexual life started. It was not comfortable to discuss about the reproductive life, as all the other family members were present. Few questions were asked related to this sensitive issue in an indirect manner. After so many struggles, the discussion topic was shifted from reproduction and sexual health to other component of vaccination and all. Helplessness and incompetency about such topics were evident. It was clear that these components were so interesting and easy to learn but the case was opposite when it comes to a practical approach.

Literature Review
According to Hämäläinen, Pirskanen, & Rautio (2011), “Telling another person about the aspects of oneself that are in some way intimate or personally discrete can be difficult”. Numerous reasons can be attached to the hindrance the nurse faced while talking about sensitive issues. The most imperative factor among them is own cultural constraints. An individual with a Muslim and Pakistani context has been taught that discussion about sexuality and family planning should not be done so openly. This cultural constraint made us uncomfortable when question came to sexuality. Secondly, lack of in depth theoretical knowledge is also another cause of this difficulty. With more knowledge about the topic, people would be able to initiate the conversation more easily. Thirdly, lack of confidence also added up in the hindrance. Limaye, Rimal, Mkandawire, Roberts, Dothi, & Brown (2012) proposed that lack of confidence in talking about sexuality creates more stigmatizing attitude towards the client. Furthermore, fear of dejection or un-acceptance from family’s side due to interference in such sensitive topics also created this awkward situation. All of these factors may cause many upcoming effects in family’s as well as professional life. A client or whole family might be having concerns regarding sexual health those might remain unresolved due to this difficulty. Reflecting back to the above scenario, there is a high need to cater this difficulty of discussing sensitive issues. As a
transcultural nurse, one should have self-awareness about one’s own culture. It will reduce biasness towards other cultures and will help us to open our minds towards uniqueness of diverse cultures (Lorentz, 2008). Secondly, as a public health nurse, it is vital to notice individual approach, discomforts and doubts when functioning with families and equally important to respect family’s confidentiality and concerns. Along with this, nurse should keep a family focused approach by being culturally responsive and having a keen understanding of diversity (A Victorian Government initiative, 2009). Furthermore, nurses should be ‘master rapport builders’ in order to lessen conflict, mainly if our achievement depends on trust building relationships (Ken Buist, 2007). After that, community nurses should be open, amenable and concerned for the client and it should be obvious from the body language too as it would be a positive sign for the client to share such sensitive topics if have any concern regarding it. Moreover, as a student nurse, one should be encouraged to practice discussing about sexual health and reproductive topics among their class mates in order to reduce anxiety and enhance confidence. Along with this, learning the accurate terms of body parts and functions will also give you relieve in discussing sexual health topics. Student nurses should practice saying these words until they are contented with them as with non-sexual words. Next, as an initiator, nurse should start a conversation from less sensitive topics and move towards most sensitive issues as it will be good to make client comfortable too.

Conclusion

Concluding that, sensitive topics are always hidden matter in most of the cultures but the concerns attached to it cannot be ignored. Thus, it’s the basic responsibility of a nurse and other health care providers to cater these concerns through better communication skills, good rapport building, latest theoretical knowledge etc.

References