

Impact of the Training Program on Nurses' Knowledge Regarding Reproductive Health Care in *El hasahesa* Obstetrics and Gynecology Teaching Hospital Gezira State, Sudan

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Abstract: Reproductive health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and its functions and processes quasi experimental and interventional hospital was conducted in *El hasahesa* Obstetrics and Gynecology Teaching Hospital Gezira State, Sudan. The study aimed to assessing the effect of the training program on nurse's knowledge regarding reproductive health care to nurse working at the Hospital. The training program was designed to equip the nurses with essential information and practice regarding reproductive health care in *Elhasahesa* Obstetrics and Gynecology Teaching Hospital Gezira State. The training program divided into Session (I: to 1x) with different lecture title and objectives. Data was analyzed by using statistical package for social science (SPSS) version (23). The results of nurse knowledge regarding reproductive health care were highly increased for correct answer in all post-intervention questions. The results of female reproductive systems were also raised and finally the results of reproductive health and development presented highly increased in correct answer for all questions in post-intervention answer. The study concluded nurse knowledge regarding reproductive care, female reproductive system, reproductive health development was improved in post intervention compared to pre-intervention. The study recommended that further education and training courses regarding reproductive health care is mandatory for all nurses working in Obstetrics and Gynecology.

Keywords: Nurses, Reproductive, Reproductive system, Obstetric, HIV, health care.

Introduction

Reproductive health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system functions and processes. Reproductive health therefore implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this last condition are the right of men and women to be informed about and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods for regulation of fertility which are not against the law (Family Planning and Reproductive Health Indicators Database, 2019). Quality sexual and reproductive health services are essential to the well-being of person of concern. The services cover a broad spectrum of care, including maternal and newborn care, access to contraception and the prevention and treatment of HIV or other sexually transmitted infection (Healthy Timing and Spacing of Pregnancy, 2008). Reproductive health care addresses the reproductive processes, functions, and systems at all stages of life. It encompasses the sexual health of both men and women, as well as maternal and child health (Fatma, 2020). Works to ensure sexual and reproductive health and rights remain at the very centre of development. The International Conference on Population and Development draws a clear connection between reproductive health, human rights and sustainable development (United Nations Population Fund, 2018). When sexual and reproductive health needs are not met, individuals are deprived of the right to make crucial choices about their own bodies and futures, with a cascading impact on their families' welfare and future generations. Cumulatively, the denial of these rights exacerbates poverty and gender inequality. This is seen most acutely in developing countries, where reproductive health problems are a leading cause

of ill health and death for women and girls of childbearing age (Fourth World Conference on Women, 2020). Young people are disproportionately affected by HIV, for example, and every year millions of girls face unintended pregnancies, exposing them to risks during childbirth or unsafe abortions and interfering with their ability to go to school (Sedletzki, 2016). More than a million people acquire an six transmitted infection STI every single day. Without diagnosis and treatment, some STIs, such as HIV or syphilis, can be fatal. STIs can also cause pregnancy-related complications, including stillbirth, congenital infections, sepsis and neonatal death. STIs like human papillomavirus (HPV) can lead to pelvic inflammatory disease, infertility and cervical cancer, a major killer of women (Nowicka, 2011). Improving sexual and reproductive health is a key effort towards achieving-3, which calls for good health and well-being. It also advances Goal 5, which call for gender equality, as well as many of the other goals included in the 2030 Agenda. It is essential to works with governments, other agencies, civil society and donors to develop comprehensive efforts to ensure universal access to sexual and reproductive health care. For integrating the delivery of these services into primary health care, so it is as accessible as possible. This means, for instance, that a woman could address her family planning, antenatal care, HIV testing and general health needs all in one place (WHO, 2019).

Materials and methods

Ethical Consideration

Permission from the hospital to the manager and matron of *EL Habasabesa* hospital was made through official letters.

Study area

This study was conducted at *EL Habasabesa* locality, Gezira State.

Study design

This intervention cross sectional hospital-based study.

Study Population

Study population consisted from all nurses who were working at obstetrics and gynecology unit in *EL Habasabesa* hospital during the period of the study from (2018 to 2022).

Inclusion criteria

All the nurses working at obstetrics and gynecology unit in *EL Habasabesa* Hospital during the period of study from (2018 to 2022), with their different qualifications were included in the study.

Exclusion criteria

1. Nurses who are refused to participated in this study and their number (2) nurses.
2. Nurses under training.
3. Student Nursing
4. Nurse on Holiday and their number (5) nurses.

Phases of intervention

The intervention divided into two phases one pre intervention second post intervention both of them targeting the nurse knowledge.

Pre intervention phase

A Pilot study was done on a sample of seven nurses in an effort to test the validity and feasibility of the questionnaire instrument.

Pre-Intervention Phase

Before the training program a questionnaire was distributed for available nurses to fill it within 45 – 60 minutes under the researcher guidance to identify the knowledge of the nurses regarding reproductive health care, each nurse had observed for her clinical skills when performance reproductive health care through an observation check list constructed.

Training Program

The program was designed to equip the nurses with essential information and practice regarding reproductive health care in *Elhasabesa* Obstetrics and Gynecology Teaching Hospital Gezira State, and to improve their knowledge and performance in reproductive health care. The program divided into Session (I: to 1x) with different lecture title and objectives. The teaching methods include Lectures, Practical, Audio visual aids Video-role playing, Demonstration and redeminstration. The evaluation methods include Questionnaire (post-test Appendix 1) and checklist to monitor nurses’ performance. The training team included experts in teaching and training: Nursing lecturers specialized in obstetrics and gynecology nursing, general nursing lecturers, clinical instructors, biomedical engineers.

Data analysis:

The data were coded, entered, and analyzed using the Statistical Package for Social (SPSS) version (23). Results were presented in form of frequencies and percentages in Tables, p.value < 0.05 statically significant.

Results and discussion:

The results of nurse knowledge regarding reproductive health care include (Maternal and new born care access to contraception, prevention and treatment of HIV, reproductive health care and sexual heath of both men and women presented high raised percentage for correct answer in post-intervention range between (68.9 to 100 %) compared to correct answer in pre-intervention which between (41.9 - 82 %) Table (1) , for incorrect answer the results were dramatically decrease in post-intervention compared to pre-intervention. These results are in agreement to results of the study done by (Claire and Carolyn, 2017) they stated that nurses training needs regarding reproductive health care. The results of nurse knowledge regarding female reproductive system were raised highly in post-intervention compared to pre-intervention give same results as in reproductive health service increased range between (67.2 to 100 %) Table (2). These results in agreement with Michell *et al.*, 2021. These results are similar to results of the (Hayley Mark et al., 2018), they stated their recommendation that health care providers need to knowledgeable about sexual history and physical examination, prevention, screening, partner services, evaluation of STD-related conditions, laboratory, treatment, and referral to a specialist for complex STD or STD-related conditions. Finally, the results of nurse knowledge regarding reproductive health and development for all five question presented high raised in correct answer for post-intervention ranged between (62.3 to 85.2 %) compared to correct answer for pre-intervention which ranged between 36.1 to 47.5 Table (3). These results are similar to results of the (Stevens, 2018), stated that Midwives having to balance their activities in a field of tension require midwifery models that can guide their practices the mean of nurses’ practice regarding care of patients.

Table 1. Results of nurse knowledge regarding reproductive health service

Reproductive health services	Pre				Post				Total	
	Correct		Incorrect		Correct		Incorrect		No	%
	No	%	No	%	No	%	No	%		
Maternal and newborn care	50	82	11	18	61	100	0	0	61	100
access to contraception	37	60.7	24	39.3	59	96.7	2	3.3	61	100
Prevention and treatment of HIV	34	55.7	27	44.3	59	96.7	2	3.3	61	100

Reproductive health care addresses the reproductive processes, functions, and systems at all stages of life	25	41	36	59	24	39.3	37	60.7	61	100
It encompasses the sexual health of both men and women, as well as maternal and child health	26	42.6	35	57.4	42	68.9	19	31.1	61	100

Table 2. Results of nurse knowledge regarding female reproductive system

The female reproductive system	Pre				Post				Total	
	Correct		Incorrect		Correct		Incorrect		No	%
	No	%	No	%	No	%	No	%		
The female reproductive system is complex as compared to the male reproductive system.	40	65.6	21	34.4	59	96.7	2	3.3	61	100
Females have to bear the fetus during the fetal period of development within their bodies.	36	59	25	41	43	70.5	18	29.5	61	100
Modifications and adaptations to bear the fetus make female reproductive systems more complex.	35	57.4	26	42.6	41	67.2	20	32.8	61	100
The main role of the female reproductive system is to produce eggs and allow the process of fertilization and development to take place within the body.	54	88.5	7	11.5	61	100	0	0	61	100
The organs of the female reproductive system consist of internal (uterus and ovaries) and external parts (vulva, labia, clitoris).	50	82	11	18	58	95.1	3	4.9	61	100

Table 3. Results of nurse knowledge regarding reproductive health and development

Reproductive health and development	Pre				Post				Total	
	Correct		Incorrect		Correct		Incorrect		No	%
	No	%	No	%	No	%	No	%		
Sexual and reproductive health and rights remain at the very Centre of development.	27	44.3	34	55.7	38	62.3	23	37.7	61	100
A clear connection between reproductive health, human rights and sustainable development.	29	47.5	32	52.5	40	65.6	21	34.4	61	100
When sexual and reproductive health needs are not met that impact on their families' welfare and future generations.	26	42.6	35	57.4	52	85.2	9	14.8	61	100
Because women bear children, and also often bear the responsibility for nurturing them, sexual and reproductive health and rights issues cannot be separated from gender equality.	25	41	36	59	45	73.8	16	26.2	61	100
The denial of	22	36.1	39	63.9	46	75.4	15	24.6	61	100

these rights exacerbates poverty and gender inequality.											
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Conclusion

The study concluded nurse knowledge regarding reproductive care, female reproductive system, reproductive health development was improved in post intervention compared to pre-intervention.

Recommendation

Further education and training courses regarding reproductive health care is mandatory for all nurses working in Obstetrics and Gynecology

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