

Evaluation of Nursing Students' Concept Concerning Premarital Counseling and Examination

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Abstract

This study was aimed to assess nursing student's perception regarding premarital counseling and examinations. **Study setting:** The study was conducted at Faculty of Nursing Ain-Shams University. **Study design:** A descriptive study design was used. **Sample subjects and size:** The study was conducted among students at third academic year at faculty of nursing 210 students. **Study sample:** A convenience sample. **Study Tools:** Self administrated structured questionnaire sheet, and Likert scale were developed to collect data. **Results:** The study findings revealed that, 74.6%, 75.7% of students had correct knowledge & positive attitude respectively regarding premarital counseling and examinations. There was highly statistically significant difference ($p < 0.001$) between students' total score of knowledge & total score of their attitude. **Conclusion:** The present study findings revealed that, three quarters of the studied sample had correct knowledge & positive attitude regarding premarital counseling and examination. **Recommendation:** Integrating the concept of the premarital counseling and examination into the under graduating students.

Key words: perception, premarital, counseling & examinations (PMCEs).

Introduction

Premarital counseling is a type of therapy that helps couples prepare for marriage. Premarital counseling can help ensure that the partners have a strong, healthy relationship - giving them a better chance for a stable and satisfying marriage. It can also help them to identify weaknesses that could become problems during marriage (*Mayo Clinic Staff, 2014*).

Premarital counseling includes interpersonal communication, decrease conflict by addressing expectations within marriage "premarital education", medical

and genetic counseling. Medical counseling explain the basic reproductive health, and family planning issues to the couples in terms of teaching them facts concerning the male and female reproductive parts, how menstruation, ovulation and fertilization happen, and family planning methods) (*Hamamy, 2012*).

Pre-marital examination is considered the most effective means of prevention that could limit the birth of affected children, through minimizing the marriage of the carriers of the blood genetic disorder. It is also the most appropriate procedure, as it is generally acceptable from the religious and

ethical point of view as well as its minimal health, and economical requirements (*Petro, 2013*).

The premarital examination varies from one region to another depending on the prevalence of the diseases in that region. Generally the premarital examination should include history taking, laboratory investigation and physical examination (*Kumar, 2012*).

Nurse has a crucial role to play in premarital care and examination. They communicate with clients verbally and non verbally so it requires much skill to do this and with the considerations of various domains: biological, psychological, socio culture, spiritual and environment. The role of nurse is very complex as it includes there role as advocator, educator, communicator, consultant, coordinator of care, leader or member of the profession, care giver, empowering agent, researcher user and health promoter, role model and as a counselor (*Leifer, 2013*).

Justification of the study:

In Egypt, lack of premarital counseling and examination services prevent young male and female from seeking genetic diseases. So, According to (*WHO, Egypt, 2014*). Congenital anomalies affect an estimated 1 in 33 infants and result in approximately 3.2 million birth defect related disabilities every year. The percent up to 7.65 million, nearly 9 % of the population, who are suffering from Thalassemia (*Deif, 2015*).

Nowadays premarital counseling and examination are of great importance in Egypt because of high prevalence of divorces, the total number of divorces in 2015 reached 199,867 in comparison to 180,244 in 2014, the central Agency for public Mobilization and statistics (CAMPAS) said in it's annual report on marriages and divorces (*CAMPAS, 2016*).

In spite of these problems, no previous study was conducted at maternal and gynecological at nursing Ain-Shams University to evaluate male and female nursing students' perception regarding premarital counseling and examination.

Today the student nurse will be the future nurses who was responsible for prevention and promotion of health during life cycle so this study was conducted to evaluate the nursing perception to what abase for better planning about counseling in the reproductive health.

Aim of the study

The aim of the study was to assess nursing students' perception regarding premarital counseling and examination

Research questions:

- 1- What are student nurses' knowledge & attitude concerning PMCEs?
- 2- What is the relation between student knowledge concerning PMCEs and their general characteristics?
- 3- What is the relation between students' nurses total knowledge concerning PMCEs and their total attitude?

Methodology

Research design:

A descriptive study design was used.

Subjects (sampling):

Sample type:

A convenience sample was utilized.

Sample size:

Two hundred and ten of student nurses.

Tools of the data collection:

1. An interview questionnaire sheet designed by the researcher based on reviewing the related literatures.
2. The second tool is Likerts' scale attitude according to *Ibrahim,(2010)* used after modification done by the researcher. (10) items to evaluate student nurses attitude concerning premarital counselling and examination.

A- Knowledge was scored as the following:

- Incorrect answer scored as one
- Correct answer scored as two

B- accepting scoring system was calculated as follow:

- Disagree scored as one
- Uncertain scored as two
- Agree scored as three.

1- Ethical considerations:

- The research approval was obtained from Scientific Research Ethical committee in Faculty of Nursing at Ain Shams University before starting the study.
- The researcher clarified the objective and aim of the study to student to obtain their oral consent to participated in the study.
- The researcher assured maintaining anonymity and confidentiality of the subject data.
- The study didn't harm dignity, tradition and religious aspect of the students.
- The student was withdraw to participate in the study at any time.
- All data collected after statistical analysis were burnet.

Pilot Study:

Result

A pilot study was done on 10% (21) students of total sample size and was excluded from it for testing clarity, arrangement of the items, applicability of the data collection tools and time consuming for each tool. Items were been rearranged and modifications to the tools were done based on the findings of the pilot study. Some questions were excluded, rephrased and then the final form was developed.

Field work:

- Data was collected after obtaining the official approval for data collection within about 6 months from December 2015 to June 2016.
- The researcher attended the study setting 3 days per week from 9 a.m to 2 p.m.
- At the beginning of interview the researcher start to introduce herself, briefly explained the aim of the study to the student nurse to gain confidence and trust to convince them to participate in the study.
- Each student firstly was interviewed (self administered questionnaire sheet) to assess knowledge regarding premarital counseling and examination in the break time between lectures. The duration for each questionnaire was 20 minutes.
- Then the researcher assessed student's attitude regarding premarital counseling and examination by using schedule attitude (likert scale) It's duration 10 minutes for each student.
- The researcher repeated the same previous steps of data collection with the students who didn't attend in the previous visit.
- The researcher repeated the previous steps until finished predetermined numbers (210 students).

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Table (1): Frequency distribution of studied sample knowledge regarding PMCEs(n=189).

Knowledge items	Correct(N=141)		Incorrect(N=48)	
	No.	%	No.	%
Definition of PMCEs.	133	70.4%	56	29.6%
Importance of PMCEs.	148	78.3%	41	21.7%
Places offering PMCEs.	118	62.4%	71	37.6%
Persons eligible for PMCEs.	183	96.8%	6	3.2%
components/Services which providing at PMCEs.	181	95.8%	8	4.2%

Table (1): This table shows that 70.4% from studied sample had correct knowledge about the definition of PMCEs, also 78.3% had correct knowledge about the importance of PMCEs,62.4% had correct knowledge about places offering PMCEs,96.8% had correct knowledge about persons eligible for PMCEs,95.8% had correct knowledge about services which providing at PMCEs.

Table (2): Frequency distribution of studied sample according to their attitude regarding PMCEs (N=189).

Attitude	Disagree (n=29)		Uncertain (n=17)		Agree (n=143)	
	No.	%	No.	%	No.	%
1.Utilized PMCEs are important for couples.	1	0.5%	9	4.8%	179	94.7%
2. PMCEs are a significant impact on the reproductive health of the future.	2	1.1%	5	2.6%	182	96.3%
3. You should be honest with your couple in the case of any diseases in the family.	3	1.6%	9	4.8%	177	93.7%
4. Customs and traditions prevent me from utilizing PMCEs.	128	67.7%	3	1.6%	58	30.7%
5. Consanguinity are considered the main causes of genetic diseases.	8	4.2%	10	5.3%	171	90.5%
6. If the PMCEs indicate the presence of disease not be an obstacle in the marriage	63	33.3%	13	6.9%	113	59.8%
7. PMCEs must be obligatory.	48	25.4%	21	11.1%	120	63.5%
8. High cost is the main barrier of PMCEs.	15	7.9%	33	17.5%	141	74.6%
9. PMCEs must be conducted confidentiality.	12	6.3%	34	18.0%	143	75.7%
10. If any diseases appeared on one of the couples has to be treated and rehabilitated premarital.	5	2.6%	37	19.6%	147	77.8%

Table (2): This table shows that (94.7%) from studied sample agreed with the utilizing PMCEs, also (96.3%) agreed with PMCEs are a significant impact on the reproductive health of the future, also (93.7%) agreed with should be honest with your couple in the case of any diseases in the family, also (90.5%) agreed with Consanguinity are considered the main causes of genetic diseases.

Fig (1): Sources of the studied sample knowledge regarding premarital counseling and examination.

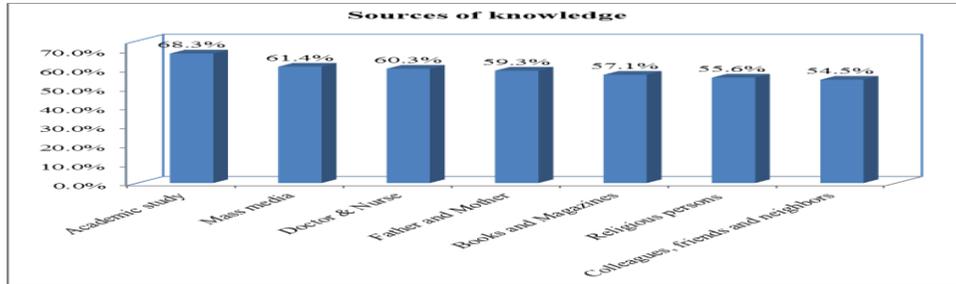


Table (3): Relation between general characteristics of studied sample and their total knowledge (N=189).

General characteristics	Total Knowledge				Chi-square test	
	Incorrect (n=48)		Correct (n=141)		X2	p-value
	No.	%	No.	%		
Gender						
Male	8	16.7%	35	24.8%	0.931	0.334
Female	40	83.3%	106	75.2%		
Religion						
Muslim	41	85.4%	138	97.9%	8.740	0.003**
Christian	7	14.6%	3	2.1%		
Residence						
Rural	20	41.7%	57	40.4%	0.000	0.984
Urban	28	58.3%	84	59.6%		
Marital status						
Single	45	93.8%	133	94.3%	3.092	0.213
Married	2	4.2%	8	5.7%		
Divorced	1	2.1%	0	0.0%		
Educational level of Father						
Illiterate	4	8.3%	9	6.4%	17.560	0.002**
Reads and writes	5	10.4%	3	2.1%		
Primary	0	0.0%	23	16.3%		
Secondary	18	37.5%	67	47.5%		
University	21	43.8%	39	27.7%		
Father's occupation						
Governmental sector	15	31.3%	83	58.8%	16.285	0.006**
Private sector	22	45.8%	31	22%		
Pension	11	22.9%	27	19.1%		
Educational level of Mother						
Illiterate	16	33.3%	15	10.6%	32.126	<0.001**
Reads and writes	11	22.9%	8	5.7%		
primary	0	0.0%	18	12.8%		
Secondary	16	33.3%	74	52.5%		
University	5	10.4%	26	18.4%		
Mother's occupation						
House wife	33	68.8%	114	80.9%	6.644	0.036
Governmental sector	12	25.0%	26	18.4%		
Private sector	3	6.3%	1	0.7%		

Table (3): This table shows that the highly significant between the knowledge of studied sample and their religion, their educational level of their parents and their father's occupation

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respectively (0.003) & (0.002) & (0.006) (<0.001). Also shows that statistically significant difference between the knowledge of studied sample and their mother's occupation (0.036).

Table (4): Relation between total knowledge score of studied sample & their attitude regarding PMCEs (N=189).

Item	No.	%	R	P
Total Knowledge			0.614	<0.001**
Correct	141	74.6		
Incorrect	48	25.4		
Total Attitude				
Disagree	29	15.3		
Uncertain	17	9.0		
Agree	143	75.7		

Table (4): This table shows that the relation between total knowledge and total attitude were Positive relation and highly statistically significant difference between total knowledge and total attitude.

Discussion

The present study was aimed to evaluate students' concept concerning premarital counseling and examination this aim was significantly achieved through the present research question.

- 1- What are the students' nurses knowledge & attitude concerning PMCEs?
- 2- What is the relation between student knowledge concerning PMCEs and their general characteristics?
- 3- What is the relation between students' nurses total knowledge and their total attitude concerning PMCEs?

According to study findings.

Concerning the result of the present study was revealed that more than two thirds of students had correct knowledge about definition, importance and places of premarital counseling & examination. Also it revealed that, the majority of the students had correct knowledge in relation Persons eligible for PMCEs & offered services of premarital counseling & examination (**Table 1**).

The previous study finding was congruent with *Ibrahim, (2010)* who indicated that, the majority of studied

sample had correct knowledge about importance of premarital counseling & examination and more than three quarter of study sample gave correct knowledge about the target group eligible for PMC at her study "Knowledge and Attitude of El-Mansoura University Students Regarding Premarital Counseling and Examinations".

The result of the previous study was in accordance with *Hassan, (2002)* who stated that, the majority and two thirds of the studied sample had correct knowledge as regards having information about definition of premarital counseling and of the nature of the services offered by premarital counseling respectively.

Meanwhile the previous study was disagree with *Ibrahim, (2010)* who said that more than two thirds of study sample had incorrect knowledge about places providing premarital counseling and examination at her study " Knowledge and Attitude of El-Mansoura University Students Regarding Premarital Counseling and Examinations".

The previous study reversed with *Mohamed, (2015)* who said that nearly one third & more than half respectively correct knowledge in relation to having information about premarital care, definition, importance & components at her study "Premarital care:

Health promotion program for female Students in Ain Shams University Hostel".

Meanwhile the previous study finding was on converse with *Ahmed et al., (2012)* who mentioned that, the entire study sample had poor knowledge about genetic disorders, premarital investigations, this study done for secondary school students in rural area in Egypt. Also it in contrary with *Hosny et al., (2010)* who reported in a study about the most encountered groups of genetic disorder in Giza Governorate that, the study sample perceptions regarding premarital testing, lack of knowledge, which may prevent them for undergoing procedure regarding premarital testing.

The present study revealed that, the majority of the studied sample agreed with the importance of premarital care and examination, and agreed with PMCEs impact on the reproductive health of the future. The previous study showed that the majority of the studied sample were agreed with that the consanguinity considered the main causes of genetic diseases. Also indicated that, two thirds agreed with the abnormal results wouldn't be obstacle in marriage (**Table 2**).

Meanwhile the previous study finding was the same line with *Mohamed, (2015)* who reported that, nearly three fourths and more than one third of the study sample had positive attitude for the acceptance of premarital care for the couples & agreement of the importance premarital care protection for the future child respectively.

The previous study finding was congruent with *Al Farsi et al., (2011)* in a study aimed to assess attitudes for premarital counseling among students of Abha Health Sciences College, Saudi Arabia, they discovered that, premarital counseling was accepted by most of study sample. And correspond with *Abd Al Azeem et al., (2011)* who stated that favorable attitudes were observed as regard acceptance to receive

premarital care, willingness to advise others to receive this service.

The previous study finding was inverse to *Abd-Allah, (2016)* in her study which aimed to assess perception regarding premarital screening among Ain-shams University students which indicated that, the majority of her studied sample had negative attitude about the reason of arises diseases as the result of consanguinity marriage.

The result of the present study indicated that more than two thirds of studied sample's knowledge sources had received their knowledge from the university curriculum followed by mass media (**Fig.1**). The previous study finding was in the same line with *Mohamed, (2015)* who reported that main sources of knowledge, before implementation the intervention program less than one fifth & more than one third were school or university curriculum & television respectively.

Meanwhile the previous study finding corresponded to a study done for Omani University students by *Alkinidi et al., (2012)* who stated that, the main sources of information were more than one third for school/college, followed by more than one third for media, one third for family and friends and less than one third for health services at his study "Knowledge and Attitude of University Students towards Premarital Screening Program".

While the previous study finding was on the opposite side of *Abd Al Alzeem et al., (2011)* who reported that, television was chosen as the first source of knowledge at his study "Promotion of knowledge and Attitude towards Premarital Care: An interventional study among medical students in Fayoum University". Also the previous study finding was disagreed with *Ibrahim, (2010)* who reported the first main source of knowledge was mass media followed by Academic study.

The result of the current study indicated that, there was highly statistically

significant difference between students' total knowledge and their religious, the educational level of their parents', their fathers' occupation and significant difference to their mothers' occupation. Also the current study indicated that there was insignificant difference to their gender, marital status and residence (**Table 3**).

The previous study was in the same line with *Mohamed, (2015)* who revealed that, there was highly statistically significant difference between students' total knowledge and the educational level of their mothers, in her study "Premarital care: Health promotion program for female students in Ain Shams University Hostel". And in accordance with *Abd El-Ghany, (2010)* who indicated that, the residence didn't influence on the level knowledge towards premarital counseling and care (PPMC) among Hadhramout University students.

The previous study finding was reversed with *Abd-Allah, (2016)* who stated that, there was highly statistically significant difference between students' total knowledge and their marital status & residence in her study about "Assessment of perception regarding premarital screening among Ain-shams University students".

The result of the current study showed that, there was highly significant positive relation between total knowledge and attitude (**Table 4**). The previous study finding was corresponding with *Sobhy et al., (2001)* in a study done at Alexandria University to assess knowledge and attitudes of nursing university students, and reported that, a positive correlation existed between knowledge and attitude of the study sample.

The previous study finding was also incongruent with *Mohamed, (2016)* who revealed that, there was statistical significant difference between students' knowledge and their attitude related to premarital screening. Also it agreed with *Abd El-Ghany, (2010)* who conducted a study on knowledge and attitude about premarital counseling among Hadharmout University Students which

revealed that, there was statistical significant between students' knowledge and their attitude towards premarital counseling and care.

The previous study result was disagreed with *Odelola et al., (2013)* who mentioned that, there was no statistical significant difference between the knowledge & attitude of the students of Osun State Polytechnic, towards premarital genetic screening.

Conculosion

In conclusion the present study findings revealed that, three quarters of the studied sample had correct knowledge & positive attitude regarding premarital counseling and examination. Also, students' knowledge regarding premarital counseling and examination found to be affected by educational level and occupation of their parents. But their attitude was affected by their gender, parents' educational level and their fathers' occupation. In addition, the current study findings indicated that, there was highly statistically significant relation between students' source of knowledge and their attitude and positive correlation between

Recommendations

The following points were recommended:

- 1- Integrating the concept of the premarital counseling and examination into the under graduating students.
- 1- Establishing teaching courses for teachers in nursing schools, institutes and faculties to tackle "premarital health" issues delivered to the students and putting this section as the first part of the curriculum.
- 2- Further researches are needed to assess effect of students' parents'

communication on their perception about premarital health.

- 3- Further researchers are needed to investigate students' barriers for utilization of premarital care health services.

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