Family planning practice among married Orang Asli women in Sepang district and its associated factors

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ABSTRACT

Introduction: Family planning allows individuals and couples to attain their desired number of children. In Malaysia, Contraceptive Prevalence Rate (CPR) was reported about 52.2% in 2014. The aim of the study is to determine family planning practice among married Orang Asli women in Sepang district and its associated factors. Methods: A cross sectional study was conducted at five Orang Asli settlements in Sepang. Respondents were selected based on cluster sampling and a total of 368 Orang Asli women (15 to 49 years old) were interviewed using a pretested questionnaire. Chi square test, simple and binary logistic regression were used in the analysis. Results: The response rate of the study was 98.6%. A total of 212 (58.4%) of the study participants currently practicing family planning and most of them using oral contraceptive pills (68.3%). In logistic regression models, contraceptive use was significantly more common among women who having children (adjusted odds ratio [AOR] =43.659, 95% confidence interval [CI]: 5.788, 329.323), being housewives (AOR =1.973, 95%CI: 1.205, 3.230) and every one unit increase of attitude score, the odds of practicing family planning increases by 1.1 times (AOR=1.113, 95%CI: 1.006, 1.232). However, age of respondent, education level, level of knowledge and decision making power were not associated with family planning practice. Discussion: The CPR of current study is about the same as national CPR in 2014. A few issues were identified such as the respondents’ low knowledge on certain type of family planning and misconception regarding usage and side effect of family planning. Therefore, effective health education programmes are needed to target the women and their husband to give them awareness to practice family planning.

KEY WORDS:
Family planning practice, Orang Asli women, Sepang

Finishing housemanship in time: two years or more?

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ABSTRACT

Introduction: Among perpetual issues regarding housemanship training in Malaysia is extension due to incompetent House Officer (HO). Almost 30% of HO were extended during their housemanship training. Once their housemanship extended, the HO will be unable to complete his/her training within the stipulated two years period. This study aimed to quantify the duration required among extended HO to complete their housemanship and to identify reason for the extension. Methodology: This is a cross-sectional study among HO who were extended during housemanship between 2012 to June 2014. Data collection form was used to obtain information from 44 housemanship training hospitals. Basic demographic profile, academic qualification and time to complete housemanship were calculated from the date they reported for duty and date of obtaining Full Registration indicating they have completed five compulsory postings. Reason for extension were classified into Administrative, Competency or Both. Result: Among HO who were extended and successfully obtained Full Registration, 97% (n= 1210) managed to complete their housemanship within three years. Only 3% (n=38) of the extended HO have had their housemanship delayed by more than 12 months, taking 3-4 years to complete it. Forty six percent (n=799) of the HO were extended due to administrative issue, 24 % (n=416) were due to competency issues and 25% (n=421) were due to both reasons. Postings which usually have many HO extended are Medical, Obstetrics and Gynaecology and Paediatric departments. Conclusion: Most HO who were extended managed to complete their housemanship within additional one year; totalling to three years of housemanship training. The delay on completion of the training because of extension in housemanship posting largely was due to administrative issues like incomplete log book and disciplinary actions.

KEY WORDS:
Housemanship, extension, incompetent