



Evolutionary Concept Analysis of Reproductive Life Planning

Stephanie W. Edmonds and Lioness Ayres

Correspondence

Stephanie W. Edmonds,
BSN, MPH, University of
Iowa, 5231 Westlawn, Iowa
City, IA 52242.

stephanie-edmonds@uiowa.edu

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ABSTRACT

Reproductive life planning is recommended as an important topic of discussion at every health care interaction with women and men of reproductive age; however, this intervention has not been well studied. Therefore, the purpose of this evolutionary concept analysis was to synthesize the relevant literature, identify the essential attributes of the concept, and develop a conceptual definition to guide future research and to help implement reproductive life planning in routine health care practice.

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Stephanie W. Edmonds, BSN, MPH, is a PhD candidate in the College of Nursing, University of Iowa, Iowa City, IA and a VA Quality Scholar for the Iowa City VA Health Care System, Iowa City, IA.

Lioness Ayres, PhD, RN, is a professor in the College of Nursing, University of Iowa, Iowa City, IA.

The United States ranks last out of 26 developed countries in infant mortality, with 6.1 infant deaths per 1,000 births compared with 5.0 deaths or fewer per 1,000 in 22 other countries (Organisation for Economic Co-Operation and Development, 2015). The lead causes of infant mortality and morbidity are birth defects, low birth weight, and prematurity (Heron et al., 2009). Health experts believe that one cause of these poor birth outcomes is the high rate of unintended pregnancies. Unintended pregnancies account for almost half of all pregnancies in the United States and are associated with late entry into prenatal care, harmful health behaviors of mothers before they realize they are pregnant, and unmanaged chronic illnesses (Dott, Rasmussen, Hogue, Reefhuis, & National Birth Defects Prevention Study, 2010; Finer & Zolna, 2011, 2016; Hellerstedt et al., 1998; Mayer, 1997). Because critical development of the fetus occurs during the first few weeks of pregnancy before a woman may realize she is pregnant, the Centers for Disease Control and Prevention (CDC) recommends preconception care to improve birth outcomes. In particular, they recommend that all women and men have reproductive life plans (Johnson et al., 2006).

A reproductive life plan reflects a person's intentions about the number and timing of pregnancies in the context of personal values and life goals (Johnson et al., 2006). Most authors recommend that health care providers counsel men and women to formulate plans for having children and to discuss these plans at every office visit. Herein, we refer to the process of reproductive life planning as *RLP* and its product, the reproductive life plan, as *a plan*.

For women or couples whose plan includes pregnancy within the next 12 months, providers can start preconception counseling (Lu, 2007; Moos et al., 2008). For those whose plan does not, RLP provides an opportunity to discuss contraception (Moos et al., 2008). The long-term goals of RLP are to increase the proportion of intended pregnancies and improve maternal and infant outcomes (Johnson et al., 2006).

To this end, the U.S. Department of Health and Human Services Office of Population Affairs has made RLP a program priority for Title X clinics, that is, clinics that receive funding from the government to provide family planning

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services to low-income and uninsured individuals. The [Office of Population Affairs \(2016\)](#) indicates that these clinics should assess each person's reproductive life plan to determine the need for family planning services and provide preconception services as stipulated in quality family planning. Despite this mandate, there is scant evidence on the effectiveness of RLP to improve birth outcomes, and little is known about individuals' and providers' experiences with this intervention. Absent this evidence, wholesale adoption of RLP could lead to a government-prioritized intervention that fails to meet targeted goals and would waste scarce resources. Essential attributes of RLP are needed to support the content validity of interventions and to evaluate practice outcomes.

The purpose of this evolutionary concept analysis was to synthesize the relevant literature on RLP, identify the essential attributes of the concept, and develop a conceptual definition consistent with the literature. In addition, we identified antecedents and potential consequences of RLP to guide research and practice.

Methods

Evolutionary Concept Analysis

This concept analysis was conducted using Rodgers' evolutionary method ([Rodgers, 2000](#)), which allows the investigator to track the meaning of a concept over time and to identify other terms that have been used synonymously and similarly. Findings from a concept analysis can facilitate clear communication among researchers, policymakers, and providers. For RLP, concept analysis can be used to design interventions that are consistent across providers or researchers.

Concept analysis begins with a systematic search of the literature. Data are collected from primary sources that represent the attributes of the concept and reviewed for conditions antecedent to and consequent of the concept to explore its contextual basis ([Rodgers, 2000](#)). Because discussion of RLP in the literature is primarily theoretical rather than empirical, concept analysis facilitates identification of those key constructs that are consistent across sources and thus that should be incorporated in interventions and policies.

Identification of the essential attributes of reproductive life planning is necessary to support the validity of interventions and to evaluate practice outcomes.

Sample Selection

We searched three databases for this analysis: PubMed, Web of Science, and CINAHL. Search terms included *reproductive life plan*, *reproductive health plan*, and *reproductive plan*. To trace the evolution of the concept, we set no limit on the year articles were published; however, we found nothing published before 1980. The initial search yielded 78 results. We excluded duplicates and articles that mentioned but did not discuss RLP, typically as a component of preconception care, which left 29 articles. We searched the reference lists of these articles and identified five additional articles, which yielded 34 articles.

To represent non-peer-reviewed or lay literature, we also conducted a Google search during 2016 using the keywords *reproductive life plan*. The search yielded 7,990 hits. We arbitrarily selected the first 10 results after excluding Wikipedia and duplicates from the database search. We reviewed two other Web sites mentioned in the reference lists of articles already found; only one of these discussed RLP.

[Rodgers \(2000\)](#) recommended sampling at least 30 items to identify a consensus from the literature, especially with a concept such as RLP, which is relatively new. Our final sample included 46 references from peer-reviewed literature and Internet sites.

Data Analysis

Data were organized using the Matrix Method ([Garrard, 2011](#)). This method facilitates a systematic, structured presentation of information abstracted from each article. In addition to information about title, author, publication date (where available) and source, our matrix included dimensions of Rodgers' model (attributes, antecedents, consequences), components of RLP (elements or topics to be included in a plan), and identified barriers to RLP. Finally, one column included implications or insights about the concept.

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