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Understanding health workers' views on addressing the unmet need for family planning in Guadalcanal, Solomon Islands

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Abstract

Background: It is estimated that in the Pacific region, unmet need for family planning is among the highest in the world. This study supports access to family planning based on evidence that impacts of contraceptive use range from improved health to socioeconomic benefits and sustainable development. This study hears from health workers providing essential family planning care to women in Guadalcanal, Solomon Islands. This region was chosen for this study as it has a subnational disparity of highest unmet need for family planning in the Solomon Islands.

Methods: This mixed methods study was based on an exploratory descriptive research approach using a survey, which was distributed to health workers at rural and urban health centres. Fifty-six surveys comprised of 32 questions, both open and closed-ended, were completed and analysed. This included three demographic questions.

Results: Health workers identified multiple structural, social, and service-driven barriers to meeting the contraceptive needs of women in their communities. Structural barriers include gender inequity and religious influence. Social and service barriers that may be more amenable to influence include misinformation and fear about contraceptive side effects; contraceptive stigma; and access to contraceptive training and education for health workers. Health workers expressed eagerness to address the unmet need for contraception in their communities and are a resource that should be prioritised in programs seeking to expand access to contraception in the Solomon Islands.

Discussion: This study affirms health workers as key resource, addressing the unmet need for contraception and calls for program and policy solutions informed by their perspectives. The two main priorities they emphasised to help tackle the persistent problem of unmet need for contraception are an increase in their capability to provide contraceptive implants, and an increase in community education to boost acceptance of family planning care from women and their families.