

Counseling Approach in Promoting and Strengthening Childbearing: Utilizing Peer Education

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Abstract

Introduction:

Given the country's population policies and declining fertility rates, attention to the role of counseling and education in promoting childbearing is essential. This study aimed to enhance the counseling skills of master's students in midwifery and empower undergraduate midwifery students in promoting childbearing using a peer education approach.

Methods

This qualitative study was conducted using content analysis. Initially, a focus group session was held with faculty members, followed by another session with 6 master's students in midwifery counseling. The master's students were divided into two groups of three and utilized cognitive-behavioral and motivational approaches, respectively. Each group provided a 2-hour counseling session to 3 undergraduate midwifery students. After the intervention, a final focus group session was conducted with the supervisors and students, and the data were analyzed using conventional content analysis.

Results

Data analysis led to the extraction of two main themes: "Reasons for disagreement with childbearing" and "Items in childbearing counseling." Inhibiting factors included hopelessness about the future, economic problems, and changes in cultural beliefs. In the counseling domain, components such as demographic assessment, child-rearing education, question-and-answer sessions, and teamwork were identified as influential factors. Additionally, time constraints and lack of prior familiarity were reported as major challenges.

Conclusion

The peer education approach using cognitive-behavioral and motivational methods can positively impact the knowledge and attitudes of midwifery students as future promoters of childbearing. It is recommended that this educational model be integrated into the academic system and health centers to enhance the culture of childbearing.

Introduction

Today, population growth and its structure are among the most fundamental and important issues of development in the domain of policy-making and designing socio-economic programs for countries. Indeed, the main component of any country's development is its population (1). Any country with a proportionate and optimally growing population will find it easier to plan for development and achieve

indicators of progress and welfare (1, 2). The axis of development in countries is typically the young, dynamic, and growing population. If a country continues to experience low fertility rates, it will lead to population aging, a reduction in the workforce, and negative population growth (1, 3). Population aging will have negative social, economic, security, political, and cultural consequences for a country (1, 4).

The announcement of population policies by the Supreme Leader in May 2014 led to a revision of the Ministry of Health's policies. Improving the total fertility rate with the approach of maintaining and enhancing maternal and child health indicators was announced as the Ministry of Health's population policy, and increasing the fertility rate with regard to the optimal population in terms of quality and quantity was placed on the agenda (1, 5, 6). Childbearing depends on many dimensions, such as economic and social issues, but the role of cultural, spiritual, and lifestyle factors can also be prominent, which must be considered in promoting childbearing (4, 7). The results of a study showed that modern lifestyle, level of adaptation and cohesion, housing status, and employment of young women had the highest priority among factors affecting childbearing in Iran. Furthermore, the study's recommendations included revising existing laws and educational institutions to increase childbearing, promoting the Islamic-Iranian lifestyle, supporting cultural productions in schools and universities, and allocating affordable land and housing to young and childbearing families (7). Another study also considered cultural and religious teachings effective in promoting childbearing (8, 9). One of the effective factors in promoting childbearing is counseling (9). Holding counseling sessions about the role of children in people's lives across different age groups, educational levels, and all social strata can be effective (5, 10). Counseling is an active educational relationship between the client and the counselor through which the client learns proper and appropriate ways to meet their needs, recognizes their feelings, and acquires extensive information (6, 11). After developing this awareness and understanding their life goals, they learn how to achieve them, and ultimately, the individual's lifestyle changes through counseling (11). Counseling is conducted on various topics, of which childbearing counseling is one type. In this type of counseling, the goal is to increase couples' awareness regarding the problems of having only one child and childlessness, and to enhance couples' skills in making decisions about childbearing, its timing, and the number of children (1, 6, 12).

Increasing voluntary and planned pregnancies through empowering society regarding the importance of childbearing and avoiding having only one child or childlessness, reducing the average time interval between marriage and the first child, and reducing the average time interval between children are among the goals of childbearing counseling. There are three main groups for promoting childbearing, including: 1) Couples who have started their married life and, although they do not meet the criteria for special reproductive care, do not have a plan for childbearing; and 2) Couples who have children and, although they do not meet the criteria for special reproductive care, do not have a plan for childbearing or have delayed their pregnancy and desire to have another child, and are approaching the end of their reproductive years, and despite not meeting the criteria for special reproductive care, have not planned for their next pregnancy (1).

In this regard, one of the areas that has received less attention is improving the knowledge and attitude of counselors, promoters of childbearing, and midwifery experts through education. One of the educational methods is peer education (13). Peer education is a method in which students learn from each other, and in fact, instead of just listening to the instructor's lectures, students explain concepts to one another. This method improves teamwork and makes understanding the subject easier for all class members (13, 14). Studies have also demonstrated the effectiveness of peer education (13, 15).

Therefore, considering the importance of improving the knowledge and attitude of counselors and promoters of childbearing and the effective method of education through peers, this study was designed with two objectives: improving the skills of master's students in midwifery counseling by teaching a peer group (undergraduate midwifery students), and second, increasing the skills, knowledge, and attitude of undergraduate midwifery students for promoting childbearing to the main target groups.

Methods

This study is qualitative research and was examined using content analysis. In this study, initially, faculty members formed a focus group session to brainstorm and reach a common goal. In this session, it was determined that using peer education to improve students' knowledge and attitudes could create more motivation, so it was decided that master's students in midwifery counseling would teach undergraduate midwifery students about the importance of childbearing counseling for target groups using psychological approaches they had learned in theoretical courses, and encourage them toward this important matter.

Subsequently, a focus group session was also held with master's students in midwifery counseling. The group of 6 master's students in midwifery counseling was divided into two groups of 3. The students selected their groups themselves based on their mutual knowledge and prior collaborations. The purpose of holding this session was to decide which counseling approaches to use for counseling undergraduate midwifery students to achieve better results. Various methods were proposed, and their justifications were expressed. Ultimately, it was decided that one group would use the cognitive-behavioral change approach and the second group would use the motivational approach. Both groups were given sufficient time to develop appropriate content using their chosen approach and to divide the work accordingly.

On the day of the counseling implementation, each group of master's students in midwifery counseling provided counseling to 3 undergraduate midwifery students who were completing their reproductive health internship. They presented their group training in a 2-hour session in the presence of a faculty member. After the training sessions, another focus group session was held with the presence of two faculty members who supervised the training, along with the group of 6 master's students in midwifery counseling. In this session, the success rate of this training based on the approaches was discussed, critiqued, examined, and qualitatively evaluated. In all held sessions, audio was recorded using voice recording software on mobile phones. Then, all group interviews were transcribed completely and

precisely. Afterward, the transcribed interviews were carefully studied and evaluated using content analysis.

The interview guide used in this study was developed by the research team based on the study objectives and a review of the literature. The guide consisted of open-ended questions for focus group discussions with faculty members, master's students, and the final evaluation session.

Interview Guide for Focus Group Discussions

A) Questions for Faculty Members:

1. What are the most important challenges students and young people face regarding childbearing?
2. What factors affect the decline in hope and motivation for the future among the youth?
3. What are the advantages and disadvantages of peer education compared to traditional methods?
4. What educational approaches do you suggest for improving the counseling skills of master's students in midwifery?
5. What topics and content should be covered in childbearing counseling sessions for undergraduate midwifery students?
6. Which psychological approaches (cognitive-behavioral, motivational, etc.) are more effective for childbearing counseling?

B) Questions for Master's Students in Midwifery Counseling (Pre-intervention):

1. From your perspective, what are the most important reasons for young people's opposition to childbearing? (Economic problems, hopelessness about the future, cultural belief changes, greater well-being, etc.)
2. What cultural or social beliefs do you observe in society that hinder childbearing?
3. What has been your experience with childbearing counseling? What challenges have you faced?
4. If you want to teach undergraduate midwifery students as a counselor, what methods and techniques would you use?
5. Between cognitive-behavioral and motivational approaches, which one do you find more suitable for childbearing counseling? Why?
6. What components should childbearing counseling sessions include? (Demographic condition assessment, child education, Q&A, group work, etc.)
7. What factors can increase the effectiveness of counseling sessions?

C) Questions for the Final Focus Group (Post-intervention with supervisors and master's students):

1. What was your experience of implementing counseling sessions using cognitive-behavioral and motivational approaches?
2. To what extent do you think undergraduate midwifery students were influenced by these sessions? What is the evidence?

3. What challenges and obstacles did you face during counseling implementation? (Time constraints, lack of initial familiarity, resistance to learning, communication problems, etc.)
4. Which part of the counseling sessions do you consider the most impactful?
5. What suggestions do you have for improving future childbearing counseling programs?
6. In your opinion, what are the advantages and disadvantages of peer education compared to traditional methods?
7. Do you feel that this experience has improved your counseling skills? In what ways?

Results

The analysis of the qualitative data led to the extraction of two main themes: "Reasons for disagreement with childbearing" and "Items in childbearing counseling." The themes, main categories, and codes are presented in Table 1.

Table 1
Themes, Main Categories, and Codes Extracted from the Data

Theme	Main Category	Codes
Reasons for disagreement with childbearing	Lack of hope and motivation for the child's future	Expansion of Afghan nationals in the country
		Conditions not being ideal for childbearing as a young person
		Lack of hope and motivation for childbearing
		Inability to meet needs
		Fear of the child's genetic problems
	Greater welfare	Fear of the spouse's lack of responsibility in upbringing
		No guarantee for work and education
		Less worry about children
		Less stress for raising children
		Reduction of pregnancy and childbirth complications
	Changes in beliefs and country's policies	Suitable housing situation
		Reduction of population crowding
		Having a child hinders progress
		Not having enough time to attend to the couple's personal affairs
		I do not recommend it at all outside the system
	The role of economic problems in childbearing	In the government system, I am forced to promote childbearing
		Not conveying what I do not believe in
		Personal difficulty accepting due to economic guard
		Cost reduction following not having children
		Financial problems
		Limited resources

Theme	Main Category	Codes
		Citing the father and living conditions as examples
		Economic perspective on childbearing
		Not encouraging childbearing due to economic problems
		Moving toward economic discussion
		Father expressing dissatisfaction with economic situation
		High role of the economic dimension in childbearing
		Differences between economic and social problems
		Failure to resolve families' economic problems
		Low welfare and social level of families for childbearing
		Improving family economy before childbearing
		Economic problems in the challenge of childbearing
		The role of economic problems in childbearing
		Father's opinion about childbearing and economic situation
Items in childbearing counseling	Demographic assessment	Assessing the number of children during counseling
		Assessing economic status
		Mother's employment status
		Assessing psychological reasons for a woman who has no children yet
		Assessing conditions
		Finding the causes
	Child-rearing as one of the areas of childbearing education	Children's problems and challenges they face at various levels

Theme	Main Category	Codes
		Raising capable and entrepreneurial children
		Preparing children to face challenges
		Teaching parenting to families
		Encouraging and training children in areas of economic assistance
		Families' unfamiliarity with the type of child-rearing
		Family does not take any responsibility for upbringing
	Influential factors in counseling	Training individuals by a positive-thinking counselee
		Using virtual sessions
		Introduction is the first principle of counseling
		Receiving information in the first session
		Screening and critiquing films
		Discussing how to start work
		Choosing the topic according to the level of knowledge
	Question and answer	Conducting question and answer and surveys and changing training approach
		It was decided to provide explanations about body structure and then question and answer
		First ask about the topic and then provide counseling
		The question and answer should come first, then explanations
		Asking questions and receiving information for familiarity and analysis
		We explained more instead of question and answer
		Question and answer and receiving opinions
		Method of using question and answer

Theme	Main Category	Codes
	Counseling challenges	Problem in communicating with professors due to filtering
		Lack of coordination between colleagues
		Different percentage of influence in different individuals
		Worse conditions with a rigid guard of the counselee
		Need for acquaintance one day before
		Lack of familiarity with the students' spirits
		Resistance to receiving education
		Need for a day for counseling, longer sessions for education
		Time being short due to unfamiliarity
		Women's unfamiliarity with this issue
		Need for more work and time
		Topic being boring
		Stress and time shortage affecting counseling effectiveness
		Counseling time shortage
	Benefits of counseling	Giving information to the client and leaving the decision to them
		The profound impact of certain sentences on individuals
		Creating a positive mindset about the child by citing the individual themselves as an example
		Creating a sense of effectiveness on the family in the counselee
		Changing beliefs and negative thoughts that the father had created in the individual's mind
		Positive effect after counseling
		Strengthening beliefs
		Counseling provides experience

Theme	Main Category	Codes
	Impact of teamwork in counseling	Interest in teamwork
		Involving counselees through question and answer
		Impact of motivational discussions and lectures and teamwork
		Interest in teamwork

Discussion

The present study was conducted to enhance the counseling skills of master's students in midwifery counseling through teaching their peer group, as well as to increase the knowledge, attitude, and skills of undergraduate midwifery students as future promoters of childbearing. The findings of this qualitative study, obtained through content analysis in the form of themes and main categories, provide a comprehensive picture of the challenges, contexts, and effective components in childbearing counseling.

Multifaceted Challenges of Childbearing from the Students' Perspective

The findings of this study showed that "reasons for disagreement with childbearing" among students encompass a wide range of factors that can be categorized into four main classes: "lack of hope and motivation for the child's future," "greater welfare," "changes in beliefs and the country's policies," and "the role of economic problems in childbearing." This finding is consistent with previous studies that introduced modern lifestyle, housing status, and employment as priorities among factors affecting childbearing in Iran (7). Furthermore, the emphasis on economic problems and job insecurity as main barriers to childbearing aligns with the results of Arabi et al.'s study, which pointed to the role of economic issues in reducing the tendency toward childbearing (7). From an international perspective, extensive studies in European and East Asian countries have also shown that economic uncertainty and the opportunity costs associated with childbearing are among the strongest predictors of declining fertility in modern societies (16, 17). These findings indicate that childbearing is not merely a national challenge but a global phenomenon rooted in the structural transformations of societies.

A noteworthy point in the present findings is the frequent reference to the role of individual and social beliefs alongside economic factors. Codes such as "conditions not being ideal for childbearing as a young person," "lack of hope and motivation for childbearing," and "not conveying what I do not believe in" indicate the depth of hopelessness and attitude change at both individual and social levels. This topic, along with researchers' emphasis on the role of cultural and religious teachings in promoting

childbearing (9) and the importance of the Islamic-Iranian lifestyle (7), underscores the necessity of cultural and psychological interventions alongside economic support policies. Recent studies in the field of population psychology have shown that psychological distress resulting from negative future anticipation and existential hopelessness is directly associated with reduced fertility intention among young women (18). This finding reveals the necessity of paying attention to mental health and hope for the future, along with economic livelihood, as two main pillars of childbearing incentive policies.

Counseling and Peer Education: An Effective Strategy in Empowering Promoters

The results of this study showed that using the peer education approach, utilizing both cognitive-behavioral and motivational approaches, provided a suitable platform for exchanging experiences and improving knowledge and skills. The findings from the focus group sessions and content analysis emphasized "items in childbearing counseling," which includes categories such as "demographic assessment," "child-rearing as one of the areas of childbearing education," "influential factors in counseling," and "question and answer." This finding is consistent with the goals of childbearing counseling, which include increasing couples' awareness regarding the problems of having only one child and childlessness and empowering them for informed decision-making (1, 12). Globally, a systematic review conducted by the World Health Organization has shown that interventions based on counseling and psychological empowerment have a significant effect on modifying beliefs related to fertility and increasing motivation for childbearing in infertile couples and even the general population (19).

Counseling, as an active educational relationship, helps the client learn proper ways to meet their needs and gain a deeper understanding of their life goals (11). In this study, master's counseling students, by applying specialized approaches, provided undergraduate students with the opportunity not only to become familiar with various dimensions of childbearing counseling but also to review their own beliefs in this area. Codes such as "changing beliefs and negative thoughts that the father had created in the individual's mind" and "positive effect after counseling" attest to this claim. The use of interactive methods such as "question and answer and surveying" and "screening and critiquing films" also demonstrates the effectiveness of participatory approaches in the counseling process. International research also indicates that the use of motivational and cognitive-behavioral techniques in reproductive counseling, especially among young age groups, can significantly help change negative attitudes and increase self-efficacy in the parental role (20).

Challenges and Implementation Requirements of Childbearing Counseling

Despite the reported positive effects, this study also revealed practical challenges in holding counseling sessions. The category "counseling challenges" includes codes such as "counseling time shortage," "lack

of familiarity with the students' spirits," "resistance to receiving education," and "need for longer sessions for education." These challenges indicate that for greater effectiveness of childbearing promotion programs, sufficient time must be allocated, and counselors should undergo more specialized training in communicating with different age groups and varying levels of receptivity. Furthermore, the issue of "filtering" and communication problems with professors, as mentioned obstacles, highlights the need for appropriate and unhindered communication infrastructure in the country's educational system. Comparative studies in developed countries show that the use of digital platforms and hybrid counseling can resolve many of these communication and time barriers and provide access to counseling services in different regions (16).

Strengthening Motivation and Teamwork

One of the valuable findings of this research is the positive impact of teamwork on the counseling process. Codes such as "interest in teamwork" and "impact of motivational discussions and lectures and teamwork" in the category "impact of teamwork in counseling" indicate the role of collective cooperation in increasing motivation and improving the quality of education. This finding aligns with the results of previous studies that identified peer education as an effective method in improving teamwork and better understanding of concepts (13, 14). Recent evidence suggests that peer education, beyond knowledge transfer, can create deeper behavioral changes compared to traditional teaching methods due to fostering a sense of identification and reducing evaluation anxiety (15).

Limitations and Recommendations

Although this research, given its qualitative nature, has contributed to the richness of the data, the generalizability of its findings to the entire student population and other target groups is limited. Additionally, the study's focus on midwifery and counseling students does not cover the perspectives of other groups involved in promoting childbearing. It is suggested that future research examine the impact of counseling programs on couples of reproductive age using quantitative methods and larger sample sizes. Furthermore, considering the global findings on the role of artificial intelligence and mobile health (mHealth) applications in improving reproductive counseling (20), designing and implementing educational packages based on digital tools for counselors and promoters of childbearing could be an effective step toward achieving the country's population policies.

Conclusion

The results of this study showed that employing the peer education approach in the form of counseling sessions using cognitive-behavioral and motivational methods can play an effective role in improving the knowledge, attitude, and skills of midwifery students as future promoters of childbearing. Deep economic and social beliefs, lack of hope for the future, and cultural challenges are among the most important mental barriers to childbearing that can be reviewed and modified through targeted group

counseling. However, the effectiveness of these interventions requires the provision of supportive platforms, sufficient time, and the removal of communication and structural barriers. It is recommended that policymakers and planners in the field of health and population integrate childbearing counseling programs into the higher education system and health centers, and by emphasizing the empowerment of peer groups, take a fundamental step toward culture-building and promoting informed childbearing.

Abbreviations

- IRB
Institutional Review Board
- WHO
World Health Organization

Declarations

Ethics approval and consent to participate

This study was approved by the Ethics Committee of Baqiyatallah University of Medical Sciences (IR.BMSU.REC.1403.xxx). All procedures performed in this study involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki Declaration and its later amendments or comparable ethical standards. Informed consent was obtained from all individual participants included in the study. Participants were assured of the confidentiality of their data and their right to withdraw from the study at any time without any consequences.

Consent for publication

Not applicable. This manuscript does not contain any individual person's data in any form (including individual details, images, or videos).

Availability of data and materials

The qualitative data generated and analyzed during the current study are not publicly available due to the sensitive nature of the focus group discussions and to protect participant privacy and confidentiality, but are available from the corresponding author on reasonable request.

Competing interests

The authors declare that they have no competing interests.

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Authors' contributions

AK: Conceptualization, Methodology, Investigation, Writing – Original Draft. FN: Conceptualization,

Methodology, Investigation, Writing – Review & Editing. KA: Conceptualization, Methodology, Formal analysis, Writing – Review & Editing, Supervision, Project administration. All authors read and approved the final manuscript.

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