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A Study to Assess the Knowledge Regarding Water Birth among 3rd Year GNM Student of Kleu's Institute of Nursing Science, Belagavi, Karnataka

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Abstract: ***Objective: To assess the level of knowledge regarding Water Birth. Methods: The Descriptive study was conducted on 60 GNM students, studying in KLEU's Institute of Nursing Sciences, Belagavi. Used multiple choice questionnaire method to collect date. Results: In our study, Analysis of the data showed that majority 66.67% of students had moderate knowledge, 24.3% of students had inadequate knowledge, and 10% of students had adequate knowledge regarding Water Birth. Conclusion: Level of knowledge was assessed among 3rd year GNM students of KLEU'S Institute of Nursing Sciences Belagavi.***

Keywords: Knowledge, Water Birth, GNM, Student

1. Introduction

Pregnancy it an earlier result of fertilization and begins with implantation. Then zygote undergoes series of changes and develops as a new diploid organism. It is scientifically stated as "gravidity".[1]

During pregnancy there is progressive anatomical and physiological changes not only confined to the genital organ but also all the system of the body which are with and caused by the effects of specific hormone. This is principally a phenomenon of maternal temporary adaptation to the increasing demand of growing fetus.[3]

To ensure delivery of a mature live and healthy infant's birth under the best circumstances possible and to avoids any medical and obstetrical condition that would endanger the life or impair the health of pregnant women/baby. Few methods/types of childbirth are used eg. Vaginal delivery, Caesarean, Medicated Birth (epidural anesthesia) Lamaze Method and Bradley Method etc.[2]

To avoid the complications during delivery, hydrotherapy is used from the ancient times. The water birth is a form of hydrotherapy used for the safe and easy labor and delivery. Water birth is a method where the lower portion of the laboring women is immersed in bathtub or basin full of warm water while giving birth to the baby. The first recorded account of an underwater birth in Europe was in 1803 in France. The efficacy of water birthing was studied during the 1960s by several researchers of obstetrics. During the1980s and 1990s, interest in water birth grew in the UK, Europe and Canada. By 2005, more than 300 US hospitals had adopted Monadnock's protocol or developed their own protocols.[4]

Water birth is the process of giving birth in a tub of warm water. Some women choose to labor in the water and get out for delivery. Other women decide to stay in the water for the delivery as well. The theory behind water birth is that the baby has been in the amniotic sac for 9 months and birthing into a similar environment is gentler for the baby and less stressful for the mother.

The water birth has finally made its foray into India. Violet, a baby girl born to a British couple in Delhi April 28, 2007 is the first baby to be born in India through this method. As to mention further, in Bangalore some hospital like Columbia Asia, Manipal Hospital and Sagar Apollo etc. are practicing this method of childbirth.[5]

As this method of water birth is gaining popularity in India, students nurses who will be active participants in the provision of maternity care, should ensure that they are knowledgeable about the natural method of conducting water birth and they should practice it in a way that is clear. As health team members, nurses not only have the greater responsibility to give curative care, but also should provide promotive, preventive and comfort oriented care by acquiring new knowledge based on current practices.

2. Materials and Methods

Descriptive study was carried out in KLEU'S Institute of Nursing Sciences, Belagavi. The study was approved by the institutional research committee.

The tool used for data collection consists of: multiple choice questionnaire method to assess the level of knowledge regarding Water Birth among selected GNM students of KLEU'S Institute of Nursing Sciences, Belagavi.

Tool was divided in to two parts section I & section II
Section I- Demographic data
Section II - multiple choice questionnaires regarding Water Birth.

Research Design
The research design selected for the present study is Descriptive design.

Significant Findings of the Study Demographic Data of the Respondent

Age
The majority of the subjects 39 (65%) belongs to age group 20-22 years, 16(27%) belongs to age group 18-20 years, 5 (8.3%) belongs to age group 22-24 years and no one in 24-26 years.

Religion
The religion of the subjects 0 in Muslim, 29 (48.33%) in Hindu and Christian, whereasothers are 2 (3.33%).

Type of family
The type of family of the subject 52 (86.67%) belongs to nuclear family and 7 (11.67%) belongs to joint family.

Residence
The type of residence of the subject 19(31.67%) resides in rural area where as 41(68.33%) resides in urban area.

Source of knowledge
The source of knowledge regarding water birth to the subjects 33 (55%) is from media, 5 (8.3%) is from friends, 6(10%) from healthcare providers and 16 (26.67%) is from books.

3. Results

Analysis of the data shows that majority 40(66.67%) of the student had a moderate knowledge regarding water birth whereas around 14(24.3%) of student had inadequate knowledge and minimal 06(10%) of students had adequate knowledge regarding Water Birth.

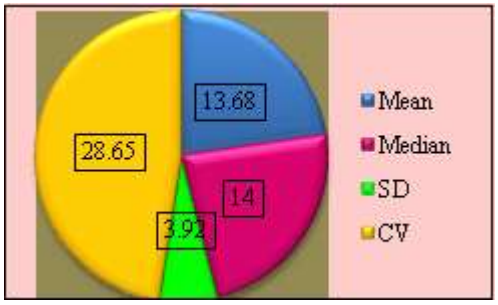
Association between knowledge on Prevention of anemia and selected demographic variables:

Analysis revealed that the calculated chi square values for the socio-demographic variables such as age in year , religion, type of family, type of residence and source of knowledge of water birth where less than the tabulated chi square value so it indicates that there is no association between knowledge scores and selected socio-demographic variables.

Finding related to the Mean, Median and Standard deviation, coefficient variance of the GNM 3rd year regarding water birth.

N=60

Mean	Median	Standard deviation	Coefficient variance
13.68	14	3.92	28.65



4. Discussion

The discussion is accordance with the objectives of the study to assess the knowledge GNM 3rd year students regarding Water Birth.

The major finding of the study is organized under the following Headings:

Socio- demographic variables of subjects
The majority of the subjects 39 (65%) belongs to age group 20-22 years, were from Hindu religion29 (48.33%),Were from nuclear family 52 (86.67%), and19 (31.67%) from rural area, Subjects were had knowledge regarding water birth from media were 33 (55%).

Analysis and interpretation of the knowledge score of GNM 3rd year students
In this study, mean score was (13.68), mean percentage (54.72%), median (14), standard deviation was (3.92) and coefficient variance (28.65). There are almost 40(66.67%) of the student showing a moderate knowledge regarding water birth whereas around 14(24.3%) of student had inadequate knowledge and minimal 06(10%) of students had adequate knowledge.

Significant association between knowledge Scores with selected demographic variables
Chi-Square of knowledge level of students in order to age is (X^2= 0.31, df=2), religion(X^2=0.83, df=2), types of family (X^2=1.66, df=1), Place of residence (X^2=0.05, df=1) and source of health information (X^2=3.20, df=3). It reveals that there is no significant association between socio demographic variables like age, religion, type of family, place of residence and source of health information among the students regarding water birth.

5. Conclusion

Based on finding of the study, it is concluded that:
- The data has been collected through the multiple choice questionnaire method.
- Level of knowledge was assessed among the 3rd year GNM students of KLEU's Institute Of Nursing Sciences, Belagavi, Karnataka.
- Knowledge score showed non-significant association with any of the demographic variables.
- Obtained score analyzed and found the range by statistical method.

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