

# An Explorative Study to Assess Knowledge and Attitude Regarding Infertility among Married Women with a View of Developing Information Booklet on Infertility at Infertility Clinics, Raipur Chhattisgarh

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**Abstract:** Infertility is one of the growing problems among couples, though much technological progress in the field of in-vitro fertilization and treatment modalities has transpired, still there is social stigma and disgrace is associated with it, since change in lifestyle, nutrition, delay in marriage and family planning and stress, infertility cases have significantly inflated. Aims and Objective- to assess the knowledge and attitude of married women regarding infertility, attending an infertility clinic Gawri in Raipur. To develop an informational booklet on infertility. Methodology- explorative research design was used. Sampling technique was purposive sampling, 100 infertile women were interviewed after taking consent. Tools used for knowledge assessment were self-structured questionnaires and for assessing the attitude 5 points rating scale was used. The result- 70 % of women had good knowledge and 30% had average knowledge regarding infertility. The highest number of infertile married women 52 (52%) are having a moderately positive attitude, whereas 48 (48%) women have a positive attitude. There is a significant relationship between the knowledge and attitude of women regarding infertility. Conclusion-Most of women were having good knowledge about infertility they only lack knowledge concerning different IVF procedures and most of the women were having a moderately positive attitude. The information booklet was prepared mostly focused on male and female causes of infertility and various IVF procedures.

**Keywords:** Infertility, attitude scale, in-vitro fertilization

## 1. Introduction

Fertility is highly prized in all cultures and the desire for a child is one of the most basic of all humans. A child is a priceless and greatest gift of God. As in today's society, hectic life style & job stress contribute to conception difficulties. Everyone has the desire of becoming a parent, but for those who are unable to conceive a child, it is an exquisitely painful and worrying truth. Traditionally, childless women in India experience stigma and segregation. Still, people-first approach women for infertility before men, though one-third case of infertility is due to male causes. Stigmatizing faiths, limited male partnership, cost, detached quality of care and lack of services in the public sector are major barriers to timely and appropriate treatment-seeking.

## 2. Need for the Study

The problem of infertility is a rising issue in India and it needs to be uncovered. Little is known about the extent of childlessness and treatment (fertility) seeking behavior of childless Women. This study is an attempt to gain knowledge regarding the knowledge about infertility and its treatment and attitude among infertile married women. Using the questionnaires and attitude scale.

The degenerating condition of infertile women is the issue of great concern. The woman who is infertile is viewed as a curse to the family. There is a lack of information about the role of modern private health services in fertility treatments and the treatment-seeking action of the infertile couples.

## 3. Objectives

- To assess the knowledge of married women regarding infertility.
- To assess the attitude of married women regarding infertility.
- To seek the relationship between knowledge and attitude regarding infertility among married women.
- To develop a self-instruction booklet on infertility.

## 4. Methodology

**4.1 Research Approach-** In this study, the explorative research approach is used.

**4.2 Research Design-**The research design used is explorative research design.

**4.3 Conceptual Framework-** Health Promotion Model

**4.4 Population-** study population includes infertile married women.

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**4.5 Sample** - 100 infertile married women attending the infertility clinic in Gawri I.V.F. Centre and nursing home, Raipur Chhattisgarh.

**Sampling Technique**- In the present study, non- probability sampling technique, namely purposive sampling was used.. The study samples were infertile married women in selected infertility clinic in Gawri I.V.F centre and nursing home, Raipur, Chhattisgarh.

#### Inclusion criteria

Infertile married women who:

- Are willing to participate in the study.
- Are available at the time of data collection.
- Attending infertility clinic.
- Knows and understands Hindi language or English.

#### Exclusion criteria

- Those who are already exposed to health education on infertility
- Infertile married women who do not understand Hindi or English.

#### Feasibility the primary reason for selecting

- Setting is convenient
- Transportation facility
- Administrative permission
- Agreement and availability of subject.

#### Delimitations

This study is limited to

- The study is based on infertile married women.
- Infertile women attending the OPD at selected infertility clinics.
- Married women aged between 18- above.

#### Variables under the study

- **Independent variables** – Age, religion, educational status, occupation, Husbands occupation, Residential area, age of marriage , duration of marriage ,type of family ,monthly income of family, knowledge regarding recent advancement, duration of infertility treatments.
- **Dependent Variable** –Knowledge and attitude of infertile married women are the dependent variables
- **Setting of the Study**- Infertile married women attending the infertility clinic in Gawri I.V.F centre and nursing home, Raipur, Chhattisgarh.

#### Description of Tool

**Section-A: Socio-demographic Data** - This section consists of questions which deal with socio-demographic variables like age, religion, educational status, occupation, husbands occupation, residential area, age of marriage, duration of the marriage, type of family, monthly income of a family, knowledge regarding recent advancement, duration of infertility treatments.

**Section-B: Assessment of knowledge**- Interview schedule using self-structure multiple-choice questions regarding infertility. The total numbers of questions are 30 regarding knowledge. Each question in multiple-choice question carries 1 mark. The highest score is 30 and the lowest score is 0.the level of knowledge is measured in terms of scores.

**The level of knowledge will be identified through the following scale-**

- 0 – 10 – poor knowledge
- 11-20---average knowledge
- 21-30—good knowledge

#### Section C

**Assessment of Attitude** This section consists of 5 point rating scale. Total numbers of questions are 30 for identifying the attitude of the infertile married women. Each question in the rating scale carries a minimum of 1 mark and a maximum of 5 marks. The highest mark is 150 and the lowest score is 30. The attitude of infertile married women regarding infertility will be measured in terms of scores. The scale is formulated to rate the level of attitude about infertility is-

**The level of attitude scores is-**

- 1-30=negative attitude
- 31-60= disagree, slight negative attitude
- 61-90= undecided
- 91-120= slight positive attitude
- 121-150= positive attitude.

#### Data Collection Method

The technique for data collection was a structured interview schedule.

A formal written permission was obtained from the authorities of the infertility clinic. The data collection for study was carried out from 1/2/2013 to 29/2/2013.

#### Plan for data analysis

- The data analysis is planned to include explorative and inferential statistics.
- Scoring the knowledge and attitude value on infertility of infertile married women.
- Calculating the average score, mean median and standard deviation for knowledge and attitude regarding infertility among infertile married women.
- Computing Karl Pearson's correlation coefficient "r" to find out the relationship between knowledge and attitude about infertility.
- Computing the chi-square method to establish the association between selected demographic variables with both knowledge and attitude on infertility.
- Value to be compared at a 5% level of significance for the corresponding degree of freedom.
- Data will be expressed in the table and figures for better amplification.

Mean median and standard deviation calculation to assess the knowledge and attitude on infertility among infertile married women.

**Table 1, N= 100**

Variables	Mean	Median	Standard deviation	Mean%
Knowledge	23.13	24	2.35	77.1%
Attitude	121.28	120	5.81	80.85%

Karl Pearson's correlation coefficient (r) analysis to find the relation between knowledge and attitude on infertility among the married infertile women.

**Table 2: Relation, N= 100**

Variables	Mean	Correlation (r)	Significance
Knowledge	23.13	0.4081	P<0.05
Attitude	121.28		Highly Significant

**Df (98) ≥ 0.1966 - Significant at .05 level**

## 5. Result

70 % of women had good knowledge and 30% had average knowledge regarding infertility. The highest number of infertile married women 52 (52%) are having a moderately positive attitude, whereas 48 (48%) women have a positive attitude. There is a significant relationship between the knowledge and attitude of women regarding infertility.

## 6. Discussion

women attending infertility clinic have good knowledge about infertility up to 70% comes in a range of good knowledge and rest 30% falls in average knowledge, they have basic knowledge about infertility but ad less knowledge about male infertility and new progression in IVF procedures. women have a mostly 52% and moderately attitude toward infertility and 48% have a positive attitude. there is a significant relationship between knowledge and attitude of infertile women, those who have good knowledge possess a positive attitude about infertility. Most of them had a moderately positive attitude because many of them are under treatment for a long time even for 20 years, as the years pass they display a pessimistic attitude.

## 7. Conclusion

Most of the women have good knowledge and moderately positive attitude. Based on the data analysis booklet was structured to render knowledge on causes of male and female infertility and modern IVF technologies and its benefits.

## 8. Future Reference

Study can be done in larger population

Psychological support and throughout the treatment process counseling must be incorporated.

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