A Study to Assess the Effectiveness of Information Booklet on Knowledge about Antenatal Care and Identifying Risk Conditions Associated with Pregnancy among Antenatal Mothers in Selected Rural Hospitals at Mysore

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Abstract: Pregnancy is a creative and productive period in life of women. It is one of the vital events, which needs special attention from conception to post natal period. Antenatal care should appropriately begin even before the mother conceives. Many women are not aware of the antenatal care and pregnancy related risk conditions. All most 35 % of women in developing countries receive no antenatal care during pregnancy. Even mass Medias are insisting more about antenatal care and risk conditions during pregnancy. Even though the antenatal mothers were not aware of antenatal care and identifying risk conditions associated with pregnancy. This study aimed to improve the knowledge of antenatal mothers regarding antenatal care and specified high risk conditions. Research design and method: pre-experimental one group pre-test and post-test design. A total 50 antenatal mothers were selected by using convenient sampling technique. Results: The effectiveness of self instructional module was statistically tested by paired ‘t’, chi-square value and results were found to be significant at (p<0.005).

Keywords: Information booklet, Antenatal care, High risk condition

1. Introduction

Pregnancy is a creative and productive period in life of women. It is one of the vital events, which needs special attention from conception to post natal period. Antenatal care should appropriately begin even before the mother conceives. Routine prenatal care is an example of preventive health care. Its aim is to help and educate the mother to achieve an optimal health, so that the outcome of pregnancy and child birth is favorable for both mother and her baby. Healthy mother have a healthy baby which will break the cycle of ill health and deprivation. In South East Asia region, about every 2 minutes, one woman dies as a result of complications of pregnancy or child birth. All most 35 % of women in developing countries receive no antenatal care during pregnancy. The world wide maternal mortality ratio reflects the risk of dying each time, when she becomes pregnant. The maternal mortality rate (MMR) in India is 405 / 1,00,000 live births in 2007. Where as in Karnataka it is 195 / 1,00,000 live births in 2007, and in Dakshina kannada it is 90 / 1,00,000 live births in 2007.

2. Statement of the Problem

A study to assess the effectiveness of Information booklet on knowledge about antenatal care and identifying risk conditions associated with pregnancy among antenatal mothers in selected rural hospitals at Mysore.

3. Objectives of the Study

1) To assess the pre test level of knowledge of antenatal mothers regarding antenatal care and identifying risk conditions associated with pregnancy.

2) To assess the post test level of knowledge of antenatal mothers regarding antenatal care and identifying risk conditions associated with pregnancy.

3) To find out the effectiveness of information booklet by comparing pre test and post test level of knowledge.

4) To associate post test knowledge with selected demographic variables.

Hypothesis

H01: There will not be a significant difference between pre test and post test knowledge score of antenatal mothers regarding antenatal care and identification of risk conditions during pregnancy.

H02: There will not be significant association between pre test and post test knowledge score with selected demographic variables.

4. Research Methodology

Research approach:
Educative approach was considered appropriate for the present study.

Research design: one group pre-test post-test design

Independent variable: In this study the information booklet on antenatal care and identifying risk conditions during pregnancy among primi antenatal women is the independent variable.

Dependent variable: In this study, it is the knowledge scores of primi antenatal women regarding antenatal care and identification of risk conditions during pregnancy.
Research setting: Hanchaya PHC

Sample and sample size:
The sample used for this study was 50 antenatal mothers those who fulfill the inclusion.

Sampling technique: convenient sampling technique.

Tool description: self administered structured questionnaire

Description of the tool:
The tool was organized in to three sections:

Section I
Socio-demographic data containing 6 items, age in years, age at marriage, type of family, education, occupation and income per month.

Section II: Structured questionnaire on knowledge about antenatal care containing 20 items.

Section III: Structured questionnaire on knowledge about identifying risk conditions associated with pregnancy containing 20 items.

Reliability of the tool:
The tool was tested for reliability on 5 antenatal mothers during pilot study by using split half method and applying Karl Pearson’s correlation coefficient formula represented by the symbol “r’. r’= n \sum xy - (\sum x)(\sum y) / \sqrt{n(\sum x^2-\sum(x)^2)(\sum y^2-\sum(y)^2)}

Key = r = Correlation coefficient = Number of observations .Then it was further computed by using Spearman’s formula r’ = 2r/1+r.Where r = the correlation co-efficient computed on the split halves method.

r’ = the estimated reliability of entire test. The reliability value of the tool is 0.78 and hence the questionnaire was found to be reliable

Data Collection Procedure
The data collection period was scheduled for 6 weeks. A formal written permission was obtained from concerned authority of selected rural hospital at Mysore for conducting research study by the investigator before the collection of actual data. The purpose of the study was explained to the primi antenatal women and an informed consent was taken.

Mother was made to feel comfortable and relaxed .A good support was maintained .After obtaining permission from the respondent pre-test was conducted and the average time taken for completing the process was 40 minutes .On the same day the information booklet was administered with an instruction to go through content provided. On 7th day, post test questionnaire was collected. The completed questionnaire was collected back by the investigator herself after 40 minutes.

Data Analysis
Data analysis was analyzed by using descriptive and inferential statistics.

| Table 1: Pretest and post test knowledge score of antenatal mothers about antenatal care and identifying risk conditions associated with pregnancy, N= 50 |
|-----------------|--------|----------|----------|
| Level of Knowledge | Scores | Pre test | Post test |
| Inadequate 0-50% | 44 | 88 | 0 | 0 |
| Moderately Adequate 51-75% | 6 | 12 | 34 | 68 |
| Adequate 76-100% | 0 | 0 | 16 | 32 |

The knowledge score in relation to antenatal care and identifying risk conditions associated with pregnancy reveals that out of 50 antenatal mothers 88 % were having inadequate knowledge and only 12% were having moderately adequate knowledge and their mean score was 1.12 with SD value of 0.33 during the pre-test. The knowledge score in relation to antenatal care and identifying risk conditions associated with pregnancy reveals that out of 50 antenatal mothers , majority 68% were having moderately adequate knowledge , 32% of them having adequate knowledge and their mean knowledge score was 2.30 with SD value of 0.47 and no one was found to be inadequate knowledge during the post test.

Section II: Analysis and interpretation of effectiveness of information booklet on knowledge about antenatal care and identifying risk conditions associated with pregnancy by comparing pre test and post test knowledge scores.

N=50, DF=49, P<0.05

<table>
<thead>
<tr>
<th>Test</th>
<th>Mean</th>
<th>SD</th>
<th>t value</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre test</td>
<td>1.12</td>
<td>0.33</td>
<td>17.15</td>
<td>P&lt;0.05 (S)</td>
</tr>
<tr>
<td>Post test</td>
<td>2.3</td>
<td>0.47</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The above table and figure depicted that pre-test and post-test knowledge score regarding antenatal care and identifying risk conditions associated with pregnancy shows large difference & that difference is statistically significant. It was tested using student paired t-test.

5. Discussion
A total of 50 Antenatal Mothers were selected for the study using convenient sampling method. Written consent of the samples was obtained and the pre-test was conducted by using self administered structured questionnaires. Information booklet on knowledge about antenatal care and identifying risk conditions was given by the investigator. The post-test was conducted 7th day from the day of intervention by using same self administered structured questionnaire.

6. Recommendations for Further Studies
- A comparative study can be conducted to compare the effectiveness of teaching module and SIM regarding antenatal care and identification of risk conditions during pregnancy.
- A comparative study may be undertaken to find out the difference in knowledge among primigravidae and multigravidae mothers on antenatal care and identification of risk conditions during pregnancy.
A similar study can be undertaken with a control group design.
Effectiveness of the information booklet can be tested repeatedly to standardize the module.

7. Conclusion

The present study assessed the knowledge on antenatal care and identification of risk conditions during pregnancy by information booklet. Majority of the antenatal mother had adequate knowledge in post test.

References

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