

A Descriptive Study to Assess Knowledge of Primigravida Mothers Regarding Minor Ailments of Pregnancy in Selected Hospitals of Amritsar, Punjab in a View to Develop Health Education Pamphlet

Bimla Rani*

Mai Bhago College of Nursing, Tarn Taran, Punjab, India

Abstract

The study assumed a descriptive survey method to assess the knowledge of primigravida mothers regarding minor ailments of pregnancy in selected hospitals of Amritsar, Punjab in a view to develop health education pamphlet. The sample size is 100 primigravida mothers. The tool is divided into 2 segments, section 1 comprises of a self-structured demographic questionnaire and section 2 consists of a self-structured knowledge questionnaire. Reliability of the tool was recognized by Karl's Pearson Prophecy formulae and the values found for the knowledge questionnaire is 0.92. The study was directed at Guru Nanak Dev Hospital and Sukhbir Hospital, Amritsar, Punjab. Out of 100 samples, the majority of samples (57%) had insufficient knowledge and minority of samples (16%) had sufficient knowledge regarding minor ailments of pregnancy. The study findings shows that there is significant association with demographic variables such as age, education, type of family occupation, exercise pattern and source of information, at 0.05 level of significance.

Keywords: knowledge, minor ailments and health education pamphlet, primigravida mothers

***Corresponding Author**

E-mail: raniprincipal@gmail.com

INTRODUCTION

Pregnancy is another phase in a woman's life. It is a condition of balance and beauty and is one of the best facets that a woman can encounter in her life. Each pregnancy is an incomparable ordeal for a woman and every pregnancy that a woman experiences will be new and novel distinctive. In any event, half of the world populace comprises of females and soon or later every one of them experience the primigravida period of life.^[1]

Pregnancy is linked with changes regarding physiological shift from pregnancy to motherhood that in turn accelerates massive changes in every

female. These progressions comprise physical and physiological changes as well as associate psychological, emotional and spiritual characteristics of progress. These anatomical and physiological changes are not only inadequate to the genital organs but also associated with all the systems of her body as this is chiefly an experience of maternal adjustment to the growing needs of the developing fetus, to withstand the embryo, prepare body for labor, develop her breast and place down stores of fat to provide calories for production of breast milk.^[2]

Pregnancy is the period of great anabolic activity as soon as pregnancy commences

hormones begins to have a special action on the various systems of the body. The major systems adjust and is affected by pregnancy are, digestive system, musculo skeletal system circulatory system, integumentary system, nervous system and endocrine system. The anatomical and physiological changes during pregnancy may results in occurrence of some minor problems in the pregnant women which are termed as minor ailments of pregnancy. These ailments of pregnancy experiences throughout the antenatal period of women.^[3]

The changes occurring in various systems of the body may results in the appearance of same signs and symptoms includes nausea, vomiting, heart burn, excessive salivation, constipation, backache, cramps, frequency of micturition, leucorrhoea, fainting, varicosities, chloasma, itching, thrush, carpel tunnel syndrome, insomnias, etc. Antenatal mother will be very anxious and fearful when they experience these disorders which are new to them. In many cases these disorder may abate without any treatment. Any healthy life style may reduce the symptoms without any complications.^[4]

The prenatal period is a period of physical and mental preparation of birth and parenthood. Prenatal health supervision allows the analysis and treatment of prior maternal issue or issues/ disorders that may create amid pregnancy. In India, vast majority of the mothers have poor information about antenatal and intranatal care accessible to them. Absence of education, poverty and absence of correspondence and transportation facility makes them prone to grave consequences. Despite the fact that they are foremost care providers within a family, they are denied the basic right to health and wellbeing, in

most parts of the world. The demise of the mother increases the danger to the survival of her young kid as a family can't substitute for the maternal role in a child's life.^[5]

Some of the common ailment which most of the women are facing includes morning sickness, heart burn, constipation, leg cramps, backache, pelvic pain and skin changes. Regular exercise can strengthen muscles, gives more energy and helps to feel better as well as reduce most of the minor ailments. It also helps to sleep better at night. Generally, low impact aerobic or strength-training work out are best for getting heart pumping blood flowing.^[6,7]

METHODOLOGY

Research Design

The research design selected for the present study was descriptive research design to assess the level of primigravida mothers regarding minor ailments of pregnancy.

Research Setting

This study was conducted on antenatal mothers attending antenatal OPD (Outpatient Department) of Guru Nanak Dev Hospital and Sukhbir Hospital, Amritsar, Punjab.

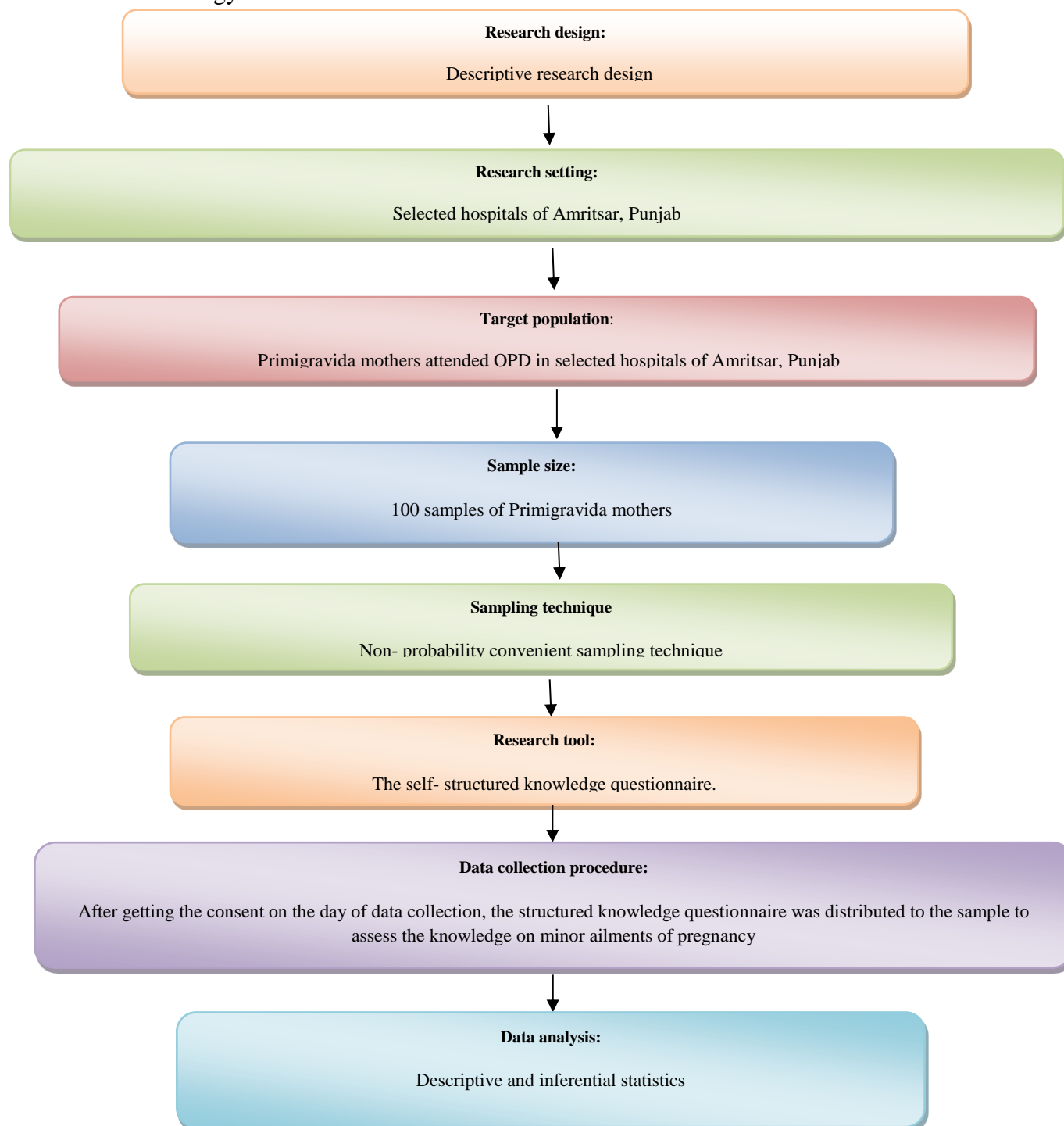
Target Population

The target population included all antenatal primigravida mothers who attended antenatal OPD (Outpatient Department) of Guru Nanak Dev Hospital and Sukhbir Hospital Amritsar, Punjab in the month of April 2016.

Dependent Variables: Knowledge

Independent Variables: In this study, primigravida mothers were independent variables.

Methodology flow chart

**Sampling Procedure****Sample Size**

The sample size of the study consisted of 100 primigravida mothers who met the criterion of sample selection.

Criterion of Sample Selection

- 100 primigravida mothers who attending antenatal OPD (Outpatient Department) of Guru Nanak Dev Hospital and Sukhbir Hospital,

Amritsar, Punjab in the month of April 2016.

- The primigravida mothers were included irrespective of their age, education, type of family, occupation, dietary pattern, exercise pattern and source of information.
- The primigravida mothers who were available and willing to participate in the study were included in the study.

Sampling Technique

Non-probability convenient sampling technique was employed in the selection of the sample.

Inclusive Criteria for Sampling

- Primigravida mothers of all gestational age, attended outpatient department for antenatal check-up.
- Primigravida mothers who were willing to participate in the study.
- The primigravida mothers who were available at the time of data collection.

Exclusive Criteria for Sampling

- The mothers who were not co-operative and interested.
- The patients who could not read English and Punjabi.
- The multi gravida mothers who were admitted in the hospital.

Selection and Development of Tool(s)

Since there was not standardized teaching tool, as well as knowledge assessment tool available in the Guru Nanak Dev Hospital and Sukhbir Hospital, Amritsar, Punjab for primigravida mothers, therefore specifically for this purpose a self-structured Questionnaire was framed on knowledge regarding minor ailment of pregnancy. It comprised of multiple choice questions regarding minor ailments of pregnancy. It was decided to give knowledge in simple form and local language which was easily understood by them.

- Questionnaire to collect demographic data of primigravida mothers. Demographic data consist of following:
- Age, Education, Type of family, Occupation, Dietary Pattern, Exercise Pattern and Source of information.
- The self-administered structured knowledge questionnaire was prepared to assess the knowledge of primigravida mothers regarding minor ailments of pregnancy.

The steps were carried out in the tool preparation:

1. Review of related literature
2. Consultation with expert from the field

Description of Tool

It consisted of two parts:

Part-1: Baseline data- It dealt with demographic characteristics of primigravida mothers.

Part-2: Knowledge questionnaire- It consisted of self-structured knowledge questionnaire related to minor ailments of pregnancy.

Score Interpretation

Structured knowledge assessment questionnaire was used to assess the knowledge of primigravida mothers regarding minor ailments of pregnancy. It contains 30 multiple choice questions. Each correct answer was given a score '1' and wrong answer was given a score '0'. The total 30 score was given.

Knowledge on Minor Ailments

<50% – Inadequate knowledge (score <15)
 50–75% – Moderately adequate knowledge (score 15–22)
 >75% – Adequate knowledge (score 23–30)

Validity of Tool

Validity of tool was done by getting opinions from different experts in the field

of nursing, gynecology and statistician. The experts were requested to give their opinions and suggestions regarding the tool for any modification to improve the clarity.

Reliability of Tool

Reliability of an instrument is the degree of consistency with which it measures the attribute it is supposed to measure.

Reliability of the tool was assessed by collecting data from 10 respondents other than the samples selected for the study.

Split half method with Spearman's Brown Prophecy formula was used to test the reliability of the tool.

The tool after validation was tested for its reliability. The tool was administered to 10 primigravida mothers and data was tabulated. The reliability of the knowledge questionnaire was $r = 0.92$. Hence, statistically significant thus the tool found to be reliable.

Pilot Study

Pilot study is a small scale version or trial run, done in preparation for a major study. Practically it was administered to 10 primigravida mothers. The samples were chosen of similar characteristics from those of population understudy. It was found that it took 20–30 minutes to complete the questionnaire.

Data Collection Procedure

- A written permission was obtained from Medical Superintendent of Guru Nanak Dev Hospital and Sukhbir Hospital, Amritsar, Punjab for conducting the present study.
- Non- probability convenient sampling technique was used to select the sample. The subject who met the set criterion was included in the study.
- These mothers were contacted personally by the investigator. They

were explained about the purpose and nature of the study. Their informed consent was obtained before enrolling them in the present study.

- After getting the consent on the day of data collection, the self-administered structured knowledge questionnaire was distributed to the sample to assess the knowledge of pregnancy.
- 30 minutes were given to the samples to complete the questionnaire.
- After collecting data from each sample, the health education pamphlets on minor ailments of pregnancy and their management were distributed to individual sample.

Ethical Consideration

- Approval of research/ethical clearance was taken from Research Committee of Mai Bhago College of Nursing, Tarn Taran.
- The written informed consent was obtained from the study subjects by the investigator.
- The subjects were assured of maintaining the anonymity and confidentiality of their identity and data.

Plan of Data Analysis

The obtained data was analyzed in terms of statistic. The plan of data analysis was done by organizing the data. Correlation co-efficient was used to find correlation between levels of knowledge was used to analyze association between levels of knowledge with demographic variables. The level of significance was $p < 0.05$ (Tables 1, 2).

Data Analysis

Description of demographic characteristics of primigravida mothers regarding minor ailments.

Table 1. Frequency and percentage distribution of samples according to their demographic variables. N=100

Variables	Opts	Frequency (f)	Percentage (%)
Age	18 -21 year	39	39
	22 -25 year	27	27
	26–29 year	22	22
	30 & above	12	12
Education	Primary	46	46
	Secondary	17	17
	Graduation	22	22
	Post-Graduation	15	15
Type of Family	Nuclear	33	33
	Joint	67	67
Occupation	House wife	50	50
	Govt employee	20	20
	Self-employee	14	14
	Private employee	16	16
Dietary pattern	Vegetarian	63	63
	Non-vegetarian	37	37
Exercise Pattern	Walk	37	37
	Yoga	13	13
	Nothing	50	50
Source of Information	Family, friends and relatives	61	61
	Health personnel	27	27
	Mass media	12	12

SAMPLE CHARACTERISTICS

Percentage distribution of primigravida mothers according to their age group reveals that highest percentage (39%) of them were in the age group 18–21 years, about (27%) were 22–25 years, (22%) were 26–29 years and the lowest percentage about (12%) were in the age group of 30 years and above. Percentage distribution of primigravida mothers according to their education reveals that highest percentage (46%) of primigravida mothers had up to Primary education (22%) had Graduation, (17%) had Secondary and 15% of them had Post Graduation. Percentage distribution of primigravida mothers according to their type of family depicts that (67%) of primigravida mothers lived in Joint family and (33%) of Primigravida mothers lived in Nuclear family. Percentage distribution

of primigravida mothers according to their occupation depicts that highest percentage (50%) of the primigravida mothers were House wives. However, (20%) of them had Govt employees, (16%) of them were Private employees and (14%) were Self-employees. Percentage distribution of primigravida mothers according to their dietary pattern shows that highest percentage (63%) of primigravida mothers were Vegetarian and (37%) of them were Non-vegetarian.

Percentage distribution of primigravida mothers according to their exercise pattern reveals that (50%) primigravida mothers did not adopt any exercise pattern (37%) of them went for Walk and (13%) went for Yoga. Percentage distribution of primigravida mothers according to the source of information depicts that (61%) of

the primigravida mothers got information from their family, friends and relatives, (27%) of them got information through health care personnel and the lowest percentage (12%) of them got information from mass media.

Table No 1 shows that majority (57%) samples had inadequate knowledge, (27%) had moderate knowledge and (16%) had adequate knowledge regarding minor ailments of pregnancy.

Table 1. Criteria measure of knowledge score.

Level of knowledge scores	Frequency	Percentage
Adequate (>75%) (23–30)	16	16
Moderately Adequate (50–75%) (15–22)	27	27
Inadequate (<50%) (<15)	57	57

Association between knowledge score with selected socio- demographic variables has been depicted in table 2 below:

Table 2. Chi-Square Results of Socio-Demographic Variable.
S=Significant, NS= Not Significant, $P < 0.05$, df = Degree of Freedom.

Demographic data		Levels (N=100)			Association with knowledge score			
Variables	Opts	Adequate	Moderately adequate	Inadequate	Chi test	df	Table value	Result
Age	18–21 year	0	0	39	73.219	6	12.592	S
	22–25 year	1	11	15				
	26–29 year	8	12	2				
	30 and above	7	4	1				
Education	Primary	0	0	46	94.387	6	12.592	S
	Secondary	0	8	9				
	Graduate	6	14	2				
	Post Graduate	10	5	0				
Type of family	Nuclear	11	11	11	14.820	2	5.991	S
	Joint	5	16	46				
Occupation	House wife	1	5	44	54.165	6	12.592	S
	Govt employee	10	9	1				
	Self-employee	1	8	5				
	Private employee	4	5	7				
Dietary pattern	Vegetarian	7	15	41	5.135	2	5.991	NS
	Non-vegetarian	9	12	16				
Exercise pattern	Walk	5	16	16	48.600	4	9.488	S
	Yoga	9	4	0				
	Nothing	2	7	41				
Source of information	Family, friends and relatives	3	12	46	28.692	4	9.488	S
	Health personnel	7	10	10				
	Mass media	6	5	1				

CONCLUSIONS

The research finding shows that the majority (57%) of the respondents had inadequate knowledge followed by (27%) had moderately knowledge and (16%) of

the respondents had adequate knowledge regarding minor ailments of pregnancy.

There is highly significant association of knowledge score with demographic variables, as calculated value ($\chi^2=73.219$) age, ($\chi^2=94.387$) education, ($\chi^2=14.820$)

type of family, ($\chi^2=54.165$) occupation, ($\chi^2=48.600$) exercise pattern and ($\chi^2=28.692$) source of information whereas there is no significant association with dietary pattern ($\chi^2=5.135$). The findings of the research study show that there is significant association of knowledge and with demographic variables such as age, education, type of family, occupation, dietary pattern, exercise pattern and source of information.

DELIMITATIONS

- The study was limited to
- Primigravida mothers attended the antenatal clinic at selected hospitals of Amritsar, Punjab.
- Assessment of knowledge was based on responses to objective type test item used in questionnaire.

RECOMMENDATIONS

- A similar study can be tried in different settings and samples.
- A study can be replicated with larger samples.
- A comparative study can be conducted by comparing the knowledge of primigravida mothers and multigravida mothers.
- A study can be conducted to find the effectiveness of structured teaching programme on knowledge regarding minor ailments of pregnancy and their management.

- An experimental study can be conducted in order to assess the knowledge of primigravida mothers regarding minor ailments of pregnancy.
- A study can be conducted to assess the attitude of primigravida mothers regarding minor ailments of pregnancy.

REFERENCES

1. Dawn C.S. *Text Book Obstetrics, Neonatology & Reproductive & Child Health Education*. Revised 16th Edn., Kolkata: Dawn Books.
2. Ranthnam S.S. *Obstetrics And Gynaecology*. For Post Graduate India: Orient Longman; 1999.
3. Kaur Boora P., Kapoor Y.P., Chawla S. food consumption pattern of pregnant and lactating mothers", in Rural Haryana, *J Nutr Diet*. 1997.
4. Annamma J. *Text Book of Midwifery*. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd.
5. Basvathapa B.T. *Midwifery And Reproductive Health Nursing*. 1st Edn., New Delhi: Jaypee Brother; 2005, 171, 232, 254p.
6. Walker L.O. Managing excessive weight gain during pregnancy, *J Obstetr Gynaecol Neonat Nurs*. 2007; 36(5): 490–550p.
7. Biko J. Minor ailments in pregnancy: a basic approach, *Profess Nurs Today*. 2007; II(2): 16–9p.