A study to Assess the Knowledge and Practice about Selfcare Among Antenatal Mothers in Selected Hospitals of Pune City.

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Abstract

Antenatal self practice is indispensable in areas where there is limited access to maternal health care services. It is important for mothers to practice antenatal care along with having proper knowledge. Owing to the pandemic situation, there is need to assess and implement ANC practies to prevent minor discomforts/ problems at early stages. This will avoid frequent visits to doctors and eliminate the risk of getting frequent infections. Also There is need to create baseline data from various sections of society regarding health during pregnancy. Material and method: The was initiated after receiving approval from institutional Ethics Committee. Two hundred pregnant women were enrolled in the study to assess their knowldege and practice on ANC self care. The study was descriptive in design and purposive sampling methods were used for to recruit study uparticipants. Demographic and knowledge tool were used to collect data and record study variables. The data was recorded in an pre-designed excel sheets ans proper statistical measures were used to analyse data. The association of the demographic variables with the knowledge score was considered significant at 0.05 level and below. Results: The demographic variables revealed that the majority of the participants though poorly educated or underqualified had good and average knowledge score of ANC self care. There was no association with any of the demographic variables. Conclusion: Educational status did not affect the knowledge score of the ANC self care. However attitude and practices of ANC services needs to be monitored in this population setting.

Key Words: (Knowledge, assess, Self-care, practices, Antenatal Mother)

Introduction

Antenatal care promotes birth preparedness and readiness for any complications that may occur during pregnancy. This ensures optimal birth outcomes and prevents mortality of mother and child. In India there is significant underutilization of ANC in pregnant women who are living in poverty, underserved areas, low education, poor awareness and owing to difference in cultural traits. India is still lacking behind in achieving the target of reducing

maternal mortality by <100 by 2020 and <70 by 2030 (1) ANC self-care is feasible during pregnancy care. Many interventions can be administered by the women themselves which includes monitoring of blood pressure and urine testing. Remote care information technology may help to gather and exchange information outside the facility. Such exchange provides guidelines for the self-care activities. In 2019, WHO has given guidelines for self-care interventions during pregnancy which includes interventions for nausea, heartburn, cramps in legs, vomiting, constipation etc. . (2) The current pandemic situation of COVID-19 has lead to redirection of health care services. In case of reproductive health services, are affected. Thus some countries have chosen to cease or restrict ANC or contraception programmers due to staff and resource limitations and also to prevent the COVID-19 infection in pregnant females. In latest operational guidelines of WHO, maintaining health services by using digital technologies the key actions targeted are "using available technologies and associated regulations to facilitate the shift of clinical encounters to digital platforms and to support selfcare interventions wherever appropriate". Thus is shift in paradigm in antenatal self care (3). Antenatal self care is also for prevent the complications during pregnancy and after the delivery for the mother and the baby. Antenatal care is for the good care of mother and baby which enhances the healthy lifestyle of both. Antenatal self care taken by mother is not healthy for baby also for the mother. Antenatal care helps in reducing the signs and symptoms like frequent urination, leg cramps, varicose veins, etc. Antenatal self care has given by mother to assess the health of the mother and her baby.

Need for the study

Due to barriers and limited access to maternal health services in some areas, the antenatal self-care must be emphasized. Health awareness is important for ANC. In India there are very studies addressed for maternal health and the level of knowledge and attitude towards ANC. The data on awareness of self-care ANC is weakly studied. There is need to create baseline data from various sections of society regarding health during pregnancy. This data will be used as design and implement future health intervention program. Antenatal self-care will strengthen sexual and reproductive health services in rural and low resource settings where there is shortage of health services. Self-care services and interventions can reduce the cost of care and travel and time off work. The health workers will be at ease as there are options for digital tool and technologies. Pregnant women must be informed about physiology, prevention, and self-care for certain pregnancy discomforts to reduce anxiety and fears. Maternity care is defined as healthy pregnancy with both physically safe and emotionally satisfying outcome for mother, infant, and family members. Regular health supervision and surveillance are essential for good outcome. Women must be made aware of physical status to help her in making decisions and encourage her to participate in her own self-care. Nurse and midwives play an important role at this stage. Maternal education is required to encourage women to use maternal and child health services. Pregnant women spend time health care professionals. Thus behavior of pregnant women can be affected by nurse, doctors and family members too. Thus most discomforts can be resolved through proper education of regarding ANC self-care. Effective use of self-care brochures can help in relieving mother's minor discomforts during pregnancy

Aim of the study

The main aim of the study is too assess the knowledge and practices regarding the alternative self care among the entity mothers it includes primigravida and multigravida mother's with the nursing professional .the main objective is to reduce the maternal mortality and infant mortality.

Method and Material

The was initiated after receiving approval from institutional Ethics Committee. Two hundred pregnant women were enrolled in the study to assess their knowledge and practice on ANC self care. The study was descriptive in design and purposive sampling methods were used for to recruit study participants. Demographic and knowledge tool were used to collect data and record study variables. The data was recorded in an pre-designed excel sheets ans proper statistical measures were used to analyse data. The association of the demographic variables with the knowledge score was considered significant at 0.05 level and below.

Results:

Section I: Demographic variables of the study population.

Table 1 represents frequency and percentage of demographic variable.

Table 1: Demographic characteristics of the study population					
Demographic Characteristics		Frequency (n=200)	Percent		
Education of the respondents	Primary	31	15.5		
	Middle	48	24.0		
	High	56	28.0		
	Degree/PG	65	32.5		
	Hospital	105	52.5		
Place of delivery of the	Home	16	8.0		
last baby	PHC	31	15.5		
	None of the above	48	24.0		

Education of the respondents:

Out of total 200 antenatal mothers enrolled in the study, 15.5% (n=31) were educated up to primary level; 24% (n=48) were educated up to middle school; 28% (n= 56) were educated up to high school; and the remaining 32.5% (n=65) completed post graduation (Table 1).

Place of delivery of the last baby:

More than half of the females 52.5% (n=105) delivered the baby is hospitals; 8% (n=16) women delivered baby at home; and 15.5% (n=31) women delivered the baby in PHC. The remaining 24% (n=48) reported none of the above sites for the place of delivery (Table 1).

Section II: Knowledge category of the respondents

Table 2: Frequency distribution of Knowledge Category					
Knowledge Category		Frequency (n=200)	Percent		
	Good	144	72.0		
Knowledge Category	Excellent	56	28.0		
	Total	200	100.0		

Majority of the study participants had good knowledge score (72%; n=144) of the antenatal self care whereas one fourth of the population (28%; n=56) had excellent knowledge score of ANC care (Table 2; Fig 3).

Section III: Association of the demographic variable and Knowledge category

The correlation analysis revealed that there was no significant association between

Table 3: Association between demographic variable and Knowledge category						
Demographic Variable		Knowledge Category			Chi-	
		Good	Excellent	Total	square value	p-value
Education of the respondents	Primary	26	5	31	2.8	0.42
	Middle	34	14	48		
	High	40	16	56		
	Degree/PG	44	21	65		
Place of delivery of the last baby	Hospital	74	31	105	0.83	0.84
	Home	11	5	16		
	PHC	22	9	31		
	None of the above	37	11	48		

knowledge category and demographic variable (Table 3).

Pearson Correlations			
		Practice	
		Score	
Knowledge	Pearson	0.040	
Score	Correlation		
	Sig. (2-tailed)	0.578	
	N	200	

Table 2 represents knowledge category as per different demographic variables. Association of demographic variable with knowledge score was considered significant at 0.05 level and below.

Discussion:

The result of the study depends upon the objectives the main aim of the study is to determine the knowledge and practices regarding self care among the antenatal mothers in the demographic data there is two part that first is education status of the respondents and second is place of the delivery of the last baby in this First education of respondent total 200 and Antenatal mothers where enrolled in the study 55% where educated up to primary level and 24% where up to educated school and 28% where educated up to high school and the remaining 32.5% completed their post graduation. In the second point of the place of delivery of the last baby are more than half of the sample size female 52.5% delivered the baby in the hospitals and 8% women delivered baby at home and 15.5 women delivered the baby in PHC the remaining 24% reported none of the above sides of the place of delivery. The knowledge category of the respondent female majority of the study participant had good knowledge core 72% of the antenatal self care where as one fourth of the population 28% had excellent knowledge score of antenatal care at last we have discussed about the association between both and the score was considered significant at 0.05 level and below. The main aim of the study is too assess the knowledge and practices regarding the alternative self care among the entity mothers it includes primigravida and multigravida mother's with the nursing professional also the maternal health is included as one of the Eighth Millennium development goals in 1997 maternal deaths are reduce by 47% since 1990. Antenatal self care will strengthen sexual and reproductive health services in rural or low resource settings where is there is shortest of health services .on the study, A quasi experimental study was conducted in Uttar Pradesh India were 120 Geography blocks received health intervention and 83 blocks did not receive health intervention the study intervention was done through self help groups in Uttar Pradesh. Antenatal care and birth outcome are closely related to each others the literature suggest that implementation of proper antenatal care will prevent adverse birth outcomes. The Antenatal self care is very important for the both mother and the child.

Conclusion:

The total objective is to promote and maintain good physical and mental health of mother and baby the availability of routine and focus antenatal care has played a part in reducing the maternal death rate ,miscarriage and birth defects ,low birth weight and other preventable health problems ,and it is essential for all pregnant women to make use of health services. antenatal self care for pregnant women includes basic antenatal services recommended for the both complicated and uncompleted pregnant women for their own health and intervention to prevent pregnancy complication. all pregnant Women need to supported in order for them to engage in healthy behavior maintain their own health and their Unborn baby. Doing this will reduce some of the risk of maternal and perinatal problems the good and Antenatal care in shoes that pregnant women remain healthy throughout pregnancy the ANC self care ensures that medical illnesses and pregnancy related complications are detected early and treated promptly .that ensures early detection and referral services of High risk cases in this study we have seen about the knowledge about the self care in the antenatal mothers who in various

hospitals of Pune city .in the study how much the antenatal mothers apply their knowledge in daily routine activities which enhance the healthy life style.

Conflict of Interest: The authors certify that they have no involvement in any organization or entity with any financial or non-financial interest in the subject matter or materials discussed in this paper.

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