

# ASSOCIATION OF KNOWLEDGE AND PRACTICE OF PRIMIGRAVIDA MOTHERS WITH SELECTED DEMOGRAPHIC VARIABLES IN SELECTED HOSPITAL SIRSA, HARYANA, INDIA

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## ABSTRACT:

*Obstetric hemorrhages embody both antepartum and postpartum bleeding. The causes of APH consist of: placenta praevia, placental abruption and local causes (for example bleeding from the vulva, vagina or cervix).*

*A Review study conducted on various etiologies of antepartum haemorrhage, sets out a practical and coherent management plan for commonly encountered scenarios. The result of the study demands timely and co-ordinated management in case of massive obstetric haemorrhage. Every nurse must have the capability to develop comprehensive plans & interventions to tackle the situations such as antepartum haemorrhage. Nurses should update their knowledge by getting and knowing the latest information on disease conditions and their management. In this study sample size will be 100 primigravida mothers present in selected Hospital, of District Sirsa. Keeping in mind, the time available for data collection and familiarity to the area, the investigator has chosen these settings. Conveniently large samples of 100 primigravida mothers were chosen by simple random sampling technique. The data were carefully elicited knowledge and practices regarding prevention of Antepartum Haemorrhage among primigravida mothers in selected hospital Sirsa, Haryana, India.. The data were recorded and processed in view applying suitable statistical techniques. There was found to be significant association of knowledge and practice of Primigravida mothers with selected demographic variables.*

**Key Words:** Practice and knowledge, Sirsa, demographic variable.

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## INTRODUCTION

Antepartum haemorrhage (APH) is bleeding from or into the genital tract occurring between 24 + 0 weeks' gestation until birth. (Amokrane, Nadia & R F Allen, E & Water field, Anna & Datta, Shreelata. 2016). It complicates 3–5% of pregnancies. The 2006–2008 report of the Confidential Enquiries into Maternal Deaths in the UK (CMACE) reported APH as the cause of death in four women. The high prevalence of APH, and its associated perinatal mortality and morbidity makes a thorough understanding of APH is essential for the practicing obstetrician. This teaching Programme will help mothers gain knowledge and practices regarding prevention of Antepartum Haemorrhage.

Obstetric hemorrhages embody both antepartum and postpartum bleeding. The causes of APH consist of: placenta praevia, placental abruption and local causes (for example bleeding from the vulva, vagina or cervix).

A Review study conducted on various etiologies of antepartum haemorrhage, sets out a practical and coherent management plan for commonly encountered scenarios. The result of the study demands timely and co-ordinated management in case of massive obstetric haemorrhage. Every nurse must have the capability to develop comprehensive plans & interventions to tackle the situations such as antepartum haemorrhage. Nurses should update their knowledge by getting and knowing the latest information on disease conditions and their management.

Antepartum haemorrhage is such as a common condition which adversely affects the mother and baby. Mothers should be able to act appropriately and manage the condition. During the clinical experience the investigator has observed that the mothers lack in knowledge regarding the proper management of antepartum haemorrhage. In view of the need, the investigator felt to assess the knowledge of Primigravida mothers regarding management of Antepartum Haemorrhage. Investigator concludes that if the mothers have adequate knowledge regarding management of antepartum haemorrhage, they can manage the critical situations that may arise in their home and working environment. They save their babies and help themselves to attain optimum health. There by it helps to reduce maternal and fetal morbidity and mortality.

## OBJECTIVES

To find out the association of knowledge and practice of Primigravida mothers with selected demographic variables.

## RESEARCH METHODOLOGY

The setting was selected based on acquaintance of the investigator with the hospital, feasibility of conducting the study, availability of the sample, permission and proximity of the setting to investigation. The study was conducted in selected Hospital, of District Sirsa (Hararyana). In this study sample size will be 100 primigravida mothers present in selected Hospital, of District Sirsa. Keeping in mind, the time available for data collection and familiarity to the area, the investigator has chosen these settings.

Sample consists of the subject of the population selected to participate in the research study. In this study sample size was 100 primigravida mothers present in selected hospital Sirsa.

The tools used in this study are: - Demographic data: age, religion, educational qualification, occupational status, family income, and previous information resources.

## DATA ANALYSIS AND INTERPRETATION

Conveniently large samples of 100 primigravida mothers were chosen by simple random sampling technique. The data were carefully elicited knowledge and practices regarding prevention of Antepartum Haemorrhage among primigravida mothers in selected hospital Sirsa, Haryana, India.. The data were recorded and processed in view applying suitable statistical techniques. The data analysis contains three major sections. The first is a frequencies and percentage analysis, which will be used to describe demographic variable of sampled mothers.

**DEMOGRAPHIC PROFILE OF RESPONDENTS**

Description of socio demographic characters of Primi gravida mothers

**Table .1: Distribution of subjects by age N=100**

Age (years)	Frequency	%
<25 years	32	32
26-35 years	44	44
36 years	24	24

The table .1 depicts that majority 44% of respondents were aged between 26-35years, 24% were aged more than 36years old and remaining 32 % of them were aged less than 25years.

**Table .2: Distribution of respondents by their marital status. N=100**

Habitat	Frequency	%
Married	55	55
Widower/Divorced	45	45
Total	100	100

Table reveals that the majority of the respondents were married (55%),

**Table .3: Distribution of respondents according to their qualification N=60**

Qualification	Frequency	Percentage
ILLITERATES	59	59
PRIMARY	19	19
HIGHER SECONDARY	12	12
GRADUATE AND ABOVE	10	10
Total	100	100

The table .3 depicts that majority 59% of the respondents were illiterates as their professional

**Table .4: Distribution of subjects according to occupation. N=100**

OCCUPATION	Frequency	percentage
GOVT EMPLOYEE	38	38
PRIVATE EMPLOYEE	23	23
HOUSE WIFE	39	39
Total	100	100

**Table .5: Distribution of subjects according to their monthly income N=100**

FAMILY INCOME PER MONTH	Frequency	Percentage
LESS THAN 1000	31	31
Rs. 1001-3000	20	20
Rs.3001-5000	23	23
Rs.5001 and above	26	26
Total	100	100

**Table .6: Distribution of subjects by source of Knowledge. N=100**

Source of knowledge	Frequency	Percentage
Mass Media	24	24
Training program	44	40.0
Professional experience	32	36.67

Total	100	100
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# ASSOCIATION OF PRE TEST AND POST TEST KNOWLEDGESCORES OF RESPONDENTS WITH SELECTED DEMOGRAPHICVARIABLES

Table-.7 Association of posttest knowledge scores of respondents with selected demographic variables.

N=100

Variables	Moderate knowledge	Adequate knowledge	Chi square	Df	P value (0.05)	Inference
<b>Age in years</b>						
<25 years	9	5	8.228	2	5.99	S
26-35 years	8	20				
>36 years	12	6				
<b>Marital status</b>						
Married	21	23	7.305	2	5.99	S
Unmarried	8	3				
Widower/Divorced	0	5				
<b>Professional Qualification</b>						
GNM	14	25	7.044	2	5.99	S
B.Sc (N)	6	3				
Post Basic Nursing	9	3				
<b>Area of Work</b>						
Maternity ward	20	15	7.044	2	5.99	S
ICU	5	6				
Pediatric ward	6	8				
<b>Experience in maternity wards</b>						
Below1 year	13	4	10.763	2	5.99	S
1-3years	6	18				
above 3 years	10	9				
<b>In-service education</b>						
Yes	10	12	7.358	1	3.84	S
No	19	29				
<b>Source of knowledge</b>						
Mass Media	9	5	5.488	1	3.84	S
Training program	14	8				
Professional experience	6	18				

Table .7 shows  $\chi^2$  value computed between the post test knowledge level of respondents on causes and prevention of APH and selected demographic variables. Variables such as age, sex and religion as area of work, experience in maternity wards, in-service education and source of information were significant at 0.05 level. Therefore the hypothesis stated there will be significant association between posttest knowledge of respondents regarding causes and prevention of APH and selected demographic variables is accepted.

**CONCLUSION**

Observing frequency distribution of majority 44% of respondents were aged between 26-35years, 24% were aged more than 36years old and remaining 32 % of them were aged less than 25years. Observing frequency distribution of majority of respondents were married (55%) according to marital status. It has been observed from the sample that 45% were widower/divorced. It has been observed from the sample that majority 59% of the respondents were illiterates as their professional qualification, 19% were primary educated, 12% of respondents were higher secondary and 10% were graduate and above. It has been observed from the total sample, .Depicts that majority 39% of the respondents were house wife, 38% of the respondents were Govt Employee, 23% were private employees. It has been observed from the sample that majority, i.e. 31% were earning less than 1000, 26% were earning 5001 and above, 23% were earning 3001 - 5000 20% were earning 1001 – 3000. It has been observed from the sample that reveals that majority 44% of the respondents received information from training program, 32% by professional experience and remaining 24% had received information from mass media.

There was found to be significant association of knowledge and practice of Primigravida mothers with selected demographic variables.

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