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ASSESS THE IMPACT OF AWARENESS PACKAGE EARLY IDENTIFICATION OF OBSTETRICAL EMERGENCIES DURING FIRST TRIMESTER OF PREGNANCY AMONG PRIMIGRAVIDAE MOTHERS IN RURAL AREA RATIBAD BHOPAL

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ABSTRACT

The current study has been undertaken to assess knowledge score regarding early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers by awareness package in Ratibad, Bhopal.. The research design used for study was pre- experimental in nature. The tool for study was self-structured knowledge questionnaire which consists of 2 parts- PART- I consisted questions related to Socio-demographic data, PART-II consisted of self -structured knowledge questionnaire to assess knowledge score regarding early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers. The data was analyzed by using descriptive & inferential statistical methods. The most significant finding was that 26.5% of Primigravidae mothers were having average knowledge regarding early identification of obstetrical emergencies during first trimester of pregnancy whereas 73.5% had good knowledge after post-test. It was suggested that nurses must educate Primigravidae mothers regarding early identification of obstetrical emergencies during first trimester of pregnancy.

Keyword- Obstetrical emergencies, Pregnancy, Primigravidae.

I. Introduction

Obstetrical Emergency is a life-threatening health problem of pregnancy for a mother and her baby. An obstetric emergency may arise at any time during pregnancy, labour and birth.

Obstetric emergencies that may arise during pregnancy it includes: 1] Abortion or Miscarriage 2] Ectopic pregnancy 3] Placental abruption 4] Placenta praevia 5] Pre-eclampsia and eclampsia 6] Premature rupture of membranes (PROM) 7] Twins pregnancy 8] Rh-isoimmunization 9] Gestational diabetes mellitus 10] Oligo and polyhydrominous etc. Retrospective study of obstetric emergencies admitted to Obstetrics and Gynaecology department of Indira Gandhi Institute of Medical science, Patna from March 2015 to September 2017. The common clinical presentation was Ectopic Pregnancy (19.64%), Heart Disease (16.64%), Abortion (13.69%), Severe Anaemia (16.66%), Purpureal Sepsis (9.52%), Sever pregnancy induced hypertension (3.57%), Eclampsia/HELLP Syndrome (2.38%), Multiple Pregnancy (1.19%) Malignancy Disorder with Pregnancy (2.97%) and HIV in pregnancy (0.59%).

II. Objective of the study

1. To assess the pre-test & post-test Knowledge score regarding early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers.
2. To assess impact of awareness package on knowledge regarding early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers.
3. To find out association between pre-test knowledge score regarding early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers with their selected demographic variables.

III. Hypotheses:

RH_0: There will be no significant difference between pre test & post-test knowledge score on early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers.

RH_1: There will be significant difference between pre test & post-test knowledge score on early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers.

RH_2: There will be significant association between pre-test score on early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers with their selected demographic variables.

IV. Assumption

1. Primigravidae mothers may have deficit knowledge regarding early identification of obstetrical emergencies during first trimester of pregnancy.
2. Awareness package will enhance knowledge of Primigravidae mothers regarding early identification of obstetrical emergencies during first trimester of pregnancy.

V. Methodology

An evaluative approach was used and pre experimental one group pre-test post-test research design was used for the study. The samples consisted of 98 Primigravidae mothers selected by Non probability convenient sampling technique. The setting for the study was Ratibad, Bhopal. Data was gathered with help of demographic variables & administering a self structured knowledge questionnaire by analyst prior & after awareness package. Post-test was done after seven days of pre-test. Data were analysis using descriptive & inferential statistics.

VI. Analysis and interpretation

SECTION-I Table -1 Frequency & percentage distribution of samples according to their demographic variables.
n = 98

S. No	Demographic Variables	Frequency	Percentage
1	**Age in Years**		
a.	21-26	30	30.6
b.	27-32	55	56.1
c.	33-38	11	11.2
d.	39-44	2	2.0
2	**Educational Status**		
a.	No formal education	3	3.1
b.	Primary	12	12.2
c.	Secondary	32	32.7
d.	Higher secondary	38	38.8
e.	UG & PG	13	13.3
3	**Family income**		
a.	10000-15000	27	27.6
b.	150001-20000	35	35.7
c.	Above 20000	36	36.7
4	**Dietary pattern**		
a.	Vegetarian	25	25.5
b.	Non vegetarian	43	43.9
c.	Mixed	30	30.6
5	**Previous knowledge related to early identification of obstetrical emergencies during first trimester of pregnancy**		
a.	Yes	13	13.3
b.	No	85	86.7

SECTION-II- Table- 2.1.1- Frequency and percentage distribution of Pre-test scores of studied subjects:

Category and test Score	Frequency (N=98)	Frequency Percentage (%)
POOR(1-10)	83	84.7
AVERAGE (11-20)	15	15.3
GOOD (21-30)	0	0.0
TOTAL	98	100.0

The present table 2.1.1 concerned with the existing knowledge regarding early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers were shown by pre-test score and it is observed that most of the Primigravidae mothers 83 (84.7%) were poor (01-10) knowledge & some Primigravidae mothers have 15 (15.3%) were from average category.

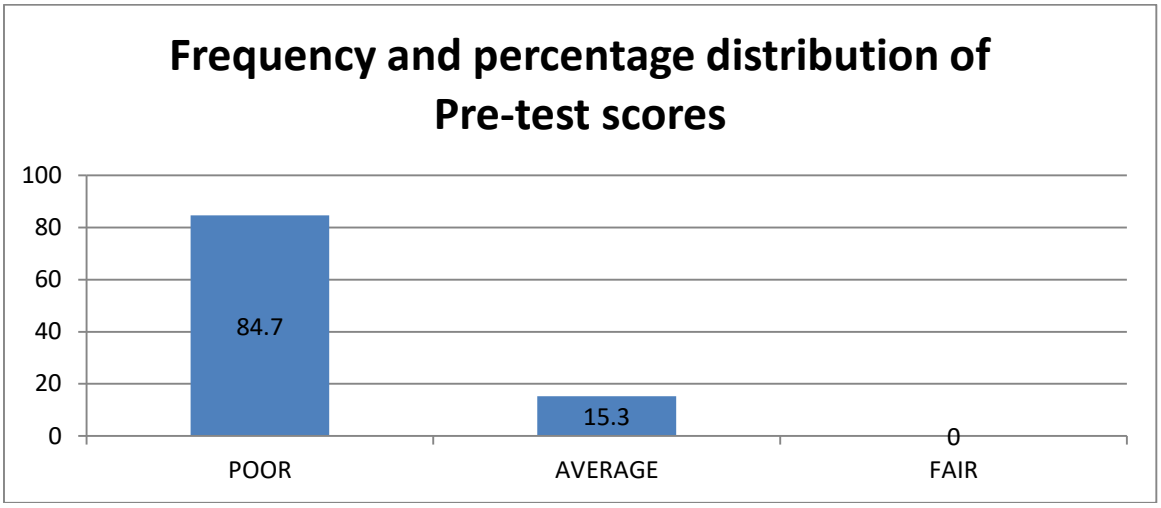

FIG.-2.1.1- Frequency and percentage distribution of Pre-test scores of studied subjects

Table-2.1.2. - Mean ($\overline{X}$) and standard Deviation (s) of knowledge scores:

Knowledge Pre –test	**Mean ($\overline{X}$)**	**Std Dev (S)**
Pre-test score	1.15	0.36

The information regarding mean, percentage of mean and standard deviation of test scores in shown in table 2.1.2 knowledge in mean pre-test score was 1.15± 0.36 while in knowledge regarding early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers in Ratibad, Bhopal.

Hence, it is confirmed from the tables of section-II that there is a significant difference in mean of test scores which partially fulfill first objective of the present study.

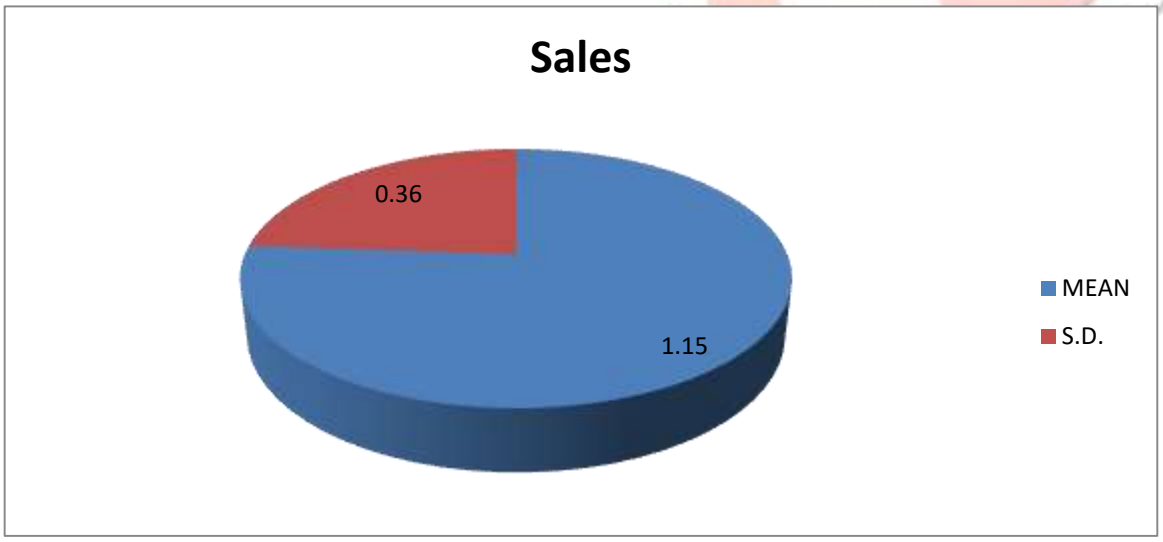

FIG.-2.1.1. - **Mean ($\overline{X}$) and standard Deviation (s) of knowledge scores**

Table-2.2.1- Frequency and percentage distribution of Post test scores of studied subjects:

Category and post-test Score	**Frequency (N=98)**	**Frequency Percentage (%)**
POOR(01-10)	0	0.0
AVERAGE (11-20)	26	26.5
GOOD (21-30)	72	73.5
TOTAL	98	100%

The present table 2.2.1 concerned with the existing knowledge regarding early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers was shown by post test score and it is observed that most of the Primigravidae mothers 72 (73.5%) were **GOOD** (21-30) knowledge & other Primigravidae mothers have 26 (26.5%) category which are **AVERAGE** (11-20) post test knowledge score in present study.

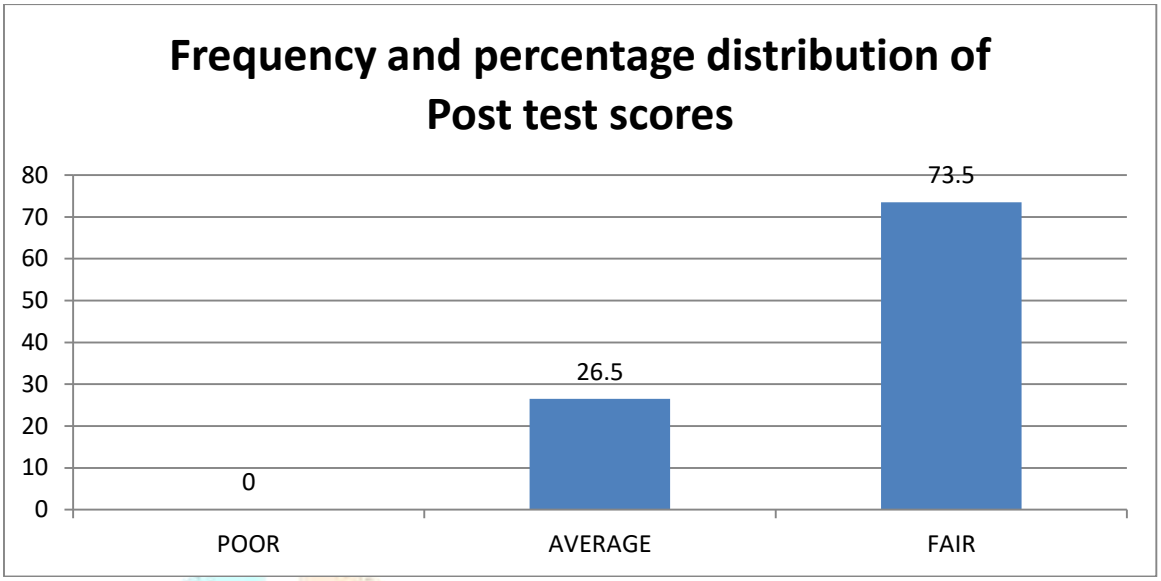

FIG.-2.2.1- Frequency and percentage distribution of Post test scores of studied subjects

Table-2.2.2. - Mean ($\overline{X}$) and standard Deviation (s) of knowledge scores:

Knowledge Test	**Mean ($\overline{X}$)**	**Std Dev (S)**
Post-test score	2.73	0.44

The information regarding mean, percentage of mean and SD of post test scores in shown in table 2.2.2 knowledge in mean post test score was 2.73 ± 0.44 while in knowledge regarding early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers in Ratibad, Bhopal.

Hence, it is confirmed from the tables of section-II that there is a significant difference in mean of test scores which partially fulfill 2nd objective of the present study.

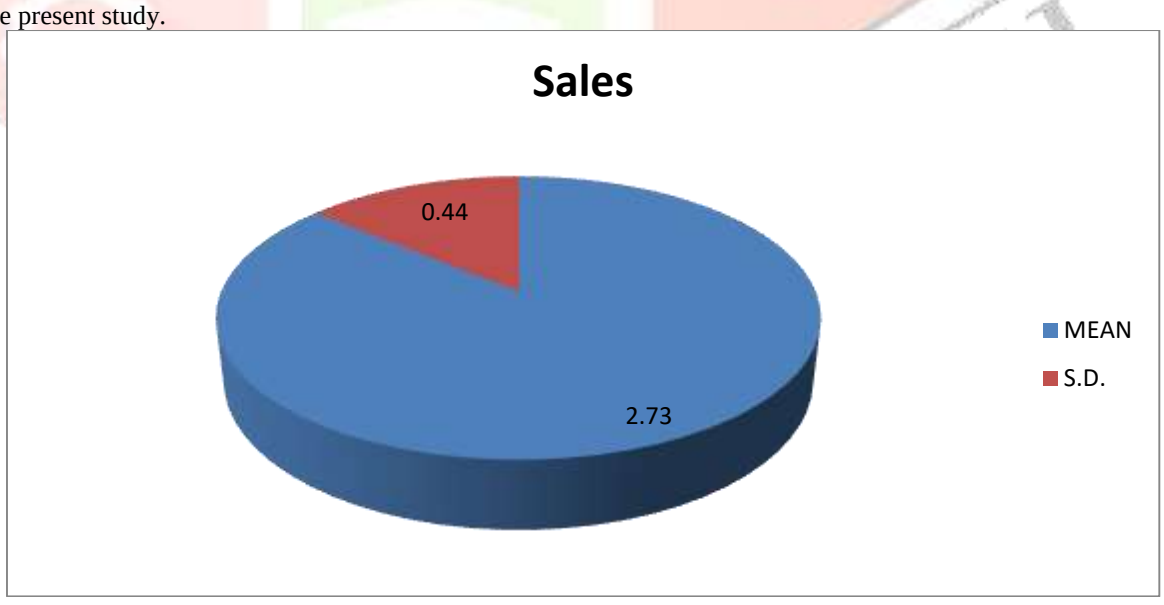

FIG.-2.2.2. - Mean ($\overline{X}$) and standard Deviation (s) of knowledge scores:

TABLE 2.2.3: Impact of awareness package by calculating Mean, SD, Mean Difference and 't' Value of Pre-test and Post-test knowledge.

Knowledge Score of Primigravidae mothers	Mean ($\bar{X}$)	S. D. (s)	Std. Error of Mean	D. F.	t-value	Significance
Pre-test	**1.15**	**0.36**	0.05	97	**-29.22**	P<0.0001*
Post-test	**2.73**	**0.44**				

When the mean and SD of pre-test & post-test were compared &'t' test was applied. It can be clearly seen that the 't' value was -23.30 and p value was 0.0001 which clearly show that awareness package was very effective in enhancing the knowledge of Primigravidae mothers.

SECTION-III Association of knowledge scores between test and selected demographic variables:

Table- 3.1 Association of age of Primigravidae mothers with pre-test scores:

Age	Test scores			Total
(in years)	**POOR (1-10)**	**AVERAGE (11-20)**	**GGOD (21-30)**	
21-26	27	3	0	**30**
27-32	44	11	0	**55**
33-38	10	1	0	**11**
39-44	2	0	0	**2**
Total	**83**	**15**	**0**	**98**
	X=2.27	p>0.05(Insignificant)		

The association of age & test scores is shown in present table 3.1. The probability value for Chi-Square test is 2.27 for 3 DF which indicated insignificant value (p>0.05). Hence, it is identified that there is insignificant association between age & test scores. Moreover, it is reflected that age isn't influenced with current problem.

Table- 3.2 Association of educational status with pre-test scores:

Educational status	Test scores			Total
	POOR (1-10)	**AVERAGE (11-20)**	**GOOD (21-30)**	
No formal	3	0	0	**3**
Primary	10	2	0	**12**
Secondary	28	4	0	**32**
Higher sec.	34	4	0	**38**
UG & PG	8	5	0	**13**
Total	**83**	**15**	**0**	**98**
	X= 6.80	p>0.05 (Insignificant)		

The association of educational status & test score is shown in present table 3.2. The probability value for Chi-Square test is 6.80 for 4 degrees of freedom which indicated educational status and test scores. Moreover, it is reflected that educational status isn't influenced with present problem.

Table- 3.3 Association of family income with pre-test scores:

Family income	Test scores			Total
	POOR (1-10)	**AVERAGE (11-20)**	**GOOD (21-30)**	
10000-15000	24	3	0	**27**
15001-20000	30	5	0	**35**
Above 20000	29	7	0	**36**
Total	**83**	**15**	**0**	**98**
	X=0.87	p>0.05 (Insignificant)		

The association of family income & test score is shown in present table 3.3. The probability value for Chi-Square test is 0.87 for 2 degrees of freedom which indicated family income and test scores. Moreover, it is reflected that family income isn't influenced with present problem.

Table- 3.4 Association of Dietary pattern with pre-test scores:

Dietary pattern	Test scores			Total
	POOR (1-10)	AVERAGE (11-20)	GOOD (21-30)	
Vegetarian	21	4	0	**25**
Non veg.	34	9	0	**43**
Mixed	28	2	0	**30**
Total	**83**	**15**	**0**	**98**
	X= 2.78	p>0.05 (Insignificant)		

The association of dietary pattern & test score is shown in present table 3.4. The probability value for Chi-Square test is 2.78 for 2 degrees of freedom which indicated dietary pattern and test scores. Moreover, it is reflected that dietary pattern isn't influenced with present problem.

Table- 3.5 Association of previous knowledge related to early identification of obstetrical emergencies during first trimester of pregnancy with pre-test scores:

Previous Knowledge	Test scores			Total
	POOR (1-10)	AVERAGE (11-20)	GOOD (21-30)	
Yes	9	4	0	**13**
No	74	11	0	**85**
Total	**83**	**15**	**0**	**98**
	X= 2.76	p>0.05 (Insignificant)		

The association of previous knowledge & test scores is shown in present table 3.5. The probability value for Chi-Square test is 2.76 for 1 degrees of freedom which indicated previous knowledge & test scores. Moreover, it is reflected that previous knowledge isn't influenced with current problem.

VII. Results

The result of this study indicates that there was a significant increase in post-test knowledge scores compared to pre-test scores of early identification of obstetrical emergencies during first trimester of pregnancy. The mean percentage knowledge score was observed 1.15±0.36 in pre-test & after implementation of awareness package post-test mean percentage was observed with 2.73±0.44.

VIII. Conclusion

Thus after the analysis and interpretation of data we can conclude that the hypothesis RH1 that, there will be significance difference between pre-test knowledge score with post-test knowledge score among Primigravidae mothers at (P<0.001) is being accepted.
Furthermore, awareness package related to early identification of obstetrical emergencies during first trimester of pregnancy among Primigravidae mothers may consider as an effective tool when there is a need in bridging & modifying knowledge.

IX. Limitations

- This was limited to Ratibad, Bhopal.
- This was limited to 98 Primigravidae mothers.

X. References

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