



“EFFECTIVENESS OF PLANNED TEACHING PROGRAMME ON KNOWLEDGE REGARDING TEMPORARY FAMILY PLANNING METHODS AMONG PRIMIGRAVIDA MOTHERS IN SELECTED MATERNITY HOSPITALS AT JHUNJHUNU RAJASTHAN.

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ABSTRACT: In developing countries, especially in India where deep rooted beliefs, customs and superstitions regarding pregnancy. Child birth, health and the role of the mother are still widely prevalent and women with poor socio – economic back ground are more vulnerable to the health risks associated with child bearing in quick succession. These contribute to high rates of maternal morbidity and mortality. Family planning plays a crucial role in safe guarding the health of women. Study based on to assess the existing knowledge regarding Temporary Family planning methods among 30 primi gravida mothers at Birla Sarvajanic Hospital, Jhunjhunu, Rajasthan.. It is necessary that everyone should be aware of Temporary Family planning methods **Method:** An evaluative approach was adopted for the study with one group pretest posttest design. 30 samples were selected using non probability purposive sampling technique and the data was collected using a structured knowledge questionnaire on Temporary Family planning methods. The main study was done in Govt. Maternity Hospital, Rajasthan. **Result:** Comparison of overall knowledge score in pretest and posttest reveals that Temporary Family planning methods are having 36.00% more knowledge in posttest than pretest. which indicates the effectiveness of PTP. Before the administration of Intervention., pre-test knowledge of mothers was having a significant association with Mothers Education ($\chi^2=13.15$ at $p> 0.05$). Whereas knowledge regarding Temporary Family Planning Methods. These results are obtained by Pearson test/Yates corrected chi-square test and were statistically significant. Pearson Chi square test was used to test statistical significance; it is statistically significant at 0.01 level. **Conclusion:** Descriptive and inferential statistics were employed to analyze the data. The data analysis was carried out on the basis of objectives and hypotheses of the study and has been presented on the sample characteristics with their knowledge. The overall pretest scores was 48.33 % and the posttest scores was 84.33%. There was association between posttest knowledge score and selected socio-demographic variables such as Mothers education, by mothers are significantly associated with posttest level of knowledge. The independent ‘t’ value was

32.8 % which was greater than the table value at $P < 0.001$ level of significance. This indicated that PTP was significantly effective in enhancing the knowledge of mothers of primi gravida mothers.

Keywords: Experimental study, Planned teaching programme, Knowledge, family planning methods, primi gravida mothers

INTRODUCTION

Family planning has far-reaching benefits for women and their families. All couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so. Especially Women who can plan the number and timing of their births enjoy improved health, experience fewer unwanted pregnancies and births, and have lower rates of induced and often unsafe abortion. Planned pregnancies are best for mother and child. By preventing closely spaced births family planning could significantly reduce infant and child mortality.¹

A planned family is the best environment for a child's over all development. When children are effectively parented, they feel better about themselves and their abilities. They enter school excited and ready to learn. And they are more likely to achieve their fullest potential at school and to make positive contributions to community life. These effectively parented children are also more prone, as they become adults, to be healthy, law – abiding citizens, and to have successful careers and family lives. So, the gift of effective parenting is one that keeps on giving.²

The reduction in women's productivity also places an economic burden on their families, communities and societies. Improving the social and economic status of women, which greatly affect and are affected by poor reproductive health, is a vital concern. Increasing a woman's educational level and control over financial resources can improve her status within the house hold, thereby increasing not only her role in decision making, knowledge about health and services available to her, that contribute to good health.³

Mother's health affects the health of her children. Being a healthy mother is the best way to assure having healthy children. Women who are in poor health or poorly nourished are more likely to give birth to un healthy babies and often cannot provide adequate care, diminishing the chances their children will survive and thrive. Birth spacing improves child survival. Children need a good start in life. The timing of births has a powerful impact on a child's chances of survival. Close spacing of births can harm the health of mother and baby during pregnancy and forces other children to compete for nourishment and maternal care. When a pregnant woman has not had time to fully recover from the previous birth, the new baby often develops too slowly and is born under weight or premature, increasing its chances of dying in infancy.⁴

NEED OF THE STUDY :

Temporary family planning methods or Spacing of child birth is an essential factor in reproductive life to promote health and well being of mother and child. Spacing children minimum of three years apart gives the child a healthier start in life, and the mother an adequate time to recuperate from physiological and psychological stress from previous pregnancy, delivery and strain of taking care of the child. When mother's health is disturbed, whole family's routine will be disturbed a lot, as she is important figure in the family and first teacher to her children.⁵

During the inauguration of "Family Welfare and Health Mela" in Lucknow on 31st January 2001, emphasized that more vigorous adoption of the concept of family planning was the need of the hour and attributed its comparative failure to high child mortality rate in the country. Without proper education and awareness and constructive involvement of women, the family planning programme in the country could never be a success.⁶

Over 1,50,000 maternal deaths take place every year in India. This accounts for about 25% of the maternal deaths in the world. Most of these deaths are preventable by providing proper antenatal, intra natal and post natal care services to pregnant women and mothers.⁷

Though India was the first country to launch a family planning programme in 1952, the total population of India as on 1st march, 2001 stood at 1027 million sex ratio is 933 females/ 1000 males (2001).

Maternal mortality ratio in India is 407/ 1000 live births. 150 to 180 eligible couples/ 1000 population in India are in need of family planning services. 20% of them are found in the age group of 15 to 24 years. As on 31st March, 2000, 46.2% of eligible couples were effectively protected against contraception. However about 54% eligible couples are un protected against conception.⁸

PROBLEM STATEMENT :

“A STUDY TO EVALUATE THE EFFECTIVENESS OF PLANNED TEACHING PROGRAMME ON KNOWLEDGE REGARDING TEMPORARY FAMILY PLANNING METHODS AMONG PRIMIGRAVIDA MOTHERS IN SELECTED MATERNITY HOSPITALS AT RAJASTHAN.”

Purpose of the Study :

This study aims to systematically educate expectant mothers about various temporary contraceptive options, helping them make informed decisions about family planning. By evaluating the effectiveness of this educational intervention, the research seeks to contribute to improved maternal health literacy, promote the adoption of effective family planning practices, and ultimately support the health and well-being of mothers and their families in the region. This initiative underscores the importance of targeted educational programs in empowering individuals with the knowledge to make choices that align with their health and family planning goals..

OBJECTIVES :

1. To assess the existing knowledge regarding Temporary Family planning methods among primi gravida mothers.
2. To assess the effectiveness of Planned teaching programme by comparing pre and post test knowledge score regarding Temporary Family Planning Methods among primi gravida mothers
3. To find out the association between the post test knowledge score regarding temporary Family Planning methods of primi gravida mothers with their selected socio demographic variables

HYPOTHESIS :

H¹: The mean post test knowledge score of primigravida mothers about Temporary Family planning methods will be significantly higher than their mean pre-Test knowledge score..

H²: There will be significant association between post test knowledge score of primigravida mothers regarding Family planning methods with their selected socio demographic variables

OPERATIONAL DEFINITIONS

Evaluate: In the context of this statement, to evaluate means to systematically assess the impact of a Planned Teaching Programme on the knowledge of primigravida mothers about temporary family planning methods.

Effectiveness: Refers to how successfully the Planned Teaching Programme enhances the understanding of temporary family planning methods among primigravida mothers in selected maternity hospitals in Rajasthan.

Planned Teaching Programme: A systematically designed educational initiative aimed at improving primigravida mothers' knowledge about temporary family planning options.

Knowledge: In this study, knowledge refers to the information, awareness, and understanding that primigravida mothers in selected maternity hospitals in Rajasthan acquire regarding temporary family planning methods through the Planned Teaching Programme

Temporary Family Planning Methods: Contraceptive measures intended to prevent pregnancy for a temporary period, which can be discontinued when the desire to conceive arises.

Primigravida Mothers: First-time pregnant women, specifically those being educated in the study on

temporary family planning methods.

Maternity Hospitals: Hospitals in Rajasthan selected for the study, specializing in care for pregnant women, where the Planned Teaching Programme is implemented to assess its effectiveness.

REVIEW OF LITERATURE

A cross-sectional descriptive study was carried out among married women of reproductive age (15-49 years) at the general outpatient department of an Urban Health Centre (UHC), using a universal sampling approach. Those who were pregnant or unwilling to participate were excluded. A total of 180 women were enrolled. Each participant underwent a face-to-face interview using a pre-tested questionnaire after giving informed consent. The findings revealed that 52.2% (94 women) were between 20-24 years old. Awareness of contraceptive practices was noted in 52.4% of the participants, yet only 32.2% were actively using contraception. Among these, 89.66% opted for temporary methods, while 10.34% chose permanent solutions, with Cu-T being the preferred choice for 41.37%. An unmet need for contraception was identified in 51.6% (93 women). Factors such as religion, educational background, and age at marriage showed a significant correlation with contraceptive use.⁹

The study titled "Inter-spousal communication on family planning as a determinant of the use of modern contraception" conducted in Bangladesh surveyed 9,640 women and 3,874 men. Data were gathered through questionnaires, exploring the dynamics of family planning within couples. Results highlighted that factors such as a woman's age, number of living children, education level, wealth, type of residence, and mobility significantly influenced the use of modern reversible contraceptives. Notably, educated women were more inclined to use these methods, with a usage rate of 36.4%. A key finding of the study was the critical role of inter-spousal communication in determining the use of modern reversible contraceptives. It was observed that the frequency of communication between spouses directly correlated with the usage rates of these methods, indicating a clear link between open, frequent discussions on family planning and the adoption of modern contraceptive practices.¹⁰

Research focused on assessing the understanding, perceptions, and utilization of contraception among 60 couples in Sreekaryam Panchayat, Kerala's Ward Six, employed a detailed interview process for data collection. Results indicated a low level of knowledge on family planning methods, with 87% scoring below average. It was observed that 56.7% of the couples did not use any family planning methods, while a notable proportion (43.3%) did engage in such practices. The Copper-T emerged as the most preferred choice among 46.2% of those who practiced contraception. A significant majority, 73.1%, opted out of family planning mainly due to their dislike of the available methods.¹¹

This research aimed to explore family planning behaviors among mothers, focusing on currently pregnant and postpartum women's views on contraceptive use relative to their current or recent pregnancies. The study found that while over 80% of respondents had been using some form of contraception before becoming pregnant, about 20% expressed dissatisfaction with their chosen method. A significant finding was that dissatisfaction was higher among those with unplanned pregnancies (36%) compared to those whose pregnancies were planned (9%). Additionally, more than 40% of women in the peripartum period were considering changing their contraceptive method post-delivery. Notably, 65% of participants reported having received minimal information regarding intrauterine contraceptive options prior to the survey. These findings highlight the significant impact that childbirth has on women's contraceptive preferences, particularly towards long-term solutions.¹²

METHODOLOGY

Research Approach : The research approach adopted for this study was evaluative in nature.

Research Design : Pre-experimental One group pretest and posttest design was considered.

Population : Primigravida mothers in Birla Sarvajank hospitals at Rajasthan constitute the target population for the study

Setting : The study will be conducted in in Birla Sarvajank hospitals , Jhunjhunu, Rajasthan.

Sample & Sample Size : 30 Primigravida mothers in Birla Sarvajank hospitals.

Sampling technique : Non Probability Convenient sampling technique was used.

Data collection technique : The instrument for the data collection was a structured questionnaire and had two parts: A: Socio-demographic data, B: structured questionnaires to assess the knowledge of primigravida mothers regarding temporary family planning methods.

Description of data : The data obtained was analyzed by using descriptive and inferential statistics in terms of frequency, percentage, mean, standard deviation, paired_t' test and Chi-square test.

The anonymity and confidentiality of the study subjects was maintained throughout the study.

RESULTS & DATA ANALYSIS

Table 1: Description of socio Demographic variable of primigravida mothers N=30

Demographic variables		Frequency(n)	Percentage %
Age	18-22	10	33.33
	23-25	7	23.33
	25-30	8	26.66
	Above 30	5	16.66
Residence of mothers	Rural	04	13.33
	Urban	12	40.00
	Semi Rural	14	46.66
Religion	Hindu	14	46.66
	Muslim	8	26.66
	Christian	3	10.00
	Other	5	16.66
Type of family	Nuclear family	16	53.33
	Joint family	8	26.66
	Extended family	6	20.00
Monthly Income	<15000	9	30.00
	15001-20000	15	50.00
	Above 20000	6	20.00
Mothers Education	No formal education	6	20.00
	Primary education	8	26.66
	High school	11	36.66
	Graduate and above	5	16.66
Source of information	Social media	14	46.66

	Printed media	5	16.66
	Health professional	7	23.33
	No Information	4	13.33

The findings are summarized as follows

The majority of respondents 10 (33.33 %) were 18-22 year , 14 (46.66 %) of sample belongs to semi rural area , 14 (46.66 %) sample belonged to hindu religion, 16(53.33%) samples had belong to nuclear family, 15(50%) sample were getting 15001-20000 per month , 11(36.66%) mothers had high school education , 14(46.66%) getting information from social media.

Table – 2 To assess Mean, SD and Mean % pre and post-test knowledge score regarding Temporary Family Planning Methods among primi gravidamothers N=30

Domain	Max.Score	Range	Mean	SD	Mean%
Pre test	30	7—18	14.5	3.4	48.33
Post test	30	16--27	25.30	2.9	84.33

It is observed from the present study that the mean as well as the standard deviation of the knowledge regarding Temporary Family Planning Methods during the pretest is 14.5 and 3.4 and during the posttest it is 25.30 and 2.9. The difference in the mean knowledge score on Temporary Family Planning Methods is statistically highly significant (<0.001)

Table- 3 To assess the effectiveness of Planned teaching programme by comparing pre and post test knowledge score regarding Temporary Family Planning Methods among primi grvida mothers n=30

Domain	Mean	SD	Mean%	Paired 't' test
Pre test	14.50	3.4	48.33	32.8 **
Post test	25.30	2.9	84.33	
Difference	10.8	2.4	36.00	

ficant at $P < 0.01$ at df 29

It is observed from the present study that the mean as well as the standard deviation of the knowledge regarding Temporary Family Planning Methods during the pretest is 14.5 and 3.4 and during the posttest it is 25.3 and 2.9. The difference in the mean knowledge score 10.8 and mean % 36.00% on Temporary Family Planning Methods is statistically highly significant (<0.001)

Table 4: Effectiveness of Planned Teaching Programme on Temporary Family Planning Methods among primi grvida mothers

	% of Pretest knowledge	% of Posttest knowledge	% of knowledge gain
Knowledge	48.33%	84.33%	36.00%

Table 11 and figure 12 shows the effectiveness of the Planned teaching programme Temporary Family Planning Methods gained 36.00 % more knowledge after the administration of Planned teaching programme. This 36.00% of knowledge gain is the net benefit of this study, which indicates the effectiveness of Planned teaching programme hence H^1 had been accepted.

Table 5: Association between pretest knowledge scores and selected sociodemographic variables

Sl. No	Demographic Variables	Categories	Pre-Test Educational stress Level			Calculated χ^2 Value	df
			Inadequate	Moderate adequate	Adequate		
1	Age	18-22	4	6	0	7.21 (NS)	6
		23-25	2	5	0		
		25-30	2	6	0		
		Above 30	3	2	0		
2	Residence of mothers	Rural	2	2	0	3.86 (NS)	4
		Urban	5	7	0		
		Semi Rural	6	8	0		
3	Religion	Hindu	5	9	0	8.52 (NS)	6
		Muslim	2	6	0		
		Christian	1	2	0		
		Other	3	2	0		
4	Type of Family	Nuclear	6	10	0	3.64 (NS)	4
		Joint	3	5	0		
		Extended	3	3	0		
5	Monthly Income	<15000	4	5	0	4.54 (NS)	4
		15001-20000	8	7	0		
		Above 20000	3	3	0		
6	Mothers Education	No formal education	2	4	0	13.15 (S)	6
		Primary education	5	3	0		
		High school	8	3	0		
		Graduate and above	3	2	0		
7	Source of information	Social media	8	6	0	5.67 (NS)	6
		Printed media	3	2	0		
		Health professional	5	2	0		
		No Information	2	2	0		

S- Significant at $p < 0.05$ level, **N.S-** Not Significant at $p > 0.05$ level

Table no 5 shows that pre-test knowledge of mothers was having a significant association with Mothers Education ($\chi^2=13.15$ at $p > 0.05$). Whereas knowledge regarding Temporary Family Planning Methods. These results are obtained by Pearson test/Yates corrected chi-square test and were statistically significant.

Hypothesis-H2 ; Table No.5 Shows that pre-test knowledge of mothers is having a significant association with mothers education. So by reading these results statistically Null hypothesis is rejected and the research hypothesis was accepted.

NURSING IMPLICATION

The findings of the study will help the investigator in the following ways:

- Developing positive knowledge regarding Temporary Family Planning Methods.

The finding of the study can be used in the following areas of nursing profession.

Nursing Administration:

Nursing administrators can use the study's findings to develop or refine policies that support family planning education in maternity settings. This may include integrating structured teaching programs into routine prenatal care protocols. Administrators may need to allocate resources for the development and sustained implementation of teaching programs, including training nursing staff to deliver these programs effectively.

Nursing Research:

The study contributes to the evidence base for the effectiveness of educational interventions in improving knowledge about family planning. Further research could explore the long-term impact on family planning choices and maternal health outcomes. Researchers can investigate different methodologies or technologies to enhance the delivery and effectiveness of family planning education, tailoring approaches to diverse populations.

Nursing Education:

Nursing educators can incorporate findings into curricula, emphasizing the importance of patient education in family planning. Training programs can be developed to equip nurses with the skills to effectively communicate and educate about temporary family planning methods. The study underscores the need for ongoing education for nursing staff, ensuring they remain informed about the latest family planning methods and teaching strategies.

Nursing Practice:

Nurses play a critical role in educating primigravida mothers about temporary family planning options, guiding them to make informed decisions based on their health, circumstances, and family planning goals. The study highlights the impact of structured educational programs on patient knowledge, prompting nurses to integrate such education into their practice to enhance the quality of care and support positive health outcomes.

CONCLUSION

It underscores the critical role of targeted educational interventions in enhancing understanding and awareness of family planning options among first-time mothers. By focusing on temporary methods, the study not only addresses immediate needs for contraceptive education but also promotes informed decision-making that aligns with women's health and family goals. The positive outcomes suggest that such PTPs can significantly impact maternal health literacy, ultimately contributing to better health outcomes for mothers and their families. This research emphasizes the necessity of integrating structured family planning education into maternal healthcare services, advocating for policy changes, and encouraging further research to explore innovative educational strategies. The collaboration across nursing practice, administration, education, and research is pivotal in advancing family planning education and supporting primigravida mothers in making empowered choices for their reproductive health.

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