A Study to Assess the Effectiveness of Structured Teaching Program on Preconception Care (PCC) among Women Studying at Selected College, Bangalore

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ABSTRACT

Background of the study:

Preconception care is the care when a woman is seen and counseled about pregnancy, its course and outcome well before the time of actual conception it is called "preconception care". It is a very new concept. It is based on the theory that all women enters pregnancy with an optimal state of which would be safe both to herself and the fetus. In this sense the strategy of extending prenatal care into the preconception period makes a useful step in reforming the public health approach. **Objectives:** The main objective was to assess the knowledge level on Preconception care (PCC) among women and evaluate the effectiveness of Structured Teaching Program on Preconception care (PCC). Another objective was to find out the association between knowledge on Preconception Care and selected demographic variables. Methods: An experimental approach with One Group pre-test post-test design was used for this study; the sample consisted of 60 women studying in National University College, Jayanagar 7th block, Bangalore. The participants were selected by Stratified random sampling. The data was collected by using structured self-administered questionnaire before and after the structured teaching program. Result: The mean percentage of pretest score and posttest scores were 43 percentage and 76 percentage respectively and there was 33 percent enhancement in knowledge observed when obtained pretest and posttest were compared. The obtained 't' value 26.62 was significant at t_(59.0.001) level, hence the research hypothesis is accepted. Conclusion: It indicates STP was effective in enhancing knowledge on PCC.

How to cite this paper: Mrs. Simrandeep Kaur | Prof. Ruma Chakravarty | Mr. Jinji B. S. "A Study to Assess the Effectiveness of Structured Teaching Program on Preconception Care (PCC) among Women Studying at

Selected College, Bangalore" Published in International Journal of Trend in Scientific Research and Development (ijtsrd), ISSN: 2456-



6470, Volume-7 | Issue-1, February 2023, pp.123-126, URL: www.ijtsrd.com/papers/ijtsrd52640.pdf

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KEYWORDS: Preconception Care (PCC); Structured Teaching Program (STP)

INTRODUCTION

Around 98 percent of all women of reproductive age group have one or two risk factors which can result in poor pregnancy outcome like Low birth weight, premature birth, birth defects and mental retardation. Risk factors like anemia and folic acid deficiency due to faulty diet habits, obesity due to sedentary life styles, alcoholism and smoking are some of them. Women of reproductive age group who are on step of being mother first time should be aware of these determinants especially age group of 18 to 25 years who are on step of being mother first time should be aware of these determinants which can affect the

pregnancy even before it occurs. All women of reproductive age must be provided organized and comprehensive Preconception Care which will guide them to maintain health for themselves, their pregnancy and child.

NEED FOR THE STUDY

Development of knowledge and attitude takes place during the younger age, which can have lifelong effects on the individual, family and society. Proper education in this age group is important for prevention of untoward social and health related problems. Approximately 138 million of India's population is between the age of 15-25 years. About 50percent adolescent girls get married at below the age of 20 in U.P, M.P, Bihar and Rajasthan, which contribute to 40 percent of India's population. It is rather unfortunate, but true that in the majority of girl children in India, there is no period of Adolescence as they shift from childhood to adulthood and soon become a pregnant adult.¹⁶

Worldwide over one third of all health problems faced by women are due to reproductive health Women of developing countries are known to be malnourished Maternal mortality rate for India is high and maternal death constituted 3 per thousand of the total reported death in 2003.16 Anemia is found in nearly 27.9 percent of non-pregnant, severe anaemia is one of the important reasons for abortion, premature births and low birth and low birth weight of babies. The prevention should be started before the occurrence. Knowledge regarding Preconception Care should be given to the young instead of married women so that they can have plenty of time to prepare their body and mind for the conception. 20 percent of women in the world become pregnant before attaining 20 years of age. This figure is much higher in a country like India. 16 Health care workers have identified some of the barriers to providing PCC.

Major were lack of resources and lack of contact with women planning to conceive. So, to overcome these barriers it is better to target each college studying women who are in reproductive age and more approachable. 11

OBJECTIVE OF THE STUDY

- 1. To assess the knowledge level on Preconception care among women.
- 2. To evaluate the effectiveness of Structured Teaching Program on Preconception care (PCC).
- 3. To find out the association between knowledge on Preconception Care and selected demographic variables of samples such as age, education qualification, combination of subjects, Family income, Religion, Type of family, Area of residence, Source of information regarding Preconception Care.

METHODOLOGY:

Experimental approach was adopted. The design used in this study is Quasi Experimental One Group Pretest Post-test design. The data was collected from 60 women of age group 18 to 25 years studying in National University College. Jayanagara7th Block. Bangalore. Stratified Random Sampling was used to choose 27 Arts students 33 Science students keeping the ratio same. Subjects were selected based on inclusion criteria.

RESULTS:

TABLE 12: ENHANCEMENT IN KNOWLEDGE SCORES WITH COMPARISON OF PRE-TEST AND POST-TEST

N = 60

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SL. NO	Area	Pretest		Posttest			Enhancement
		Mean	Mean %	Mean	Mean %	Enhancement	%
1	General concepts regarding preconception care	2.5	41.7%	4.2	70%	1.7	28.3 %
2	Preconception al Nutrition	7.8	43.3%	13.0	72%	5.2	28.7 %
3	Preconception High Risk screening, Immunizations and Genetic Counseling	11.2	43.1%	20.6	79%	9.4	35.9 %
	Overall Knowledge	21.5	43%	37.82	76%	16.32	33 %

TABLE 13: EFFECTIVENESS OF STRUCTURED TEACHING PROGRAM

N = 60

Comparison	Mean	SD	't' value
Pretest	21.5	4.9	26.621*
Post test	37.8	3.4	20.021

* is significant; NS is not significant df = N-1 = 59p<0.001

 $t_{(59.0.001)}=3.46$

Testing of Hypothesis H₁:

There is significant difference between Pretest and Posttest knowledge scores of women regarding

Preconception care. It indicates that the research hypothesis H₁ is accepted.

Testing of Hypothesis H₂:

There is a significant association between Pretest Knowledge scores on Preconception Care and the selected demographic variables such as Education Qualification, Combination of Subjects and Source of Information regarding Preconception Care. So, the research hypothesis H₂ is accepted.

CONCLUSION

Women and children are the group of population which is considered more where the health services are concerned. In view to attain "Health for all" it is recommended to look for preventive aspect. One of the preventive aspects which is still hidden and need to be focused is Preconception care. College students should be targeted for the awareness because they are the future India.

As it is seen that most of women (63 percent) will conceive first time in the age group of 18 to 25 years which should be focused mainly therefore keeping this thing in mind researcher has chosen this age group.

Study shows that majority of 76.7 percent of the students were of age 18 - 19 years, 45 percent were in second year. More than half (55 percent) of the students were pursuing science degree. Out of which around 41.7 percent of the students 'monthly family income was between Rs 10001 – 20000. 96.7 percent of the subjects were Hindu, $3/4^{th}$ of the students were living in nuclear family and 96.7 percent of the students were living in urban areas of Bangalore. It was seen that more than half of the subjects i.e. 53 percent were not having any information regarding Preconception care.

The overall mean pretest knowledge score of women found to be 43% with standard deviation of 4.8 which indicates the overall pretest knowledge about preconception care was poor, hence there is a need for planned teaching program on preconception care.

Post test results shows significant enhancement in knowledge of preconception care 76 percent with standard deviation 3.3.

The findings of the study showed that there was association between education qualification and the combination of subjects. The students pursuing science subjects have more knowledge regarding preconception care rather than students pursuing Arts. There was a significant association between knowledge and the source of information also. There was no significant association of knowledge scores with age, family income, religion, type of family and area of residence.

Nursing Implications

By addressing the health promotion needs of every women examining and addressing her health profile for reproductive risks, irrespective of her desires for pregnancy, it is likely that more women will enter pregnancy with high levels of preconception wellness and that healthier women results in healthier pregnancies and healthier infants.

Health promotion can be achieved through health education to women which brings changes in life style and behaviour whereby we can reduce the maternal mortality rate, infant mortality rate. 12

Nursing administrators involving in planning commission of health and family welfare should include PCC as a wing in health care. PCC should get equal importance like other health services like family planning. This can thereby reduce the complications arises during pregnancy and improve its outcome by reducing the percentage of birth defects in newborns.

In India, no research has been conducted in the area of Preconception care. There is a need for extensive research on Preconception care; research should focus on imparting the knowledge to all women in reproductive age irrespective of whether they are married or not and encourage them to consult their family physician or any health personnel whenever they plan to conceive with major focus on planned pregnancy. This helps to give meaningful, need based information and create awareness for the welfare of the woman's health which will leads to better pregnancy out comes.

REFERENCES:

- Booker CJ. Prenatal Nutrition (online). 2009 [1] Available from: URL: 17 http:emedicine.medscape.com
- Mohammad Masud Iqbal Prevention of Neural [2] Tube Defects by Periconceptional Use of Folic Acid (online). 2000; 21: 58-66 Available from: URL: http.pedsinreview.aappublications.org
- Nair GM. Youth in transition (online). 2008 [3] Available from: URL: Nov 15. http:spoonfeedin.blogspot.com
- [4] Kramer MS. Supplement: Nutrition as a Preventive Strategy against Adverse Pregnancy Outcomes J. Nutr (online). 2003 May;133:[1592-1596], Available from: URL: http://ncbi.nlm.nih.gov
- [5] Moose MK. Cefalo RK. Preconceptional counseling 2008October. 5(1) (online). Available from: http:glowm.com

- Weerd S. Steegers AP. The Past and Present [6] Practices and Continuing Controversies of Preconception Care Community Genet (online). 2002;5(50)-60 Available from: URL: http.content.karger.com
- Wildschut. van-lachotzki, fong S. steegers EA [7] et al. Preconception Care: an essential part of the care for mother and child. (online). 2006 oct 7; Available from: URL: http.ncbi.nlm.nih.gov
- [8] Dutta, D.C. Text book of Obstetrics, 6th Edition, 2004. New central book agency Pvt Ltd. Calcutta: P 103-4
- [9] Smeltzer SC. Bare BG. Text book of Brunner Suddahths' and Surgical Medical Nursing.9th ed. New York: Lippincott publications. 2003
- [10] Progress towards health for all.WHO. south east asia. 2000. Available from: URL: http.whoseap.com
- Gosman GG. King WC. Reproductive health of [11] women electing bariatric surgery (online). 2003 oct8; Available from: URL: http:www.informaworld.com

- Black JM. Jacobs EM.Text book of Medical [12] and Surgical nursing.5th ed. WB Sounders company Pvt Ltd: 1997
- [13] Biermann j, Dunlop al, brady c, dubin c, brann a jr. promising practices in preconception care for women at risk for poor health and pregnancy outcomes. Matern child health j. (online). 2006 sep; 10. Available from: www.ncbi.nlm.nih.gov
- [14] Canady rb, tiedje lb, lauber c. preconception care and pregnancy planning: voices of African-american women. MCN Am J Matern Child Nurs. (online). 2008. Available from: URL: www.ncbi.nlm.nih.gov
- Heyes t, long s, mathers n. preconception care: [15] practice and beliefs of primary care workers. Fam Pract. 2004 Feb. Available from: URL: www.ncbi.nlm.nih.gov
- Knowledge about preconception care in French [16] women with type 1 diabetes. Diabetes metab. Nov. (online). 2005 Available from: www.ncbi.nlm.nih.gov