

A Pre-Experimental Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge Regarding Janani Suraksha Yojana among Antenatal Women Attending Antenatal Clinic in Selected Hospital of District Hoshiarpur, Punjab

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ABSTRACT

Background of the study: Mothers and their children make up the vast majority of the population. As a result, they are the major beneficiaries of health care, as well as being considered at high risk for disease or injury. "The Government of India launched the Janani Suraksha Yojana on April 12, 2005, as part of NRHM." "A Pre-experimental pre-test, post-test experimental group research design was used to assess the effectiveness of structured teaching programme on Janani Suraksha Yojana among antenatal women attending antenatal clinic."

Aim of study: "The aim of the study was to assess the knowledge regarding Janani Suraksha Yojana among antenatal women and prepare the structured teaching programme on Janani Suraksha Yojana."

Material & methods: A non-probability convenient sampling technique was used to sample 80 pregnant women for the study, which utilised a one-group pre- and post-test research design. Knowledge questionnaires were used for data collection. Analysis was done using both descriptive and inferential statistics.

Findings: According to the findings, antenatal women had varying levels of knowledge about the JSY. It was shown that in the pre-test, 80% of antenatal women had a poor level of knowledge and 20% had average knowledge on JSY. After the post-test, 53.80 % of participants had good knowledge of JSY, whereas 46.20 % had moderate knowledge.

Conclusion: Research showed a statistically significant difference in antenatal women's knowledge of JSY between their pre- and post-test at a level of significant $p < 0.05$ in their research. As a result, a significant increase in antenatal women's knowledge of the JSY was seen after an educational intervention ($p < 0.05$).

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KEYWORDS: Knowledge, Janani Suraksha Yojana, Antenatal Women

INTRODUCTION

It is only during childbirth that one may experience both physical discomfort and emotional joy all at once. The honour of becoming a mother is reserved only for women who have experienced the transition from womanhood or wifehood. Pregnancy and delivery have been shown to have a profound effect on both the mother and the baby's health.¹

Pregnancy and delivery are momentous occasions in the lives of both the expecting mother and her family. A moment of immense optimism and happy

expectation may be found in this season. As a result, it may also be a period of terror, pain, and even death. In spite of the fact that pregnancy is not an illness, but rather a natural bodily process, it is connected with a number of health and survival concerns for both the mother and the baby. Every community and every place has these dangers.²

After nine months, she will finally be able to carry her bundle of joy in her arms for the first time. Every mother dreams of having a safe pregnancy and

childbirth experience so that she may give her child a healthy start in life. To guarantee a healthy pregnancy, these women must get proper prenatal care. Maternal mortality and morbidity may be lowered by educating pregnant women and their families about many elements of prenatal care.

“UNICEF reported from 342 deaths to 211 deaths per 100,000 live births, the maternal mortality ratio in the global population decreased by 38% between 2000 - 2017”.^{5 17}

India's Maternal Mortality Ratio (MMR) would be 122 per 100,000 live births in 2015-2017, according to the Department of Health and Family Welfare. There have been 141 live births in 2018-19, and 370 in 2019-2020 in Punjab, with a maternal death rate of 480 per 141 live births. Due to a lack of access to high-quality health care, a large percentage of mothers die during childbirth. Even while the state government worked hard to reduce maternal death, the situation is becoming better each year. There is hence a substantial impact on the lives of Indian mothers and their newborns from pregnancy-related mortality and morbidity. For these reasons, India has developed particular health services for pregnant women and their newborns

NEED OF THE STUDY

A woman and foetus are under constant observation throughout pregnancy as part of antenatal care, which aims to provide the best possible outcome for both the mother and the baby. For pregnant mothers and their babies, prenatal care affords a wealth of chances for delivering essential health and well-being treatments. It is the responsibility of appropriate prenatal care to protect the mother's health and the health of her unborn child

In clinical settings, the researcher observed that women were unaware of the Janani suraksha yojana plan, which was shown to be directly linked to a lack of interest in hospital births and their associated advantages. Pregnant women should be educated about the JSY in light of the aforesaid

considerations. The researcher was motivated to investigate if a educational intervention, organised in a health care context, is beneficial in increasing antenatal women's understanding of the Janani Suraksha Yojana. The investigator's primary goal is to assist and educate others about the Janani suraksha yojana.

Objectives

- To assess the pre-test level of knowledge regarding Janani Suraksha Yojana among antenatal women in selected Hospital.

- To assess the post-test level of knowledge regarding Janani Suraksha Yojana among antenatal women in selected Hospital.
- To compare the pre and post-test level of knowledge regarding Janani Suraksha Yojana among antenatal women in selected Hospital.
- To find out relationship between pre and post-test level of knowledge regarding Janani Suraksha Yojana among antenatal women with selected socio demographic variables.”

HYPOTHESIS

- **H0:** There was no statistically significant difference on the level of knowledge among antenatal women regarding Janani Suraksha Yojana at $p < 0.05$ level of significance.
- **H1:** There was statistically significant difference on the level of knowledge among antenatal women regarding Janani Suraksha Yojana at $p < 0.05$ level of significance.”

Materials and methods

A quantitative research approach and pre-experimental research design was used. self-structured knowledge questionnaire was prepared on basis of review of literature on Janani suraksha yojana. In knowledge questionnaire, 30 questions regarding objectives of Janani suraksha yojana, its strategies, features of Janani suraksha yojana, eligibility criteria, role of ASHA, Limitations of cash assistance, cash payment under JSY, with convenient sampling technique. The study was conducted in civil hospital, Mukerian, Punjab. Civil hospital, Mukerian is 100 bedded hospital, placed at the centre of Mukerian providing all the health services to people.

There are various wards like Emergency ward, general ward, Pediatric ward, Neonatal Intensive Care Unit, Minor OT, Operation theatre, Labour room, Blood bank etc. Hospital is well equipped with Oxygen supply, Suction apparatus, Crash cart trolleys etc

The target population of the study was antenatal women attending antenatal clinic in selected hospital of district Hoshiarpur, Punjab.

Sample size- 80 antenatal women were selected from Civil hospital, Mukerian, Punjab.

Description of tool:

It was divided into two parts:-

Part I: “Demographic variables

This part consisted of 7 items i.e. age, religion, education, occupation, type of family, family income, source of information.

Part II: self -structured knowledge questionnaire

It include questions regarding objectives of Janani suraksha yojana, its strategies, features of Janani suraksha yojana, eligibility criteria, role of ASHA, cash payment under JSY, its special approaches and its benefits of Janani suraksha yojana etc. The questionnaire consist of 30 items. Each item contains one correct answer among the four choices and each correct answer carries 1 mark and wrong answer carries 0 mark.

Results**SECTION – I****Ethical Considerations**

The research was conducted with the written approval of the research and ethics committee of “S.P.N. College of Nursing, Mukerian.” In addition, the Senior Medical Officer of the Civil Hospital in Mukerian, Punjab, gave his written permission. Informed written consent was obtained from pregnant women willing to participate, and they were assured that their data would be kept confidential and used only for research.

Table -1 Antenatal women according to selected demographic variables N=80

Sample Characteristics	frequency (f)	percentage (%)
Age in years		
19-23 years	14	17.5
24-28 years	32	40
29-33 years	23	28.7
> 33 years	11	13.8
Religion		
Hindu	46	57.5
Muslim	9	11.2
Christian	11	13.8
Sikh	14	17.5
Education		
Up to primary	27	33.8
Up to secondary	22	27.5
Senior secondary	7	8.8
Graduation and above	24	30
Occupational status		
House wife	49	61.2
Private job	15	18.8
Self employed	9	11.2
Govt job	7	8.8
Type of family		
Nuclear family	38	47.5
Joint family	26	32.5
Extended family	16	20
Monthly family income (Rs)		
≤ 10,000	25	31.3
10,001-20,000	26	32.5
20,001-30,000	16	20
≥ 30,001	13	16.2
Source of information		
Mass media	16	20
Neighbours	17	21.2
Friends/ peer group	10	12.5
Health personnel	37	46.3

Table 1 depicts that demographic variables of antenatal women.

According to the age, majority about 1/3 i.e 40% antenatal women were 24-28 year & followed by i.e 28.7% were 29-33 year, 17.5% were 19-23 year and 13.8% were > 33 years.

According to religion, Maximum 57,5% belongs to Hindu, 17.5% belongs to sikh, 13.8% belongs to christian and 11.2% belongs to muslim.

According to education, Majority 33.8% had up to primary, 30% had completed graduation and above, 27.5% had up to secondary and 8.8% had senior secondary education.

According to occupation, Maximum 61.2% were housewife, 18.8% were in private job, 11.2% were self-employed and 8.8% were in govt. job.

According to type of family, Majority 47.5% are living in nuclear family, 32.5% are living in joint family and 20% are living in extended family.

According to family income (₹/month), Maximum 32.5% had income of Rs 10,001-20,000 followed by 31.3% had less than or equal to 10,000, 20% had income of Rs 20,001-30,000 and 16.2% had income of above Rs 30,001.

According to source of information among antenatal women, Majority 46.3% had information from health personnel, 21.2% had information from neighbours, 20% had information from mass media and 12.5% had information from friends and peer group.

Hence it can be concluded that 40% of antenatal women were in the age group of 24-28 year, majority of antenatal women, i.e 57.5% were hindu and minimum were from others religion, majority of antenatal women were 33.8% up to primary education, 40

61.2% of antenatal women were house wife, 47.5% of antenatal women were from nuclear family and minimum from joint family, majority of antenatal women had maximum family income 10,000-20,000 and minimum had more then 30,001 and 46.3% of antenatal women the source of information is health personnel.

SECTION – II

Table -2

OBJECTIVE:1

- “To assess the pre-test level of knowledge regarding Janani Suraksha Yojana among antenatal women in selected Hospital.”

OBJECTIVE:2

- “To assess the post-test level of knowledge regarding Janani Suraksha Yojana among antenatal women in selected Hospital.”

Antenatal women according to pre-test and post-test level of knowledge regarding Janani Suraksha Yojana.” **N=80**

Pre-Test			Post-Test		
Level of Knowledge	Score	Frequency (f)	Percentage (%)	Frequency (f)	Percentage (%)
Poor knowledge	0-15	64	80	0	0
Average knowledge	16-22	16	20	37	46.2
Good knowledge	23-30	0	0	43	53.8

SECTION – III

Table -3

OBJECTIVE:3

- “To compare the pre and post-test level of knowledge regarding Janani Suraksha Yojana among antenatal women in selected Hospital.”

“Compare the pre and post-test level of knowledge regarding Janani Suraksha Yojana among antenatal women”

N=80

Level of Knowledge	Mean	SD	Mean Difference	t value	df	P value
Pre-test	13.26	2.661	9.12	16.71	79	0.001*
Post-test	22.38		4.379			

Table 3 and Figure 3 illustrates the mean pre-test and post-test knowledge score of antenatal women regarding Janani Suraksha Yojana, result showed that the pre-test mean and SD was 13.26 ± 2.661 and in post-test mean and SD was 22.38 ± 4.379 respectively with mean difference of 9.12 with obtained ($t=16.71$)

The difference between the mean pre-test and post-test knowledge score was compared and tested using “paired ‘t’ test “(16.71,p=0.001) which was statistically highly significant at $p<0.05$ level.

Hence, null hypothesis was rejected and research hypothesis was accepted as difference between mean pre-test and post- test of Janani suraksha yojana among antenatal women was statistically significant in experimental group at $p<0.05$ level. Therefore, it was concluded that

Level of knowledge regarding Janani suraksha yojana was increase among antenatal women after giving educational intervention at $p<0.05$ level.

MAJOR FINDINGS

“Finding related to demographic variables”

- Majority i.e, 40% of antenatal women were in the age group of 24-28 years and 13.80% were >33 years.
- Majority i.e 57.5% of antenatal women were Hindu religion and 11.20% were Muslim religion.
- Maximum level of education i.e 33.8% of antenatal women were up to primary and minimum i.e 08.80% were senior secondary.
- According to occupation i.e 61.2% of antenatal women were house wife and minimum were govt. job.
- Majority i.e 47.5% of antenatal women were from nuclear family and 32.5% were from joint family. Other subject i.e 20% were from extended family.
- 32.5% of antenatal women had family income 10,001-20,000 and minimum i.e 16.2% had >30,001.
- Maximum antenatal women i.e 46.3% had source of information is health personnel and minimum i.e 12.5% had source of information is friends/peer group.

DISCUSSION

By implementing various adjustments to the NMBS, the JSY aims to lower infant and maternal mortality rates by encouraging low-income pregnant women to give birth in a hospital. The researcher evaluate the association between the degree of knowledge about Janani suraksha yojana among antenatal women and selected demographic variables.

Thus, “a pre- experimental study to assess the effectiveness of structured teaching programme on knowledge regarding Janani Suraksha Yojana among antenatal women attending antenatal clinic in selected Hospital of District Hoshiarpur, Punjab was conducted.”

“Objectives 1: To assess the pre-test level of knowledge regarding Janani Suraksha Yojana among antenatal women.”

The present study concluded that during in pre-test majority i.e (80%) of antenatal women had poor knowledge and 16(20%) had average knowledge. The

results are similar with the study conducted by “Jayadeepa T, Thulasimani L, Sheeba D, Abirami T, Nagalakshmi S, Kavitha and Saju, S.P (2018) A Pre experimental research design.50 pregnant women at Primary health center, Namakkal. In pre-test 100% of the respondents had inadequate knowledge (75%) had adequate knowledge on Janani Suraksha Yojana thus majority of antenatal women had inadequate knowledge regarding Janani suraksha yojana.23”

“Objectives 2: To assess the post-test level of knowledge regarding Janani Suraksha Yojana among antenatal women.”

The present study concluded that during post-test majority i.e (53.8%) of antenatal women had good knowledge and (46.2%) had average knowledge regarding Janani Suraksha Yojana. The results are similar with the study conducted by “Geetha S, Dr. Loganathan P (2018) A Pre investigational research design.50 pregnant women at Primary health center, Namakkal. Majority of the respondents had adequate knowledge (94%) and (6%) had moderate knowledge regarding Janani Suraksha Yojana.

Objective 3: To compare the pre and post-test level of knowledge regarding Janani Suraksha Yojana among antenatal women”

The result showed that the pre-test mean and SD was 13.26 ± 2.661 and in post-test mean and SD was 22.38 ± 4.379 respectively with mean difference of 9.12 with obtained ($t=16.71$). The difference between the mean pre-test and post-test knowledge score was compared and tested using paired ‘t’ test (16.71,p=0.001) which was statistically highly significant at $p<0.05$ level. The results are similar with the study conducted by “Malar S Vijaya. (2019) A quasi experimental study to assess the effectiveness of VAT on Knowledge regarding Janani Suraksha Yojana among Mothers of selected rural area at Bangalore. Karnataka. The Mean for pre test is 8.06 and SD is 2.56 and in post test mean is 17.96 and SD is 1.12. There is a significant improvement in post-test knowledge scores compared to the pre-test knowledge scores.22”

“Objective 4: To find out relationship between pre and post-test level of knowledge regarding Janani Suraksha Yojana among antenatal women with selected socio demographic variables.”

There was no statistically significant relationship of level of knowledge regarding Janani suraksha yojana with selected variables at $p < 0.05$ level of significance. It depicts that demographic variables i.e age, religion, education, occupation, type of family, family income, and source of information had had no impact on post test knowledge of antenatal women regarding Janani suraksha yojana, but level of education had impact on post test knowledge of antenatal women regarding Janani suraksha yojana. The results are similar with the study conducted by "Sahoo.S, Samantaray.K, Mhanty.S (2017) A descriptive study to assess the knowledge and attitude on Janani suraksha yojana among mothers in selected village mendhasala of district khurda, odisha. A significant association was found between knowledge and age, education. This study recommended that from this two variables only one variable that is education had significant impact on knowledge Janani suraksha yojana

CONCLUSION

Prenatal women's level of knowledge was found to have improved after the study's conclusion. The use of a well structured educational programme helped pregnant women learn more about the Janani Suraksha Yojana.

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