

# Effectiveness of Health Promotive and Preventive Counselling on Knowledge and Self-Care Practices Regarding Prevention of Uterine Prolapse among Post Natal Mothers at Smi Hospital, Dehradun

Dr. Dineshwori Chanu Paonam<sup>1</sup>, Ms. Rebecca Priti Bahadur<sup>2</sup>,  
Ms. Deepti Kukreti<sup>3</sup>, Ms. Sheenu Singh<sup>4</sup>

<sup>1,2</sup>Professor, <sup>3</sup>Assistant Professor, <sup>4</sup>Nursing Tutor,

<sup>1,2,3,4</sup>Department of OBG, SGRRU College of Nursing, Dehradun, Uttarakhand, India

## ABSTRACT

Uterine prolapse can happen to women of any age, but it affects post-menopausal women who had one or more vaginal deliveries. Uterine prolapse is displacement of the uterus from its exact position. It can be in the vagina or it can be outside of the vagina and result from weakness in normally supportive tissue. Prolapse of uterus is main factor that cause complication in reproductive health of women. Quantitative research approach was adopted total 60 participants were selected through purposive sampling technique. A structured questionnaire was administered. The data was analysed by using descriptive and inferential statistics. This study showed that the mean post-test knowledge score (33.82±3.30) of the postnatal mother was higher than the mean pre-test knowledge score (22.68±3.92) and the mean difference was 11.14. The mean score was 15.9±1.30. Mean percentage score for practice 1 score was 79.5%. In practice 2 the lowest range score was 13 and the highest range score was 20. The mean score was 17.45±1.7 and mean percentage score for practice score was 90%. The study concluded that the participants had not adequate knowledge regarding uterine prolapse and its prevention. By giving promoting and preventive counselling it shows that it was increase the knowledge of mothers.

**KEYWORDS:** Uterine prolapse, prevention, promotive and preventive counselling, knowledge and self-care practices

## INTRODUCTION

Woman undergoes so many stressful and strain full changes throughout the life. Women are the only one who can conceive and give birth to the child. In that process of conceive and childbirth to a baby there are lot of stress and strain. The WHO estimated that the global burden which is related to reproductive health is approximately 33% which affect the women life physiologically as well as psychologically. In that Uterine prolapse is the most common gynaecological problem in India. There are numbers of National and an International study which showed that second most major cause of morbidity in women is uterine prolapse. Prolapse of uterus can be treatable and preventable disease. For hysterectomy prolapse of

uterus is most common cause. The worldwide prevalence of uterine prolapse is up to 2 to 20% in the women whose age is below 45 year and gave birth at least one child in her life. In India Prevalence rate of prolapse uterus is 15-20%. And more than 1 million of women suffer from genital prolapse and most of the women fall under the reproductive age group. Uterine prolapse is displacement of the uterus from its exact position. It can be in the vagina or it can be outside of the vagina and result from weakness in normally supportive tissue. Prolapse of uterus is main factor that cause complication in reproductive health of women. In the process of pregnancy and labour women's get more stress and strain, where the

**How to cite this paper:** Dr. Dineshwori Chanu Paonam | Ms. Rebecca Priti Bahadur | Ms. Deepti Kukreti | Ms. Sheenu Singh "Effectiveness of Health Promotive and Preventive Counselling on Knowledge and Self-Care Practices Regarding Prevention of Uterine Prolapse among Post Natal Mothers at Smi Hospital, Dehradun" Published in International

Journal of Trend in Scientific Research and Development (ijtsrd), ISSN: 2456-6470, Volume-9 | Issue-4, August 2025, pp.199-202,

URL: [www.ijtsrd.com/papers/ijtsrd97217.pdf](http://www.ijtsrd.com/papers/ijtsrd97217.pdf)

Copyright © 2025 by author (s) and International Journal of Trend in Scientific Research and Development Journal. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (CC BY 4.0) (<http://creativecommons.org/licenses/by/4.0>)



IJTSRD97217



muscles of pelvic area lose their tone and may result to uterine prolapse. WHO studies on family pattern and health in Columbia, Pakistan, Philippines and Syria, indicated that the women under 45 years of age have 3 to 5 % to get uterine prolapse.

Childbirth is one of the most precious events in life of a woman and most common method of delivery is vaginal Delivery. It has been associated with the increased of pelvic floor disorder in upcoming life, stress incontinence and pelvic organ prolapse are commonly associated with the vaginal childbirth. In our India there is more occurrence and more severe grade of prolapse of uterus in women. The common cause remains unclear of uterine prolapse because of chances of various risk factors.

### OBJECTIVES:

1. To determine the pretest level of knowledge regarding prevention of uterine prolapse among post-natal mothers.
2. To evaluate the effectiveness of health promotion and preventive counselling on knowledge among post-natal mothers regarding prevention of uterine prolapse.
3. To assess the effectiveness of health promotive and preventive counselling on self-care practices among post-natal mothers.
4. To find correlation between knowledge and practice score on prevention of uterine prolapse among post-natal mothers.
5. To find association between the pretest knowledge score with their selected demographic variables.
6. To find association between the post-test practice score with their selected demographic variables.

### RESULTS:

Record was collected, coded, analysed and interpreted by Frequency, percentage, mean, standard deviation, median, Chi square, Karl Pearson split half, as per objectives of the study.

**Table 1: Knowledge score regarding prevention of uterine prolapse among postnatal mothers.**

Knowledge score	Total score	Range of score	Median	Mean + SD	Mean %
Pre-test	41	16-34	22	22.68+ 3.925	55.31%

Table 1 represent the description of score of knowledge regarding prevention on uterine prolapse among postnatal mothers. lowest level of score 16 and the highest range of was 34. The mean score was 22.68+ 3.925. Mean percentage for knowledge score was 55.31. Hence it shows that health promotive and preventive counselling on prevention of uterine prolapse was increase the knowledge of mothers.

**Table: 2 Comparison of Pretest and post-test level of knowledge (N=60)**

S. No	Knowledge score of Post natal mothers	Total score	Range of score	Median	Mean + SD	Mean %
1.	Pre-test	41	16-34	22	22.68+ 3.925	55.31%
2.	Post –test	41	22-39	34	33.81+ 3.906	82.46%

Table 2 shows that description of knowledge score regarding prevention of uterine prolapse among postnatal mothers. The mean score was 22.68+ 3.925. Mean percentage for knowledge score was 55.31. In Post test the

### HYPOTHESIS:

H1: The mean post-test knowledge score of post-natal women would be significantly higher than the pretest knowledge score.

H2: There would be a significant correlation between the knowledge and practice score of post-natal mothers on prevention of uterine prolapse.

H3: There would be significant association between knowledge score with demographic variables.

H4: There would be significant association between practice score with demographic variables.

### MATERIAL & METHODS

Research Approach used for the present study was Quantitative research approach. One group pretest post-test only design Research. Research study was conducted in post-natal ward of SMI Hospital of Dehradun Uttarakhand. Population under study was post-natal mothers who had normal vaginal delivery admitted in post-natal ward of SMI hospital Dehradun. Sample size was 60 postnatal mothers who had normal vaginal delivery and admitted in post-natal ward of SMI hospital Dehradun. Sampling method was purposive sampling technique.

### Inclusion criteria:

1. Post natal mothers who are able to give consent to involve in the study
2. Post natal mothers who are able to Understand Hindi or English communication.

### Exclusion criteria:

1. Post natal mothers who were diagnosed critically ill or mental illness.
2. Post natal mothers who were delivered baby by LSCS 3. Delivered IUD baby.

lowest range of score was 22 and the highest range of score was 34. The mean score was 33.81+ 3.906 and mean percentages for knowledge score was 82.46%. Hence it shows that health promotive and preventive counselling on prevention of uterine prolapse was increase the knowledge of mothers.

**Table 4- Mean +SD Difference of knowledge score of postnatal mothers**

S.no	Knowledge score of post-natal mothers	Mean + SD	Mean difference	't' value	p value
1	Pretest Score	22.68+ <sub>3.92</sub>	11.14	15.86	0.0001
2	Post-test Score	33.82+ <sub>3.30</sub>			

Table3. Paired 't' test used to compare the mean pre-test and post-test. The 't' test calculated value is (15.86) was higher than tabulated value. Hence the score was extremely significant between the mean pretest and post-test at  $p < 0.05$  level.

**Table 4: Practice score regarding prevention of uterine prolapse among postnatal mothers (N=60)**

Practice score	Total score	Range of score	Median	Mean + SD	Mean %
Practice 1	21	12-19	16	15.9+ <sub>1.30</sub>	79.5%
Practice 2	21	13-20	18	17.45+ <sub>1.7</sub>	90%

Table 4 shows that description of practice score regarding prevention of uterine prolapse among postnatal mothers. Total score was 21. In practice1 the lowest range score was 12 and the highest range score was 19. The mean score 50 was 15.9+<sub>1.30</sub>. Mean percentage score for practice1 score was 79.5%. In practice 2 the lowest range was 13 & highest range 20. 17.45+<sub>1.7</sub> was mean score and mean percentage score for practice score was 90.

**Table 5- Mean Difference of post-test practices of post-natal mothers on prevention of uterine prolapse (N=60)**

Sl. No.	Knowledge score of Postnatal mothers	Mean +- SD	M.D.	Tabulated value	p value
1.	Post-test practice 1	15.97+ <sub>1.30</sub>	1.48	6.386	0.0001
2.	Post-test practice 2	17.45+ <sub>1.73</sub>			

Table5 Represents, practice 2 (17.45+<sub>1.73</sub>) of the postnatal mother was higher than the mean post-test practice 1 (15.97+<sub>1.30</sub>) and the 1.48. was MD Paired 't' test was 6.386 was higher than tabulated value. Hence the score was extremely significant between the practice 1 and practice 2 at  $p < 0.05$  level.

## DISCUSSION

### Level of knowledge of post-natal mothers related to preventive measures of uterine prolapse

In pre-test not any mother had poor knowledge.95% mother had average knowledge.5% had good knowledge regarding prevention of prolapse of uterus. Post test none of the mother had poor knowledge 3.33% mother had average knowledge. And 96.6% mother had good knowledge.

### Evaluate the effectiveness of health promotion and preventive counselling on knowledge among post-natal mothers regarding prevention of uterine prolapse.

The present study show that post-test knowledge of the mother (33.82+ 3.30) was higher than the pretest knowledge score (22.68+ 3.92) and "t" test calculated value was higher (15.86) than tabulated value. The research findings were by Greeshma et al (2017) that show the mean post-test knowledge score (19.75) was significant at  $p < 0.05$  level.

### To find association between the pretest knowledge score with their selected demographic variables.

Present study shows that there is not significant association between pretest knowledge score and socio demographic variables. and result show that knowledge of post-natal mothers was not influence by socio demographic variables. Vanamalaet., al finding of the study show that there is a connection between the level of knowledge of the postnatal mother who had vaginal delivery and demographic variables. like religion, learning, income willingness for family planning method and source of information. And no significant association between Age, occupation, place of residence, parity, nature of delivery.

## SUMMARY & CONCLUSION

The perspective of the finding has been discussed with references to outcome of study. The finding of the research discussed according to objective with others study findings. The purpose of research report was to find out effectiveness of health promotive and preventive counselling on knowledge and self- care practices regarding prevention of uterine prolapse among post-natal mothers in selected hospital of

Dehradun, the perspective of the finding has been discussed with references to study findings.

### Conclusion:

Based on result of the research, most of mothers had poor knowledge and after giving intervention to the mother it was increased. The outcome research report conclude that promotive and preventive counselling was successful to enhance information and improve practice of postpartum mothers on postpartum mothers.

### REFERENCES

- [1] Nathan G, Greesma, Vaghese L. et.al. effectiveness of structure teaching programme on Knowledge Regarding preventive measures of Uterine prolapse among mothers 2020 December volume 1st. 5.K.
- [2] Parvathvartheni and A. Vanisha (2021) clinical epidemiology study on uterine prolapse. International journal of reproduction, contraception, obstetrics and Gynaecology volume 8 page no 79.
- [3] Dutta D. C. Textbook of Gynaecology 11th edition. India New central Book agency 2005. 197-198, 198-199. 7.
- [4] Vanamala PT an exploratory study to assess the knowledge of postnatal mothers who had vaginal delivery on prevention of utero vaginal prolapse 2006.
- [5] Genynisman-Tan, Julia and Kenton, Kimborley (2019) surgical updates in the treatment of pelvic organ prolapse. Rambam Maimonides medical journal.

