

# Effectiveness of Structured Teaching Program on Knowledge Regarding Antenatal Care during First and Second Trimester among Primigravida Mothers

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**Abstract:** *Pregnancy is a creative and productive period in the life of women. It is one of the physiologic vital events, which needs special care from the conception to postnatal period, every mother wants to enjoy the nine months period with the baby inside her womb. The mothers joyful experience of the pregnancy is not going to be always but sometimes it is associated with problems of some minor ailments that may present among mothers which cause discomfort to the mothers during pregnancy to them. (Dutta)*

*Promotion of maternal and child health has been one of the most important components of the family Welfare Programme of the Government of India and the National Population Policy ± 2000. One of the most important component of antenatal care is to offer information and advice to women about pregnancy related complication and possible curative measures for early detection and management of complications. Antenatal care can also play a critical role in preparing a woman and her family for birth by establishing confidence between the woman and her health care provider and by individualizing promotional health messages. Antenatal care is considered essential for health of both the mother and the child, it is important to analyze the possible factors contributing to its utilization.*

*The start of any civilization is the measure of consideration and care, which it gives to its weaker sections. In any community, women are especially vulnerable during pregnancy. The maternal mortality ratio (MMR) in India is very high the data given by the registrar general of India for 1998 estimate that MMR to be around 407 per 100,000 live births. (WHO 2005)*

*Reducing MMR to less than 100 per 100,000 live birth is a commitment enshrined in the national population 2000. India is committed to reducing MMR to less than 100 per 100,000 by the year 2010 from the current 407 / 100,000 live births (SRS, RGI, 1998)*

*Maternal care includes care during pregnancy and should begin from the early stages of pregnancy. Women can success antenatal care service either by visiting a health center where such services are available or from health workers during their domiciliary visits. One of the most important components of antenatal care is to offer information and advice to women about pregnancy related complication and possible curative measures for early detection and management of complication. Antenatal care can also play a critical role in preparing a woman and her family for birth by establishing confidence between the family members and pregnant women.*

*A quasi experimental one group pre-test post-test research design to evaluate effectiveness of structured teaching program on knowledge regarding antenatal care during first and second trimester Primigravida mothers. The study conducted on 60 samples. Samples were selected by non-probability convenient sampling. Data was collected using structured questionnaire instrument.*

*Among samples, Primi mothers aged between 18- 30 years and above. 9(15%) were between the age group of 18-20 yrs., 48(80%) were between the age group of 21-25 yrs., and 3(5%) were between the age group of 25 years and above. Whereas 5(8.3%) were 1-3 month , 3253.3%) were 4-5 months,*



23(38.3%) were 5-6months of gestation, among them 0(0%) were illiterate, 18(30%) were primary school, 48(80%) were higher secondary and 0(0%) were any degree, from them 33(55%) were house wife, 27(45%) were Cooley, 0(0%) was office work or . out of them 8(13.3%) were nuclear family, 52(86.7%) was joint family. Regarding bread winner of the family, 4(6.7%) were father in law, 55(91.7%) were husband, 1(1.7%) was wife. Regarding spouse education, 0(0%) were illiterate, 5(8.3%) were primary school, 55(91.7%) higher secondary, 0(0%) was any degree. Regarding Income, 7(11.7%) were 5000 / month, 50(83.3%) were 5000 10000/ month, 3(5%) were 10,000 above/ month. Regarding source of information, 3(5%) were any medias, 50(83.3%) were through VHN, 7(11.7%) were any relatives, 0(0%) were others. The obtained overall post-test mean 8.70(SD = 3.679) was less than the pre-test mean 28.58(SD = 1.329). The obtained mean score was 19.883 and t' value  $t=42.300$  ( $P=0.00$ ) was significant. Standardized co-efficient mean difference of post-test knowledge on antenatal care and selected back ground 0.263(0.092),  $t=0.761(0.220)$ ,  $t=-0.872(0.341)$ ,  $t=0.908(0.288)$ ,  $t=1.824(1.127)$ ,  $t=1.765(1.074)$ ,  $t=-0.158(0.097)$ ,  $t=-0.056(0.027)$  reported for age, gestational weeks, education, occupation, type of family, bread winner of the family, spouse education, income, source of education respectively were not significant in relation to structured teaching program..

**Keywords:** ANC (Ante Natal Care), PTP (Plan Teaching Program), Primigravida, Trimester

