International Journal of Nursing and Health Research
www.nursingjournal.in
Online ISSN: 2664-6420; Print ISSN: 2664-6412
Received Date: 06-11-2019; Accepted Date: 09-12-2019; Published: 09-01-2020
Volume 2; Issue 1; 2020; Page No. 26-30

A study to assess the effectiveness of planned teaching programme on knowledge regarding Self episiotomy care among the Primipara mothers

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Abstract
An A pre experimental study with one group pre- test –posttest group design was carried out to assess the effectiveness of planned teaching programme in selected hospitals in Bhopal city. Total 80 subjects were selected. Planned teaching programme was given to the primipara mothers about self-episiotomy care. Data collection tool included socio demographic variables and structured knowledge questionnaire. The findings shows that mean pre-test knowledge score (10.46) and the post-test knowledge score (20.56). Posttest knowledge score is higher than the pre-test knowledge score. Than pre-test score (SD=1.5256) is higher than that of post-test score (SD=1.736) and computed paired value shows there is significant difference between mean pre-test knowledge score (t=1.82).This indicates that planned teaching programme is effective in increasing knowledge score of primipara mothers regarding self episiotomy care.

Keywords: effectiveness, planned teaching programme, knowledge, self-episiotomy care, episiotomy, Primipara mothers

1. Introduction

A new mother lazing in childbirth is a blessing to her famil

Motherhood is a beautiful process whereby the mother safely delivery a child, it is the magic of creation. Care must be given to ensure safe childbirth. The mother has a right to proper medical care and treatment. Safe motherhood can only be reached if complete care is given to young mothers. Safe motherhood initiative announced in 1987 had set targets to reduce maternal mortality by 50% in one decade where the safe motherhood aim is to enhance the quality of life.

Labour is a natural process, which all pregnant women have to undergo. The birth of a child leads a fundamental challenge to the resisting interacted structure of the family. Injuries and lacerations of the Perineum, Cervix, Vagina, Uterus and their supporting tissues can occur.. An episiotomy is a surgical incision made in the area between the vagina and anus (perineum). This is done during the last stages of labor and delivery to expand the opening of the vagina to prevent tearing during the delivery of the baby.

The origin of episiotomy is difficult to determine, but one of the first to describe it was a midwife, Sir Fielding Ould. In 1742, in his Treatise of Midwifery in Three Parts, he recommended the procedure for those cases in which the external vaginal opening is so tight that labor is dangerously prolonged

The indications for episiotomy are based largely on clinical opinion. The suggested maternal benefits are: [1] a reduction in the severe perineal lacerations and obstetric anal sphincter injury; and [2] preservation of pelvic floor muscle function and a reduced risk of fecal and urinary incontinence. Potential benefits for the fetus include: [2] especially for the premature infant- cranial protection and [3] less fetal acidosis. Episiotomy may also be necessary for manoeuvres during operative vaginal delivery and shoulder dystocia.

2. Problem Statement

A Study To Assess The Effectiveness Of Planned Teaching Programme On Knowledge Regarding Self-Episiotomy Care Among Primipara Mothers In Selected Hospitals of Bhopal City

Objectives

- To assess the pre-test level of knowledge regarding self episiotomy care among primipara mothers in the selected hospitals of Bhopal.
- To assess the post - test knowledge regarding self episiotomy care among primipara mothers in the selected hospitals of Bhopal.
- To assess the effectiveness of planned teaching programme regarding self episiotomy care among primipara mothers in the selected hospitals of Bhopal.
- To find out the association between pre-test knowledge score with selected demographic variable

Hypotheses

H1: There will be significant difference in the mean pre-test and post-test knowledge score regarding self episiotomy care among primipara mothers.

H2: There will be significant association between pre-test knowledge score with selected demographic variables.

Material and Methods

- **Research Approach:** In the present study the quantitative evaluative research approaches was considered to be appropriate evaluate the effectiveness of planned teaching programme for primipara mothers regarding self -episiotomy

care.

- **Research Design:** In the present study the pre- experimental one group pre-test posttest design was selected by the researcher to observe the effectiveness of planned teaching programme among primipara mothers regarding self-episiotomy care.
- **Research Variables:** In the present study the independent variable is planned teaching programme. In the present study the dependent variable is knowledge of self- episiotomy care among primipara mothers.
- **Setting of The Study:** The study was conducted in Jay Prakash hospital at Bhopal.
- **Population:** The population in this study consists of primipara mothers who have undergone episiotomy in selected hospitals of Bhopal city.
- **Sample and Sample Technique:** In this study, the samples include 80 primipara mothers in the selected hospitals of Bhopal city.
- Non Probability Purposive sampling technique will be used in this study.
- **Data Collection Technique and Tool:** In the present study it aimed at evaluating the effectiveness of planned teaching program regarding self- episiotomy care among primipara mothers. The tools in this study are: Socio demographic Performa and Structured Questionnaire for assessing the knowledge regarding self- episiotomy care.

Description of Tools

- **Section A: socio demographic data:** Socio- demographic data included age, educational status of mothers, types of family, socioeconomic status any previous information about self- episiotomy care, Occupation of the husband, occupation of mother, number of suture, age of menarche and Number of days of menstrual bleeding occurs.

Section B: knowledge questionnaire

It consisted of 30 items covering the knowledge regarding self-episiotomy care among primipara mothers. Each item had four options or responses in the form of answers and among the form of responses one correct answer has to be selected. Score on each item refers to poor knowledge (0-10), average knowledge(11-20), and good knowledge.(21-30)

- **Validation of Tools:** A prepared tool along with the objective and structured knowledge questionnaire was given to 5experts who were from the field of obstetric and gynaecological nursing.
- **Reliability of The Tool:** The tool was tested for reliability on 8 respondents that is primipara mothers admitted in the postnatal ward.for structured knowledge questionnaire the reliability was calculated. The reliability of the tool was calculated by using Karl Pearson's product correlation formula. The reliability coefficient of structured knowledge questionnaire was r=0.95 which showed that the tool was reliable.
- **Procedure for Data Collection:** Written permission was obtained from the respective authorities prior to data collection. The study was carried out in Jay Prakash Hospital Bhopal during the period of 04/09/2019 to 07/09/19 collected the pretest and posttest knowledge score. The sample size selected was 80 primipara mothers from Jay Prakash hospital of Bhopal city. The primipara mothers were given the demographic and structured questionnaire (30 multiple choice questions).

Plans for data analysis

The data was obtained from 80 primipara mothers who have undergone episiotomy will be analyzed using the descriptive statistics and inferential statistics.

- Socio demographic data would be analyzed using the descriptive statistics i.e. frequency and percentage.
- Computing value to find out the significance of difference between the mean of pretest and posttest knowledge score.
- Association between pretest knowledge score with demographic variable was calculated by chi-square test.

4. Analisys and Interpretation

Study Findings: The analysis is described in five sections:-

Section I: It deals with analysis of the demographic data of the samples.

Section II: It deal with the analysis of the data related to knowledge score before administering the planned teaching program.

Section III: It deals with the analysis of data related to knowledge score after administrating the planned teaching programme.

Section IV: It deals with the effectiveness of planned teaching programme by comparison of knowledge score before and after administration of planned teaching programme.

Section V: It deals with the association of knowledge score of primipara mothers with selected demographic variables

Section I

This section deals with socio demographic variables

- The demographic characteristics of the study were age, education, type of family, socioeconomic status, source of prior information, occupation of husband, occupation of mother, number of suture age of menarche and Number of days of menstrual bleeding occurs.
- Out of 80 samples:
- Most of the sample were in the between age of 20-25 n=40
- For most of them education of primipara mothers higher school educated n= 44
- Majority of them are from joint family. n=39
- Majority of the family income are between 4001-800 n= 30
- Most of them had prior information regarding self episiotomy care. n= 28
- Majority of the occupation of husband of primipara mothers were self employed n= 35
- Majority of the occupation of of primipara mothers were house wife. n= 48
- Majority of the primipara mother had three suture n=42
- Majority of the primipara mother had age of menarche were 13-14 years n=39 Majority of the primipara mother had no. of days of menstrual bleeding were 3 days n=24

Section II

This section deal with the analysis of the data related to knowledge score before administering the planned teaching

Programe

The data presented full fill the objective (1) clearly indicates that 48 (60%) primipara mothers have poor knowledge regarding self episiotomy care and 12 (15%) have average knowledge and 30(37.5%) have good knowledge. The mean & SD also justify the knowledge of mother in the pretest.

Table 1: Assessment of score for pre test knowledge primipara mothers

S.no	Criteria	Frequency	Percentage	Mean	SD
1	POOR	48	60		
2	AVERAGE	12	15	10.46	1.5256
3	GOOD	30	37.5		

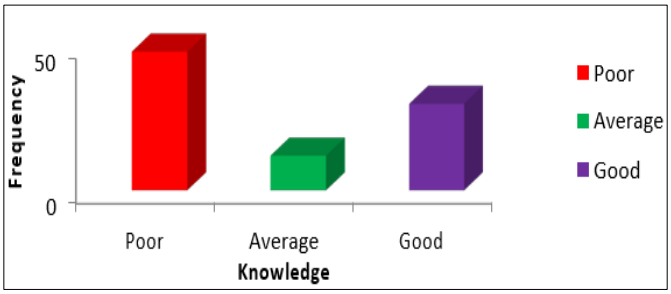

Fig 1: Pretest knowledge of the Primipara mother

It deals with the analysis of data related to knowledge Score after administrating the planned teaching programme.

The data presented fulfill the objective (2) clearly indicates that 56 (70%) mothers have good knowledge were 24 (30%) have average knowledge and none have poor knowledge. The mean & SD also justify the knowledge of primipara mothers.

Table 2: Assessment of score for post test knowledge Primipara mothers

S. No	Criteria	Frequency	Percentage	Mean	SD
1	Poor	0	0		
2	Average	24	30	20.56	1.736
3	Good	56	70		

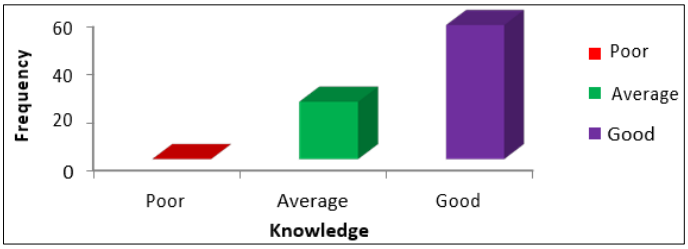

Fig 2: Postest knowledge of the primipara mother

This section deals with the effectiveness of planned teaching programme by comparison of knowledge score before and after administration of planned teaching programme.

The comparison between pre and post knowledge is made by correlation. Correlation is the appropriate statistical method to compare the pre & post-test knowledge score. The result showed positive correlation. Pretest -Out of 80 samples were 48 primipara mothers have poor knowledge regarding self episiotomy care and 12 have average knowledge and 30 have good knowledge. Posttest– Out of 80 sample 56 primipara mothers have good knowledge were 24 have average knowledge and none have poor knowledge. Objective number three effectiveness of planned teaching programme have been full fill by showing the positive correlation.

Table 2: Comparison between pre & post knowledge of primipara mothers by t-value

S. No	Test	Mean	SD	R-value	T- value
1	PRE TEST	10.46	1.5256	0.78	5.872
2	POST TEST	20.56	1.736		

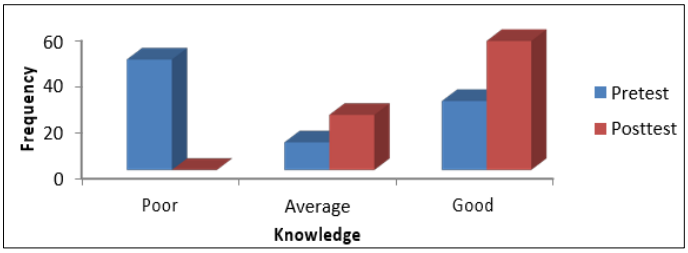

Fig 3: Effectiveness of knowledge of Primipara mother

Table 3: This section deals with the association of knowledge score of Primipara mothers with selected demographic variables

S. No	Variables	poo r	Average	Good	Total	D F	Chi- value	P-value	Inference
1	Age (Yrs)								
	<20	10	3	0	13				
	20-25	20	5	15	40	66	60	0	S
	26-30	15	4	5	24				
	>30	3	0	0	3				
2	Education standard of mother								
	Primary								
	Middle				12				
	HSS				44	8	39.59	0.00009	S
	UG				23				
	PG				1				
3	Types of family								
	Nuclear				30				
	Joint				39	4	4.51	0.6	NS
	Extended				11				

4	Socioeconomic Status								
	2001-4000				12				
	4001-8000				30	6	6.25	0.71	NS
	8001-10000				28				
	>10000				10				
5	Sources of prior information								
	2001-4000				28				
	4001-8000				28	6	13.33	0.13	NS
	8001-10000				21				
	>10000				3				
6	Occupation of husband				0				
	Self employed				35				
	Government				12	4	6.47	0.37	NS
	Private				33				
7	Occupation of mother				0				
	House wife				48				
	Farmer				13	6	7.79	0.55	NS
	Labourer				4				
	Salaried job				15				
8	Number of sutures				0				
	1				0				
	2				10	8	6.01	0.73	NS
	3				42				
	4				26				
	>4				2				
9	Age of menarche				0				
	<13 years				30				
	13-14				39	6	5.86	0.43	NS
	15-16				11				
	>16				0				
10	Number of days of menstrual bleeding occurs				0				
	<3 days				13				
	3 days				24	8	9.15	0.42	NS
	4-6 days				22				
	7 days				21				
	more than a week				0				

4. Discussion

Findings Related To Level of Knowledge

Pre – test knowledge score

There were 80 samples included in the study for assessment of pre test knowledge score, out of which 30(37.5%) had good knowledge score, 12 (15%) had average knowledge score and 48 (60%) had poor knowledge score regarding self episiotomy care. The mean pre test knowledge score was 10.46 and SD was 1.5256. Thus data fulfills the objective [2].

Post-test knowledge score

In the post test it was found out that, out of 80 samples, 56 (70%) had gained good knowledge score and 24 (30%) had gained average knowledge score, whereas none was found to have poor knowledge score. The mean post test knowledge score were 20.56 and SD was 1.736. Thus, it fulfills objective no. [2].

Findings Relataed to the comparison between pre and post – test knowledge score

The comparison between pre and post test knowledge is made by t- test. The pre test and post test knowledge was statistically tested by applying t- test method at the level of 0.05%. in this case the calculated value of 't' is less than table vale (2.00). The hypothesis H1 is accepted.

Thus fulfill the objective no-3 and hypothesis H1

There will be significant difference in the mean pre-test and post-test knowledge score regarding self-episiotomy care among Primipara mothers is accepted.

5. Conclusion

After the detailed analysis, this study leads to the fallowing conclusion. The mean pre –test knowledge
7.75 and post test score was 21.16 the mean difference was 13.41. This means that planned teaching programme was effective in order to increase the knowledge of primipara mother regarding self-episiotomy care.

The association findings was done to find out the relationship of knowledge with the selected demographic variables by using chi square test and calculating the p value, age and parity of mother was found most significant episiotomy in previous pregnancy was found significant. Other variable like education source prior information, number of suture, socio economic status were not found significant.

Hence, on the basis of above findings, it could be concluded undoubtedly that the planned teaching was effective to increase the knowledge of among primipara mothers regarding self-episiotomy care

Recommendations

- A similar study can be done on larger samples in rural area, where there is urgent need of knowledge about self-episiotomy care.
- A similar study can be done in rural setting and primary health centers.
- Similar study can be done to know the knowledge and practice of nurses regarding self-episiotomy care in city hospitals and district hospitals.
- A study can be done in B.Sc. nursing fourth year students because in the study period they will do work do work in maternity wards and different settings.
- A comparative study can be done between rural and urban mothers regarding their knowledge and practice about self-episiotomy care.
- A comparative study can be done between urban and rural hospital settings to access the criteria of self-episiotomy care by the heath personals.
- A similar study can be done on ante natal and post natal mothers to access their knowledge and practice.
- A comparative study can be done between rural and urban areas to access the practice about self-episiotomy care.
- A similar study can be done in primary and community health centers.
- A comparative study can be done to demonstrate the sitz bath procedure between two groups.
- A comparative study can be done in medical collage to demonstrate the effectiveness of infrared lamp radiation between two groups.

6. References

1. Http://www.rguhs.ac.in/cdc/onlinecdc/uploads/05_N134_9622.doc.
2. Pritchard JA, MP Gant NF. William's Obstetrics. Norwalk, Appleton-Century-Crofts, 1985, 17.
3. Ould F. A Treatise of Midwifery. Dublin, Nelson and Connor 1742.
4. Taliaferro RM. Rigidity of soft parts: Delivery effected by incision in the perineum Stethoscope Va Med Gazette. 1852; 2:383.
5. De Lee JB. The prophylactic forceps operation. Am J Obstet Gynecol. 1921; 1:34.
6. https://www.glowm.com/section_view/heading/Episiotomy/item/128#r3