Prevent the Risk of Missing Out Motherhood—Reproductive Health Awareness on Advanced Age Conception

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ABSTRACT

Maternal and child health play an important role in an health statistics of a country. Being a prominent health indicator it requires prompt screening, immediate and adequate management of complications and high risk cases... All pregnancies and child births expose mothers and babies at risk. Data suggest that around 40% of all women develop some complication. One such risk factor is elderly pregnancy that leads to many complications during pregnancy, labour, postnatal period and in newborn. Advanced maternal age is defined as age 35 years and older at the estimated date of delivery. Elderly pregnancy is a preventable high risk .Adequate and accurate information to the eligible couples and specially girls attaining marital age about the health hazards would be a boon to prevent this modern era high risk of mother, fetus and newborn. Hence, due to this alarming need a pilot project was undertaken to assess the effect of video assisted teaching, on knowledge regarding health risk of first mothering over advanced maternal age among graduate students in selected college of Jabalpur.

KEY WORDS: *Maternal. Fetal And Newborn Health risks, Video assisted teaching, Advanced age conception, College students (girls) Millennium Development Goals 4 and 5.*

INTRODUCTION

In India women of child bearing age constitute 19%. Maternal health is very important to attain total well being of the child. The health of the mother lays strong foundation to the health of the nation in general. In developing countries, every time a woman becomes pregnant, her risk of dying is 200 times higher than the risk run by a women in the developed country. About 15% of pregnant women experience complications that need to be timely detected and appropriately managed. Countdown to 2025 is a global movement of academics, governments, international agencies, health-care professional associations, donors and nongovernmental organizations.

.It uses country-specific data to stimulate and support country progress towards achieving the health- related Millennium Development Goals (MDGs), particularly MDGs 4 and 5. Countdown focuses on coverage of effective interventions for maternal, newborn and child health and coverage determinants, including health systems and policies, financial flows and equity.

MDG 4: Reduce child mortality. Target 4A: Reduce by two thirds, between 1990 and 2015 the under-five mortality rate.

MDG 5: Improve maternal health. Target 5A: Reduce by three quarters the maternal mortality ratio. Target 5B: Achieve universal access to reproductive health. Preventing advanced maternal age conception would help in reducing maternal and neonatal mortality to a great extent.

It is important that girls should have accurate knowledge about correct conception age and good knowledge about the health risks of first mothering in advanced maternal age. This would further help in reducing the maternal, fetal and neonatal morbidity and mortality rates . In accordance to this a pilot project was undertaken

STATEMENT

A study to assess the effect of video assisted teaching on knowledge regarding health risk of first mothering over advanced maternal age among graduate students   in selected colleges of Jabalpur

OBJECTIVES OF THE STUDY WERE TO

1. Assess the pretest level of knowledge regarding health risk of first mothering over advanced maternal age among the graduate students.

2. Assess the posttest level of knowledge regarding health risk of first mothering over advanced maternal age among the graduate students

3. Assess the effectiveness of video assisted teaching , on knowledge regarding health risk of first mothering over advanced age among graduate students .

4. Associate the pretest knowledge regarding health risk of first mothering over advanced maternal age among graduate students with selected demographic variables

HYPOTHESES

All hypotheses were tested at 0.05 level of significance.

H_1---There will be significant difference in the mean pretest posttest knowledge score regarding health risks of first mothering over advanced maternal age among graduate students

H_2—There will be significant association of pretest knowledge score regarding health risks of first mothering over advanced maternal age among graduate students with their selected demographic variables.

METHODOLOGY

MATERIALS AND METHODS:

*   **A quantitative and evaluative research approach was used.**
*   A pre experimental study one group pre test- post test design was carried out in one government girl's college of Jabalpur.

- Government Girls College was selected for pilot study. Subjects were 60 II semester girls having maths, commerce and arts as there subject was selected through simple random technique
- Pre-test was carried out followed by Video assisted teaching program consisting of information on hazards of first mothering in advanced age pregnancy was used to enhance the knowledge of the samples. Post test was duly conduced after 7 days.

SCORING:

A score of (1) was assigned to correct response and (0) was assigned to wrong answer.

DISTRIBUTION OF KNOWLEDGE SCORE

SCORING   Total items 30   Total score 30

<15= Poor knowledge

15-22= average knowledge

>22 = good knowledge

SCORE INTERPRETATION ;(for sections and overall)
Poor knowledge = Less than 50%
Average knowledge= 50-75%
Good knowledge =75% and above

INSTRUMENTS USED FOR DATA COLLECTION

The tool used in this study were developed in two sections i.e A and B .

A. 1. Structured questionnaire to collect Socio demographic data

2. Structured questionnaire for assessing the knowledge regarding health risk of first mothering over advanced maternal age among graduate students.

B. Video assisted teaching for health risk of first mothering over advanced maternal age.

ORGANIZATION OF STUDY FINDINGS :-

The analysis was described in six sections:-

SECTION I-   It deals with analysis of the demographic data of the samples i.e the second semester graduate students.

SECTION 11– It deals with the analysis of the data related to knowledge score before administering the video teaching programme.

   A) Pretest knowledge score on introductory questions
   B) pretest knowledge score on questions related to risks in pregnancy
   C) Pretest knowledge score on questions related to risks in labour
   D) Pretest knowledge score on questions related to risks during postnatal period

E) Pretest knowledge score on questions related to risks in fetus and newborn
F) Overall pretest score of the students

SECTION I11 – It deals with the analysis of data related to knowledge score after administrating the video teaching programme.
A) Postest knowledge score of introductory questios
B) .posttest   knowledge score on questions related to risks in pregnancy
C) Posttest knowledge score on questions related to risks in labour
D) postttest knowledge score on questions related to risks during postnatal period
E) Postest knowledge score on questions related to risks in fetus and newborn
F) Overall posttest score of the students

SECTION 1V – It deals with the effectiveness of video teaching programme by comparison of knowledge score before and after administration of video teaching programme. on knowledge regarding health risk of effectiveness of video teaching programme first mothering over advanced maternal age among graduate students
A) Assss the Effectiveness of video teaching programme on introductory questions.
B) Assess the effectiveness of video teaching programme on questions related to risks in pregnancy
C) Assess the effectiveness of video teaching programme on questions related to risks in labour
D) Assess the effectiveness of video teaching programme on questions related to risks during postnatal period
E) Assess the effectiveness of video teaching programme on questions related to risks in fetus and newborn
F) Assess the Overall effectiveness of video teaching programme on students

SECTION V- It deals with the association of pre-test knowledge score of students with selected demographic variables.

FINDINGS:

Out of 60 samples:

Majority of them were of the age group18-22 yrs(40 66.66%), maximum practiced hindu religion (61.66%) ,residence of maximum students were urban (33) 55%,majority of students resided in joint family,30 (50)% of students persuaded B.A and rest 30(50%) persuaded the B.Com courses., majority of students were unmarried,54(90%),and maximum 40(74%) would like to get married after job, majority of students 55(91.66%) had no previous knowledge about the hazards of advanced age conception. Majority of students 25 (41.66%). Had monthly family income within 15000 to 20000.majority of students 25 (41.66%) liked homemade foods, 33(55%) of students had an active lifestyle .and majority 42(70%) students had regular exercise regime.

There were 60 samples included in the study for assessment of pre-test knowledge score, out of which 0(0) had good knowledge score, 11 (18.33 %) had average knowledge score and 49 (81.66%   ) had poor knowledge score regarding the health risks of advanced age conception.

The mean pre-test knowledge score was 7.80 ,SD was 2.42 and SE was 0.313.

In section wise;

- General and introductory question Maximum students had poor knowledge 49 (81.6 %) ,11(18.3%) had average and 0 (0%) had good knowledge
- In pregnancy related section out of 60 ,60(100%) had poor, 0(0%) had average and 0(0%) had good knowledge
- In labour related section out of 60 ,52 (86.6%) had poor ,8(13.3%) had average and 0 (0%) had good knowledge
- In postnatal section out of60 , 53(88.3%) had poor , 7 (11.6%) had average and 0(%) had good knowledge
- In fetus and newborn section out of 60, 59(98.3%) had poor,1 (1.66%) had average and 0 (0%) had good knowledge

Thus, data full fills the objective (2)

In the post-test it was found out that, out of 60 samples, 46 (76%) had gained good knowledge score and 10 (16.66%) had gained average knowledge score. Whereas 4 (6.66%) were found to have poor knowledge score. The mean post-test knowledge score was 20.10 , SD was 4.62 and SE mean was 0.62

- General and introductory questions out of 60, 4(6.66%) students have poor knowledge,10(16.66%) students had average knowledge and 46( ) students had god knowledge
- In pregnancy related section 11(18.33 %) had poor knowledge, 31(51.66 %) had average knowledge and 18 (30%) had good knowledge
- In labour related section 7(11.66%) had poor,42(70%) had average and 11(18.33%) had good knowledge
- In postnatal section, 5 (8.33%) had poor,22(36.66%) had average and 33(55%) had good knowledge
- In newborn related section 12(20%) had poor, 28(46.66%) had average and 20 (33.33%)had good knowledge.
  Thus, it **fulfils objective no: 3.**

The comparison between pre and post 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 for overall , the calculated value of 't' was 31.59 at 0.05 level of significant,** which showed difference between pretest postest was statistically significant.

- The score of effectiveness of introductory questions was significant as the t value was t=19.70
- The score of effectiveness of pregnancy questions was significant as the t value was t=20.35
- The effectiveness of labour questions was significant as t value was 15.38
- The effectiveness of postnatal questions was effective as t value was t=14.22
- The effectiveness of newborn questions was effective as the t value was 11.80
  , **it fulfils objective no:(4) and the hypothesis H$_1$ was accepted.**

The association between pre-test knowledge score with selected demographic variables is statistically tested by applying chi-square test .

Only **If unmarried then marital plans would be** and **previous knowledge** about advanced age conception was significant at 0.05 level of significance

The association came out to be non significant for other variables

Hence it fulfils objective number 5 and hypothesis H$_2$ was accepted .

IMPLICATIONS

EDUCATIONAL STRATEGIES FOR THE COLLEGE GIRLS

Girls have a right to know about information regarding reproductive health, accurate timing of conception, and child bearing. Girls receive most of these information from peers which often leads to misinformation. So they need structured formal and informal learning packages for better future. Delayed conception may also cause complications during pregnancy and labour and also cause health risks in the child. Hence it is important that girls should have accurate knowledge about correct conception age and good knowledge about the health risks of first mothering in advanced maternal age. This would further help in reducing the maternal, fetal and neonatal morbidity and mortality rates.

The information can be included in the curriculum of the college students, which would be helpful to curb the hazards of advanced age conception. Internal Quality Assurance Cells of the colleges for imparting health awareness programmes to the students. .The social agencies, women and child welfare associations can go for the health campaigns for preventing and reducing maternal and neonatal morbidity and mortality. The awareness booklet can be can be put up in the libraries of the colleges and other working institutions for the general study and referral. The information can be generalized in the social media so that maximum general public can get knowledge regarding modern era aetiology of maternal, fetal and neonatal high risk.

CONCLUSION

The study revealed that girls have lot of quarries related to the sex ,monthly periods , conception childbirth and reproductive system .A lot of hesitation still persists to talk about these matters .The students were totally unaware about the hazards of advanced age conception and that it possess a serious threat to the mother and baby. But it was a good initiative started by the Internal Quality Assurance cells of the college to impart awareness programmes to the students and there was a considerably huge increase in the level of knowledge amongst the students which was statistically proved too by the video assisted teaching programme .

Hence an overwhelming need is there at present to surpass the modern high risk complication of maternal and neonatal mortality and morbidity that is the advanced age maternal conception and there is an urgent need to educate the girls and make them aware of this risk which is serious but an preventable one thereby fulfilling MDGs 4 and 5.

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