

Assessment Of Knowledge And Attitude Towards Normal Vaginal Delivery Among Primi Antenatal Women Attending Antenatal Opd In A Selected Government Hospital, West Bengal.

Ms Srijani Sinha Ray¹, Ms Moitreyee Choudhuri², Ms. Mitali Adhikari³

¹(Assistant Professor, B P Poddar & Parvati Devi Academy of Nursing)

²(Professor, Govt. College of Nursing, Medical College and Hospital, Kolkata)

³(Principal, Govt. College of Nursing, District Hospital, Howrah)

Abstract:

Background: Pregnancy is a normal physiological phenomenon. After pregnancy birth is the most challenging physiological and psychological events in a woman's life and among various modes of delivery normal vaginal delivery is the natural and spontaneous process of labour and delivery. This study intends to focus on the primi antenatal women's knowledge and attitude towards normal vaginal delivery.

Materials and Methods: In this Descriptive survey research study 200 participants were selected through a non probability purposive sampling technique. Data was gathered through interviewing technique using semi structured interview schedule, structured interview schedule regarding assessment of knowledge and attitude of primi antenatal women attending antenatal OPD in a selected government hospital, West Bengal.

Results: The primi antenatal women (33.5%) had good level of knowledge. Knowledge score ranged from 5-22 with mean 14.8 and median 14 and calculated SD was 4.31. Majority of the primi antenatal women (67%) had moderately favourable attitude towards normal vaginal delivery. Attitude score ranged from 109-130 with mean 119.6 and median 120 and calculated SD was 4.44. There was a significantly moderate positive correlation between knowledge and attitude towards normal vaginal delivery ($p < 0.01$). The findings of the study have significant implications for nursing practice, education, administration and research.

Key word: Knowledge, Attitude, Primi antenatal women

Date of Submission: 19-04-2023

Date of Acceptance: 02-05-2023

I. INTRODUCTION

Birth is the most challenging physiological and psychological events in the woman's life [1,2]. It has a major effect on women's lives with long-term positive or negative impacts [3, 4]. Experience of a positive birth can have long-lasting profits such as the improvement of the relationship between a mother and a child, the development of parents' well-being, self-confidence, and the quality of life [2,5].

Pregnancy and childbirth is a crucial experience in woman's life as it is associated with psychological, emotional and physical impact and has a significant impact on her ability to make bonding with her baby. For every woman, pregnancy and child birth is the period of excitement along with anxiety, fear, pain and pregnancy outcome [7]. These memories, happenings and experiences of childbirth remain with the women throughout her life. Every primi antenatal women should know the support and care they must receive during pregnancy, labour and childbirth. It is also essential for every health care professional to provide knowledge and education about pregnancy and vaginal delivery as they may develop complications related to pregnancy at any time. A positive attitude and knowledge regarding pregnancy, labour and vaginal delivery is most important to the woman for developing mother-infant relationship [6].

II. Material and Methods

This Descriptive survey research study was carried out on primi antenatal women attending antenatal OPD of Burdwan Medical College & Hospital, West Bengal from 01.01.2021 to 31.01.2021. A total 200 primi antenatal women of aged ≥ 18 years were selected for this study.

Study design: Descriptive survey research design

Study location: Antenatal OPD of Burdwan Medical College and Hospital, Purba Bardhaman, West Bengal

Study duration: 01.01.2021 to 31.01.2021

Sample size: 200 Primi antenatal women

Subject selection method: The study population was drawn from all primi antenatal women attending antenatal OPD of Government Hospital, West Bengal.

Inclusion criteria: Primi antenatal women -

- Who are present during the time of data collection
- Who can read and write Bengali
- Who are willing to participate during the time of data collection
- Who are 18 and above 18 years of age

Exclusion criteria: Who are sick and have high risk pregnancy during the time of data collection.

Procedure methodology

After written informed consent was obtained, a well designed semi structured and structured interview schedule was used to collect the data from the required women. The semi structured interview schedule include socio-demographic characteristics such as age, types of family, education, occupation, area of living, information regarding process of labour and choice of mode of delivery.

The structured interview schedule was developed to gather information about the knowledge of antenatal women towards normal vaginal delivery.

of the samples selected for the study. It includes 22 items under which 7 items for basics of normal delivery, 3 items for prerequisites of normal delivery, 2 items for physiological changes, 2 items for preparation of normal delivery, 2 items for nature and duration of pain, 1 items for benefits of normal delivery, 1 item for signs of delivery, 1item for diet, comfortable position, exercise and medication.

5 point Likert Scale was prepared for collecting data regarding Attitude of antenatal women towards normal vaginal delivery. Five point rating scale was used ranging from strongly disagree to strongly agree with a score range from 1-5 per item.

Scoring: Strongly agree – 5, Agree – 4, Neutral – 3, Disagree – 2, Strongly Disagree– 1

Maximum score was 150 and minimum score was 30. Attitude of primi antenatal women towards normal vaginal delivery were assessed on the basis of total score achieved by each participant.

III. Statistical analysis

Data was analyzed by using descriptive and inferential statistics.

IV. Result

**Table – 1 Findings related to frequency percentage distribution of demographic variables
n=200**

Demographic variables	Frequency	Percentage
Age Group (Years)		
18-21	162	81
22-25	28	14
26-28	9	4.5
29-31	1	0.5
Types of Family		
Joint Family	185	92.5
Nuclear Family	15	7.5
Education		
Illiterate	42	21
Primary	14	7
Secondary	105	52.5
Higher Secondary	50	25
Graduation	24	12
Post-Graduation	3	1.5
Occupation		
Home Maker	197	98.5

Services	3	1.5
----------	---	-----

Table no 1 shows that most of the primi antenatal women (81%) belonged to the age group of 18-21 years and (0.5%) belonged to 29-31 years. (92.5%) of the respondents belonged to joint family and (7.5%) were from nuclear family. Most of the primi antenatal women (52.5%) were secondary level passed and (1.5%) were post graduate. Maximum of the primi antenatal women (98.5%) were Home maker and only 3% were service women.

**Table – 2 Findings related to frequency percentage distribution of demographic variables
n=200**

Demographic Variables	Subjects	Percentage
Monthly Family Income (in Rs.)		
<15,000	150	75
15,000-20,000	18	9
>20,000	32	16
Religion		
Hindu	156	78
Muslim	44	22
Area of Living		
Rural	146	73
Urban	54	27
Presence of support system during delivery		
Yes	Nil	-
No	10	100

Data presented in the table 2 shows that (75%) of primi antenatal women had monthly income below Rs.15000, while (9%) had ranging from Rs. 15,000-20,000. Most of the primi antenatal women (78%) were belonged from Hindu religion and (22%) were belonged from Muslim religion. Majority of the primi antenatal women (73%) were from rural community and (27%) were from urban community and (100%) had no support system during delivery.

**Table - 3 Findings related to frequency percentage distribution of demographic variables
n=200**

Demographic Variables	Subjects	Percentage
Information regarding process of Labour		
Yes	199	99.5
No	1	0.5
If Yes, then source		
ASHA	177	88.5
Family Members	1	0.5
ASHA and family member	1	0.5
ASHA and Social Media	11	5.5
ASHA, Social Media and Magazine	5	2.5
Social Media	4	2

Data presented in table 3 shows that (99.5%) of primi antenatal woman got information regarding process of labour and (0.5%) did not have any information. Maximum (88.5%) primi antenatal women were got information from ASHA, (0.5%) from family member and both from ASHA and family member,

**Table - 4 Findings related to frequency percentage distribution of demographic variables
n=200**

Demographic Variables	Subjects	Percentage
Choice regarding process of Labour		
Yes	200	100
No	Nil	-
Mode of Delivery		
Normal Delivery	200	100
Caesarean Section	Nil	-

Data presented in the table 4 shows that (100%) of primi antenatal woman had a choice for regarding mode of delivery and (100%) of primi antenatal woman had a choice for Normal vaginal delivery.

Table – 5 Findings related to frequency and percentage distribution according to the level of Knowledge of the subjects regarding normal vaginal delivery

n=200			
Knowledge Score	Score	Frequency	Percentage
Excellent	19.9– 22(<90) %	37	18.5
Very Good	15.5-19.8(71-90)%	49	24.5
Good	11.1-15.4(51-70) %	67	33.5
Poor	0 – 11(>50) %	47	23.5

Table- 5 depicts that maximum (33.5%) primi antenatal women had good knowledge and (18.5%) primi antenatal women had excellent knowledge.

Table 6 Findings related to mean, median, standard deviation of obtained knowledge of primi antenatal women related to normal vaginal delivery

n=200				
Variables	Range*	Mean	Median	SD
Knowledge Score	5-22	14.855	14	4.31

Maximum Score - 22

*Range – Obtained Range

Data presented in the table 6 depicts that the mean knowledge score of primi antenatal women on mean was 14.855 with a calculated median was 14. The table also depicts that the knowledge score of primi antenatal women were ranging from 5-22 with SD 4.31. It indicates that the sample were homogenous and normally distributed.

Table 7 Findings related to mean, median, standard deviation showing level of domain wise knowledge of primi antenatal women

n=200						
Domain	Range	Mean	Median	SD	Mean%	Rank
General Knowledge	0-12	8.32	8	2.374	69.33	3
Pre requisites of Normal delivery	0-3	2.4	2	0.6497	80	2
Physiological Changes	0-2	1.315	1	0.761	65.75	4
Preparation of Normal delivery	0-2	0.89	1	0.8375	44.5	6
Nature and duration of the pain	0-2	0.93	1	0.793	46.5	5
Benefits of normal delivery	0-1	1	1	0	100	1

Table 7 depicts that among the six domains of knowledge, the benefits of normal delivery ranked 1st indicating that the most of the primi antenatal women had maximum knowledge in this than other domains following general knowledge, prerequisites of normal delivery, physiological changes, preparation of normal delivery, Nature and duration of the pain.

Table- 8 Findings related to frequency percentage showing attitude level of the primi antenatal women towards normal vaginal delivery

n=200			
Attitude score	Score	Frequency	Percentage
Unfavourable $\leq (x - 1SD)$	≤ 116	45	22.5
Moderately favourable $> (x - 1SD)$ to $< (x + 1SD)$	117-125	134	67
Favourable $\geq (x + 1SD)$	≥ 126	21	10.5

Table 8 depicts that 137 (67%) primi antenatal women had moderately favorable attitude, 45 (22.5%) primi antenatal women had unfavorable attitude towards normal vaginal delivery. 21 (10.5%) primi antenatal women had favorable attitude towards normal vaginal delivery. So, from the above table it can be seen that all of them has more or less favorable attitude towards normal vaginal delivery.

Table – 9 Findings related to mean, median, standard deviation of obtained attitude of primi antenatal women related to normal vaginal delivery

n=200				
Variables	*Range	Mean	Median	SD
Attitude Score	109-130	119.685	120	4.44

Maximum Score - 150

*Range – Obtained Range

Data presented in the table 9 depicts that the mean attitude score of primi antenatal women on mean was 119.685 with a calculated median was 120. The table also depicts that the attitude score of primi antenatal women were ranging from 109-125 with SD 4.44. It indicates that the sample were homogenous and normally distributed.

Table 10 Correlation between knowledge and attitude about normal vaginal delivery.

n=200		
Variables	Correlation coefficient	‘t’ value
Knowledge Vs Attitude	0.5	8.2**

df -198 (2.60), p<0.01**

Data presented in the table 10 depicts that the calculated ‘r’ value was 0.5. The calculated ‘t’ value was 8.2. Here the computed ‘t’ value (8.2) was higher than the tabulated ‘t’ value (2.60). So, positive correlation was present between knowledge and attitude score. Thus there was a significantly moderate positive correlation between knowledge and attitude.

It can be interpreted that the relationship was true relationship, not bi chance. That means as knowledge of primi antenatal women increases the attitude also increases.

Table 11 Findings related to association between the knowledge score and demographic variables in terms of Age, Types of Family and Education.

Variables	Knowledge			Total	χ ²
	≤ Median	> Median	Total		
Age					
≤ 20	82	66	148		4.42*
>20	20	32	52		
Types of Family					
Joint	96	89	185		2.13
Nuclear	5	10	15		
Educational Level					
<Higher Secondary	95	28	123		91.356**
≥Higher Secondary	6	71	77		

df = 1 (3.84) *p>0.05 **p>0.01

Data presented in the table 11 depicts that there was significant association between knowledge score and demographic variables like age and educational level. There was no association between knowledge score and types of family

Table 12 Association between the knowledge and socio demographic variables in terms of Monthly income, Religion.
n=200

Variables	Knowledge		Total	χ^2
	≤ Median	> Median		
Monthly Income				
≤ 15000	93	57	150	29.051**
>15000	9	41	50	
Religion				
Hindu	77	79	156	0.209*
Muslim	20	24	44	
Area of Living				
Rural	87	59	146	17.87**
Urban	14	40	54	

df = 1 (3.84) *p>0.05, **p>0.01

Data presented in the table 12 depicts that monthly family income, area of living and there was no association between knowledge score and religion.

V. Discussion

Discussion related to demographic profile

In the present study, maximum primi antenatal women (81%) belonged to the age group 18-21 years and most of the primi antenatal women (98.5%) were home maker. Almost all primi antenatal women (78%) belonged to Hindu religion, (73%) lived in rural area (92.5%) belonged to joint family and 53.5% was passed secondary level. Primi antenatal women (75%) having monthly income of below Rs 15,000. Maximum (99.5%) had got information regarding process of labour, (100%) had no support system during delivery and 100% had a choice of normal vaginal delivery.

Joshi A, Thapa M, Pantha OB in the study on impact of attitude and knowledge towards mode of delivery, also found that out of the total 256 pregnant women (93%) of women were in the age group of 20-34 years. Among them 78.1% were homemaker and rest of the participant were employed. Majority of the respondent (68%) were studied until high school and only (3.9%) were illiterate [8].

A cross sectional study conducted by Shazwani H, Soon LK, Azlina Y on primigravida mother's knowledge and attitude towards vaginal delivery and caesarean delivery in east coast of Peninsular, Malaysia. They found in their study that (54.3%) of mother were in the age group of 18 -26 and rest were in the age group of 27 and above age group. Among 105 samples (47.6%) were studied in university level. (50.5%) respondent were employed and (54.3%) had got information regarding delivery [9].

Discussion related to knowledge regarding normal vaginal delivery

The present study revealed that the primi antenatal women had good knowledge (33.5%). Among them (24.5%) had very good knowledge, 23.5% women had poor knowledge regarding vaginal delivery and 18.5% had excellent knowledge regarding normal vaginal delivery.

In contrast, Punjot R, Patidar N, Devi NJ et al. found in their study that near about one third (74%) of the primi mothers had average knowledge regarding vaginal delivery, (22%) had poor knowledge and rest (4%) had good knowledge regarding vaginal delivery [10].

Joshi A, Thapa M, Panta OB conducted a cross sectional questionnaire survey on maternal attitude and knowledge towards mode of delivery found that the pregnant women (45.7%) had good knowledge regarding vaginal delivery [8].

The findings of the present study show that the mean knowledge score was 14.8, median 14 which can be indicated that obtained data were normally distributed. The knowledge score of primi antenatal women were ranging from 5-22 with SD 4.31, indicating that obtained data were mildly dispersed.

This findings were consistent with the cross-sectional study on primigravida mother's knowledge and attitude towards vaginal delivery and caesarean delivery in east coast of Peninsular, Malaysia by Shazwani H, Soon LK, Azlina Y Findings showed that the mean knowledge score was 3.44 [9].

This findings were consistent with the a cross sectional questionnaire survey on maternal attitude and knowledge towards mode of delivery in Nepal Medical College Teaching Hospital, by Joshi A, Thapa M, Panta OB findings showed that the mean knowledge score was 6.14 and 6.0 [8].

Discussion related to attitude towards normal vaginal delivery

In the present study the findings revealed that the attitude of primi antenatal women were moderately favourable (67%). Among them (22.5%) were Unfavourable and (10.5%) were favourable attitude regarding normal vaginal delivery.

In contrasts, Shazwani H, Soon LK, Azlina Y found in their study that majority (50.5%) of the primigravida mothers had positive attitude towards normal vaginal delivery. Most of the participants agreed and strongly agreed in all statement about vaginal delivery [9].

This findings was consistent with the a cross sectional questionnaire survey on maternal attitude and knowledge towards mode of delivery in Nepal Medical College Teaching Hospital, by Joshi A, Thapa M, Panta OB findings showed that majority (93.4%) had positive attitude towards vaginal delivery and (6.6%) had either neutral or negative attitude [8].

The findings of the present study show that the mean attitude score was 119.6, median 120 which can be indicated that obtained data were normally distributed. The knowledge score of primi antenatal women were ranging from 109-130 with SD 4.44, indicating that obtained data were mildly dispersed.

In contrast, Siabani S, Khadijeh J, Mohammadi MM conducted a study on attitude of pregnant women towards normal vaginal delivery and factors driving use of caesarean section revealed that the mean attitude score was 60.7 ± 9.5 ranging from 22 to 85 [11].

Discussion related to relationship between knowledge and attitude

In this present study the findings revealed that there was a significantly moderate positive correlation between knowledge and attitude towards normal vaginal delivery.

Whereas, Joshi A, Thapa M, Panta OB in their study found that attitude for vaginal delivery was not correlated with the level of knowledge of the mode of delivery [8].

The findings of another study conducted by Aali BS, Motamedi B on women's knowledge towards modes of delivery revealed the there was a significant relationship between knowledge and attitude ratings [12].

Discussion related to association knowledge score with selected demographic variables

In this present study the findings revealed that the knowledge score was associated with selected demographic variables like age, educational level, monthly family income, area of living and there was no association between types of family and religion.

Whereas, Joshi A, Thapa M, Panta OB in their study found that knowledge score was associated with gravidity, educational status and the monthly family income and there was no association with age and employment [8].

The findings of another study conducted by Aali BS, Motamedi B on women's knowledge towards modes of delivery revealed the there was a significant association between husband's occupation and women's knowledge score [12].

VI. Conclusion

From the above findings it can be concluded that, the primi antenatal women have good knowledge and have the moderately favorable attitude regarding Normal vaginal delivery. There is association between knowledge and socio demographic variables of age, education, monthly family income, area of living and not associated with types of family and religion. There was a significantly moderate positive correlation between knowledge and attitude.

References

- [1]. Taheri M, Takian A, Taghizadeh Z, Jafari N, Sarafraz N. Creating a positive perception of childbirth experience: systematic review and meta-analysis of prenatal and intrapartum interventions. *Reprod Health*. 2018; 15(1):73. doi: 10.1186/s12978-018-0511-x.
- [2]. Guittier M-J, Cedraschi C, Jamei N, Boulvain M, Guillemin F. Impact of mode of delivery on the birth experience in first-time mothers: a qualitative study. *BMC Pregnancy Childbirth*. 2014; 14(1):254. doi: 10.1186/1471-2393-14-254.
- [3]. Boryri T, Noori NM, Teimouri A, Yaghobinia F. The perception of primiparous mothers of comfortable resources in labor pain (a qualitative study) Iran *J Nurs Midwifery Res*. 2016; 21(3):239. doi: 10.4103/1735-9066.180386.
- [4]. Nilvér H, Begley C, Berg M. Measuring women's childbirth experiences: a systematic review for identification and analysis of validated instruments. *BMC Pregnancy Childbirth*. 2017; 17(1):203. doi: 10.1186/s12884-017-1356-y.
- [5]. Hildingsson I, Johansson M, Karlström A, Fenwick J. Factors associated with a positive birth experience: an exploration of swedish women's experiences. *Int J Childbirth*. 2013;3(3):153-164. doi:10.1891/2156-5287.3.3.153.
- [6]. Panth A, Kafle P. Maternal Satisfaction on delivery service among postnatal services. *International Journal of Obstetrics and Gynaecology*. 2018;11 Available at: <https://doi.org/10.1080/16549716.2017.1386932>.
- [7]. Redshaw M. Women as consumers of maternity care: measuring satisfaction or dissatisfaction? *Birth*. 2008; 35(1):73-76. Available at: <http://onlinelibrary.wiley.com/doi/abs/10.1111/j.1523-536X.2007.00215.x>.
- [8]. Joshi Anshumala, ThapabMeeta, Panta Om Biju. Maternal Attitude and Knowledge towards Modes of Delivery JNHRC 2018 Vol. 16 No. 2 Issue 39 Available at: <http://dx.doi.org/10.3126/jnhrc.v16i2.20312>.
- [9]. Shazwani H., Soon LK., Azlina Y. Primigravida mothers' knowledge and attitude towards vaginal delivery and caesarean section IJPHCS 2017 e-ISSN: 2289-7577. Vol.4:No. 4 July/August

- [10]. Punjot R., Patidar N., Jiteswori D.N., Mathai R.M., John R., Solanki P., Thomas N., Punjot P., Patidar N, Krishna R., Saju N. k., Thokchom S. A Study to assess knowledge regarding process of normal labour among primigravida mothers in selected hospitals of Pune city. *Innovational Journal of Nursing and Healthcare (IJNH)* 2018; Available at: www.ijnursing.com
- [11]. Soraya S., Khadijeh J., Mohammad M.M. Attitude of pregnant women towards normal delivery and factors driving the use of caesarean section in Iran *BMC Pregnancy Childbirth BioPsychoSocial Medicine*.2016; Available at: <http://doi.org/10.1186/s13030-019-0149-0>.
- [12]. Aali BS, Motamedi B Women’s knowledge and attitude towards mode of delivery in Kerma, Islamic Republic of Iran *East Mediterr Health J*. 2005 July; 11 (4):663-72 Available at: pubmed.ncbi.nlm.nih.gov/16700382

Ms Srijani Sinha Ray. et.al. “Assessment Of Knowledge And Attitude Towards Normal Vaginal Delivery Among Primi Antental Women Attending Antenatal Opd In A Selected Government Hospital, West Bengal..” *IOSR Journal of Nursing and Health Science (IOSR-JNHS)* 12(3), 2023, pp. 21-28.