



ORIGINAL RESEARCH ARTICLE

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EFFECTIVENESS OF PLANNED TEACHING PROGRAMME ON KNOWLEDGE REGARDING SELECTED NON PHARMACOLOGICAL TECHNIQUES IN MANAGING LABOUR PAIN AMONG PRIMIGRAVIDA WOMEN ADMITTED IN ANTENATAL WARD OF SELECTED HOSPITALS AT UDAIPUR”

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ABSTRACT

Background: Labour pain is the pain and discomfort associated with the contraction of uterus during labour.¹ In most labour room it is a common sight that the mothers shout, keep their bodies rigid and start pushing before the cervix is fully dilated, this leads to early rupture of membrane as well as prolonged and complicated labour which affect the condition of the infant at birth. During labour when the women are instructed they are not able to follow instructions because they experience pain. ²Hence, the main aim of the study was to assess the effectiveness of planned teaching programme on knowledge regarding selected non pharmacological techniques in managing labour pain among primigravida women and enhancing their knowledge to manage labour pain.

Material And Methods: A quasi experimental pretest and post test control group design was used to assess the effectiveness of PTP on knowledge regarding selected non pharmacological techniques in managing labour pain. The sample consists of 500 primigravida women, 250 each in experimental group and control group and selected by convenience sampling technique. Structured knowledge questionnaire was used to assess the knowledge. Data were analyzed by the using of both descriptive and inferential statistics.

Findings: The maximum number of primigravida women belonged to the age group of 18-22 years and were Hindu and vegetarian. Maximum number of subjects was educated up to secondary level. Majority of them had their family income 7501-10000 Rs/month and they were house wives. The level of knowledge scores of primigravida women who attended the PTP is significantly better than the control group as evident from 't' (498) value of 59.855 at 0.05 level of significance.

Conclusion: The study concluded that PTP was effective in enhancing the knowledge on selected non pharmacological techniques as computed 't' test was significant at 0.05 level of significance and majority of selected personal variable were associated with pretest knowledge scores.

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INTRODUCTION

The childbearing women experiences many demanding sensation and discomforts during labour and birth. Labour, the culmination of pregnancy is an event with great psychological, social and emotional meaning for the mother and her family.

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Pregnant women commonly worry about the pain during labour and childbirth, hence labour pain should be given more importance to women and measures should be taken to reduce pain during labour (Sharma *et al.*, 2002). The management of labour pain is a major goal of intra partum care. There are two general approaches: pharmacological and non pharmacological approach. Pharmacological approaches are directed towards the elimination of the physical sensation of labour pain, whereas non pharmacological approaches are largely directed towards prevention of suffering⁴. The primary goal in managing pain by using non pharmacological approach is not to make the pain disappear, instead the woman is educated and

assisted by her caregivers, child birth educators, and support people to take an active role in decision making and using self comforting techniques and non pharmacological techniques and methods to relieve labour pain and enhance labour. So it is high time we pause and ponder to find our mothers knowledge towards the effectiveness of non pharmacological techniques of managing labour pain especially in primigravida women (Simkin). The labor research generally shows that alternative therapies reduce pain and thereby the need for medication. An evaluative study regarding the effectiveness of non pharmacological strategies concluded that the strategies were effective in reducing the intensity of pain in the studied parturients in labor (Sherbini *et al.*, 2013).

MATERIALS AND METHODS

A quasi experimental pretest and post test control group design was adopted for this study in order to accomplish the objectives. The sample consists of 500 primigravida women, 250 each in experimental group and control group and selected by convenience sampling technique. A structured knowledge questionnaire was developed with the intention to assess the knowledge level of the primigravida women on selected non pharmacological techniques in managing labour pain. The structured knowledge questionnaire consisted of two parts.

Part I: Demographic variables included information on age, religion, educational status, food habits, occupation, family’s monthly income and occupation.

Part II: Knowledge questionnaire Consists of 32 statements related to knowledge regarding labour, labour pains and knowledge regarding non pharmacological techniques of managing labour pains. All the questions were multiple-choice questions. Data were collected after obtaining prior permission from the medical superintendent and nursing superintendent of the selected hospitals to conduct the study. A written consent was obtained from the study participants after explanation about the purpose and usefulness of the study and assurance about the confidentiality of their responses. In 4 weeks knowledge was pretested by administering the structured knowledge questionnaire among control and experimental group and 1 week planned teaching programme was delivered for experimental group. In 4 weeks, post-test was done for both experimental and control group. The data were analyzed by descriptive and inferential statistics using Microsoft excel sheet and EP-Info.

RESULTS

The collected information has been organized and presented as follows: As shown in Table 2, the level of knowledge regarding selected non pharmacological techniques in managing labour pain of subjects who received PTP was significantly better than that of the control group. The above table shows that there was a significant association between knowledge and the primigravida mother’s age, education, family income, occupation and type of diet. It was also observed that there was no significant association with religion.

Table 1. Sample characteristics of primigravida women,

Variable	Experimental group		Control group		Total	
	f	%	f	%	f	%
Age						
18 – 22	104	41.6	98	39.2	202	40.4
22 – 26	85	34	92	36.8	117	35.4
26 – 30	43	17.2	44	17.6	87	17.4
30 – 34	18	7.2	16	6.4	34	6.8
Religion Hindu	167	66.8	172	68.8	339	67.8
Christian	18	7.2	12	4.8	30	6
Muslim	60	24.0	62	24.8	122	4.4
Others	5	2.0	4	1.6	09	1.8
Educationlevel		5.6	27	10.8	41	8.2
Illiterate	14	27.2	74	29.6	142	28.4
Primary school	68	34	77	30.8	162	32.4
secondary	85	33.2	72	28.8	155	31
higher education	83					
Diet	155	62	148	55	303	60.6
Veg.	95	38	102	45	197	39.4
Non-veg.						
Monthly income	63	25.2	78	31.2	141	28.2
≤ 7500	79	31.6	66	26.4	145	29
7501 – 10000	58	23.2	50	20	108	21.6
10001 – 15000	50	20	56	22.4	106	21.2
>15001						
Occupation						
House-wife	79	31.6	88	35.2	167	33.4
Private Job	54	21.6	43	17.2	97	19.4
Agriculture	62	24.8	71	28.4	133	26.6
Govt. Job	55	22.0	48	19.2	103	20.6

Table 2. Effectiveness of planned teaching programme

Group	Pre Test Mean	Post Test Mean	Paired 't' value	Independent 't' value
Experimental	12.74 ±1.080	20.97±1.878	78.731	59.855
Control	12.71±1.079	12.87±1.30	1.879	

Section3. Association between pretest knowledge scores with their selected personal variables

Table 3.

S. no.	Characteristics	Chi – square value	df	P value
1.	Age in years	16.239	3	7.815
2.	Religion	3.026	3	7.815
3.	Education	77.491	3	7.815
4.	Family Income (Rs)	11.837	3	7.815
5.	occupation	10.969	3	7.815
6.	Type of diet	5.531	1	3.841

DISCUSSION

The findings of the study have been discussed with reference of the objectives and hypotheses stated and with findings of other studies. It was observed that maximum number of primigravida women belonged to the age group of 18-22 years and were Hindu and vegetarian. Maximum number of subjects was educated up to secondary level. Majority of primigravida women had their family income 7501-10000 Rs/month and they were house wives. Similar findings were observed regarding the age group, religion and occupation in a study conducted by Ayranci⁷. Findings related to effectiveness of PTP revealed that the post test mean knowledge score of primigravida women in experimental group was significantly higher than their pre-test knowledge score $t(249) = 78.731$, $p < 0.05$. There was no significant difference between mean pretest and posttest knowledge scores of control group $t(249) = 1.879$ at 0.05 level of significance. Mean gain in post-test knowledge scores of primigravida women in experimental group is significantly higher than the control group as evident from 't'(498) value of 59.855 at 0.05 level of significance. Thus, the PTP was found to be an effective strategy in improving the knowledge of primigravida women on selected non-pharmacological techniques of managing labour pain. These findings related to knowledge were consistent with the findings of the studies conducted by Stein et al.⁸ and Ruby John⁹. It was observed that primigravida women's age in years, educational level, family income per month, occupation and dietary habits were significantly associated with the pre test knowledge regarding selected non pharmacological techniques of managing labour pain; whereas, religion was not found significantly associated with pre test knowledge. No literature could be retrieved to compare these findings.

Conclusion

The study results concluded that PTP was effective in increasing the knowledge on selected non-pharmacological techniques of managing labour pain as computed 't' test was significant at 0.05 level of significance. The pretest knowledge scores and majority of selected personal variables (age, family income, occupation, education level and dietary habits) were significantly associated with each other.

Limitation of the study

- The study was limited to the primigravida women visited in antenatal ward of selected hospitals at Udaipur.

Recommendations

Keeping in view the findings of the present study, the following recommendations were made.

- A large scale study can be conducted to generalize the findings.
- A similar study can be conducted by true experimental approach.
- A study can be conducted using various methods of teaching to determine the most effective method of teaching example – video, SIM etc.
- A longitudinal study to determine the long term effectiveness of PTP in terms of knowledge of primigravida women and in terms of use non-pharmacological techniques of managing labour pain may be very useful for wider generalization of the results.

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