

Knowledge Regarding Birth Spacing Methods of Contraception among Postnatal Mothers in PGIMS, Rohtak, Haryana

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Abstract:- A small family norm reduces the risk of maternal morbidity as well as fetal and neonatal mortality. Spacing children give the child healthier start in life and the mother enough time for her body to recover from the maternal deprivation resulting from the previous pregnancy. In this study a quantitative approaches and non-experimental research design was used to collect data from 50 postnatal mothers. Non probability convenience sampling technique was used. The study findings showed that obtained mean knowledge score was 16.08 with standard deviation of 10.01. There was significant association of knowledge with selected socio-demographic variables such as education of mother, family income. The study also concluded that 4% of postnatal mothers had adequate knowledge regarding birth spacing methods of contraception. There still exists some misconceptions among the postnatal mothers regarding birth spacing methods of contraception.

Keywords:- Knowledge, Birth Spacing Methods of Contraception, Postnatal Mothers.

I. INTRODUCTION

“A way of thinking and living that is adopted voluntarily by every living creature on the basis of knowledge, attitudes and the ability to make decision by individuals and couples in order to promote the health and welfare of the family group and thus contribute effectively to the social development of a country.” (World Health Organization)

¹The spacing methods of contraception designed to prevent pregnancy due to the coital act. Ideal spacing methods should fulfil the following criteria, widely acceptable, inexpensive, simple to use, safe, highly effective and requiring minimal maintenance e.g. Condom, Copper-T, Mala-N, Depo medroxy progesterone acetate (DMPA) and Norplant method.¹ Spacing methods of contraception emphasizes on attitudinal change on informed knowledge, decisions regarding family size, timing and spacing of wanted children. This implies creating awareness and motivation of antenatal mothers about spacing methods of contraception, it is advisable to have an interval of 2-3 years between the last confinement

and the beginning of the next pregnancy. Limited numbers of births are always safe to have small norm.² Spacing of children is an essential factor in the protection of health of the mother and children. Spacing methods of contraception are very important to avoid unwanted births. To regulate the interval between pregnancies, to determine the number of children in the family, and it will help in order to promote the health and welfare of family effectively to the social and economical development of a country.³

Contraception is as old as mankind. Spacing birth at least two years apart can save the lives of millions of infants. Improving reproductive health is central to achieving the Millennium Goals on improving maternal health, reducing maternal mortality, infant mortality and eradicating extreme poverty.⁴ This requires that women have access to safe and effective methods of fertility control. The promotion of family planning can avoid unwanted pregnancy and improve maternal health and becomes the core in achieving the Millennium Development Goals.⁵ Contraception is the boon for the present world if used at the right time. The developed countries the awareness and the use of contraceptive methods among population have researched satisfactory heights, where as in developing countries the rises has to still gain pace.⁶ In India a baby is born every 1.25 seconds. Couple protection rate is still only 41%. About 70-80% of the pregnancies in India are unplanned and 25% are unwanted. Every year 11 Million abortion take place and half of these are unsafe and association with a high mortality and morbidity rate.⁷ Around 20,000 women are dying annually due to abortion related complication. Contraceptives methods are by definition preventive methods to avoid unwanted pregnancies.⁸ The ideal Contraceptive is defined as one which is free from side effects, safe, reversible, easily available and cheap. The Contraceptive methods may divided into spacing methods and terminal.⁹

Contraception means preventing the union of sperm and ovum, suppressing ovulation and interfering with implantation of fertilized ovum the uterus. The temporary commonly used methods are condom, Mala -N, Intrauterine devices. Contraceptives can be categorized into Temporary.¹⁰

A. Purpose of the Study

The purpose of the study was to assess the knowledge of postnatal mothers regarding birth spacing method of contraceptives and to give health education to improve the knowledge of postnatal mothers.

B. Objective

- To assess the knowledge regarding birth spacing methods of contraception among postnatal mothers.
- To find out the association between knowledge regarding birth spacing methods of contraception among postnatal mothers with their selected socio demographic variables.

C. Hypothesis

H₁- There will be significant association between knowledge scores of postnatal mothers regarding birth spacing methods of contraception.

H₂- There will be significant association between the knowledge scores of postnatal mothers regarding birth spacing methods of contraception with their selected socio demographic variables.

D. Operational Definition

- **Assess:-** In this study assess refers to a statistical measurement of knowledge of postnatal mothers regarding birth spacing methods of contraception
- **Knowledge:-** In this study knowledge refers to correct responses of postnatal mothers to the knowledge items regarding birth spacing methods of contraception.
- **Birth spacing Methods:-** In this study birth spacing methods refer to family planning methods which are commonly used to postpone or to space births.
- **Contraception:-** In this study contraception refers to birth spacing methods of family planning, designed to prevent pregnancy due to the coital act.
- **Postnatal mothers:-** In this study, postnatal mothers are the women who has given birth and admitted in maternity wards .

E. Delimitations

The study is delimited to:

- The postnatal mothers who admitted in postnatal ward in PGIMS, Rohtak, HARYANA.
- Mothers who can speak and understand Hindi and English.
- Mothers who wants to participate in the study.

F. Conceptual Framework Of The Study

A conceptual framework is a group of concepts, and a set a set of propositions that spell out the relationship between them. Conceptual framework plays several interrelated roles in the progress of sciences. Their overall roles, purpose is to make scientific findings meaningful and generalizable (**Christenson J Panula**).

Pretest  Health Education By Using A.V.Aids

II. METHODOLOGY

A. Research Approach

A Quantitative approach was used to assess the knowledge of postnatal mothers.

B. Research Design

Non- experimental research design with one shot test design was used to assess postnatal mothers who were admitted in PGIMS, ROHTAK, HARYANA.

C. Variables

- **Dependent variables:** knowledge score of postnatal mothers.
- **Independent variables:** health education
- **Demographic variables:** Age, occupation of mother, Education of mother, monthly income, Type of family, Duration of married life, Education of husband, occupation of husband

D. Research Setting

The study was conducted in PGIMS, Rohtak, HARYANA among postnatal mothers.

E. Population

The population includes in this were who deliver a child in PGIMS, Rohtak, Haryana.

- Target population : in this study target population is postnatal mothers who were admitted in postnatal ward in PGIMS, Rohtak,Haryana.
- **Accessible population:** in this study accessible population is postnatal mothers who were admitted in PGIMS,Rohtak, Haryana.

F. Sample

This study includes 50 postnatal mothers who were admitted in postnatal ward in PGIMS, Rohtak, Haryana.

G. Sample Size

In the present study there were 50 postnatal mothers who fulfilled the study criteria

H. Sampling Technique

Data were collected by non-probability convenient sampling technique.

I. Description of Tool

The following tools were used in order to obtain the data:

Section A- This section was comprised of demographic variables, it includes eight (8) questions to collect the background data of the study. The items are sample Age, occupation of mother, Education of mother, monthly income, Type of family, Duration of married life, Education of husband, occupation of husband.

Section B- Structured questionnaire regarding knowledge.

It consist of 40 multiple choice questions to assess knowledge of postnatal. Mothers on birth spacing method.

Scoring Procedure: This section consisted 40 items. Each item has 4 options with one accurate answer. The score for correct response to each item was “one” and

incorrect response was “Zero”. Thus foe 40 items maximum obtainable scores 40 and minimum was zero. To find out the association with the selected demographic variables and knowledge score, respondents are categorized into three groups:

- Inadequate knowledge 0-15
- Moderate knowledge 16-27
- Adequate knowledge 28-40

III. RESULT

KNOWLEDGE LEVEL	PREVIOUS KNOWLEDGE		mean	SD
	Frequency	%Age		
Inadequate Knowledge	34	68%	16.8	10.1
Moderate Knowledge	14	28%		
Adequate Knowledge	2	4%		
Total	50	100		

Table 1:- Distribution of postnatal mothers according to knowledge score categorization N=50

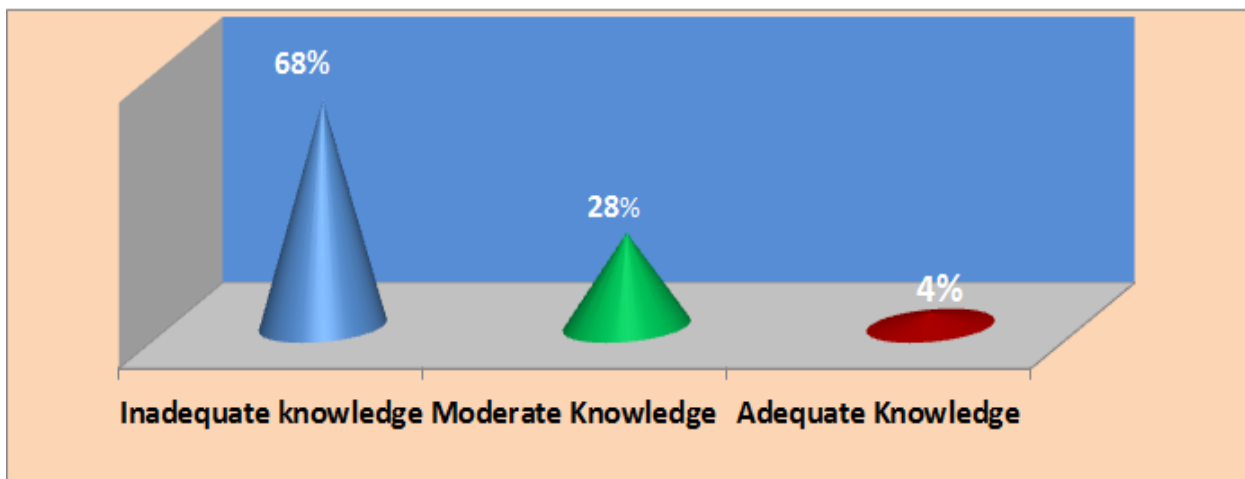


Fig 1:- showing percentage distribution of samples according to the knowledge score categorization. 4% postnatal mothers were adequate knowledge, 28% of postnatal mother were having the moderate knowledge, 68% of postnatal mother were having the inadequate knowledge regarding birth spacing methods of contraception.

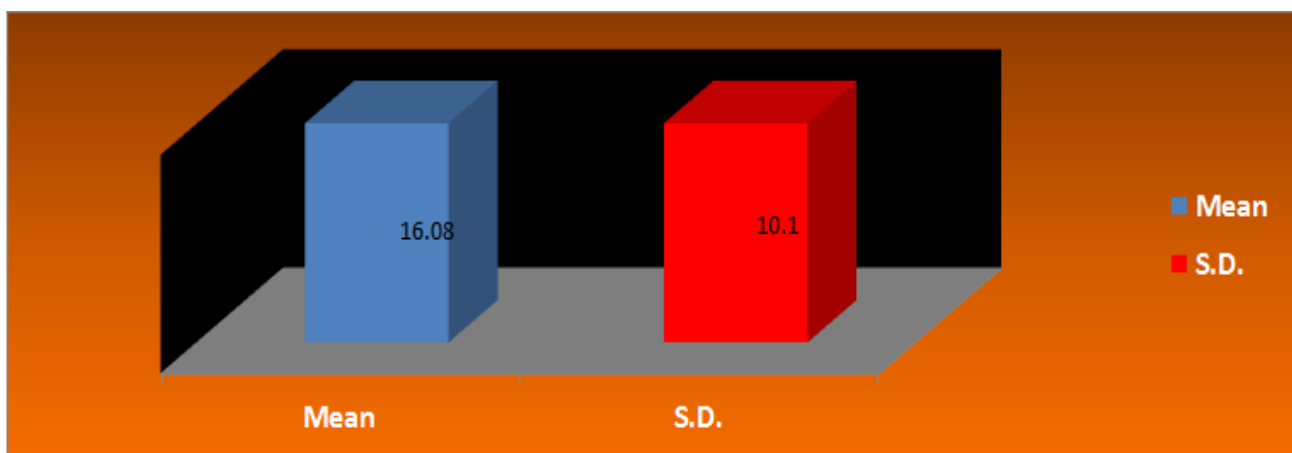


Fig 2:- showing mean(16.8) and standard deviation(10.1) of knowledge score of postnatal mothers.

Sample characteristics	Frequency	Inadequate	Moderate	Adequate	Chi value	P-value	Df	Result
Age								
a) less than 19 years	0	0	0	0	0.480	1.00	2	NS
a) 19-35 years	38	25	11	2				
b) 36-45 years	12	9	3	0				
c) Above 45 years	0	0	0	0				
Occupation								NS
a) Government job	1	0	0	1	1.01	1.0	6	
b) Private	21	15	6	0				
c) Self employed	5	4	1	0				
d) House wife	23	15	7	1				
Education of mother								
a) Metric	20	14	6	0	10.653	0.042	4	S
b) Higher Secondary	7	6	1	0				
c) Graduate	8	2	4	2				
d) Illiterate	15	12	3	0				
Monthly family income								
a) 5000-10000	22	15	5	2	8.424	0.038	4	S
b) 11000-15000	21	17	4	0				
c) 16000-20000	2	2	0	0				
d) 21000 & above	5	0	5	0				
Type of family								
a) Nuclear	18	11	6	1	5.468	0.202	6	NS
b) Joint	28	21	7	0				
c) Extended	6	2	1	1				
Duration of married life								
a) <1 Years	12	9	3	0	7.204	0.220	4	NS
b) 1-3 Year	9	8	0	1				
c) 3-5 Years	20	11	8	1				
d) 5 Years & above	9	6	3	0				
Education of husband								
a) Metric	23	17	5	1	3.8	0.7	6	NS
b) Higher secondary	10	6	4	0				
c) Graduate	10	7	3	0				
d) Illiterate	7	4	2	1				
Occupation of the husband								
a) Laborer	27	17	8	2	3.4	0.4	4	NS
b) Private Employee	7	6	1	0				
c) Govt. Employee	3	2	1	0				
d) Self employee	13	8	5	0				

Table 2:- Distribution of postnatal mothers based on association between knowledge and socio-demographic variables.

The mean value of test knowledge score was 16.8 and the standard deviation was 10.01. The chi square test is used to determine the association between the knowledge and the selected demographic variables. Education of mother, family Income were found to be associated with the Knowledge of postnatal mothers. There was no association between Age, Type of family, Duration of married life, Occupation of mother, Occupation of husband, education of husband regarding birth spacing methods of contraception.

Hence there will be partial significant relation between selected demographic variables and knowledge of postnatal mothers regarding birth spacing methods of contraception.

IV. CONCLUSION

The study were concludes that their were inadequate knowledge of postnatal mothers regarding birth spacing method of contraceptives which improve by health education.

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