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Golden Research Thoughts



TO ASSESS THE EFFECTIVENESS OF PLANNED TEACHING VERSUS INFORMATION BOOKLET ON THE SELECTED ASPECTS OF CARE FOR ANTENATAL MOTHERS DIAGNOSED WITH HIGH BLOOD PRESSURE: A COMPARATIVE STUDY

Mrs. Anupama Oka

Research Scholar J.J.T University, Jhunjhunu, Rajasthan.

ABSTRACT *Objectives:*

1] To assess the knowledge of antenatal mothers with high blood pressure regarding selected aspects of care before and after planned teaching.

2] To identify the knowledge of antenatal mothers with high blood pressure regarding the selected aspects of care before and after the use of information booklet.

3] To compare the knowledge gained through planned teaching and the use of an information booklet on the selected aspects of care for antenatal mothers diagnosed with high blood pressure.

Materials and method:

Methodology: The research approach used in this study was Quasi experimental. The data gathering process started after getting required permissions from respective authorities. The knowledge of the samples regarding high blood pressure during



pregnancy was obtained by structured questionnaire in terms of pre and post test.

Result: Results suggests that there was a significant increase in the knowledge scores of the group in the post test. Than in the pretest (after and before receiving planned teaching).

Conclusion: The results indicated that an equal positive response to the booklet and the planned teaching was found really useful to them. The samples expressed that they were expecting more of such kind of information with pictures and planned teaching.

KEYWORDS: Planned teaching, Information

booklet, Antenatal mothers.

INTRODUCTION

Depending upon the vulnerability of an individual to stress and the nature of the environment, stress is likely to bring about a change in hormonal and neurotransmitter balance. Resulting in diseases like high blood pressure, bronchial asthma, diabetes and ulcer. The normal growth a n d development of the fetus can be adversely affected by a number of factors such as infection, complications during pregnancy like pregnancy induced high blood pressure, diabetes etc. The most important thing that a pregnant woman can do to detect the disorder is to receive regular prenatal examination. Serious problems are usually prevented in women who develop this disorder if they are receiving regular prenatal care.

METHODOLOGY:

Sample size and sampling technique – The sample consisted of 50 antenatal mothers diagnosed with high blood pressure during pregnancy, (25) Information booklet + (25) Planned teaching. The technique used for the study was non-probability, purposive sampling.

Sampling criteria – Antenatal mothers were selected according to the following criteria.

- 1] Pregnant mothers diagnosed only with high blood pressure.
- 2] Pregnant mothers who understand speak or read Hindi, Marathi or English.
- 3] Pregnant mothers who were willing to

participate in the study.

Tool and technique - The preparation of the tool was carried out in the following steps:

- 1] Literature review
- 2] Preparation of the blue print
- 3] Consultation with the guide and subject experts

Structured questionnaires were used to collect the data and knowledge of samples regarding high blood pressure during pregnancy. To establish content validity the tool prepared was given to ten subject experts for validation. The reliability of the questionnaire was calculated by using the Split half method. The study was carried out obtaining written permission from the concerned authorities.

Data gathering process – The data gathering process was started after getting the required permissions from the respective authorities. The knowledge of the samples regarding high blood pressure during pregnancy was obtained by structured questionnaire in terms of pre and post tests.

Validity – There was common agreement among the experts, which were incorporated in the tool. Thus the content validity of the tool was established.

Reliability – The reliability of the questionnaire was calculated by using the Split Half Method. The formula used is Spearman Brown Prophesy Formula.

 $2 \times \frac{1}{2} \cdot \frac{1}{2}$

 $r = 1+r\frac{1}{2}.\frac{1}{2} = 0.91$

Ethics – Informed consent was taken from the samples who were participating in the study.

Statistics – Statistics included frequency, percentage, mean, standard deviation, and inferential statistic including "t" test and co-relational coefficients.

Findings -

Table 1: A: Distribution of knowledge scores with regard to exercises and relaxation management of high blood pressure during pregnancy.

N = 25

Item No.	Exercises and relaxation	Frequency of correct responses							
		G	iroup I (E	Booklet)		Group	ıl (Plaı	nned teaching)	
		Pre test F %	%	Pos F	st test	Pre tes test F %	st %	P F	ost
1	Best exercises when advised complete bed rest a) Swimming b) Yoga c) Running d) Aerobics	19	76	24	96	20	80	24	96
2	To combine your daily work with daily exercise a. Walk about b. Do most of the work yourself c. Do exercises as per availability of the time d. Don't know	5	20	11	44	3	12	6	24
3	Best technique for the relaxation of the body and to reduce stress, tension, blood pressure e. Deep breathing f. Reading book g. Watching television h. Bathing	9	36	19	76	6	24	21	84

With respect to the best exercise when advised complete bed rest it was noted that in the pretest

76%(19) of the samples gave the correct response that is, the best exercise when advised complete bed rest is yoga. The score changed to 96%(24) in the post test for group I, in Group II 80%(20) of the samples gave the correct response in the pretest which improved to 96%(24) in the post test. In relation to the combining daily work with daily exercises it was identified that in the pretest, 20%(5) and 12%(3) of the samples of Group I and Group II respectively gave the correct response to the question that antenatal mothers had to do exercises as per the availability of the time but they could combine their daily work with daily exercise; whereas the scores slightly improved to 44%(11) and 24%(6) of the samples from Group I and Group II respectively showed the correct response to the question – what was the best technique for relaxation of the body and to reduce stress, tension and blood pressure, and the answer was deep breathing; whereas in the post test scores improved to 76%(19) and 84%(21) in Group I and Group II respectively.

SECTION III

(A) Comparison of the pre test and post test scores in Group I.

Result suggests that there was significant increase in the knowledge score of the group that received the booklet after the pre test. It can be concluded that the increase in knowledge was due to the effective booklet on , "Manage your hypertension during pregnancy." So, the post test mean was significantly higher than the pre test mean. This indicates that there was a significant increase in the "T" value as compared to the table value. This result supports the importance and effect of the booklet in the improvement of the knowledge of antenatal mothers with high blood pressure.

(B) Comparison of the pre test and post test scores in Group II.

Results suggests that there is significant increase in the knowledge scores of the group in the post test (after receiving planned teaching) than in the pre test (before planned teaching). It can be concluded that increase in knowledge was due to the effect of planned teaching on, "Manage your hypertension during pregnancy." This suggests the importance and the effect of planned teaching to improve the knowledge of antenatal mothers with high blood pressure.

- (C) Comparison of the pre test knowledge scores between Group I (booklet) and Group II (planned teaching). It can be concluded that knowledge scores of Group I and Group II in the pre test was same before administration of the booklet or planned teaching respectively.
- (D) Comparison of the post test knowledge scores between Group I (booklet) and Group II (planned teaching). Result concluded that there was a significant difference in the knowledge of both the groups during post test phase. But the table also shows that, calculated "t" value was less than table "t" value at 0.01 level. Therefore null hypothesis was accepted and H1 was rejected at 0.01 level. That means there was no significant difference in the knowledge scores of group I and group II in the post test phase. The reason for this conclusion may be that the booklet and the planned teaching construction were done by the same investigator and the content matter was also the same for both.

CONCLUSIONS:

During the study it was observed that, all samples from Group I and Group II were very conscious and interested to learn, the selected aspects of care during antenatal period diagnosed with high blood pressure. The need for information was irrespective of education, type of family, income and parity status. The results indicated that an equal positive response to the booklet and the planned teaching was found really useful to them. The samples expressed that they were expecting more of such kind of information with pictures and planned teaching.

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Table 1: B: Distribution of knowledge scores with regard to exercises and relaxation management of high blood pressure during pregnancy for both the groups.

N = 25

Item No.	Exercises and relaxation	Frequency of correct responses							
		G	roup I (E	Booklet)		Group II (Planned teachin			
		Pre test F %	t %	Po: F	st test	Pre test test F	st %	F	ost
1	Best measure to regulate daily activities with rest and sleep a) Plan daily routine including family members b) Plan & organize work to save energy c) Combine short work periods with short rest periods d) Don't know	0	0	7	28	1	4	11	44
2	Best technique of maintaining weight when diagnosed with high blood pressure in pregnancy a. Heavy exercises b. Gymnastics c. Do nothing d. Combination of prescribed diet with regular and safe exercises	18	72	22	88	23	92	24	96
3	Intervention for reducing edema from legs. a. Run b. Walk c. Massage the legs d. Elevate the feet on pillows	18	72	20	80	18	72	18	72

Related to the best measure to regulate daily activities with rest and sleep, in the pretest it was found that in Group I, samples were not at all aware of the best method to regulate daily activities with rest and sleep that is how to plan their daily routine including that of their family members. After reading the booklet 28%(7) of the samples gave the correct response to the question; whereas in Group II in the pretest only one gave the correct response but the score improved in the post test to 44%(11). Combination of a prescribed diet with regular and safe exercises was stated by 72% and 92% of the samples from Group I and Group II respectively during the pretest. However there was no measure change in the scores as it improved to 88% and 96% in Group I and Group II respectively during the posttest. With regard to the intervention for reducing edema it was noted that in the pretest 72% of the samples from both group I and Group II gave the correct response to the asked

question that is to elevate the feet on the pillows for reducing edema from legs. Posttest score improved to 80% and 72% respectively from Group I and Group II.

Table 1: C: Distribution of knowledge scores with regard to exercises and relaxation management of high blood pressure during pregnancy for both the groups.

N = 25

Item No.	Exercises and relaxation	Frequency of correct responses									
			Froup I (E	Booklet)		Group II (Planned teachin					
		Pre test F %	%	Pos F	st test	Pre test test F %	st %	P F	ost		
1	Best position to lie down during pregnancy a) Supine b) Left lateral c) Prone d) Right lateral	18	72	19	76	15	60	16	64		
2	Effect of deep breathing exercises a. Reduces stress and tension b. Lung expansion c. To wash out carbon dioxide d. Don't know	4	16	16	64	7	28	22	88		

With respect to the best position to lie down during pregnancy, it was identified in the pretest that 72%(18) and 60%(15) of the samples gave the correct response to the asked questions namely, best position to lie down during pregnancy is left lateral and in the posttest 76%(19) and 64%(16) of the samples gave the correct response to the asked question in Group I and Group II respectively. With reference to the effect of deep breathing exercises, it was noted that in the pretest, Group I 16%(4) of the samples gave the correct response to the asked question namely the effect of deep breathing exercises to reduce stress and tension. This score changed to 64%(16) in posttest; whereas in Group II in the pretest the score to the correct response was 28%(7) which improved 88%(22) in the posttest.

Table 1: C: Distribution of knowledge scores with regard to exercises and relaxation management of high blood pressure during pregnancy for both the groups.

N = 25

Item No.	Exercises and relaxation	Frequency of correct responses								
		G	roup I (E	Booklet)		Group II (Planned teaching)				
		Pre test F %	: %	Pos F	st test	Pre test test F %	st %	P F	ost	
1	Best position to lie down during pregnancy a) Supine b) Left lateral c) Prone d) Right lateral	18	72	19	76	15	60	16	64	
2	Effect of deep breathing exercises a. Reduces stress and tension b. Lung expansion c. To wash out carbon dioxide d. Don't know	4	16	16	64	7	28	22	88	

With respect to the best position to lie down during pregnancy, it was identified that in the pretest 72%(18) and 60%915) of the samples gave the correct response to the asked question namely, best position is to lie down during pregnancy is left lateral and in the posttest 76%(19) and 64%(16) of the samples gave the correct response to the asked question in Group I and Group II respectively. With reference to the effect of deep breathing exercises, it was noted that in the pretest, Group I 16%(4) of the samples gave the correct response to the asked question namely the effect of deep breathing exercises to reduce stress and tension. This score changed to 64%(16) in the posttest; whereas in Group II in the pretest the score to the correct response was 28%(7) which improved to 88%(22) in the post test.

Table 2: Distribution of knowledge scores with regard to pharmacological management of high blood pressure during pregnancy for both the groups.

N = 25

Item No.	Pharmacological Management	Frequency of correct responses								
		Group I (Booklet)				Group	II (Plar	nned teaching)		
		Pre test F %	t %	Po: F	st test	Pre te test F %	st %	P F	ost	
1	A awy to control pregnancy induced high blood pressure with relation to medication/prescribed pharmacological treatment. a) Regular intake of prescribed medication b) Irregular intake of prescribed medication c) Excess intake of medicines d) None of the above	20	80	24	96	16	64	20	80	

With regard to the pharmacological treatment in the pretest, 80% and 64% samples from Group I and Group II respectively gave the correct response as regular intake of prescribed medication to control pregnancy induced high blood pressure; whereas in the post test 96% and 80% samples from Group I and Group II gave the correct response respectively.

Table 3: Distribution of knowledge scores with regard to their dietary management of high blood pressure during pregnancy for both the groups.

N = 25

Item No.	Exercises and relaxation	Frequency of correct responses								
		G	roup I (E	Booklet)		Group II (Planned tea			aching)	
		Pre test F	%	Pos F	st test	Pre test	st %	P F	ost	
		,,,				%	,,,			
1	Effect of salt on blood pressure a) Increases fluid retention b) Decreases circulatory blood volume c) Increases the blood pressure d) All of the above	5	20	11	44	3	12	16	64	
2	Average daily intake of salt a. 1 teaspoon/day b. 2 teaspoon/day c. 3 teaspoon/day d. Don't know	14	56	21	84	7	28	19	76	
3	Food items which can be consumed in plenty a. Fruits, vegetables, fruit juices b. Junk food, butter, cheese c. Cow's milk d. Bakery items	22	88	24	96	21	84	24	96	

Regarding the effect of salt on blood pressure during the pretest, in Group I 20%(5) of the samples gave the correct response to the question that is the effect of salt on blood pressure as it causes increase fluid retention. In the posttest the score changed to 44%(11) whereas the pretest score of Group II was 12%(3) and the post test score improved to 64%(16) which was a major improvement in comparison to Group I. With respect to average daily intake of salt it was found that in the pretest in Group I, 56%(14) of the samples gave the correct response that is one teaspoon per day should be the average daily intake of salt. After intervention this score changed into 84%(21) in the posttest and in Group II 28%(7) of the samples gave the correct response, which changed to 76%(19) in the post test. With regard to the food items which can be consumed in plenty, fruits, vegetables and fruit juices to be consumed in plenty was statyed by 88%(22) and 84%(21) of the samples in Group I and Group II respectively; whereas the scores changed in the posttest to 96%(24) for both Group I and Group II. With reference to the food items which can be consumed in moderate, in the pretest 40%(10) and 28%(7) samples in Group I and Group II respectively gave the correct response to the question, food items which can be consumed moderately are lime, vinegar, rock salt; whereas in the post test knowledge scores changed to 76%(19) and 88%(22) respectively in Group I and Group II. Regard to food items which are not permitted to be consumed, in the pretest 64%(16) and 52%(13) of the samples from Group I and Group II gave the correct response that dried fish and fried foods are not permitted to be consumed; whereas the knowledge score improved to 96% and 80% in the posttest.

Regarding the importance of small and frequent meals, 72%(18) and 48%(12) of the samples from Group I and Group II respectively stated that small and frequent meals were important to prevent discomfort and for easy digestion. The knowledge scores improved in the posttest to 84%(21) and 92%(23) from Group I and Group II respectively.

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