

“A Study To Evaluate The Effectiveness Of Planned Teaching Regarding Parenthood Preparation On Knowledge Among Primi Gravida Mothers And Their Spouses In Selected Anganwadi’s Of Sangli- Miraj- Kupwad Corporation Area”

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Abstract

“A study to evaluate the effectiveness of planned teaching regarding parenthood preparation on knowledge among primi gravida mothers and their spouses in selected anganwadi’s of Sangli- Miraj- Kupwad corporation area”. This study aims to investigate, existing knowledge regarding parenthood preparation. To assess the knowledge after planned teaching regarding parenthood preparation. To compare the pre-test knowledge score with post test knowledge score. To find out the association of Pre-test knowledge score with demographic variables. Hypothesis Of The Study- H_0 - There is no difference in the knowledge regarding parenthood preparation after planned teaching among primi gravida mothers and their spouses at 0.05 level of significance. H_1 - There is difference in the knowledge regarding parenthood preparation after planned teaching among primi gravida mothers and their spouses at 0.05 level of significance. The present study was carried out by using quantitative research approach with Quasi-experimental one group-pre-test-post-test-design was conducted. Total 80 samples were selected by using convenience sampling method. The data was collected from 40 primi gravida mothers and their spouses. Researcher considered inclusion and exclusion criteria to select samples for the study. Structured knowledge questionnaire was used to assess the knowledge. Study revealed that in Pre-test majority of participants (65%) had poor knowledge score, 35% had average knowledge score. And in Post test majority of participants (52.50%) had average knowledge score. And 47.50% had good knowledge score. The findings of the study showed that the post-test knowledge score was higher than the pre-test knowledge score. Hence the planned teaching had increased

knowledge score regarding the parenthood preparation. Their no association of pre test knowledge score and demographic variables of primi gravida mothers, spouses.

Keywords Knowledge, Planned teaching, Parenthood preparation, Primi gravida mothers and Spouses

Introduction:-

Pregnancy, Childbirth, and the Birth of New Child, Few events in life have as important effect on an individual as being a parent. It has been mentioned that parenting is the most difficult task any human would ever have. It is also the least prepared to start. The decision of becoming pregnant is the first step in planning for parenthood. ¹

According to Wright and Leahey (1994), the transition to parenthood is "the phase starting with the conception and ending with the few months after birth" to "the beginning of the transition with both the couple's decision to become pregnant and its ending when the infant is between two and three years old."²

Becoming a parent brings in one of several changes in both the parent's lives. Preparing for parenthood includes a series of actions, each of which poses its own set of special, delightful challenges and dilemmas. ¹ According to Nolan (1997), "the transition to parenthood is based on elements of the pregnancy itself, labour, and child birth, as well as general parenting skills." ²

According to WHO 2017, the woman who is pregnant, and both parents, are equally expectant and value their children. ³ According to Fabila V. Moshi, new parents experience a number of changes in their lives, including physical, social, and financial changes. ⁴

WHO 2007 and Persson and Dykes suggested in 2009 that men's involvement in maternity care strengthened the bond and relationship between mother, father, and child. ⁵ Sarkadi states in 2008 that father intervention in the parenting process impacts infant attachment and bonding. ⁶

According to studies conducted in Chennai in 2017, anxiety during childbirth is caused by a lack of knowledge and understanding about what is happening around woman, and it can result in a lack of support during birth. Prenatal care teaches about labour, how to cope with pain, and what to do before and after each stage of labor and delivery. This can reduce the anxiety associated with the baby's birth. ¹¹

Midwives could be able to help women to choose best prenatal class for them by sharing more information about them. Antenatal classes have recently been one of the main methods of planning for pregnancy and delivery. In previous seasons, there has been a shift towards antenatal classes

that focus exclusively on preparing couples for the adjustment to antenatal classes. So both pregnant women and spouses should prepare themselves for parenthood.

MATERIAL AND METHODS

In the study, quantitative research approach was used to A study to evaluate the effectiveness of planned teaching regarding parenthood preparation on knowledge among primi gravida mothers and their spouses in selected anganwadi's of Sangli- Miraj- Kupwad corporation area. Quasi Experimental one group pre-test post-test research design was used. The study consisted variables such as the independent variable i.e. planned teaching and dependent variable i.e. knowledge. Setting of the research study was selected Anganwadi's of sangli, miraj, kupwad corporation area.

The population of the study primi gravida mothers and their spouses. Primi-gravida mothers and their spouses who were willing to participate in study and PregnantmothersIrrespective of gestational age were included in the study while Participants received the formation through Garbhasanskar classes were excluded from the study. The sample size was calculated by using power analysis.

The study consisted of 80 samples in that 40 primi gravida mothers and 40 their spouses were selected by using Convenient sampling technique.

In this study the tool used for data collection was validated by the experts. The tool consists of two parts namely 1. Part A: Demographic variables, 2. Part B: structured knowledge questionnaire. The scoring for knowledge was based on correct and incorrect response. Each correct response carried a score of "one" and incorrect response scored "zero". Based on scores, knowledge was categorized as Poor (0-7), Average (8-16), Good (17-24).

In front of the institutional ethical committee, research proposal with research tool was presented. After approval of the institutional ethical committee the study was conducted and all the data gathered was been kept confidential. Samples were willingly involved in the research study. Pre-approval from the relevant superiors was obtained, as well as informed written consent from each sample.

Result:-

Table no 1: - Frequency and percentage distribution of demographic variables

N=80

Characteristics	Primi Gravida mothers		Spouses	
	f	(%)	f	(%)
Age (in Years)				
19 – 23	17	42.5	3	7.5
24 – 29	20	50	23	57.5
Above 30	3	7.5	14	35
Education				
Primary	5	12.5		0
Secondary	15	37.5	9	22.5
Graduate	18	45	21	52.5
Post graduate	2	5	10	25
Occupation				
Business	0	0	14	35
Government	4	10	4	10
Private	15	37.5	22	55
Housewife	21	52.5	0	0
Type of Family				
Joint	27	67.5	27	67.5
Nuclear	13	32.5	13	32.5
Monthly Income				
< = 5000		0.00		0.00
RS.5001 TO RS 15000	16	84.21	24	60.00
Above RS. 15001	3	15.78	16	40.00
Previous knowledge				
Yes	18	45.00	11	27.5
No	22	55.00	29	72.5
Source of information				
Family Members	15	37.5	3	7.5
Friends	7	17.5	2	5
Garbhansukar Book	6	15	0	0
Mass Media	9	22.5	11	27.5

Tables no 1: - Shows that 50% primi gravida mothers and 57.5 % of spouses was in age group of 24- 29 Yrs. 45% Of Primi gravida mothers and 52.5% spouses had completed their graduation. 52.5% of primi gravida mothers was housewife and 55 % of spouses was working in private sector. 67.5 % of Primi gravida mothers and spouses was from joint family. Maximum 84.21 % of primi gravida mothers and 60% of spouses had monthly income Rs.5001 – Rs. 15000.55 % of primi gravida mothers and 72.5 % of spouses had no any previous information regarding parenthood preparation. 37.5% of primi gravida mothers got information from family members. 27.5% spouses got information through mass media.

Table no:2Frequency and percentage distribution of pre test knowledge score

N=80

Level of Knowledge	Pre Test	
	f	(%)
Poor (0-7)	52	65.00
Average (8-16)	28	35.00

Table no 2: - Shows that in Pre-test majority of participants (65%) had poor knowledge score, 35% had average knowledge score and none of them had in good knowledge score.

Table no 3:- Frequency and percentage distribution of post test knowledge score

N=80

Level of Knowledge	Post test	
	f	(%)
Average (8-16)	42	52.50
Good (17-24)	38	47.50

Table no: - 3 shows that in Post test majority of participants (52.50%) had average knowledge score. And 47.50% had good knowledge score. And None of them had poor knowledge score in post test.

Table no 4:- Comparison between pre test and post test knowledge score

Knowledge score	Mean	S.D	t value	p value
Pre test	6.81	1.80	37.87	0.00001
Post test	16.31	2.25		

Table no 4 shows that mean value of pre-test knowledge score is 6.81 and post-test knowledge score is 16.36 and calculated 't' value is 37.87 and p value is 0.00001 which is less than 0.05 and shows significant at the level of 0.05. So, Hypothesis H0 is rejected and H1 is accepted that means planned teaching is effective to increase the knowledge regarding parenthood preparation among primi gravida mothers and their spouses. That means knowledge was improved after planned teaching.

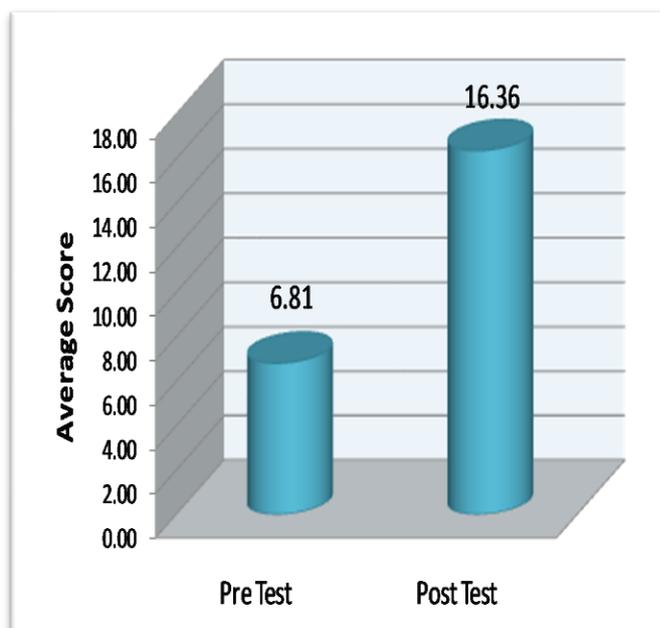


Figure No 1:-Comparison between pre test and post-test knowledge score.

Table no: - 5 Comparison of domain wise mean and S.D. of pre-test and post test

N=80

Domains	PRE TEST				POST TEST			
	MEAN		S.D		MEAN		S.D	
	Primi gravida mothers	Spouses	Primi gravida mother	Spouses	Primi gravida mothers	Spouses	Primi gravida mother	Spouses
Introduction	1.90	1.90	1.15	0.74	4.28	3.95	1.32	1.06
Physical preparation	2.24	2.43	0.64	0.68	3.03	3.43	0.83	0.87
Psychological preparation	0.30	0.33	0.65	0.53	1.95	1.73	0.90	0.85
Child birth preparation	0.60	0.58	0.71	0.75	2.23	1.88	0.77	0.85
Financial preparation	0.70	0.80	0.61	0.69	1.35	1.50	0.66	0.55
Supporting services	0.98	0.68	0.80	0.94	4.00	3.43	1.33	0.93

Table no 5 shows that in comparison of domain wise pre test and post test, the Introduction of parenthood preparation primi gravida mothers had mean value in pre test was 1.90 & in spouses 1.90, S.D was 1.15 in primi gravida mothers and 0.74 in spouses. In Post test the mean value of primi gravida mothers was increases as 4.28 & in spouses 3.95, S.D was 1.32 in primi gravida mothers and in spouses 1.06.

In physical preparation pre test mean of primi gravida mothers was 2.24 and spouses had 2.43. S.D was 0.64 Primi gravida mothers and 0.68 was in spouses. In post test primi gravida mothers mean was 4.28 and in spouses was 3.95 and S.D 0.83 in primi gravida mothers and 0.87 in spouse.

In Psychological preparation pre test mean of primi gravida mothers was 0.30 and spouses had 0.33. S.D was 0.65 primi gravida mothers and 0.53 was in spouses. In post test primi gravida mothers mean was 1.95 and in spouses was 1.73 and S.D 0.90 in primi gravida mothers and 0.85 in spouse.

In child birth preparation pre test mean of primi gravida mothers was 0.60 and spouses had 0.58. S.D was 0.71 primi gravida mothers and 0.75 was in spouses. In post test primi gravida mothers mean was 2.23 and in spouses was 1.88 and S.D 0.77 in primi gravida mothers and 0.85 in spouse.

In Financial preparation pre test mean of primi gravida mothers was 0.70 and spouses had 0.80. S.D was 0.61 primi gravida mothers and 0.69 was in spouses. In post test primi gravida mothers mean was 1.35 and in spouses was 1.50 and S.D 0.66in primi gravida mothers and 0.55in spouse.

In supporting services pre test mean of primi gravida mothers was 0.98 and spouses had 0.68. S.D was 0.80 primi gravida mothers and 0.94 was in spouses. In post test primi gravida mothers mean was 4.00 and in spouses was 3.43 and S.D 1.33 in primi gravida mothers and 0.93 in spouse.

Table no: - 6 Associationbetween pre-test knowledge score and demographic variables of Primi gravidamothers N=40

SN	Variables	Poor	Avg.	Chi square	df.	p value	Significance
1	Age			2.51	2	0.286505	not significant at p> .05 Accept H0 at 5% L.O.
	18 Yrs to 23 Yrs.	11	6				
	24 Yrs to 29 Yrs.	8	12				
	Above 30 Yrs.	2	1				
2	Education			3.77	3	0.287395	The result is not significant at p> .05 Accept H0 at 5% L.O.
	Primary	4	1				
	Secondary	8	7				
	Graduate	9	9				
	Postgraduate		2				
3	Occupation			0.55	2	0.759572	The result is not significant at p> .05 Accept H0 at 5% L.O.
	Government	2	2				
	Housewife	10	11				
	Private	9	6				
4	Type of family			2.16	1	0.141645	The result is not significant at p> .05 Accept H0 at 5% L.O.
	Joint	12	15				
	Nuclear	9	4				
5	Monthly Income			2.43	1	0.119033	The result is not significant at p> .05 Accept H0 at 5% L.O.
	Above RS. 15001	5	9				
	RS.5001 To RS 15000	16	10				
6	Previous knowledge			0.08	1	0.777297	The result is not significant at p> .05 Accept H0 at 5% L.O.
	Yes	9	9				

***Significant at 0.05 level of Significance**

Table no. 6 - Shows that their was no association of pre test knowledge score and demographic variables of primi gravida mothers.

Table no: - 7 Association between pre-test knowledge score and demographic variables of spouses

N=40

Sr. no.	Variables	Poor	Average	Chi square value	df.	p value	Significance
1	Age			0.26	2	0.722527	not significant at p> .05 Accept H0 at 5 % L.O.
	18 Yrs to 23 Yrs	2	1				
	24 Yrs to 29 Yrs	12	11				
	Above 30 Yrs	8	6				
2	Education			0.16	2	0.923116	not significant at p> .05 Accept H0 at 5 % L.O.
	Secondary	5	4				
	Graduate	11	10				
	Post Graduate	6	4				
3	Occupation			0.79	2	0.677057	not significant at p> .05 Accept H0 at 5 % L.O.
	Business	7	7				
	Government	3	1				
	Private	12	10				
4	Type of family			1.58	1	0.210207	not significant at p> .05 Accept H0 at 5 % L.O.
	Joint	13	14				
	Nuclear	9	4				
5	Monthly Income			0.61	1	0.438578	not significant at p> .05 Accept H0 at 5 % L.O.
	Above RS. 15001	10	6				
	RS.5001 TO RS 15000	12	12				
6	Previous knowledge			0.56	1	0.458318	not significant at p> .05 Accept H0 at 5 % L.O.
	Yes	5	6				

Table no. 7– Showed that their no association of pre test knowledge score and demographic variables of spouses.

Discussion:-

The analysis of the demographic data of the study samples gave a scheme about the general character of primigravida mothers and their spouses.

The following are the findings of the study.

Age: -

According to the age 42.5% primi gravida mothers were in age group of 19-23 yrs. Majority i.e., 50% were in 24-29 yrs. & 7.5% were above the age of 30 yrs. And 57.5 % of spouses were in age group of 24-29 yrs. of age. 7.5% were in 22-23yrs. of age and 35% of spouses were above the 30 yrs. of age.

Education: -

Majority of 45% Primi gravida mothers were completed their graduation. 12.5% had primary education. 37.5% had secondary education. 5% had completed their post-graduation. 22.5% spouses had primary education. 52.5% had completed their graduation. And 25% had completed their post-graduation.

Occupation: -

Among primi gravida mothers 21% was housewife, 4% was working in government sector, and 15% was working in private sector. And majority 55% of spouses was working in private area. 35% had their own business, 10% was working in government sector.

Type of Family: -

Maximum number of primi gravida mothers and their spouses 67.5% were lived in joint family. And 32.5% were lived in nuclear family.

Monthly Family Income: -

Primi gravida mothers 84.21% of them was having monthly income Rs.5001-15000, 15.78% of them having monthly income more than Rs. 15001. And the spouses 60% were having Rs.5001-Rs.15000, 40% of them having more than Rs. 15001 income.

Previous Knowledge: -

There was 55% of primi gravida mothers and 72.5% of spouses did not any information related to parenthood preparation. The source of information of parenthood preparation of primi gravida mothers 37.5% were family members & 17.5% were friends, 15% were Garbhasanskar books and 22.5% were mass media. And spouses 7.5% were family members, 5% were friends and 27.5% were mass media.

Thus, we can conclude that, there is need to educate the primi gravida mothers and their spouses related to parenthood preparation.

Analysis of Finding: -

Objective 1: -to assess the existing knowledge regarding parenthood preparation.

In this study in pre-test 65% of primi gravida mothers and the spouses had poor (0-7) average score and 35% had average (8-16) knowledge score. None of them had in good knowledge score.

In this study the domains of parenthood preparations are includes as, introduction, physical preparation, psychological preparation, childbirth preparation, financial preparation and supporting services.

In pretest the primi gravida mothers and spouses had different knowledge score according to domain. Primigravida mothers had poor knowledge i.e., 65% and 77.50% of spouses had poor knowledge regarding introduction to parenthood preparation. In physical preparation 92.50% of primi gravida mothers and 90% spouses had average knowledge score. Psychological preparation 95% of primi gravida mothers and 97.50 % had poor knowledge score. 92.50% of primi gravida

mothers and 90% spouses had poor knowledge score in childbirth preparation whereas in financial preparation 55% primi gravida mothers and 50% of spouses had average knowledge score. In supporting services 80% primi gravida mothers and 82.50% of spouses had poor knowledge score.

In this study in pre-test the primi gravida mothers have more knowledge score as compare to the spouses in introductions of parenthood preparation, psychological preparation, supporting. The physical preparation, childbirth preparation, financial preparation spouses had good knowledge score as compare to primi gravida mothers.

The research conducted in Alexandria shows that the primi gravida women (88.2%) were more likely to have low knowledge in relation to antenatal care comparison with 11.8% of women whose frequency was less than 5. The Research concluded that antenatal education for females with primigravida is required. ³⁶

Objectives: - 2to assess the knowledge after planned teaching regarding parenthood preparation.

In this study post-test knowledge score shows that 52.50% of primi gravida mothers and their spouses had average knowledge score. And 47.50% had good knowledge score. And none of them had poor knowledge score in post-test..

The distribution of domain wise post-test knowledge 42.50% of primi gravida mothers and 62.50% of spouses had average knowledge score. In physical preparation 75% of primi gravida mothers and 57.50% of spouses had average knowledge score. In Psychological preparation 42.50% of primi gravida mothers and 45% spouses had average knowledge score. In childbirth preparation 42.50% of primi gravida mothers had good knowledge score and spouses had 42.50% of average knowledge score. In financial preparation 45% of primi gravida mothers had average and good knowledge score and 52.50% of spouses had in good knowledge score. In supporting services 82.50% primi gravida mothers had in good knowledge and 52.50% spouses had in average knowledge score.

In this study as per domain the primi gravida mothers had more knowledge as compare to spouses in Introduction of parenthood preparation, physical preparation, childbirth preparation and supporting services. And spouses had more knowledge in psychological preparation, financial preparation.

A research was done in the Udupi to assess the efficiency of childbirth training classes in terms of behavioral responses during the first stage of labor among women with primigravida. The results of the analysis showed that statistically significant Difference in behavioral response in the first stage of labor between the groups, nature of delivery and neonatal outcome before and after training

classes for infants. It was concluded that a safer, more optimistic childbirth preparation class could be developed.³⁷

Objectives: - 3To compare the pre-test knowledge score with post-test knowledge score

The study shows that mean value of pre-test knowledge score is 6.81 and post-test knowledge score is 16.36 and calculated 't' value is 37.87 and p value is 0.00001 which is less than 0.05 and shows significant at the level of 0.05. So, Hypothesis H₀ is rejected and H₁ is accepted that means planned teaching is effective to increase the knowledge regarding parenthood preparation among primi gravida mothers and their spouses.

Objective no 4: - To find out the association of Pre-test knowledge score with demographic variables.

The study shows that there is no association of pre-test knowledge score and demographic variables of primi gravida mothers and their spouses. The demographic variables are age, education, occupation, type of family, monthly income and previous information regarding parenthood preparation.

Conclusion: -

The study concludes that 65% Primi gravida mothers and their spouses had poor knowledge in pre-test and 47.50% had good knowledge score in post-test. So, the primi gravida mothers and spouses need to be concentrate on parenthood preparation and have prepare themselves physically, psychological, childbirth, financially and may utilize the government schemes for betterment of health of both mother and child. The spouses also have positive attitude towards pregnancy and support women. And both should be prepared for parenthood.

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Conflict of Interest:

No conflict of interest involved.

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References:-

1. Bright Beginnings 1: Preparing for Parenthood (FS601, Reviewed March 2016)

<https://www.ag.ndsu.edu/publications/kids-family/bright-beginnings-1-preparing-for-parenthood>.

2. Angela Afua Entsieh, Inger Kristensson Hallström, First-time parents' prenatal needs for early parenthood preparation-A systematic review and meta-synthesis of qualitative literature, Midwifery, Volume 39, 2016, Pages 1-11,
<https://www.sciencedirect.com/science/article/pii/S0266613816300341>
3. Poduval J, Poduval M. Working mothers: how much working, how much mothers, and where is the womanhood?. Mens Sana Monogr. 2009;7(1):63-79. doi:10.4103/0973-1229.41799
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3151456/>
4. Moshi FV, Ernest A, Fabian F, Kibusi SM. Knowledge on birth preparedness and complication readiness among expecting couples in rural Tanzania: Differences by sex cross-sectional study. PLoS One. 2018 Dec 28;13(12):e0209070. doi: 10.1371/journal.pone.0209070. PMID: 30592725; PMCID: PMC6310299
<https://pubmed.ncbi.nlm.nih.gov/30592725/>
5. Petra Pålsson, Eva K. Persson, Maria Ekelin, Inger Kristensson Hallström, Linda J. Kvist, First-time fathers experiences of their prenatal preparation in relation to challenges met in the early parenthood period: Implications for early parenthood preparation, Midwifery, Volume 50, 2017, Pages 86-92, ISSN 0266-6138,<https://doi.org/10.1016/j.midw.2017.03.021>.
(<https://www.sciencedirect.com/science/article/pii/S0266613817302346>)
6. JOUR, Sarkadi, Anna, Kristiansson, Robert, Oberklaid, Frank, Bremberg, Sven, 2008/03/01 , 153, 8, Fathers' Involvement and Children's Developmental Outcomes: A Systematic Review of Longitudinal Studies volume - 97, 10.1111/j.1651-2227.2007.00572.x, Acta paediatrica (Oslo, Norway : 1992)
https://www.researchgate.net/publication/5795105_Fathers'_Involvement_and_Children's_Developmental_Outcomes_A_Systematic_Review_of_Longitudinal_Studies/citation/download
7. Widarsson M, Engström G, Tyden T, Lundberg P, Hammar LM. "Paddling upstream" : Fathers' involvement during pregnancy as described by expectant fathers and mothers. Journal of Clinical Nursing [Internet]. 2015;24(7-8):1059-68. Available from:
<http://urn.kb.se/resolve?urn=urn:nbn:se:uu:diva-237058>
8. Chris May, Richard Fletcher, Preparing fathers for the transition to parenthood: Recommendations for the content of antenatal education, Midwifery, Volume 29, Issue 5, 2013, Pages 474-478, ISSN 0266-6138, <https://doi.org/10.1016/j.midw.2012.03.005>.
<https://www.sciencedirect.com/science/article/pii/S0266613812000472>

9. First-time fathers' experiences of their prenatal preparation in relation to challenges met in the early parenthood period: implications for early parenthood preparation, Department of Health Sciences, Faculty of Medicine, Lund University, Box 157, 221 00 Lund, Sweden, page no:- 3
<https://portal.research.lu.se/portal/files/37685121/24905497.pdf>
10. Pålsson, Petra et al. "I Didn't Know What to Ask About": First-Time Mothers' Conceptions of Prenatal Preparation for the Early Parenthood Period." *The Journal of perinatal education* vol. 27,3 (2018): 163-174. doi:10.1891/1058-1243.27.3.163
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6193362/>
11. **N Sujata, Sandhya Gupta** ([All India Institute of Medical Sciences](#)), **Mamta Sood** ([All India Institute of Medical Sciences](#)) January 2015
[International Journal of Nursing Education](#) 7(1):225
DOI: [10.5958/0974-9357.2015.00046.X](https://doi.org/10.5958/0974-9357.2015.00046.X)
https://www.researchgate.net/publication/273300560_A_Retrospective_Study_to_assess_the_Delay_in_Treatment_Seeking_and_Factors_Contributing_to_Delay_in_Seeking_Treatment_among_the_Caregivers_of_Persons_Having_First_Episode_Psychosis
12. Svensson J, Barclay L, Cooke M. Effective antenatal education: strategies recommended by expectant and new parents. *J Perinat Educ.* 2008;17(4):33-42. doi:10.1624/105812408X364152
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2582411/>
13. Angela Afua Entsieh, Inger Kristensson Hallström, First-time parents' prenatal needs for early parenthood preparation-A systematic review and meta-synthesis of qualitative literature, *Midwifery*, Volume 39, 2016, Pages 1-11, ISSN 0266-6138,
<https://doi.org/10.1016/j.midw.2016.04.006>.
<https://www.sciencedirect.com/science/article/pii/S0266613816300341>
14. A Retrospective Study to assess the Delay in Treatment ...
https://www.researchgate.net/publication/273300560_A_Retrospective_Study_to_assess_the_Delay_in_Treatment_Seeking_and_Factors_Contributing_to_Delay_in_Seeking_Treatment_among_the_Caregivers_of_Persons_Having_First_Episode_Psychosis
15. [Utilization of Health Care Services by Rural Population-A Study from Western Maharashtra](#), MB Shinde, PM Durgawale *INTERNATIONAL EDITORIAL ADVISORY BOARD* 7 (1), 139
16. [Bino Thomas, Dinesh Bhugra](#) Preparation for parenthood programme: experiences from southern India
2014 Aug;26(4):493-9. *Affiliations* expand
PMID: 25137116, DOI: [10.3109/09540261.2014.924097](https://doi.org/10.3109/09540261.2014.924097)
<https://pubmed.ncbi.nlm.nih.gov/25137116/>

17. Trends in maternal mortality: 2000 to 2017: estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division. Geneva: World Health Organization; 2019
<https://www.who.int/news-room/fact-sheets/detail/maternal-mortality>
18. Mandy Mihelic^{1*}, Alina Morawska¹ and Ania Filus¹BMC pregnancy and childbirth Preparing parents for parenthood: protocol for a randomized controlled trial of preventative parenting intervention for expectant parents Mihelic et al. BMC Pregnancy and Childbirth (2018) 18:311
<https://doi.org/10.1186/s12884-018-1939-2>
19. published version (APA): Pålsson, P., Persson, E. K., Ekelin, M., Kristensson Hallström, I., & Kvist, L. J. (2017). First-time fathers experiences of their prenatal preparation in relation to challenges met in the early parenthood period: Implications for early parenthood preparation. Midwifery, 50, 86-92.<https://doi.org/10.1016/j.midw.2017.03.021>
20. Deave, T., Johnson, D. & Ingram, J. Transition to parenthood: the needs of parents in pregnancy and early parenthood. BMC Pregnancy Childbirth **8**, 30 (2008).
<https://doi.org/10.1186/1471-2393-8-30>
DOI <https://doi.org/10.1186/1471-2393-8-30>
21. Smitha Philip S. Learning needs of primigravidae regarding the preparation for parenthood. RGUHS 2007. [online].
<http://52.172.27.147:8080/jspui/bitstream/123456789/1421/1/CDNNOBG00026.pdf>
Available from: URL:<http://hdl.handle.net/1421>.
22. Tanha FD, Mohseni M, Ghajarzadeh M, Shariat M. The effects of healthy diet in pregnancy. J Family Reprod Health. 2013 Sep;7(3):121-5. PMID: 24971114; PMCID: PMC4064785.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4064785/>
<https://pubmed.ncbi.nlm.nih.gov/24971114/>
23. Gustafsson MK, Stafne SN, Romundstad PR, Mørkved S, Salvesen K, Helvik AS. The effects of an exercise programme during pregnancy on health-related quality of life in pregnant women: a Norwegian randomised controlled trial. BJOG. 2016 Jun;123(7):1152-60. doi: 10.1111/1471-0528.13570. Epub 2015 Aug 12. PMID: 26265465.
<https://pubmed.ncbi.nlm.nih.gov/26265465/>
24. PREVALENCE OF SEXUALLY TRANSMITTED DISEASES (STDs) IN PREGNANT WOMEN ATTENDING THE STD CLINIC AT THE INSTITUTE OF SEXUALLY TRANSMITTED DISEASES IN THE ERA OF AIDS April 2013, [Journal of Evolution of Medical and Dental Sciences](https://doi.org/10.14260/jemds/513) 2(13):2172-2192 DOI: 10.14260/jemds/513

<https://www.researchgate.net/publication/269521381> PREVALENCE OF SEXUALLY TRANSMITTED DISEASES STDs IN PREGNANT WOMEN ATTENDING THE STD CLINIC AT THE INSTITUTE OF SEXUALLY TRANSMITTED DISEASES IN THE ERA OF AIDS.

25. Need for Psychological Assessment during Pregnancy-A Nursing Perspective, January 2016
Prabhuswami Hiremath, Krishna Institute Of Medical Sciences University
<https://www.researchgate.net/publication/320585842>
26. Gayathri KV, Raddi AS, Metgud MC. Effectiveness of planned teaching programme on knowledge and reducing anxiety about labour in selected hospitals of Belgaum. [online]. Available from: [URL:http://www.jaypeejournal.com](http://www.jaypeejournal.com)
27. Robab Hassanzadeh, Fatemeh Abbas-Alizadeh, Shahla Meedya, Sakineh Mohammad-Alizadeh-Charandabi, Mojgan Mirghafourvand, Primiparous women's knowledge and satisfaction based on their attendance at childbirth preparation classes, Nursing Open, 10.1002/nop.2.787, 0, 0,
[Wiley Online Library](http://www.wileyonlinelibrary.com)
<https://obgyn.onlinelibrary.wiley.com/doi/full/10.1002/ijgo.13016>
28. Maartje van Vulpen, Mariëlle Heideveld-Gerritsen, Jeroen van Dillen, Sabine Oude Maatman, Henrietta Ockhuijsen, Agnes van den Hoogen, First-time fathers' experiences and needs during childbirth: A systematic review, Midwifery, Volume 94, 2021, 102921, ISSN 0266-6138,
<https://doi.org/10.1016/j.midw.2020.102921>.
<https://www.sciencedirect.com/science/article/pii/S026661382030293X>
29. Chiu C, Scott NA, Kaiser JL, et al. Household saving during pregnancy and facility delivery in Zambia: a cross-sectional study. Health Policy Plan. 2019;34(2):102-109. doi:10.1093/heapol/czz005
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6481286/>
30. Navinkumar Angadi*, Shubha Davalgi, Raghavendra S. K. , Determinants of utilization of maternity benefit schemes among mothers in urban slums of Davangere city, Karnataka, India, Department of Community Medicine, J. J. M. Medical College, Davangere 577004, Karnataka, India
DOI: <http://dx.doi.org/10.18203/2394-6040.ijcmph20160627>
<https://www.ijcmph.com/index.php/ijcmph/article/view/771/656>
31. Draubathai, M (2015) A study to evaluate the effectiveness of structured teaching programme on knowledge regarding prevention of "torch" infections during pregnancy among

antenatal mothers in a selected hospital at Erode district. Masters thesis, Dharmarathnakara Dr.Mahalingam Institute of Paramedical Sciences and Research, College of Nursing, Erode.

<http://repository-tnmgrmu.ac.in/3209/1/3003216301321551DraubathaiM.pdf>

32. [Sindhya, V Byju](#) , A study to assess the effectiveness of planned teaching programme on knowledge regarding planned parenthood among primigravida women in selected rural areas at mangalore, 2013<http://hdl.handle.net/123456789/9013>

33. Adin L. Copying strategies adopted by primigravida women after a planned teaching programme on childbirth process. Unpublished M. Sc. Nursingdissertation submitted to RGUHS; 2007.

34. Tamrakar A. Knowledge of primigravida women regarding selected aspects of safe motherhood. Kolar. Unpublished M. Sc. nursing dissertation submitted to RGUHS; 2007.

35. Lasrado VJ. Factors influencing lowbirth for primigravida women. Unpublished M. Sc. nursing dissertation submitted to RGUHS; 2005.

Thomas MR. Effectiveness of a planned teaching programme on selected prenatal exercise to gravid women in selected hospital of Mumbai.

Unpublished M. Sc. nursing dissertation submitted to RGUHS, Bangalore; 2004.

36. el-Sherbini AF, el-Torky MA, Ashmawy AA, Abdel-Hamid HS. Assessment of knowledge, attitudes and practices of expectant mothers in relation to antenatal care in Assiut governorate. J Egypt Public Health Assoc. 1993;68(5-6):539-65. PMID: 7775880.

<https://pubmed.ncbi.nlm.nih.gov/7775880/#:~:text=Most%20of%20the%20primigravida%20women,gravidity%20was%20less%20than%205.&text=30.5%25%20reported%20prenatal%20care%20to,promotion%20for%20mother%20and%20fetus>.

37. Preparing Primigravid Women for Childbirth: Behavioral Responses to Labour Pain and Outcome of Labour Author: Eva Chris Karkada; Judith Angelitta Noronha; Sonia R B Dsouza; R B Dsouza Affiliation: Department of OBG Nursing, Manipal College of Nursing, Manipal University, Mangalore Source: International Journal of Nursing Education ; Vol 2 No 2, 2010 ; PP: 15-17 Peer Reviewed Keywords: Childbirth Preparation Class; Primigravid Women; Behavioural Responses in Labour; Outcome of Labour.