A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE AND ATTITUDE REGARDING MIDWIFERY LED CARE MODEL AMONG STAFF NURSES AT SMVMCH, PUDUCHERRY

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ABSTRACT

Midwifery refers to the care provided to the women during pregnancy, childbirth and the post partum period, and vast advances are required to improve maternal and newborn survival to reduce high rates of maternal and neonatal morbidity, curb over-medicalization of care, and ensure dignity and respect in pregnancy and childbirth. In this paper, we discuss midwifery led units (MLUs) is the global maternal health context as a strategic way to offer women-centered care and maximize the health outcomes of women and infants. The main study was conducted at SMVMCH, Puducherry. The period of data collection was 6 weeks, and the data were collected from the 60 staff nurses by using knowledge questionnaires and 5 point likert scale was administered and educated through structured teaching programme on knowledge and attitude regarding midwifery led care model on the first day conducted pre-test was done after the pre test on the same day the structured teaching programme given. On the seven day post-test was conducted ,by using purposive sampling technique. Represents the frequency and percentage wise distribution level of post test, 96.7% had adequate level of knowledge and 3.3% had moderately adequate level of knowledge. the total mean percentage of the scores i.e. 51% in pre test and 96% post test. The mean post test attitude score of 54(90%) and mean pre test attitude score 46(76.7%) p value is at 0.0 or 0.05 at the level of significant. The study shows that staff nurses have adequate level of knowledge and attitude in post test when compared to pre test regarding MLCM .This Study revealed that STP can be used as an effective teaching learning material for others and staff nurses.

Keywords: midwifery led care model, staff nurses.
INTRODUCTION

Midwifery refers to the health care provided to women during pregnancy, childbirth and the postpartum period, and vast advances are required to improve maternal and newborn survival, reduce high rates of maternal and neonatal morbidity, curb over-medicalization of care, and ensure dignity and respect in pregnancy and childbirth. We discuss midwifery-led units (MLUs) in the global maternal health context as a strategic way to offer women-centered care and maximize the health outcomes of women and infants. A midwife-led model of care means that the midwifery leads the health-care professional, responsible for the planning, organization and delivery of care given to a woman from the initial booking of antenatal visits to postnatal period. The midwifery-led model of care is woman-centered and based on the premise of pregnancy and childbirth that are normal life events. Midwifery-led care can address these issues by promoting quality of care through provision of women-centered care and promoting natural birth and this model of care is well supported by global evidence.

Midwifery-led care is a high-certainty, evidence-based strategy to improve maternity care. The universal philosophy of midwives emphasizes care that promotes normal physiological pregnancy and labor and supports the natural ability of women to experience birth with minimum or no routine intervention. Midwives practice holistic care guided by the ethical principles of justice, equity, and respect for human dignity, and their practice is grounded in continuous education and the use of scientific research and evidence. The International Confederation of Midwives (ICM) offers standards for rigorous, competency-based education to ensure that midwives are able to provide optimal care, and therefore posit that midwives “are the professionals of choice for childbearing women in all areas of the world”. A recent WHO report outlines a seven-step action plan to strengthen the quality of midwifery education to these international standard. Ensuring that all midwives have core competencies for practice is essential to realizing three global health initiatives: WHO’s Global Strategy for Women’s, Children’s and Adolescent’s Health 2016–2030, the Sustainable Development Goals and Universal Health Care Coverage by 2030.

Midwifery-led care model include pregnancy and childbirth as normal physiological events in a woman’s life and its make a more positive approach towards childbirth. Midwives work with women’s in promotions of reproductive health, preconception care, antenatal care, postnatal care including newborn care, and family planning. Midwifery-led units can be conceived as a response to the phenomenon coined by The Lancet’s Maternal Health Series as “too much, too soon,” which refers to care before, during and after childbirth that is too much, unnecessary, inappropriate, and possibly even harmful. It is one extreme in maternity care, with “too little, too late” at the other extreme. Midwifery Led Units promote women-centered care, choice, control and continuity of care, and from a feminist perspective counter the prevailing culture of care in specialized hospitals where a high level of technological and medicalized birth practices, emblematic of patriarchy, is valued. Anecdotal evidence suggests that grassroots efforts by midwives, who have witnessed the wide spread abuse and disrespect of women in obstetric facilities and lack of evidence-based care, are driving the move toward MLUs in hospitals.

The government of India initiated steps for the implementation of midwifery care through midwifery units in public sector. The guidelines for Midwifery services in India, published in 2018
provide strategies framework for practice education and quality assurance of midwifery services in India.

**Aim of the Study**

The aim of the study was to assess the knowledge and attitude regarding midwifery led care model among staff nurses.

**Objectives**

- To assess the existing level of knowledge and attitude regarding midwifery led care model among staff nurse.
- To evaluate the effectiveness of structure teaching programme regarding midwifery led care model among staff nurses.
- To correlate the level of knowledge and attitude regarding midwifery led care model among staff nurse.
- To associate the level of knowledge and attitude regarding midwifery led care model with their selected demographic variables.

**HYPOTHESIS**

- \(H_1\) - There will be significant difference between the level of knowledge and attitude before and after administering structured teaching programme regarding midwifery led care model among staff nurse.
- \(H_2\) – There will be significant correlation between knowledge and attitude regarding midwifery led care model among staff nurse after administering structure teaching programme.
- \(H_3\) – There will be a significant association in knowledge and attitude regarding midwifery led care model among staff nurse with their selected demographic variables.

**METHODODOLOGY**

The selection of research approach is the basic procedure for conducting research enquiry. A research approach gives information about the data to collect, and how to analyst it also suggests possible conclusions to be drawn from the data. In view of the nature of the problem selected for the study and the objectives to be accomplished, was considered the best to determine the effectiveness of structure teaching programme.

A quantitative research approach was considered as appropriate for the present study.

**RESEARCH DESIGN**

In the present study, pre-experimental (one group pre test and post test) designs was selected for the study. The primary objective of the study was to find the effectiveness of structure teaching programme. The study is presented in the table as follows.
Pre-experimental one group pre-test and post test designs

<table>
<thead>
<tr>
<th>Group</th>
<th>Pre-test-day one</th>
<th>Intervention-day one</th>
<th>Post test-day seven</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-experimental</td>
<td>0&lt;sub&gt;1&lt;/sub&gt;</td>
<td>X</td>
<td>0&lt;sub&gt;2&lt;/sub&gt;</td>
</tr>
</tbody>
</table>

Key: 0<sub>1</sub> - Assessment of knowledge and attitude by pre-test.
X - Structure teaching programme regarding midwifery led care model.
0<sub>2</sub>- Assessment of knowledge and attitude by post-test.

The study design depicted in table show that, on the day pre-test was given in the form of structured administered questionnaires and 5 point likert scale on midwifery led care model. On the day Structure teaching programme was administered. On day seven, a post-test was administered to assess the gain in knowledge and attitude using the same structured administered questionnaires and 5 point likert scale.

**RESEARCH SETTING**

The study will be conducted at Sri ManakulaVinayagar Medical College and Hospital, It consist of 1050-bedded hospital in Puducherry. The population of the study all Staff nurses working at SMVMCH, Puducherry. sample size is the number of subjects involved in the study. sample size consist of 60 staff nurses. Sampling refers to the process of selecting a portion of the population to represent the entire population. Sampling technique chosen was purposive sampling..

**TOOL DESCRIPTION**

The structure administered questionnaire consists of two section.

**Section - A:** It consist of demographic data of the Staff nurses includes age, gender, educational qualification, designation, year of experience, duration of working experience on obstetrics and gynaecology department, previously exposure to any training programme on midwifery led care model and sources of information.

**Section – B:**

**Part- A:** It consist of data on level of knowledge questionnaires regarding midwifery led care model contains 30 items and each correct answer will score one mark. Highest mark is 30 and lowest mark is zero.

**Part –B:** It consist of 5 point likert scale , to assess the attitude of staff nurses regarding midwifery led care model. It contains 10 positive items 10 and 10 negative items . The positive items are responses strongly agree-5, agree -4, neutral -3 disagree -2, strongly disagree -1 and the negative items response are strongly agree-5, agree -4, neutral -3, disagree -2, strongly disagree -1
Data collection procedure

The data collection done with the permission to conduct the study was obtained from authorities of the concerned person Sri Manakula Vinayagar Medical college and Hospital, Puducherry. 60 staff nurses were selected by using purposive sampling techniques and according to the inclusion and exclusion criteria and after introducing and explain the purpose of the study. The tool consists of demographic variables and question variables were administered to respondents data was collected.

RESULTS AND DISCUSSION

Frequency and percentage wise distribution of level of knowledge regarding midwifery led care model among staff nurses.

In pre test, Majority of staff nurse 45(75%) had moderately adequate level of knowledge and 15 (25%) had inadequate level of knowledge. In posttest, Majority of staff nurse 58(96.7%) had adequate level of knowledge and 2 (3.3%) had moderately adequate level of knowledge respectively.

![Figure 4: Percentage wise distribution of level of knowledge regarding midwifery led care model among staff nurses](image)

Frequency and percentage wise distribution of level attitude regarding midwifery led care model among staff nurses.

In pre test, Majority of staff nurse 46(76.7%) had favorable level of attitude and 14 (23.3%) had satisfactory level of attitude. In posttest, Majority of staff nurse 54(90%) had satisfactory level of attitude and 6 (10%) had favorable level of attitude respectively.
Figure 5: Percentage wise distribution of level of knowledge regarding midwifery led care model among staff nurses.

Comparison of the effectiveness of structured teaching programme on knowledge and attitude regarding midwifery led care model among staff nurses.

(N=60)

<table>
<thead>
<tr>
<th>EFFECTIVENESS</th>
<th>GROUP</th>
<th>MEAN</th>
<th>STANDARD DEVIATION</th>
<th>Pairedt test</th>
<th>df</th>
<th>‘p’ VALUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>KNOWLEDGE</td>
<td>Pre test</td>
<td>15.56</td>
<td>3.104</td>
<td>-25.604</td>
<td>59</td>
<td>0.000**</td>
</tr>
<tr>
<td></td>
<td>Posttest</td>
<td>28.41</td>
<td>2.172</td>
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<td></td>
<td>HS</td>
</tr>
<tr>
<td>ATTITUDE</td>
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<td>60.45</td>
<td>5.567</td>
<td>-16.701</td>
<td>59</td>
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<tr>
<td></td>
<td>Posttest</td>
<td>77.95</td>
<td>6.713</td>
<td></td>
<td></td>
<td>HS</td>
</tr>
</tbody>
</table>

***p < 0.001 Highlysignificant

the knowledge score calculated paired ‘t’ test value of t = -25.604 shows statistically highly significant difference between Comparison of the effectiveness of structured teaching programme on knowledge regarding midwifery led care model among staff nurses respectively. The attitude score calculated paired ‘t’ test value of t = -16.701 shows statistically highly significant difference between Comparison of the effectiveness of structured teaching programme on attitude regarding midwifery led care model among staff nurses respectively.
Figure 6: Comparison of the effectiveness of structured teaching programme on knowledge and attitude regarding midwifery led care model among staff nurses.

Correlation between knowledge and attitude regarding midwifery led care model among staff nurses. (N=60)

<table>
<thead>
<tr>
<th>Test</th>
<th>Correlation between knowledge and attitude regarding midwifery led care model among staff nurses</th>
<th>MEAN</th>
<th>STANDARD DEVIATION</th>
<th>‘r’ VALUE</th>
<th>‘p’ VALUE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-test</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge</td>
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<td>3.104</td>
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<td>0.895</td>
</tr>
<tr>
<td>Attitude</td>
<td></td>
<td>60.45</td>
<td>5.56</td>
<td></td>
<td>NS</td>
</tr>
<tr>
<td>Post-test</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge</td>
<td></td>
<td>28.41</td>
<td>2.17</td>
<td>0.606</td>
<td>0.000**</td>
</tr>
<tr>
<td>Attitude</td>
<td></td>
<td>77.95</td>
<td>6.71</td>
<td></td>
<td>HS</td>
</tr>
</tbody>
</table>

**p < 0.001 Highly Significant, NS-Non Significant

Correlation between pre test knowledge and pre test attitude regarding midwifery led care model among staff nurses is (15.56±3.104) and (60.45±5.56). Correlation between pre test knowledge and pre test attitude indicates the positive correlation and shows the results pearson correlation r-value is (0.017), p-value is (p=0.895) are statistically not significant.

Correlation between post test knowledge and post test attitude regarding midwifery led care model among staff nurses is (28.41±2.17) and (77.95±6.71). Correlation between post test knowledge and post test attitude indicates the positive correlation and shows the results pearson correlation r-value is (0.606), p-value is (p=0.000) are statistically highly significant.
CONCLUSION:

The pre-experimental research design was selected for this study to assess the effectiveness of structured teaching programme on knowledge and attitude regarding midwifery led care model among staff nurses, at Sri Manakula Vinayagar Medical college and Hospital, Puducherry.

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