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Original Article

A study to assess the effectiveness of planned teaching programme on water birth among adolescent girls in a selected college at Mangalore



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ABSTRACT

The experience of pain during labour is a complex, individual and multifaceted response to sensory stimuli generated during childbirth. Despite the fact that labour is painful for most women, a powerful myth of painless childbirth still prevails. Many alternative methods of pain relief are available that are safe and inexpensive. One of them is water birth. Water birth is the process of giving birth in a tub of warm water. The theory behind water birth is that the baby has been in the amniotic sac for nine months and birthing into a similar environment is gentler for the baby and less stressful for the mother. Adolescence is the time to prepare for understanding great responsibilities, a time for exploration and widening horizons, and a time to ensure healthy all round development. Puberty is also a time of behavioural changes when the reproductive capacities get established. Midwives are 'with woman', providing the family with supportive and helpful relationships as they share the deep and profound experiences of childbirth. To become skilled helpers nursing students need to develop reflective skills and valid midwifery knowledge grounded in their personal experiences and practice.

Aim: The aim of the study was to assess the effectiveness of planned teaching programme on water birth among adolescent girls in a selected college at Mangalore.

Method: An evaluative approach with quasi experimental, pre-test post-test design without control group was used for the study. The data was collected from 60 adolescent girls using simple random sampling technique. The study was conducted in selected college at Mangalore.

Results: There was significant difference between pre-test and post-test knowledge score ($t = 44.23, p < 0.05$). There was no association between the pre-test knowledge score and selected variables.

Conclusion: All the subjects in the study group gained knowledge on water birth indicating that planned teaching programme was an effective method for increasing knowledge.

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1. Introduction

Childbirth is a biological process which gives joy to the mother and the family, and it is the culmination of a human pregnancy or gestation period with the birth of one or more child from a woman's uterus. It is a crucial moment in a woman's life. It changes entire life of a woman. She becomes a mother – a nurturer. Though the end result is rewarding – seeing the face of her child, her flesh – the process is very exacting. Due to the original sin, womankind was cursed to go through this pain. This was the redemption for women. Today childbirth need not be a painful process, where a woman has to undergo unendurable pain.¹

Birth is a normal, healthy part of a woman's life. The amount of pain a woman experiences during her labour is influenced by many individual, physical, emotional, and environmental factors. Some of these factors can be anticipated and actively controlled by the woman and/or her support team with preparation and information. Relaxation skills and accurate knowledge about the birth process give a woman confidence in her ability to work with her body.^{1,2}

Alternative approaches to childbirth are more popular than ever. Water, acupuncture and acupressure, and hypnosis are some of the ways expectant mothers are coping with labour pain. Underwater delivery or simply 'water birth' is becoming increasingly popular worldwide. Water birth is a safe method for painless delivery, which takes place in a pool or a tub filled with warm water. Water being a cooling agent helps the mother to relax physically and mentally. Water birth is a safe method for painless delivery, which takes place in a pool or a tub filled with warm water. Water being a cooling agent helps the mother to relax physically and mentally.³

"Water birth has psychological benefits for the foetus. It reduces 'birth trauma' in the child". When a child enters the world, it finds itself in a completely different environment and setting. The change from a protective fluid-filled sac to a dry, airy environment can trigger shock or trauma in the child. And as in an underwater delivery the shift is from fluid to fluid, the baby does not experience any trauma. Rather, a water baby adapts to the environment better.⁴

A descriptive study was conducted in Tanzania among 135 adolescent girls to assess knowledge of pregnancy and childbirth. The study finding revealed that only 33% of girls could correctly identify the age at which a woman can conceive. Regarding the duration of pregnancy, 77.3% could answer the correct nine months. None of them have known about alternative birthing method. Knowledge about childbirth and other related aspects were unknown to the adolescent girls. The researcher concluded that poor knowledge of childbirth among adolescence is related to lack of effective and coordinate interventions to address reproductive health and motherhood and they must provide with appropriate information regarding childbirth through innovative school based programme.⁵

A comparative study was conducted in Switzerland among 5953 to assess the safety of alternative birth methods in general and of water births. The results shows that 2014 spontaneous births were water births, 1108 were Maia-birthing stool births and 2362 were bed births. Results revealed that an episiotomy was performed in only 12.8% of the births in water. The mothers'

blood loss is the lowest in water births. Fewer painkillers are used in water births and the experience of birth itself is more satisfying after a birth in water. The average arterial blood pH of the umbilical cord as well as the Apgar scoring at 5 and 10 min were significantly higher after water births. The researchers concluded that water births and other alternative forms of birthing such as Maia-birthing stool do not demonstrate higher birth risks for the mother or the child than bed births.⁶

An evaluative study was conducted in London among 189 mothers about the responses to water birth who had experienced water birth. The results showed that water birth is a consumer-led trend, mainly pursued by educated middle class women. The researcher concluded that better antenatal preparation is needed to reduce the need for other forms of analgesia when women are in water. Women's responses to the survey suggested that mothers perceived water birth as therapeutic. Mothers demonstrated a strong desire for water in labour. There were no significant behaviour differences between water-born babies and non-water-born babies.⁷

Study findings revealed that the most commonly used complimentary therapy was water birth and the decision making regarding this was made with the help of midwives.⁸ Episiotomy needed for the water birth is very low.⁹ Water birth is to be considered a safe method for a healthy mother and a healthy full-term foetus with cephalic presentation.¹⁰ Water birth in India is also gaining popularity. In India it is emerging as a promising alternative to painful traditional delivery.¹¹

Midwives are 'with woman', providing the family with supportive and helpful relationships as they share the deep and profound experiences of childbirth. To become skilled helpers nursing students need to develop reflective skills and valid midwifery knowledge grounded in their personal experiences and practice. Midwife educators and practitioners can assist nursing students and enhance their learning by expanding the scope of practice, encouraging self-assessment and the development of reflective and professional skills.

Nursing students have high expectations for gaining skills and knowledge to prepare them to enter professional practice. Through the experiences of learning and applying doula skills to their professional nursing practice, new graduates will be better prepared to enter the real world of nursing practice.

Objectives of the study were to:

- Determine the existing knowledge score of adolescents regarding water birth using a structured knowledge questionnaire.
- Find the effectiveness of planned teaching programme on water birth among adolescents.
- Find the association between pre-test knowledge score and selected demographic variables

The conceptual frame work adopted for this study was based on general system theory by Ludwig Von Bertalanffy.

2. Materials and methods

An evaluative approach with quasi experimental, pre-test post-test design without control group was adopted for the

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