To Study the Dimensions of Antenatal Care Among Respondents

Dr. Manjula G Kadapatti[1], Akshitha A[2]

[1]*Associate Professor, Department of Human Development and Research Centre, Smt. V.H.D Central Institute of Home Science, Maharani Cluster University, Bengaluru-560001*

[2]*Postgraduate Student, Department of Human Development and Research Centre, Smt. V.H.D Central Institute of Home Science, Maharani Cluster University, Bengaluru-560001*

Abstract: **Health of pregnant women is more than the presences of healthy baby and healthy motherhood; it is a resource that allows people to realize their aspirations, satisfy their needs and to cope with the environment in order to live a long, productive, fruitful life and good citizens for the country. In this sense, health enables social, economic and personal development fundamental to well-being of pregnant women. Individual resources for health can include: physical activity, healthful diet, social ties, resiliency, positive emotions, and autonomy. A study was aimed to know the various dimensions of antenatal care. A sample of 75 of pregnant women of the age group of 23 to 26 years from rural area, kanakapura was randomly selected for the present study. The tool was used to elicit the information was a developed scale by Dr.Muhaidat.N, Fram K, Thekrallab.F, Qatawneh A and Al.Btoish.A (2020). The data obtained was tabulated and analyzed by student t-test and chi-square test. The result shows that about 15 – 30 percent of impact of pandemic circumstances was found in selected respondents. About 16.5 of mean percentage of respondents were noticed and underwent changes of their economical circumstance and psychological wellbeing during pandemic circumstance. A mean percentage of 15.6 of respondents were entitled the pregnancy complication followed by 3.6 mean percentage of the respondents were in preexisting medical condition.**

Keywords: antenatal care, Dimensions, pandemic condition.

INTRODUCTION

COVID-19 pandemic has posed unprecedented challenges to public health, food systems and economic structure of the world leading to dramatic loss of human life and income. The obstacles were not only in treating patients infected by the virus but also for seeking medical care for other non-COVID pathological and physiological health conditions. Antenatal care is one such non-emergency yet essential health service which got overlooked and hence was compromised. During the pre-COVID times, antenatal care in India was either based on traditional care model (involving 12-14 visits) or WHO-2016 based recommendations (involving at least 8 visits). Such models were formulated to reduce prenatal mortality and improve women's experience of care during pregnancy. It assists in screening, diagnosing and managing the risk factors that might adversely affect the pregnant women and pregnancy outcome. However, in the current pandemic situation such frequent visits to hospital for seeking care; will expose the expectant mothers and their fetuses to COVID-19 infection. Pregnant women because of physiological alterations in immune and cardiorespiratory systems fall under vulnerable group to develop complications due to virus even though are not at an increased risk of getting infected as compared to the general population.

In human pregnancy, prenatal development is also called *antenatal development.* The development of the human embryo follows fertilization, and continues as fetal development. By the end of the tenth week of gestational age the embryo has acquired its basic form and is referred to as a fetus. The next period is that of fetal development where many organs become fully developed. This fetal period is described both topically (by organ) and chronologically (by time) with major occurrences being listed by gestational age.

Pregnancy is always associated with changes in psychological functioning of pregnant women. It is usually associated with ambivalence, frequent mood changes, varying from anxiety, fatigue, exhaustion, sleepiness, and depressive reactions to excitement. During pregnancy, changes include body appearance,

affectivity and sexuality, whereas the position and role of women attains a new quality. Even thoughts of pregnancy can bring about numerous worries about its course and outcome, and especially of the delivery itself, which may be so intense that they acquire features of phobia (which may be the reason for avoiding pregnancy). Good nutrition is an important component of a healthy lifestyle and a healthy baby. The best time to review your nutritional status to make appropriate changes is prior to conception. A very important time of fetal development is during the first several weeks of pregnancy when many women may not even realize they are pregnant. The nutritional changes that should occur prior to pregnancy must be individualized based on medical status, weight and eating habits.

Pregnancy period is a precious time for an expected mother, full of excitement and anticipation. Pregnant women need be aware of various events of pregnancy, including how the fetus will develop and grow in the maternal womb. In this case establishing appropriate strategies to address the physical and mental health of the pregnant women is very important and these groups are very venerable in the society, especially during pandemic period. Knowing the significance of the care of prenatal period a researcher felt a need to undertake the study on impact of pandemic situation on antenatal care.

METHODOLOGY

The aim of the study is to study antenatal care of pregnant women living in rural area during covid-19 pandemic.

Objectives:-
To study the dimensions of antenatal care among pregnant women during covid-19 pandemic living in rural area.

Hypothesis: -
There is no variation in the dimensions of antenatal care among pregnant women during covid-19 pandemic circumstance.

Procedure:
A survey method was done to identity the hospitals situated in rural area of kanakapura. A random sampling method was applied for selection of sample. A tool developed by Dr.Muhaidat.N, Fram K, Thekrallab.F, Qatawneh A and Al.Btoish.A (2020), Department of Obstetrics and Gynecology, University of Jordan was used for data collection. The tool is comprised of two parts; Basic data and specific data. The basic data was self-constructed tool. Specific data contains information related to dimensions of care of pregnancy during pandemic. The question for specific information comprises of 48 statements having 2 points scale covering 11 dimensions.

RESULT AND DISCUSSION

The result of the study is discussed as below.

TABLE – 1 Classification of Respondents by Age group, Educational level and Occupational status

N=75

Characteristics	Category	Respondents	
		Number	Percent
Age group (years)	23-24	28	37.3
	25-26	47	62.7
Educational level	Higher secondary	12	16.0
	Graduation	63	84.0
Occupational status	Business/Self employed	56	74.7
	Home maker	19	25.3
Total		75	100.0

Table 1and Figure 1 depicts that the classification of respondents by age group, educational level and occupational status. It reveals that around 63% of the respondents were belongs to 25 to 26 years of age and 37.3% of the respondent were belongs to 23 to 24 years of age. Majority (84%) of the respondent were done with their graduation whereas, 16% of the respondents had higher secondary education. Around 75% of the respondents were self employed and 25.3% of the respondents were home makers.
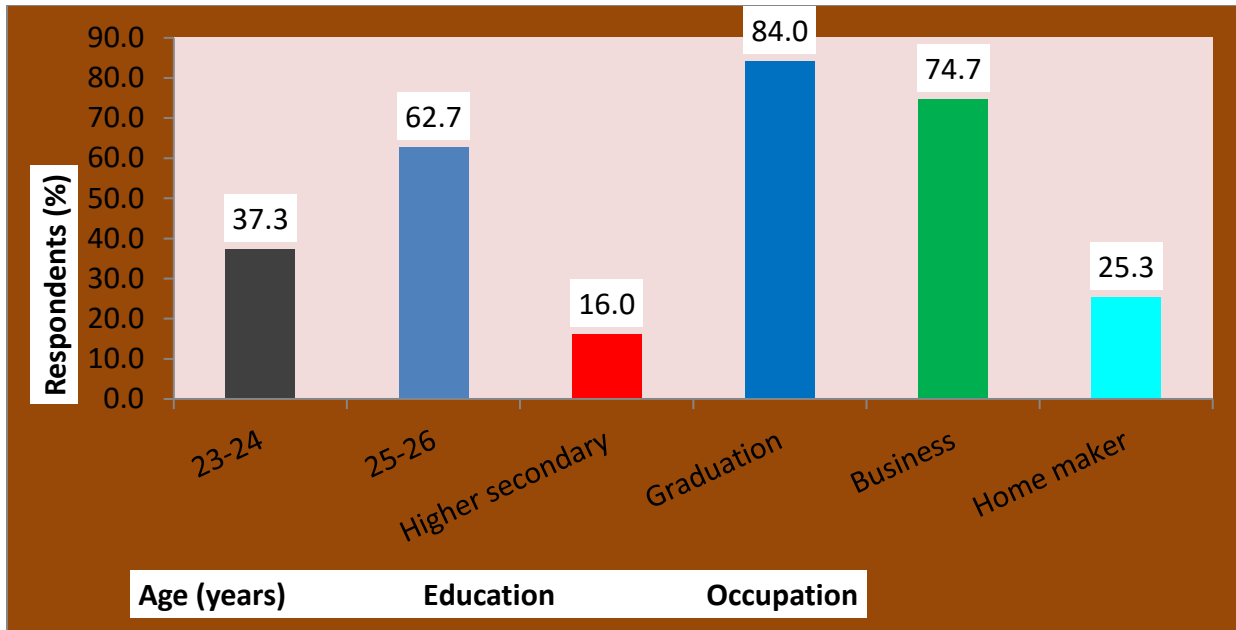
Figure .1: Classification of Respondents by Age group, Educational level and Occupational status

TABLE – 2- Classification of Respondents by Type of family and Family income

N=75

Characteristics	Category	Respondents	
		Number	Percent
Type of family	Nuclear	21	28.0
	Joint	54	72.0
Family income/month	Rs.20,000-29,000	29	38.7
	Rs.30,000-50,000	46	61.3
Total		75	100.0

The table 2 and figure 2 indicates that types of family and income of the family of respondents. Majority (72%) of the respondents were belongs to joint family and 28% of the respondents were belongs to nuclear family. 61.3% of the respondents has earning between Rs. 33,000/- to 50,000/- per month whereas around 39% of the respondent earning was between Rs. 20,000/- to 29,000/- per month.
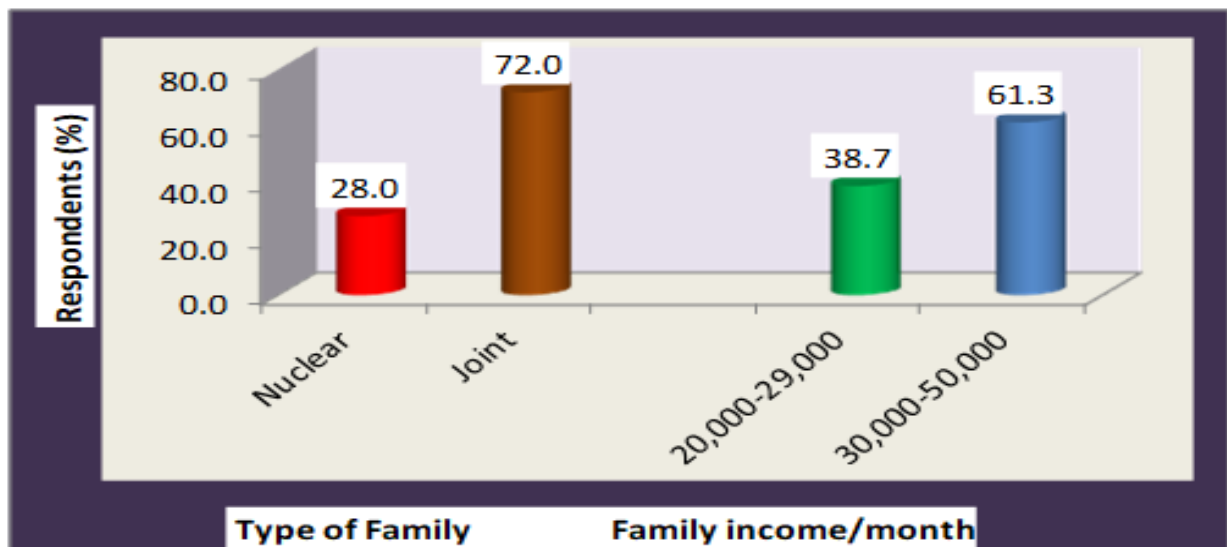

Figure.2: Classification of Respondents by Type of family and Family income

TABLE – 3 Classification of Respondents by Educational and Occupational status of respondents' husband

N=75

Characteristics	Category	Respondents	
		Number	Percent
Educational status of husband	Graduation	49	65.3
	Post graduate degree	26	34.7
Occupation of Husband	Government	28	37.3
	Private	29	38.7
	Business/Self employed	18	24.0
Total		75	100.0

Table 3 and figure 3 depict that education and occupational status of the respondent's husband. 65.3% of the respondent's husband has pursued graduation and around 38% of the respond's husband was completed post graduate degree. Majority (38.7%) of the respondent's husband selected private sector as their occupation followed by 37.3% of respondent's husband were working under government sector and 24% of the respondent's husband have chosen business for their occupation.
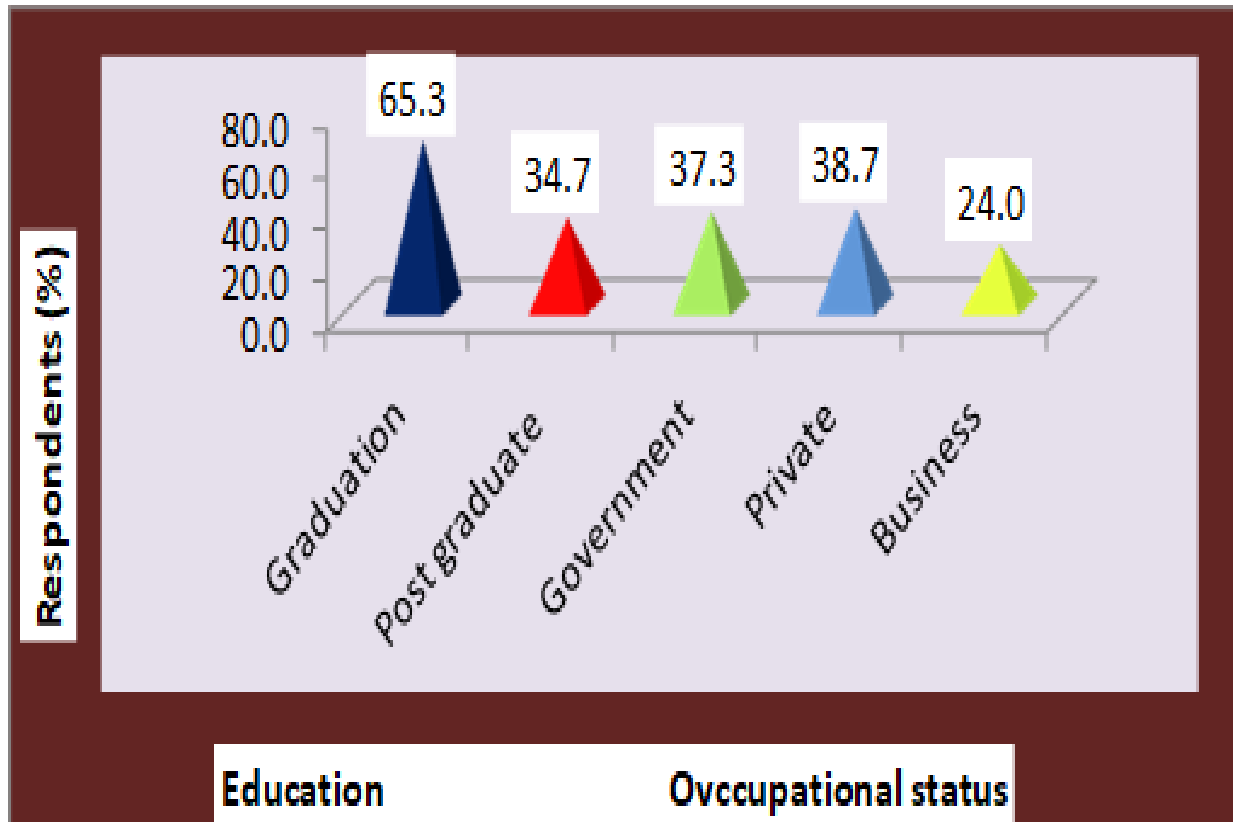

Figure .3: Classification of Respondents by Education and Occupational status of Husband

TABLE – 4 Classification of Respondents on Impact of Pandemic Circumstances

Impact Level	Category	Respondents	
		Number	Percent
Very Low	< 15 % Score	32	42.7
Low	15-30 % Score	43	57.3
High	> 30 % Score	0	0.0
Total		75	100.0

The score obtained by the respondents have been totaled up and divided and has been categorized into three level of impact.

Table 4 and figure 4 depicts that level of impact of pandemic circumstance on antenatal care among pregnant women. According to the score obtained 57.3% of the respondent had been affected with the 15 to 30 percent and about 42.7% of the respondents were got affected with the less than 15 percent. The results are in line with the study conducted on "Clinical update on COVID-19 in pregnancy" (2020) by Ryan GA, et.al, which reviled that impact of covid-19 pandemic on antenatal care among pregnant women, is low.
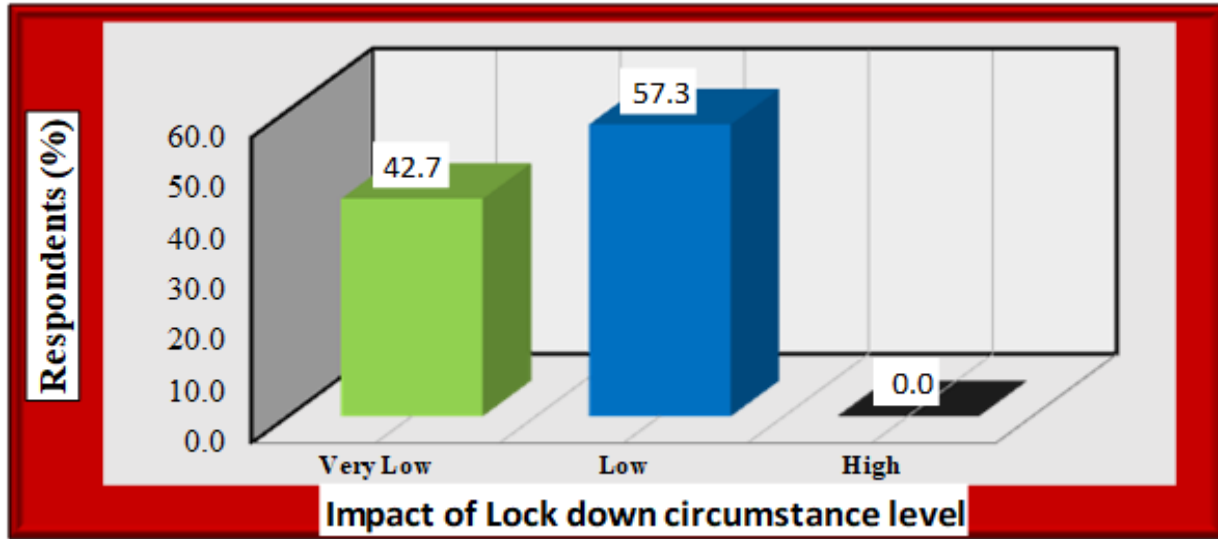

Figure .4: Classification of Respondents on Impact of pandemic Circumstances

TABLE -5 Domain wise Mean Impact of Pandemic Circumstances Scores

N=75

No.	Domains	Statements	Max. Score	Impact Scores			
				Mean	SD	Mean (%)	SD (%)
I	Pre-Existing Medical Conditions	6	6	0.21	0.41	3.6	6.9
II	Musculoskeletal disorders	8	8	0.09	0.29	1.2	3.7
III	Pregnancy Complications	10	10	1.56	0.50	15.6	5.0
IV	Antenatal Care That the Participant is Currently Receiving	7	7	2.92	0.69	41.7	9.9
V	Participants' Physical Wellbeing during Pregnancy	2	2	1.15	1.00	57.3	49.8
VI	Medications and Supplements	3	3	1.09	0.99	36.4	33.0
VII	Physical Activity and Exercise	4	4	0.88	0.73	22.0	18.4
VIII	Participants' Economic Circumstances and Psychological Wellbeing during Pregnancy	8	8	1.32	1.04	16.5	13.0

Table 5 shows the overall dimension response on impact of lockdown. Domains wise responses on antenatal care among pregnant women showed higher mean score (1.15) and mean percentage value (57.3%) was found in physical wellbeing during pregnancy were concerned with healthy eating foods and least percentage was 1.2% in musculoskeletal disorders having few health issues. The 41.7 of mean percentage and mean score of 2.92 was antenatal care that the

participant is currently receiving, followed by 36.4 mean percentage of respondents were had difficulty in accessing medication and dietary supplements during lockdown.

Around 22 mean percentage of respondent were involved in physical activities and doing mild exercise. About 16.5 of mean percentage of respondents were noticed and underwent changes of their economical circumstance and psychological wellbeing during

pandemic situation. A mean percentage of 15.6 of respondents were entitled the pregnancy complication followed by 3.6 mean percentage of the respondents were in pre existing medical conditions. Among all the dimensions economical circumstance and psychological wellbeing was most affected area among pregnant women during covid-19 pandemic. It shows that pandemic situation has made an impact on psychological health of the pregnant women and due to pandemic economic situation of the family was also affected badly. Thus, rejecting the null hypothesis stating that dimension of antenatal care may not have an impact among selected respondents during pandemic.

CONCLUSION

Pandemic is a situation where not only common people affected but pregnant women also got affected, this is the case we need to understand about wellbeing of pregnant women during pandemic which is underline factor of physical wellbeing, psychological wellbeing and also economical wellbeing of individual. Research shows that pregnant women also faced difficulty during pandemic.

REFERENCE

[1] Okoye Ifeanyi Martins, Muhammad Mehraiz khan, Oluwatoyosi Mary Adeoye, Zara Sohail, Vidhya Ravichandran, Waleed Bin Waris, Oluwasegun Shoewu, Ahsan Ali Khan Salik, Faiza Younas7 and Nadeem Iqbal (2021) Challenges to Women's health during pregnancy in COVID era-Review Article *10.26717/BJSTR.2021.38.006134*

[2] Boisvert, C., Talarico, R., Denize, K.M. et al. Giving Birth in the Early Phases of the COVID-19 Pandemic: The Patient Experience. Matern Child Health J 26, 1753–1761 (2022). https://doi.org/10.1007/s10995-022-03495-2

[3] https://courses.lumenlearning.com/waymaker-psychology/chapter/stages-of-development/

[4] https://www.verywellmind.com/stages-of-prenatal-development-2795073