

A Study to assess the Effectiveness of Structured Teaching Programme on Knowledge Regarding Janani Suraksha Yojana Among the Antenatal Mothers Attending MCH Clinic at Selected Community Area, Surat, Gujarat

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Abstract

Background of the Study: Janani Suraksha Yojana (JSY) under the overall umbrella of nation rural health mission has been launched from April 2005.¹ The scheme replaces the nation maternal benefit scheme.² It aims at increasing institutional delivery, thereby reducing maternal and neonatal mortality.³ Janani Suraksha Yojana (JSY) provide cash assistance to the mother who help her take nutrition food as well as soon with respect to medication for health of mother and new born.^{4,5} It also provides transportation to the beneficiary mother through Accredited Social Health Activist (ASHA) Janani Suraksha Yojana.

AIM of the Study: The aim of the study is to assess the knowledge regarding Janani suraksha yojana among the antenatal mothers.⁶

Material and Methods: In the study quantitative approach was adopted. Pre-Experimental research design was adopted.^{8,7} Purposive sampling technique was adopted for the selection of samples.⁹ Total sample size was 60 antenatal mothers attending MCH clinic at selected community area, Surat.¹⁰ Ethical consideration was taken from the college to conduct the study.¹¹ Data was collected between 06-10-2022 to 08-10-2022 by the tool which consist the selected socio demographic variables, structured knowledge questionnaire regarding Janani Suraksha Yojana and STP was also given on 18-10-2022 after the pre-test.¹² Data analysis was done by descriptive and inferential statistics.¹³

Results: 15% mothers were having poor knowledge and 71.67% mothers were having average knowledge regarding Janani Suraksha Yojana. Structured teaching programme was effective in improve knowledge statistically at 0.05%.¹⁴ The knowledge score shows the statistically significant association with the education of the antenatal mothers.¹⁵

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Conclusion: The findings of the study showed that the structured teaching programme was very effective in improving the level of knowledge.¹⁶

Keywords: Knowledge; Effectiveness; Antenatal mothers; Janani Suraksha Yojana; Structured teaching programme; Selected area.

INTRODUCTION

Background of the Study

Motherhood is another name for devotion. Health of the child depends upon health of mother, thus maternal care and maternal health are intimately associated with the child care and child health, so protection and promotion of the mother and children is of prime importance for building a healthy and sound nation. Special health service have been formulated and concentrated for mother and children is of prime importance for building a healthy and sound nation, special health services have been formulated and concentrated for mother and children in our country, as maternal and child health services.

Janani suraksha yojana, under the overall umbrella of national health mission (NRHM) has been proposed by a modifying the national maternity benefits scheme NMBS while NMBS is linked to the provision of better diet for pregnant women for below poverty line (BPL) families. Janani suraksha yojana integrates cash assistance with antenatal care during the pregnancy period, institution care during delivery and immediate postpartum period in a health center by establishing system of coordinated care by the field level health worker the Janani suraksha yojana is 100 percent centrally sponsored scheme launched by the honorable prime minister of our country on April 12, 2005 for reducing maternal and neonatal mortality.

The NRHM has divided state into two preforming states (HPS), depending upon the pre-program level of institutional deliveries. The LPS are those where the proportion of the of eligibility rules, uniform across the whole country, was issued in April 2005. According to these rules, only those women who were of 19 year of age and above, and belonged to the below poverty line (BPL) families, were eligible for benefit under the Janani suraksha yojana (JSY). The benefit was restricted to the first two live births. These eligibility rules were deemed to be too strict, especially in, and hence, new guideline issued in late 2006, remove this restriction in the LPS only. The amount of financial assistance was also extensively modified.

Global observation shows that in developed regions MMR average at 13/1000,000 live birth, in developing regions the figure is 440 for the same number of live births. From commonly accepted indices, it is evident that, infant, child and MMR are high in many developing countries. Further

much of the sickness and death among mother and children is largely prevented by improving the health of the mother and children.

The main aim of the scheme is to make deliveries in hospitals and primary health centers accessible to women in order to bring down the infant mortality rate (IMR) and the maternal mortality rate (MMR). Sources said the union government had widened the scope of the scheme from August 2011. Under this scheme a national initiative that all pregnant women delivering in public health institution have absolutely free and no expense delivery, including caesarean section. The scheme emphasizes at most importance on "free Entitlements".

India contributes 22% to the global deaths of women due to pregnancy and child birth related causes. Its facility could reduce maternal and infant mortality and cash incentive were thought of a fast-track mechanism to encourage institutional deliveries. The Janani suraksha yojana is one of the largest conditional cash transfer programs with a large number of beneficiaries.

According to WHO globally estimating the maternal mortality rate over 5,00,000 die every year and in those 1,500 women in a day because of complication of pregnancy and childbirth each year approximately eight million women suffer pregnancy related complication and over half a million die some 99 percent of all maternal death occur in developing countries two third of maternal death in 2000 occurred in 13 of the world's poorest.

The concept of healthy mothers and baby is an important aspect of reproductive health care programme. In a developing country like India, illiteracy, poverty, multiple pregnancies and lack of health facility affect badly mother's health along with the infant. Due to many different factors, safe motherhood is still a dream for much of India particularly for its rural and tribal population.

OBJECTIVES

- To assess the knowledge regarding Janani suraksha yojana (JSY) among the antenatal mothers before & after structured teaching programme.
- To compare the pre-test & post-test knowledge score regarding Janani suraksha yojana among the antenatal mothers attending MCH clinic at selected community area, Surat.
- To find out the association between the post-test knowledge score with the selected

demographic variables of Antenatal mothers.

ASSUMPTION

- The antenatal mothers may have some knowledge regarding Janani Suraksha Yojana.
- Structured Teaching Programme is an accepted method of improving the information regarding Janani Suraksha Yojana.
- Knowledge varies from individual to individual.

MATERIAL AND METHODS

In the study quantitative approach was adopted.

Pre-Experimental research design was adopted. Purposive sampling technique was adopted for the selection of samples. Total sample size was 60 antenatal mothers attending MCH clinic at selected community area, Surat. Ethical consideration was taken from the college to conduct the study. Data was collected between 06-10-2022 to 08-10-2022 by the tool which consist the selected socio demographic variables, structured knowledge questionnaire regarding Janani Suraksha Yojana and STP was also given on 18-10-2022 after the pre-test. Data analysis was done by descriptive and inferential statistics.

RESULT

Table 1: Pre-test and Post-test level of knowledge regarding Janani Suraksha Yojana

Level of knowledge	Pre-test		Post-test	
	Antenatal mothers (f)	%	Antenatal mothers (f)	%
Poor	39	65%	9	15%
Average	20	33.34%	43	71.67%
Good	1	1.60%	7	11.64%
Very good	0	0	1	1.66%
Total	60	100%	60	100%

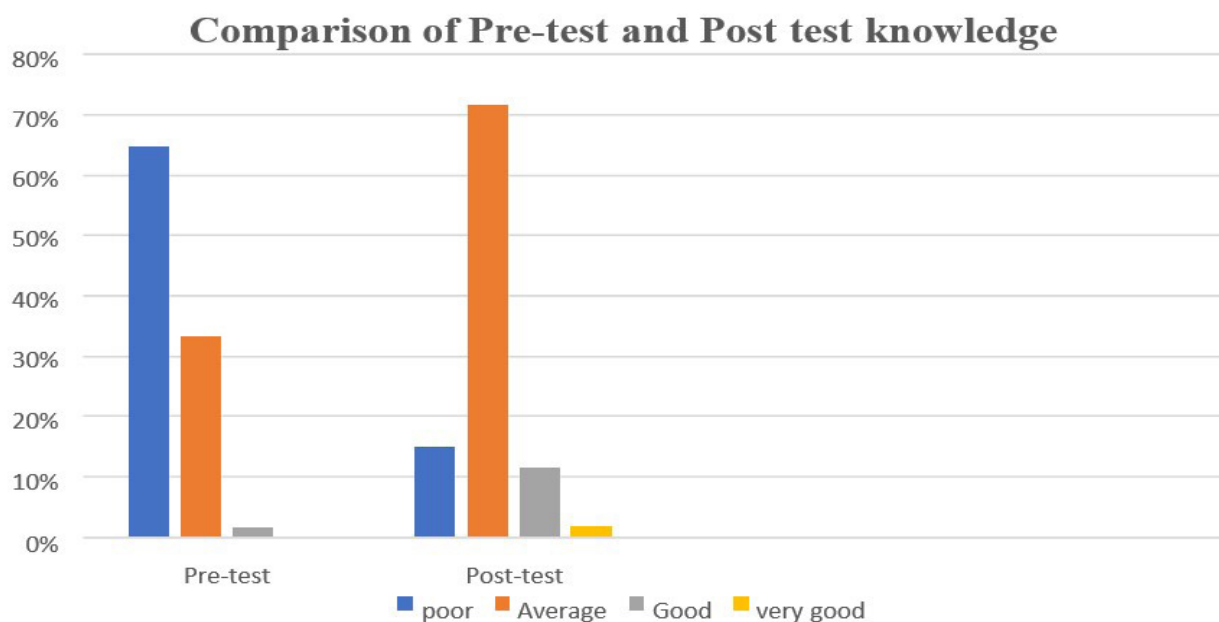


Table 1 shows pre-test knowledge 65% Antenatal mother were having poor knowledge, 33.34% Antenatal mother were having average knowledge, 1.66% Antenatal mothers were having good knowledge and 0% Antenatal mothers were having very good knowledge. In post-test knowledge 15% antenatal mother were having poor knowledge, 71.67% Antenatal mother were having average knowledge, 11.64% Antenatal mothers were having good knowledge and 1.66% were having very good knowledge.

Table 2: Association between level of knowledge gain and their demographic variables of Antenatal mothers

Socio demographic Variable	Level of knowledge				df	Chi Square	Level of Significance
	Poor Knowledge	Average knowledge	Good knowledge	Very good Knowledge			
Age							
18-21	3	13	0	0	12	8.55	S
22-24	4	16	6	1			
25-27	2	6	1	0			
28-30	1	4	0	0			
More than 30	0	3	0	0			
Religion							
Hindu	7	35	6	1	9	4.12	S
Muslim	0	5	1	0			
Christian	2	3	0	0			
Any other	0	0	0	0			
Education							
Primary	6	20	4	0	12	6.99	S
High secondary	3	19	3	1			
Graduate	0	1	0	0			
Post-graduate	0	0	0	0			
Illiterate	0	3	0	0			
Income							
Below 10,000	5	28	5	1	9	10.55	S
10001- 20,000	3	12	2	0			
20,001-30,000	1	3	0	0			
Above 30,000	0	0	0	0			
No of Children							
0	2	14	2	0	9	32.02	NS
1	6	20	4	0			
2	1	5	1	0			
More than 2	2	3	0	0			
Type of Family							
Nuclear family	5	14	1	0	9	5.92	S
Joint family	3	28	5	1			
Extended family	1	1	1	0			
Single parent family	0	0	0	0			

Above table 2 shows the Association between post-test knowledge score with selected socio-demographic variables of antenatal mothers. It was done using chi-square test. In association between post-test knowledge score with selected socio-demographic data, education was significance with their selected socio demographic.

DISCUSSION

This chapter deals with discussing the present

study findings in the context of established earlier findings of other similar studies, Summary of the study, Implication for nursing practice, education, nursing research, administration and Recommendations for future research and Conclusion.

The discussion section is devoted to a thoughtful analysis of the findings. The present study was pre-experimental study to evaluate the effectiveness of structured teaching programme (STP) on knowledge regarding Janani Suraksha Yojana among antenatal mothers. The overall experience

about study was a satisfying.

The present study was focused to assess the effectiveness of structured teaching programme on knowledge regarding Janani Suraksha Yojana among the Antenatal mothers residing in selected Community area of Olpad, Surat.

The study sample consisted of 60 Antenatal mothers selected through the convenient sampling technique. The investigator found that the Antenatal mothers were cooperative in the study. The investigator collected the demographic data from the Antenatal mothers. The study finding reveal that group of 45% antenatal mothers were in the age group of 22-24 year, 26.67% of Antenatal mothers were in the age group of 18-21 year, 15% of Antenatal mothers were in the age group of 25-27 year, 8.33% of Antenatal mothers in the age group of 28-30 year, 5% of Antenatal mothers in the age group of More than 30 years.

A majority of Antenatal mother were in Below Rs. 10,000 income. With regard to the religion 81.67% of them were Hindus, 10% were Muslim, 8.33% of them were Christian.

The researcher found that the antenatal mothers were co-operative in the study. The researcher collected the demographic data from the antenatal mothers.

CONCLUSION

The study was conducted to assess the effectiveness of structured teaching programme on the level of knowledge of Antenatal mothers regarding Janani Suraksha Yojana in selected Community areas, Surat. The finding of the study showed that the structured teaching programme was effective in improving the level of knowledge. This study will help the health care professionals to develop appropriate teaching materials.

Structured teaching programme is proven method to improve the knowledge of antenatal mothers regarding Janani Suraksha Yojana.

ETHICAL CONSIDERATION

The study was proposed and submitted to the ethical committee, Vibrant Nursing College, Surat and experts on the committee approved the study. All respondent were carefully informed about the purpose of the study and their part during the study. Informed consent for the study was obtained from all participants. Thus, the investigator followed the

ethical guidelines, which issued by the research committee. Necessary permission to conduct the study was requested and obtained from the Vibrant Nursing College, Surat, Medical officer of Community Health Canter, Olpad. The study was done without any violation of human rights.

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