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Knowledge, Attitude and Practice towards antenatal care among pregnant women attending a tertiary care centre in Dakshina Kannada

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Abstract

Background: Antenatal care (ANC) is one of the strategies aimed at addressing maternal mortality as it facilitates the identification and mitigation of risk factors early in pregnancy. The primary aim of antenatal care is to achieve a healthy mother and baby.

Aim and Objective: To determine the knowledge, attitude and practices regarding the benefits of antenatal care utilisation at tertiary care center of our hospital

Methods and design: A cross-sectional study was conducted on 500 pregnant women attending antenatal care centre at the department of Obstetrics and Gynaecology AJIMS, Mangalore during May 2022 to August 2022. Face to face interview was conducted to assess their knowledge, attitude and practice using a structured questionnaire

Results: A total of 86% were in the age group between 20-29 years and 71.4% were multigravida. 96.1% pregnant women responded that registration for antenatal care and visits is essential. 87.2% responded to take iron and folate during pregnancy. 92% women responded that tetanus diphtheria (Td) should be given during pregnancy but 3.2% were unaware. 71.2% pregnant women reported that they knew about the danger signs during pregnancy.

Conclusion: The study recommends improving health education for patients by healthcare professionals to increase understanding during pregnancy and the postpartum period and encourage early reporting of danger signs to reduce maternal and perinatal morbidity and mortality.

Keywords: Antenatal care (ANC), knowledge, attitude, practices, pregnant women, danger signs

Introduction

The World Health Organization started the Safe Motherhood Initiatives in 1987 with the goal of lowering the number of deaths related to pregnancy and childbirth. One of the foundational elements of this endeavour is appropriate antenatal care (ANC). It emphasises antenatal care as a crucial component of maternal healthcare because proper treatment will result in a successful pregnancy and healthy offspring.

In low resource settings, maternal mortality can be reduced significantly by antenatal care (ANC). Resources are made available by ANC clinics to advance nutrition and health knowledge and encourage preventative medical procedures. A healthy pregnant woman gives birth to a healthy child. The mother's health has an impact on the child's general growth and development.

The term "knowledge" refers to a pregnant woman's comprehension of antenatal care components such as pregnancy registration, pregnancy risk indicators, consumption of prophylactic iron and folic acid supplements during pregnancy, and adaptation of family planning techniques. A person's behaviour or practise can be positively or negatively influenced by their attitudes, which are emotional, motivating, perceptual, and cognitive views. The antenatal check-up and family planning behaviour of a pregnant woman is influenced by her feelings, reasons for doing so, perceptions, and thoughts. Practices are described as the visible behaviours a pregnant woman engages in that may influence whether she decides to get an antenatal check up at the hospital after learning the danger indications of pregnancy, how she plans to go, and how she has adapted family planning strategies after marriage.

Barriers to accessing high-quality maternal health treatments must be identified and removed at all levels of the health system if maternal health is to be improved. To help women understand their health state and the significance of optimal ANC, health awareness is a crucial component.

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This study was done to evaluate pregnant women's awareness of their own health throughout pregnancy as well as the level of knowledge, attitude, and practise related to antenatal care among those attending antenatal clinics in hospital settings.

Methods

- A cross-sectional study was conducted on 500 pregnant women attending antenatal care centre at the department of Obstetrics and Gynaecology AJIMS, Mangalore during May 2022 to August 2022
- Face to face interview was conducted to assess their knowledge, attitude and practice using a structured questionnaire

Inclusion Criteria: All pregnant women who came for antenatal check up and follow up

Exclusion Criteria: Those who were not willing to answer any questions related to ANC knowledge, attitude and practice

The data were collected by interviewing all the eligible subjects willing to participate in the study.

Knowledge of ANC visits, tetanus vaccination, investigations, nutritional considerations, and pregnancy danger symptoms was evaluated.

The ANC registration, visits, illnesses, dietary changes, and iron and folic acid (IFA) intake and regularity in intake were all considered attitude variables.

Practices questions about ANC visit, dietary changes made during pregnancy, and folic acid tablets taken.

Statistical Analysis

The data were tabulated after being collected, and SPSS version 24 was used for the study. There were descriptive statistics applied, such as mean and percentage.

Result

A total of 500 individuals were contacted and interviewed. The mean age of the pregnant women were 25±3.61 years (range: 18-40 years). The age groups with the highest percentage

of pregnant women (86%) were 20 to 29 years old, followed by 30 to 39 years old (5%), > 40 years old (5%), and 20 years old (4%) in that order (Figure 1)

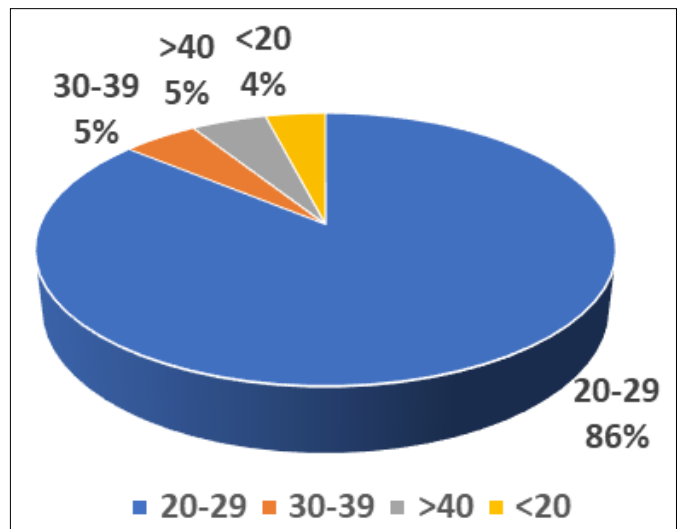


Fig 1: Age-wise distribution of pregnant women

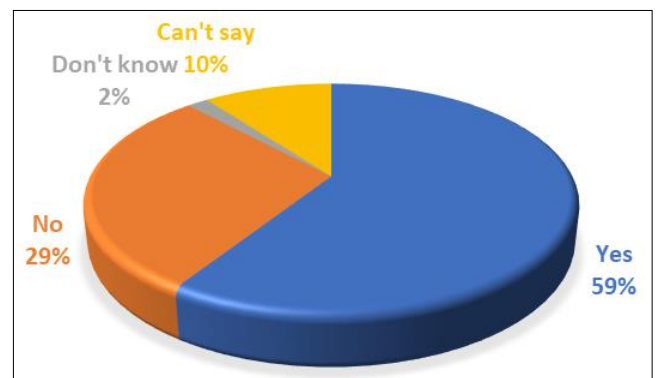


Fig 2: Knowledge of pregnant women about antenatal care

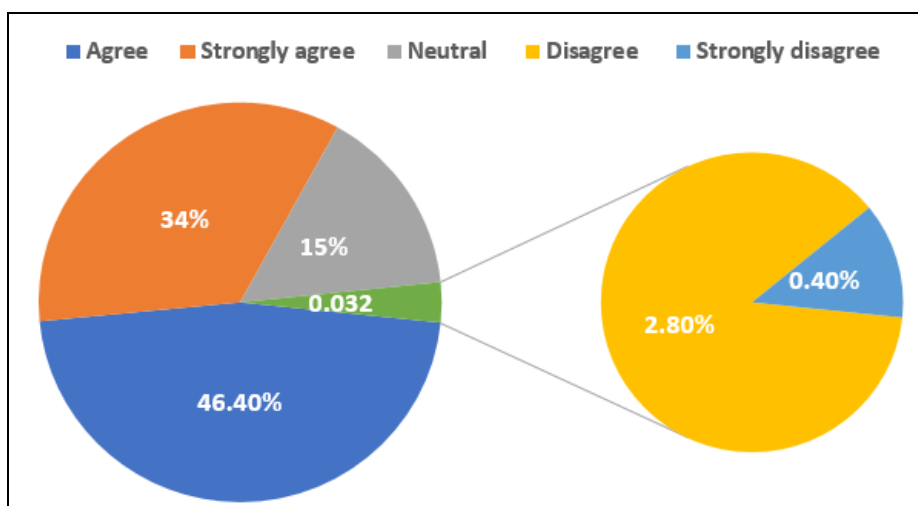


Fig 3: Attitude of pregnant women towards antenatal care

Table 1 depicts that the graduates were aware of antenatal care as compared to the ones without education. This chart accurately

depicts the role of education on antenatal care.

Table 1: Based on Educational status

Education	Number of women	% of women	Number of women having knowledge of antenatal care
Illiterate	79	15.8%	20
Below 10 th standard	182	36.6%	78
10-12 th standard	152	30.6%	50
Graduate	45	8.8%	42
Postgraduate	42	8.6%	40

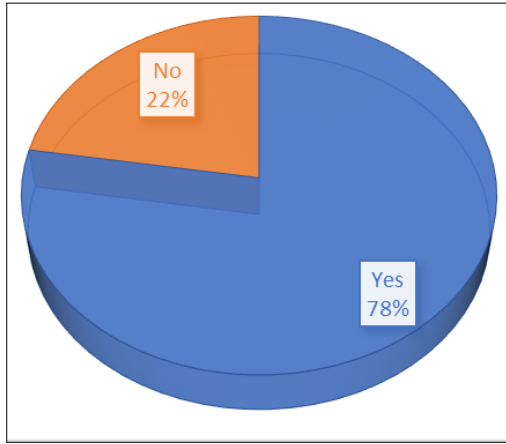


Fig 4: Practice of pregnant women towards antenatal care

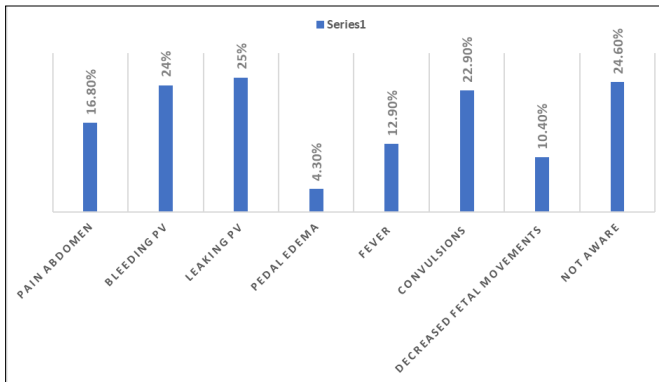


Fig 5: Awareness of danger signs of pregnancy

Table 2: Distribution based on parity

Parity	Number of women	% of women
Primigravida	143	28.4%
Multigravida	357	71.4%

Table 3: Knowledge and awareness about Injection Tetanus toxoid

Inj TT	Number of women	% of women
Aware	456	91.3%
Unaware	44	3.2%

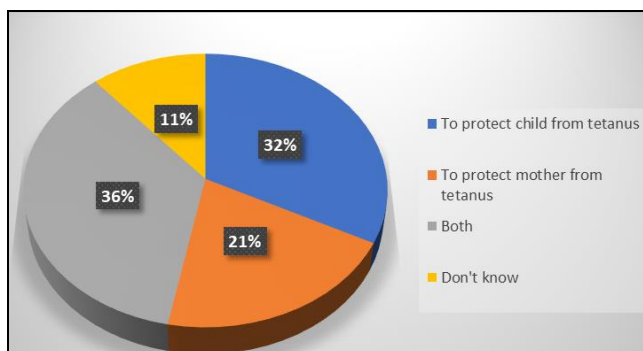


Fig 6: Importance of Injection TT in pregnancy

Majority of women were aware that medications like folic acid, iron, calcium and inj.TT were necessary but around half the women were not aware about the importance of the same. These women are also aware that BP checking and screening for GDM is important. However around 50% of the population is not aware of the complications associated with hypertension and diabetes (basic complications like big baby, IUD, difficult delivery for diabetes and eclampsia for hypertension). Although the percentage of multigravidas are more than 60%, they were aware that antenatal visits were important but they lacked further knowledge regarding the basic complications which is essential in the modern times. However 91% women believe that delivery should be conducted in the hospital. Women's understanding about caesarean sections is yet another depressing aspect of their general knowledge. The women view it as a big surgical procedure and do not prefer it because they feel that the family cannot be expanded (beyond 2 or 3 children). Even these women's husbands prefer caesarean sections the least. They are unaware that emergency LSCS is performed for indications including foetal distress, cord prolapse, early breech in labour, and many other problems that are lethal to the baby, mother, or both.

Discussion

It was observed in this study that the overall knowledge regarding antenatal care among pregnant women was adequate. The knowledge of antenatal care and its importance was known to 82.8% women. In our study 96.1% pregnant females responded that registration for antenatal care and visits is essential, in those 34.5% were Strongly agreed, 46.2% were agreed, and 15.2% were neutral.

The majority of participants in this study (87.2%) took Iron and Folic acid supplements when pregnant, whereas 11% do not. 10.2% of pregnant women are unaware of iron and folate, while 24.2% were aware that these nutrients can raise the mother's blood volume, 17.2% were aware that these nutrients can be used to treat weakness, and 46% were aware of the overall advantages of iron and folate. In a rural area of India, a similar study conducted by Pal PP *et al.* revealed that about 60% of participants took the IFA tablets regularly and sufficiently. IFA tablet use during pregnancy lowers iron deficiency anaemia among pregnant women, which lowers anemia-related deaths as a result of the increased demand.

A study done by Chandhiok N *et al.* showed that among those who had antenatal care, 91.3% had awareness about the importance of TT immunization during pregnancy. In this study, 92% pregnant responded that Injection tetanus toxoid (TT) should be given during pregnancy but 3.2 % told they were unaware. 65% of these population were given 2 tetanus toxoid doses required to immunize against tetanus during pregnancy. That means 65% knew the correct dose.

According to our study, 71.2% of pregnant women said they were aware of the risks associated with pregnancy. These expectant women listed the following warning signs: extreme vomiting, chronic limb swelling, vaginal blood or discharge,

seizures, decreased or absent foetal movements, blurring of vision, headache, and abdominal pain. When asked if they had any illnesses, 61.6% said no and 38.4% said yes, stating that they had hypertension, diabetes, thyroid disorders, or anaemia issues.

The reasons for not attending antenatal check-up were financial reasons, illiterate (15.8%), and unaware about ANC. This finding is consistent with the findings of Sanjel S *et al.* Due to lack of financial resources, early marriage and pregnancy, family obligations, and a refusal to pay for the hidden expenses of education like tuition, transportation, etc., poor women typically have limited access to education, including health education. The practices and attitudes are better in percentage than knowledge component.

The limitations of the present study were that it was conducted in a small number of pregnant female, the participants were of hospital based study.

Conclusion

The awareness regarding the importance of antenatal care is the need of this era. It can be improved with the cooperation of families and the community, which will lower the mortality rate. Knowledge and Attitude regarding ANC was found to be satisfactory in the study. But a further knowledge would improve the standards of the antenatal visits. The study recommends strengthening of health education by health care providers to improve the knowledge during pregnancy and post-partum period, and early reporting of danger signs. To improve community awareness on ANC, information, education and communication activities should be increased on ANC through community campaign and mass media like local television channel, radio and local newspapers. Utilization of antenatal care can reduce pregnancy related complications and maternal mortality rate.

Conflict of Interest

Not available

Financial Support

Not available

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