



Volume: 2, Issue: 8, 536-538
Aug 2015
www.allsubjectjournal.com
e-ISSN: 2349-4182
p-ISSN: 2349-5979
Impact Factor: 3.762

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Psychosocial problems among primigravida antenatal women in selected community of Ahmedabad

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Abstract

Introduction: Pregnancy is an unguent period of change for women that may have profound effect on their biological, psychological and social functioning. Most of women's behavior during the antenatal period is strongly influenced by her cultural background. Various studies shown that there was a relative risk of preterm birth for women that experienced moderate and high levels of distress. Antenatal psychosocial problems may be associated with unfavorable postpartum outcomes. Issues of high concern to the women, her family or the care giver usually indicate a need for additional support or services.

Methodology: This study was done by Purposive sampling method in the field practice area of B. J. Medical College, Ahmedabad from july' 14 to september' 14. Total 100 primigravida antenatal mothers were interviewed by using predesign, pretested questionnaire. The data entry was done in Microsoft excel & analysis was done in EPI INFO 7. X2 test used for analysis.

Observations & Discussion: In this study Majority of the subjects were in the age group of 21-25years (51%), Hindu religion (58%), educated up to primary (42%), housewife (61%), class V socioeconomic class (34%), were in 3rd trimester (51%). This study revealed that 65% of subjects having some type of psychosocial problems & most of them either due to bad family support (51%) or financial constraint (31%).

Conclusions & Recommendations: The findings of the study revealed that there was significant association ($P < 0.05$) between the psychosocial problems and selected demographic variables like religion, income, education status & gestational age. To prevent unfavorable postpartum outcome, better psychosocial support should be given to mothers to reduce level of psychosocial stress among primigravida antenatal mothers.

Keywords: Antenatal Women, Primigravida, Psychosocial Problems

Introduction

Pregnancy is maturational milestone that can be stressful but also rewarding as the woman prepares for a new level of caring & responsibility. She moves gradually from being self-contained and independent to being committed to a lifelong concern for another human being. This growth requires mastery of certain developmental tasks: accepting the pregnancy, identifying with the role of mother, recording the relationships between herself and her mother and between herself and her partner, establishing a relationship with the unborn child, and preparing for the birth experience. The partner's emotional support is an important factor in the successful accomplishment of these developmental tasks. Single woman with limited support may have difficulty in making this adaption^[1].

Pregnancy is an unguent period of change for women that may have profound effect on their biological, psychological and social functioning. Most of women's behavior during the antenatal period is strongly influenced by her cultural background. Various studies shown that there was a relative risk of preterm birth for women that experienced moderate and high levels of distress^[2]. Antenatal psychosocial problems may be associated with unfavorable postpartum outcomes. Issues of high concern to the women, her family or the care giver usually indicate a need for additional support or services^[3].

Aim: To study the Psychosocial problems among primigravida antenatal women

Objectives

- 1) To know the extent of Psychosocial problems among primigravida antenatal women & identify reasons behind it.
- 2) To study the association between Psychosocial problem and selected demographic variables

Methodology

A community based cross sectional study was done “between” July 2014 - September 2014 in Field practice area of B.J. Medical College, Ahmedabad. This study was done by purposive sampling method. Total 100 primigravida antenatal mothers were interviewed by taking prior verbal consent. A predesigned questionnaires were used for data collection. To access the reason behind psychosocial problems we took different parameters in our questionnaires like family stressor during pregnancy, mental challenges, stress at work place, financial stress etc. Data entry and analysis was done in MS Excel and Epi-Info [7]. Simple proportions and chi- square test were used for analyzing the data. P value <0.05 was considered as statistically significant.

Results

This study revealed that 65% of subjects having some type of psychosocial problems.

Table 1: Age wise distribution of participants

Age	No.
15-20	14
21-25	51
26-30	28
31-35	7

Table 1 shows age wise distribution of 100 antenatal primigravida participants. Majority of women were in between 21-25 years of age.

Table 2: Association between Psychosocial problem and Selected Demographic Variables

		Present	Absent	Total	P value
Religion	Hindu	32	26	58	0.038
	Muslims	27	5	32	
	Others	6	4	10	
Education	Illiterate	6	2	8	0.002
	Primary	35	7	42	
	Secondary & higher secondary	20	15	35	
	Graduate/post graduate	4	11	15	
Occupation	Private job	3	5	8	0.373
	Non- professional	8	7	15	
	Daily wager	10	6	16	
	Home maker	44	17	61	
Socio economic class	I	2	6	8	0.022
	II	5	5	10	
	III	11	11	22	
	IV	18	8	26	
	V	29	5	34	
Family type	Joint	34	18	52	0.397
	Nuclear	28	12	40	
	Extended	3	5	8	
Gestational age	1-3 month	8	13	21	0.014
	4-6 month	20	8	28	
	7- 9 month	37	14	51	
Regular check up	Yes	58	29	87	0.366
	No	7	6	13	
Disorder	Yes	6	6	12	0.245
	No	59	29	88	

Table 2 shows association between psychosocial problems with various demographic factors. In this study Majority of the subjects were in the age group of 21-25years (51%), Hindu religion(58%), educated up to primary (42%), housewife (61%), class V socioeconomic class (34%), living in Joint family (52%), were in 3rd trimester (51%). Classification of Socio-economic class was done according to modified Prasad classification [8]. Total 87 percent women were having regular check-up for pregnancy. Apart from pregnancy total 12 percent women were having associated medical or surgical disorder.

As table 2 suggests religion, socioeconomic class & gestational age of mother found to be statistically significant (p<0.05) while education of mother was found to be statistically highly significant (p<0.01).

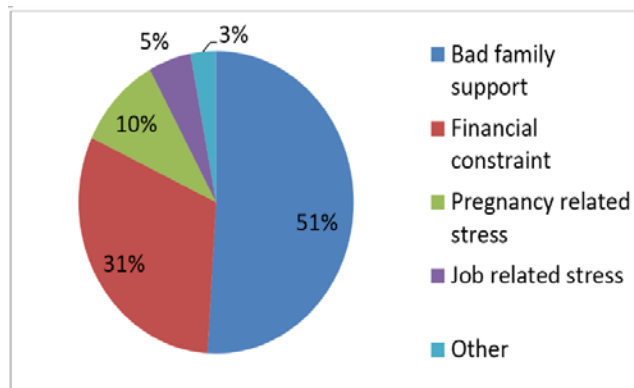


Fig 1: Reason for psychosocial problems

Figure 1 shows different reasons behind psychosocial problem. Almost half of the participants (51%) stated bad family support as the major reason behind psychosocial problem. Bad family support includes support from husband as well as other family members. 2nd most common reason was financial constraint (31%) followed by pregnancy related stress (10%), job related stress (5%), while 3% stated other reason for their psychosocial problems.

Discussion

Our study revealed that total 65 percent of antenatal primigravida women were having some type of psychosocial problem. In a similar study done by Nalini M. *et al.* found 57 percent of psychosocial problems in Mangalore ^[9]. This difference may be due to geographical & cultural difference between the two cities.

Our study revealed that religion, education, socioeconomic class & gestational age of participants were found to be statistically significant. While in a similar study done by Nalini M. *et al.* found religion, education, gestational age & health education to be statistically significant.

Conclusion

Pregnancy is maturational milestone that can be stressful but also rewarding as the woman prepares for a new level of caring & responsibility. This growth requires mastery of certain developmental tasks: accepting the pregnancy, identifying with the role of mother, recording the relationships between herself and her mother and between herself and her partner, establishing a relationship with the unborn child, and preparing for the birth experience.

To prevent unfavorable postpartum outcome, better psychosocial support should be given to mothers to reduce level of psychosocial stress among primigravida antenatal women.

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