

Comparative Study was Conducted to Assess the Knowledge Regarding Psycho Social Risk Factors Contributing Development of Depression Among Pregnant Mothers Attending Antenatal Clinics at selected Urban and Rural Areas of Badami with a View to Develop an Information Book Guide Sheet

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ABSTRACT

• Background of the Study

Pregnancy is supposed to be one of the happiest times of a woman's life, but for many women this is a time of confusion, fear, sadness, stress, and even depression. Depression is a mood disorder that affects women at some point during their lifetime, so it should be no surprise that this illness would also touch women who are pregnant. But all too often, depression is not diagnosed properly during pregnancy because people think it is just another type of hormonal imbalance. Depression has become a significant public health issue, with a continuous rise in its prevalence. It is estimated that depression will rank as the second major cause of disease burden by 2020. Women's reproductive events such as pregnancy, pose a significant risk to the mental health of women. Physical and emotional changes during pregnancy are usually dealt during antenatal visits, and the symptoms are generally resolved without any problems. Depressive symptoms during pregnancy often go unnoticed and are disregarded, and this may negativity affect a woman's health. Recent studies from Pakistan have shown antenatal depression to be associated with malnutrition and poor physical health.

• Objectives of the Study

1. To assess knowledge regarding psychosocial risk factors contributing to depression and its prevention among pregnant mothers attending antenatal clinics at selected urban areas of Badami.
2. To assess knowledge regarding psychosocial risk factors contributing to depression and its prevention among pregnant mothers attending

antenatal clinics at selected urban areas of Badami.

3. To compare the knowledge regarding psychosocial risk factors contributing to depression and its prevention among pregnant mothers attending antenatal clinics at selected urban and rural areas of Badami.
4. To find out the association between knowledge regarding psychosocial risk factors contributing to depression and its prevention among pregnant mothers attending antenatal clinics at selected urban and rural areas of Badami with their selected socio-demographic variables.
5. To develop and distribute information guide sheet on regarding psychosocial risk factors contributing to depression and its prevention among pregnant mother's.

KeyWords: Depression, Knowledge, Pregnant mothers, Information guide sheet.

I. HYPHOTHESIS

H₁- There will be significant difference in the knowledge regarding psychosocial risk factors contributing to depression and its prevention between pregnant mothers attending antenatal clinics at selected urban and rural areas of Badami.

H₂- There will be significant association between knowledge regarding psychosocial risk factors contributing to depression and its prevention between pregnant mothers attending antenatal clinics at selected urban areas of Badami with their selected socio-demographic variables.

H₃- There will be significant association between knowledge regarding psychosocial risk factors contributing to depression and its prevention between pregnant mothers

attending antenatal clinics at selected rural areas of Badami with their selected socio-demographic variables.

II. METHODOLOGY

The descriptive comparative survey design was adopted for the present study. The sample for the present study includes 100 pregnant mothers from selected rural and urban areas of Badami using convenient sampling technique. The data collected using structured interview schedule was analyzed using descriptive and inferential statistics.

III. RESULTS

The levels of knowledge regarding psychosocial risk factors contributing to depression and its prevention among rural and urban pregnant mothers reveal that, Most of rural pregnant mothers (56%) had Poor knowledge. Where as in urban area majority (64%) of the pregnant mothers had average knowledge.

The Comparison of knowledge level of rural and urban pregnant mothers reveals that, a statistically significant difference was found between the knowledge of rural pregnant mothers (13 ± 4.2) and urban pregnant mothers (17.64 ± 3.78) regarding depression during pregnancy at 0.05 level of significance [$Z = 5.81$]. It indicated that urban pregnant mothers had good knowledge regarding psychosocial risk factors contributing to depression and its prevention as compared to rural pregnant mothers.

The association of the Knowledge Scores of pregnant mothers with Their Socio-demographic Variables shows that, there is a significant association between knowledge of rural pregnant mothers and demographic variable like Gender ($\chi^2 = 21.32$; $P < 0.05$), Educational status ($\chi^2 = 3.9$; $P < 0.05$). And no significant association found between knowledge of rural pregnant mothers with their other demographic variables like age, religion, occupation of pregnant mother, occupation of husband, income, educational status, No of gravid, and history of depression in the family.

Similarly, significant association was found between knowledge of urban pregnant mothers and demographic variables like Income ($\chi^2 = 4.9$; $P < 0.05$). And no significant association found between knowledge of urban parents with their other demographic variables like age, religion, Educational status, occupation of pregnant mother, occupation of husband, income, educational status, No of gravid, and history of depression in the family.

• Presentation of Data

To begin with, data was entered in a master sheet for tabulation and statistical processing. The findings were presented under the following headings.

Part-I: Description of samples with their socio demographic variables.

Part –II: Assessment of levels of knowledge regarding psychosocial risk factors contributing to depression and its

prevention among pregnant mothers attending antenatal clinics at selected urban and rural areas of Badami.

Part –III: Comparison of knowledge between urban and rural pregnant mothers regarding psychosocial risk factors contributing to depression and its prevention among pregnant mothers.

Part –IV: Association of the socio demographic variables of rural and urban pregnant mothers with their knowledge scores.

Part- I: Description of samples with their socio demographic variables.

The Percentage wise Distribution of Sample according their Age depicts that, Majority of rural pregnant mothers (64%) were belonging to 18-23 years of age, (26 %) of them were belonging to 23-27 years of age, (06%) of them were belonging to 27-32 years of age and (4%) belongs to less than 18 years of age. Where as in urban area, most of the pregnant mothers (76%) were belonging to 23-27 years of age, (18 %) of them were belonging to 08-23 years of age, (06%) of them were belonging to 27-32 years of age and none of there in 32 and above years of age..(Fig-1)

The percentage wise distribution of Sample according to their Religion shows that, Majority of rural pregnant mothers (76%) were belonging to Hindu religion, (14%) of them were belonging to Muslim community and (10%) were belonging to Christianity. Where as in urban area most of the pregnant mothers (74%) were belonging to Hindu religion, (14%) of they were belonging to Muslim community and (12%) were belonging to Christianity. (Fig-2).

The percentage wise distribution of sample according to their Education Status illustrates that, Majority of rural pregnant mothers (50%) had secondary education, (12%) of them had completed primary schooling, (28%) of them had PUC and (10%) of them had completed Graduation. Where as in urban area, most of the pregnant mothers (48%) had PUC, (4%) of them had secondary education, and (48%) of them had completed Degree and there were no illiterate pregnant mothers. (Fig-3)

The percentage wise distribution according to their Husbands education status illustrates that, Majority of rural pregnant mothers husband(52%) had PUC, (20%) of them had completed primary schooling, (24%) of them had Graduation and (04%) of them had completed Post Graduation. Where as in urban area, most of the pregnant mothers husband (74%) had Graduation, (14%) of them had PUC, and (12%) of them had completed Post Graduation and there were no illiterate in husband's of pregnant mothers. (Fig-4)

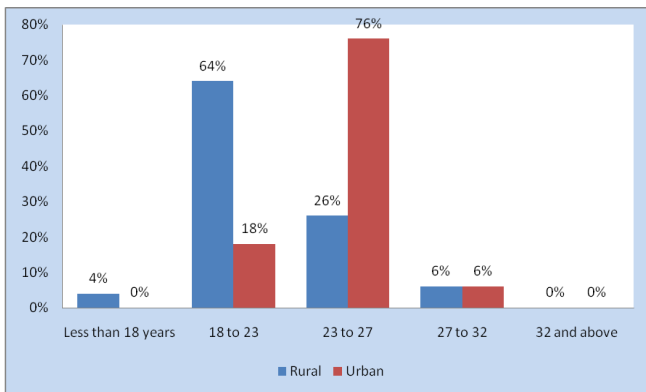


Fig 1. Percentage Distribution of Pregnant Mothers According To Their Age

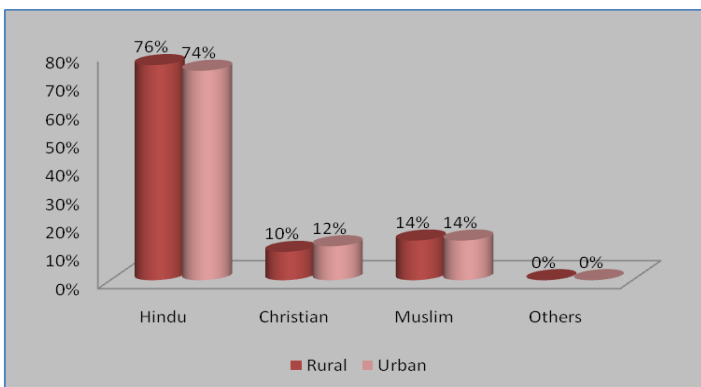


Fig 2. Percentage Distribution of Pregnant Mothers According To Their Religion

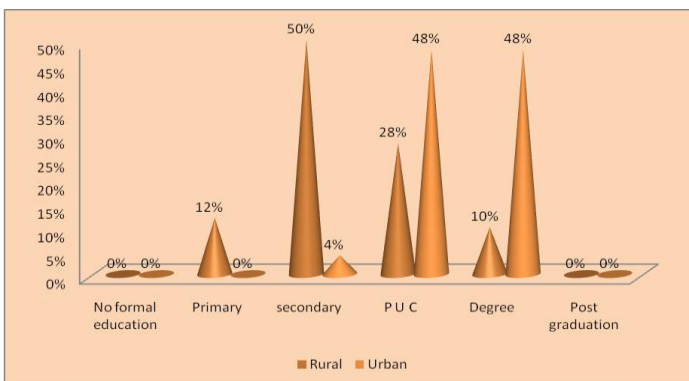


Fig 3. Percentage Distribution of Pregnant Mothers According Their Educational Status

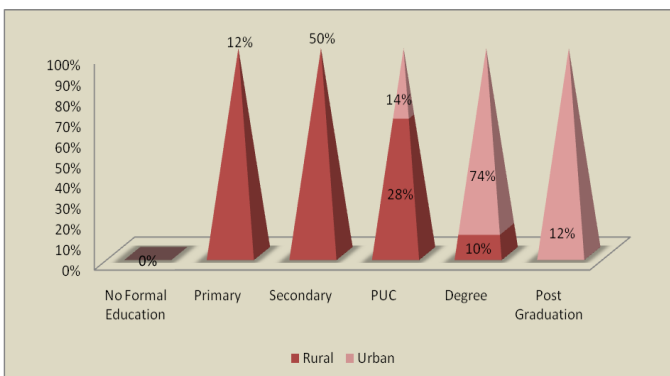


Fig 4. Percentage Distribution of Husband of Educational Status of The Husband

Percentage wise distribution of Sample according to their Occupation illustrate that, in rural area 50% of the parents were House wife, 18% of them were Laborer, 26% of them were Formers, , 6% of them were Government employee. Where as in urban area, most of the parents (78%) were House wife, 18% of them were Private employees, , and 4% of them were Government employee. (Fig-5)

Percentage wise distribution of their husband's Occupation illustrate that, in rural area 30% of them were Formers, 26% of them were Laborer, 16% of them were Private employees, , 14% of them were Government employee and 14% of them were businessman . Where as in urban area, most of their husband's (34%) Government employees, 42% of them were Private employees, , and 24% of them were businessman. (Fig-6)

The Percentage wise distribution of Sample according to their Income reveals that, In rural area Most (56%) of the pregnant mothers family monthly income was Rs. Less than 5000, 28% of them were having Rs.5000 - 10,000, 06% of them were having Rs.10000-15000, and 10% of them were having Rs.15,000 and above. Where as in urban area, most (44%) of the pregnant mothers family monthly income was between Rs.15000 &above, 38% of them were having Rs.5000 -10,000, 02% of them were having Rs. Less than 5000, 16% of them were having Rs.10000- 15000.. (Fig-7)

The Percentage wise distribution of Sample according to their number of gravida reveals that, in rural area most of (58%) the pregnant mothers were primi gravida and 34% of them were Gravida-II, and 08% of them were Gravida-III & above, Where as in urban area, most of the pregnant mothers (78%) were belongs to primi gravida and 18% of them were Gravida-II, and 04% of them were belongs to Gravida-III & above. (Fig-8).

The Percentagewise distribution of sample according to their history of depression in the family depicts that, in urban area most of (94%) the pregnant mothers family doesn't had history of depression in the family, 06% of them were had a history of depression in the family. Where as in rural area most of (96%) pregnant mothers family doesn't had history of depression in the family, 04% of them were had a history of depression in the family.(Fig-9).

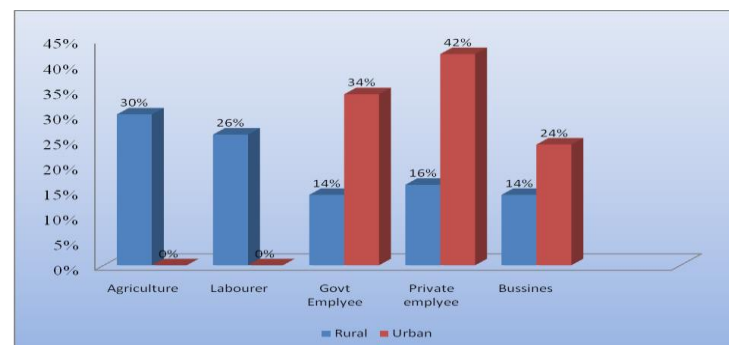


Fig 5. Percentage Distribution of Pregnant Mothers According To Their Occupation

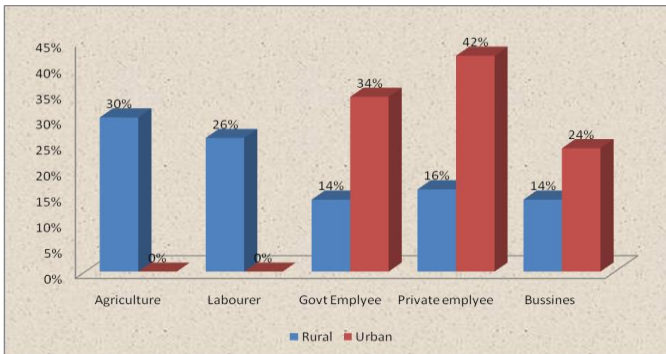


Fig 6. Percentage Distribution of Occupation of the Husband

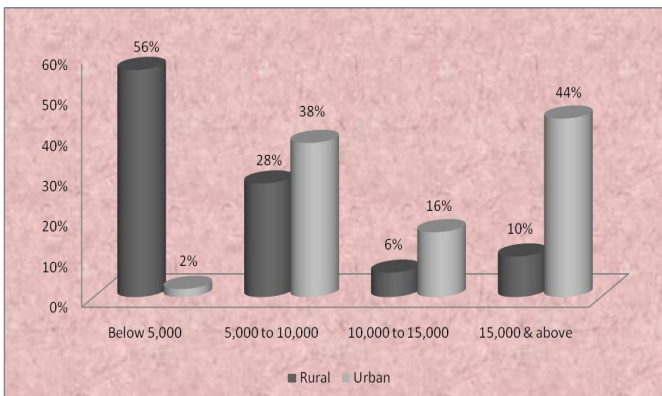


Fig 7. Percentage Distribution of Monthly Income of the Family

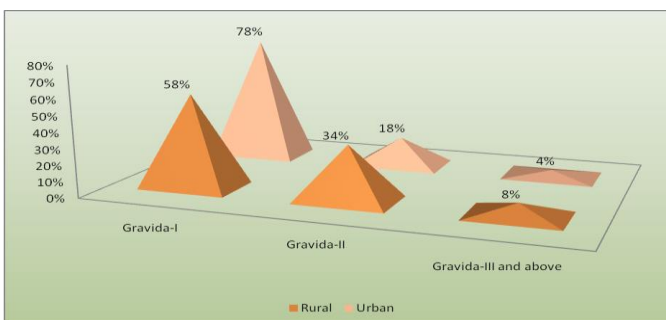


Fig 8. Percentage Distribution of Pregnant Mother According to their No of Gravida

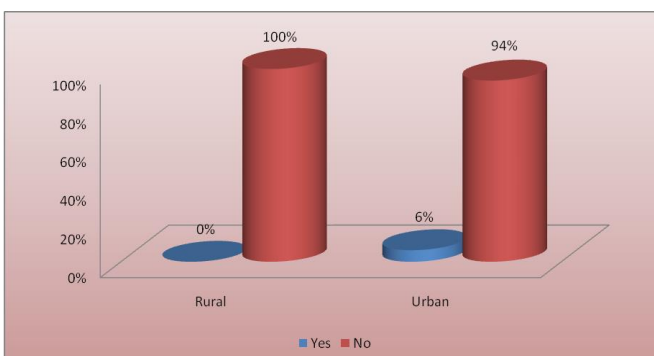


Fig 9. Percentage Distribution of According to the History of Depression in the family

District.

Section-A: Assessment of levels of knowledge regarding psychosocial risk factors contributing to depression and its prevention among pregnant mother’s attending antenatal clinics at selected urban areas of Bagalkot District.

Categorization of the pregnant mother’s on the basis of the level of knowledge was done as follows: scores 25-30 Excellent knowledge level, scores 19-24 good knowledge level, scores 13-18 Average knowledge level, scores 7-12 poor knowledge level, scores 0-6 very poor knowledge level.

Table-1 Levels of knowledge regarding depression and its prevention during pregnancy among Rural & Urban pregnant mothers

N=100.

Level of knowledge	Rural		Urban	
	F	%	F	%
Excellent	0	0	10	20
Good	0	0	28	56
Average	09	18	12	24
Poor	39	78	0	0
Very Poor	2	4	0	0
Total	50	100	50	100

The levels of knowledge regarding depression and its prevention during pregnancy among rural and urban pregnant mothers reveals that, Most of rural pregnant mothers (78%) had Poor knowledge, 18 percent of them had Average knowledge, 4 percent of them had very poor knowledge and there were no pregnant mothers who had excellent & good knowledge regarding depression during pregnancy. Where as in urban area majority (56%) of the pregnant mothers had good knowledge, 24 percent of them had average knowledge, 20 percent of them had excellent knowledge, and there were no pregnant mothers who had very poor & regarding depression and its prevention during pregnancy. (Table-1)

Part-II: Assessment of levels of knowledge regarding psychosocial risk factors contributing to depression and its prevention among pregnant mother’s attending antenatal clinics at selected urban areas of Bagalkot

Section-B: Area wise mean, SD and mean percentage of knowledge scores of Rural & Urban people regarding depression and its prevention during pregnancy

Table2: Area wise mean, SD and mean percentage of knowledge score N = 100

Knowledge area	Max score	Rural			Urban		
		Mean	SD	Mean %	Mean	SD	Mean %
General information regarding depression	5	2.2	0.64	44	3.36	0.59	11.2
Psychosocial risk factors contributing to depression during pregnancy	15	4.9	2.53	32.66	10.68	1.41	35.6
Preventive measures for depression during pregnancy	10	3.46	1.00	34.6	7.18	2.46	23.93
Total	30	10.56	6.20	35.2	21.22	7.73	70.73

The Area wise mean, SD and mean percentage of knowledge score of rural and urban pregnant mothers reveals that, The total mean percentage of knowledge scores of rural pregnant mothers was 35.2 percent with mean and SD 10.56±6.20. Area wise mean percentage of knowledge scores was 44 percent in the area of ‘General information regarding depression during pregnancy’ with mean and SD 2.2 ±0.64. In the area of ‘psychosocial risk factors contributing to depression during pregnancy, the mean percentage was 32.66 percent with mean and SD 4.9 ± 2.53. In the area of ‘prevention of depression during pregnancy’ with mean percentage was 34.66% with mean and SD 3.46±1.00. (Table-2)

The Area wise mean, SD and mean percentage of knowledge score of urban pregnant mothers reveals that, The total mean percentage of knowledge scores of urban parents was 70.73 percent with mean and SD 21.22±7.73. Area wise mean percentage of knowledge scores was 11.2 percent in the area of ‘General information regarding depression during pregnancy’ with mean and SD 3.36 ± 0.59. In the area of ‘psychosocial risk factors contributing to depression during pregnancy’, the mean percentage was

35.6 percent with mean and SD 10.68±1.41. In the area of ‘prevention of depression during pregnancy’ with mean percentage was 23.93% with mean and SD 7.18±2.46. (Table-2)

Part-III: Comparison of knowledge scores regarding psycho social risk factors contributing to depression and its prevention during pregnancy between Rural and Urban pregnant mothers.

Table-3 Comparison of Knowledge Level of rural and urban pregnant mothers

N = 100

Rural			Urban		
Mean	SD	Mean%	Mean	SD	Mean%
10.56	6.20	35.2	21.22	7.73	70.73

Z = 7.65 (Table value = 1.96)

The Comparison of knowledge level of rural and urban pregnant mothers regarding psycho social risk factors contributing to depression and its prevention reveals that, a statistically significant difference was found between the knowledge of rural pregnant mothers (10.56±6.20) and urban pregnant mothers (21.22±7.73) regarding depression during pregnancy at 0.05 level of significance [Z= 7.65]. It indicated that urban pregnant mothers had good knowledge regarding depression during pregnancy as compared to rural pregnant mothers. (Table-3)

Hence H₁ stated “there will be a significant difference in knowledge regarding psychosocial risk factors contributing to depression and its prevention between pregnant mother’s attending antenatal clinics at selected urban areas of Bagalkot District.” is accepted.

Part-IV: Association of the Knowledge Scores of pregnant mothers with their Socio-demographic Variables.

To find out association of the knowledge scores of pregnant mothers with their socio-demographic variables a research hypothesis was formulated.

H₂: There will be a significant association between knowledge scores of rural and urban pregnant mother’s regarding psychosocial risk factors contributing to depression and its prevention with their socio-demographic variables.

The hypothesis was tested using Chi-square test.

Table4: Association of the Knowledge Scores of pregnant mothers with Their Socio-demographic Variables.

Demographic Variables	Rural	Urban
	Value of chi-square	Value of chi-square
Age	4.18*	6.24*
Religion	8.13*	2.08 ^{NS}
Education status of the pregnant mother	1.17 ^{NS}	25.88*
Education status of husband	0.15 ^{NS}	0.88 ^{NS}
Occupation of the pregnant mother	0.22 ^{NS}	7.45*
Occupation of the husband	5.86*	2.88 ^{NS}
Family monthly income	0.12 ^{NS}	7.06*
Number of gravid	0.64 ^{NS}	0.24 ^{NS}
History of depression in the family	0.25 ^{NS}	1.41 ^{NS}

DF = 1

NS = Not significant

* Significant (P < 0.05)

The association of the Knowledge Scores of pregnant mothers with their Socio-demographic Variables shows that, there is a significant association between knowledge of rural pregnant mothers and demographic variable like age ($\chi^2 = 4.18$; $P < 0.05$), Religion ($\chi^2 = 8.13$; $P < 0.05$) and Occupation of husband ($\chi^2 = 5.86$; $P < 0.05$) and no significant association found between knowledge of rural pregnant mothers with their other demographic variables like occupation of pregnant mothers, educational status of pregnant mother, educational status of husband, income, Number of gravida, History of depression in the family. (Table-4)

Similarly, significant association was found between knowledge of urban pregnant mothers and demographic variables like age ($\chi^2 = 6.24$; $P < 0.05$), Income ($\chi^2 = 7.06$; $P < 0.05$), educational status of pregnant mother ($\chi^2 = 25.88$; $P < 0.05$), occupation of pregnant mothers ($\chi^2 = 7.45$; $P < 0.05$), and no significant association found between knowledge of urban pregnant mothers with their other demographic variables like religion, Educational status, of husband, occupation of husband, number of gravid and history of depression in the family. (Table-4)

Thus the H_2 stated is accepted for socio demographic variable of age, religion and occupation of husband in case of rural pregnant mothers. Whereas H_2 stated is accepted for socio demographic variables like age, educational status of pregnant mother and occupation of pregnant mother in case of urban pregnant mothers.

IV. CONCLUSION

Over all findings show that, there is significant difference in knowledge of rural and urban pregnant mothers. Thus it is concluded that educational programmes should be administered to the rural parents to enhance their knowledge regarding psychosocial risk factors contributing to depression and its prevention.

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