Original Research Article

Effectiveness of STP regarding abortion and its consequences

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ABSTRACT

Background: Pregnancy among the adolescent are usually unintended which again results in illegal abortion. In order to fill the knowledge gap and remove negative attitude regarding abortion proper sex education and healthy mindset should be inculcated among the youth.

Aims: To evaluate the effectiveness of structured teaching programme regarding abortion and its consequences among undergraduate students

Settings: Sankar Madhab College of Nursing, Rahman Institute Of Nursing & Paramedics Sciences and CPMS College Of Nursing, Guwahati,Assam

Design: Pre-experimental One group pre-test post-test design

Materials and Methods: 100 Bsc nursing students were selected by consecutive sampling technique for the study. Self Administered Structured questionnaire for the assessment of knowledge and 5-Point likert scale for assessment of attitude were used.

Statistical analysis: Collected data was analyzed using SPSS version 20.

Results: In pre-test majority 75% had inadequate knowledge and in post test majority 61% had adequate knowledge. 97% had favorable attitude and 3% has unfavorable attitude in post test. There was significant association between the pre-test knowledge score with selected demographic variables. There was also significant association between the pre-test attitude score of the undergraduate students with selected demographic variables. Mean post-test knowledge score (14.89) was higher than mean pre-test knowledge score (6.22). The mean post-test attitude score (37.38) was higher than mean pre-test attitude score (31.36) among the undergraduate students.

Conclusion: The structured teaching programme was found effective on knowledge and attitude regarding abortion and its consequences among the undergraduate students.

1. Introduction

According to World Health Organization, Abortion is defined as the expulsion or extraction from its mother of an embryo or fetus weighing 500g or less when it is not capable of independent survival.[1]

Abortion can be considered as a major problem worldwide. It is one of the important cause of maternal morbidity and mortality. In some countries, it is legally accepted and in some others not accepted at all for any reason. In India, can be performed on various grounds until 20 weeks of pregnancy. The termination of pregnancies up to 24 weeks will only apply to specific categories of women, as may be prescribed by the central government.[2] Abortion may also cause complications like severe haemorrhage, shock, sepsis, uterine perforation, cervical injury, severe anemia, severe infection, renal failure. In late sequelae - infertility, ectopic gestation, increased risk of spontaneous abortion and reduced birth weight. There are two types of abortion: Spontaneous and Induced, Spontaneous abortions, or miscarriages, occur for many reasons, including disease, trauma, genetic defect, or biochemical incompatibility of mother and fetus. Occasionally a fetus dies in the uterus but fails to be expelled, a condition termed a missed abortion.[1]

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Abortion is common and it should be considered part of a broader reproductive health agenda. Unexpected pregnancies in college life become altering the life.[3] According to many studies, abortion rate have become very high among young youths. Poverty and lack of awareness are also the deciding factors in early marriages and teenage pregnancies in rural areas, Love affairs at school and teenage elopements are also increasing. The impact of media, especially television, is affecting the child's mind. The access to Internet is another factor. Add to this the lack of proper sex education and parental guidance and it leads to misguided sexual explorations that often results in pregnancy[4]. Proper education among the reproductive age group is highly necessary in order to avoid unintended pregnancy leading to abortion.

According to the National Family Health Survey (NFHS-4) India 2015-16 ASSAM , Among young women age 15-19 in Assam, 14 percent have already begun childbearing, that is, they have already had a live birth or are pregnant with their first child, down from 16 percent in NFHS-3. Less than 5 percent of women age 15-16 years have started childbearing, but this proportion increases sharply to 21 percent among women who are 18 years old and to 32 percent among women who are 19 years old. Young women who had no schooling are more than eight times as likely to have begun childbearing as young women with 12 or more years of schooling.[5]

Unsafe abortion occurs when a pregnancy is terminated either by persons lacking the necessary skills or in an environment that does not conform to minimal medical standards, or both (WHO). Until unsafe abortion and its consequences are eliminated, complications from unsafe abortion will remain a major cause of maternal mortality and morbidity. Unsafe abortion can be prevented through: comprehensive sexuality education; prevention of unintended pregnancy through use of effective contraception, including emergency contraception; and provision of safe, legal abortion. In addition, deaths and disability from unsafe abortion can be reduced through the timely provision of emergency treatment of complications.[6]

2. Statement of the problem

A study to evaluate the effectiveness of structured teaching programme on knowledge and attitude regarding abortion and its consequences among undergraduate students in selected colleges of Guwahati, Assam."

3. Objectives

1. To assess the existing knowledge regarding abortion and its consequences among undergraduate students before administering Structured Teaching Programme in selected colleges of Guwahati, Assam.

2. To assess the attitude regarding abortion and its consequences among undergraduate students in selected colleges of Guwahati, Assam.
3. To evaluate the effectiveness of structured teaching programme on abortion and its consequences among undergraduate students in selected colleges of Guwahati, Assam.
4. To determine the association between pre-test knowledge score and selected demographic variables of undergraduate students in selected colleges of Guwahati, Assam.To determine the association between pre-test attitude score and selected demographic variables of undergraduate students in selected colleges of Guwahati, Assam.

Hypotheses (the hypotheses were tested at 0 05 level of significance

1. H_1: There is significant difference between the pre-test and post test knowledge scores among undergraduate students regarding abortion and its consequences.
2. H_2: There is significant association between pre-test knowledge score and selected demographic variables of undergraduate students in selected colleges of Guwahati, Assam.
3. H_3: There is significant association between pre-test attitude score and selected demographic variables of undergraduate students in selected colleges of Guwahati, Assam.

4. Material and Methods

4.1. Research approach

Quantitative research approach.

4.2. Research design

Pre-experimental one group pre-test, post-test design

4.3. Setting of the study

The setting for the study was conducted in 3 colleges of Guwahati, Assam, as listed below:

1. Sankar Madhab College of Nursing
2. Rahman Institute of Nursing and Paramedics Sciences
3. CPMS College of Nursing

4.4. Population

Undergraduate students studying 2nd year B.Sc Nursing in different selected Nursing Colleges of Guwahati , Assam.

4.5. Sample and sample size

100 undergraduate students who are pursuing second year b.sc nursing course in selected colleges of Guwahati,

Assam.

4.6. Sampling techniques

Non probability consecutive sampling technique.

4.7. Sampling criteria

4.7.1. Inclusion criteria
1. Undergraduate female students.
2. Undergraduate students both married and unmarried.
3. Participants who are willing to participate

4.7.2. Exclusion criteria
College students who are sick at the time of data collection.

4.7.3. Variables
The variables for the present study are:

1. **Demographic variable**: Age, religion, educational status of mother, educational status of father, occupation of mother, occupation of father, type of family , area of residence, sources of information regarding abortion and its consequences.
2. **Dependent variable**: Knowledge and attitude of undergraduate college students regarding the abortion and its consequences.
3. **Independent variable**: Structured teaching program on abortion and its consequences.

4.8. Development of the tool

In the attempt to assess the knowledge and attitude regarding abortion and its consequences among the undergraduate students in selected colleges of guwahati , assam, tools were prepared in the form of self - administered structured questionnaire and 5-point likert scale.

4.9. Description of the tool

The study tool consist of 4 sections:

4.9.1. Section I: Demographic proforma
Demographic Proforma was used to collect the background information. It includes Demographic variables like age, - Age, religion, educational status of mother, educational status of father, occupation of mother, occupation of father, type of family , area of residence, sources of information regarding abortion and its consequences.

4.9.2. Section II: Self- administered structured questionnaire
It was used to assess the knowledge regarding abortion and its consequences among the under graduate students.There are 20 items and all the items were multiple choice question. The items are prepared as per the following heading:

1. Definition and causes of abortion
2. Types of abortion
3. Medical termination of Pregnancy Act
4. Methods of abortion
5. Consequences of abortion
6. Prevention and control of unsafe abortion
7. Recommendations for someone considering an abortion

4.9.3. Scoring and interpretation
The scoring pattern adopted was 1 mark for correct answer and 0 for wrong answer, maximum score was 20. The knowledge score were divided into 3 areas.

1. Inadequate Knowledge (0-7)
2. Moderately adequate knowledge (8-14)
3. Adequate Knowledge (15-20)

4.9.4. Section III: 5-Point likert scale
There are 10 items, 5 items are positive statement and 5 items are negative statement to assess attitude regarding abortion and its consequences. Scoring for Positive statement is 5,4,3,2,1 from strongly agree to strongly disagree and reversed score from strongly agree to strongly disagree as 1,2,3,4,5 for Negative Statement. The attitude score were divided in 2 areas:

1. Favourable attitude = 31 & above
2. Unfavourable attitude = Below 31

4.9.5. Section IV: Structured teaching programme
The Structured teaching Programme on abortion and its consequences was developed for the undergraduate students as it was felt necessary by the researcher that the students need to be taught about abortion- mainly focusing the unsafe abortion and its consequences so that the undergraduate students will be able to answer correctly.

4.9.6. Content validity of the tool
Content validity was done by 4 experts from the field of Obstetrics and Gynaecological Nursing and 1 expert in the field of community health nursing. The experts were requested to give their opinion in terms of the relevance, clarity and appropriateness of the items and necessary modification and simplification of the language were done.

4.9.7. Reliability of tool
The reliability was established by using Co-Variance Co-Efficient (Split half method formula) formula. The reliability of the tool was found to be 0.88 for knowledge questionnaire and 0.79 for attitude scale. The tool was found to be reliable.

4.10. Ethical Considertaion

Ethical clearance was obtained from the Institutional Ethics Committee, Army Institute of Nursing C/O 151 Base Hospital Guwahati, Assam.

Formal permission was taken from the Principals of Sankar Madhab College of Nursing, Guwahati, Assam, Rahman Institute of Nursing and Paramedics Sciences, Guwahati, Assam and CPMS College Of Nursing , Guwahati, Assam to conduct the study.

Informed written consent was taken from the study participants prior to data collection. Confidentiality and anonymity of the subjects were maintained throughout the study.

4.11. Statistics

The data obtained were organized, tabulated and interpreted by using descriptive and inferential statistics. The analysis of data were organized and interpreted under the following sections:

Section I: Descriptive analysis of Demographic variables.

Section II: Description of pre-test and post-test knowledge score regarding abortion and its consequences among undergraduate students.

Section III: Description of pre-test and post-test attitude score regarding abortion and its consequences among undergraduate students.

Section IV: Description on effectiveness of structured teaching programme regarding abortion and its consequences among undergraduate students.

Section V: Analysis of association between pretest knowledge score and selected demographic variables of undergraduate students.

Section VI: Analysis of association between pre-test attitude score and selected demographic variables of undergraduate students.

5. Results

The result showed that, majority of participants -58% were in 19-20 years of age, 36% were in 21-22 years of age and 6% belongs to the age group of 23-24 years.

41% belongs to Hindu religion, 32% belongs to Christian religion, 24% belongs to Muslim religion and 3% belongs to other religion.

Majority of the participant's mother -31% were graduate and above, 25% were educated up to Higher Secondary level, and 21% were educated till High school level, 10% had education up to Middle school, 7% had education up to primary school level and 6% were illiterate.

56% of the participant's father were graduate and above, 20% were educated up to Higher Secondary level, as well as 14% were educated till High school level, 5% had education up to Middle school, 3% had education up to primary school level and only 2% were illiterate.

The result also showed that majority of the participant's mothers - 56% were unemployed, 27% were in government service, 11% were in private service and 6% were daily wager.

Majority of the Participant's fathers -53% were in government service, 37% were in private service, 4% were daily wager and 6% were unemployed. 86% participants were from nuclear family and 14% were from joint family.

58% were from urban area and 42% were from Rural areas.

50% Participants had their previous information regarding abortion and its consequences through mass media, 29% had Information from health personnel, 4% had information from family and 17% had no information.

The result showed that, in pre-test majority (75%) had inadequate knowledge and 25% had moderate knowledge where as in the post-test majority (61%) had adequate knowledge and 39% had moderate knowledge regarding abortion and its consequences

The result showed that, in pre-test majority of participants (54%) had favourable attitude and 46% had unfavourable attitude, where as in post-test majority (97%) had favourable attitude and only 3% had unfavourable attitude regarding abortion and its consequences.

The paired t test was carried out to examine the effectiveness of the structured teaching programme. In order to evaluate the effectiveness of structured teaching programme, the following null hypothesis was stated.

H_{01}: There is no significant difference between the pre-test and post test knowledge scores among undergraduate students regarding abortion and its consequences.

The result showed that mean post-test knowledge score 14.89 ± 2.445 was higher than mean pre-test knowledge score 6.22 ± 2.227 with mean difference of 8.67. Pre-test and post-test mean knowledge score was compared by using paired t test which revealed that the calculated value (t=27.27, df=99, p=0.001) was highly significant. So, we have the evidence to accept research hypothesis (H_1) and it reflects that the structured teaching programme was found effective. Hence, null (H_{01}) Hypothesis is rejected.

The result also showed that mean post-test attitude score 37.38 ± 3.850 was higher than mean pre-test attitude score 31.36 ± 3.979 with mean difference of 6.02. Pre-test and post-test mean attitude score was compared by using paired t test which revealed that the calculated value (t=11.64, df=99, p=0.001)was highly significant. Hence, Structured teaching programme was effective in improving the attitude of undergraduate students regarding abortion and its consequences.

Table 1: Frequency and Percentage distribution of Demographic variables. N=100

Socio demographic variables	Frequency	Percentage
Age		
19-20 years	58	58
21-22 years	36	36
23-24 years	36	6
Religion		
Christian	32	32
Hindu	41	41
Muslim	24	24
Others	3	3
Educational status of mother		
Illiterate	6	6
Primary school	7	7
Middle school	10	10
High School	21	21
Higher Secondary School	25	25
Graduate and above	31	31
Educational status of father		
Illiterate	2	2
Primary school	3	3
Middle school	5	5
High School	14	14
Higher Secondary School	20	20
Graduate and above	56	56
Occupation of Mother		
Unemployed	56	56
Daily Wager	6	6
Private Service	11	11
Govt. Service	27	27
Occupation of Father		
Unemployed	6	6
Daily Wager	4	4
Private Service	37	37
Govt. Service	53	53
Type of Family		
Nuclear Family	86	14
Joint Family	14	14
Area of residence		
Urban	58	58
Rural	42	42
Source of information regarding abortion and its consequences		
Health Personnel	29	29
Family	4	4
Friends	0	0
Mass media	50	50
No Information	17	17

*$p<0.05$ Level of significance NS=Not significant

Table 2: Frequency and Percentage distribution of pre-test and post-test knowledge score regarding abortion and its consequences among undergraduate students. N=100

Knowledge Score	Pre-test Score		Post-test Score	
	Frequency (f)	Percentage (%)	Frequency (f)	Percentage (%)
Inadequate knowledge (0-7)	75	75	0	0
Moderate knowledge (8-14)	25	25	39	39
Adequate knowledge (15-20)	0	0	61	61

Table 3: Frequency and percentage distribution of Pre-test and post-test attitude score regarding abortion and its consequences among undergraduate student. N=100

Attitude Score	Pre-test Score		Post-test Score	
	Frequency (f)	Percentage (%)	Frequency (f)	Percentage (%)
Favorable attitude (31 & Above)	54	54	97	97
Unfavorable attitude (Below 31)	46	46	3	3

Table 4: Comparison (Paired t-test) between Pre-test and Post-test knowledge score and attitude score regarding abortion and its consequences among undergraduate students. N=100

Knowledge	Score Range	Mean	SD	Mean Difference	T value	D f	P value	Remarks
Pre-test	1-12	6.22	2.227	8.67	27.27	99	0.001	S*
Post-test	10-20	14.89	2.445					
Attitude								
Pre-test	24-43	31.36	3.979	6.02	11.64	99	0.001	S*
Post-test	29-46	37.38	3.850					

*p<0.05 Level of significance
NS=Not significant

he resultrevealed that significant association was obtained between pre-test levels of knowledge score with age, religion and source of information of regarding abortion and its consequences among the undergraduate students at 0.05 level of significance (p<0.05).

Hence null hypothesis (H_{02}) is rejected and research hypothesis (H_2) is accepted with respect to age, religion, stream of studies, educational status of mother, educational status of father, occupation of mother, occupation of father, type of family, area of residence, source of information regarding abortion and its consequences.

The result showed that significant association was obtained between pre-test attitude score with selected demographic variables (age, religion, educational status of mother and source of information) at 0.05 level of significance (p<0.05).

6. Discussion

The study result showed that, majority of the participants (75%) had inadequate knowledge. The study finding is supported by the study findings conducted by Mekonnen Ataguadil, Awoke Zemnu (2020) on Assessment of Knowledge, Attitude and Practice Women of Reproductive Age Group Towards Abortion Care at Gambella Health Facilities, South West of Ethiopia which shows that out of 422 sampled women of reproductive age group (15-49 years of age), more than 30.5% of the respondents were having inadequate knowledge and lacking knowledge and had negative attitude towards induced abortion respectively.[7]

The study result showed that majority of participants (54%) had unfavourable attitude and 46% had favourable attitude regarding abortion and its consequences. The finding is supported by the study conducted by Yaecob R,

Abera D and Meleko A (2018) on Knowledge, Attitude and Practice towards Induced Abortion and Associated Factors among Female students in Yebu Secondary School, South West Ethiopia where findings shows that more than 70% of the respondents were lacking knowledge and had negative attitude towards induced abortion.[8]

In the study result, the mean post-test knowledge score (14.89) was higher than mean pre-test knowledge score (6.22). The mean post-test attitude score (37.38) was higher than the mean pre-test attitude score (31.36). Thus, The result shows that the structured teaching programme was effective on knowledge and attitude regarding abortion and its consequences. The findings is supported by the study conducted by Moon H Shalini (2019) to assess the effectiveness of structured Teaching programme on the level of knowledge regarding Prevention of abortion among first-trimester pregnant Mother at selected maternity hospitals. The findings shows that the calculated 't' value was higher than the tabulated value at 5% level of significance which was statistically acceptable level of significance. In addition the calculated 'P' value for all the areas of knowledge regarding prevention of abortion among first-trimester pregnant mother was 0.000 which was ideal for any population. Hence it is statistically interpreted that the structured teaching programme on prevention of abortion among first-trimester pregnant mother was effective.[9]

The study result showed that, there was significant association between the pre-test knowledge score of the undergraduate students with selected demographic variables namely age (p=0.001), religion (p=0.005) and source of information regarding abortion and its consequences (p=0.001) at 0.05 level of significance (p<0.05). The study finding is supported by the study conducted by Abiola

Table 5: Association between pretest knowledge with selected demographic variables of undergraduate students N=100

Demographic variables	Knowledge scores			χ^2	Df	PValue	Remarks
	Inadequate (0-7)	Moderately adequate (8-14)	Adequate (15-20)				
Age in years							
19-20	58	0	-	52.14	2	0.001	S*
21-22	17	19	-				
23-24	0	6	-				
Religion							
Christian	17	15	-				
Hindu	36	5	-	12.97	3	0.005	S*
Muslim	19	5	-				
Others	3	0	-				
Educational status of mother							
Illiterate	3	3	-				
Primary school	7	0	-	5.807	5	0.325	
Middle school	9	1	-				
High School Higher	15	6	-				
Secondary School	18	7	-				
Graduate and above	23	8					
school High School	2	0	-				
Higher Secondary	3	0	-				
School Graduate and above	4	1	-	6.476	5	0.263	
Educational status of father			-				
Illiterate Primay	11	3					
School Middle	11	9					
Occupation of Mother				7.148	3	0.67	
Unemployed	43	13	-				
Daily Wager	2	4	-				
Private Service	10	1	-				
Govt. Service	20	7	-				
Occupation of Father							
Unemployed	6	0	-	7.095	3	0.069	
Daily Wager	4	0	-				
Private	23	14	-				
Service Govt. Service	43	1	-				
Type of Family							
Nuclear	62	24	-				
Family							
			-	2.769	1	0.096	
Joint Family	13	1					
Area of residence							
Urban	43	15					
Rural	32	10	-	0.055	1	0.815	
Source of information regarding abortion and its consequens							
Health	14	15					
Personnel Family	4	0	-	18.5	3	0.001	S*
Friends	-	-	-				
Mass media	45	5					
No Informatin	12	5					

* p<0.05 Level of significance NS=Not significant

Table 6: Association between pre-testattitude with selected demographic variables of undergraduate students. N=100

Demographic variables	Attitude scores		$\chi 2$	Df	P-Value	Remarks
	Favourable (31&above)	Unfavourable (Below 31)				
Age						
19-20	12	46				
21-22	36	0	61.68	2	0.001	S*
23-24	6	0				
Religion						
Christian	23	9	17.14	3	0.001	S*
Hindu	12	29				
Muslim	17	7				
Others	2	1				
Educational status of mother						
Illiterate	6	8				
Primary school	2	5				
Middle school	8	2	13.92	5	0.016	S*
High School	10	11				
Higher Secondary School	16	9				
Graduate and above	12	19				
Educational status of father						
Illiterate	1	1				
Primary school	1	2				
Middle school	4	1	5.184	5	0.394	
High School	10	4				
Higher Secondary School	12	8				
Graduate and above	26	30				
Occupation of Mother						
Unemployed	32	24				
Daily Wager	5	1	3.617	3	0.306	
Private Service	5	6				
Govt.Service	12	15				
Occupation of Father						
Unemployed	4	2				
Daily Wager	4	0				
Private Service	21	16	4.904	3	0.179	
Govt.Service	25	28				
Type of Family						
Nuclear Family	47	39				
Joint Family	4	7	0.105	1	0.746	
Area of residence						
Urban	29	29	0.890	1	0.346	
Rural	25	17				
Source of information regarding abortion and Its consequences			8.552	3	0.036	S*
Health Personnel	22	7				
Family	1	3				
Friends	-	-				
Mass media	23	27				
No Information	8	9				

* p<0.05Level of significance NS=Not significant

Abdul-Hakeem O,Oke Oluwabunmi A, Balogun Mobolanle R, Olatona Foluke A, Adegbesan- Omilabu Maymunah A (2016) on Knowledge, attitude, and practice of abortion among female students of two public senior secondary schools in Lagos Mainland Local Government Area, Lagos State. The study finding reveals that there was a statistically significant association (P = 0.004) between knowledge and the selected demographic variable i.e. ages regarding abortion.[10]

The study showed that, there was significant association between the pre-test attitude score with selected demographic variables namely age (0.001), religion (0.001), education status of mother (0.016) and source of information regarding abortion and its consequences (0.36) among the undergraduate students at 0.05 level of significance (p<0.05). The finding of the study contrast the study conducted by Tilahun F D and Misgun S M (2017) cross sectional study regarding Knowledge and attitude of women towards the legalization of abortion in the selected town of Ethiopia, Arba Minch town among Women of the reproductive age groups (15–49) and where it was found that educational status, marital status and having knowledge about the legalization of abortion were a statistically significant (P=0.001) association with the attitude.[11]

7. Conflict of Interest

None.

8. Source of Funding

None.

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