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2022/2023 PhD Thesis Abstract

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RT: Prenatal Educational Intervention on Birth Preparedness and Complication Readiness among Pregnant Women in Selected Primary Health Care Facilities in Ondo State, Nigeria

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AB: Birth Preparedness and Complication Readiness (BPCR) has been globally recognized as a proven strategy in the reduction of maternal mortality ratio. In Nigeria, studies have shown that there is poor knowledge and practice of BPCR among pregnant women because of inadequate education during antenatal. This has contributed to an increase in maternal mortality ratio. Furthermore, there are limited studies on educational intervention of BPCR among pregnant women in Nigeria. Thus, the study explored prenatal educational intervention of BPCR among pregnant women in selected Primary Health Care (PHC) facilities in Ondo State, Nigeria.

A mixed-method of sequential exploratory research approach was employed. The study was conducted in two selected PHC facilities based on the availability of midwives and pregnant women attendees. Purposive sampling was used to recruit 17 pregnant women and eight midwives for the qualitative aspect. A sample size of 220 participants were recruited into the quantitative aspect (control (110) and (110) experimental) respectively. Participants that met the inclusion criteria were purposively selected to both groups. Two unstructured interview guides were used to collect qualitative data. An educational package of Johns Hopkins program was adapted into two instruments for data collection and training package for the intervention in the study. The reliability indexes for the instruments to measure knowledge and practice checklist

were 0.75 and 0.81 respectively. The response rate was 94.5%. Post-intervention measures were collected at four weeks (P1) and eight weeks (P2). Qualitative data were analysed thematically while the quantitative data were analysed using descriptive and inferential (paired t-test) statistics at $p \leq 0.05$.

Findings on qualitative aspect revealed four themes: knowledge (danger signs, routine scan, antenatal registration and diet), practice (purchase of baby items, hospital items and identification of health facilities), determinants (finance, ignorance, attitude of midwives and location) and contents (danger signs, purchase of baby items, arrangement of transportation, arrangement of companion during delivery). The pre-and P1 knowledge of participants on BPCR were 2.01 ± 1.59 and 7.15 ± 1.20 respectively, in the EG; whereas they were 2.12 ± 1.45 and 2.64 ± 1.55 respectively, in the CG. There was a knowledge measure of 7.15 ± 1.20 at P1 in the EG as against 5.02 ± 1.47 at P2 while the CG had 2.64 ± 1.55 and 3.06 ± 1.20 respectively. The pre- and post-intervention practice of participants on BPCR were 3.92 ± 2.12 and 7.23 ± 2.04 respectively, in EG; whereas they were 3.80 ± 1.80 and 3.66 ± 1.62 respectively, in CG. There was a significant difference between P0 and P1 knowledge mean score of pregnant women on BPCR elements in EG ($t = -24.36, p = 0.00$), between P1 and P2 of EG ($t = 11.73, p = 0.00$) and practice of BPCR elements ($t = -8.47, p = 0.00$).

The study concluded that educational intervention improved knowledge and practice of BPCR among pregnant women in Ondo State. It is therefore recommended that pregnant women should be exposed to adequate preparation on BPCR elements during antenatal contacts.

Keywords: Birth preparedness, Complication readiness, Educational intervention, Maternal mortality, Pregnant women, Prenatal education

Word Count: 497

Abbreviations: *RFN: Researcher's Full Name, RD: Researcher's Department, RS: Researcher's School, RE: Researcher's Email, RAE: Researcher's Alternate Email, RP: Researcher's Phone Contact, RT: Registered Title, MS: Main Supervisor, ME: Main Supervisor's E-mail Address, SP: Main Supervisor's Phone Contact, CS: Co-Supervisor, CE: Co-Supervisor's E-mail Address, CP: Co-Supervisor's Phone Contact, AB: Abstract*

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