Abstract
A study was conducted to assess the knowledge about birth preparedness among primi gravid women attending antenatal clinic on birth preparedness to find out the association between knowledge scores with selected demographic variables. The data was collected with structured interview schedule. The findings demonstrated significant association between the knowledge and the selected demographic variables like education and income of the samples under study.

Keywords: BP-Birth Preparedness, Primi Gravid Women, Knowledge & Association

Introduction
Birth preparedness refers to a state of readiness for the emergence of the baby. Pregnancy is not just a matter of waiting to give birth. It is often a defining phase in women life; can be joyful and pleasant experience.¹ The birth preparedness is an under-recognized but common manifestation of pregnancy that has important significance. Therefore it is one of the most important aspect of a women's life. Knowledge of obstetric danger signs and birth preparedness and practices regarding health promotion in antenatal care are the most essential aspect of birth preparedness.²

Need for the study
From 1990 to 2015, the global maternal mortality ratio declined by 44 per cent – from 385 deaths to 216 deaths per 100,000 live births, according to UN inter-agency estimates. Almost all maternal deaths can be prevented, as evidenced by the huge disparities found between the richest and poorest countries. The lifetime risk of maternal death in high-income countries is 1 in 3,300, compared to 1 in 41 in low-income.³

Birth preparedness has been globally endorsed as an essential component of safe motherhood programs to reduce delays for care. Preparing for childbirth is one of the most exciting times for a woman; however, it may also be a time of fear and anxiety for a mom-to-be, for this reason only this topic was selected. Birth Preparedness and Complication Readiness (BP/CR) is a strategy to promote utilization of skilled maternal and neonatal care timely, based on the theory that preparing for childbirth and being ready for complications reduces delays in obtaining this care. In a skilled care approach, birth preparedness includes identifying a skilled provider and making the necessary plans to receive skilled care for all births.⁴ Complication readiness (emergency funds, transport, blood donor and designated decision-maker) receive greater emphasis in emergency obstetric care programs.

Statement of the Problem
“A study to assess the knowledge about birth preparedness among primi gravida women attending antenatal clinic of selected hospitals Dewas (Madhya Pradesh.)”

Objectives of the Study
• To assess the knowledge of primi gravida women on birth preparedness.
• To find out the association between the level of knowledge scores with selected demographic variables.
Hypotheses

H: There is a significant association between the knowledge score and the selected demographic variables.

Research Methodology

- **Research approach**: Quantitative approach
- **Research design**: Descriptive Design
- **Setting**: Antenatal Clinic, District hospital, Dewas
- **Population**: Primigravida women attending antenatal clinic
- **Sampling technique**: Purposive sampling technique
- **Setting criteria**: Primigravida women who are accessible during the study and willing to participate
- **Duration of the study**: One month
- **Research Variables**: Demographic Variables & Knowledge
- **Sample size**: 100
- **Tools for data collection**: 30 items in Self Structured Questionnaire after testing reliability & content validity

Data Collection Procedure

The participants were interviewed using a structured questionnaire with 30 items which included socio-demographic profile, parity, gestational age at initial antenatal care, place of residence and average distance from the hospital.

Scoring Key

| level of knowledge | Range of score |
|--------------------|---------------|
| Poor               | 0-12          |
| Average            | 13-24         |
| Good               | 25-36         |

Criteria for Selection of Sample

**Inclusion criteria**

- Primigravida women who are
- Accessible during the study
- Willing to participate in the study
- In the first trimester.

**Exclusion Criteria**

- Multigravida mothers
- Primigravida woman whose gestation is more than 3 months
- Primigravida women who already had attended the birth preparedness classes

Result

Assess the knowledge of primigravidae woman regarding birth preparedness

| S. No. | Level of Knowledge | Frequency | Percentage (%) |
|--------|--------------------|-----------|----------------|
| 1.     | Excellent: Above 80% (> 24) | 8         | 8              |

Discussion

Figure 1 Shows the frequency and percentage distribution of level of knowledge of pregnant women regarding birth preparedness. 8% of Pregnant women obtained Excellent score (>80%), 57% of Pregnant women got Good score (61%-80%), 30% of Pregnant women obtained Average score (41%-60%), 5% of Pregnant women obtained poor score (21%-40%) and not even single Pregnant women score (below 20%) and mean knowledge score of Pregnant women regarding birth preparedness was 20.49 and Mean percentage of knowledge score of pregnant women regarding birth preparedness was 68.30%.

Conclusion

The study revealed the knowledge on birth preparedness among primigravidae do not have adequate knowledge to undergo the birth process therefore it is felt need that the antenatal mothers attending OPD’s should be given birth preparation classes as a routine of the hospital to avoid anxiety and unknown fear related to delivery and imparted knowledge on the subject will demonstrate better coping and unknown apprehension related to birthing process

Ethical Clearance

Permission was taken from the concern authorities in district hospital Dewas, M.P. Informed consent from the samples was obtained. Confidentiality and privacy of data was maintained.

**Source of Fund**: Self

**Conflict of Interest**: None
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Date of Submission: 2019-02-26
Date of Acceptance: 2019-03-17