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## STUDY TO ASSESS THE KNOWLEDGE ON POSTNATAL DEPRESSION AMONG THE STAFF NURSES IN SELECTED HOSPITALS

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### ABSTRACT

**Background:** Motherhood is the most blissful stage of any woman's life. It comes with lots of happiness, joy, ecstasy; but fear & anxiety is also a part of it. Many women experience some affective symptoms during the postpartum period, 4-6 weeks following delivery. Most of these women report symptoms consistent with “baby blues,” a transient mood disturbance characterized by mood lability, sadness, dysphoria, subjective confusion, and tearfulness.

**Aim:** A Pre-Experimental study was conducted in a selected hospitals named Kamla Nehru Hospital and Deen Dayal Upadhyay hospital at district Shimla, H.P. with an objective to assess the knowledge regarding postnatal depression among staff nurses, to assess the effectiveness of self-instructional module on knowledge regarding postnatal depression among staff nurses and to find the association of knowledge of staff nurses regarding postnatal depression with selected variables.

**Methodology:** Quantitative research approach was used with one group pre-test post-test design, which is a pre-experimental design to measure the effectiveness of self- instructional module on postnatal depression among the staff nurses. The study was conducted in a Kamla Nehru Hospital and Deen Dayal Upadhyay Hospital Shimla. The sample comprised of 60 staff nurses selected by convenient sampling technique.

**Result:** The study findings revealed that 6 (10%) had good knowledge, 31(51.7%) had average knowledge and 23(38.3%) had poor knowledge regarding postnatal



depression after administration of self-instructional module knowledge regarding postnatal depression is 96.7% had good knowledge, 3.3% had average knowledge and none had poor knowledge. There was statistically no significant association between pre-test and post-test knowledge with socio demographic variables.

**Conclusion:** There is enhancement of knowledge of staff nurses regarding postnatal depression after application of self-instructional module.

**Keywords:** staff nurses, knowledge, postnatal depression

## INTRODUCTION

Motherhood is the most blissful stage of any woman's life. It comes with lots of happiness, joy, ecstasy; but fear & anxiety is also a part of it. Many women experience some affective symptoms during the postpartum period, 4-6 weeks following delivery. Most of these women report symptoms consistent with “baby blues,” a transient mood disturbance characterized by mood lability, sadness, dysphoria, subjective confusion, and tearfulness. These feelings which may last several days, have been ascribed to rapid changes in women’s hormonal levels, the stress of childbirth, and the awareness of the increased responsibility that motherhood brings. If the symptoms persist longer than 2 weeks, evaluation is indicated for postnatal depression.<sup>1</sup>

Postnatal Depression is reported by 1 in 7 women, but is often ignored or missed. It is considered a serious mood disorder, and can appear days or months after the birth of your baby.<sup>2</sup>

Postnatal depression does not have a single cause, but likely results from a combination of physical and emotional factors. After childbirth, the levels of hormones (estrogen and progesterone) in a woman’s body quickly drop. This leads to chemical changes in her brain that may trigger mood swings. Constant sleep deprivation can lead to physical discomfort and exhaustion, which can contribute to the symptoms of postnatal depression.<sup>3</sup>



More recent evidence suggests that postpartum psychiatric illness is virtually indistinguishable from psychiatric disorders that occur at other times during a woman's life.<sup>4</sup>

In severe cases of postnatal depression, especially in mothers who are at risk of suicide, inpatient hospitalization may be required.<sup>5</sup>

Psychosocial interventions such as support groups have been reported as effective. Beck states that support group attendance can give mothers a sense of hope through the realization that they are not alone. Support groups for couples can teach coping strategies and offer encouragement. They also give couples an opportunity to express needs and fears in a nonjudgmental environment.<sup>6</sup>

Postnatal depression is a serious social issue due to its consequences, including an increased risk of suicide and infanticide. Postnatal depression is often under-diagnosed and untreated; therefore, efforts are needed to improve perinatal mental healthcare.<sup>7</sup>

## **OBJECTIVES**

1. To assess the knowledge regarding postnatal depression among staff nurses in selected hospitals of Shimla (H.P.).
2. To develop and administer Self Instructional Module regarding postnatal depression among staff nurses in selected hospitals of Shimla (H.P.).
3. To evaluate the effectiveness of Self Instructional Module (SIM) on knowledge regarding postnatal depression among the staff nurses in selected hospitals of Shimla (H.P.).
4. To find the association between the knowledge score of staff nurses in selected hospitals of Shimla (H.P.) with selected demographic variables.

## **METHODOLOGY**

Quantitative research approach was used with one group pre-test post-test design, which is a pre-experimental design to measure the effectiveness of self instructional module on postnatal depression among the staff nurses. The study was conducted in a Kamla Nehru Hospital and Deen Dayal Upadhyay Hospital



Shimla. The sample comprised of 60 staff nurses selected by convenient sampling technique. The questionnaire comprised of two sections; section first had questions related to demographic variables (Age, Professional Qualification, religion, marital status, work experience, working area, source of information) while section two consisted of questions about knowledge regarding postnatal depression classified under various categories like introduction about postnatal depression, definition and causes of postnatal depression, sign and symptoms, diagnosis, treatment and prevention of postnatal depression.

Data was analyzed by descriptive and inferential statistics i.e. frequency and percentage distribution, mean percentage, median and chi square to determine the association between knowledge with selected variables.

## RESULT

### SECTION I: Demographic Characteristics

In this study, majority of study subjects 35.0% were in the age group of 26-30 and 31-35 years Majority of study subjects 55.0% professional qualification were G.N.M., Majority of study subjects 96.7% religion were Hindu, Majority of study subjects 81.7% were married, Majority of study subjects 75.0% work experience is less than 10years.

### SECTION 2: Assessment of Knowledge Regarding Postnatal Depression among Staff Nurses

Table 1

N=60

Criteria For Pre-test Knowledge Score		
Score level	Pre-test f (%)	Post-test f (%)
Poor(0-10)	23 (38.3)	-
Average(11-20)	31(51.7)	2 (3.3)
Good(21-30)	6 (10)	58 (96.7)
Maximum Score=30		Minimum Score=0



Table 1 reveals the pre-test knowledge score of staff nurses regarding postnatal depression where majority of study subjects 51.7% had average knowledge, 38.3% had poor knowledge and 10% had good knowledge and the post-test knowledge score regarding postnatal depression where majority of study subjects 96.7% had good knowledge, 3.3% had average knowledge and none of study subjects had poor knowledge.

**SECTION 3: Effectiveness of Self Instructional Module on Knowledge Regarding Postnatal Depression among Staff Nurses**

**Table 2**

**N=60**

Paired T Test	Mean±S.D.	Mean%	Range	Mean Diff.	Paired T Test	Table Value at 0.05
Pre-Test Knowledge	13±4.636	43.30	6-22			
Post-Test Knowledge	25.95±2.734	86.50	18-30	12.950	19.478*	2.00

Maximum score = 30

Minimum score=0

**\*Significance Level ≤0.05**

**Table 2** shows the comparison of pre-test & post-test knowledge score of staff nurses regarding postnatal depression using paired ‘t’ test which gave ‘t’ value 19.478 which was statistically significant  $p < 0.05$  Hence,  $H_1$  was accepted which shows there is a significant difference between mean knowledge score of pretest and post-test of staff nurses.

**SECTION 4: Association of Knowledge Regarding Postnatal Depression among Staff Nurses In Selected Hospitals of Shimla (H.P.) With Selected Demographic Variables**

There was statistically no significant association between pre-test and post-test knowledge with socio demographic variables such as age, professional



qualification, religion, marital status, work experience, working area and source of information. Hence  $H_2$  which stated significant association of knowledge score with selected demographic variables was rejected.

## CONCLUSION

On the basis of total mean score of the findings revealed the pre-test knowledge score of staff nurses regarding postnatal depression where mean was 13.00, median score was 13, standard deviation was 4.636, range was 16, maximum score was 22, minimum score was 6, and mean percentage 43.30, whereas post-test knowledge score of where mean was 25.95, median score was 26, standard deviation was 2.734, maximum score was 30, minimum score was 18, range of score was 12, and mean percentage 86.50.

The study findings showed that the mean post-test knowledge score (86.50%) was higher than the mean pre-test knowledge score (43.30%). Hence it can be concluded that the self-instructional module was effective in increasing the knowledge of staff nurses regarding postnatal depression.

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