STUDY TO ASSESS THE EFFECTIVENESS OF MULTICOMPONENT TRAINING REGARDING SEVEN STEPS ACTION PLAN TO STRENGTHEN QUALITY ON KNOWLEDGE AMONG MIDWIVES WORKING IN CHC AND PHC

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ABSTRACT

Universal Health coverage is necessary for the maternal child health. A seven action plan is to strengthen quality midwives. The aim for this study is to assess the pre-test knowledge level, assess the post test knowledge level and the effectiveness of planned teaching program. Variables are dependent variable knowledge score of midwives and independent variable multi component training on seven action plan of midwives. In the pilot study was conducted in Lal Bahadur Shashtri Hospital, Supela on 12.01.2023 to 19.01.2023 and study sample was 20. The reliability in computed by Karl Pearson formula. The research design was one group pre test post test research design and target population is 200 midwives. The main study was done in C.H.C & P.H.C. midwives in durg district. Sampling technique was non probability convenient sampling, self structure question was used. Over all impact of multi component training on seven action plan to strengthen quality. It revealed that the mean and standard deviation of midwives in pre-test knowledge score was 26.89 and post test knowledge score was 38.62. The calculated p. value is less the assumed p. value <05. Hence the multi component training on seven action plan to strengthen quality was effective to improve the level of knowledge.

Keywords: Multicomponent Training, Seven Steps Action Plan, Quality, Midwives

> **"Every newborn child brings with it; new thoughts and new life paths."**
>
> **— Ehsan Sehgal**

BACKGROUND OF THE STUDY

Midwives, when educated to international standards of midwifery, are able to provide the full scope of interventions needed when they are licensed, regulated , fully integrated into a well-functioning health system and an inter professional team with referral services when required for emergencies.

Global multi stakeholder consultation consensus has been reached on three strategic priorities for strengthening midwives education. Every women and newborn to be cared for by a midwife educated and trained, to international standard. Secondly midwifery leadership to be position in high level national policy planning and budgeting process to improve decision makes about investment for midwifery eructation.

Seven steps plan to strengthen quality midwifery education

➢ First is strengthen leadership and policy

➢ Second step is gathered data and evidence.

➢ Third step is build public engagement and advocacy.

➢ Fourth step is prepared educational institution practice setting and clinical mentors.

➢ Fifth step is strengthen faculty standards and monitor curricula.

➢ Sixth steps educate the students.

➢ Seven steps is monitor evaluate review and adjust.

This section sets out a seven-step action plan to strengthen quality midwifery education.

Each step has been informed by the evidence and global consultations presented in this report. The action plan can be used to develop and/or strengthen a national midwifery education plan, embedded within the national human resources for health plan. Women and newborns are at the Centre of all actions.

The global consultations highlighted that educating and training midwives to international standards is the priority to improve outcomes for women and newborns. This action plan recognizes the wide variation in midwifery education provided across many countries and acknowledges that whereas some countries can rapidly move to a high-quality cadre of midwives, other countries will have more investment to make before this strategic priority can be reached.

RESEARCH METHODOLOGY

Research methodology consists of the systemic procedure adopted by the researcher which starts from the initial identification of research approach and continue till completing pilot study and collection of relevant data. This is one of important part of research, if it plans scientifically than outcome of research will meet the determined objectives of research with zero or minimum bias.

Research approach: experimental evaluation research approach

Research design: one group pre test post test pre experimental research design.

Setting of the Study: The setting of present study is selected area Primary Health Centre (PHC) and community Health Centre (CHC) in Bhilai Durg.

Population: Midwives working in CHC and PHC.

Target population: In the present study the target population includes midwives working in selected area in Bhilai Durg Distt.

Accessible population: Midwives working in CHC and PHC.

Sample: The sample of the population of the present study is **200 midwives** in CHC and PHC in Bhilai Durg and fulfills the eligibility criteria.

Sampling techniques: In the present study **non probability sampling technique** namely **convenient sampling**

Sample size: The determined sample size was 200 midwives working in CHC and PHC in Bhilai Durg.

Independent variables: Multi component training on seven step action plan.

Dependent variables:knowledge score of midwives

Moreover, the present chapter consists of tabulation, graphical presentation and statistically analyzed interpretations with inferences. The complete analyses were distributed among following sections:

SECTION-I: Findings with regard to frequency and percentage distribution of socio-demographic variables.

SECTION-II: Findings related to pre-test and post-test knowledge scores regarding seven steps action plan among midwives working in CHC and PHC
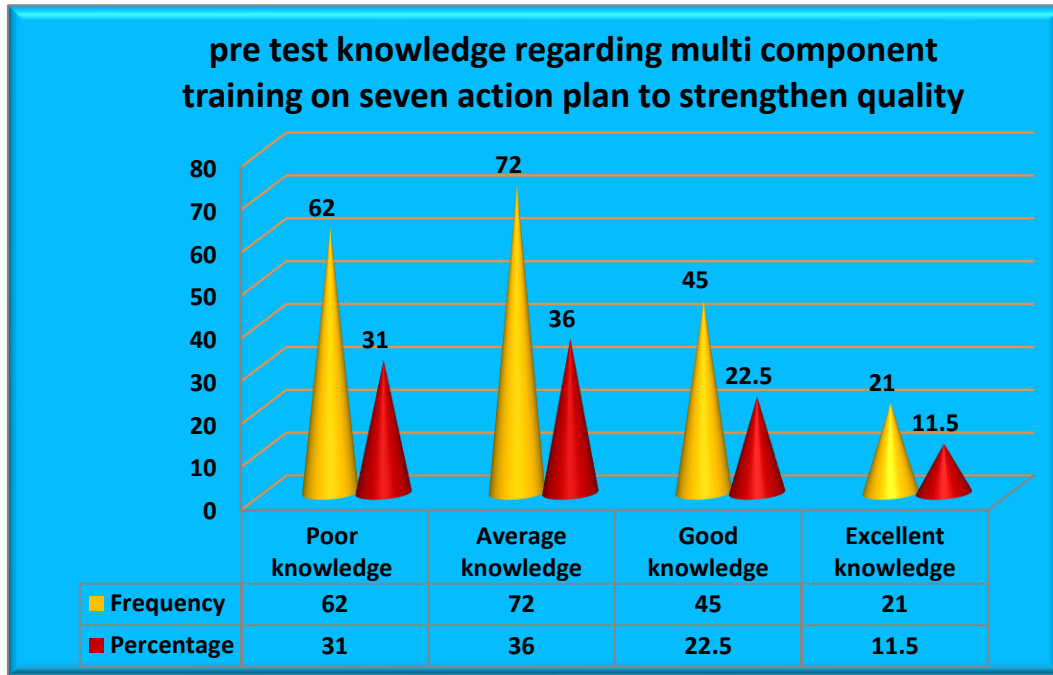
SECTION-III: Findings related to effectiveness of Multi component training on seven step action planon post-test knowledge score.

SECTION-IV: Findings in relation to association of pre-test knowledge scores with selected demographic variables among mothers in both groups.

Section-II: findings related to pre-test knowledge scores among midwives working in chc and phc.

Table: 4.12 Frequency and percentage distribution of midwives pretest knowledge regarding multi component training on seven action plan to strengthen quality

Pretest knowledge regarding multi component training on seven action plan to strengthen quality	Pre-test	
	Frequency	**Percentage**
Poor knowledge	62	31
Average knowledge	72	36
Good knowledge	45	22.5
Excellent knowledge	21	11.5

pre test knowledge regarding multi component training on seven action plan to strengthen quality

	Poor knowledge	Average knowledge	Good knowledge	Excellent knowledge
■ Frequency	62	72	45	21
■ Percentage	31	36	22.5	11.5

Presented table & Figure stated that the level of knowledge among midwives regarding multi component training on seven action plan to strengthen quality. The analyzed data reflected that the majority of midwives 72 (36%) were having average knowledge, then 62 (31%) were having poor level of knowledge then 45 (22.5%) were having good level of knowledge, and remaining 21 (11.5%) were having Excellent knowledge regarding multi component training on seven action plan to strengthen quality.

Table: 4.13 Frequency and percentage distribution of midwives posttest knowledge regarding multi component training on seven action plan to strengthen quality

(N-200)

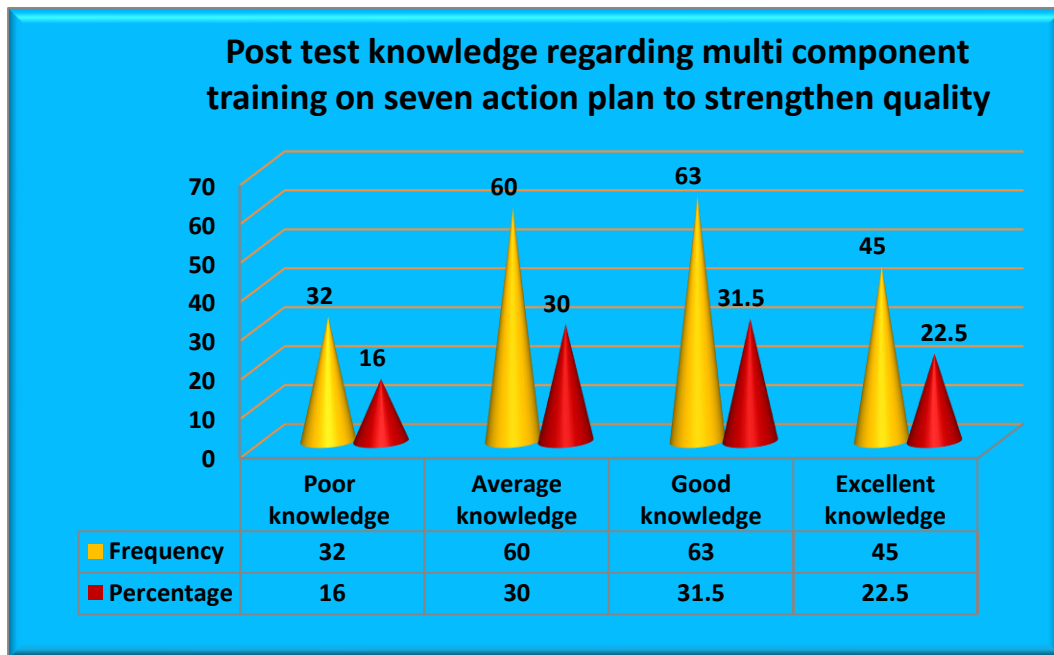| Posttest knowledge regarding multi component training on seven action plan to strengthen quality	Post-test	
	Frequency	Percentage
Poor knowledge	32	16
Average knowledge	60	30
Good knowledge	63	31.5
Excellent knowledge	45	22.5

Figure 4.13 Percentage wise distribution of midwives knowledge level of posttest

Presented table & Figure stated that the frequency and percentage of level of posttest knowledge among midwives regarding multi component training on seven action plan to strengthen quality. The analyzed data reflected that the majority of midwives 63 (31.5)% were having good knowledge, then 60 (30%) were having level of average knowledge, then 45 (22.5%) were having excellent level of knowledge, and remaining 32(16%) were having poor knowledge regarding multi component training on seven action plan to strengthen quality.

Section-III: findings in related to effectiveness of multi component training on seven action plan to strengthen quality

Table: 4.14 Mean, Standard Deviation, Mean Difference, t-test and p-value of pretest and posttest of knowledge level of midwives.

(N-200)

Knowledge Level	Mean	SD	Mean difference	t-test	P value	Significant/ Non-significant
Pre-test	26.89	8.30	11.73	35.223	<0.001	S
Post-test	38.62	10.13				

S-Significant   **P<0.05 level of significance**   **df= 198**

Mean, Standard Deviation, Mean Difference, t-test and p-value of pretest and post test of knowledge level of midwives.

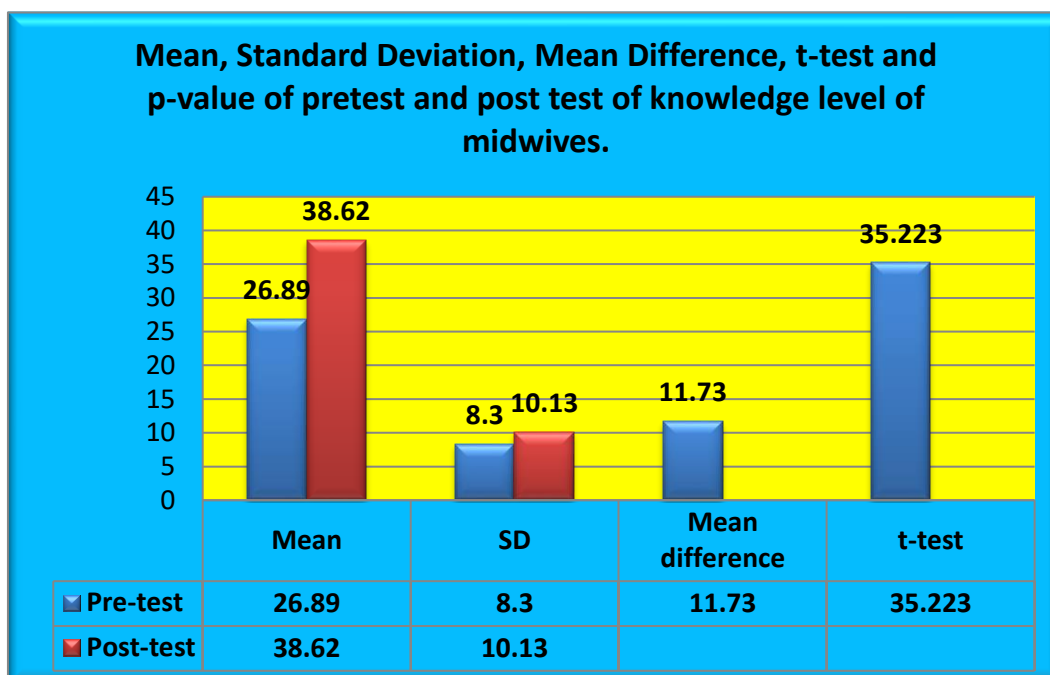|	Mean	SD	Mean difference	t-test
Pre-test	26.89	8.3	11.73	35.223
Post-test	38.62	10.13		

Table 4.14 data revealed that the mean and standard deviation of midwives in pre-test total knowledge score was 26.89±8.30 and in post-test 38.62±10.13. The mean difference was found as 11.73±0.17, the obtained t- value was 35.223, and the calculated P value was <0.001. The calculated p value is less than the assumed p value (<0.05),

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section-iv: findings in relation to association of pre-test knowledge scores with selected demographic variables among midwives

Table: 4.15 Chi square value of Pre-test knowledge level among midwives with selected socio-demographic variables.   **N-200**

Sr. No.	Socio-demographic Variable	Chi square	df	P value	Significant/ Non-significant
1	**Age in years**	17.67	9	16.92	**S**
2	**Educational Status**	18.52	9	16.92	**S**
3	**Marital status**	10.95	9	16.92	**NS**
4	**Family income**	13.25	12	21.03	**NS**
5	**Living locality in house**	5.26	3	7.82	**NS**
6	**Types of family**	10.58	6	12.59	**NS**
7	**Religion**	10.25	12	21.03	**NS**
8	**Do you have experience in labour room**	9.28	3	7.82	**S**
9	**Sources of information regarding strengthening leadership and policy**	12.25	9	16.92	**NS**
10	**Duration of experience of working in labour room.**	23.52	12	21.03	**S**
11	**Attended an in-service /continue education training.**	10.25	6	12.59	**NS**

Mentioned table 4.15 revealed that the chi-square value among pre-test knowledge level of midwives with selected demographic variables. The significance level measured at <0.05.

DISCUSSION

Analysis of the first phase revealed that midwives according to their age majority of respondents 76 (38%) were between 23-26 years, highest number of midwives 82 (41%) had Auxiliary nurse midwives, majority of midwives 129 (64.5%) were Single, highest number of midwives were having the family income per month of Rs.20001-25000/, highest number of midwives 177 (88.5%) were staying in Pakka house, highest number of midwives 138 (69%) were staying in nuclear family, majority of midwives 108 (54%) belong to Hindu religion, majority of midwives 113 (56.5%) were having experience in labour room, Majority of midwives were get information from media 86 (43%), that midwives the majority of them 74 (37%) ware having 7 years to 10 years' experience of working in labour room, and majority of midwives 149 (74.5%) were no having Attended an in-service /continue education training.

The frequency and percentage distribution of midwives regarding multi component training on seven action plan to strengthen quality. It was divulged that in pre-test majority of midwives 72 (36%) were having average knowledge, which become 63 (31.5)% were shown good level of knowledge during post-test after multi component training on seven action plan to strengthen quality intervention.

Overall impact of multi component training on seven action plan to strengthen quality. It revealed that the mean and standard deviation of midwives in pre-test total knowledge score was 26.89 ± 8.30 and in post-test 38.62 ± 10.13. The mean difference was found as 11.73 ± 0.17, the obtained t- value was 35.223, and the calculated P value was <0.001. The calculated p value is less than the assumed p value (<0.05), Hence, the multi component training on seven action plan to strengthen quality was effective to improve the level of knowledge of midwives regarding multi component training on seven action plan to strengthen quality among midwives. So, researcher accepted the research hypothesis. Hence H_1 was accepted.

The association in between pre-test knowledge level with socio-demographic variable analyzed. The analysis report revealed that there was significance association between the knowledge level with Age in years, Educational Status, Do you have experience in labour room, Duration of experience of working in labour room of midwives, because the calculated value (Chi square Value) were more than Tabulated value of 0.05 level of significance. Hence for these variables the research hypothesis H_2 accepted,

SUMMARY

The main aim of the study was to develop knowledge and determine the effectiveness of

multicomponent training regarding seven steps action plan to strengthen quality on knowledge among midwives working in CHC and PHC in terms of knowledge gained among midwives.

1. To assess the pretest and posttest knowledge regarding seven steps action plan among midwives.

2. To develop and administer seven steps action plan after pretest.

3. To assess the effectiveness of multi component training regarding seven steps action plan on posttest among midwives.

4. To find association between pretest knowledge and selected socio demographic variables among midwives.

The study attempted to examine the following hypothesis:

H_1-There is significant difference in pretest and posttest knowledge regarding seven steps action plan among midwives at 0.05 level of significance

H_2 There is significant association between pretest knowledge and selected socio demographic variables

The study used one group pre-test & post-test pre experimental research design. The study population consisted of Midwives working in CHC and PHC in Bhilai Durg.. Total 200 samples were taken with non-probability sampling technique namely purposive sampling technique. For generating necessary data, a structured interview schedule (knowledge test) was developed for assessing Midwives knowledge on multi component training regarding seven steps action plan to strengthen quality on knowledge.

To ensure effect of multi component training regarding seven steps action plan to strengthen quality for 200 Midwives. The data was collected from 30.01.2023 to 28.02.2023 after obtaining administrative approval from medical officer of PHC and CHC. . The data was collected through structured questionnaire.

The data gathered was analyzed using descriptive and inferential statistics. The level of significance set for testing the hypothesis was 0.05; using t-test.

CONCLUSION

The following conclusions were drawn from the following finding of the study.

The Multi component training regarding seven steps action plan to strengthen quality found to be effective in increasing the knowledge of midwives. The samples had a highly significant gain in knowledge after the Multi component training regarding seven steps action plan to strengthen quality.

The majority of midwives were having good knowledge after implementation of multi component training on seven action plan to strengthen quality.

The multi component training on seven action plan to strengthen quality found to be effective in enhancing knowledge of midwives.

Age in years, Educational Status, Do you have experience in labour room, Duration of experience of working in labour room of midwives were closely associate with knowledge of midwives.

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