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"A DESCRIPTIVE STUDY TO ASSESS THE KNOWLEDGE REGARDING EARLY IDENTIFICATION OF HIGH RISK PREGNANCY AMONG WOMEN RESIDING IN SELECTED AREAS OF PUNE CITY."

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ABSTRACT

Introduction: High-risk pregnancy is a term used to define pregnancies where the mother, the fetus, or both are at a heightened risk of experiencing complications that may adversely affect their health. Early identification of high-risk pregnancies is crucial in ensuring the well-being of both the mother and the unborn child. The need for this study arises from the necessity of understanding the early indicators of high-risk pregnancies, which can include factors such as maternal age, pre-existing health conditions, medical history, lifestyle habits, and pregnancy circumstances such as multiple gestations or those resulting from assisted reproductive technologies.Maternal age is a significant factor in classifying a pregnancy as high risk. Teenage mothers under 18 years and women above 35 years face an increased likelihood of complications. Younger mothers may experience preterm births and low birth weight due to physiological and socioeconomic challenges. On the other hand, advanced maternal age is associated with gestational diabetes, chromosomal abnormalities, and hypertension. Other key risk factors include medical history and existing health conditions like hypertension, diabetes, kidney disease, and autoimmune disorders.

PURPOSE

To Assess the knowledge regarding early identification of high risk pregnancy. Objectives Of The Study

- To assess the knowledge regarding early identification of high risk pregnancy among women
- To asociate the finding with demographic variables

Material And Method

The research adopted a non-experimental, descriptive design, using a structured questionnaire as the primary data collection tool. The sample comprised 200 women selected through non-probability purposive sampling. Data were collected between June 1 and June 29, 2024, after obtaining appropriate permissions. The structured questionnaire was designed to gather demographic information and assess participants' knowledge. The tool underwent content validation and reliability testing, yielding a reliability coefficient of 0.8116, confirming its consistency.

RESULT

The findings indicated that 74.5% of participants had average knowledge, 23.5% exhibited good knowledge, and only 2% demonstrated poor understanding. Knowledge scores were analyzed in relation to demographic factors like age, occupation, education, family income,

and marital status. Results revealed a significant association between marital status and knowledge levels, while no significant association was found with other demographic variables.

Key words: Descriptive research, Assessment, Knowledge, Area, high risk pregnancy ,

INTRODUCTION

To make sure the well-being of both the mother and the baby early identifiactions of high risk pregnancies are important for timely management to lower problems. These identifiactions girdle various factors that indicates escalate complications during pregnancy hence they require close observation and special care from healthcare workers.

Maternal age is one of the prior identification of high risk pregnancy. There is high risk of Preterm birth, low birth weight, and chromosomal abnormalities in women under 18 years and over the 35 years old . Physiological immaturity and potential socioeconomic factors are the reason for increased risk in teenage pregnancies. The chances of gestational diabetes, hypertension, and genetic abnormalities are increased due to advanced age. Early indicators of high-risk pregnancies also include medical history and previous health conditions.

Increased risk of complications during pregnancy can be found in women with pre existing or previous chronic health conditions like hypertension , diabetes mellitus , kidney problems and autoimmune diseases.

NEED OF THE STUDY

Pregnancy is a significant journey of fostering life and represents a delicate balance between maternal well-being and fetal development. For some women, this journey can be fraught with hazards and complexities, posing threats to maternal and infant health. Knowing the early identifications of high-risk pregnancies is crucial in ensuring prompt intervention, personalized care, and improved outcomes for mothers and their babies.

Early detection of high-risk pregnancies enables healthcare workers to administrate preventive measures and interventions promptly. By spotting risks such as maternal age, pre-existing medical conditions, or a history of complications in previous pregnancies, healthcare providers can tailor prenatal care plans to manage specific needs and mitigate potential risks. For instance, women with chronic conditions like diabetes mellitus or hypertension require vigilant monitoring and intervention to prevent complications such as gestational diabetes or preeclampsia.

Studying early signs of high-risk pregnancy promotes the establishment of screening protocols and diagnostic tools. Research in this domain can lead to the advancement of current screening methods and the invention of innovative biomarkers or imaging techniques for identifying initial signs of complications. Enhanced screening protocols empower healthcare providers to recognize high-risk pregnancies at the earliest stages, enabling timely referrals to specialist care and reducing the probability of adverse outcomes.

Moreover, in low-resource settings, where maternal mortality remains a pressing issue, identifying high-risk pregnancies early becomes even more critical. Public health strategies focused on early detection can significantly reduce complications, hospital admissions, and healthcare costs. Educating women about warning signs and encouraging routine antenatal check-ups can increase awareness and help bridge the gap between knowledge and action. Therefore, there is a growing need to assess the level of knowledge among women regarding early signs of high-risk pregnancy, especially in urban and semi-urban communities, to guide

future health interventions, strengthen maternal health services, and ultimately improve maternal and neonatal health indicators.

Material and Method: An experimental descriptive study was conducted using a non-probability purposive sampling technique. A total of 200 participants were selected, and data was collected through self-structured questionnaires.

AIM OF THE STUFY

An aim Of the study A Descriptive study to assess the knowledge regarding early identification of high risk pregnancy among women residing in selected areas of Pune city**.**

RESEARCH APPROACH

The research approach was quantitative

RESEARCH DESIGN

Non-experimental descriptive research design.

RESEARCH SETTING

The present study was conducted in selected areas of Pune city.

TARGET POPULATION

In the present study, the population consists of women.

ACCESSIBLE POPULATION

Women from selected areas of Pune city.

SAMPLING CRITERIA

Inclusion criteria

1. Women of all ages .
2. Women who can read ,write understand Marathi or English.

Exclusion criteria

Women who are not willing to participate in study

SAMPLING TECHNIQUE

Non Probability Purposive sampling technique

RELIABILITY OF THE TOOL

In order to establish reliability of the tool, test -retest method was used. The tool was found reliable. Reliability was done from 12/05/2024 to 17/05/2024 in Balaji Nagar, Pune on 20 samples.

PILOT STUDY

The pilot study was conducted from 20/05/2024 to 23/05/2024 . The tool was administered to 20 samples using a nonprobability purposive sampling technique with characteristics similar to the main study sample. Informed consent was obtained from each respondent, and confidentiality was assured by the investigator. The average time taken by respondents to answer the tool was 15 minutes. Data were collected and analyzed using descriptive and inferential statistics.

Section I

Demographic characteristics of women

Demographic Variables	Frequency	Percentage
1. AGE		
A. 18 years - 28 years	50	25
B. 29 years - 38 years	53	26.5
C. 39 years – 48 years	64	32
D. Above 49 years	33	16
2. Education		
A. Primary	95	47.5
B. Secondary	60	36
C. 10 th and above	45	22.5
3. Family Income		
A. Less than Rs 10,000/-	47	22.5
B. 10,000-20,000/-	60	30
C. 20,001-30,000/-	67	33.5
D. More than 30,000/-	26	13
4. Occupational status		
A. Homemaker	95	47
B. Job	64	32
C. Business	41	21
5. Marital Status		
A. Married	131	65
B. Unmarried	62	31
C. Widow	7	4
6 Do you know about high risk pregnancy		
A. Yes	200	100
B. No	0	0
7. Source of information		
a. Mass Media	44	22
b. Mobile Phones	32	16
c. Health Worker	65	32
d. Family and Friends	59	30

Analysis of Demographic characteristics in frequency and percentage n=200

1. It shows that majority 32% of samples were from 39 – 48 years
2. It indicates that the highest percentage, 47.5 % of samples were having primary education
1. It shows that 33.5% samples were having family income between 20001-30000/-, It

shows that 47% of the samples are housewife.

2. It shows that majority of 65% of samples were married
3. It shows that all the samples had heard about high risk pregnancy..
4. It shows that 32% of samples got information about high risk pregnancy from health workers,.

Section II

Level of knowledge regarding early identification of high risk pregnancy

N= 200

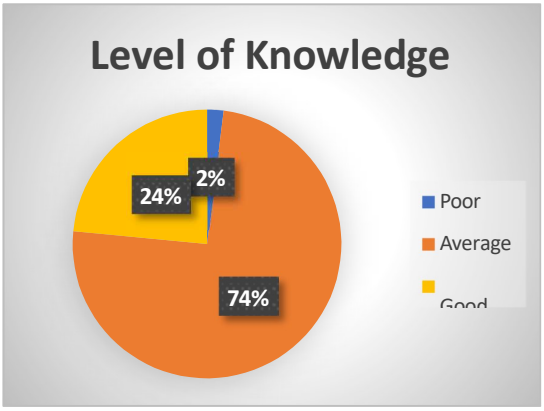

Figure no – 1

Fig – shows that, majority 74.5 % of samples had average knowledge regarding early identification of high risk pregnancy , 23.5% of samples had good knowledge regarding early identification of high risk pregnancy and 2% sample having poor knowledge.

Major Finding of the study

SECTION I

It deals with the analysis of the demographic data of samples.

- In the age group , majority 32 % of samples were from 39 - 48 years of age.
- In the educational status 47.5% samples were having primary education
- In the occupation status 47% of samples were house wife.
- In the family income 33.5% of samples were have family income between 20001-30000
- In the marital status 65% of samples were married
- All samples have heard about high risk pregnancy.
- 32% of samples got information about high risk pregnancy from health worker.

SECTION- II

The major findings in this section is the assessment of knowledge regarding early identification of high risk pregnancy.

- 2% sample having poor knowledge regarding early identification of high risk pregnancy..
- 74.5% samples have average knowledge regarding early identification of high risk pregnancy.
- 23.5.% samples have good knowledge regarding early identification of high risk pregnancy. The total scores were arbitrarily classified as

Poor (0-5), Average (6-10), and Good (11-15).

Level of knowledge	Frequency	Percentage (%)	Mean	SD
Poor knowledge	4	2	14.21	2.10
Average knowledge	149	74.5		
Good knowledge	47	23.5		

DISCUSSION OF THE STUDY

The present study was undertaken to assess the knowledge regarding early identification of high-risk pregnancy among women residing in selected areas of Pune city. A non-experimental descriptive research design was employed to achieve the objectives of the study. This design was appropriate for understanding and describing the existing level of knowledge among the women without manipulating any variables.The study was conducted in selected areas of Pune city, where 200 women were selected as participants using a non-probability purposive sampling technique. The inclusion criteria ensured the participants were women of various age groups who could read and write in either Marathi or English. The primary dependent variable of the study was the knowledge regarding early identification of high-risk pregnancy. The demographic variables considered included age, education, occupation, marital status, and family income, which were analyzed for their association with the level of knowledge. Data collection was carried out using a structured questionnaire developed and validated through expert consultation. The reliability of the tool was established using Karl Pearson's correlation coefficient and found to be statistically reliable ($r = +0.8116$).The study findings revealed that the majority of participants (74.5%) had average knowledge regarding high-risk pregnancies, while 23.5% had good knowledge, and only 2% had poor knowledge. This indicates a moderate awareness level in the community, which may reflect the effectiveness of existing health education programs but also highlights the need for improvement.

The chi-square test for association between knowledge levels and demographic variables indicated a significant association with marital status ($p = 0.0172$) and source of information ($p = 0.0588$). This suggests that married women and those with access to credible sources such as healthcare workers or mass media had better knowledge. However, no significant association was found with age, occupation, education, or family income. While the findings show that many women possess average knowledge regarding early identification of high-risk pregnancies, targeted educational interventions are needed. Enhancing awareness through reliable sources and tailoring programs for unmarried or less-informed women could improve maternal and neonatal health outcomes in the community.

CONCLUSION

This research study aimed to assess the knowledge regarding the early identification of high-risk pregnancies among women residing in selected areas of Pune City. The findings underscore the critical importance of early recognition and management of potential complications during pregnancy to safeguard maternal and fetal health.

The study highlights that maternal age, pre-existing medical conditions, lifestyle factors, and multiple pregnancies are significant contributors to high-risk pregnancies. Early identification of these risks, coupled with timely medical interventions, plays a pivotal role in reducing

adverse pregnancy outcomes such as preterm birth, low birth weight, and gestational complications. The results emphasize the necessity for continuous monitoring, health education, and specialized care for high-risk groups.

Through a structured questionnaire administered to 200 women, the study revealed that while the majority (74.5%) exhibited average knowledge about early identification of high-risk pregnancies, only 23.5% demonstrated good knowledge, and a small fraction (2%) had poor knowledge. These findings suggest a gap in awareness and highlight the need for enhanced educational programs and outreach initiatives to improve women's understanding of high-risk pregnancies.

Demographic variables such as marital status and sources of information showed a significant association with knowledge levels, indicating that married women and those receiving information from health workers were more informed. However, there was no significant association between knowledge levels and factors such as age, occupation, education, or family income.

Conflict of Interest :

The authors certify that they have no involvement in any organization or entity with any financial or non-financial interest in the subject matter or materials discussed in this paper.

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