



## “A study to evaluate the effectiveness of structured teaching program on post-partum psychiatric illness among Primi gravida mothers regarding knowledge and attitude in selected tertiary care hospital of the city”

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### Abstract

**Problem Statement:** “A study to evaluate the effectiveness of structured teaching program on post-partum psychiatric illness among Primi gravida mothers regarding knowledge and attitude in selected tertiary care hospital of the city”

**Background of the Study:** Psychiatric disorders during puerperium for first 3 months after delivery, the incidence of mental illness is high. Overall incidence is about 15–20%. Sleep deprivation, hormone elevation near the end of gestation and massive post-partum withdrawal contribute to the risk. High risk factors for post-partum mental illness:

**Past history:** Psychiatric illness, puerperal psychiatric illness.

**Family history:** Major psychiatric illness, marital conflict, poor social situation.

**Present pregnancy:** Young age, caesarean delivery, difficult labor, neonatal complications.

**Others:** Unmet expectations. Puerperal blues is a transient state of mental illness observed 4–5 days after delivery and it lasts for a few days. Nearly 50% of the postpartum women suffer from the problem. Manifestations are depression, anxiety, tearfulness, insomnia, helplessness and negative feelings toward the infant. No specific metabolic or endocrine abnormalities have been detected. But lowered tryptophan level is observed. It suggests altered neurotransmitter function. Treatment is reassurance and psychological support by the family members.

**Materials and Method:** The quasi experimental (one group pre-test post-test) design was adapted. The subject consisted of seventy-six subjects i.e. Primi gravida mothers. The nonprobability purposive sampling was used for selection of subjects. The content validity for research tool was done by various experts in the field of mental health and psychiatric field. The reliability for the tool was assessed by using test-retest method; Karl Pearson’s coefficient of correlation method. The reliability obtained for the knowledge section was 0.96 and for attitude section was 0.99.

**Result:** In pretest, 9.2% of the primigravida mothers had poor knowledge (Score 0-8), 88.2% of them had average knowledge (Score 9-16) and 2.6% of them had good knowledge (Score 17-25) regarding selected post-partum psychiatric illness.

In post-test, 19.7% of them had average knowledge (Score 9-16) and 80.3% of them had good knowledge (Score 17-25) regarding selected post-partum psychiatric illness.

In pretest, 86.8% of the primigravida mothers had negative attitude (Score 15-45) and 13.2% of them had positive attitude (Score 46-75) towards selected post-partum psychiatric illness.

In post-test, all of the primigravida mothers had positive attitude (Score 46-75) towards selected post-partum psychiatric illness. This indicates that the knowledge and attitude towards selected post-partum psychiatric illness among Primi gravida mothers improved remarkably after structured teaching program.

**Keywords:** Post-partum psychiatric illness, structured teaching program, primi gravida mothers

### Introduction

“It is health that is real wealth and not pieces of gold and silver.”

--- Mahatma Gandhi.

Post-partum period is demanding period characterized by overwhelming biological, physical, social, and emotional changes. Pregnant women and their families have lots of aspirations from the post-partum period, which is colored by the joyful arrival of a new baby. Unfortunately, women in the post-partum period can be vulnerable to a range of psychiatric disorders like post-partum blues, depression, and psychosis. Perinatal mental illness is largely under-diagnosed and can have far reaching ramifications for both the mother and the infant. Early screening, diagnosis, and management are very important and must be considered as mandatory part of post-partum care.

Many females experience a wide range of overwhelming emotions such as anticipation, excitement, happiness, fulfillment, as well as anxiety, frustration, confusion, or

sadness/guilt during pregnancy and post-partum period. The post-partum period makes them highly vulnerable to various psychiatric disorders. Traditionally post-partum psychiatric disorders are classified as maternity blues, puerperal psychosis, and postnatal depression. However, the spectrum of post-partum phenomenology is wide.

Perinatal mental illness is largely under-diagnosed, and under-treated. Untreated postpartum psychiatric disorders can have far-reaching ramifications for a family. At times, the post-partum psychiatric condition can become so severe that it warrants hospitalization. Moreover, post-partum psychiatric disorders can adversely affect mother-infant interaction and attachment. Hence, early diagnosis and management of the post-partum psychiatric disorder is extremely crucial.

### Background of The Study

Post-partum depression is observed in 10–20% of mothers. It is more gradual in onset over the first 4–6 months

following delivery or abortion. Changes in the hypothalamo-pituitary-adrenal axis may be a cause. Manifested by loss of energy and appetite, insomnia, social withdrawal, irritability and even suicidal attitude. Risk of recurrence is high (50–100%) in subsequent pregnancies. Treatment is started early. Fluoxetine or paroxetine (serotonin reuptake inhibitors) is effective and has fewer side effects. It is safe for breastfeeding also. Estrogen patch has also been used. General supportive measures are essential as in blues. If no prompt response with medication, psychiatric consultation is sought for. The overall prognosis is good.

Post-partum psychosis (schizophrenia) is Observed in about 0.14–0.26% of mothers. Commonly seen in women with past history of psychosis or with a positive family history. Onset is relatively sudden usually within 4 days of delivery. Manifested by fear, restlessness, confusion followed by hallucinations, delusions and disorientation (usually manic or depressive).

Psychotic women may have delusions. Suicidal, infanticidal impulses may be present. In that case temporary separation and nursing supervision are needed. Risk of recurrence in the subsequent pregnancy is 20–25% and there is increased risk of psychotic illness outside pregnancy also.

Mothers within 2 weeks of delivery and in good health were included from the maternity ward and from outpatient department after obtaining the written consent. Women with debilitating illness, disabling mental disorders, alcohol dependence, and narcotic drug dependence were excluded from the study. Based on ICH-GCP guidelines, 130 subjects in the age group of 18–45 years were randomly screened. Among the 130 women screened 123 mothers fulfilled the inclusion criteria and were recruited in this study, among them 123 women screened, 72 were diagnosed to have postpartum blues, accounting for 58.5% prevalence rate.

According to World Health Organization the importance of psychological well-being defines health as a “state of complete physical, mental, social and spiritual well-being and not merely the absence of disease or infirmity”. The term mental illnesses refer collectively to all diagnosable mental disorder's health conditions characterized by alteration in thinking mood or behavior associated with distress or impaired functioning the World Health Organization. Global burden of disease study estimates that mental and addictive disorders are among the most burdensome in the world and their burden will increase over next decades.

### Need Of The Study

It suggests that the burden of perinatal mental health disorders, including post-partum depression, is high in low- and lower-middle-income countries. A systematic review of 47 studies in 18 countries reported a prevalence of 18.6% (95% confidence interval, CI: 18.0–19.2). Scarcity of available mental health resources, inequities in their distribution and inefficiencies in their utilization are key obstacles to optimal mental health, especially in lower resource countries. Addressing these issues is therefore a priority for national governments and their international partners. The impetus for this will come from reliable scientific evidence of the burden of mental health problems and their adverse consequences. Post-partum psychosis explains that the objective of study is to provide an overview of the clinical features, prognosis, differential

diagnosis, evaluation, and treatment of post-partum psychosis. Methods: The authors searched Medline (1966–2005), PsycInfo (1974–2005), Toxnet, and PubMed databases using the key words post-partum psychosis, depression, bipolar disorder, schizophrenia, organic psychosis, pharmacotherapy, psychotherapy, and electroconvulsive therapy. A clinical case is used to facilitate the discussion. Results: The onset of puerperal psychosis occurs in the first 1-4 weeks after childbirth. The data suggest that post-partum psychosis is an overt presentation of bipolar disorder that is timed to coincide with tremendous hormonal shifts after delivery. The patient develops frank psychosis, cognitive impairment, and grossly disorganized behavior that represent a complete change from previous functioning. Therefore, careful and repeated assessment of the mothers' symptoms, safety, and functional capacity is imperative. Treatment is dictated by the underlying diagnosis, bipolar disorder, and guided by the symptom acuity, patient's response to past treatments, drug tolerability, and breastfeeding preference. The somatic therapies include anti-manic agents, atypical anti-psychotic medications, and ECT. Estrogen prophylaxis remains purely investigational.

### Aim of the Study

to evaluate the effectiveness of structured teaching program on post-partum psychiatric illness among Primi gravida mothers regarding knowledge and attitude in selected tertiary care hospital of the city

### Objectives of the Study

1. To assess the pre-test knowledge and attitude regarding selected post-partum psychiatric illness among Primi gravida mothers.
2. To assess the post-test knowledge and attitude regarding selected post-partum psychiatric illness among Primi gravida mothers.
3. To determine the association between study findings with selected demographic variables among Primi gravida mothers.

### Research Approach

Quantitative approach was employed in this study. It helped the investigator in selection of subjects, manipulation of independent variables, control over interventions, observation to be made and the type of statistical analysis to be used, and interpretation of the data to be done. Evaluation research is an applied form of research whose methodologies have evolved within such fields as education and public policy. It focuses on developing useful information about a program, practice, procedure, or policy information that is needed by decision makers about whether to adopt, modify or abandon a practice or program. Often (but not always), the evaluation is of a new intervention.

The present study was conducted by using quantitative experimental approach. In this study, investigator evaluates the effectiveness of structured teaching program on post-partum psychiatric illness among Primi gravida mothers regarding knowledge and attitude in selected tertiary care hospital of the city.

### Research Design

quasi experimental designs used when randomization is impractical and/or unethical, they are typically easier to set

up than true experimental designs, which require random assignment of subjects. Additionally, utilizing quasi experimental designs minimizes threats to external validity as natural environments do not suffer the same problems of artificiality as compared to a well-controlled laboratory setting. Since quasi experiments are natural experiments, findings in one may be applied to other subjects and settings, allowing for some generalizations to be made about population. Also, this experimentation method is efficient in longitudinal research that involves longer time periods which can be followed up in different environments. That is why this design was used by the investigator in this study.

This research aims to evaluate the effectiveness of structured teaching program on postpartum psychiatric illness among Primi gravida mothers regarding knowledge and attitude in selected tertiary care hospital of the city. For the present study, Quasi experimental (one group pre-test post-test) design was adopted.

### Sampling Technique

Purposive sampling is a type of non-probability sampling in which samples are selected because they are identified as knowledgeable regarding the sample under investigation. The researcher establishes certain criteria thought to be representative of target population and deliberately selects samples according to these criteria. This method means deliberate selection of sample units that conform to some predetermined criteria. This involves selection of cases which we judge as the most appropriate ones for the given study. It is based on the judgment of the researcher or some expert. It does not aim at securing a cross section of a population. The purposive sampling is also called the judgmental sampling. These terms indicate selection by choice, not by chance. In purposive sampling a sample is chosen which is thought to be typical of the universe with regard to the characteristics under investigation. Purposive sampling is based on the belief that the investigators knowledge about the population can be used to hand-pick subject members. Investigator might decode purposely to select subjects who are judged to be typical of the population or particularly knowledgeable about the issues under study.

In this study, non-probability purposive sampling method was adopted.

### Description of Tool

The tools for data collection include 2 parts; part I and part II are as follows

#### Part I

- **Section A:** Consent form
- **Section B:** Structured interview schedule: It consists of 7 items of demographic variables such as age, education, occupation, family monthly income, type of family, residence and family history of mental illness. The information was given by subjects to the investigator by ticking (ü) in front of an appropriate option.

#### Part II

- **Section C:** The self-structured knowledge questionnaire regarding post-partum psychiatric illness. The self-structured questionnaire consists of 25 questions. Each question has got four options. Every

correct answer was scored 1 and each wrong answer scored 0 by the Primi gravida mothers. The information was given by Primi gravida mothers to the investigator by ticking (ü) in front of an appropriate option they found in pre-test and post-test.

- **Section D:** Attitude five-point Likert scale. This attitude scale consists of 15 items which provides a quantitative measurement of attitudes, opinions or values by summarizing numerical scores given by the investigator to Primi gravida mother's responses to sets of 15 statements from those 10 positive statements exploring 5 dimensions or points such as, strongly disagree has 1 score, disagree has 2 score, uncertain has 3 score, agree has 4 score and strongly agree has 5 score as well as 5 negative statements exploring 5 dimensions or points such as, strongly disagree has 5 score, disagree has 3 score, uncertain has 3 score, agree has 2 score and strongly agree has 1 score which will be reverse scoring for negative statements. The Primi gravida mothers has ticked the appropriate option they found in pre-test and post-test.

### Reliability of the Tool

The reliability of an instrument is the degree of consistency with which it measures the attribute it is supposed to be measuring.

The reliability is the degree of consistency or accuracy with which an instrument measures an attribute.

In this study, reliability of the tool was determined by test-retest method; Karl Pearson's coefficient of correlation method, which measures the coefficient of internal consistency. The reliability obtained for the knowledge section was 0.96 and for attitude section was 0.99.

Formula used for obtaining reliability of tool

$$r = \frac{n(\sum xy) - (\sum x)(\sum y)}{\sqrt{[n\sum x^2 - (\sum x)^2][n\sum y^2 - (\sum y)^2]}}$$

Where, r = Karl Pearson's coefficient of correlation  
n = Number of pairs of stock

### Data Collection Process

1. Requisition letter for conducting research study and brief details of the study were sent to the selected tertiary care centre. The written permission was obtained from concerned authority for data collection.
2. Investigator met the head of the antenatal ward and antenatal OPD in order to ascertain the support and cooperation in the success of the study.
3. The investigator has explained about the nature of study to physician and staff nurses working in these departments. The study was conducted among 76 subjects. The selected subjects were put into one group i.e. all 76 subjects (Primi gravida mothers) in one group. The subjects were selected by using non-probability purposive sampling technique.
4. The purpose of the study was explained to the subjects and informed consent was obtained from them.
5. Subjects were asked to give necessary information in structured interview schedule (demographic profile). It consists of 7 items of demographic variables such as age, education, occupation, family monthly income,

type of family, residence and family history of mental illness. The information was given by subjects to the investigator by ticking (ü) in front of an appropriate option.

6. Then the subjects were given self-structured knowledge questionnaire regarding postpartum psychiatric illness in pre-test. The self-structured questionnaire consists of 25 questions. Each question has got four options. Every correct answer was scored 1 and each wrong answer scored 0 by the Primi gravida mothers. The information was given by Primi gravida mothers to the investigator by ticking (ü) in front of an appropriate option they found in pre-test.
7. Along with the questionnaire the subjects were asked to score attitude five-point Likert scale questions too. This attitude scale consists of 15 items which provides a quantitative measurement of attitudes, opinions or values by summarizing numerical scores given by the investigator to Primi gravida mother’s responses to sets of 15 statements from those 10 positive statements exploring 5 dimensions or points such as, strongly disagree has 1 score, disagree has 2 score, uncertain has 3 score, agree has 4 score and strongly agree has 5 score as well as 5 negative statements exploring 5 dimensions or points such as, strongly disagree has 5 score, disagree has 3 score, uncertain has 3 score, agree has 2 score and strongly agree has 1 score which will be reverse scoring for negative statements. The Primi gravida mothers has ticked the appropriate option they found in pre-test and post-test.
8. After pre-test the structured teaching program on post-partum psychiatric illness was held.
9. Lastly, again 25 self-structured knowledge questionnaire and 5-point attitude Likert scale with 15 statements were given in post-test on the same day just after structured teaching program.
10. The data collection process was terminated by thanking the subjects for their cooperation.

**Result**

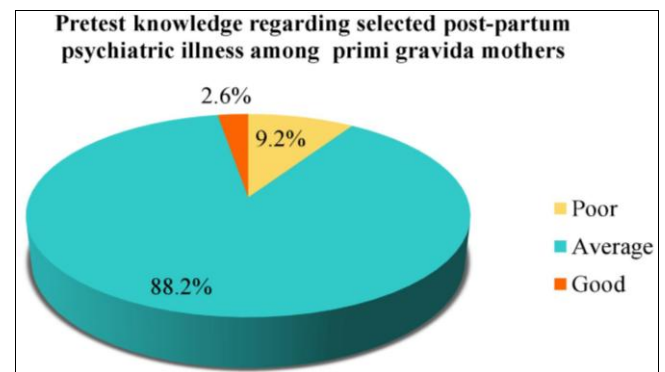
**SECTION-I**

**Analysis of data related to pretest knowledge and attitude regarding selected postpartum psychiatric illness among Primi gravida mothers**  
**Pretest knowledge regarding selected post-partum psychiatric illness among Primi gravida mothers N=76**

Knowledge	Freq	Pre	Test
			%
Poor (score 0-8)	7		9.2%
Average (score 9-16)	67		88.2%
Good (Score 17-25)	2		2.6%

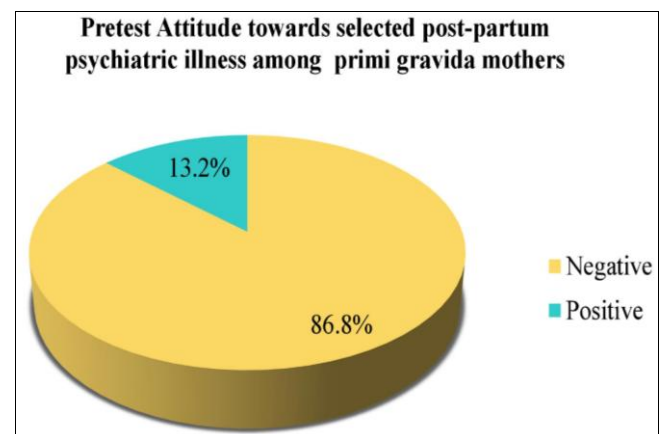
It shows pretest knowledge regarding selected post-partum psychiatric illness among primi gravida mothers. In pretest, 9.2% of the primigravida mothers had poor knowledge (Score 0-8), 88.2% of them had average knowledge (Score

9-16) and 2.6% of them had good knowledge (Score 17-25) regarding selected post-partum psychiatric illness.



**Pretest attitude regarding selected post-partum psychiatric illness among Primi gravida mothers N=76**

Attitude	Freq	Pre	Test
			%
Negative (Score 15-45)	66		86.8%
Positive (Score 46-75)	10		13.2%



Pretest attitude towards selected post-partum psychiatric illness among Primi gravida mothers

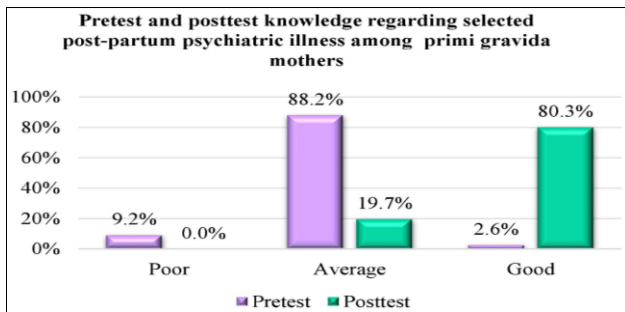
It shows pretest attitude towards selected post-partum psychiatric illness among Primi gravida mothers. In pretest, 86.8% of the primigravida mothers had negative attitude (Score 15-45) and 13.2% of them had positive attitude (Score 46-75) towards selected postpartum psychiatric illness.

**SECTION-II**

**Analysis of data related to post-test knowledge and attitude regarding selected postpartum psychiatric illness among Primi gravida mothers.**

**Post-test knowledge regarding selected post-partum psychiatric illness among Primi gravida mothers N=76**

Knowledge	Pretest		Post-test	
	Freq	%	Freq	%
Poor (score 0-8)	7	9.2%	0	0.0%
Average (score 9-16)	67	88.2%	15	19.7%
Good (Score 17-25)	2	2.6%	61	80.3%



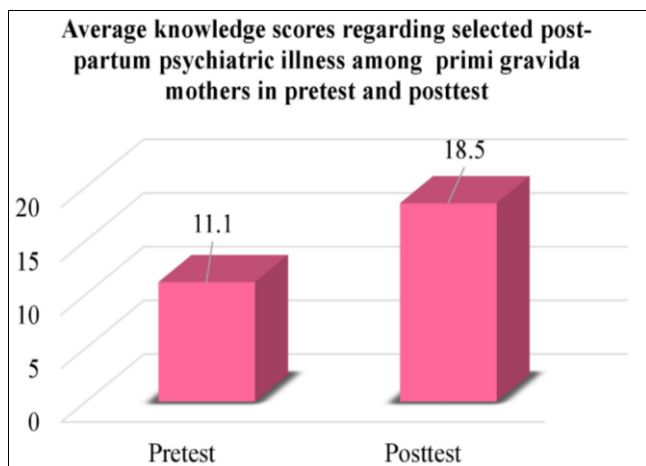
Pretest and post-test knowledge regarding selected post-partum psychiatric illness among Primi gravida mothers

It shows pretest and post-test knowledge regarding selected post-partum psychiatric illness among Primi gravida mothers. In pretest, 9.2% of the primigravida mothers had poor knowledge (Score 0-8), 88.2% of them had average knowledge (Score 9-16) and 2.6% of them had good knowledge (Score 17-25) regarding selected post-partum psychiatric illness. In post-test, 19.7% of them had average knowledge (Score 9-16) and 80.3% of them had good knowledge (Score 17-25) regarding selected post-partum psychiatric illness. This indicates that the knowledge among primigravida mothers improved remarkable after structured teaching program regarding selected post-partum psychiatric illness.

**SECTION-III**

**Paired t-test for the effectiveness of structured teaching program on knowledge regarding post-partum psychiatric illness among Primi gravida mothers N=76**

	Mean	SD	T	Df	p-value
Pretest	11.1	2.3	22.9	75	0.000
Post test	18.5	2.2			



Average knowledge scores regarding selected post-partum psychiatric illness among Primi gravida mothers in pretest and post test

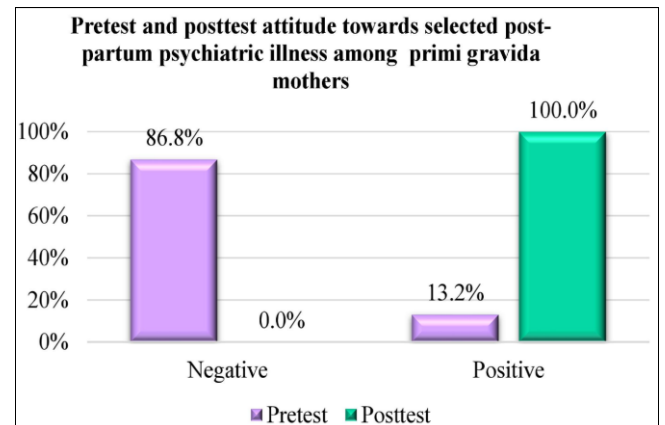
It shows average knowledge scores regarding selected post-partum psychiatric illness among Primi gravida mothers in pretest and post-test. Researcher applied paired t-test for the effectiveness of structured teaching program on knowledge regarding post-partum psychiatric illness among Primi gravida mothers. Average knowledge score in pretest was 11.1 which increased to 18.5 in post-test.

T-value for this test was 22.9 with 75 degrees of freedom. Corresponding p-value was small (less than 0.05), the null hypothesis is rejected. Average knowledge score in post-test is significantly higher than that in pret-test. It is evident that

the structured teaching program is significantly effective in improving the knowledge among Primi gravida mothers regarding selected post-partum psychiatric illness.

**Pre-test and Post-test attitude towards regarding selected post-partum psychiatric illness among Primi gravida mothers N=76**

Attitude	Pretest		Post test	
	Freq	%	Freq	%
Negative (Score 15-45)	66	86.8%	0	0.0%
Positive (Score 46-75)	10	13.2%	76	100.0%

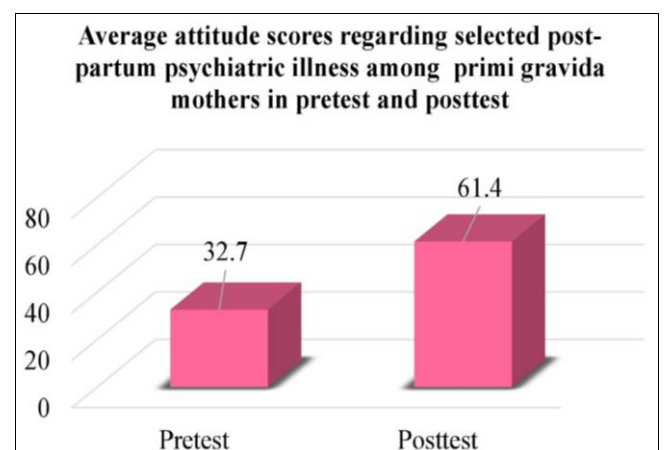


Pretest and post-test attitude towards selected post-partum psychiatric illness among Primi gravida mothers

It shows pretest and post-test attitude towards selected post-partum psychiatric illness among Primi gravida mothers. In pretest, 86.8% of the primigravida mothers had negative attitude (Score 15-45) and 13.2% of them had positive attitude (Score 46-75) towards selected post-partum psychiatric illness. In post-test, all of the primigravida mothers had positive attitude (Score 46-75) towards selected post-partum psychiatric illness. This indicates that the attitude towards selected post-partum psychiatric illness among Primi gravida mothers improved remarkably after structured teaching program.

**Paired t-test for the effectiveness of structured teaching program on attitude on post-partum psychiatric illness among Primi gravida mothers N=76**

	Mean	SD	T	df	p-value
Pretest	32.7	8.3	24.9	75	0.000
Post-test	61.4	5.1			



Average attitude scores regarding selected post-partum psychiatric illness among Primi gravida mothers in pretest and post-test. It shows average attitude scores regarding selected post-partum psychiatric illness among Primi gravida mothers in pretest and post-test. Researcher applied paired t-test for the effectiveness of structured teaching program on attitude towards post-partum psychiatric illness among primi gravida mothers. Average attitude score in pretest was 32.7 which increased to 61.4 in post-test. T-value for this test was 24.9 with 75 degrees of freedom. Corresponding p-value was small (less than 0.05), the null hypothesis is rejected. Average attitude score in post-test is significantly higher than that in pretest. It is evident that the structured teaching program is significantly effective in improving the attitude among Primi gravida mothers towards selected post-partum psychiatric illness.

**Section IV**

**Analysis of data related to the association of knowledge and attitude with selected demographic variables among Primi gravida mothers.**

**Fisher’s exact test for the association of knowledge with selected demographic variables among Primi gravida mothers N=76**

Demographic variable		Knowledge			p-value
		Poor	Average	Good	
Age	Below 20 Years	0	7	1	0.626
	21 - 25 Years	2	19	0	
	26 - 30 Years	3	22	0	
	31 - 35 Years	2	19	1	
Educational Qualification	Illiterate	2	7	0	0.318
	Primary School	1	16	1	
	Secondary & Higher Secondary education	1	29	1	
	Graduate & above	3	15	0	
Occupation	Housewife	3	7	0	0.181
	Private Employee	2	27	1	
	Government employee	2	19	0	
	Self employed	0	14	1	
Type of family	Joint	0	16	0	0.464
	Nuclear	2	26	1	
	Extended	4	21	1	
	Separated	1	4	0	
Family Monthly Income	Less than Rs. 10000	1	10	0	0.530
	Rs. 10001 – 20000	3	16	0	
	Rs. 20001 – 30000	1	22	0	
	More than Rs. 30000	2	19	2	

Residence	Urban	1	18	0	0.758
	Semi urban	2	22	2	
	Rural	3	19	0	
	Slum	1	8	0	
Family history of Mental Illness	Yes	1	1	0	0.224
	No	6	66	2	

Since all the p-values were large (greater than 0.05), none of the demographic variable was found to have significant association with the knowledge among Primi gravida mothers regarding selected post-partum psychiatric illness.

**Fisher’s exact test for the association of attitude with selected demographic variables among primi gravida mothers N=76**

Demographic variable		Attitude		p-value
		Negative	Positive	
Age	Below 20 Years	7	1	0.109
	21 - 25 Years	20	1	
	26 - 30 Years	21	4	
	31 - 35 Years	18	4	
Educational Qualification	Illiterate	8	1	1.000
	Primary School	16	2	
	Secondary & Higher Secondary education	26	5	
	Graduate & above	16	2	
Occupation	House wife	9	1	0.960
	Private Employee	25	5	
	Government employee	19	2	
	Self employed	13	2	
Type of family	Joint	16	0	0.192
	Nuclear	23	6	
	Extended	23	3	
	Separated	4	1	
Family Monthly Income	Less than Rs. 10000	10	1	0.637
	Rs. 10001 – 20000	17	2	
	Rs. 20001 – 30000	18	5	
	More than Rs. 30000	21	2	
Residence	Urban	17	2	1.000
	Semi urban	22	4	
	Rural	19	3	
	Slum	8	1	

Family history of Mental Illness	Yes	2	0	1.000
	No	64	10	

Since all the p-values were large (greater than 0.05), none of the demographic variable were found to have significant association with the attitude among primi gravida mothers regarding selected post-partum psychiatric illness.

**Discussion**

The discussion is the most interesting part of it. The finding of the study was discussed in the light of previous studies. The discussion section is devoted to a thoughtful and insightful analysis of the finding, leading to a discussion of their clinical and theoretical utility. In this section, major findings of study were discussed with reference to the result obtained by other investigators.

So, the study findings are supported by a study which was conducted by Sampooram W, (2020) and the findings showed that the structured teaching programme was effective in increasing the knowledge and attitude among primi mothers regarding selected postpartum psychiatric illness. Thus, structured teaching programme played an important role in improving the knowledge and attitude of primi mothers.

So, again the study findings are supported by a study which was conducted by Mrs. Linu Elsa Abraham, and Dr. M. Bharathi (2020), and the result showed that none of the postnatal mothers had adequate knowledge during pre-test, but after administering structured teaching program their knowledge level increased to 76%. Mean pre-test score was 7.23 and the mean post test score was 32.16. The findings of the current study were compared with the findings of previously discussed studies on the effect of structured

teaching program regarding post-partum psychiatric illness among primi gravida mothers. In the present study, the investigator observed that the structured teaching program regarding post-partum psychiatric illness is very effective for increase in knowledge and positive attitude among primi gravida mothers.

### Conclusion

The main aim of the study was to evaluate the effectiveness of structured teaching program on post-partum psychiatric illness among primi gravida mothers regarding knowledge and attitude. The structured teaching program helped the primi gravida mothers to increase their knowledge and keep positive attitude about post-partum psychiatric illness.

The following conclusions were drawn on the basis of the findings of the study

1. The knowledge and attitude scores among most of primi gravida mothers were poor and average.
2. The structured teaching program for primi gravida mothers helped them to learn more about post-partum psychiatric illness and increased their knowledge and positive attitude.

In this study Paired t-test was used to find out the effectiveness of structured teaching program on knowledge and attitude regarding post-partum psychiatric illness among primi gravida mothers. The results revealed during post-intervention that there is significance increase in knowledge and attitude among primi gravida mothers after giving the structured teaching program regarding post-partum psychiatric illness.

Hence, the null hypothesis was rejected and alternate hypotheses were accepted.

From this research it is very clear that structured teaching program regarding post-partum psychiatric illness helped to increase in knowledge and attitude among primi gravida mothers.

**Author conflict of interest:** None

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