

A Correlational Study on the Participation Level of Expecting Fathers During Pregnancy and Psychological Well Being among Antenatal Women Attending Outpatient Department in Selected Hospitals of District Mohali, Punjab

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Abstract :

Introduction : The role of man during pregnancy is to provide emotional, physical and financial support to the woman carrying his child. Hence, in this regard the following study was conducted to assess the participation level of expecting fathers during pregnancy and correlate it with psychological well being among antenatal women attending outpatient department in selected hospitals of district Mohali, Punjab.

Methodology : A quantitative research approach with correlational research design was chosen and 200 antenatal women were selected using convenient sampling technique. Participation level of expecting fathers during pregnancy was assessed by checklist and psychological well being among antenatal women was assessed by rating scale.

Results : The result of the study showed that around 2.0% husbands were having least participation, 10.5% were having satisfactory participation, and majority of husband i.e. 87.5% were having maximum participation. The psychological well being score revealed that around 10.5% subjects had high psychological well being, 89.5% had moderate level of psychological well being and no one had low psychological well being.

Conclusions : There is positive correlation between participation and psychological well being among antenatal women. Study also indicated that there is significance association between the participation level and demographic variables i.e. duration of marriage, family monthly income, residential area, working status of husband, education. There is no significance association between the participation level and other demographic variables i.e. type of marriage, working status, religion and age.

Keywords : Participation level; Psychological well being; fathers

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Introduction

Pregnancy is a unique, exciting and often joyous time in a woman's life, as it highlight the woman's amazing, creative and nurturing powers while providing a bridge to the future. However, pregnancy comes with some cost as a pregnant woman needs to be a responsible to support the health of her future child. The growing foetus (the term used to denote the baby-to-be during early developmental stages) depends entirely on its mother's healthy body for all needs.

Consequently, pregnant women must take steps to remain as healthy and well nourished as they possibly can.¹

Paternal involvement has been recognized as an important factor of a mental health perspective for its long reach from pregnancy to the newborn outcomes. ⁷When fathers are involved during pregnancy, the risk of preterm birth, low birth weight and fetal growth restriction is significantly reduced and maternal negative health behaviours diminishes. The primary benefits of having a father or male partner

involved during pregnancy are reduction of maternal stress levels and the encouragement of positive maternal behaviors.² Pregnant women's psychological well-being affects their emotional state, which in turn has a significant effect on fetal development, the course of labor, and the mother's adaptation in the postpartum period. Social support, especially partner support, is proven to have a protective effect against stress, worries, and concerns that occur in pregnancy.³

Giurgescu C, Templin T (2016) conducted a study on relationship of fathers involvement and psychological well being of the pregnant women in African American women using a prospective research design. It was concluded that 80 % of women reported that the father of the baby was involved during their pregnancy. Only 28 % of women had clinically relevant depressive symptoms at the first time of data collection and 25% of the women had clinically relevant depressive symptoms at the second time of data collection. Women had high level of psychological well being during second time of data collection compared with the first data collection. Women who had higher level of psychological well being also had lower level of depressive symptoms.⁴

Researches revealed that fathers' participation is very important during pregnancy both physiologically and psychologically among antenatal mothers.

Methodology

Research design : A correlational non- experimental research design was used for the study.

Research setting : The study was conducted in Civil hospital of Mohali and Kharar, district Mohali, Punjab.

Population : primigravid antenatal women who visited antenatal outpatient department of selected hospitals of district Mohali, Punjab.

Sample and Sampling technique : The sample of 200 primigravid women attending antenatal outpatient department in selected hospitals of district Mohali, Punjab.

Level of Scoring :

Score	Level of participation
19-27	Maximum participation
10-18	Satisfactory participation
1-9	Least participation
00	No participation
Score	Psychological well being
56- 75	High
36-55	Moderate
15 -35	Low

Results

Table 1: Frequency and percentage distribution according to socio-demographic variables.

Sr. No.	Socio Demographic Data	Variables	Frequency (f)	Percentage (%)
1	Age in years	Up to 20 years	0	0.0
		20- 25 years	78	39.0
		25 -30 years	105	52.5
		>30 years	17	8.5
2	Religion	Hindu	76	38.0
		Muslim	23	11.5
		Sikh	89	44.5
		Christian	12	6.0
3	Education	No formal education	05	2.5
		Up to primary	03	1.5
		Up to secondary	96	48.0
		Graduate	96	48.0
4	Education of husband	No formal education	05	2.5
		Up to primary	03	1.5
		Up to secondary	17	8.5
		Graduate	175	87.5

5	Working Status	Employed Self employed Homemaker	21 91 88	87.5 91 88
6	Working Status of husband	Unemployed Self employed Private employee Government employee	01 25 114 60	0.5 12.5 57.0 30.0
7	Residential area	Urban Rural Slum	83 102 15	41.5 51.0 7.5
8	Type of marriage	Arranged Love	140 60	70.0 30.0
9	Duration of marriage	<1 year 2-3 year 3-4 year >4 year	48 120 31 01	24.0 60.0 15.5 0.5
10	Family monthly income (in Rs)	≤20,000 20,000-30,000 30,000-40,000 >40,000	16 63 102 19	8.0 31.5 51.5 9.5

Table No 2 : Frequency and percentage distribution of participation level of expecting fathers during pregnancy.

Participation Level of Expecting Fathers	Frequency (f)	Percentage (%)
Maximum Participation (19-27)	175	87.5
Satisfactory Participation (10-18)	21	10.5
Least Participation (1-9)	4	2.0
No Participation (0)	0.0%	0

Table No 3 : Level Of Psychological Well Being Among Antenatal Women.

Level of Psychological Well Being	Percentage	Frequency
High (56-75)	10.5%	21
Moderate (36-55)	89.5%	179
Low (15-35)	0.0%	0

Table 4: Correlation between level of fathers participation and psychological well being among antenatal women.

Mean± SD	Correlation	Table	Value	P-value
Participation Level	21.57 ± 3.389	0.269	0.139	<0.001*
Psychological well being	51.04 ± 3.260			

*Significant

Table 5: Association between the participation level of expecting fathers during pregnancy and selected demographic variables.

Demographic Variables		Participation Level			Association With Participation			
Sociodemographic Variable		Maximum Participation	Satisfactory Participation	Least Participation	Chi Test	Table value	df	P value
Age	Up to 20 years	0	0	0	2.844	9.488	4	0.584NS
	20-25 years	66	9	3				
	20-25 years	93	11	1				
	>30 years	16	1	0				
Religion	Hindu	65	7	4	7.932	12.592	6	0.243NS
	Muslim	19	4	0				
	Sikh	80	9	0				
	Christian	11	1	0				
Education	No formal education	0	1	4	161.2	12.592	6	0.000*
	up to primary	3	0	0				
	up to secondary	86	10	0				
	Graduate or above	86	10	0				
Education of husband	No formal education	0	1	4	164.6	12.592	6	0.000*
	up to primary	3	0	0				
	up to secondary	13	4	0				
	Graduate or above	159	16	0				
Working status	Employed	18	3	0	1.864	9.488	4	0.761NS
	Home maker	79	9	3				
	Unemployed	78	9	1				
Working status of husband	Unemployed	1	0	0	40.548	12.592	6	0.000*
	Self employed	14	7	4				
	Private employed	103	11	0				
	Government	57	3	0				
Residential area	Urban	75	8	0	37.776	9.488	4	0.000*
	Rural	93	8	1				
	Slum	7	5	3				
Type of marriage	Arranged	118	18	4	4.735	5.991	2	0.094NS
	Love	57	3	0				
Duration of marriage	< 1 year	34	10	4	23.359	12.592	6	0.001*
	2-3 year	109	11	0				
	3-4 year	31	0	0				
	> 4 year	1	0	0				
Family monthly income	≤ 20,000 Rs	8	4	4	59.186	12.592	6	0.000*
	20,000-30,000 Rs	52	11	0				
	30,001-40,000 Rs	97	5	0				
	> 40,000Rs	18	1	0				

Discussion

In present study About 2.0% husband were having least participation, 10.5% were having satisfactory participation, and majority of husband i.e 87.5% were having maximum participation the overall participation of fathers during pregnancy was 79.15%. The findings of the study conducted by Redshaw M, Henderson J revealed that about 86% fathers were involved during pregnancy and labour.⁵ About 10.5% subjects had high psychological well being, 89.5% had moderate level of psychological well being and no one had low psychological well being. The similar study conducted by Hawkins M, Misra D, Zhang L, Price M, Dailry R, Carmen G 2021 revealed that high family involvement was associated with lower depressive symptoms, perceived stress and higher level of psychological well being. Father and family involvement was protective factor for pregnant women.⁶

In present study, the mean and standard deviation of the participation level was 21.57 ± 3.389 and mean, SD of psychological well being was $51.04 \pm$ participation and psychological well being was found to be 0.269, tabulated value is 0.139 and the level of significance is < 0.001 . There is positive coorelational between participation and psychological well being among antenatal women. The study done by **Rabeipour S, Khodaei AR, Moloud R, Khalkhal R H** revealed that the mean age of the women was 27.25 ± 4.2 . Average participation of husband was ($43.05 \pm 5/91$) and the mean mental health score was (39.13 ± 9.518). There was significant positive correlation between the psychological well being and husbands participation among pregnant women.⁷ In present study there is significance association between the participation level and demographic variables i.e duration of marriage, family monthly income, residential area, working status of husband and education. There is no significant association between the participation level and other demographic variables i.e type of marriage, working status, religion and age.

The study conducted by **Maken H, Zafar et al. (2018)** on fathers involvement in maternal health care during antenatal and perinatal period. The fathers attitude towards anteatal care found to be significantly associated with a higher education and greater income level. While fathers favourable attitude towards childbirth was found to be significantly associated with higher education and lower age (18-29 years).⁸

Conclusions

The overall findings of the study revealed that there was maximum participation level of expecting fathers during

pregnancy and moderate psychological well being among antenatal women. Therefore, there was positive correlational between participation and psychological well being among antenatal women. The significance association was found between the participation level and demographic variables with duration of marriage, family monthly income, residential area, working status of husband, education and no significance association was found with type of marriage, working status, religion and age. There was significant association between the psychological well being and demographic variables with religion. There was no significance association between the psychological well being and other demographic variables i.e age, education, education of husband, working status, working status of husband, residential area, type of marriage, duration of marriage, family month income.

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