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A DESCRIPTIVE STUDY TO ASSESS THE EXPERIENCE AND EXPECTATIONS OF CHILDBIRTH AMONG PRIMI MOTHERS ADMITTED FOR DELIVERY IN THIRUVARUR MEDICAL COLLEGE AND HOSPITAL, THIRUVARUR.

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Abstract:

Introduction: Childbirth is a stressful event for many women without prenatal preparation, and factors such as education, previous experience, doctors, friends, mothers, and media contribute to the formation of beliefs. This study aims to assess the Experience and Expectations of Childbirth among primi mothers admitted for delivery in Thiruvavarur Medical College and Hospital, Thiruvavarur. **Methodology:** A quantitative research approach was selected to gather data, and a descriptive research design was employed. A sample size of 50 participants was selected using a convenience sampling technique, where all available mothers meeting the inclusion criteria were chosen. **Result and Findings:** The results of the study showed that all 50 participants reported a "Good experience and expectation" with respect to their childbirth experience. Specifically, 0 participants fell under the categories of "Bad experience and expectation" or "Moderate experience and expectation," indicating that 100% of the participants had a positive experience and expectation of childbirth. **Conclusion:** The study concluded that most participants reported feeling supported during their pregnancy and labor, with a majority expressing confidence in the process. The overall expectations for childbirth were mostly focused on it being a normal and manageable experience.

Keywords: Primimother, childbirth, experience, expectations.

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INTRODUCTION:

Giving birth is a complex event, with expectations playing a significant role in women's response to the experience. These expectations, which include positive and negative beliefs, attitudes, and perceptions, can affect their well-being and satisfaction with childbirth. Women's ability to meet these expectations can form their perception of the birth experience, with some expectations helping them cope successfully, while others may be unable to cope.

Expectations vary among women, with both positive and negative expectations influencing the birth experience. Different effects may be related to emotions, control, pain, and obstetric events. Improvement of expectations can be developed by new information and experience. Multiparas and primiparas women have different expectations due to their previous birth experiences.

Childbirth is a stressful event for many women without prenatal preparation, and factors such as education, previous experience, doctors, friends, mothers, and media contribute to the formation of beliefs. Realistic and unrealistic expectations can influence labor pain, with mothers with more realistic expectations experiencing less pain, diminished disappointment, and a sense of failure.

This study aimed to compare and evaluate aspects of labor and delivery women describe as different from or the same as their expectations. If major differences exist between women's expectations and actual events, women need to develop realistic and positive expectations and prepare for unexpected events. This research aims to help women meet the challenges of childbirth with positive expectations and be more satisfied with their experiences.

METHODOLOGY:

A quantitative research approach was selected to gather data, and a descriptive research design was employed to explore and assess the participants' childbirth experiences and expectations. The study was conducted in both the labor and postnatal wards of the hospital, which is a 500-bedded facility.

The target population for this research consisted of primigravida mothers admitted for delivery in the labor ward. A sample size of 50 participants was selected using a convenience sampling technique, where all available mothers meeting the inclusion criteria were chosen. Inclusion criteria included carrying a live, singleton fetus, being between 39 and 42 weeks of gestation, being aged between 19 and 40 years, and being able to communicate in Tamil or English. Exclusion criteria involved mothers with medical complications or neonatal issues requiring separation.

The data collection tool was a self-administered questionnaire consisting of three sections: demographic data, clinical data, and research tools assessing expectations and experiences of childbirth. The scoring system used to measure expectations and experiences was categorized into three levels: bad (50% or less), moderate (51-74%), and good (75% or more). The validity of the content was ensured through expert review, and necessary corrections were made. After obtaining formal permission from the relevant authorities, the questionnaires were distributed to the participants, and after completion, refreshments were provided.

For data analysis, descriptive statistics were used, and the results were analyzed using frequency and percentage distributions to determine the levels of expectations and experiences among the participants.

RESULT:

The demographic and clinical data of primigravida mothers regarding their experiences and expectations of childbirth, as shown in Table 1, revealed several key findings. The majority of participants were between 21 and 24 years of age (48%), with 54% having completed higher secondary education. Most husbands were either unemployed (58%) or self-employed (32%), and 36% of the families had a monthly income between 5000-10000 INR. In terms of family type, 58% lived in extended families.

Regarding clinical data in Table 2, 84% of the mothers had booked their pregnancy and had regular antenatal checkups. Most pregnancies were planned (92%), with 84% of participants expecting the overall childbirth experience to be a normal process. A majority (90%) had an unwanted pregnancy, and 100% had received two doses of the tetanus toxoid vaccine and undergone ultrasound. Complications during pregnancy were reported by 30% of the mothers, and 76% had undergone labor induction. The most common delivery type was normal delivery (58%), with 64% of mothers undergoing episiotomy.

As per Table 3, 90% of the mothers experienced support from their husbands, but 80% had fears of medical interventions during labor. A substantial percentage (90%) feared childbirth, while 54% of the mothers reported having a positive childbirth experience. Most participants felt pain during labor (98%), and 66% received support from their family during the labor period. Additionally, 90% had financial planning for the birth, and 64% heard their baby cry immediately after delivery.

Overall, Table 4 indicates that all participants reported a "Good experience and expectation" regarding their childbirth experience, with 100% of the mothers indicating a positive outlook.

Table 1: Distribution of selected demographic variables of primi mothers regarding experience and expectation of childbirth.

S.NO	DEMOGRAPHIC VARIABLES	FREQUENCY	PERCENTAGE
1.	AGE		
	18 – 20 Years	3	6%
	21 – 24 Years	24	48%
	26 – 30 Years	19	38%
	>30 Years	4	8%
2.	EDUCATIONAL STATUS		
	ILLITERATE PRIMARY	6	12%
	SCHOOL HIGHER	11	22%
	SECONDARY OTHER	27	54%
		6	12%
3.	OCCUPATION OF THE HUSBAND UNEMPLOYED		
	COOLY	4	8%
	SELF EMPLOYED	29	58%
	OTHER	16	32%
		1	2%
4.	FAMILY MONTHLY INCOME		
		9	18%
	5000 PER MONTH	18	36%
	5000 – 10000 PER MONTH	18	36%
	10,000 – 15000 PER MONTH	5	10%
	15000 AND ABOVE		
5.	RELIGION		
	HINDU	33	66%
	CHRISTIAN	9	18%
	MUSLIM	8	16%
6.	TYPES OF THE FAMILY		
	NUCLEAR FAMILY	21	42%
	EXTENDED FAMILY	29	58%

Table 2: Distribution of selected clinical data of primi mothers regarding experience and expectation of childbirth.

S.NO	CLINICAL DATA	FREQUENCY	PERCENTAGE
1.	BOOKING STATUS OF THE MOTHER		
	BOOKED	42	84%
	UNBOOKED	8	16%
2.	WEEKS OF GESTATION		
	29- 36 WEEKS	6	12%
	37- 40 WEEKS	41	82%
	41- 42 WEEKS	3	6%
3.	REGULAR ANTENAL CHECKUPS		
	YES NO	42	84%
		8	16%
4.	EXPECTATION RELATED TO THE OVEALL BIRTH EXPERIENCE		
	FEARFUL	33	66%
	NORMAL PROCESS	9	18%
	VERY LONG	8	16%
5.	EXPECTATION RELATED TO THE FEELING DURING THE FIRST STAGE OF LABOUR TO		
	BE VERY WEAK	24	48%
	TO BE VERY DEPRESSED	26	52%
6.	WOMENS EXPECTATION DURING LABOUR INTENSITY		
	LOSE CONTROL	6	12%
	CRY INTENSIVELY	23	46%
	BEAR AND COPE WITH PAIN GIVEN	19	38%
	OVER BODY	2	4%
7.	PREGNANCY		
	WANDED	45	90%
	UNWANDED	5	10%
8.	INJ.TT (TAKEN 2 DOSE)		
	YES	50	100%

9.	USG DONE YES	50	100%
10.	NUMBER OF VAGINAL EXAMINATION 1-4 4-7 8-11 12-15	26 16 7 1	52% 32% 14% 2%
11.	COMPLICATION DURING PREGNANCY YES NO	15 35	30% 70%
12.	INDUCTION OF LABOUR YES NO	38 12	76% 24%
13.	EPISIOTOMY DONE YES NO	32 18	64% 18%
14.	TYPES OF DELIVERY NORMAL DELIVERY INSTRUMENTAL EMERGENCY LSCS	29 2 19	58% 4% 38%
15.	BABY BORN ALIVE	50	100%
16.	COMPLICATION DURING PREGNANCY MALE FEMALE	27 23	50% 46%
17.	WEIGHT OF THE BABY <2500 >2500	34 16	68% 32%
18.	BREAST FEEDING (IMMEDIATE AFTER DELIVERY) YES NO	48 2	96% 4%

19.	COMPLICATION DURING LABOUR YES NO	19 31	38% 82%
20.	COMPLICATION DURING PUERPERIUM YES NO	6 44	12% 88%

Table 3: Distribution of selected clinical data of primi mothers regarding experience and expectation of childbirth.

S.NO	CLINICAL DATA	FREQUENCY	PERCENTAGE
1.	IS YOUR HUSBAND SUPPORTING YOU DURING PREGNANCY? YES NO	5 45	10% 90%
2	IS THEIR CURRENT PLANNED PREGNANCY? YES NO	46 4	92% 8%
3.	HOW MANY TIMES DO YOU VISIT THE ANTENATAL CARE CENTRE? 1 OR 2 TIMES	50	100%
4.	DO YOU HAVE MEDICAL PROBLEMS INTERVENTION DURING LABOUR? YES NO	40 10	80% 20%

5.	YOU HVE FEAR FOR MEDICAL INTERVENTION DURING LABOUR YES NO	11 39	22% 78%
6.	DO YOU HAVE DEPRESSION? YES NO	12 38	24% 76%
7.	DID YOU HAVE POSITIVE CHILDBIRTH EXPERIENCE YES NO	27 23	54% 46%
8.	WHAT DOES CHILDBIRTH FEEL LIKE? YES NO	28 22	56% 44%
9.	DO YOU DECIDING HEALTH CENTRE FOR DELIVERY PRIOR TO LABOUR? YES NO	15 35	30% 70%
10.	FIINANCIAL PLANNIING FOR BIRTH YES NO	45 5	90% 10%
11.	DID YOU FEEL PAIN DURING LABOUR? YES NO	49 1	98% 2%

12.	DO YOU HAVE SUPPORTORS FROM YOUR FAMILY SIDE DURING LABOUR PERIOD YES NO	17 33	34% 66%
13.	DID YOU PRACTICE ANY EXPERIENCE DURING PREGNANCY PERIOD? YES NO	33 17	66% 34%
14.	DID YOU HAVE FEAR ABOUT YOUR CHILD BIRTH YES NO	45 5	90% 10%
15.	DID YOU HEAR YOUR BABYS CRY AFTER DELIVERY? YES NO	32 18	64% 36%

Table: 4 Frequency and percentage wise distribution of experience and expectation of child birth among primi mothers during delivery.

LEVEL OF EXPERIENCE AND EXPECTATION	FREQUENCY (n)	PERCENTAGE (%)
Bad experience and expectation	0	0%
Moderate experience and expectation	0	0%
Good experience and expectation	50	100%

DISCUSSION

The results of the study showed that all 50 participants reported a "Good experience and expectation" with respect to their childbirth experience. Specifically, 0 participants fell under the categories of "Bad experience

and expectation" or "Moderate experience and expectation," indicating that 100% of the participants had a positive experience and expectation of childbirth.

CONCLUSION

The study concluded that primigravida mothers at Thiruvavar Medical College and Hospital had a generally positive experience and expectation regarding childbirth. Most participants reported feeling supported during their pregnancy and labor, with a majority expressing confidence in the process. The overall expectations for childbirth were mostly focused on it being a normal and manageable experience. Despite some fears surrounding medical interventions, the majority felt a positive connection with their childbirth experience, and most had a supportive network of family and financial preparation. The findings suggest that the participants had a favorable outlook and encountered relatively few complications during labor and delivery.

RECOMMENDATION

Planned education programme can be given to all primigravida mothers in clinical setting regarding physiological changes, childbirth preparation and planned parenthood.

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