

# [Literature review on preconception counseling and education](https://assignbuster.com/literature-review-on-preconception-counseling-and-education/)

Review of literature is an essential step in the development of a research project. It helps the researcher to design the proposed study in a scientific manner. So as to achieved the desired result.

In this chapter the researcher will present the review of literature in the following heading.

* Section-I: Studies related to Importance of preconception counseling and health education.
* Section-II: Studies related to Knowledge and attitude regarding preconception care.
* Section-III: Studies related to Use of vitamin supplements prior to pregnancy.
* Section-IV: Studies related to Health awareness and promotion on preconception care
* Section-V: Studies related to Betty Neumann’s system model

## SECTION-I: STUDIES RELATED TO PRECONCEPTION COUNSELLING AND HEALTH EDUCATION

Bastani, Hashemi, Bastani, Haghani., (2010) conducted a study, among the women attending premarital clinics in Iran which was aimed to assess the impact of a health education workshop on their health locus of control and self-efficacy in physical activity. Randomized controlled trial was used as the design for the study. A questionnaire was used before and after the intervention. There were significant increases in scores of internal health locus of control and self-efficacy in the experimental group that is among the 109 samples in the post-intervention. Compared to the control group that is among 101 samples. Short-term health education can empower the women to adapt to the healthy lifestyles.

Berghella, Buchanan, Pereira, Baxter., (2010) conducted study on the available literature, on preconception care. They have searched in the Cochrane Library, MEDLINE, and PUBMED from 1966 until January 2009. The target audience was Obstetricians & Gynecologists, Family Physicians and adolescence. When they completed the educational programme, the participant was having knowledge to assess the potential benefits for women and their baby that which results from the preconception care.

Jong-Potjer LC de, Elsinga, et. al., (2006) conducted a study on Preconception counselling can reduce negative pregnancy problems by finding the risk factors before pregnancy in Netherlands. Randomized trial of women aged 18-40years were used as sample in the study. The anxiety level was assessed among the women. After the Preconception care there was found an average decrease of 3. 6 points in anxiety-levels (95% CI, 2. 4 – 4. 8). Mean scores of the STAI-3 were 38. 5 (95% CI 37. 7 – 39. 3) in the control group (n = 1090) and 38. 7 (95% CI 37. 9 – 39. 5) in the intervention group (n = 1186). Study proved that anxiety reduced after participation due to the effect of counselling. Therefore the offer of Preconception counselling to the general population is effective to reduce anxiety.

## SECTION-II: STUDIES RELATED TO KNOWLEDGE AND PRACTICE REGARDING THE PRECONCEPTION CARE

Coonrod, Bruce, Malcolm, Drachman, Frey., (2009) conducted a study to find out the knowledge and attitudes regarding preconception care in a low-income Mexican American population. A cross-sectional survey was used and the sample size was 305. 89% agreed that improving preconception health benefits pregnancy. 77% expressed some interest in preconception health care. Areas of high knowledge included were the folic acid use in pregnancy; use of alcohol; and verbal, physical, and sexual abuse. The samples showed interest in the preconception education and agreed that preconception health will have positive effect on pregnancy outcomes.

Maria , Morgan Debra Hawks, et. al., (2006) conducted a study to describe obstetrician-gynecologists’ opinions regarding preconception care. The Questionnaire was mailed to 1105 ACOG members. 60% was the response rate. 87% of the gynecologists think that preconception counselling is important and 94% think that it should be always recommend to the women planning for pregnancy. Around 34% thought their patients do not plan for their pregnancies and 49% said very few pregnant patients came for preconception counselling. Of those who obtain preconception counselling, 83% were believed to assure a healthy pregnancy because of an elevated risk for birth defects (20%).

Janis Biermann, Anne Lang Dunlop, et. al., (2006) conducted two program focusing the urban African-American women which has included the interconception care also. Project was aimed to reduce the key risks in the women of childbearing age. 7 out of 21 women in the IPC were identified as having a previous chronic disease. 21 out of 21 women have developed a reproductive plan for themselves, and they didn’t become pregnant within 9 months. The success rate of the project was greater than 70% among the participants. Preconception care appeared to be effective when specific risk factors were identified and interventions were given appropriately.

## SECTION-III: STUDIES RELATED TO USE OF VITAMIN SUPPLEMENTS PRIOR TO THE PREGNANCY

Carl J, Hill, DA., (2009) did a study that women’s diet should be supplemented with 400 mcg folic acid every day which helps in reducing neural tube defects in their babies up to 72%. Blood glucose should be controlled prior to conception helps in reducing the birth defects and pregnancy loss. Reducing the caffeine consumption can reduce the risk of miscarriage. Counselling was given for women in these areas and found to be effective.

Morgan LM, Major JL, Meyer RE, Mullenix A., (2009) proved that use of 400 mcg of folic acid among non-pregnant females of childbearing age in the Western North Carolina reduced the risk of neural tube defects by 50%-80. To the non-pregnant women free bottle of multivitamins was given to increase the consumption. The daily use multivitamin was increased after receiving a free three month supply.

Weerd de, Sabina Thomas, Chris, Cikot, Rolf, Steegers, Eric., (2002) conducted a study to assess whether counselling the women who plans for pregnancy to start or to continue the folic acid supplementation can improves folate status. Women and their partners who have reported folic acid supplement intake were categorized as users or nonusers of supplements. The use of folic acid intake was addressed at a subsequent preconceptional consultation. Differences between reported supplement users and nonusers before counselling as well as between assumed users and nonusers of folic acid were analyzed. A total of 111 eligible women participated. Preconceptional folic acid use can improves the folate status among women planning to conceive.

## SECTION-IV: STUDIES RELATED TO HEALTH AWARENESS AND PROMOTION OF PRECONCEPTION CARE

Vause, Jones, Evans, Wilkie, Leader., (2009) conducted a study whether counselling before conception is important. After completing the knowledge survey the woman was sent for initial assessment. 400 surveys were used for the data analysis. Patients were informed about the health optimization, consumption of folic acid, exposure to infectious disease, use of medication and use of recreational drug. Nulliparous women were found less knowledgeable. The more educated women had more knowledge. It was suggested that the women need their physicians to educate about pre-pregnancy lifestyle.

Delvoye, Guillaume, Collard, Nardella, Hannecart, Mauroy., (2009) conducted a study regarding preconception health promotion. The study results showed that preconception care was not able to provide when pregnancy was unplanned. The study proposes flour fortification with folic acid; timely immunization, continuous training of health care providers in the provision of preconception cares.

Delgado CE., (2008) done a study to assess undergraduate student awareness regarding preconception health. In the study 241 students were included as the sample. A questionnaire was designed to assess awareness related to preconception health and pregnancy. By answering 64% the students showed a mild to moderate level of awareness regarding preconception care. Individual student scores varied a great deal, ranging from 33% to 89% correct. Students who had previous such course containing information on pregnancy and/or child development correctly answered a greater percentage of items than those who had not taken such a course. Females had statistically significantly, higher awareness scores than males. Students demonstrated a high level of awareness for use of substance, a moderate level of awareness for sexually transmitted diseases and preconception care, and lower levels of awareness for folic acid, prenatal development, health, and pregnancy spacing.

## SECTION-V: STUDIES RELATED TO BETTY NEUMANN’S SYSTEM MODEL

Deepa Thomas, (1998) conducted a study to assess the effectiveness of instructional module on knowledge regarding menstrual hygiene among adolescent girls in selected schools in Trivandrum. In her study she used Betty Newman’s System model (1989) for creating awareness regarding menstrual hygiene among adolescent girls.

Stressors in her study were hormonal, physical and psychosocial changes and the existing superstitions and lack of knowledge of adolescent girls and the reaction was poor menstrual hygiene and maladjustment. She used two interventions in her study. The primary prevention was done by using the instructional module for providing education to the adolescent girls regarding menarche, development of secondary sexual characteristics and menstrual hygiene. In her study the secondary prevention was detection of unhygienic practices and education to correct the practices. The reconstitution in her study was the better adjustment and better hygiene.

Alpha. G., (2008) conducted a study to find the effectiveness of structured teaching programme on knowledge and attitude regarding changes related to puberty and menstrual hygiene among prepubertal girls in selected schools, at Salem. In her study she used Betty Newman’s System model (1989) for creating awareness regarding menstrual hygiene among prepubertal girls.

Stressors in her study were the physical and psychosocial changes related to puberty. She used one intervention in her study. The primary prevention was done through structured teaching programme on changes related to puberty and menstrual hygiene. The reconstitution in her study was the better knowledge and attitude towards pubertal changes and menstrual hygiene.