



EFFECTIVENESS OF A STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING THE PARTOGRAM AMONG STAFF NURSES WORKING IN MATERNITY WARDS

Mrs. Simranjeet Kaur*

*Vice Principal, Swami Premanand College of Nursing, Mukerian, Punjab, India.

<https://doi.org/10.47211/idcij.2026.v13i03.014>

ABSTRACT

The midwife record of labour is a legal document and must be maintained meticulously. Each event must be written immediately after its occurrence and should be authenticated with midwife full signature. Partogram is a simple, inexpensive tool which gives continuous pictorial overview of labour. The present study aimed assessing and giving knowledge on partogram among staff nurses so they can bring knowledge in practice. A pre experimental one group pre post-test research design was selected to conduct study. The study was conducted on 60 staff nurses working in maternity ward of selected hospitals of Jalandhar city by using convince sampling technique. The study result revealed that most of the staff nurses had poor knowledge in pre test 52 (86.67%) and in post-test most of the respondent had average 7 (11.67%) and 53 (88.33%) had good knowledge. The mean knowledge score in pre-test was (12.83) and in post-test was (22.6). Association of pre-test and post-test knowledge with selected variables shows that age, professional education, experience, mass media exposure had no impact but age had significant impact on knowledge.

Key Words: Midwife , Partograph, Staff Nurses, Knowledge, Maternity Ward, Labour Monitoring.

INTRODUCTION

Labour is a normal process that commences with uterine contraction of increasing frequency, duration and pain, which permit the effacement and dilatation of the cervix such that foetus passes through the birth canal and is safely delivered. (World Health Organization, 2016).

The onset of labour is the common pathway for all pregnancies and the recognition that the process has started is not always easy because, prior to the onset of true labour, by one or two weeks in primigravida and by few days in multipara These pains are usually dull, confined to the lower abdomen and groin, continuous in nature, and unrelated to uterine contractions (World Health Organization, 2016).

A simple, but effective chart was devised whereby square graph paper was used with 10 division representing the cervical dilatation. The measurement were recorded and joined to the previous measurement in a straight line. The chart also records interventions such as oxytocin administration, analgesia, foetal condition, and maternal observations (Philpott & Castle, 1972).

Need for the study

A partogram is a universal tool for monitoring labour. Partogram provide composite record of all important features of labour on a single sheet. This record can be easily analysed and provide a basis for early recognition of any deviation from normal. (World Health Organization, 2014).

Partogram helps to monitor labour progress and condition of mother and foetus. The midwife who cares for a woman during labour is responsible for recognizing information on the progress of labour. This progress of labour needs to be charted on a partogram. It is a graphic record of progress of labour that helps caregivers to detect whether labour is progressing normally or not, indicates when augmentation of labour is appropriate and assist in recognising cephalopelvic disproportion long before labour becomes obstructed.

Appropriate use of the partograph improves the quality and consistency of maternal and foetal observations during labour, supports timely referral and intervention, and contributes to better maternal and neonatal outcomes (Lavender et al., 2013).

PROBLEM STATEMENT

A Pre-experimental study on effectiveness of structured teaching programme on the knowledge of partogram among staff nurses working in maternity wards of selected hospitals in Jalandhar city ,Punjab, India .

OBJECTIVES

- To assess the pre-test knowledge of partogram among staff nurses.
- To plan and implement structured teaching programme on the knowledge of partogram.
- To assess the post-test knowledge of partogram among staff nurses.
- To find the association between the knowledge of partogram among staff nurses with selected socio demographic variables.

RESEARCH METHODOLOGY

Research approach: Quantitative approach was adopted.

Research Design: One group pre and post-test only design was used.

Research Variables: A variable of the study was Knowledge of partogram among staff nurses.

Research setting: The study was conducted in Chabra. Sigma, Sharanjeet, Civil Hospital, Berry, Doaba, Oberoi hospitals.

Target Population: The target population of present study was staff nurses working maternity wards.

Sample and sampling technique: The sample size of study was comprised of 60 staff nurses and Convenient sampling technique was used.

Development of data collection tool: After extensive review of the literature and with the help of expert opinion tool was prepared having following sections:

Section: A- This section consists of items pertaining the information about socio-demographic data such as Age, Professional Education ,Experience, religion, mass media exposure, area of job setting,

Section :B-This section consists 30 questions on topics of partogram.

Findings:

The study results shows that most of the staff nurses had poor knowledge in pre test 52 (86.67%) and in post-test most of the respondent had average 7 (11.67%) and 53 (88.33%) had good knowledge. The mean knowledge score in pre-test was (12.83) and in post-test was (22.6). Association of pre-test and post-test knowledge with selected variables shows that age, professional education, experience, mass media exposure had no impact but age had significant impact on knowledge.

Mean difference between pre-test and post-test knowledge score.

	Frequency	Mean	Standard	t-value
Pre-test	60	12.83	2.648	
Post -test	60	22.6	2.96	19.05*

*Significant at ($p < 0.05$) level

H₁: There is a significant difference in the knowledge scores of staff nurses before and after the Structured Teaching Programme (STP) on the partogram.

The calculated t -value (19.05) was greater than the critical t -value (1.96) at the 5% level of significance. Therefore, the null hypothesis (H_0) was rejected and the research hypothesis (H_1) was accepted. The findings indicate that the Structured Teaching Programme was effective in improving the knowledge of staff nurses regarding the partogram among those working in the maternity wards of selected hospitals in Jalandhar City.

CONCLUSION:

The study revealed that majority of respondent had below average knowledge score 52 (86.67) and 8 (13.33%) had average knowledge about partogram. But in post-test it was observed that most of the respondent having average knowledge 53 (88.33%) and 7(11.67%) good knowledge score. From this score it can be clearly observed that post test score has gone up at the same time all the below average score of 52 shifted to higher score of 'average' and 'good' So it was concluded that the structured teaching program will enhance the knowledge of staff nurses regarding partogram.



RECOMMENDATION:

- Similar study can be undertaken with a larger sample over a longer period.
- A similar study can be conducted by true experimental approach.
- A similar study can be conducted to assess the clinical nursing practices of staff nurses on patients with labour pains.

REFERENCES:

1. Lavender, T., Hart, A., & Smyth, R. M. D. (2013). Effect of partograph use on outcomes for women in spontaneous labour at term and their babies. Cochrane Database of Systematic Reviews, 2013(7), CD005461. <https://doi.org/10.1002/14651858.CD005461.pub4>
2. Maaløe, N., van Roosmalen, J., Dmello, B., Kwast, B., van den Akker, T., Housseine, N., Kujabi, M., Meguid, T., Kidanto, H., & others. (2022). WHO next-generation partograph: Revolutionary steps towards individualised labour care? BJOG: An International Journal of Obstetrics & Gynaecology, 129(5), 682–684. <https://doi.org/10.1111/1471-0528.16914>
3. Philpott, R. H., & Castle, W. M. (1972). Cervicographs in the management of labour in primigravidae. Journal of Obstetrics and Gynaecology of the British Commonwealth, 79(7), 592–598.
4. Ubom, A. E., Nieto-Calvache, A. J., Malel, Z. J., Nunes, I., & FIGO Committee on Childbirth and PPH. (2025). FIGO position statement on the use of the WHO Labour Care Guide versus the partograph. International Journal of Gynecology & Obstetrics, 170(1), 25–27. <https://doi.org/10.1002/ijgo.70151>
5. World Health Organization. (2016). Pregnancy, childbirth, postpartum and newborn care: A guide for essential practice (3rd ed.). World Health Organization.
6. World Health Organization. (2014). WHO recommendations for augmentation of labour. World Health Organization.
7. World Health Organization. (2025). WHO labour care guide: Implementation resource package. World Health Organization.
8. World Health Organization. (2025). WHO recommendations on maternal health: Guidelines approved by the WHO Guidelines Review Committee (2nd ed.). World Health Organization.

ABOUT AUTHORS



Mrs. Simranjeet Kaur is serving as the Vice Principal at Swami Premanand College of Nursing, Mukerian, Punjab, India. She has extensive experience in nursing education and administration. She has actively participated in academic and research activities and is committed to enhancing the quality of nursing education and improving maternal healthcare services through innovative teaching and training programmes.