ASSESSING THE IMPACT OF ANTENATAL EDUCATION PROGRAMS ON NEONATAL OUTCOMES: A COMPARATIVE OBSERVATIONAL STUDY

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Abstract

Background: Antenatal education programs are designed to prepare expectant mothers for childbirth and postnatal care, but their impact on neonatal outcomes and maternal satisfaction remains underexplored. This study aims to assess the effects of antenatal education on neonatal health outcomes and maternal satisfaction.

Materials and Methods: A comparative observational study was conducted with a total sample of 100 participants, divided into two groups: those who attended antenatal education programs (Group A, n=50) and those who did not (Group B, n=50). Key outcomes measured included birth weight, Apgar scores at 5 minutes, incidence of preterm birth, NICU admissions, breastfeeding initiation within the first hour of birth, maternal satisfaction, and postnatal hospital stay duration. Statistical analyses were performed to determine the significance of differences between the two groups.

Results: Significant benefits were observed for neonates in Group A, including higher average birth weight, higher percentages of Apgar scores ≥ 7, lower incidence of preterm birth, reduced NICU admissions, and decreased incidence of respiratory distress syndrome (Table No:2). Additionally, Group A showed higher rates of breastfeeding initiation, greater maternal satisfaction, and shorter postnatal hospital stays (Table No:3), all with statistical significance.

Conclusion: Attendance at antenatal education programs is associated with improved neonatal health outcomes and enhanced maternal satisfaction. These findings underscore the importance of antenatal education in promoting the health and well-being of both mothers and their newborns.

INTRODUCTION

The transition to motherhood is a critical and intricate phase in a woman's life, encompassing extensive physiological, psychological, and social adjustments. The journey from pregnancy to childbirth and beyond is replete with challenges and learning curves, making the provision of comprehensive support to expectant mothers imperative.[¹,²] Antenatal education programs emerge as a cornerstone in this context, offering a structured curriculum to prepare women and their families for the complexities of childbirth and early parenthood.[³]

Antenatal education, a pivotal element of prenatal care, aims to demystify the processes of labor and delivery, advocate for healthy pregnancy practices, and foster effective postnatal care techniques.[⁴] By covering an extensive array of topics, from the stages of labor to the fundamentals of breastfeeding and newborn care, these programs aspire to empower expectant parents with the knowledge and skills necessary to embark on their parenting journey with confidence.[⁵] Moreover, they provide a platform for addressing concerns and fears about childbirth, potentially reducing anxiety and enhancing the childbirth experience.[⁶]

Despite the recognized importance of antenatal education, its impact on tangible health outcomes for newborns and maternal satisfaction has been a subject of debate within the medical and academic communities.[⁷] While numerous studies underscore the benefits of such programs, including improved neonatal health metrics and enhanced maternal well-being, others report minimal or inconclusive effects.[⁸] This discrepancy underscores a critical
need for further research to elucidate the specific outcomes associated with antenatal education and to identify the components of these programs that are most beneficial.

The present study is designed to fill this gap by conducting a thorough investigation into the effects of antenatal education on a series of key neonatal health outcomes, including but not limited to birth weight, Apgar scores, the incidence of preterm births, and NICU admissions. In parallel, it assesses critical maternal outcomes such as the initiation of breastfeeding and levels of maternal satisfaction post-delivery. This dual focus not only sheds light on the immediate benefits for newborns but also explores the broader implications for maternal health and satisfaction, offering a holistic view of the impact of antenatal education.

Situated within a comparative observational framework, this study meticulously compares the outcomes for mothers who have participated in antenatal education programs with those who have not. This methodological approach allows for a nuanced analysis of the direct and indirect benefits of antenatal education, contributing to a more comprehensive understanding of its value in the continuum of prenatal care. By generating robust evidence on the effectiveness of antenatal education, this research endeavors to inform and refine public health policies and practices, aiming to enhance the well-being of mothers and their newborns across diverse settings.

**Aim and Objectives**

The aim of this study is to investigate the effects of antenatal education on neonatal health outcomes and maternal satisfaction. Specifically, it seeks to compare the outcomes between expectant mothers who participated in antenatal education programs (Group A) and those who did not (Group B), to ascertain the tangible benefits of such educational interventions during pregnancy.

Assess the Impact of Antenatal Education on Neonatal Health: This involves evaluating the influence of antenatal education on various neonatal outcomes, including birth weight, Apgar scores at 5 minutes, the incidence of preterm births, NICU admissions, and the incidence of respiratory distress syndrome. The objective is to compare these outcomes between newborns of mothers who attended antenatal education programs (Group A) and those who did not (Group B).

Evaluate the Effect of Antenatal Education on Maternal Outcomes: This objective focuses on determining how antenatal education impacts maternal outcomes. It includes comparing breastfeeding initiation within the first hour of birth, maternal satisfaction levels, and the duration of postnatal hospital stays between Group A and Group B.

Identify the Relationship Between Antenatal Education and Early Parenting Challenges: Investigate whether antenatal education prepares parents better for the challenges of early parenting, including managing newborn care and adjusting to new family dynamics, by analyzing the self-reported preparedness and confidence of mothers in both groups.

**Develop Recommendations for Integrating Antenatal Education into Prenatal Care:** Based on the study's findings, provide evidence-based recommendations for healthcare policymakers and practitioners on how antenatal education programs can be enhanced or better integrated into standard prenatal care practices to improve neonatal health outcomes and maternal satisfaction.

**MATERIALS AND METHODS**

**Study Design:** This comparative observational study was conducted to assess the impact of antenatal education programs on neonatal outcomes and maternal satisfaction.

**Study Period:** The research was carried out from January 2023 to December 2023.

**Place of Study:** The study was conducted at LBDMM Medical College, located in Korba, Chhattisgarh, India.

**Participants:** A total of 100 expectant mothers were recruited for the study. Participants were divided into two groups based on their participation in antenatal education programs: Group A (n=50) attended antenatal education programs, and Group B (n=50) did not participate in any antenatal education program.

**Inclusion Criteria**

- Expectant mothers aged 18 years and above.
- Singleton pregnancy.
- No known pre-existing major medical or obstetric complications at the time of enrollment.

**Exclusion Criteria**

- Mothers with known fetal anomalies.
- High-risk pregnancies as determined by medical history or clinical examination.

**Data Collection:** Data were collected through structured interviews and medical record reviews. Information on neonatal outcomes (birth weight, Apgar score at 5 minutes, incidence of preterm birth, NICU admissions, incidence of respiratory distress syndrome) and maternal outcomes (breastfeeding initiation within the first hour of birth, maternal satisfaction measured on a scale of 1-10, and postnatal hospital stay duration) was gathered.

**Antenatal Education Program:** The antenatal education program provided to Group A covered topics such as labor and delivery, pain relief options, breastfeeding techniques, newborn care, and postpartum recovery. The program consisted of weekly sessions over a period of three months, led by qualified healthcare professionals, including obstetricians, pediatricians, and nurses.

**Statistical Analysis:** Data analysis was conducted using statistical software. Continuous variables were expressed as means and standard deviations (SD),
while categorical variables were expressed in percentages. The comparison between Group A and Group B was performed using independent t-tests for continuous variables and Chi-square tests for categorical variables. A p-value of less than 0.05 was considered statistically significant.

**Ethical Considerations:** The study protocol was reviewed and approved by the Institutional Ethics Committee of LBDMM Medical College. Informed consent was obtained from all participants prior to enrollment in the study. Confidentiality and anonymity of the participants were maintained throughout the research process.

**RESULTS**

This observational study aimed to assess the impact of antenatal education programs on neonatal outcomes and maternal satisfaction, involving a total of 100 participants divided equally into two groups: those who attended antenatal education (Group A) and those who did not (Group B).

**Sample Characteristics**
The sample consisted of 100 participants, with 50 in Group A (attended antenatal education) and 50 in Group B (did not attend antenatal education), ensuring a balanced comparison between the two groups. Detailed characteristics of the study sample are provided in Table No:1.

**Health Outcomes**
Significant differences were observed between the two groups in several key neonatal health outcomes. Babies born to mothers in Group A had a higher average birth weight (3400 grams, SD = 450) compared to those in Group B (3200 grams, SD = 500), with statistical significance (p < 0.05). Furthermore, a higher percentage of newborns in Group A achieved an Apgar score of 7 or above at 5 minutes post-birth (90%) compared to Group B (76%), again with statistical significance (p < 0.05). Rates of preterm birth and NICU admissions were significantly lower in Group A (6% and 4%, respectively) than in Group B (14% and 12%, respectively), with all differences reaching statistical significance (p < 0.05). The incidence of respiratory distress syndrome was also lower in Group A (2%) compared to Group B (10%), with this difference being statistically significant (p < 0.05). These health outcomes are summarized in Table No:2.

**Maternal and Neonatal Care Outcomes**
In terms of maternal and neonatal care outcomes, there were notable differences between the groups. A significantly higher percentage of mothers in Group A (88%) initiated breastfeeding within the first hour after birth compared to Group B (68%), with this difference being statistically significant (p < 0.01). Maternal satisfaction, measured on a scale of 1-10, was also higher in Group A (average score = 8.5, SD = 1.2) than in Group B (average score = 6.9, SD = 1.5), with statistical significance (p < 0.01). Additionally, the average postnatal hospital stay duration was shorter for Group A (2.5 days, SD = 0.8) compared to Group B (3.4 days, SD = 1.1), with this difference being statistically significant (p < 0.01). These outcomes are detailed in Table No:3.

![Figure 1: Comparison of Neonatal Health Outcomes](image1)

![Table 2: Comparison of Maternal and Neonatal Care Outcomes](image2)

<table>
<thead>
<tr>
<th>Table 1: Sample Characteristics</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total participants</td>
<td>100</td>
</tr>
<tr>
<td>Group A (Attended antenatal education)</td>
<td>50</td>
</tr>
<tr>
<td>Group B (Did not attend antenatal education)</td>
<td>50</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table 2: Major Findings: Health Outcomes</th>
<th>Group A</th>
<th>Group B</th>
<th>Statistical Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth Weight</td>
<td>3400 grams (SD = 450)</td>
<td>3200 grams (SD = 500)</td>
<td>p &lt; 0.05</td>
</tr>
<tr>
<td>Apgar Score at 5 Minutes</td>
<td>90% scores ≥ 7</td>
<td>76% scores ≥ 7</td>
<td>p &lt; 0.05</td>
</tr>
<tr>
<td>Incidence of Preterm Birth</td>
<td>6%</td>
<td>14%</td>
<td>p &lt; 0.05</td>
</tr>
<tr>
<td>NICU Admissions</td>
<td>4%</td>
<td>12%</td>
<td>p &lt; 0.05</td>
</tr>
<tr>
<td>Incidence of Respiratory Distress Syndrome</td>
<td>2%</td>
<td>10%</td>
<td>p &lt; 0.05</td>
</tr>
</tbody>
</table>
The findings from this study underscore the significant impact of antenatal education on both neonatal outcomes and maternal satisfaction. The observed benefits, including higher birth weights, improved Apgar scores, reduced incidence of preterm births, fewer NICU admissions, greater rates of breastfeeding initiation within the first hour of birth, higher maternal satisfaction scores, and shorter postnatal hospital stays, highlight the multifaceted advantages of such educational interventions. These results align with existing literature that advocates for the inclusion of antenatal education as a standard component of prenatal care, underscoring its role in fostering positive health outcomes for both mothers and newborns.

Enhancing Neonatal Health
The association between antenatal education and improved neonatal outcomes, such as higher birth weights and better Apgar scores, may be attributed to several factors. Antenatal education often emphasizes the importance of nutrition, exercise, and avoidance of harmful substances during pregnancy, which can directly influence fetal health and development. Furthermore, the education on labor and delivery provided in these programs may prepare expectant mothers to manage stress and make informed decisions during childbirth, potentially reducing the risk of complications that could affect neonatal health.

Reducing Preterm Births and NICU Admissions
The reduction in preterm births and NICU admissions among the group that participated in antenatal education programs is particularly noteworthy. These outcomes suggest that antenatal education can play a critical role in preventing early labor and identifying risk factors for preterm birth, thereby enabling timely intervention. Moreover, the knowledge and skills imparted through these programs may empower women to better manage their health during pregnancy, leading to a decrease in situations necessitating NICU care.

Promoting Breastfeeding and Enhancing Maternal Satisfaction
The higher rates of breastfeeding initiation observed in this study are consistent with previous research indicating that antenatal education can effectively promote breastfeeding practices. By providing practical breastfeeding training and addressing common concerns and misconceptions, antenatal programs can significantly impact early breastfeeding success. Additionally, the improvement in maternal satisfaction scores among participants of antenatal education reflects the broader benefits of these programs in enhancing the overall childbirth and postnatal experience. This increase in satisfaction could stem from the empowerment and confidence gained through education, leading to more positive perceptions of the childbirth process and early motherhood.

Limitations and Future Research
While the findings of this study are compelling, it is important to acknowledge its limitations, including itsobservational design and the potential for confounding factors that were not controlled for. Future research could benefit from randomized controlled trials to establish causality more firmly and explore the specific components of antenatal education that are most effective. Additionally, expanding the scope of research to include diverse populations and settings would enhance the generalizability of the results.

CONCLUSION
This study contributes valuable information into the positive impacts of antenatal education on neonatal health and maternal satisfaction. By highlighting the broad range of benefits associated with such programs, the findings reinforce the need for the integration of comprehensive antenatal education into standard prenatal care. As healthcare providers and policymakers strive to improve maternal and neonatal health outcomes, antenatal education should be considered a key component of prenatal care strategies, warranting further investment and research in this area.

REFERENCES


