

EFFECT OF HEALTH COUNSELING ON THE VITALITY OF PREGNANT WOMEN

Fatemeh Shobeiri¹, Somaieh Moradi Haghgoo², Arezoo Shayan³, Younes Mohammadi⁴

^{1,3} Mother and Child Care Research Center, Hamadan University of Medical Sciences, Hamadan - Iran.

² Students Research Center, Hamadan University of Medical Sciences, Hamadan - Iran.

⁴ Modeling of Non communicable Diseases Research Center, School of Public Health, Hamadan University of Medical Sciences, Hamadan - Iran.

Address for correspondence:

Somaieh Moradi Haghgoo

Students Research Center, Hamadan University of Medical Sciences, Hamadan - Iran.

Email: s.moradi@gmail.com

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ABSTRACT

Objective: To investigate the effect of health counseling on the vitality of pregnant women.

Methodology: This quasi-experimental study was performed on 100 nulliparous pregnant women who presented to comprehensive health centers for prenatal care in Hamadan, Iran in 2018. They were randomly divided into case and control groups. The data gathering tool included Demographic Information Questionnaire and Vitality Scale Questionnaire (VSQ, Deci and Ryan). The counseling program consisted of three sessions, held once a week and were followed up. The control group received only routine care during the study period. The data were analyzed by SPSS version 19.

Results: Total score of vitality before intervention in the case group was 24.1 ± 1.4 and increased to 37.6 ± 4.6 after the intervention which resulted in a statistically significant difference between the 02 groups ($p < 0.001$).

Conclusion: Health counseling was found to be significantly helpful in promotion of women's vitality during pregnancy and improvement of psychosocial well being.

Key Words: Health counseling, Pregnant women, Vitality

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INTRODUCTION

Pregnancy hormones have psychological effects which cause mood changes such as anxiety, depression, irritability and decreased social interaction¹⁻³. Pre-natal stressors can cause low birth weight or preterm birth. Mental problems during this period have been associated with behaviors such as changes in eating habits, sleep, exercise, substance abuse and decreased attention to prenatal care⁴⁻⁶. Therefore, serious and early intervention in facing this period is necessary⁴. Liveliness means a kind of special psychological experience in which people experience a sense of vitality and happiness in their lives. The origin of the term 'vitality' refers to the very concept of life itself and accordingly, it is defined as a vital force with the foundation of life⁷. Bostic⁸ introduced liveliness as inner feeling of energy. He defined vitality as energy originating from the self. This energy originates from internal sources and not from the threat of individuals in the environment, in other words, vitality is a feeling of well being in which there is not any feelings of anxiety and compulsion to do so⁸⁻¹³. Vitality is associated with high self-esteem and being happy while low vitality is associated with helplessness and other negative emotions¹⁴⁻¹⁶. Consultation is an in-

teractive process between the counsellor and the client that leads to changes in behavior and is an important tool in coping with stress and fear of pregnancy and childbirth¹⁷⁻¹⁹. Therefore, the purpose of this study was to investigate the effect of health counseling on the vitality of nulliparous pregnant women in Hamadan city, Iran.

METHODOLOGY

This was a quasi-experimental study that was conducted on 100 nulliparous pregnant women with gestational age of 20-28 weeks who were referred to Hamadan's comprehensive urban health centers for prenatal care. The women were randomly placed into two groups; cases ($n=50$) and controls ($n = 50$).

The inclusion criteria were subjects aged 18-35 years, nulliparous women, gestational age between 20-28 weeks, normal singleton pregnancy with head view, low risk pregnancy and no history of drug abuse and no history of pre-existing anxiety and depression. Exclusion criteria were unwillingness to participate in the study and any emergency intervention during pregnancy due to maternal or fetal reasons.

To determine the sample size, Abbaszadeh et al² was used as a source of information and sample calculating formula was employed to determine the difference between the two groups. The minimum significant difference in terms of study goals was considered as 0.7.

The data collection tool was Demographic Information Questionnaire and Vitality Scale Questionnaire (VSQ, Deci and Ryan). The score that a person gets on this scale is between 7 to 49. This scale was translated by Rezaei et al in 2003 and its face and content validity were confirmed by the professors of clinical psychology and its coefficient of reliability was 85.0¹⁵. For the test group, 3 health counseling sessions were held weekly for one hour; and control group's subjects received only routine prenatal care. The vitality questionnaire was applied before and after the intervention. Data analysis were done using SPSS-19. The central indexes and dis-

person tests were used to describe variables and paired t-test and independent t-test were applied to calculate the difference between the two groups. The statistical significance was set at p value of <0.05.

RESULTS

The mean age of the subjects was 25.4 ±9.3 years in the experimental group and 25.8 ±4.4 years in the control group; thus the two groups were homogeneous in terms of age (p =0.670). Regarding education, 64% of women in the experimental group and 74% of the women in the control group had a diploma education, which did not show a significant difference between the two groups (p =0.392) as shown in Table 1.

The mean and standard deviation of total score of vitality before intervention was 24.1 ±1.4 in the cases

Table 1: Baseline features and clinical information of the research population

Characteristics		Cases Group n=50 Number (Percent)	Control Group n=50 Number (Percent)	P Value
Education	Elementary	3 (6.0)	2 (4.0)	0.392
	Diploma	32 (64.0)	37 (74.0)	
	Academic	15 (30.0)	11 (22.0)	
Mother's Job	Employed	16 (32.0)	10 (20.0)	0.926
	Housewife	34 (68.0)	40 (80.0)	
Husband's Job	Employed	49 (98.0)	50 (100)	0.154
	Unemployed	1 (2.0)	0 (0)	
History of Infertility	Yes	4 (8.0)	2 (4.0)	0.670
	No	46 (92.0)	48 (96.0)	
Type of Residence	Owner	11 (22.0)	15 (30.0)	0.737
	Rental	39 (78.0)	35 (70.0)	

Table 2: : Vitality score in the cases and control group before and after intervention

Variable	Cases group (M± SD) (n=50)		Control group (M± SD) (n=50)		P Value
	Before	After	Before	After	
Total Vitality Score	24.1 (1.4)	37.6 (4.6)	26.6 (4.2)	25.5 (4.0)	<0.001
Paired t-test	t=14.15 p <0.001		t=0.37 p =0.712		

group and after intervention it was 37.6 ± 4.6 , which is statistically significant ($p < 0.001$) as shown in Table 2. Unlike the cases group, the mean and standard deviation of total vitality score in the control group did not increase or decrease.

DISCUSSION

Pregnancy is considered to be the most sensitive stage in the life of women. The results of this study showed that health counseling improved the women's vitality during pregnancy and improved their mental-psychological status. In other studies, positive emotions in late pregnancy have preventive role in postpartum depression and reduced risk of preterm delivery²⁰. Positive emotions play a very important role in improving the mental health of pregnant women and recognizing effective interventions in this field can enhance the mental and emotional health of women.

Promoting maternal mental health has an undeniable role in public health, as studies in other countries show that appropriate interventions can have lasting effects on the mood and attitude of the mother, the baby and even other family members²¹.

The results of the present study showed that there was a significant difference between the subjects in the case and control groups in terms of vitality component. The scores of the vitality component after intervention in the cases group showed a significant increase compared to the control group. Psychological counseling and education will improve mood and will result in increased vitality and happiness. Health promotion training increases individuals' knowledge and awareness and changes the undesirable attitude and behaviors of the person. The results of this study are consistent with the results of other studies²¹⁻²². In their research, Sherwin et al²³ showed that in a process of hope-therapy based on hope and the extent of agent thinking and factor-thinking, the meaning of life, self-esteem and vitality increased and anxiety and depression were reduced.

Research has shown that lifestyles and human behaviors are among the important causes of many diseases. It has been shown that there is a clear correlation between lifestyle factors and chronic diseases²⁴. Therefore, promoting health behaviors is one of the best ways that people can maintain to improve their health²⁵. When a person becomes aware of the positive effects of healthy behaviors during their training and actually practices them and understands their role in bringing about a refreshing and rejuvenating change in life, this can pave the way for healthy behaviors in a person, which leads to positive emotions such as vitality, pleasure and social adjustment²¹.

CONCLUSION

Health counseling was found to be significantly helpful in promotion of women's vitality during pregnancy and improvement of psychosocial well being. The present study highlighted the importance of easy and accessible health interventions that can be applied without complications and can lead to increased vitality of pregnant women.

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CONTRIBUTORS

FS conceived the idea, planned the study and drafted the manuscript. SMH, AS and YM helped acquisition of data, did statistical analysis, editing and final approval of manuscript. All authors contributed significantly to the submitted manuscript.