



Journal of Global Pharma Technology

Available Online at: www.jgpt.co.in

RESEARCH ARTICLE

Assessment of Pregnancy Complications among Internally Displaced Women in Karbala Governorate

Ridha M. lefta

Community Health Nursing Department/ College of Nursing - University of AL-Ameed/Iraq.

Abstract

Background: Pregnant women face increased risks of complications as they exposure to displaced conflict zones with damaged and destroyed health facilities in out conflict zones. Objectives: To determine the pregnancy complications among displaced women, and to find out the relationship between dietary habits for displaced pregnancy and complication of pregnancy. Methodology: A descriptive analytic study has been conducted on non-probability purposive sample of (200) displaced pregnant women select AL-Hussein Teaching Hospital in Karbala governorate. This study has been conducted during the period of 1st December until (30)th December 2017. A questionnaire is used as a tool of data collection to fulfill the study. A content validity, which is carried out through 13 panel of experts. Validity is determined by a panel of experts while the reliability utilization its split half. A descriptive and inferential statistics are used to analyze the data. Results: This table shows that the study result for demographic data the majority of the study samples 21-25 years old are 32% and the most the sample related level of education have secondary school 38% and housewife are 93% and resident in urban. The study results indicate that the economic status sufficient to some extend and living at camp are 53%. This table depict that the complication among pregnancy displaced that indicate majority of pregnancy suffer from anemia is 49%. This table depict that the there is a non-significant between complication among pregnancy displace women and diatery habit domain at p. value more than 0.05. While there is a significant between complication pregnancy displaced and (dental problems and prenatal vitamin) at p. value less than 0.05, also the correlation between fregin food and complication pregnancy displaced women is high significant at p. value less than 0.01. Conclusion: Anemia is the major pregnancy complication among IDPs women. Recommendations: A special education programs focused on improvement the women knowledge and practices about the prevention and management of pregnancy complications.

Keywords: Internally displacement, Pregnancy complications, Anemia, Prenatal vitamins, Dental problems.

Introduction

In Iraq, the displacement is the heightened threat to the health and lives of pregnant women who may be cut off from life-saving emergency obstetric care. Among the 200,000 people are displaced during the initial weeks of military operations in Mosul, an estimated 46,000 are pregnancy women and girls of reproductive age, including about 8,000 who are pregnant or about to give birth. Life-saving health services must be maintained and accessible to all who require them.

This military operation resulted effect upon life of pregnancy that lead to suffers from complications of pregnancy such as bleeding and anaemia and others due to lack in provide services as food and health care services [1]. The complications of pregnancy may be threating women live or die in a crisis often depends on whether they can access sexual and reproductive services, which too often take a back seat to other urgent needs, like food and shelter. This includes pregnant women, who may face life-threatening potentially childbirth complications, as well as lactating women, caring for new-borns throughout the chaos decrease health services psychological and physiological problems (IPID).

Pregnant women face increased risks of complications as they exposure to displace in conflict zones with damaged and destroyed health facilities. Many of them have no access to skilled birth attendance. And this vulnerability is further compounded by the fact that a large number likely to face

complications and death during pregnancy [2]. Pregnant mothers and new-born babies are particularly at risk. Women in conflict areas experience worse pregnancy outcomes, including increased fetal mortalit, low birth weight, premature labor, antenatal complications and an increase in puerperal infections compared to pre-conflict levels. Easily preventable maternal and neonatal deaths were among the leading causes of death for Afghan refugees in Pakistan.

In 2003 study found strong associations between conflicts and maternal health: 16 out of the 25 countries with the worst status of mothers' wellbeing were experiencing conflict [3] The most common causes of maternal mortality due to complication among pregnancy women displaced and special from bleeding due to war and military operation I conflict zones that lead to suffer complication is bleeding.

Also another complication such as hyperemesis is a pregnancy complication that is common severe nausea, vomiting, weight loss, and possibly dehydration. Signs and symptoms may also include vomiting several times a day and feeling faint. Hyperemesis is considering more severe than morning sickness.

Often symptoms get better after the 20th week of pregnancy but may last the entire pregnancy duration. This complication occurred result to deficiency of health care services and psychological disorder and physiological and change in food in military operation change among pregnancy displaced women [4].

Levels of haemoglobin are lower in the third considered once from common complications of pregnancy. According to the United Nations (UN) estimates, approximately more half of pregnant displaced women suffer from anemia in conflict zones that occurred due to decrease or malnutrition and provide the treatment which prevent anemia, which can be used by increasing iron containing foods, oral iron tablets.

pregnancy-related medical Most complications appear to resolve at delivery or shortly thereafter. Common examples are preterm labour, placental abruption, and preeclampsia, gestational diabetes. Women who developed such complications known to be at increased risk of developing similar complications in future pregnancies. It has recently become evident that these women are at an increased risk of long-term medical complications [5].

Methodology

A descriptive quantitative study carried out in order to achieve the study objectives that determine include to the pregnancy complications among displaced women and to find out the relationship between dietary displaced pregnancy habit for complication of pregnancy. The study begun from December 1 to December 30, 2017. Study Sample a non-probability Purposive sample of 200 patients who seeking a medical care at Al-Hussein Teaching Hospital. Several statements of the questionnaire modified and develop to increase its validity and to be more appropriate for achieving the aims of the present study.

The study instrument consisted of (3) parts as the following: Demographic data, past History of reproductive, and dietary habits that consist of (7) items. The collected data consist of demographic characteristic were obtained through a direct interview with each displaced pregnancy women suffer from complications.

The data collection process has performed from (December 1 to December 30, 2017. An approximately (15-20) minutes were spent with each responded to complete the filling of the questionnaire format. The statistically analyzed by two methods: A descriptive statistical method (frequencies and percentages); inferential statistical method to find the correlation.

Result of the Study

Table 1: Distribution of the study sample according to socio demographic characteristic (n=200)

Demographic data	Rating	Frequency	Percentage
	20 years & less	49	24
Age /Years	21-25 years	64	32
	26-30 years	47	24
	31-35 years	32	16
	more than 35	8	4
Level of education	illiterate	26	13

	primary school	56	28
	secondary school graduate	76	38
	institute	30	15
	baccalaureate	12	6
Occupation	employee	14	7
	housewife	186	93
D 11 /	urban	156	78
Resident	rural	44	22
Economic status	sufficient	18	9
	sufficient to some extend	94	47
	insufficient	88	44
Living	camp	106	53
	house	82	41
	with some relatives	12	6

This table shows that the study result for demographic data the majority of the study samples 21-25 years old are 32% and the most the sample related level of education have secondary school 38% and housewife are 93% and resident in urban. The study results indicate that the economic status sufficient to some extend and living at camp are 53%

Table 2: Distribution of the study sample according to reproductive characteristic history (n=200)

Reproductive characteristic	Rating	F.	Percent
	None	102	51
	1-2	70	35
Gravida	3-4	28	14
	None	164	82
number of abortion	1-2	24	12
	3-4	12	6
	None	106	53
number of live children	1-2	38	19
	3-4	56	28
type of deliver	None	102	51
	normal	72	36
	caesarean section	26	13
interval among last pregnancy	None	102	51
	under 2 year	68	34
	2 years &above	30	15

This table shows that the study results for reproductive history that includes a gravida is none 51% and regarding number of abortion and number of live children are none 82%, 53% respectively. The study results that the concerned with the interval among last pregnancy is none 51%

Table 3: Distribution of the study sample according to pregnancy complications (n=200)

	Rating	F.	Percent
Complication During	Bleeding	58	29
This Pregnancy	Anemia	98	49
	Hyperemesis Gravid	44	22

This table depict that the complication among pregnancy displaced that indicate majority of pregnancy suffer from anemia is 49%

Table 4: Distribution of the study sample according to dietary habits (n=200)

Dietary habite	Rating	F	Percent
morning sickness	No	108	54
morning sickness	Yes	92	46
	Coffee	2	1
	Juice	14	7
Type of fluid	Tea	72	36
	Water	98	49
	Milk	14	7
Foreign food	Clay	28	14
	Ashes	2	1
	Snow	42	21
	Other	128	64
dental problem	No	130	65
dental problem	Yes	70	35
T-1-i	No	134	67
Taking prenatal vitamin	Yes	66	33
Number of meal	1 meal	8	4
	2 meal	100	50
	3 meal	80	40
	above 3 meal	12	6
N 1 C 1	1 per day	126	63
Number of snack	2 per day	66	33
	3 per day	8	4

This table indicate the study results for about displace women of pregnancy the not suffer from morning sickness 54%. Also regarding types of fluid, the study results indicate most of the study sample 49% are intake of the water and related to foreign food the most the pregnancy displaced the dietary intake is other types of forging food 64%. Regarded to dental problems the study results depict 65% is no, however, most the study sample suffer from deficiency from all types of vitamins 67%. The study results indicate the majority of the study sample number of meals is two 50% and most them one per day related to number of snack 63%

Table 5: Summery statistics according to correlation between complication during pregnancy and dietary habits

Main domains	Chisq Value	Df	Correlation significant
Morning Sickness	1.222	2	0.543 NS
Foreign Food	26.673	6	0.002 HS
Dental Problems	8.764	2	0.046 S
Prenatal Vitamin	6.815	2	0.033 S
Number of Male Eating	6.313	6	0.389 NS
Snack Food	7.54	2	0.56 NS

This table depict that the there is a non-significant between complication among pregnancy displace women and dietary habit domain at p. value more than 0.05. While there is a significant between complication pregnancy displaced and (dental problems and prenatal vitamin) at p. value less than 0.05, also the correlation between foreign food and complication pregnancy displaced women is high significant at p. value less than 0.01

Discussion

The finding ofthe study regarding demographic data indicates the majority of the study samples 21-25 years old. This finding consistence with Rashash and others [6] who found in his study that the majority of the study subjects age were between (21-25) years old. In addition, the most of the study sample related to level of education have graduated from secondary schools, housewife and urban residents. These results come with finding by Al Asadi and others [7].

study results indicate that the Their economic statuses among displacement pregnant are sufficient to some extend and living at camp. This result agrees with Shaikh and others [8] in their study they mentioned that the majority of economic status of study group are barely sufficient and majority of responses resident in camp. The finding of the study for reproductive among displacement pregnancy concerning a gravida is none and haven't abortion in past history.

This results supported by Miranda, et al. 2012 [9] in their study they find that the study sample have no children. The study results indicate that the interval among last pregnancy is none experience in past. Alijahan and others [10] support this finding in their study they find that the highest percentage of study sample have no pregnancy intervals. Concerned with that the complications among pregnant the finding of the study indicate that the majority of pregnancy suffer from anemia. These finding

come along with Teimouri and others [11], they founds that the majority of the study sample suffer from anemia. Other study its agree with study result such as Nigeen and other [12], in their study they mentioned that most of study sample had complication during present pregnancy such low birth weight, bleeding, and anemia as high percentage among complications.

Concerned with the dietary habits the study finding indicate most ofpregnancy displacement are not suffer from morning sickness and regarding types of fluid, most of the study sample are not take any kind of fluid except of the water. Related to foreign food the most of the pregnancy displaced are take of forging food other than the clay, snow, ashes. Regarded to dental problems the study results indicate the majority of the study samples have no dental problem for pregnancy displacement.

However, most of the study samples don't take vitamins. The study finding indicate the majority of the study sample regarding the number of meals are two and most them related to number of snack is one per day. This results support by Qasim.s. And AL-Ageely [13] their study results indicate that the displaced pregnant do not take antenatal vitamins.

The finding of the study regarding a correlation between complications of displacement pregnancy and dietary habits domain among pregnancy displace show that there is a non-significant relationship between complications among pregnancy

displace women and dietary habit domain. This results support by Jackline [14]. The study result indicate that the there is a significant between pregnancies displaced complications and (dental problems and prenatal vitamin) also the correlation foreign food between and pregnancy complication are high significant correlation. This results come along with sedate and others [15], in their studies which indicate the correlation between complication and intake of vitamins and iron supplements.

Conclusion

The studies conclude the following:

- Anemia is the major pregnancy complication among IDPs women.
- IDPs women facing a variety degree of pregnancy and health related problems **References**
- Riyadh L, Nesreen A, Saba D, Gilbert B (2016) Needs of Internally Displaced Women and Children in Baghdad, Karbala, and Kirkuk, Iraq, research article, 12-14.
- 2. International Organization for Migration (IOM) (2015) Iraq IDP crisis IOM Displacement Tracking Matrix (DTM) Dashboard.
- 3. Matthew B, Greenough T, Patrick V, Phuong P (2015) An assessment of antenatal care among Syrian refugees in Lebanon, 2-4.
- 4. Onishi N (2013) Lebanon worries that housing will make syrian refugees stay. New York. [http://www.nytimes.com/2013/12/11/world/middleeast/lebanon-worries-that-housing-will-make-syrian-refugees-stay.html?pagewanted=all].
- 5. Jane M (2017) Long-Term Effects of Pregnancy Complications on Maternal Health: A Review, journal of clinical medecin, 12.
- 6. Rashash Doaa (2015) Screening iron deficiency anemia among postpartum women attending primary health care center at AlNasiriya city.
- 7. Al Asadi K (2013) Risk Factors Contributed to Preterm Birth. Kufa Journal for Nursing Sciences, 3 (3): 3.

such as morning sickness, foreign food and dental problems. Moreover, these problems increase the incidence of pregnancy complications.

Recommendations

The study recommends the following:

- A special education programs focused on improvement the women knowledge and practices about the prevention and management of pregnancy complications.
- Further studies should be conduct to determine the factors that affect the women compliance to a healthy recommendation during pregnancy. In addition, the effect of the pregnancy complications on the fetus should be determined.
- 8. Shaikh J, He X, Cui H, Zhang C, Zhang H, Dang Y, Bai H (2014) Passive smoking and preterm birth in urban China. American journal of epidemiology, 180(1): 94-102.
- 9. Miranda A, Pinto V, Szwarcwald C, Golub E (2012) Prevalence and correlates of preterm labor among young parturient women attending public hospitals in Brazil. Revista Panamericana de Salud Pública, 32(5): 330-334.
- 10. Alijahan R, Hazrati S, Mirzarahimi M, Pourfarzi F, Hadi P (2014) Prevalence and risk factors associated with preterm birth in Ardabil, Iran. Iranian journal of reproductive medicine, 12(1): 47-56.
- 11. Teimouri Z, Dolatian M, Shishehgar S, Ajami M, Majd H (2015) A Comparison between Dietary Habits for Pregnant Women with Preterm and Term Delivery in Khorasan, Iran. Open Journal of Nursing, 5(09): 790-796.
- 12. Nigeen W, Bhat AS, Gulzar K, Taing S (2015) Correlation of bacterial vaginosis with preterm labour: a case control study. International Journal of Reproduction, Contraception, Obstetrics and Gynecology, 4(6): 1868-1874.
- 13. Qasim S, AL-Ageely (2017) Assessment of Nutritional Status for Displaced Pregnant Women, International Journal of Scientific and Research Publications, 7 (12): 2-3.

- 14. Sadat Z, Bazarganipour F, Sehat Z, Abedzadeh-Kalarhoudi M, Saberi F, Abbaszadeh F, Karimian Z (2012) The Relationship Between Maternal Passive Smoking During Pregnancy and Preterm Delivery. Nursing and Midwifery Studies, 1: 1.
- 15. Jackline M (2016) Assessment Of The Factors Influencing Birth Preparedness And Complication Readiness Among Pregnant Women: A Case Of Selected Health Care Facilities In Eldoret, International Journal of Nursing, Midwife and Health Related Cases, 2 (3): 47-61.