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Full Length Research Paper

Assessing the Knowledge and Practice Regarding Newborn Care among Postnatal Mother in Nirmala Hospital Suryapet, Telangana, India

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Abstract

This study was undertaken to assess the knowledge and practice regarding newborn care among postnatal mother in Nirmala Hospital Suryapet. A pre – experimental one group pretest – posttest design was adopted for this study. The study was conducted in nirmala Hospital, suryapet telugana, India. The investigator selected 50 postnatal mothers who fulfilled the inclusion criteria were selected by using simple random sampling technique. Data was collected regarding demographic variable, knowledge and practice *of the postnatal mothers. The investigator assessed the level of knowledge and practice of the postnatal mothers by using structured questionnaire and modified three point Likert Scale and by using checklist through one to one teaching by lecture, demonstration, video clippings and verbalization. Structured teaching programme was conducted on the same day on group wise each group consists of 20 members. Data collection was done in Telugu and English the questionnaire was distributed to each first year nursing students. At the end of the teaching the doubts were cleared. Then 10 minutes was allotted for discussion. The analysis finding indicates clearly that 90% of mothers had adequate knowledge and 89% of them had good practice regarding newborn care. A well planned structured teaching programme given to the same group. The effectiveness of programme showed high level of significant at p<0.001 level. It showed that structured teaching programme was an effective method to improve the knowledge and practice there by the prevention of infection and improve the of newborn care. The study concluded that, postnatal mother's knowledge and practice regarding prevention infection and improve newborn care was adequate thus structured education helps to enhance the knowledge.*

Keywords: *Knowledge, practice, Newborn care, postnatal mothers.*

Introduction

Today's children are tomorrow's nation, being with children is every interesting and caring is even more challenging. India has one billion as its population and stands second in the world: out of this 40% constitute of children. Health is birth right of each individual born in the world. The concept of health is a basic right in social justice. A neonate signifies the beginning of life as independent individual who is the future citizen of a nation. Neonate's period is a continuation of fetal growth and development.

World Breastfeed Week, 1998 was observed during August (1-7) it aims to initiate actions to promote, protect and support breast feeding as one of the best investments in the health of the nation. Neonates and infants constitute 2.92% of the total population in India of the 140 Million children born each year in the world. 90% of chances of survival of these newborns have improved in 50% of the last twenty years. In the year 1998, infant mortality rate in Tamil Nadu is 53% whereas in 1990 IMR in India is 70%.

Incidence of High Risk Health Problems, Associated Fatality, and Relative risk of Death in Home Cared Neonates (n = 763).

High – risk health problems	Sick neonates (0-28 days)		Deaths		Relative risk of death
	No.	Incidence (%)	No.	Case fatality (%)	
Congenital anomaly	10	1.3	2	20.0	4.0
Multiple pregnancy	22	2.9	8	36.4	8.4
Birth asphyxia					
Severe	26/570#	4.6	10	38.5	8.0
Indirect	3/193	1.6	2	66.7	13.9
Preterm	75	9.8	25	33.3	15.3
Birth weight<2000g.	74	9.7	27	36.5	19.3
Neonatal sepsis (clinical)	130	17.0	24	18.5	7.3
Only pneumonial	8	1.0	0	-	-
Delayed breastfeeding	71	9.3	8	11.3	2.4
Problems in breastfeeding					
Baby unable to suck	67	8.8	10	14.9	8.0
Both mother and baby had problems	57	7.5	18	31.6	16.8
Total	124	16.3	28	22.6	12.0
Meconium aspiration	4	0.5	4	100.0	21.1
Hyaline membrane disease	4	0.5	4	100.0	21.1
Hypothermia (<95°F)	130	17.0	20	15.4	4.9

Hemorrhage	11	1.4	8	72.7	17.1
Abnormal jaundice	13	1.7	3	23.1	4.7
Neonates with any one of the high risk health problems (95% CI)	**368**	**48.2 (44.7–51.7)**	**38**	**10.3 (7.2-13.4)**	**20.4 (5.0-83.9)**

All India Institute of Public Health (2006) recent studies and surveys are observing a declining trend of routine immunization coverage and fully immunized children in India are reported to be 38%. The study covered 796 children in proportion of their distribution in urban, rural and slum areas. Results evaluation recorded fully immunized children as 72.23%, partially immunized as 22.99% and unimmunized as 4.64%. Only 58.66% children in 93.09%, DPT1/OPV1: 93.97%, DPT2/OPV2: 90.57%, DPT3/OPV3: 85.92% and measles: 76%. No sex-wise difference was noticed in the study. Efforts must be made to strengthen routine immunization programme especially in the underprivileged groups and areas such as slum in cities so that target of universal coverage can be achieved as envisaged at national level.

Indian Council of Medical Research (2003) The present study was conducted to document the breastfeeding problems to know the reasons for starting top feeds in infants less than 6 months of life. The study was conducted using the stratified sampling method. Conditions like sore nipples, mastitis, breast engorgement, breast abscess, maternal illness, inability to suck, breast refusal and not enough milk leading to top feeding were noted. Results out of 420 mothers, 338(80.5%) were practicing only breastfeeding.

Materials and methods

Prior permission was obtained from the Director of Nirmala Hospital, suryapet. The investigators introduced self and explained the purpose of interviewing and each sample was given a separate structured questionnaire schedule. Ethical principles of justice, privacy and anonymity were maintained during and after the data collection. The main objective of evaluating the effectiveness of information pamphlets on knowledge and practice regarding newborn care among postnatal mothers in one group Pre test Post test design was adopted. The study was conducted in Nirmala hospital suryapet, telugana, India. 50 postnatal mothers of Nirmala Hospital suryapet were selected by convenience sampling. After obtaining consent from the participants pretest was administered by using structured questionnaire and modified three point Likert Scale and by using checklist through one to one teaching by lecture, demonstration, video clippings and verbalization. After pretest researcher distributed information booklet on knowledge regarding new born care to participants. Two days later post test was administered to assess the knowledge and practice the collected data were analyzed using descriptive and inferential statistics.

Description of research tool

Tool consists of 2 sections.

Section A: Demographic variable consists of age of mother, number of children in family, education status, type of family, occupation

Section B:

Structured questionnaire that consists of 25 closed ended questions listed under 4 sub-divisions.

1. Knowledge of breastfeeding
2. Knowledge of immunization
3. Knowledge of personal hygiene
4. Knowledge of child safety

Section C:

It consists of structured observation checklist consisting 10 closed ended questions that is divided under 3 sub-divisions.

1. Practice on breastfeeding
2. Practice on personal hygiene
3. Practice on child safety

Scoring procedure

Section B

The total number of knowledge questions was 20. All the questions had four alternatives with one right answer. A score of "one" was given for every correct answer and score of "zero" was given for every wrong answers. The total score was converted into percentage and interpreted as follows,

Adequate knowledge - >75%
Moderate knowledge - 50 – 75%
Inadequate knowledge - <50%

Section C

To interpret the students questionnaire was given to collect information regarding practice on newborn care It consists of 25 questions. The maximum score was 25 and minimum score was zero. To interpret the level of practice the score was classified as,

Poor practice - < 50%
Fair practice - 50 – 75%
Good practice - >75

Results

Table 1: Frequency and percentage distribution of level of knowledge regarding newborn care among postnatal mother

N=50

Level of Knowledge	Inadequate (<50%)		Moderately adequate (50 – 74%)		Adequate (>75%)	
	No.	%	No.	%	No.	%
Knowledge	2	4	2	4	46	92

Table 1 reveals the frequency and percentage of level of knowledge of postnatal mothers regarding newborn care. It reveals that 2(4%) had moderately adequate, 2(4%) had inadequate knowledge and 46(92%) had adequate knowledge.

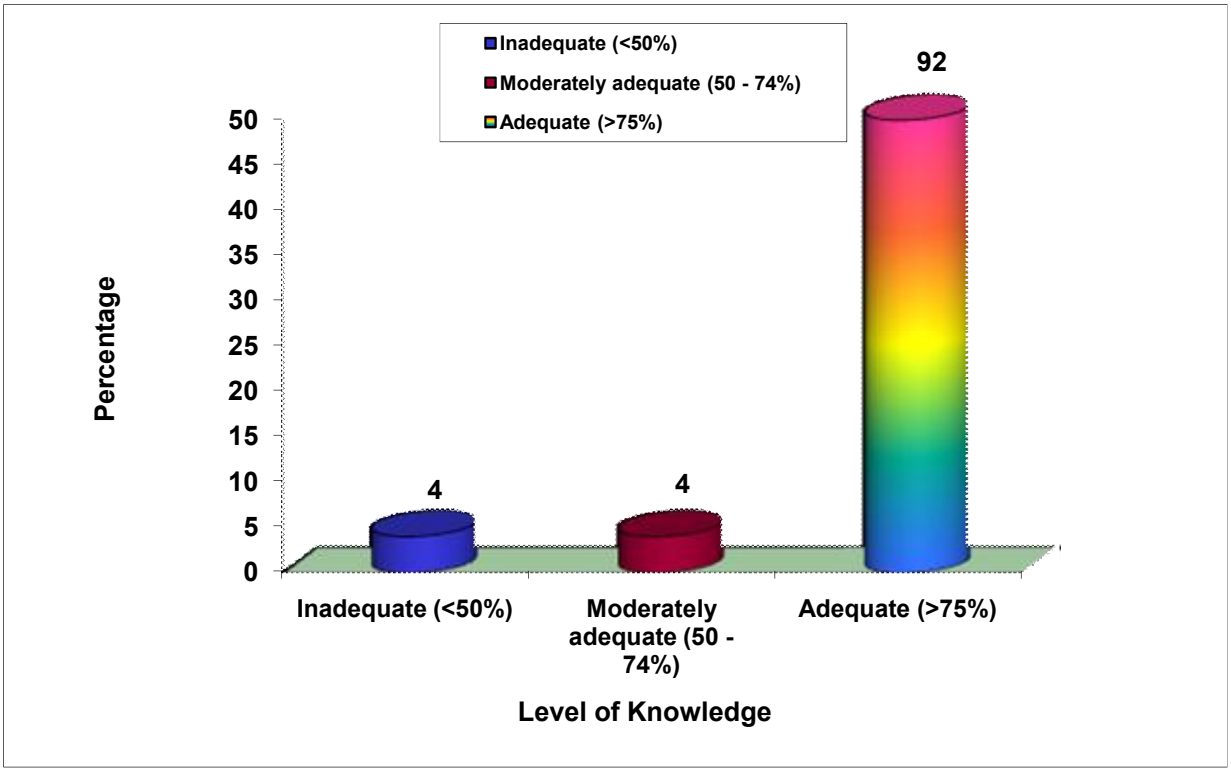

Fig. 1. Percentage of distribution of level of knowledge of newborn care among postnatal mothers

Table 2: Frequency and percentage distribution of level of practice regarding newborn care among postnatal mother

N=50

Level of Practice	Inadequate (<50%)		Moderately adequate (50 – 74%)		Adequate (>75%)	
	No.	%	No.	%	No.	%
Practice	-	-	5	10	45	90

Table 2 reveals the frequency and percentage of level of practice of postnatal mothers regarding newborn care. It reveals that, moderately adequate practice was seen in 10% and adequate level of practice was seen in 90% of postnatal mothers.

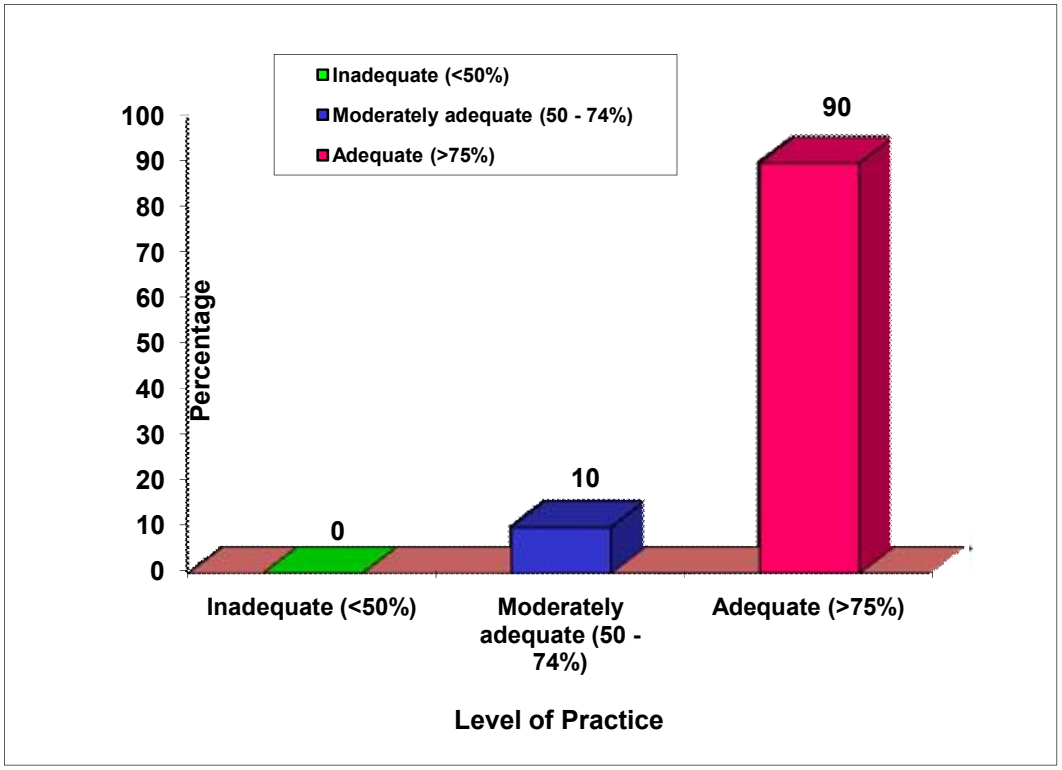

Fig. 2: Percentage distribution of level of practice of new born care among postnatal mothers.

Table 3: Frequency and percentage distribution of post test level of various aspects of knowledge among postpartum mothers.

N=50

Various aspects of Knowledge	Inadequate (<50%)	Moderately adequate (50 – 74%)	Adequate (>75%)
Breastfeeding	4	4	92
Personal Hygiene	10	10	80
Immunization	3	5	92
Safety measures	2	8	90

Table 3 depicts the frequency and percentage distribution of level of various aspects of knowledge among postnatal mothers. The table revealed that 4% of mothers had inadequate knowledge on breastfeeding, 4% had moderate knowledge and 92% had adequate knowledge. On personal hygiene, 10% of mothers had inadequate knowledge, 10% had moderate knowledge and 80% had adequate knowledge. Regarding immunization, 3% of postnatal mothers had inadequate knowledge, 5% of mothers had moderate knowledge and 92% of postnatal mothers had adequate knowledge. On safety measures, 2% of postnatal mothers had inadequate knowledge, 8% of postnatal mothers had moderately adequate knowledge and 90% of postnatal mothers had adequate knowledge.

Table 4 : Mean and standard deviation of knowledge and practice of newborn care among postnatal mothers

S.No.	Domain	Mean	S.D	Correlation Coefficient
1	Knowledge	14.46	5.08	r = 0.9
2	practice	8.36	0.678	

**p<0.05, ***p<0.001*

The mean value for level of knowledge was found to be 14.46 and the standard deviation was found to be 5.08. The mean value for level of practice was found to be8.36 and the standard deviation was found to be 0.678.The co-relation between the level of knowledge and practice was found to be r = 0.9.

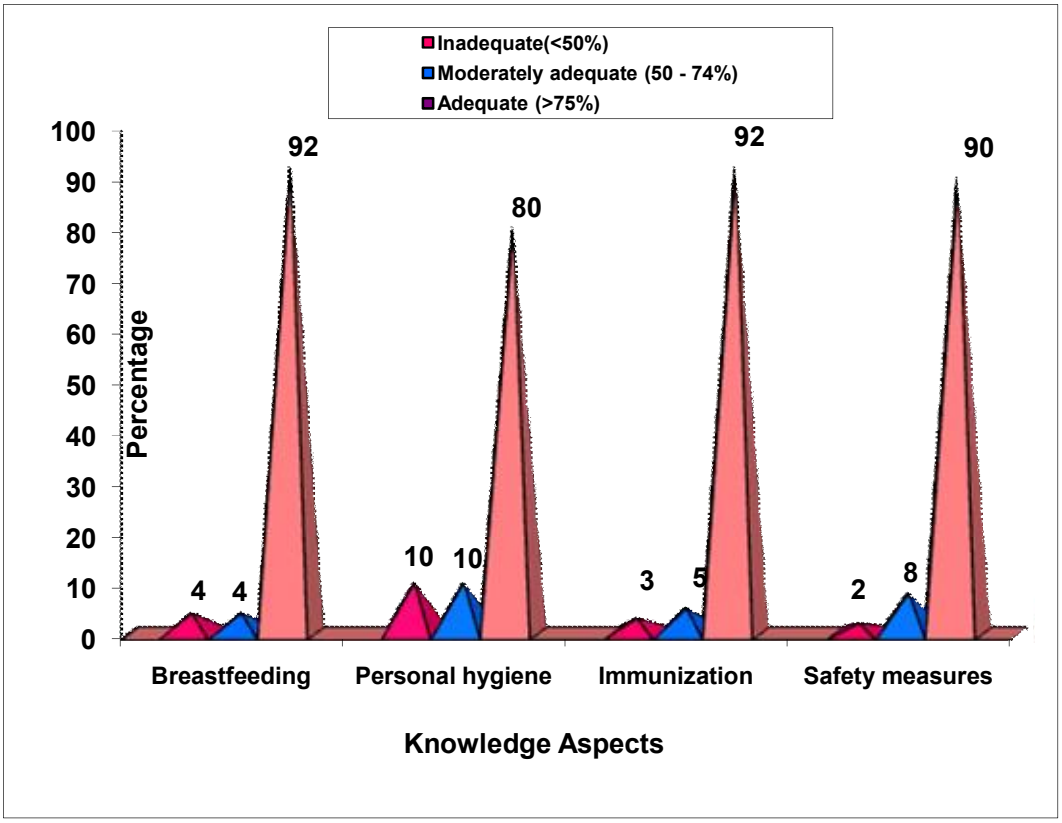

Fig. 3: Percentage distribution of level of aspects of knowledge of new born care among postnatal mothers.

Discussion

On comparing the coverage by area, it was observed that coverage was almost similar for urban and rural areas but it was less in slums: BCG-88.37%, DPT1/OPV1: 88.66%, DPT2/OPV2: 82.33%, DPT3/OPV3: 74% and measles: 66.33%. The coverage for DPT3/OPV3: and measles in slum children was comparatively much lower than in urban and rural children. It can be seen that only 575(72.23%) of the children was fully immunized, 184(22.99%) were partially immunized and 37(4.64%) were unimmunized. No sex wise difference was noticed. However, only 176(58.66%) children were fully immunized in slums in comparison to 317(79.84%) in urban and 82(82.82%) in rural children. A high proportion of children are partially immunized (32.66%) or completely unimmunized (27.27%) in the slums. The coverage was best in rural children.

The results revealed that It reveals that 2(4%) had moderately adequate, 2(4%) had inadequate knowledge and 46(92%) had adequate knowledge of postnatal mothers. To assess the practice on newborn care among postnatal mother. It reveals that, moderately adequate practice was seen in 10% and adequate level of practice was seen in 90% of postnatal mothers. The results revealed that there is no significant association between the knowledge and demographic data. There is no significant difference between the practice and demographic data. revealed that 4% of mothers had inadequate knowledge on breastfeeding, 4% had moderate knowledge and 92% had adequate knowledge. On personal hygiene, 10% of mothers had inadequate knowledge, 10% had moderate knowledge and 80% had adequate knowledge. Regarding immunization, 3% of postnatal mothers had inadequate knowledge, 5% of mothers had moderate knowledge and 92% of postnatal mothers had adequate knowledge. On safety measures, 2% of postnatal mothers had inadequate knowledge, 8% of postnatal mothers had moderately adequate knowledge and 90% of postnatal mothers had adequate knowledge.

Conclusion

The present study concluded that 46(92%) of postnatal mother had inadequate knowledge, 2(4%) had moderate knowledge and 2(4%) of postnatal mother had adequate knowledge.10% of postnatal mother had moderate level of practice and 90% of postnatal mother had adequate level of practice. The study concluded that, postnatal mother's knowledge and practice regarding prevention infection and improve newborn care was adequate thus structured education helps to enhance the knowledge

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