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A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON NEW BORN CARE AMONG PRIMIGRAVIDA MOTHERS IN FEMALE HOSPITAL ,HALDWANI, UTTARAKHAND

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ABSTRACT

PURPOSE OF THE STUDY:-

The purpose of the study was to determine the effectiveness of structured teaching programme on knowledge about newborn care among Primigravida mothers.

BACKGROUND:-

The care of neonates in the family is governed by the family's knowledge, awareness and cultural practices. The baby's health, while in the womb, depends on health of the mother. But after being born, survival, health and growth depends mainly on the mother's knowledge and the practices play a crucial role for safeguard of newborn health and adoption of new environment. An estimated 3.1 million neonates die each year globally, and 99% of these deaths occur in low-income countries Promotion of essential newborn care practices is one strategy for improving newborn health outcomes that can be delivered in communities as well as facilities.

OBJECTIVES:-

- 1- To assess the level of existing knowledge on care among primigravida mothers.
- 2- To assess the effectiveness of structured teaching programme regarding newborn care among primigravida mothers.
- 3- To find the association between pre-test levels of knowledge scores on newborn care among primigravida mothers with their selected demographic variables.

MATERIAL AND METHODS:-

A Quantitative research approach with Quasi experimental design with one group pre-test and post-test design was used. The Convenient sampling technique was used to select the study subjects. Data was collected from 50 primigravida mothers by using structured knowledge questionnaire. Data was analysis in the form of differential (mean,frequency standard deviation ,paired t test and percentage) and inferential(chi-square)statistics.

RESULT:-

The study finding that the pre-test knowledge of primigravida mothers 16.92% after providing the knowledge and education to the primi mothers regarding new born care than the post test result is 34.76%. So by this research the knowledge regarding new born was increased to the primigravida mothers.

CONCLUSION:-

The investigator observed that the level of knowledge regarding new born is higher than the pretest knowledge.

KEYWORD:-

Effectiveness, Structured teaching programme, Newborn care, Primigravida mothers

INTRODUCTION

Infant health in India shows drastic figures. Delhi ranks 9th(out of 29states) in infant mortality rate. It is a pathetic 19th in exclusive breastfeeding (that is only 34.5% of women breastfeed exclusively for 6 months) and 22nd in initiating breastfeeding within the first one hour.¹

The baby's health, while in the womb, depends on health of the mothers. But after being born, survival, health and growth depends mainly on mothers's knowledge.²

Newborn care refers to the essential care provided to the newborn baby by the mother or by the care provider such as, exclusive breast feeding, maintaining body temperature, care of the cord, care of the eyes, and prevention of infection and injuries. The first week after birth is a time of major metabolic and physiological adaptation for newborn infants. So, newborns need a special care and intensive monitoring and support during this critical period of adaptation.³

The mother"s knowledge and the practices play a crucial role in safeguarding health and enhancing the newborns adaptation to the new environment. Many times a mother has learnt it by paying a heavy price through the death of 1 or 2 of her infants. There is lack of care in feeding, immunization, umbilical cord care, prevention of hypothermia.⁴

MATERIAL AND METHODS-

The Quantitative approach and Quasi Experimental research design was used in this study. Convenient sampling technique was used to collect the 50 primigravida mothers. The study was conducted at selected hospital Haldwani, Uttarakhand. The investigator has collected the data after getting formal permission from the authority from selected hospital, Uttarakhand. The participants were informed about the purpose of study and written consent was taken from the participants. Pre-test was done by using demographic profile and knowledge questionnaire with the help of Structured knowledge questionnaire by interview method and administered structured teaching programme to sample on the same day after 7th day post test was done with the help of structured interview schedule by using same knowledge questionnaire. Descriptive statistics includes frequency, percentage, mean, standard deviation was used to describe the result.

FINDINGS

Table-1 Frequency and percentage distribution of the socio-demographic characteristics of the primigravida mothers.

Variable	Frequency(f)	Percentage%
Educational status-a) Educatedb) Uneducated	34 16	68 32
Occupation-	24	68
0		ccupation-

	b) Working	16	32
3.	Types of family-a) Nuclear familyb) Joint family	28 22	56 44
4.	Types of delivery-a) Normal vaginal deliveryb) Assisted/Instrumentaldelivery/Lowercesarean section	28 22	56 44
5.	Postnatal day-a) 1-3 dayb) 4 and above	34 16	68 32
6.	Area of residence-a) Urban areab) Rural area	50 35	30 70
7.	Do you have any knowledegeabout newborn care- a) Yea b) No	26 24	52 48
8.	Complication pregnancy- a) Yes b) Nooccurduring	24 26	48 52
9.	Housing- a) Kaccha b) Pakka	18 32	36 64

Table-1 Illustrates the frequency and percentage distribution of socio-demographic characteristic of primigravida mothers. Study included 50 primigravida mothers. In a view of education (68%) of primigravida mothers were educated. With regards of occupation most (68%) of the mothers were home maker. Among 50, majority (56%) of the primigravida mothers were living in Nuclear family. Regarding the types of delivery majority of the primigravida mothers (56%) had normal vaginal delivery. Regarding the area of living most of the primigravida mothers (70%) belongs to Urban area. Majority of the primigravida mothers (52%) had previous knowledge about newborn care. Regarding housing facilities most of the primigravida mothers (52%) had no complication during pregnancy. Regarding postnatal day most of the primigravida mothers (68%) were on postnatal day1-3.

Table-2Component wise comparison of mean,SD and mean percentage of pre-test and post-test of knowledge score regarding primigravida care.

S.no	Areawiseknowledgereleatedtonewborn care	Maximum score	Mean±SD(pr etest)	Mean(%)	Mean SD(Posttest)	Mean(%)	Mean difference
1.	Breast feeding	08	2.14±2.035	26.75%	7.9±1.44	98.75%	5.75
2.	Care of	06	2.58±1.48	43%	5.76±1.53	96%	3.18
	newborn						

3.	Immunization,	09	2.28±1.30	23.33%	5.92 ± 1.902	67.77%	3.64
	hypothermia						
	and nappy						

Table-2 Depicts the component wise Mean,Standard Deviation,Mean percentage of knowledge score. The findings revealed that there was significant increase in post test knowledge score of all three areas. The highest mean score was 2.58 that is the area of Care of newborn and lowest was 2.14 that is in the area of breast feeding. The highest mean difference 5.75 which belong to second area was breast feeding. Hence there was a significant increase in post test knowledge of all 3 areas.

Table-3 Component wise Cmparisons of mean of pre-test and post-test knowledge score of all three areas on newborn care on primigravida mothers.

Knowledge	Pre-test Mean± SD	Post-test Mean±SD	Mean Difference	't' value
scores	8.46 ± 2.88	17.38±2.77	8.92	86.81

Table-3 Shows the comparison of pre-test and post-test knowledg the t test was computed to compare the knowledge score. It shows that post-test knowledge scores in all components were significantly increase as compared to pre-test knowledge score. So it can be interpreted that teaching programme was effective in improving the knowledge of primigravida mothers.

Table-4 Association of pre-test knowledge score with selected socio-demographic characteristics of primigravida mothers.

S.no	Socio-demographic variables	Below median	At and above median	χ ²	P value	DF	Inference
1.	Types of family a) Nuclear b) Joint	6 10	22 12	3.26	0.0710	1 d f	Not significant
2.	Residence a) Rural b) Urban	9 7	26 8	2.11	0.1463	1 d f	Not significant
3.	Knowledge about newborna) Yesb) No	8 8	20 40	0.343	0.57	1 d f	Not significant
4.	Complication a) Yes b) No	7 9	17 17	0.170	0.6801	1 d f	Not significant
5.	Housing a) Kaccha b) Pakka	9 7	10 14	#3.326	0.018*	1 d f	Significant
6.	Occupation a) Home maker b) Working	10 5	26 9	0.3023	0.56	1 d f	Not significant
7.	Educationa)Educatedb)Uneducated	12 4	19 15	0.32	0.54	1 d f	Not significant
8.	Postnatal daya) 1-3b) More than 4	10 4	21 15	0.73	0.41	1 d f	Not significant
9.	Type of deliverya) Normal	12	19	1.687	0.26	1 d	Not significant

b)	Instrumental/LSCS	4	15		f	

Df1= 3.84 at p<0.05,#Yates correction test

Table-4 Shows the association of pre-test knowledge scores with socio-demographic variables. There was no significant association found between pre-test knowledge score and socio-demographic variable except religion. It revealed that there was significant association between pre-test knowledge score with housing(χ^2 =3.326). Hence it can be interpreted that knowledge of primigravida mothers was not influenced by socio-demographic variables except housing and may interpreted that housing facilities of Pakka house mother were having significantly higher knowledge than the kaccha house.

DICUSSION

Section -1Description of personal characteristics of postnatal mothers.

In the presesnt study,majority 68% of primigravida mothers are educated. This study was supported by Ms.Kanchan bala Mrs Rajkumari also stated the similar finding that the majority of women 69% were educated.

Section-2 Effectiveness of structured teaching programme by comparing pre-test and post test mean scores of primigravida mothers.

A similar study conducted by Castalino F,Nayak B.S.The study findings that the mean of knowledge score was 12.5 with SD of 2.31 and mean practice score was 34.4 with SD of 3.5 which indicate that increase in the knowledge and practices of postnatal mothers on new born care.

CONCLUSION-Based on the findings of the study, it is concluded that most of the mothers had very good knowledge regarding Care of Newborn after implementation of Structured teaching programme. And finding shows that the mean post-test knowledge score (17.38) regarding postnatal care was higher than that of mean pretest knowledge score(8.46) and the mean difference was 8.92. The t calculated value 86.81 (df₄₉ at p=0.05) level. So significant improvement in knowledge score can be attributed by the awarness programme administered between pre-test and post-test assessment.

SOURCE OF FUNDING-Self funded

ETHICAL CLEARANCE-No ethical issue

CONFLICT CLERANCE-There is no conflict of interest exit.

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