

Original research article

Effectiveness of STP on Knowledge Regarding Newborn Care among Prime Mothers at Govt. Hospital, Kurnool, Andhra Pradesh.

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Abstract

Newborns want a special care and intensive observation and support throughout this important amount of adaptation. It is attainable to extend perinatal survival and quality of human life through prompt and adequate management of newborn. The study was conducted by using quantitative approach with quasi-experimental one group pre test-post test design at Govt Area Hospital, Kurnool, Andrapradesh. Data was collected from thirty primi mothers by victimisation purposive sampling technique. Pre test and post test knowledge score was assessed through self structured questionnaire following the structured teaching programme. The pre test, showed that, 23(77%) were had average knowledge, followed by 4(13%) were had below average knowledge and 3(10%) were had above average knowledge regarding newborn care. In post-test, 16(53%) were had average knowledge and 14(47%) had above average knowledge none of them had below average knowledge regarding newborn care. The pre check mean was 15.21 and standard deviation was 3.75. And the post check mean was 20.6 and standard deviation was 2.7. The calculated value was greater than table value. So, it is significant at p0.05level

Key words: New born, Perinatal, Primi mother, Mortality and Quantitative.

Introduction

Newborn care refers to the essential care provided to the newborn baby by the mother or by the care provider such as breastfeeding, 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 [1]. The early life all newborn try to adapt to the external environment. So, newborns need special care and intensive monitoring and support during this critical period of adaptation [2].

In the developing countries five-million babies and in the world 98% deaths occur in every year. Of these, one million or 24% are contributed by India where 70-80% of all the deliveries still occur at home and are conducted by untrained personnel. 60% of all neonatal deaths and 68% of the world's burden of perinatal deaths occur in Asia [3]. While considering the high death rate in the newborn period, it is imperative that all efforts should be made to educate the health personnel and the public to improve newborn health. The National Neonatology Forum which is composing of neonatologists, paediatricians, nurses and social scientists with help of the government, UNICEF and NGO's has undertaken the mission of educating health personnel and the public

to improve newborn care [5]. National Neonatology Forum in collaboration with the Govt. of India, Ministry of Family Health and Welfare (MOFW) and UNICEF are celebrating "Newborn Week" between 15th - 21st November 2016.

In Asian country twenty-five million babies square measure born once a year. The World Health Organization (WHO) estimates that more than 4 million newborn dies in their first month of life due to inadequate newborn care. In our country, the current infant mortality rate (IMR) is around 45%. World wide it is 26% live birth and in Karnataka state 62% live birth [7].

A survey conducted by the Institute of Health and Family Welfare, Hyderabad, reveals that Andhra Pradesh, with 62 infant deaths for every 1,000 births has the highest infant mortality rate among south Indian states. The data collected shows that while states like Kerala and Tamil Nadu have managed to reduce their infant deaths considerably over the last 10 years, the situation in Andhra Pradesh has not changed much. It is possible to increase prenatal survival and the quality of human life through prompt and adequate management of newborn [8]. So the care of a newborn is so much important. On account of the above stated matters, the researcher understood that appropriate care is very important for the survival and healthy development of newborn. Thus,

it was a motivation for the researcher to undertake this study.

Objectives

- To assess the pre-test knowledge level regarding newborn care among primi mothers.
- To evaluate the effectiveness of STP on level of knowledge regarding newborn care among primi mothers.
- To compare the pre-test and post test level of knowledge regarding newborn care among primi mothers.
- To associate the level of knowledge on new born care among primi mothers with their selected demographic variables.

Hypotheses

- **H1:** There is a significant difference between pre-test and post test knowledge scores of primi mothers on newborn care.
- **H2:** There is a significant association between the knowledge score and selected demographic variables of primi mothers on newborn care.

Materials and Methods

Research Approach: Quantitative Approach.

Research Design: Quasi-Experimental with One group pre test post test design.

Setting: The study was conducted at Govt. Area Hospital, Kurnool.

Sample size: 30 Primi mothers

Sampling Technique: Purposive sampling technique

Sampling Criteria

Inclusion criteria:

- The mothers who had first delivery
- The primi mothers who had undergone LSCS or normal delivery.

Exclusion Criteria:

- The primi mothers who cannot understand Telugu or English.
- The primi mothers who are not willing to participate in the study.

Variables of the Study:

- **Dependent variable:** Knowledge level of primi mothers on newborn care.
- **Independent variable:** Structured teaching programme on knowledge regarding newborn care.

Description of the Tool:

It consists of two sections.

Section –I: demographic variables.

Section–II: A structured questionnaire on newborn care.

Results and Discussion:

Assess the pre-test and post-test Knowledge score regarding new born care among primi mothers

Table 1: Knowledge levels in both pre test and post test N=30

Knowledge score	Pre test		Post test	
	Frequency	Percentage	Frequency	Percentage
Below Average	3	10%	14	47%
Average	23	77%	16	53%
Above average	4	13%	0	0%

It shows that, among all primi mothers, in pre-test, 4(13%) were had below average knowledge, followed by 23(77%) were had average knowledge and 3(10%) were had above average knowledge regarding newborn care. In post-test, none of them had below average Knowledge, 16(53%) were had average knowledge and 14(47%) had above average knowledge regarding newborn care.

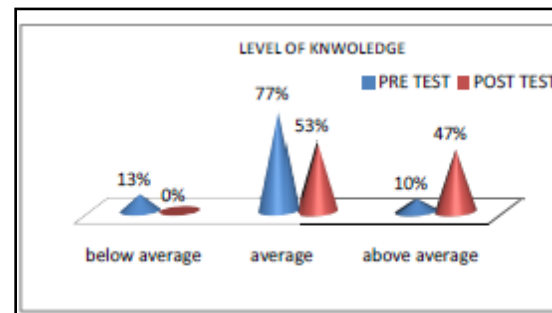


Figure1: Pre-test Post-test Knowledge Score of Primi Mothers on Newborn Care

Comparison of Pre-test and Post-test Knowledge score regarding new born care among primi mothers

Table-2: Comparison of Pre-test and Post-test Knowledge Score of Primi Mothers Regarding Newborn Care N=30

S. No	Level of knowledge	Mean	S.D	Paired ‘t’ test
1.	Pre test	15.2	3.75	C=19.797 t=12.599 df=6 S**
2.	Post test	20.6	2.7	

Note: **Significant at the Level of P<0.05.

It indicates that, the pre test mean was 15.2 and standard deviation was 3.75. The post test mean was 20.6, and standard deviation was 2.7. The calculated value was greater than table value. So, it is significant at $p < 0.05$ level. The study showed that there was a significant difference in the knowledge level after STP. Hence, the research hypothesis is accepted. In second hypothesis no variables are significant association with knowledge level of mothers on newborn care.

Recommendations

- The same study can be done on larger samples to validate and generalize the findings.
- A similar study can be conducted with an experimental research approach having a control group.
- A similar study can be conducted to assess the newborn care practices among postnatal mothers.

Conclusion

The study showed that, the post test score is significantly higher than the pretest score after the teaching program. So, it can be concluded that, the structured teaching program on newborn care was effective in improving the knowledge level of primi mothers. Since, mother plays a vital role in newborn care, they should have necessary knowledge in all the aspects of newborn care, thereby the complications and mortality related to newborn can be effectively prevented.

References

1. India UNICEF; "Progress for children report Dec 2007"; A statistical Review; volume 6 page no; 6-7
2. Louis Neissen, Anne ten Hove, Hink Hilderink, Kim Mulholland, Majidzati; Louis; Bulletin of the WHO (2009) "Comparative impact assessment of child Interventions"; 87:472-480
3. Maria Pavia et al (2006); "Pediatrics: Efficacy of vaccination in children Younger than 24 months"; Volume 123; page no: e1103-e111
4. Merk and Co.; "WHO (2008) ; CDC Advisory Pannel votes to update Pneumococcal Vaccination recommendations"; Fierce Biotech; USA; Page no; 23-24
5. Mimita Magendra Mimita Magendra (1999); "Awareness And perception of Vaccination among parents"; 42nd National Immunization Conference"; Malaysia
6. MY Sinchew (2011); "Call For Parents to Vaccinate Babies Against Pneumococcal Meningitis-Malaysia"; Confederation of Meningitis Organization INC; Malaysia;
7. Nathron Chaiyakunapurk et al., BMC medicine (2011); "Cost effectiveness of Pediatric

- Pneumococcal Conjugate Vaccines: A Comparative assessment of decision Making Tools volume 9; page no; 11-13
8. Orin S Levine, Thomas Cherian Indian Pediatrics (2007); "Pneumococcal vaccination for India Children"; page no: -491-496