

A Study to Assess the Effectiveness of Information Booklet on Knowledge Regarding Breastfeeding Techniques among Primipara Mothers in Selected Hospitals at Bhopal (M.P.)

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ABSTRACT

Background: Breast feeding is the best essential feeding and breast milk is the best milk. The basic food of infant is mother's milk is the most effective way to provide a baby with a carrying environment and complete food. It meets the nutritional as well as emotional and psychological needs of the infant. **Objectives:** The study aimed to evaluate the effectiveness of information booklet regarding breastfeeding techniques among primipara mothers. **Methods:** The research approach adopted for this study was quantitative approach. The research design selected for the study was pre- experimental one group pre & post-test design. Data was obtained from 100 primipara mothers. And sample was selected using Purposive sampling technique. Data was collected with the help of demographic Performa and structured questionnaire. Descriptive and Inferential statistics will be used to find out for analysis of data and the significant difference between the pre and post-test knowledge scores. **Results:** The mean post- test score 24.28 more than mean pre- test score 11.8. And SD pre- test is 2.348 more than post- test SD 3.71. and mean percentage post- test score 80.93% more than mean pre- test score 39.33%. **Conclusion:** The study concluded that informational booklet was effective in increasing the knowledge scores of the primipara mothers regarding breast feeding technique.

KEYWORDS: Primipara mother, Breast Feeding Techniques

INTRODUCTION

The birth of the baby is an important event in the family. It is therefore important for the mothers to have a healthy baby. Breast milk is the best food for the babies as breast fed babies are healthier than formula fed babies. Child birth and breast feeding are unique experiences for women. They can only be cherished and nurtured by the health care workers, the baby friendly way. Breastfeeding is defined as the process of feeding an infant or young child with milk from mother breasts. Babies have a suckling urge that enables them to take- in the milk, provided there is a good latch, a normal fraenum, and milk supply.

Children who are breastfed have better neurodevelopment outcomes, and the duration of breastfeeding also affects a child intelligence. The

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natural immunizing factors are found in breast milk which gives body necessary fire power to fight against deadly diseases like diarrhea, respiratory problems and allergies.

The position of the baby during feeding must also be correct. The mother should hold the baby close enough to her body for its chin to touch her breast all the time. If the baby is not close enough to the breast, it may have to suck too hard on the nipple in order to keep in its mouth. The excess suction can damage the sensitive nipple skin. A baby must be held close enough to the breast to keep the nipple and areola in place inside its mouth without much effort. The mother has to make sure that the baby breathing is not obstructed in any way.

Several factors related to the mother and the baby, however, have a negative effect on the initiation of breastfeeding. Mode of delivery is one of these factors. When delivery takes place by caesarean section, the mother becomes a surgical patient with all the inherent risks and problems. Caesarean delivery under general anesthesia rates are currently rising our country, but the effects of this factor on the initiation and duration of breastfeeding are unclear.

For assessing the effectiveness of the breastfeeding session, it is suggested that a baby may not look technically perfect, but if the sucking is strong and regular and the mother is pain free, chances are that the positioning is right for that mother and baby. Breast-feeding mother benefits reduce the chance of post partum hemorrhage and helps in better uterine involution. The breast feeding reduces the risk of breast and ovarian cancer of the mother. It is convenient and time saving for mother without any preparation, mother feels comfortable to feed the baby especially at night.

Need For the Study:

According to Centers for Disease Control and Prevention (a nationwide survey conducted in 2012, of the infants who were 19-35 months of age, 74% were breastfed at birth, 43% were breastfed at 6 months, 21% were breastfed at 12 months, 32% were exclusively breastfed at 3 months, and 12% were exclusively breastfed at 6 months. UNICEF, WHO, WABA along with the scientific community strongly recommended initiating breastfeeding within an hour of birth. Evidence shows that early initiation can prevent 22% of all deaths among babies below one month, in developing countries. The Breastfeeding Promotion Network of India (BPNI 2012) is spearheading action on 20th World Breastfeeding Week from 1st-7th August. Communities around the world are working hard to bring-back „Breastfeeding Culture.

According to NIS (National Immunization Survey) results, 23 states have greater than 75% of women breastfeeding at hospital discharge. 10 states have greater than 50% of their infants being breastfed at 6 months of age. 12 states have greater than 25% of their infants being breastfed at 1 year of age. 10 states have greater than 40% of their infants being exclusively breastfed through 3 months of age. 8 states have greater than 17% of their infants being exclusively breastfed through 6 months of age. The 8 states of Alaska, California, Hawaii, Idaho, Oregon, Utah, Vermont, and Washington have achieved the three Healthy People 2010 objectives above. More than 60% of mothers of all racial/ethnic groups and of

all education levels are initiating breastfeeding. Only teenagers with 51% initiating breastfeeding are less than the 60% initiation rate.

Most problems in feeding the baby are related to the insufficient knowledge, inappropriate routines and lack of confidence of mothers and it can be easily managed or prevented by prenatal education, anticipatory guidance and adequate support. Many women decide the mode of infant feeding early in the antenatal period. Hence mothers need to be motivated to attend prenatal breast feeding classes.

A study conducted aimed at investigating the effectiveness of the computer assisted instruction about breast feeding technique during early stages of labour on knowledge and breastfeeding technique among early primigravida mothers. The sample size comprises of 50 primiparous mothers who delivered and received care at Siriraj Hospital. The findings showed that the mean post-test knowledge of breast feeding scores in the experimental group after computer assisted instruction was higher than the pre test scores before computer assisted instruction at a statistically significant less ($P < 0.001$). The result suggest that the nurses in the labour room who are involved in breast feeding promotion should apply this computer assisted instruction to continuously promote successful breast feeding in adolescent mothers during early labour and through the post-partum period.

UNICEF-(2017), reports stated that mortality rate presents the group's latest estimates of under-five, infant and neonatal mortality up to the year 2016, and assesses progress at the country, regional and global levels. Critically, it shows that although the number of children dying before the age of five has reached a new low – 5.6 million in 2016, compared with nearly 9.9 million in 2000 – the proportion of under-five deaths in the newborn period has increased from 41 per cent to 46 per cent during the same period.

From the observation in the post-natal ward, the researcher found that the mothers especially primipara mothers were not aware of the facts regarding breast feeding techniques of their babies. They were often complaining of problems like baby is not sucking well, less milk, flat nipple, pain at the surgical site or at the episiotomy wound site, pain in the breast, breast engorgement etc.

PROBLEM STATEMENT:

“A study to assess the effectiveness of Information Booklet on Knowledge Regarding Breastfeeding Techniques among Primipara Mothers in selected Hospitals at Bhopal (M.P.)”

OBJECTIVES:

- To assess the pre-test knowledge of primipara mothers regarding breast-feeding techniques among primipara mother.
- To evaluate the effectiveness of information booklet regarding breast-feeding techniques among primipara mothers.
- To find out the association of pre-test knowledge scores of primipara mothers with their selected socio demographic variables regarding breast-feeding techniques among primipara mother.

HYPOTHESIS:

H01: There is no significant difference between the mean pre-test and post-test knowledge scores regarding breast-feeding techniques among primipara mothers.

H1: There is significant difference between the mean pre-test and post-test knowledge scores regarding breast-feeding techniques among primipara mothers.

H02: There is no significant association between the pre-test knowledge scores regarding breast-feeding techniques with selected socio demographic variables among primipara mothers.

H2: There is significant association between the pre-test knowledge scores regarding breast-feeding techniques with selected socio demographic variables among primipara mothers.

OPERATIONAL DEFINITIONS:

Effectiveness: It refers to gain level of knowledge regarding breast-feeding techniques as determined by significant difference between pre and post test scores after the video assisted programme regarding breast-feeding techniques among primipara mothers.

Information booklet: Information booklets are designed to help others understand important points about a breast feeding. For instance, you might make an information booklet to provide facts about a breast feeding and it's important to make the booklet user-friendly so recipients can quickly get the information they need.

Knowledge: It refers to the verbal responses of primipara mothers to knowledge items of the test.

Breast Feeding Techniques: Breastfeeding technique is the composite of positioning attachment and suckling. Positioning refers to the technique in which the infant is held in relation to the mother's body and attachment refers to whether the infant has enough areola and breast tissue in the mouth.

Primipara mother: A woman who is giving birth for the first time. Puerperal insanity proper comes on

within one month of parturition; and, like the insanity of pregnancy, occurs most often in primiparae.

MATERIAL AND METHODS:

Research approach:

Quantitative Research Approach

Research design:

Pre-Experimental research design

Variables:

- **independent variable** -Refers to informational booklet
- **dependent variable**-Refers to knowledge of primipara mother.
- **Demographic variables:** Such as age, occupation, type of family, educational status, monthly income, source of information, type of delivery, place of delivery.

Research setting:

The study was conducted in selected Hospital, Bhopal,(M.P).

Population:

Target population: Primipara mothers

Accessible population: Primipara Mothers selected Hospital, Bhopal,(M.P).

Sample:

Primipara mothers Bhopal.

Sample size: 100 Primipara mothers.

Sample techniques:

Purposive sampling technique

Criteria for sample selection:

Inclusion criteria:

- Primipara mother those are available at the time of study.
- Primipara mother who are willing to participate in study.
- Primipara mother admitted in selected hospital.

Exclusion criteria:

- Primipara mother who are not willing to participate in the study.
- Primipara mother who are not present at the time of study.

Tool and method of data collection:

Section A. Demographic data

Section B. Structured knowledge questionnaire to assess knowledge on breast feeding technique

Selection and development of tool: Structured questionnaire schedule on assessment of breastfeeding technique was used for the study.

Questionnaire is used to get exact & complete information from the subject. It was felt that questionnaire would encourage the subjects to give frank information & help in collecting data from literate subject. The tool was developed after extensive review of literature, internet search and discussion with the guide and co-guide; the various experts in the field of nursing and based on the investigator’s personal experience.

Description of the tool: The tool comprised of two sections:

Section A. Demographic data

Section B. Structured knowledge questionnaire to assess knowledge on breast feeding technique

Scoring key- is prepared for Part-I by coding the demographic variables. For Part-II score 1 and 0 are awarded to correct and wrong response. Thus the maximum score is 30.

To interpret the level of knowledge the scores subjected as follows

Level of knowledge	Score
POOR	0-10
AVERAGE	11-20
GOOD	21-30

Data collection procedure:-

- Before the data collection, the investigator obtained the formal permission from the concerned authority of the selected hospitals.
- Introduced her to the staffs and explained the purpose of the study. They were also assured about, the confidentiality of the data obtained by them. Primipara mothers attending selected, Bhopal were taken.
- Non probability purposive sampling technique was used for selecting the samples. Respondents

were explained about the purpose of the study and consent was obtained from them prior to the data collection. Approximately 20 to 25 minutes were taken to complete the questionnaire.

- Teaching on breast feeding technique will be given through informational booklet.
- After 7 days post-test will be conducted using the same structured knowledge questionnaire.

Ethical consideration:

- After approval of the research committee in the Mansarovar Nursing College Bhopal.
- A formal permission got from the Institute of general medicine to conduct the study in the post-natal ward and ethical clearance from the selected hospital committee members Bhopal.
- Confidentiality was assured to the sample and written consent obtained from each sample.
- The sample was ensuring they have rights to withdraw from the study if they found any difficulties during the intervention.

Plan for data analysis:

The data will be analysed using both descriptive and inferential statistics.

- Demographic variables & knowledge scores would be analyzed by using mean, mean percentage, mean difference and standard deviation.
- ‘Unpaired t-test’ will be used for effectiveness of assessment of interventional diet on growth of pre-schooler children.
- Chi square test used for finding the association between preinterventional score with selected demographic variables.

RESULTS:

Table No.1: Frequency and percentage wise distribution of primipara mothers based on demographic variable. N=100

S.NO.	DEMOGRAPHIC VARIABLES	FREQUENCY	PERCENTAGE %
1	Age in years		
	a) 18-21 years	35	35%
	b) 22 – 26 years	40	40%
	c) More than 26 years	25	25%
2	Occupation		
	a) Home maker	34	34%
	b) Labour	22	22%
	c) Government employee	26	26%
	d) Private employee	18	18%

3	Educational status of the mother		
	a) No formal education /illiterate	30	30%
	b) Primary education	32	32%
	c) Higher secondary education	22	22%
4	Monthly income of the family		
	a) < Rs 5000	32	32%
	b) Rs 5000 – Rs 10000	14	14%
	c) Rs 10000 – Rs 15000	34	34%
5	Type of the family		
	a) Nuclear family	44	44%
	b) Joint family	28	28%
	c) Extended family	28	28%
6	Sources of information		
	a) Mass media	10	10%
	b) Workshop/seminar/health talk	24	24%
	c) Family & friend	34	34%
7	Type of Delivery		
	a) Normal	60	60%
	b) LSCS	40	40%
	8	Place of Delivery	
a) Home		26	26%
b) Health Care Centre		44	44%
c) Hospital		30	30%

Table 1. Described about the frequency, percentage distribution of demographic variable. Distribution of the subject by age revealed that majority (40%) of them belongs to 22-26 years, (35%) of the primipara mothers were belongs to age group of 18- 21 years, and (25%) of the primipara mothers were belongs to age group of more than 26 years. With regard to Occupation majority of primipara mothers (34%) belongs to house wife, (22%) of labour, (26%) were belonging to government employees, however only (18%) were belonging to private employee. With regard to majority (32%) of primipara mother had no primary education, (30%) of primipara mothers of had no formal education, (22%) of them to higher secondary education, (16%) of them graduate. With regard to majority of primipara mother (34%) has belong to Rs10000-15000, (32%) has be Rs <5000, (14%) were belonging to Rs 5000-10000, (20%) were belong to >15000. With regard to majority of primipara mother (44%) were nuclear family, (28%) is joint family, (28%), is extended family. With regard to majority of primipara mother (34%), mass media, (10%) workshop/ seminar/ health talk, (24%) were friend, (32%) no information. With regard to majority of primipara mother (60%) were Normal delivery, (40%) is LSCS delivery. With regard to majority of primipara mother (44%) were health care centre, (30%) is hospital and (26%) is home.

Table No. 2: Frequency and percentage wise distribution of primipara mothers based on pre- test level of knowledge score on breastfeeding technique

S. No	Category	Range	Frequency	Percentage	Mean	Mean %	SD
1	Poor	21-30	0-10	64%	11.8	39.33%	2.348
2	Average	11-20	36	36%			
3	Good	0-10	0	0%			

Table 2: The level of knowledge was seen in to 3 categories, such as poor, average and good knowledge. In pre-test majority 64% of the primipara mothers had poor knowledge whereas 00% of them had good knowledge, 36% of them had average knowledge regarding breastfeeding technique. The pre- tests mean score 11.8, SD was 2.348 and mean percentages 39.33%.

Table no. 3: Frequency and percentage wise distribution of post- test knowledge score of primipara mothers regarding breastfeeding technique

S. No	Category	Range	Frequency	Percentage	Mean	Mean %	SD
1	Good	21-30	74	74%	24.28	80.93%	3.81
2	Average	11-20	26	26%			
3	Poor	0-10	0	0%			

Table 3: The level of knowledge was seen in to 3 categories, such as poor, average and good knowledge. In pre-test majority 74% of the primipara mothers had good knowledge whereas 00% of them had poor knowledge, 26% of them had average knowledge regarding breastfeeding technique. The pre- tests mean score 24.28, SD was 3.81 and mean percentages 80.93%.

Table no.4: Comparison of mean pre- test and post- test knowledge score of primipara mothers regarding breast feeding technique.

N=100

S.NO.	Description	Mean	Mean %	SD	t-test	DF	P-value
1	Pre-test knowledge	11.8	39.33%	2.348	28.37	99	0.05 (2.18)
2	Post-test knowledge	24.28	80.93%	3.81			

Table 4- Indicated overall pre- test & post- test mean knowledge scores on breast feeding technique. Depicted mean post- test score 24.28 is higher than mean pre- test score of 11.8. The actual gain knowledge score is 12.48 % and post- test SD =3.81 is more than pre- test SD=2.348 and computed paired t-test (28.37) ($p=2.18$) at the level of <0.05 . Thus data showed higher than the tabled value t-test ($=2.18$) at the level of <0.05 thus indicated significant difference and effectiveness of information booklet, in increasing the knowledge of primipara mothers regarding breastfeeding technique. Hence, the research **hypothesis (H_1) was accepted**. This indicates that the informational booklet was effective in increasing the knowledge scores of the primipara mothers regarding breast feeding technique.

Table No. 5: Chi-square Test Showing the Association between Pre-Test Knowledge Score of primipara mothers with selected socio- demographic variables.

S. NO	Characterstics	Knowledge level				D F	Chi square value	Chi value	Inferences
		Good	Average	Poor	Total			Critical value $p>0.05$	
1	Age in year					4	8.978	0.05 (9.49)	NS
	18- 21 years	0	6	29	35				
	22 – 26 years	0	20	20	40				
	More than 26 years	0	10	15	25				
2	Occupation					6	26.7502	0.05 (12.59) *	S*
	House wife	0	6	28	34				
	Labour	0	10	12	22				
	Government employee	0	5	21	26				
	Private employee	0	15	3	18				
3	Educational status of the mother					6	18.2801	0.05 (12.59) *	S*
	No formal education	0	6	24	30				
	Primary education	0	20	12	32				
	Higher secondary	0	3	19	22				
	Graduate	0	7	9	16				
4	Monthly income of the family					6	25.3111	0.05 (12.59) *	S*
	Below Rs 2000	0	3	29	32				
	Rs 2001 – Rs 3000	0	3	11	14				
	Rs 3001 – Rs 4000	0	15	19	34				
	Above Rs 10495	0	15	5	20				
5	Type of the family					4	2.5973	0.05 (9.49)	NS
	Nuclear family	0	12	32	44				
	Joint family	0	12	16	28				
	Extended family	0	12	16	28				

6	Source of information-					6	3.6732	0.05 (12.59)	NS
	Family	0	5	5	10				
	Friends	0	5	19	24				
	Health care professionals	0	14	20	34				
	Media	0	12	20	32				
7	Type of Delivery					2	12.9501	0.05(5.99)	S*
	Normal	0	16	37	55				
	LSCS	0	30	15	45				
8	Place of Delivery					4	11.5576	0.05(9.49)	S*
	Home	0	12	14	26				
	Health care centre	0	24	20	44				
	Hospital	4	16	10	30				

NS= Not significant, S*= Significant

Chi- Square test analysis to find out the significant association of pre- test knowledge score with Socio-demographic variables like Occupation as the ($\chi^2= 26.7502$ and table value 12.59) Educational status of the mother as the ($\chi^2= 18.2801$ and table value 12.59), Monthly income of the family as the ($\chi^2= 25.3111$ and table value 12.59), type of delivery ($\chi^2= 12.95$ and table value 5.99), Place of delivery as the ($\chi^2=11.5576$ and table value 9.49)

Chi- Square test analysis to find out the non-significant association of pre- test knowledge score with Socio-demographic variables like, Age as the ($\chi^2= 8.978$ and table value 9.49), types of family as the ($\chi^2= 2.5973$ and table value 9.49), source of information as the ($\chi^2= 3.6732$ and table value 12.59). Hence it can be interpreted that percentage knowledge score related to socio- demographic variables where only by chance and not true difference and hence **H₂ research hypothesis was not accepted.**

DISCUSSION:

- Overall pre-test & post- test mean knowledge score of primipara mothers regarding breastfeeding technique. The mean post- test score 24.28 more than mean pre- test score 11.8. And SD pre- test is 2.348 more than post- test SD 3.71. and mean percentage post- test score 80.93% more than mean pre- test score 39.33%.
- Computed paired t-test (28.37) (p= 2.18) at the level of <0.05. Thus data showed higher than the tabled value t-test (= 2.18) at the level of <0.05 thus indicated significant difference and effectiveness of information booklet, in increasing the knowledge of primipara mothers regarding breastfeeding technique. Hence H1 is accepted.

Conclusion: Informational booklet was effective in increasing the knowledge scores of the primipara mothers regarding breast feeding technique.

Recommendations:

On the basis of the findings of the study following recommendation have been made

1. The same study can be replicated on a larger sample and also at different settings.
2. A comparative study of knowledge of Breastfeeding techniques among primipara and mothers can be done.

3. The descriptive study on assessing the knowledge of working women towards Breastfeeding techniques can be done.
4. The same study can be done in antenatal mothers.

Conflict of interest: No

Financial support: Self

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