

A Pre-Experimental Study to Assess the Effectiveness of Structured Teaching Programme Regarding Knowledge on Kangaroo Mother Care among Post-natal Mothers in Selected Hospital at Punjab

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ABSTRACT

“Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment, or the smallest act of caring, all of which have the potential to turn a life around.”

LEO. F. BUSCAGLIA QUOTES

Statement of the problem

A pre-experimental study to assess the effectiveness of structured teaching programme regarding knowledge on kangaroo mother care among Postnatal mothers in selected hospital at Punjab.

OBJECTIVES OF THE STUDY:

1. To assess the knowledge level regarding Kangaroo mother care among post-natal mothers in selected hospital.
2. To evaluate the effectiveness of structured teaching programme on knowledge regarding Kangaroo mother care among postnatal mothers in selected hospital.
3. To find out the association between knowledge regarding kangaroo mother care among postnatal mothers with the selected socio demographic variables.

KEYWORDS: Effectiveness, structured teaching programme, knowledge, Kangaroo mother care

INTRODUCTION

“Children are the wealth of the nation; Take care of them, If you wish to have a strong India”

- Nehru

Yes, child health is the foundation of the family and wealth of the Nation. Newborn is the very important personality of the home. All family members give him or her warm welcome.

M. J. Anderson (2002)

Among the major child health challenges facing the world at the turn of the new millennium is the problem of high neonatal mortality. The global burden of newborn deaths is estimated to be a staggering five million per annum. Only 2% (0.1 million) of these deaths occur in developed countries, the rest 98% (4.9 million) take place in the developing countries. The highest neonatal mortality rates are seen in countries of South Asia resulting in almost 2 million newborn

deaths in the region each year, with India contributing 60% (1.2 million) of it.

Bohnhorst (2001)

Globally about 25 million Low Birth Weight babies are born each year consisting of 17% of all live births. Approximately 16 to 18% neonates born in developing world are of Low Birth Weight having a weight of less than 2500 gram. The World Health Organization defines low birth weight infants (irrespective of gestational age) as neonates born less than 2500 grams (5 pounds) and extremely low birth weight as less than 1500 grams. Of these babies, approximately one third dies before stabilization or in the first twelve hours.

Charpak.Y (2001)

Premature birth imposes a tremendous stress for both the baby and the mother. To save the baby life, infant

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is monitored under the incubator and warmer surrounded by unfamiliar sounds like buzzers, bells but lies all by himself in warmer. The treatment and routine care giving procedures cause pain and discomfort making it difficult for very low birth weight infants to experience restful and undisturbed periods of sleep. An alternative method, which is easy and cheap to practice, having more advantage is kangaroo care provided for the satisfactory improvement in infant health.

Belizan, J.M. (2003)

More than 20 million babies are born each year with low birth weight. This represents 15.5% of all births. Of these low birth weight babies, 95.6% are born in developing countries. One in 12 babies (8.3% of live births) was low birth weight in 2005 in India. Between 1995 and 2005, the number of infants born low birth weight infants born in India increased to 11%. Because of the poor care and resources, this rate was increasing steadily.

De Alencar, A (2009)

Infants who weight less than 2500 grams at birth represent about 26% of all live births in India. More than half of these are born at term. The preterm infants with greater body surface area in relation to their body weight and have difficulty in maintaining normal body weight due to inadequate brown fat stores. He further explains that premature infants have a disproportionate ratio of body surface to body weight, thin skin, fewer fat stores, immature neurological system and less available metabolic substrate than full term infants and adults. Therefore, heat transfer through internal gradient is increased four times more in preterm infants in adults.

Ludington-Hoe (2002)

Based on Maslow's hierarchical theory, the basic need of every individual are love, security and affection. All of which can be expressed through the most old fashioned and natural way of cuddling. The baby throughout the nine-month period in the mother's womb recognizes this sensation of being cuddled in the environment of the womb. This sensation and feeling of security is ended prematurely in the case of the preterm infants, since they have to face extra uterine life before time. Hence preterm infant need more cuddling and security, mimicking the intrauterine environment.

Flacking, R (2011)

Kangaroo Mother Care was initially conceived in Bogota, Colombia in 1978 as an alternative to incubator care for the low birth weight baby. Kangaroo Mother Care is a humane, low cost method of care of low birth weight (LBW) infants particularly for those weighing less than 2000gram at birth. It

consists of skin-to-skin contact, exclusive breast feeding early discharge and with an adequate follow-up.

Suraj Gupta (2004)

Incubator care causes dehydration in preterm and full term. There is a similar effect of maintaining temperature by a cost effective method of care named as kangaroo care. Kangaroo Care, when replaced by an incubator, leads to many benefits for both the baby and mother. In India, most of the population below poverty line, thus restraining them' from sophisticated care for their low birth weight infants.

Kangaroo Care ensures

people from all economic standards to give the needed care for their preterm babies. The preterm babies gain temperature slowly and prevent hypothermia. Therefore, the preterm baby becomes calm and relaxed. It also helps the baby to conserve energy and bring the organs to normal functioning.

Dorothy, R.M. (2006)

HYPOTHESIS:

H 1: There will be a significant difference between pretest and post-test score on knowledge regarding kangaroo mother care after post-test score among postnatal mothers having in selected hospital.

H 2: There will be a significant association between selected demographic variables and post-test knowledge regarding kangaroo mother care among post-natal mothers in selected hospital.

METHOD OF STUDY

Research instruments also called research tool are the devices used to collect data. The tool facilitates the observation and measurement of variables.

The following instruments were developed by the research for the present study.

ORGANIZATION FINDINGS:

Section I:

Descriptive analysis of demographic variables.

Section II:

Assessment knowledge of post-natal mothers regarding Kangaroo mother care prior to implementation of STP.

Section III:

Comparison of pretest, post-test knowledge scores of the postnatal mothers regarding Kangaroo mother care.

Section IV:

Association between the selected demographic variables with the levels of knowledge among postnatal mothers.

RESULTS:

The following were the results of this study.

Finding-1

The study findings revealed that (1) 3% of students had Very poor knowledge, (8)26% of students had poor knowledge, (9)31% of students had average knowledge and the remaining (9)31% had good knowledge.

Finding-2

Comparison of overall mean, SD, mean percentage of pre and post-test knowledge scores shows that overall pre-test mean score was 1.9 ± 2.01 which is 57.52 % where as in post-test the mean score was 2.8 ± 2.0 which is 83.85 % revealing the difference of 70.60 % shows the effectiveness of STP.

Findinig-3

The study findings revealed that association between the level of hemoglobin and their selected demographic variables. It was interpreted that there was significant association found between knowledge scores of postnatal mothers regarding Kangaroo Mother Care with their demographic variables such as Source of information ($P < 0.05$). No significant association was found between knowledge scores of postnatal mothers regarding Kangaroo Mother Care with their other demographic variables such as age, religion, education, family income, type of delivery. Significant association was found between knowledge scores of post-natal mothers regarding kangaroo mother care such as (occupation, type of family, no of children, weight of the pre term baby, health services) in $p > 0.05$.

There was no significant association between the level of knowledge with demographic variables.

CONCLUSION

The present study assessed the knowledge regarding Kangaroo mother care and found the school teachers had inadequate knowledge. After structured teaching programme on Kangaroo mother care there is significant improvement on post-natal mother knowledge. The study concluded that the structured teaching programme was effective in improving knowledge regarding Kangaroo mother care.

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