

“Effectiveness of planned health teaching program on knowledge and practices regarding breast feeding problems and its management among postnatal mothers in selected rural area”.

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Abstract: **Background:** *One of the major challenging issues in obstetric nursing is the of breast feeding problems and its management among postnatal mothers. The success in breast-feeding is dependent on early initiation and effective management of breast feeding problems during early postnatal days.* **Objective:**

1) To assess the knowledge and practice score of breast feeding problems and its management among postnatal mothers 2) To assess the effectiveness of health teaching program on knowledge and practices of breast feeding problems and its management among postnatal mothers 3) To find out the association between knowledge and practice score of breast feeding related problems and its management with their selected demographic variables. **Method:** Effectiveness of planned health teaching program on knowledge

and practices regarding breast feeding problems and its management among postnatal mothers in selected rural area. 60 samples were selected by using purposive sampling technique. The sociodemographic was collected by using questionnaire method on Age, Parity, occupation, education type of feeding. Pre-test was done on 1st day. Collected data was analysed using descriptive an inferential statistics

Result: Average knowledge score in pre-test was 13.4 which increased to 16.2 in post-test. T-value for this test was 7.6 with 59 degrees of freedom. Corresponding p-value for this test was small (less than 0.05), the null hypothesis is rejected. It is evident that the knowledge among postnatal mothers improved significantly after health teaching program.

Keywords: Breastfeeding, Knowledge, Postnatal Mother

1. INTRODUCTION

In current situation breast feeding possess some problems and if it is not promptly detected and rectified, it may lead to adverse consequences. The causes may be classified as those: Due to lack of knowledge of mother immaturity, listening and intelligent counselling can solve the problem. 1) Infant's attachments to breast when poor, it leads to quick shallow sucks instead of slow and deep. 2) Areola remains outside the lips. This causes nipple pain.

As per the data, the rate of early breastfeeding during 0-6 months had fallen from 53.7 per cent in 2015 to 51.1 per cent in 2020. "This is serious. It shows that India has not made progress on supporting, promoting and protecting breastfeeding at the policy and programme implementation level.

2. PROBLEM STATEMENT

“Effectiveness of planned health teaching program on knowledge and practices regarding breast feeding problems and its management among postnatal mothers in selected rural area”.

3. OBJECTIVES OF THE STUDY

1. To assess the knowledge and practice score of breast feeding problems and its management among postnatal mothers.
2. To assess the effectiveness of health teaching program on knowledge and practices of breast feeding problems and its management among postnatal mothers.
3. To find out the association between knowledge and practice score of breast feeding related problems and its management with their selected demographic variables.

4. HYPOTHESES

H₀: There is no significance effect of planned teaching programme on knowledge and practice regarding breast feeding problems and its management among postnatal mothers in selected rural area (0.05)

H₁: There is significant effect of planned teaching on knowledge and practice regarding breast feeding problems and its management among postnatal mothers in selected rural area ($p=0.05$)

H₂: There is significant effect of planned teaching on knowledge and practice regarding breast feeding problems and its management among postnatal mothers($p=0.05$)

5. METHODOLOGY

RESEARCH APPROACH: Quantitative approach

RESEARCH DESIGN: Quasi experimental two group Pre-test Post-test design

SETTING OF THE STUDY: selected rural areas

RESEARCH VARIABLES

1. **Independent variables:** In this study planned health teaching programme was independent variable.
2. **Dependent variable:** In this study knowledge and practices among postnatal mothers was dependent variable.

TARGET POPULATION- The target population is postnatal mothers in selected rural areas.

ACCESSIBLE POPULATION- Accessible population selected for this study includes postnatal mothers in selected rural areas.

SAMPLE SIZE: Study sample comprised of 60 postnatal mothers in experimental group.

SAMPLING TECHNIQUE: In this study, the sampling technique used in this research study in non-probability convenient sampling technique.

6. CRITERIA FOR SAMPLES SELECTION

Inclusion criteria

1. Both primi and multipara postnatal mothers
2. Postnatal mothers dealing with breast complications
3. Postnatal mothers who are willing to participate in the study.

Exclusion criteria

1. Postnatal mothers who are having medical illness.
2. Postnatal mothers with other puerperal complications.
3. Postnatal mother having past breast surgical history
4. Not willing participates in the study.

7. PLAN FOR DATA ANALYSIS:

The data analysis will be done according to the objectives of the study. Both descriptive and inferential statistics will be used.

1. Analysis of the demographic data will be done by frequency and percentage.
2. Paired test will be used to determine the difference between pre-test and post-test score in terms of effectiveness of the planned health teaching programme.
3. Chi-square test will be used to determine the association between selected demographic variables and post-test knowledge score.

8. RESULT

SECTION - I

Table 1: Fisher’s exact test for the association between knowledge regarding breast feeding related problems and its management with their selected demographic variables

Demographic variable		Knowledge			p-value
		Average	Good	Poor	
Age of postnatal mother	18 - 20 years	10	1	1	0.751
	21- 25 years	21	3	1	
	26 to 30 years	15	2	0	
	Above 30 years	5	0	1	
Week of postnatal mother	1 week	5	0	1	0.390
	2 weeks	33	6	1	
	3 weeks	9	0	1	
	4 weeks	4	0	0	
Educational status	Primary school	12	3	2	0.493
	High school	35	3	1	
	Graduate	2	0	0	
	Ph.D.	2	0	0	
Occupation	Employed	47	6	3	1.000
	Unemployed	4	0	0	
Family Type	Nuclear	32	4	1	0.727
	Joint	19	2	2	
Family income	Up to Rs. 10000	1	0	0	0.838
	Rs. 10001-20000	21	4	1	
	Rs. 20001-30000	24	2	2	
	Above Rs. 30000	5	0	0	

Table 2: Fisher’s exact test for the association between knowledge regarding breast feeding related problems and its management with their selected obstetrical variables

Obstetrical Variable		Knowledge			p-value
		Average	Good	Poor	
Type of delivery	Normal vaginal delivery	33	4	0	0.121
	LSCS	13	2	3	
	Forceps delivery	5	0	0	
Type of feeding	Breast feeding	49	6	3	1.000
	Formula feeding	2	0	0	

SECTION - II

Table 3: Fisher’s exact test for the association between practices regarding breast feeding related problems and its management with their selected obstetrical variables

Obstetrical Variable		Practices		p-value
		Average	Good	
Type of delivery	Normal vaginal delivery	28	9	0.604
	LSCS	12	6	
	Forceps delivery	3	2	
Type of feeding	Breast feeding	41	17	1.000
	Formula feeding	2	0	

Table 4: Fisher’s exact test for the association between practices regarding breast feeding related problems and its management with their selected demographic variables

Demographic variable		Practices		p-value
		Average	Good	
Age of postnatal mother	18 - 20 years	9	3	0.929
	21- 25 years	17	8	
	26 to 30 years	13	4	
	Above 30 years	4	2	
Week of postnatal mother	1 week	5	1	0.504
	2 week	26	14	
	3 week	8	2	
	4 week	4	0	
Educational status	Primary school	14	3	0.436
	High school	26	13	
	Graduate	2	0	
	Ph.D.	1	1	
Occupation	Employed	39	17	0.570
	Unemployed	4	0	
Family Type	Nuclear	25	12	0.557
	Joint	18	5	
Family income	Up to Rs. 10000	0	1	0.194
	Rs. 10001-20000	21	5	
	Rs. 20001-30000	18	10	
	Above Rs. 30000	4	1	

Limitation

1. The study was limited to postnatal mother’s age group of 18-30 and above.
2. This study is limited to specific dimensions of breast feeding complications and its management among postnatal mothers in selected rural area.
3. The tool used was not standardized
4. The study was conducted using non-convenient sample.

Recommendations

1. The researcher recommends the following studies.
2. The study can be done in a large sample size to confirm the results of the study.
3. The descriptive study can be conducted to assess the effectiveness of information booklet regarding breast feeding problems and its management among postnatal mothers.
4. An evaluative study can be done to determine the effectiveness of planned health teaching

programme breast feeding problems and its management.

5. A descriptive study can be conducted to assess the attitude regarding breast feeding problems and its management among postnatal mothers in selected rural area.
6. A similar can be undertaken by using different teaching methods.
7. The study will enhance awareness regarding breast feeding problems.
8. The comparative study can be conducted.

CONCLUSION

This chapter presents the conclusion drawn, implications, limitations and recommendations. The focus of this study was to assess effectiveness of planned health teaching programme on knowledge and practices regarding breast feeding problems and its management among postnatal mothers in selected rural area. In this study Quasi experimental nonequivalent two group pre-test and post-test research design was used 60 samples were selected from selected rural area using non probability convenient sampling technique the data was collected by questionnaire data was analyzed and interpreted by applying statistical method. The study provided deeper insight and empathy towards the needs of the expert guidance from the guide

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