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"A study to assess the effectiveness of structured teaching programme on knowledge and practice of infant care among primipara mothers" in Indira Gandhi Children Hospital, Bangalore

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Abstract

Background of the study: Infant health in India shows drastic figures. Delhi ranks 9th (out of 29 states) 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. Only 29.9% children in Delhi are given ORS during diarrhoea.

Rajasthan -- though governed by a woman -- ranks 22nd in IMR and nearly bottom of the heap when itcomes to immunisation while Jammu and Kashmir is ranked 14th in IMR. Each of the five states goingto elections now -- J&K, Delhi, Chhattisgarh, Mizoram and Rajasthan -- fare dismally in critical infant health elements like breastfeeding rates, immunization and ORS use in diarrhoea. These facts have been highlighted in the report cards published by Breastfeeding Promotion Network of India (BPNI) onthe state of infant health in the country.

''a study to assess the effectiveness of structured teaching programme on knowledge and practice of infant care among primipara mothers in Indira Gandhi Children Hospital at Bangalore.''

Objectives of the study

1. To assess the knowledge of primipara mothers on Infant care.
2. To assess the practice of primipara mothers on Infant care.
3. To evaluate the effectiveness of Structured teaching programme on Knowledge and practice ofprimipara mothers on Infant care.
4. To find the correlation between knowledge and practice regarding Infant care.
5. To determine the association between knowledge of primipara mothers with selected demographicvariables.
6. To determine the association between practices of primipara mothers with selected demographicvariables.

Method: This was experimental study total 60 subjects were selected through non probability convenient sampling technique. Exploratory design was used. Data was collected by structured interview technique. Data collected under the 2 sections (socio-demographic data, knowledge questionnaire and practice checklist).The reliability of the tool was established by split half method formula. The reliability result of knowledge was r=0.904.prepared structured teaching programme regarding infant care.

Result: In pre test 16 (40%) of the Primipara mothers had average knowledge only and remaining 24(60%) had low knowledge. Post test scores compared to pre test scores showed an observable increase in the knowledge of Primipara mothers as 12 (30%) of them had high knowledge and remaining 28(70%) had average knowledge. The mean of knowledge score in pre test was increased from 16.2±2.85 to 22.45±2.13 in post test.

Conclusion: The study proved that structured teaching programme on infant care among primipara mothers was scientific, logical and cost effective strategy.

Keywords: teaching programme, infant care, primipara mothers

Introduction

Today's children are tomorrow's citizen. A well-developed child contributes to the national welfare so children are the world's most valuable asset and their wellbeing indicates the standard of living of the country. Children's health reflects the national health and wealth. They constitute about 40 percent of the total population. [1] These most precious part of the world are most delicate and highly susceptible for infections.

Each new generation offers humanity another chance for survival. A child is regarded as the

future hope of the family.[2] A healthy child is one of the finest gift of nature and also the most awe-inspiring and emotional event in one's life time. [3] The period after childbirth is a critical time for the health of mother and her baby. With the joy of getting a child, most families tend to believe that nine months of added care and anxiety have come to an end. Nevertheless, the truth is that the first year after delivery are the most vulnerable days for the mother and child, demanding an extreme care during this time. [4] 'Motherhood' is the most beautiful experience in life without which a woman is incomplete [5].

Mother is the true owner and care taker of her baby. The best and most precious gift the mother can give to the baby is the gift of health .The health and survival of the infant depends upon the health status of the mother and her awareness, education and skills in mother craft. The motheris more receptive to advice concerning herself and her baby during antenatal period than any other time. [1]

The majority of children enter the world in a healthy manner.

But sometimes they develop conditions that requiremedical concern and treatment. Infants are particularly susceptible to infection much more than the older children, because their new immune system is not sufficiently developed to fight the bacteria, viruses and parasite that cause infection.[5]

In India, over 2.1 million children die annually before reaching their fifth birthday. The statistics are mostshocking among infants. While around 4 million children die within the first 28 days of life across the planet annually. Infant mortality rate in Jharkhand is 49, 45 per 1,000 live births in Orissa — much higher than India's national estimates of 39 per 1,000. [6]

Recent data from the World Health Organization showed that about 60% of all deaths, occurring among children aged less than five years (under-five children) in developing countries, could be attributed to malnutrition. It has been estimated that nearly 50.6 million under-five children are malnourished, and almost 90% of these children are from developing countries. Bangladesh is one of the countries with the highest rate of malnutrition. The recent baseline survey by the National Nutrition Programme (NNP) showed high rates of stunting, underweight, and wasting. However, data from the nutrition surveillance at the ICDDR, B hospital showed that the proportion of children with stunting, underweight, and wasting.[7]

A prospective community based intervention study was conducted in a slum area of Karachi, Pakistan with the objective of evaluating the impact of health education on mothers' knowledge on preventive health practices. 150 households were studied in the intervention as well as non intervention group. A Comparison between the pre and post intervention scores between the two groups revealed that knowledge of the non intervention group changed from 11.5 to 16.1 (p>0.05) as compared to the intervention group, in which it is changed from 10.2 to 32.2 (p<0.05) [22]

A child's birth is a rebirth of mother. The process of birth takes only few hours but it is the most hazardous period of life, since it is associated with largest number of death as compared to any other phase of life. The mother's timely behavior in seeking care for her sick child is a critical factor for reducing mortality. Such seeking behavior will not take place unless the mother recognize signs and symptoms of illness, interpret the possible severity of conditions and take an action to seek care in timely manner. [8]

So there is a need to plan implement a teaching programme on knowledge regarding specific neonatal infections and their prevention among primigravida mothers. This can reduce high risk of infant mortality rate in the country.

Statement of the problem

A study to assess the effectiveness of structured teaching programme on knowledge and practice of infant care among primipara mothers in Indira Gandhi Children Hospital at Bangalore.

Objectives of the Study

1. To assess the knowledge of primipara mothers on Infant care.
2. To assess the practice of primipara mothers on Infant care.
3. To evaluate the effectiveness of Structured teaching programme on Knowledge and practice of primipara mothers on Infant care.
4. To find out the co-relation between the knowledge and practice of primipara mothers on Infant care.
5. To determine the association between knowledge of primipara mothers with selected demographic variables.
6. To determine the association between practices of primipara mothers with selected demographic variables.

Results

Analysis is categorizing, ordering, manipulating and summarizing of the data to obtain answers to the research questions. [57]

This section presents the analysis and interpretation of data collected from 40 Primipara mothers in order to assess the effectiveness of structured teaching programme on Infant Care. The collected data were tabulated, analyzed and interpreted with the use of descriptive and inferential statistics.

Objectives of the Study

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4. To find out the correlation between knowledge and practice of primipara mothers on Infant care.
5. To determine the association between knowledge of primipara mothers with selected demographic variables.
6. To determine the association between practices of primipara mothers with selected socio-demographic variables.

Hypotheses

H1: There will be significant difference of knowledge before and after implementing structured teaching programme.

H2: There will be significant difference of practice before and after implementing structured teaching programme.

H3: There will be significant correlation between the knowledge and practice of primipara mothers on Infant care.

H4: There will be significant association between knowledge regarding Infant care with selected demographic variables of primipara mothers.

H5: There will be significant association between practices on Infant care with Infant care selected demographic variables of primipara mothers.

The analysis and interpretation of data is presented under the following sections.

Section I: Analysis and interpretation of socio demographic characteristics of mothers.

Section II: Analysis and interpretation of knowledge scores of mothers on infant care.

Section III: Analysis and interpretation of practice scores of mothers on infant care

Section IV: Evaluation of the effectiveness of the STP on knowledge and practice on infant care among primipara mothers.

Section V: Analysis and interpretation of data to find out the correlation between knowledge and practice scores.

Section VI: Analysis and interpretation of data to find out the association between the knowledge and practice scores with selected socio demographic variables.

Table 1: Frequency distribution of primipara mothers according to their socio demographic characteristics.

N = 40

Socio-Demographic variables	No of respondents (f)	% of respondents
Age (in years)		
18-22	22	55.00
23-27	14	35.00
28 &above	4	10.00
Educational status		
No formal education	2	5.00
Primary	12	30.00
Secondary	6	15.00
PUC	10	25.00
Diploma or/and graduation	8	10.00
Post Graduation	2	5.00
Occupation		
House wife	10	25.00
Coolie	16	40.00
Government employee	6	15.00
Private employee	8	20.00
Family Income(monthly)		
Rs. 1000/--Rs.2000/-	2	5.00
Rs.2001/--Rs.4000/-.	24	60.00
Rs.4001/--Rs.6000/-.	6	15.00
Rs.6001/--and above	8	20.00
Place of Residence		
Urban	18	45.00
Rural	22	55.00
Source of Information		
News paper	4	10.00
Mass media	10	25.00
Magazine	6	15.00
Others	20	50.00
Gestational age at the time of data collection		
Below 3 months	1	2.5
3-5 months	19	47.5
6-8 months	13	32.5
8 months and above	7	17.5

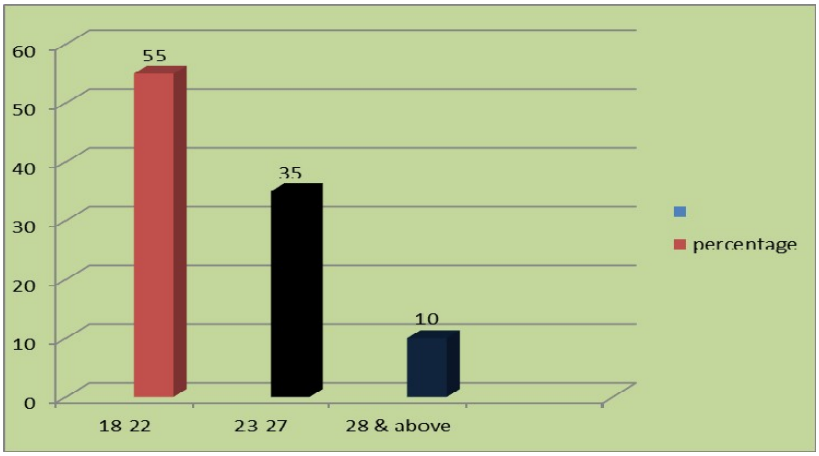

Fig 1: Percentage distribution of Primipara mothers by their Age.

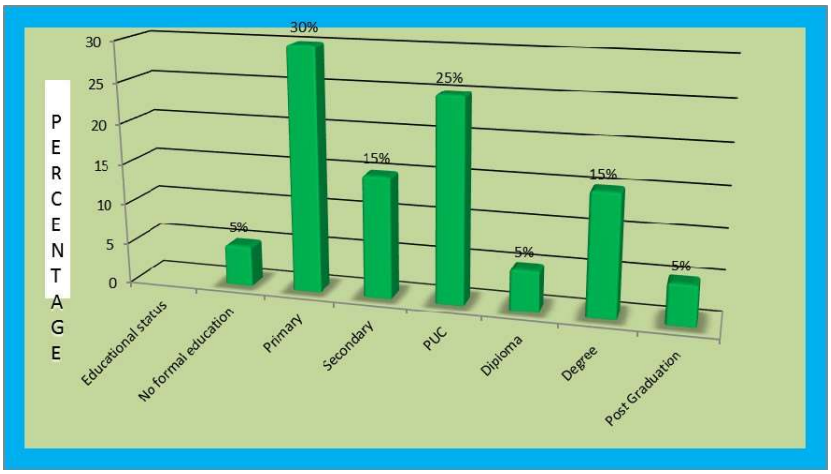

Fig 2: Percentage distribution of Primipara mothers by their Educational status

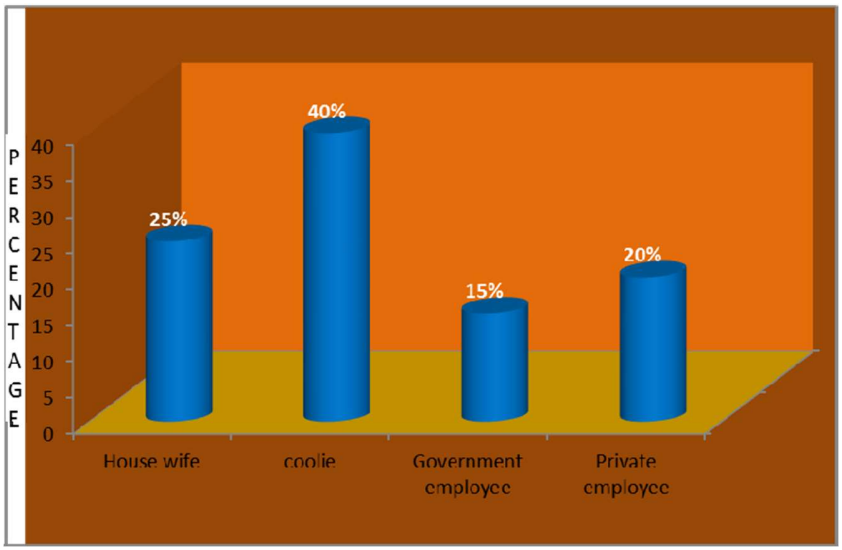

Fig 3: Percentage distribution of Primipara mothers by their occupations.

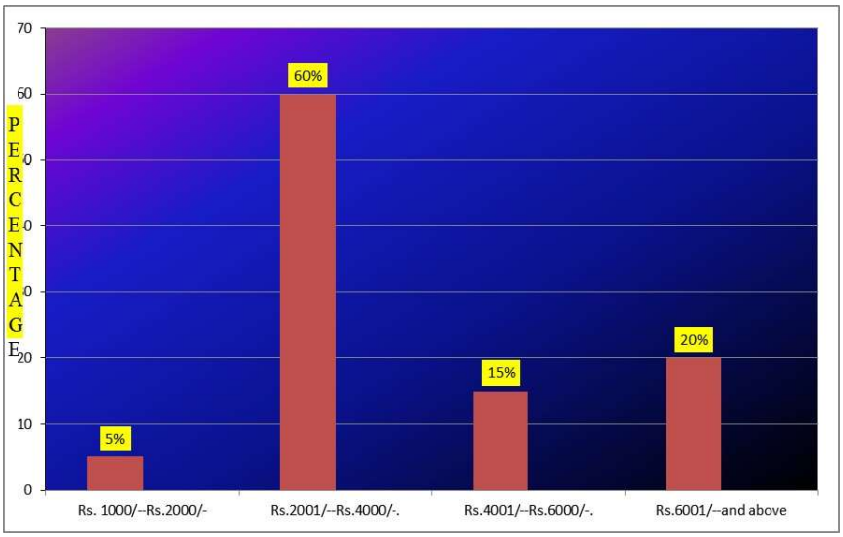

Fig 4: Percentage distribution of Primipara mothers by their family monthly income

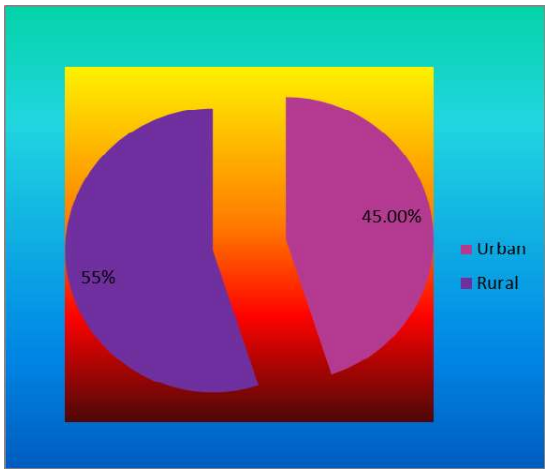

Fig 5: Percentage distribution of Primipara mothers by their place of residence

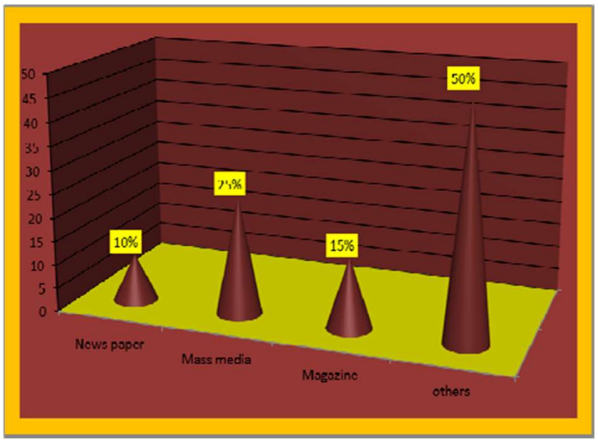

Fig 6: Cylindrical diagram depicting distribution of study subjects according to Gestational age distribution

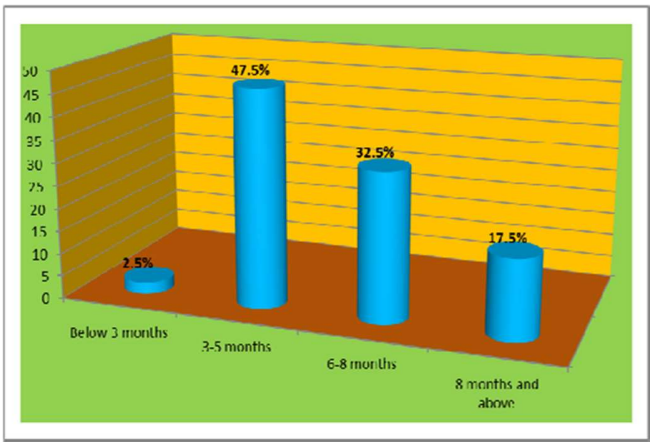

Fig 7: Shows the percentage between below 3 month and above 8 month

Table 2: Percentage distribution of knowledge levels of Primipara mothers on Infant Care in pre test and post test

N = 50

Levels of knowledge	Pre test		Post test	
	Frequency	Percentage	Frequency	Percentage
High knowledge	00	00	12	30
Average knowledge	16	40	28	70
Low knowledge	24	60	-	-

Table 2 Presents the overall knowledge levels of Primipara mothers on Infant Care. In pretest 16 (40%) of the Primipara mothers had average knowledge only and remaining24(60%) had low knowledge.

Post test scores compared to pre test scores showed an observable increase in the knowledge of Primipara mothers as 12 (30%) of them had high knowledge and remaining 28(70%) had average knowledge.

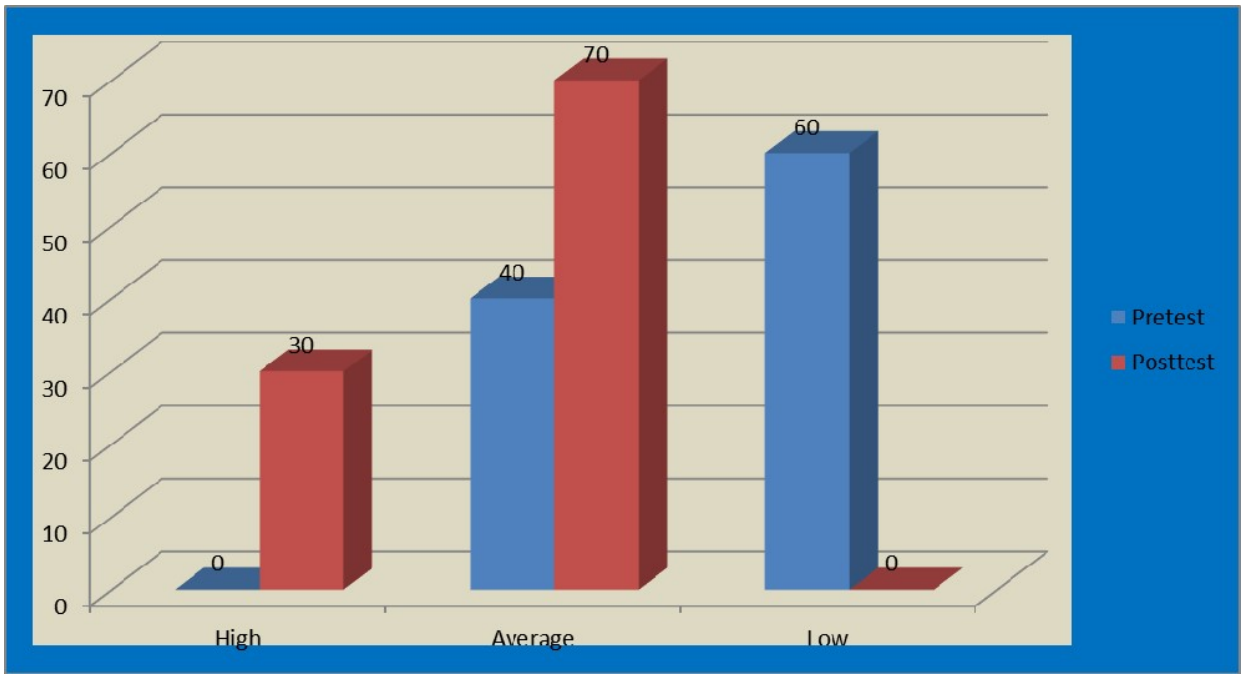

Fig 8: Percentage distribution of primipara mothers by their knowledge on Infant Care in pre test and post test

SECTION – V: Analysis and interpretation of data to find out correlation between knowledge and practice scores.

Karl Pearson's coefficient correlation was used to compute the correlation between knowledge and practice of primipara mothers regarding Infant care. The 'r' was found to be 0.052, hence a positive correlation was found between knowledge and practice scores of primipara mothers. Hence the research hypothesis H_1 is accepted.

Section VI: Association between pretest knowledge scores and selected socio demographic variables.

Table 3: Association between knowledge scores and selected socio demographic variables

SL. No	Socio demographic variables	Df	Chi-square value	Table value	Level of significance
1.	Age	1	3.523	3.84	0.05
2.	Educational status	1	12.2	3.84	0.05
3.	Occupation	1	7.29	3.84	0.05
4.	Place of residence	1	6.532	3.84	0.05
5.	Source of information regarding health	1	2.434	3.84	0.05

Table 4: Association between practice scores and selected socio demographic variables

SL. No.	Socio demographic variables	df	Chi-square value	Table value	Level of significance
1.	Age	1	2.732	3.84	0.05
2.	Educational status	1	4.905	3.84	0.05
3.	Place of residence	1	5.633	3.84	0.05
4.	Occupation	1	3.346	3.84	0.05
5.	Source of information regarding health	1	1.346	3.84	0.05

Table no.4 depicts the association between practices scores and socio demographic variables. For age of sample the calculated χ^2 value was 2.732 and table value of χ^2 at 5% level of significance with degree of freedom 1 is 3.84. As the calculated value was less than the table value the research hypothesis related to age of the sample and practice score was rejected. Hence no significant relationship was observed between the age of the primipara mothers and theirpractice score on infant care.

For educational status of sample the calculated χ^2 value was 4.905 and table value of χ^2 at 5% level of significance with degree of freedom 1 is 3.84. As the calculated value was more than the table value the hypothesis related to educational status of the sample and practice score was accepted. Hence a significant relationship was observed between the educational status of the primipara mothers and their practice score on infant care.

For place of residence the calculated χ^2 value was 5.633 and table value of χ^2 at 5% level of significance with degree of freedom 1 is 3.84. As the calculated value was less than the table value the research hypothesis related to place of residence of the sample and practice score was accepted. Hence a significant relationship was observed between the place of residence of primipara mothers and their practice score on infant care.

For occupation status of sample the calculated χ^2 value was 3.346 and table value of χ^2 at 5% level of significance with degree of freedom 1 is 3.84. As the calculated value was less than the table value the research hypothesis related to occupation of the sample and practice score was rejected. Hence no significant relationship was observed between the occupation of the primipara mothers and their practice score on infant care.

For source of information of sample the calculated χ^2 value was 1.346 and table value of χ^2 at 5% level of significance with degree of freedom 1 is 3.84. As the calculated value was less than the table value the research hypothesis relatedto source of information of the sample and practice score was rejected. Hence no significant relationship was observed between the source of information of the primiparamothers and their practice score on infant care.

Discussion

The present study was conducted to evaluate the effectiveness of structured teaching programme on knowledge and practices regarding infant care. In order to achieve the objectives of the present study, quasi experimental one group pretest post test design with an evaluative approach was adopted. The sample was selected by convenience random sampling technique. The sample comprised of 40 primipara mothers and the data were collected from them before and after the administration of STP.

Section I: Analysis and interpretation of socio demographic characteristics of mothers.

Section 1 reveals that, out of 40 subjects, 22(55%) of the subjects belong to 18-22 years, and 4(10 %) were 28 and above years of age. Only 2(5%)of the subjects had no formal education, 12(30%) up to primary education, and 2(5%) of the subjects had post graduation.10(25%)of the subjects, were housewives, 16(40%) were coolie, 6(15%) were government employee, and remaining 8(20%) of the subjects were private employee. 2(5%) subjects had an income of Rs.1000/--Rs2000/-, and most of them, 24(60%)had income between Rs. 2001/--4000

Majority-22 (55%) of subjects were staying in rural area and remaining 18(45%) were in urban area. 4(10%) subjects were getting information from news paper, followed by 10(25%) subjects were getting from mass media,6(15%) were getting from magazine and 20(50%) were getting from others like friends, neighbours, relatives, etc.

Section II: Analysis and interpretation of knowledge scores of mothers regarding infant care.

In pre test 16 (40%) of the Primipara mothers had average knowledge only and remaining 24(60%) had low knowledge. Post test scores compared to pre test scores showed an observable increase in the knowledge ofPrimipara mothers as 12 (30%) of them had high knowledge and remaining 28(70%) had average knowledge.

The mean of knowledge score in pre test was increased from 16.2±2.85 to 22.45±2.13 in post test.

Section III: Analysis and interpretation of practice scores of mothers regarding infant care.
In pre-test 13(32.5%) subjects had average level of practice and 27(67.5%) had average level of practice regarding infant care. Whereas in post test 15(37.5%) of subjects demonstrated a high level practice, 23 (57.5%) had average and 2(5%) subjects had low level of practice regardinginfant care.
In pre-test the mean and standard deviation was 18±3.24, whereas in post test it increased to 25.66±3.14.

Section IV: Evaluation of the effectiveness of the STP on knowledge and practice regarding infant care primipara mothers.
The overall mean difference was 7.3 with paired't' value 19.07. Thus it was revealed that the post test mean score was significantly higher than the pre test mean score. The table value of paired't' test at 39 degree of freedom and at 0.05 level of significance is 2.26. Since the calculated value was higher than the table value, the research hypothesis H_2 was accepted. Hence there was a significant difference between the pre test and post test scores on Infant Care.
The overall mean difference was 08.66 with paired 't' value 17.49. Thus it was revealed that the post test mean score was significantly higher than the pre test mean score. The table value of paired't' test at 39 degree of freedom and at 0.05 level of significance is 2.26. Since the calculated value was higher than the table value, the research hypothesis H_3 was accepted. Hence there was a significant difference between the pre test and post test practice scores on Infant Care.

Section – V: Analysis and interpretation of data to find out correlation between knowledge and practice scores.
Karl Pearson's coefficient correlation was used to find the compute the correlation between knowledge and practice of primipara mothers regarding Infant care. The 'r' was found to be 0.052, hence a positive correlation was found between knowledge and practice scores of primipara mothers. Hence the research hypothesis H_1 was accepted.

Section VI: Association between knowledge and practice of primipara mothers regarding infant care and selected socio demographic variables.
The association between knowledge of primipara mothers regarding infant care and their selected socio demographic variables was tested by using chi square test at 0.05 level of significance. Findings revealed that significant association was found between the knowledge score of the primipara mothers and their attribute variables like Educational status, occupation, place of residence. The knowledge score regarding infant care was not found associated with remaining attribute variables like Age and Source of information.
The association between practice of primipara mothers regarding infant care and their selected socio demographic variables was tested by using chi square test at 0.05 level of significance. Findings revealed that significant association was found between the practice score of the primipara mothers and their attribute variables like educational status and place of residence. The practice score regarding infant care was not found associated with remaining attribute variables like Age, occupation and source of information regarding infant care.

Conclusion
This chapter presents the conclusions drawn, implications, limitations, suggestions and recommendations.
The main focus of this study was to evaluate the effectiveness of structured teaching programme on knowledge and practice on infant care among primipara mothers.
The following conclusions were drawn from the study

- In pre test 16(40%) of the Primipara mothers had average knowledge only and remaining 24(60%) had low knowledge. In pre-test 13(32.5%) subjects had average level of practice and 27(67.5%) had average level of practice on infant care.
- the mean of knowledge score in pre test was 16.2±2.85 and the mean and standard deviation of practice on Infant care was 18±3.24
- In Post 12 (30%) mothers had high knowledge and remaining 28(70%) had average knowledge. in post test 15(37.5%) of subjects demonstrated a high level practice, 23(57.5%) had average and 2(5%) subjects had low level of practice on infant care.
- In post test the mean knowledge score was 22.45±2.13 and mean practice score was 25.66±3.14.
- There was a significant difference between the pre test and post test practice scores on Infant Care.
- A positive correlation was found between knowledge and practice scores of primipara mothers.
- A significant association was found between the knowledge score of the primipara mothers and their attribute variables like Educational status, occupation, place of residence. The knowledge score regarding infant care was not found associated with remaining attribute variables like Age and Source of information.
- A significant association was found between the practice score of the primipara mothers and their attribute variables like educational status and place of residence. The practice score regarding infant care was not found associated with remaining attribute variables like Age, occupation and source of information regarding infant care average monthly income of the family.

Summary
The present study was conducted to evaluate the effectiveness of structured teaching programme on knowledge and practices on infant care among primipara mothers. In order to achieve the objectives of the present study, quasi experimental one group pretest post test design with an evaluative approach was adopted. The sample was selected by convenience random sampling technique. The sample comprised of 40 primipara mothers and the data were collected from them before and after the administration of STP.

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2. To assess the practice of primipara mothers on Infant care.
3. To evaluate the effectiveness of Structured teaching programme on Knowledge and practice of primipara mothers on Infant care.
4. To find the correlation between knowledge and practice regarding IV infusion therapy.

5. To determine the association between knowledge of primipara mothers with selected demographic variables.
6. To determine the association between practices of primipara mothers with selected demographic variables.

With Infant care selected demographic variables of primipara mothers.

The research design selected for the study was quasi-experimental research of one group pre-test and post-test design. The independent variable was STP and dependent variable was knowledge and practice of primipara mothers on Infant care.

The sample of this study comprised of 40 primipara mothers in pediatric units of Indira Gandhi Children Hospital Bangalore. Convenient sampling technique was used to draw the sample for the study.

The tool developed and used for the data collection was structured interview schedule and check list. 05 experts validated the content validity of the tool. The reliability of the tool was established by Karl Pearson's coefficient of correlation ('r'). The value co-efficient of correlation was found to be 0.89.

Teaching plan was prepared with a view to enhance the knowledge of primipara mothers, consisted of various aspects on selected Infant care and was organized in sequence and in continuity.

Pilot study proved the tool and study to be comprehensible, feasible and acceptable.

Data collection procedure began initially with permission from medical superintendent and consent was taken from the respondents. The investigator personally explained the need and assured them of the confidentiality of their responses.

The pre-test was administered followed by a teaching programme; post-test was administered 07 days after the teaching plan by using the same structured interview schedule and check list, used in the pre-test.

The Data gathered was analyzed and interpreted according to objectives. Descriptive statistics were mean, median, standard deviation and inferential statistics like't' test were included to test the hypothesis in different levels of significance and the data obtained are presented in the graphical form.

Major Findings of the Study

Analysis and interpretation of socio demographic characteristics of mothers.

Out of 40 subjects, 22(55%) of the subjects belong to 18-22 years, and 4(10 %) were 28 and above years of age. Only 2(5%)of the subjects had no formal education, 12(30%) up to primary education, and 2(5%) of the subjects had post graduation. 10(25%)of the subjects, were housewives, 16(40%) were coolie, 6(15%) were government employee, and remaining 8(20%) of the subjects were private employee. 2(5%) subjects had an income of Rs.1000/--Rs2000/-, and most of them, 24(60%) had income between Rs. 2001/--4000

Majority-22 (55%) of subjects were staying in rural area and remaining 18(45%) were in urban area. 4(10%) subjects were getting information from news paper, followed by 10(25%) subjects were getting from mass media, 6(15%) were getting from magazine and 20(50%) were getting from others like friends, neighbours, relatives, etc.

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The mean of knowledge score in pre test was increased from 16.2$\pm$2.85 to 22.45$\pm$2.13 in post test.

Analysis and interpretation of practice scores of mothers on infant care.

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In pre-test the mean and standard deviation was 18$\pm$3.24, whereas in post test it increased to 25.66$\pm$3.14.

Evaluation of the effectiveness of the STP on knowledge and practice on infant among primipara.

The overall mean difference was 7.3 with paired't' value 19.07. Thus it was revealed that the post test mean score was significantly higher than the pre test mean score. The table value of paired't' test at 39 degree of freedom and at 0.05 level of significance is 2.26. Since the calculated value was higher than the table value, the research hypothesis H_2 was accepted. Hence there was a significant difference between the pre test and post test scores on Infant Care.

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Analysis and interpretation of data to find out the correlation between knowledge and practice scores.

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remaining attribute variables like Age and Source of information.

The association between practice of primipara mothers regarding infant care and their selected socio demographic variables was tested by using chi square test at 0.05 level of significance. Findings revealed that significant association was found between the practice score of the primipara mothers and their attribute variables like educational status and place of residence. The practice score regarding infant care was not found associated with remaining attribute variables like Age, occupation and source of information regarding infant care.

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