

Research Journal of Pharmaceutical, Biological and Chemical Sciences

Effectiveness of Educational Intervention Package Regarding Postpartum Management.

Sathiyalatha Sarathi*, and V Hemavathy.

Sree Balaji College of Nursing, Bharath University, Chennai, Tamil Nadu, India.

ABSTRACT

"Maternal-neonatal mortality is neither an emerging epidemic nor one of the world's major killers. Maternal deaths especially remain singular, individual and silent tragedies" (Dr. Arvindmathur, WHO-SEARO). In order to prevent post partum complications and enhance maternal and child health, a pre-experimental study was conducted among post-natal mothers admitted at Sree Balaji Medical College and Hospital. Structured questionnaire was used to obtain data. Educational awareness package was implemented through printed cards and self instructional booklets). The study found that there was statically significant difference between pre and post test level of knowledge t=24.6 at P= 0.001 level.

Keywords: postnatal care, Puerperal sepsis, Haemorrhage, Maternal deaths.

*Corresponding author



INTRODUCTION

"Mothering" is the strongest human instinct. When a child is born, mother is also born. "Parents influence their offspring eugenically before conception, physiologically during pregnancy and socially after birth. Mother contribution and commitment is far greater than father" (RC Mitchell) [7]. The postnatal period starts immediately after childbirth and ends at 42 days [1]. It also very crucial period for mother and baby because of many complication may arises during this period [5 - 6].Worldwide, 800 women dies everyday due to complications during pregnancy and childbirth. Every year 289,000 women dies due to obstetrical causes like haemorrhage 35%, pre-eclampsia and eclampsia 18%, sepsis 8%, other causes like under nutrition and co-infection 30% [8 - 9]. Also 44%, 6.6 million under 5 deaths are in neonatal period (WHO, 2010). These tragedies are preventable and can be prevented.

Objectives:

- 1. To assess the pre and post-test level of knowledge regarding postpartum management among postnatal mothers
- 2. To evaluate the effectiveness of educational intervention package regarding postpartum management
- 3. To associate selected demographic variables with post test knowledge score.

MATERIALS AND METHODS

- A Pre-experimental study was conducted with 60 samples between the age group of 18-40 years admitted in post natal wards of Sree Balaji Medical College and Hospital. Pre experimental one group pre test and post test design was adopted for this study. Non probability convenience sampling techniques was used to select the sample.
- Postnatal mothers who had normal vaginal/ instrumental and LSCS and both primi para and multi para mothers were included in this study. Postanal mothers with medical and obstetrical complications were excluded from the study.

Tools/Instruments used for data collection:

Tool 1: Demographic data of postnatal mothers.

Tool 2: Structured questionnaire (r=0.86). It consists of 25 multiple choice questions. It has organized under 5 sections.

Tool 3: Educational intervention package regarding postpartum management.

Validity and reliability: contact validity was obtained from the experts in the field of nursing, obstetrics and gynaecologist. To assess the reliability test, re-test method was used. The reliability was score r=0.86 which is found to feasible to conduct the present study [3].

Data collection procedure: After obtaining formal permission from the institutional authority, the data was collected by interview schedule (30 minutes were allotted per sample.)The Pre test was done on the second day of postnatal period. And educational intervention package was implemented on the same day of pre test. The post test was assessed on the day of discharge.

Major findings of the study

- Majority of the women 30 (50%) were between the age group of 18-25 years and minority of women 8(13%) were between the age group of 36-40 years.
- Most of the women 42 (70%) had normal vaginal delivery 6(10%) had instrumental delivery 12(20%) had L.S.C.S.
- In this study most of the women were 34(56%) were primi para and 26(44%) were multi para.

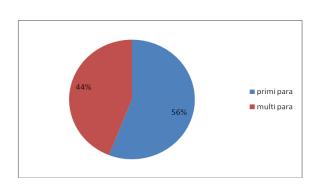


Fig 1: distribution of parity

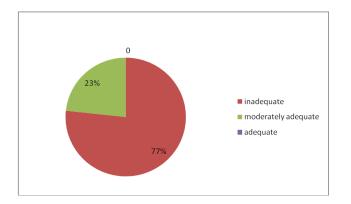


Fig 2: distribution of type of delivery

- The study revealed that in pretest 46(76.7%) had inadequate knowledge and 14(23.3%) had moderately adequate knowledge.
- In post test 42(70%) gained adequate knowledge and 18 (30%) gained moderately adequate knowledge.

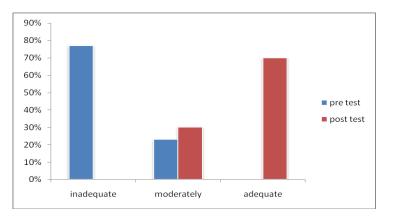


Fig 3: knowledge regarding post partum management in pre test and post test

Table 1: comparison of pre- test and post- test knowledge regarding post partum management

SI:NO	KNOWLEDGE	MEAN	SD	Paired't' value
1	Pre test	7.06	4.3	24.6***
2	Post test	16.42	2.1	

The table 1 revealed that the obtained mean value was 7.06 and SD was 4.3 in pre test. In post test the mean value was 16.42 and SD was 2.1. The paired 't' test value was 24.6 which inferred that there was

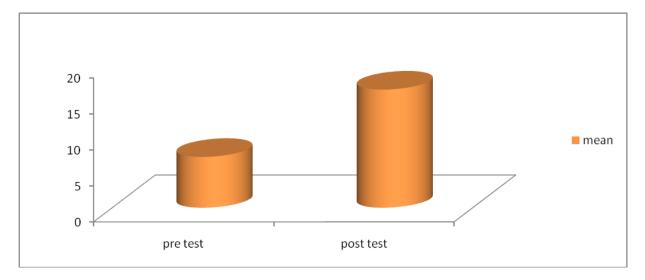
July-August

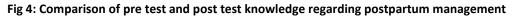
2016

RJPBCS 7(4)



highly significant gain in the post test than the pre test at P<0.001 level. Hence the educational intervention package was found to be effective in promoting the awareness about the post partum management.





CONCLUSION

Worldwide 56-70% maternal deaths occurs in the postpartum period [4]. It is an important public health challenge to prevent these tragidies by improving the health awareness and quality care adherence to the standards in order to prevent postnatal complications [2]. Health care professionals must integrate this educational intervention package along with treatment and nursing care with the hope of reducing the incidence of maternal deaths.

REFERENCES

- Bobak . Jenson. Maternal and Gynaecological care. Philadelphia: mosby publication, 5th edition,1993;
 Pp (350 504)
- [2] Dawn C.S. Obstetrics, Neonatology and Reproductive and child health. Calcutta: 16th edition. Dawn book private Ltd,2004; Pp(211 226)
- [3] Denise F.Polit and chery ITatanoBeck. Nursing research- Generating and assessing evidence for nursing practice.Lippincott Williams and Wilkins, 8th edition, 2008; Pp (80 85)
- [4] Dutta D.C. Obstetrics, 5th Edition, Jaypee Brother Medical Publications (p) Ltd. Pp (410 421)
- [5] Hay-Smith J,MorkvedS, Et al. J Obst Gyn 2009;113(3): 733-735.
- [6] Jhons A Heit. J Internal Med 2005; 143(10);697-706.
- [7] Meharban Singh. The Art and Science of Baby and Childcare. India: CBS Publications 4th Edition, 2015;
 Pp (20 25)
- [8] Park K. Preventive and Social Medicine. India: Banarsidas Bhanot Publishers.22ndEdition, 2013; Pp-340 345
- [9] WHO. Global Health Observatory <u>http://www.Who.Int</u>