



## A PRE-EXPERIMENTAL STUDY TO ASSESS THE EFFECTIVENESS OF PLANNED TEACHING ABOUT KNOWLEDGE REGARDING KANGAROO MOTHER CARE AMONG POSTNATAL MOTHERS IN SELECTED HOSPITAL

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### ABSTRACT

**Aims:-** To assess the effectiveness of planned teaching about knowledge regarding kangaroo mother care among postnatal mothers in selected hospital. **Material and Method:-** Non-probability convenient sampling technique was used to select the sample. Quantitative research approach with pre-experimental one group pre-test-post-test research design was used. The data collected during the month of February 2021 among postnatal mothers. Total 80 samples were selected by using sample calculation formula. After obtaining consent from the subject demographic data, structured questionnaire for knowledge was administered and data was collected. **Result:-** The comparison between the mean of pre-test and post-test for knowledge showed that the mean of differences was  $11.88 \pm 4.32$  the calculated 't' value was 24.58 are much higher than the tabulated value at 5% level of significance for overall knowledge score of subjects which is statistically acceptable level of significance. Hence it is statistically interpreted that the Planned Teaching on knowledge regarding kangaroo mother care among subject was effective. **Conclusion:-** The analysis of the study revealed that there was a significant improvement in the level of knowledge of the postnatal mothers. The planned teaching proved to be effective in improving the knowledge and of the postnatal mothers in selected hospital.

### KEYWORDS :

#### INTRODUCTION

Kangaroo Mother Care is a straightforward and easy practice to care for new-born babies, especially for preterm infants. The Kangaroo Care method involves skin-to-skin contact with the mother, father, or a caregiver. It is a potent method to promote the health and general wellbeing of preterm as well as full-term infants. This method is also useful in reducing the infant mortality rate of low birth weight or preterm infants. Thus, Kangaroo Mother Care not only provides care, but is believed to have extraordinary benefits for infants by providing basic survival needs such as mother's warmth, breast milk, stimulation, and protection.<sup>1</sup>

#### Kangaroo Mother Care can be given to small infants in two different ways:

##### Intermittent KMC:

This type of Kangaroo Mother Care is not given all the time but only when a mother visits her infant who is still being nursed in an incubator.

##### Continuous KMC:

With continuous Kangaroo Mother Care, the mother provides KMC all the time, both day and night.<sup>2</sup>

World Health Organization recommends that KMC is practiced continuously until the baby weights 2,500 g. or until 40 weeks after gestation. Most of the preterm babies gain between 15 and 30 grams a day. It means that Kangaroo Mother Care (KMC) should be practiced at least three to four weeks (day and night) after the hospital discharge when the baby is discharged at 2,000 g.<sup>3</sup>

#### Background Of The Study

Kangaroo Mother Care is an alternative intervention for hypothermia among preterm infants by, keeping the baby close to the mother's skin. Dr Edgar Rey Sanabria, a paediatrician initiated the model of Kangaroo Mother Care (KMC) at the Department of Health in Mobato, Colombia in 1978 Since then, Kangaroo Mother Care has been well known for provide a quality care to new-born infants especially to Low Birth Weight babies in Colombia. The World Health Organization (WHO) has defined kangaroo mother care as early, continuous, and prolonged skin-to-skin contact between the mother and preterm babies; exclusive breastfeeding or

breast milk feeding; early discharge after hospital-initiated kangaroo mother care with continuation at home; and adequate support and follow-up for mothers at home.<sup>4</sup>

#### Need Of The Study

The New-born Mortality Rate in India is 24/1000 live births which translates into approximately 9.6 lakhs under-5 child deaths, annually. New-born deaths contribute to 61% of the Under-5 deaths in our country.

In the Indian context; age, height, weight (pre-pregnancy and pregnancy weight gain), nutritional anemia, socioeconomic status, ANC check-up, education (maternal and family), parity, maternal morbidity, bad obstetric history, physical labor, tobacco exposure, infections all influence the new born weight. In addition, fetal defects due to genetic conditions or environmental factors limit the normal development of the fetus.<sup>13</sup>

#### Objectives Of The Study

##### Primary Objective:-

To assess the effectiveness of planned teaching about knowledge regarding kangaroo mother care among postnatal mothers in selected hospital.

##### Other Objective:-

1. To assess the existing knowledge regarding kangaroo mother care among postnatal mothers in selected hospital.
2. To evaluate the effectiveness of planned teaching on knowledge regarding kangaroo mother care among postnatal mothers.
3. To associate the knowledge regarding kangaroo mother care among postnatal mothers with their selected demographic variables such as age, type of family, education, occupation, no. of deliveries, gravida.

#### Hypothesis

##### Primary Hypothesis:-

##### H<sub>0</sub>:-

There will be no significant difference between the pre-test and post-test knowledge score regarding kangaroo mother care among postnatal mothers in selected hospital which is measured at  $p < 0.05$  level of significance.

**H1:-**

There will be significant difference between pre -test and post-test knowledge score regarding kangaroo mother care among postnatal mothers in selected hospital which is measured at  $p < 0.05$  level of significance.

**Other Hypothesis:-**

**H2:-**

There is association of knowledge regarding kangaroo mother care among postnatal mothers with their selected demographic variable such as age, education, occupation, No. of deliveries, gravida.

**Ethical Aspects:-**

1. Prior permission was obtained from the institutional ethical committee.
2. Prior permission was obtained from the selected hospital.
3. Informed written consent was obtained from study subject.
4. Anonymity was maintained by coding throughout the study.

**Sampling Criteria**

**Inclusive Criteria**

- a. Postnatal mothers who are admitted in selected hospital
- b. Postnatal mothers who are present at the time of data collection
- c. Postnatal mothers who are willing to participate in the study
- d. Postnatal mothers who can read and write Marathi

**Exclusive Criteria:**

- a. Postnatal mothers who are already participate in such type of study.
- b. Postnatal mothers who are professional health care providers

**Subject Withdrawal Criteria:**

- a) The subject can be withdrawn at any time.

**Methodology**

Non-probability convenient sampling technique was used to select the sample. Quantitative research approach with pre-experimental one group pre-test-post-test research design was used.

The data collected during the month of February 2021 among postnatal mothers. Total 80 samples were selected by using sample calculation formula. After obtaining consent from the subject demographic data, structured questionnaire for knowledge was administered and data was collected.

**Tools:-**

**Section – A – Demographic data**

It includes age of mother in year, family type, Education, occupation, number of deliveries, and gravida.

**Section – B – A Structured Knowledge Questionnaire**

There are multiple choice questions to evaluate the knowledge of kangaroo mother care among the subjects. Total 30 items were selected for the structured knowledge questionnaire.

**Table 1 - Categorization of level of knowledge**

Sr. No	RANGE	LEVEL
1	(1-6)	Poor
2	(7-12)	Average
3	(13-18)	Good
4	(19-24)	Very good
5	(25-30)	Excellent

**Table 2 - Significance of difference between knowledge score in pre-test and post-test of subjects. n=80**

**RESULT:-**

Main study was conducted in different setting as used in pilot study. After acquiring the necessary consent, the main study was conducted among 80 subjects in selected hospital. The finding of the demographic variables was revealed that, regarding age, 47.5% of subjects were in the age group of 18-24 years, 47.5% were in the age group of 25-31 years, 5% were in the age group of 32-38 years.

The Type family 58.8% of the subjects were belonging to nuclear family, 41.3% in joint family. The Education 2.5% of the subjects were primary standard, 16.3% of them were educated to secondary high school, 33.8% of them were educated to higher secondary college, 41.3 of them were educated to Graduation/Diploma and 6.3 of them were educated to post graduation degree.

The occupation 85% of subjects were housewife, 5% of them were in job 10% of subjects were labor. The number of deliveries 60% of subjects had one delivery, 40% of subject had two deliveries.

The gravida 56.3% of subjects had primigravida, 43.8% of subject had multigravida. It is observed from pre- test that, 8.8% of the subjects in pre-test had poor level of knowledge score and 91.3% had average level of knowledge score none of the subjects had good, very good, excellent level of knowledge score.

It is observed from post –test that, 17.5% of the subjects in post-test had good level of knowledge score, 41.5% had very good and 40% had excellent level of knowledge score. For comparison of pre-test and post-test knowledge score of subjects regarding kangaroo mother care. During pre-test mean score was 10.92 with standard deviation of 2.39, whereas mean post-test was 22.81 with the standard deviation of 3.65. The mean difference in pre-post-test was  $11.88 \pm 4.32$  mean, standard deviation and mean difference values are compared and student’s paired ‘t’ test is applied at 5% level of significance. The tabulated value for  $n=80-1$  i.e., 79 degree of freedom was 1.98 the calculated ‘t’ value i.e., 24.58 are much higher than the tabulated value at 5% level of significance for overall knowledge score of subjects that is statistically acceptable level of significance. Thus, the H1 is accepted.

Hence it is statistically interpreted that the Planned Teaching on knowledge regarding kangaroo mother care among subject was effective.

**CONCLUSION**

The analysis of the study revealed that there was a significant improvement in the level of knowledge of the postnatal mothers in selected hospital. The planned teaching proved to be effective in improving the knowledge of the postnatal mothers in selected hospital.

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