Original Resear	Volume-7 Issue-11 November-2017 ISSN - 2249-555X IF : 4.894 IC Value : 79.96
al Of RPP/	Obstetrics & Gynecology
Const * Valo	A STUDY ON KNOWLEDGE AND PRACTICE ON MATERNAL BEDSHARING AMONG MOTHERS IN A SELECTED HOSPITAL AT MANGALURU
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and practice on maternal bedsha	xperimental descriptive correlative research design was carried out among 100 mothers whose babies are within onths of age who were recruited by purposive sampling technique with the purpose of assessing their knowledge ring by using structured knowledge questionnaire and a self report practice checklist. The finding in the current thers had an average knowledge whereas 4% had very good knowledge on maternal bedsharing and the mean on

safe practice (14.42) is more than that of unsafe practice (12.52). The results showed that although the mothers had an average knowledge regarding maternal bedsharing but their practices were safe. Mothers with good knowledge can bring down the Sudden Infant death rate.

KEYWORDS : Maternal bedsharing, Knowledge, Practice.

Introduction

Bedsharing, co-beddding and co-sleeping are terms that have been used to describe the practice of caregivers sharing bed with infants which is a relatively common practice around the world. Bedsharing has benefits but the risks of serious injury to infants are concerning the health care professionals who care for infants and their families (Ateah CA& Hamelin K J., 2008).

Rooming –in is now recommended by the World Health Organization (WHO) and UNICEF as part of the Baby Friendly Hospital Initiative (BFHI) programme to promote breastfeeding (Das R. R et al., 2014). Leguien and Carpentier reported an increase risk for Sudden Infant death syndrome when bedsharing is associated with maternal alcohol consumption and smoking and Carroll-Pankhrust and Mortimer concluded that bedsharing was related to some SIDS like deaths, particularly if the adult was of large size (Ateah C A & Hamelin K J., 2008).

The association between bed sharing and sudden infant death has been recognised for thousands of years. Indeed there is reference to it in the Holy Bible: "this woman's child died in the night; because she overlaid it" Overlaying was the classical belief for the cause of sudden infant death (Mitchell E A., 2010).

A detailed case-control study which was conducted for all sudden unexpected deaths in infancy in the participating regions of the United Kingdom showed that Bed sharing for the whole night was a significant risk factor for infants whose mothers smoked. This study confirms the importance of certain risk factors for the sudden infant death syndrome and identifies others-for example covers over the head, side sleeping position-which may be amenable to change by educating and informing parents and health care professionals (Fleming P J et al., 1996).

A descriptive study was conducted in Canada to determine mother practices and experiences of bed sharing with their infants and also to determine knowledge of the risks. They used a self report questionnaire where it was mailed to 1,122 mothers of infants whose infants aged three months. The results showed that 293 completed questionnaires received (26% return rates). Approximately 13% of respondents who had bed shared reported an experience with bed sharing in which they had rolled onto or partway onto their infant. The study concluded that health care professionals should promote mothers in providing safe sleeping environment to their infants (Ateah CA& Hamelin K J., 2008).

As midwives, the main role is to properly assess the knowledge and practice of mothers regarding maternal bedsharing compared to no bed sharing.

Objectives of the Study

- To determine the knowledge regarding maternal bed sharing among mothers using structured knowledge questionnaire.
- To determine the maternal bed sharing practices among mothers using practice checklist.
- To find the correlation between knowledge and practice on maternal bedsharing among mothers.
- To find the association of knowledge on maternal bedsharing with selected demographic variables.
- To find the association of maternal bedsharing practice with selected demographic variables.

Research Methodology

A Quantitative research approach with non-experimental descriptive correlative research design was used to assess the knowledge and practice of 100 mothers whose babies are within 0-3½ months of age regarding maternal bedsharing. The sample was recruited by purposive sampling technique. The investigator explained the purpose of the study to the mothers to win their cooperation. Confidentiality was assured and informed consent was taken from every mother. The tool was administered to the participants with proper explanation. A structured knowledge questionnaire and a self report practice checklist were used to collect the data. The data was tabulated and analysed using descriptive and inferential statistics.

RESULTS

Baseline data

Out of 100 mothers whose babies are within 0-31/2 months of age, 46 (46%) percent of the subjects are in the age group 21-24 years. Majority of the subjects were from an Islam religion 70 (70%). 54 (54%) of the respondents are staying in a joint family, most of the subjects had Primary school and high school education 31(31%). Majority of their family income 37 (37%) is between Rs. 5,001-10,000. Majority of the subjects had only 1 child 50 (50%), 67 (67%) of them have a child who is below 3 months of age, 100 (100 %) of their babies slept beside the mother on the same bed, 89 (89 %) of their babies always sleeps beside the mother on the same bed.

Knowledge of the mothers on Maternal Bedsharing

Figure 1 reveals that 50 mothers (50%) had an average knowledge and 46 mothers (46%) had poor knowledge on maternal bedsharing whereas few had very good knowledge (4%) on maternal bedsharing.

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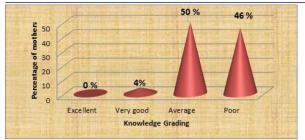


Figure 1: Bar Diagram Showing the Percentage Distribution of mothers according to their Grade

Practice of Maternal Bedsharing among Mothers

The reported safe practices of mothers on maternal bedsharing reveals that all the 99% of the mother place her baby adjacent to herself while sleeping and 55% Mother don't sleep with baby if she's too tired.

The reported unsafe practices of mothers on maternal bedsharing reveals that 95% of the baby sleeps in a very soft mattress and 8% of the family members are smoking.

Table 1: Comparison of Safe and Unsafe practices on Maternal Bedsharing among mothers n=100

Practice	Mean ± SD	Mean	Obtained ' t'	'p'
		Difference	value	value
Safe practice	14.42 ± 1.18	1.9	9.7	0.001*
Unsafe practice	12.52 ± 1.26			

 $t_{99} = 1.98, p \le 0.05$

*0.05 level of significance

Data presented in table 1 shows that the mean of safe practice is more than that of unsafe practice and the p value (p=0.001) is less than the 0.05 which suggest that there was a significant differences in the practice of safe and unsafe practices among mothers on maternal bedsharing. Therefore most of the mothers maternal bedsharing practice were safe.

Correlation between Knowledge and Practice on Maternal **Bedsharing among Mothers**

The correlation between knowledge and practice reveals that r value is 0.3 and the p value is 0.01 which is significant at 0.05 level of significance. There is a moderate positive correlation between knowledge and practice on maternal bedsharing. Thus the research hypothesis (H1) was accepted and null hypothesis (H01) was rejected and figure 2 shows that as knowledge increases there was moderate increase in the practice on maternal bedsharing.

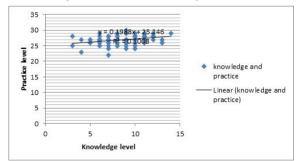


Figure 2: Correlation between Knowledge and Practice Association of Knowledge on Maternal Bedsharing with Selected **Demographic Variables**

There was no association between knowledge on maternal bedsharing with the selected demographic variables (Age of the mothers, type of family, educational status, monthly income and age of the last child).

Association of Practice on Maternal Bedsharing with Selected **Demographic Variables**

There was no association between practice on maternal bedsharing with the selected demographic variables (Age of the mothers, type of family, monthly income and age of the last child). But there was an association between the practice on maternal bedsharing with selected demographic variables like educational status and the number of children with the calculated p value was less than 0.05 (p<0.005).

DISCUSSION

The findings in the study reveal that 50% of the subjects had an average knowledge on maternal bedsharing and only 46% had poor knowledge on maternal bedsharing. The findings is supported with the study findings with that of the study conducted by Ateah AC, Hameline KJ on Maternal Bed Sharing Practices, Experiences, and Awareness of Risks shows that 88.7% of the mothers had knowledge about maternal bedsharing and its risk whereas 10% agreed that there were no risk on bedsharing with their infant (Ateah CA & Hamelin K. J., 2008).

The reported safety practices of maternal bedsharing in the current study reveals the findings 99% of the mother place her baby adjacent to herself while sleeping, 93% of the mother tie her hair before sleeping with her baby, 90% baby face is kept clear while sleeping, 84% mother sleeps with her baby in a comfortable big size bed, 84% Sleeps in a well ventilated room, 71% baby is kept on his/her back while sleeping, 66% baby is not placed in between mother and father while sleeping and 55% Mother don't sleep with baby if she's too tired. The findings in the study support the study findings with that of the study conducted by Hutchison BL, Thompson JM, Mitchell EA on Infant care practices related to sudden unexpected death in infancy: a 2013 survey shows that 74% of the mothers are placing their infant in the supine position which is the safe practice which they are practicing, whereas 53% of the mothers are placing their infant either in the side, back and prone position (Hutchison B L et al., 2015).

CONCLUSION

It is concluded that although the mothers had an average knowledge regarding maternal bedsharing but their practices were safe. Mothers with good knowledge can bring down the Sudden Infant death rate. Better the knowledge best is the practice.

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