

Newborn Care Practices Among Mothers: a Cross Sectional Survey



Medical Science

KEYWORDS : Newborn; Practices; Mothers

Ms. Archana K Raj

Assistant Professor, Pediatric Nursing Department, Sree Gokulam Nursing College, Trivandrum -695607, Kerala.

ABSTRACT

A cross sectional survey was conducted to assess the newborn care practices among mothers who frequented to pediatric OPD of selected hospital, Trivandrum. The objective of the study was to describe the newborn care practices among mothers. The research design selected for this study was descriptive. The sample for the study comprised of 120 mothers who were recruited using non probability convenience sampling technique. The tool used for the data collection was a structured questionnaire. After obtaining permission from the hospital authorities, the data gathered were analyzed and interpreted according to objectives. The main findings were related to practicing on skin care, eye care, cord care, thermoregulation, breast feeding and immunization. The present study elicited the presence of various malpractices in the new born care. The study findings strongly pointed out the fact that there is much need to educate the mothers in newborn care practice

Introduction:

New born is the gift given by the god. The care from the mother enhances a good bonding between mother and the baby. When the baby is in mother's womb he/she takes whatever he needs from the mother but when he comes out he can't able to take anything from the mother. Attention to health is central to the objectives of general education. Child needs good health for effective growth and development. The international declaration of rights of the child states that the child must be given the means, requisite for the normal development, mentally, and morally. If the mother doesn't have knowledge to care her baby, then the baby's needs cannot be met. As working women are in busy time schedule, they will forget to care their babies properly.

The infantile period of growth and development is much more essential when compared to other periods. Indian association for infant mental health (2006) States infant mental health can be defined as the social and emotional wellbeing that results when infants are supported by nurturing relationships. Research on brain development shows that child's environment is crucial during the infant period. So during that period mother need more attention towards on child health in all aspects like social emotional development.

Care practices immediately after delivery play a major role in causing neonatal morbidities and mortalities. Essential newborn care practices were outlined to decrease the neonatal morbidity and mortalities. These practices include clean cord care, thermal care, and initiating breast feeding immediately after birth (within one hour). The traditional practices like applying cow dung on the umbilical stump, oil instillation/gripe water instillation in to nose etc. also contribute to newborns risk of morbidity and mortality.

Families are most central and enduring influence in children's lives. Parents are also central in pediatric care. The health and wellbeing of the children are inextricably linked to their parents. Physical, emotional and social health, social circumstances and child rearing practice. (ShanthiGhosh, 2006).

The infants have to face many problems like diarrhea, respiratory infections, vaccine preventable diseases, malnutrition. These are due to failure to offer breast milk, non-practicing of exclusive breast feeding, non-compliance with immunization on account of illiteracy, ignorance, cultural and social beliefs pose the greatest risks of death in the infant.

Newborn mortality is one of the most important problems that need immediate attention in or to achieve millennium development goals about a million newborns die in the world every

year, 90% of them in the developing countries due to poor newborn care practices. Most of these deaths are preventable by simple interventions in the community. However in most, the target countries, the implementation of essential newborn care has been very poor.

According to Suraj Gupta (2005), mother is an important primary care provider and therefore, her education and access to information will help her, about care of her infant. As children constitute the most important and vulnerable segment of our population, subjects represent the most important health worker as far as child health is concerned. Health education inputs for mother should be strengthened. So that she is capable of preventing and identifying common childhood illness.

Infant mortality rate: **total:** 47.57 deaths/1,000 live births (2012). The newborn health challenge faced by India is more formidable than experienced by any other country in the world. It's estimated that out of 3.9 neonatal deaths that occur worldwide, almost 30% occur in India. Global fewer than five mortality rates have declined over past five decades, but the neonatal mortality rates still remain high. Although the neonatal mortality rates shows decreasing trend, compared to 25% reduction in the neonatal deaths in 1980s, the decline in 1990s was only 15%. Irrespective of urban rural differences in MMR, neonatal deaths are a bane of poorest, the major causes of neonatal deaths globally were estimated to be complications of prematurity (28%) sepsis and pneumonia (26%) birth asphyxia and injuries (23%), tetanus (7%), congenital anomalies (7%) and diarrhea (3%). A recent study done by baqui. et al (2006) in rural Uttar Pradesh showed that out of 618 neonatal deaths, 32% deaths were on the day of birth, 50% occurred during the first 3 days of life and 71% were during the first week.

Padiyath.M.A, Ekambaram.M et.al. (2009) conducted a study to assess the knowledge and attitude of neonatal care practices among postnatal subjects in a tertiary care hospital in south India states that knowledge of subjects was inadequate in areas of umbilical cord care (35%) thermal care (76%) and vaccine preventable diseases. Nineteen percentages of them still practices oil instillation in to nostrils of newborn and 61% of them administer grape water to their babies. This study indicates that awareness and attitude of postnatal subjects towards neonatal care has lots of importance especially in those who belonging to lower socio economic status. There is scope for improvement by providing better care and health education for antenatal mothers.

Materials & Methods:

The study used a quantitative approach with a descriptive de-

sign. 120 mothers were recruited using non convenient sampling technique who was attending pediatric outpatient department of a selected hospital, Trivandrum. According to the objectives of the study a socio demographic Performa and a self-structured questionnaire was prepared by the researcher after extensive literature review and expert opinion. Socio demographic Performa was used to collect sample characteristics and structured questionnaire which consists of 41 multiple choice questions to assess the new born care practices of subjects in various areas such as skin care, cord care, eye care, thermo regulation and breast feeding. Pilot study was conducted among 10 subjects to ensure the feasibility of the study. The reliability of the tools was ensured by inter rated reliability method. The main study was conducted after obtaining the approval of research committee of the institution; informed consent was obtained from subjects after ensuring the confidentiality of data going to be collected. The investigator established a good rapport with the subjects and data was collected using the questionnaires. The data obtained was analyzed in terms of objectives of the study using descriptive statistics with SPSS trial V 19.0.

Results:

Socio demographic data of subjects:

43.3% of subjects belonged to 24-29years age group, 75.8% of subjects belonged to Hindu community and 57.5% belonged to nuclear family.79.2% of them were housewives and about 59.16% of subjects have monthly income less than 5000/- and 58.8% of subjects have only one child.

New born care practices:

Skin care practices

Majority 70.8% of subjects give first bath for their baby after leaving the hospital, 62.6% of subjects bath their baby twice in a day, 70% of them preferred lukewarm water to bath their baby, 65.9% of subjects used coconut oil massage for the body of baby before bathing, 70% of subjects used baby soap to bath the baby, 95% of subjects prefer cotton clothing for their newborns, 65.8% used soap and Dettol in warm water to wash baby's clothing and dry it under sunlight, 90.83% of subjects changed the baby's napkin whenever it becomes wet, 67.4% of subjects consulted doctor if their newborns develop any white colored pimples in their body, about 19.3% of subjects squeezed the nipple and remove the milk comes from baby's nipple, while 59.2% of subjects consulted doctors.

Eye care practices:

50% of subjects cleanse the eyes from inner canthus to the outer canthus, 54% of subjects applied kajal on newborns eyes among them, 17% used homemade kajal and 35% of them used commercially available kajal, 28% of subjects used clean fingers for applying kajal while 14% of subjects used matchstick for applying kajal.

Umbilical Cord care practices:

35% of subjects applied salt with oil in the umbilical cord of newborn which is a common malpractice, 63% of subjects cleanse the umbilical cord of newborn and cover it and 64% of subjects will consult doctor if any redness or foul smell came from

umbilical cord of newborn baby.

Thermoregulation:

About 55.9% of subjects checked the temperature of newborn by touching the forehead and neck, 58.3% of subjects covers baby's entire body including neck, 67.5% of subjects cover the baby properly to manage hypothermia.

Breast feeding practices:

69.2% of subjects gave colostrum as the first feed for their baby while 12.5% gave holy water and gold with honey as pre-lacteal feed, 40% of subjects feed their baby according to his or her need and 60% of them maintain sitting position while feeding, 80% of subjects do not give anything along with breastfeeding. 50% of subjects provide burping with cupped hands from top to bottom at the back which is a wrong practice while 46% of subjects followed right practice from bottom to top, 41.7% of subjects breastfeed for about 10-15 minutes from one breast and 90% of subjects do burping to prevent regurgitation.

Immunization practices:

80.8% of subjects give medicine for fever if the baby develops fever after vaccination, 75.8% of subjects did not do anything if blister develops after BCG vaccination, 50% of subjects take vaccine for their baby if they fail to take vaccine and 35% of subjects are sure that they will not forget to take vaccine and 96.7% of subjects take vaccines according to immunization card

Discussion:

The present study revealed that there exist certain malpractices in various aspects of newborn care among the subjects. After the study it was surprising that 35% of subjects apply salt mixed oil in umbilical cord of the newborn. 12.5% of subjects prefer holy water as the first feed to their baby. The major finding is that majority of subjects have adequate knowledge regarding newborn care practices.

The findings of the study were supported by a comparative study conducted by S. Puri, V. Bhatia et al (2008) on Prevalent Newborn Rearing Practices, in Urban and slum Population of Chandigarh, India. The study showed the results that (38.4%) Women gave birth at home only. (45.1%) deliveries were conducted by skilled birth attendant as compared to (7.1%) by traditional birth attendants. (61.9%) of newborn infants had been bathed within the 0-12 hours. Number of infants who were given colostrum were (80.9%) and (26.9%) were put on breast feed within 1-2 hours of birth. The study concludes that prevalence of various harmful practices regarding newborn care like application of kajal, delay in initiation of BF, prevalence of pre lacteal feed etc are prevalent in the society especially in the slums. The study suggested that dissemination of information & education regarding health material & newborn care practices is the need of the day.

The present study elicited the presence of various malpractices in the new born care, hence shows the need for educating subjects who are not well versed with new born care.

REFERENCE

1. Rollart P, Homlin J. Mosby's Review series Pediatric nursing. 1st Edition, Elsevier publications: India private limited, 1996 page no: 2-16 | 2. Singh and Jacob. Pediatric Nursing; Second edition. Indore NB Brothers publishers, 2012, page no 1-13. | 3. Wong, Eighth edition. Essentials of pediatric nursing, Elsevier publications, India private limited, 2009 page no 221-230. | 4. Policies to reduce child mortality. Journal of United nations economic and social council, 2008, Volume 2, Page no 12-45 | 5. Khan M E. Breast feeding and weaning practices in India. Indian journal of practices. 1990, Volume 5, page no 71-78 | 6. Park K. Text book of preventive and social medicine, 20th edition. Banrisbhanot publications: 2009, Page no 113,456. | 7. Dutta A K. Home based newborn care how effective and feasible. Indian journal of pediatrics. 2009, Volume 10, Page no 835-40 | 8. Hoque A, Selvin B.G. Birth practice in urban slums of Dhaka Bangladesh. Journal of Women and Health. 1996, Volume 1 page no 41-58. |