

Knowledge, awareness, and practice of postnatal care among mothers

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Abstract

Objective: The objective was to study the knowledge, awareness, and practices regarding the postnatal care among the mothers. **Design and Setting:** A pre-structured and pre-tested questionnaire was used to evaluate knowledge and awareness of postnatal care in mothers at a tertiary care center. The questionnaire was given after stabilization between 1 and 5 days of the postnatal period. **Materials and Methods:** Totally, 200 postnatal mothers (18-35 years) out of 540 mothers who were given antenatal and postnatal education in our antenatal care center were selected. **Study Period:** June 2013-September 2013. **Results:** Knowledge of mothers regarding breastfeeding practices (78%), thermal care (89%), skin and eye care (72%) was good. They have poor knowledge regarding dangers of pre-lacteal feeds (45%), timing of first bath after birth (60%), umbilical cord care (60%), and vaccination (36%). About 32% of them are practicing oil instillation into nostrils while 44% of mothers were intended to use gripe water for infantile colic. **Conclusion:** The study highlights that there is vital need to improve the knowledge and awareness in the society regarding community-based newborn care. We should also strive toward helping removing myths and wrong practices, which are rampant in the community.

Key words: Postnatal care, Knowledge attitude, and practices, newborn care, maternal education

INTRODUCTION

The postnatal period, defined as the time immediately after the birth of the baby and up to 6 weeks (42 days) after birth, is critical for newborn and mother. The majority of the neonatal deaths (75%) occurs during the 1st week of life, and between 25% and 45% occurs within first 24 h of birth. Two-thirds of all neonatal deaths occur due to prematurity, asphyxia, and sepsis while inappropriate feeding and cultural practices during the postnatal period may pose further risks to the life of newborn. All these maternal and neonatal problems could be reduced if women receive appropriate postpartum care [1].

In addition, postnatal care provides health professionals with the opportunity to promote exclusive breastfeeding, personal hygiene, appropriate feeding practices, and family planning counseling, and services. Moreover, postnatal care allows for the provision of immunization of newborns to provide them with optimal start to life. Inappropriate practices such as delayed initiation of breastfeeding, early bathing, and delayed clothing, not seeking care when newborns are sick and applying harmful material on cord-stump increase the risk of newborn deaths [2-4].

Most of the deaths in the newborn period can be prevented or managed by appropriate care at home and community

health facilities. However, primary health care facilities are often ill equipped to provide essential newborn care (ENC) to all newborn and special newborn care to sick newborns. Therefore, it is essential to provide education to mothers regarding appropriate postpartum care as improved household practices and use of services, often at the community level, will increase newborn survival [4]. The purpose of this study was to assess the correct knowledge, attitude, and practice of postnatal mothers regarding newborn care.

MATERIALS AND METHODS

This study was conducted in a tertiary care center between June 2013 and September 2013 after obtaining approval from Institutional Ethics Committee. 200 postnatal mothers (18-35 years) out of 540 mothers who were given antenatal and postnatal education in our antenatal care (ANC) center were selected. Informed consent was obtained from all the mothers before recruitment. A pre-structured and pre-tested questionnaire was given to all the mothers after stabilization between 1 and 5 days of postnatal period to evaluate the knowledge and awareness of postnatal care.

Socio-demographic information such as age, education, occupation, residence, type of family, and family income were recorded. Mothers who were sick and those mothers who were separated from their child (admitted in the neonatal care unit or

expired) were excluded from the study. The data were recorded and analyzed using appropriate statistical analysis.

RESULTS

Totally, 200 mothers were recruited in the study with a mean age of 22.18±3.8 years (range 18-35 years). About 49% of them had completed only primary school, and only 12% were graduates while remaining mothers were illiterate. 25% were working mothers, out of which 25.6% were skilled worker, 33.3% were unskilled, and rests were laborer. Most of the mothers (37%) belonged lower socio-economic class (modified Kuppaswami classification). 55% belonged to joint families. 35% of the mothers were primipara. 72% mothers delivered vaginally, and the caesarean section was done in 28% of them.

About 90% of mothers were aware of the fact that babies are to be kept with the mother for warmth. Rest of them used other methods to provide warmth. They were informed about the dangers of hot bottles and that it should never be practiced. About 60% of the mothers opined that the bath should be given after 24 h of birth. The reason for this practice was the belief that blood/fluid/vernix, which stay on newborn's skin after birth is impure and has to be removed thoroughly. Furthermore, all the mothers in the present study had a fairly good idea in terms of maintaining body temperature with warm clothes and keeping the baby with a mother with 10-15% of them describing the Kangaroo method itself. However, there were few mothers (7.5%) who were completely unaware of this method.

The technique of burping was described by 45% of the mothers when asked what they would do, when the child regurgitates after breastfeeding. 72% mothers give breastfeeding to their baby in correct position. Early initiation of breastfeeding was not practiced by many mothers due to various reasons. Pre-lacteal feeds such as tea, jaggery, honey, sugar water, and plain water were given to 16% of infants. 78% mothers were aware of the fact exclusive breastfeeding should be continued up to 6 months of age while 18% opined that it should be continued up to 4 months. About 6% of mothers opined to continue breastfeeding up to 24 months. About 22% of mothers used top milk before initiation of breastfeeding. Packaged milk (29.79%) was the most commonly used top milk followed by a goat (25.53%) and cow's milk (23.41%).

About 60% of the mothers knew that the umbilical cord should be kept dry as it may be a place for infection to enter the baby's body. 30% were in the opinion of using baby powder of a renowned company of baby products. Eyes should be kept clean by cotton soaked in sterile water as per 70% of mothers. 16% mothers were used to apply Kajal application. About 6% of the mothers were of opinion that oil instillation in the nostrils is good for baby and out of them, 66% were of

opinion that it protects from cough and cold by clearing the nose and throat, and 4% of them used it as a measure to reduce body heat. The rest of them was practicing it because of the compulsion from elders. Since there is always a chance that administration of gripe water might mask the symptoms of a major illness, this practice should be discouraged. Reasons for using gripe water were stated as it helps in digestion of milk easily followed by relief in stomach pain. For this purpose, 44% of the mothers were in the opinion of giving gripe water to their babies. A few of them were even using it as a nutritional supplement.

The majority of the mothers replied to seek health care assistance and would consult a doctor for jaundice in their babies. Few were in favor of providing sunlight and ayurveda medicine. 1.5% mothers have put their babies in sunlight for jaundice. All the mothers opined that vaccines were a must for their babies. However, only 79% of them knew that vaccines are given to prevent diseases. While 16% of them thought that they are given to improve the health of the baby, and 5% did not know the reason at all.

DISCUSSION

The early neonatal period is the most crucial time when effective postnatal care can affect the health of mothers and new-born significantly [1]. Community factors (place of residence and ecological region), socio-demographic factors (wealth status, religion, education, maternal occupation) and proximate factors (use of recommended ANC service, place of delivery, and skilled attendance during delivery) were significantly associated with the utilization of postnatal care. Mothers with higher education were more likely to attend postnatal care as mothers with higher levels of education are more likely to be informed about health risks, demand, and gain access to healthcare [2]. India accounts for a quarter of neonatal deaths occurring globally. Newborn care practices at and immediately following delivery can contribute to morbidity and mortality of neonates. A set of essential newborn care practices has been proven to reduce these risks.

Maintaining normal body temperature is extremely important in newborns as they are prone to hypothermia due to larger body surface area and environmental changes affecting the ability to stay warm. Bathing, lack of adequate drying, and less use of warm clothes put the new-born at risk of hypothermia [3]. In India, it is a common practice to bathe the newborns immediately after birth increasing the risk of hypothermia, which gets worse with the lack of adequate drying and warm clothes. In the present study, 60% of the mothers said that the first bath should be given after 1st day of birth. This is in contrast to 48% of the mothers practiced optimal thermal care in a study done in rural Uganda [4].

During the hospital stay, cord care is taken care of by hospital staff so nursing staff should have proper knowledge about the cord care and maintenance [5]. In our study, 60% of mothers knew that the umbilical cord should be kept dry as the umbilical cord may be a place for infection to enter the baby's body. 30% were in the opinion of using baby powder of a renowned company of baby products while in other study 65% of mothers responded that they would leave the cord stump as such. About 25% of mothers were applying coconut oil on the umbilical stump. One point to be noted here is that there were 2% of the mothers who said they would apply ash on the cord stump. This shows the lacuna in the education provided to them although they were taken care of in a tertiary care center [6].

Since oil instillation to nostrils can cause long-term pulmonary dysfunction, this practice has to be curtailed by providing proper health education to mothers [7]. Unlike the western counterparts, who were using gripe water to relieve infantile colic, majority of our subjects (42%) were using it as a preventive measure for easy digestion. A few of them (2%) were even using it as a nutritional supplement. It is believed that the alcohol in gripe water provides the soothing effect [8]. They were explained that administration of gripe water might mask the symptoms of a major illness; hence it should not be used.

This study indicates that the awareness and attitude of postnatal mothers toward neonatal care has lots of lacunae. This can be improved by providing better care and health education to mothers during various contact points such as antenatal visits, during delivery, and postnatal visits at primary care level itself. This can be done by anganwadi workers, accredited social health activists workers, as well as auxiliary nurse midwives at the community level, and by nursing staff and treating physicians in the hospital. In the present study, interaction with the mothers was utilized as an opportunity to educate them regarding the recommended newborn care practices.

Furthermore, strengthening the current capacity of facilities and outreach clinics to enable the provision of quality service may help to increase the utilization of postnatal service [9]. It is important to provide appropriate health education and to utilize every opportunity of contact with mothers to counsel them, regarding appropriate feeding practices. Upgrading the skills of the community health workers and raising awareness about the availability and importance of postnatal care through outreach clinics could also be a feasible option to bring about an increase in postnatal care uptake.

CONCLUSION

The awareness and attitude of postnatal mothers toward neonatal care has lots of lacunae, and it should be filled by promoting proper and regular ANC, health facility delivery, and postnatal care. It is essential to increase the use of the postnatal care facility and thereby decrease maternal and newborn morbidity and mortality. We should also strive toward helping removing myths and wrong practices, which are rampant in the community.

AUTHORS CONTRIBUTION

Dr. CSP conceptualized the study and designed the questionnaire, analyzed the data. Dr. Pu. P, Dr. AH and Dr. Pr. P collected the data, recorded all the details and helped in data analysis and manuscript preparation. Dr. KMM supervised the work and finalized the manuscript.

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