Original Article

A Study to Assess the Effectiveness of STP Regarding Knowledge on Breastfeeding Practices among Antenatal Mothers at Selected Hospital Ajmer, Rajasthan

Nidhi Dadheech

Associate Prof. cum Vice- Principal, Chitrini Nursing College, Prantij (Gujarat)

Corresponding Author: Nidhi Dadheech, Associate Prof. cum Vice- Principal,

Chitrini Nursing College, Prantij (Gujarat)

Corresponding Email: nidhiksharma1984@gmail.com

Abstract

Introduction: Healthy children are the greatest resource and pride of the nation, the children ought to be healthy and happy to become productive adults of the future. To give them a happy and healthy childhood, he must safeguard their total health right from the beginning. The health of the newborn is directly related to the health status of its mother during pregnancy and a healthy mother will bring forth a healthy child. After birth the health of the baby depends upon the nurturing practice adopted by the family.

Methodology: Pre-experimental design one group pre test and post test was used in this study. Non probability convenient sampling technique was used to select the sample. 60 Antenatal mothers were included in this study.

Results: There was 30.5% mean difference observed between pretest and posttest. Statistical paired't' test value 36.16 at 0.05 level shows that there was a significant improvement in the knowledge level among antenatal mothers regarding breast feeding practices.

Conclusions: Major findings of the study; The knowledge of the antenatal mothers regarding breast feeding practices before the administration of the STP was very low. The STP significantly increased the knowledge of antenatal mothers regarding breast feeding practices. There was significant association the knowledge scores and education, residence and occupation.

Keywords: Asses; effectiveness; structured teaching program, knowledge; practice; breastfeeding, antenatal mother

GFNPSS Global Nursing Journal of India is a journal of Open access. In this journal, we allow all types of articles to be distributed freely and accessible under the terms of the creative common attribution- non commercial-share. This allows the authors, readers and scholars and general public to read, use and to develop non-commercially work, as long as appropriate credit is given and the newly developed work are licensed with similar terms.

How to cite this article: Dadheech N. A study to assess the effectiveness of stp regarding knowledge on breastfeeding practices among antenatal mothers at selected hospital Ajmer, Rajasthan. Glob. Nurs. J. India 2023; 6: III: 570-573.

Submitted: 24/11/2023, , Accepted: 21/12/2023, Published: 12/01/2024

Introduction

Children are a priceless resource and a nation which neglects them does so at its peril. Children bring fragrance and meaning to life. They are a gift to us from God and we are the gardeners to meet their needs. We can provide the best to them by proper nourishments, love, attention, care and good health. Today's children are citizen of Tomorrow and to have a strong-shouldered man a child should be free from morbidity.

The ideal food for the young infant is human milk, which has the specific characteristics that match the growing infant's nutritional requirements during the first year of life. It has diverse and compelling advantages to infants, mothers, families and society. These include health, nutritional, immunological, developmental, psychological, social economic and environmental benefits.

Breast-feeding may be the single most important thing a mother can do for the health of her infant in the first year of life. For most of the world's children's exclusive breast-feeding makes the difference between life and death and it is the infants "passport to life". A breast fed baby enjoys not only the comfort of warm breast but with all her senses she drinks in her mother's love.

UNICEF stated that every year over 9 million infants die and millions of others are impaired because they are not adequately breastfeed. Every day between 3000-4000 infants die due to diarrhea and acute respiratory infections because the ability to feed them a deduatly has been taken off from their mothers. Thousands more succumb to other illnesses and malnutrition. Breastfeeding is now enlarged practice around the world, in both developed and developing countries. There is unanimous agreement on the need for and the route to, global support for breastfeeding through various approaches and programs.

According to NIS (National Immunization Survey) results, 23 states have greater than 75% of women breastfeeding at hospital discharge. 10 states have greater than 50% of their infants being breastfed at 6 months of age. 12 states have greater than 25% of their infants being breastfed at 1 year of age. 10 states have greater than 40% of their infants being exclusively breastfed through 3 months of age. 8 states have greater than 17% of their infants being exclusively breastfed through 6 months of age. The 8 states of Alaska, California, Hawaii, Idaho, Oregon, Utah, Vermont, and Washington have achieved the three Healthy People 2010 objectives above. More than 60% of mothers of all racial/ethnic groups and of all education levels are initiating breastfeeding. Only teenagers with 51% initiating breastfeeding are less than the 60% initiation rate.

UNICEF, WHO, WABA along with the scientific community strongly recommended initiating breastfeeding within an hour of birth. Evidence shows that early initiation can prevent 22% of all deaths among babies below one month, in developing countries. The Breastfeeding Promotion Network of India (BPNI 2012) is spearheading action on 20th World Breastfeeding Week from 1st-7th August. Communities

around the world are working hard to bring- back' Breast feeding Culture.

The world Health Organization (WHO) is pleased to join the World Alliance for Breastfeeding Action and many other partners in celebrating the 20th annual World Breast feeding Week from 1 to 7 August 2012. The theme highlights are global efforts to protect, promote and support breast feeding through implementation of the Global Strategy for infant and Young child feeding, adopted by the World Health Assembly and the UNICEF Executive Board in 2012. WHO developed a tool for assessing national practices, policies and programmes. The International Baby Food Action Network of Asia developed the World Breastfeeding Trends Initiative to monitor and report on infant and young child feeding practices, policies and programmes worldwide. WHO remains committed to promoting breastfeeding as the ideal source of nourishment for infants and young children.

Objectives

The objectives of the study are to:

- 1. To assess the pretest knowledge regarding Breastfeeding practices among Antenatal mothers.
- 2. To assess the posttest knowledge regarding Breastfeeding practices among Antenatal mothers.
- 3. To assess the effectiveness of structured teaching programme on knowledge regarding Breastfeeding practices among Antenatal mothers.
- 4. To associate the knowledge regarding Breastfeeding practices among Antenatal mother's with their selected socio-demographic variables.

Methodology

Research approach: Experimental research approach.

Research design: Pre-experimental design one group pre test and post test was used in this study.

Population: Antenatal mothers

Sample: Antenatal mothers willing to participate

Sample size: 60

Sample Techniques: Non probability convenient sampling technique was used to select the sample.

Setting of the study: Mittal Hospital and Research Centre, Ajmer Rajasthan.

Results: Table no.1 Frequency and percentage distribution of demographic variables of the antenatal mothers

N=60

Sr. No.	Demographic variables	Frequency	Percentage
1	Age		
	21-25 years	05	8.3
	26-30 years	43	71.6
	31-35 years	12	20
2	Religion		
	Hindu	42	70
	Christian	08	13.3
	Muslim	10	16.7
3	Educational status		
	Illiterate	0	0
	Primary	06	10
	Middle school	07	11.7
	High school	17	28.3
	Higher secondary		
	and above	30	50
4	Educational status of husband		
	Illiterate	00	0
	Primary	03	5
	Middle school	07	11.7
	High school	18	30
	Higher secondary and above	32	53.3
05	Occupation		
	Unemployed	24	40
	Government	12	20
	Private	18	30
	Self employed	06	10
06	Monthly income/ month		
	Rs. 10000 or less than 10000	36	60
	Rs.10000-20000	08	13.3
	Rs. 20000 and above	16	26.7

07	Type of family		
	Nuclear	42	70
	Joint	14	23.3
	Extended	04	6.7
08	Residential area		
	Rural	16	26.7
	Urban	44	73.3
09	Source of information		
	Health personnel	18	30
	Friends	06	10
	Mother in law	34	56.7
	Others	02	3.3

Table no.2 shows Pre test and Post test Knowledge scores of the antenatal mothers regarding breast feeding practices.

Aspects	Max score	Knowledge of antenatal mothers			Paired' 't' Test
	Mean	Mean	(%)	SD	
Pre test	20	12.3	61.5	2.2	
Post test	20	18.4	92	1.23	36.16*
Difference		6.1	30.5	0.97	

Table-3: Classification of samples based on pre test and post test levels of knowledge.

N=60

Knowledge Level	Cate- gory	Classification of Antenatal mothers			
		Pre test		Post test	
		Number	Percent	Number	Percent
Inadequate	< 50% Score	39	65%	02	03.3%
Moderate	51-75% Score	15	25%	10	16.7%
Adequate	> 75% Score	06	10%	48	80%

Conclusions

The study was done to assess the effectiveness of STP regarding knowledge on Breastfeeding practices among Antenatal mothers at selected hospital Ajmer, Rajasthan

∨ Majority of the samples, 43(71.66%) of the samples were in the age group of 26-30 years. Majority of

- the samples 42(70%) were Hindus.
- V The majority of the samples educational status, 30(50%) were higher secondary and above school education. In the relation to educational status of the husband, 32(53.3%) were higher secondary and above school education.
- ∨ The majority of the samples the occupation, 24(40%) were unemployed.
- ∨ In relation to the family monthly income, 36(60%) were having less thanRs.10000 per month or 10000.
- With regard to the type of the family, 42(70%) were from nuclear family, 14(23.3%) were from joint family and 4(6.7%) were extended family.
- ∨ Residential area, 44(73.3%) were from urban and 16(26.7%) from rural.
- ✓ In relation to source of information, 18(30%) were got information from health personnel, 06(10%) from friends, 34(56.7%) were from mother in law and 02(3.3%) from others.

Financial support and sponsorship : No

Conflict of Interest : There are no conflicts of interest **References**

- 1) Williams, Rodwell Sue, Nutrition and Diet Therapy. St.Louis: Mosby, 1993, 360-369pp.
- 2) American Academy of Pediatrics, "Breast Feeding and the Use of Human Milk" Pediatrics 1997 100:1035-1039.

- 3) Frances, Jones. 2002 "Baby Friendly Care". The Canadian Nurse. 89:36-37
- 4) Andrew, Redford. "Breast Feeding: Nature's Way". The Nursing Journal of India, 1997, 88:171.
- 5) J Family Community Med. 2011 May;18(2):74-9. doi: 10.4103/2230-8229.83372. http://www.ncbi.nlm.nih.gov/pubmed/21897915.
- 6) Park.K, Essentials of Community Health Nursing. Jabalpur: M/S Banarsidas Bhanot Publishers, 2003. 210-212pp.
- 7) Bennett, Ruth V and Linda K Brown. Myles Textbook for Midwives. Edinburgh: Churchill Livinstone, 1999.590, 689,712-717pp.
- 8) Marks, G Margaret, Broadribbs's Introductory Pediatric Nursing. Philadelphia: J.B. Lippincott company, 1994. 99-175pp.
- 9) Mahapatra, SS, et al. "Breast Feeding Practices Among Rural Illiterate Mothers Of Orissa". Swasth Hind, 2011, 5:267-72
- 10) WHO and UNICEF. Breast Feeding. Geneva: 2012 http://worldbreastfeedingweek.org/
- 11) Rosen, I. M., Krueger, M. V., Carney, L. M., & Graham, J. A. (2008). Prenatal breastfeeding education and breastfeeding outcome. Maternal Child Nursing, 33,315-319.
- 12) Polit. F Denise and Bernadette P. Hungler. Nursing Research Principles and Methods, Philadelphia: Lippincott, 1999.227-231.