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A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge regarding Kangaroo Mother Care among Post-Natal Mothers in Selected Area in Kanpur

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I. INTRODUCTION

Kangaroo mother' care is a human, low-cost method of care of low-birthweight baby (LBW) infant particular for those weight less than 2000gm at birth. It consists of skin-to-skin contact, exclusive breast-feeding early discharge and with an adequate follow up. Thus, Kangaroo care ensures people from all economic standard to give the needed care for their preterm babies. the preterm babies gain temperature slowly and prevent hypothermia. there for the preterm baby become calm and relaxed. It also helps the baby to conserve energy and bring the organ to normal functioning. Kangaroo Mother Care (KMC) Kangaroo Mother Care is a low resource, evidence based, high impact intervention and standardized care for low-birth-weight infants which, like breastfeeding, should be part of routine care. It can prevent up to half of all deaths in infants weighing. Kangaroo Mother Care (KMC) is a simple method of care for low-birth-weight infants that includes early and prolonged skin-to-skin contact with the mother (or a substitute caregiver) and exclusive and frequent breastfeeding. This natural form of human care Introduction stabilizes body temperature, promotes breast feeding, prevents infection and other morbidities. This also leads to early discharge, better neurodevelopment and encourages bonding between mother and infant. KMC is initiated in the hospital and continued at home until the infant needs it and for optimum care a regular follow-up must be ensured.

Kangaroo mother care has following components:

1) Skin-to-skin contact
2) Exclusive breast feeding

However, KMC should not be confused with routine skin-to-skin care at birth. World Health Organization (WHO) recommends skin-to-skin care immediately after delivery for every new born, irrespective of the birth weight to ensure warmth and early initiation of breast feeding in the delivery room KMC is meant for stable LBW infants and denotes a sustained, long duration skin-to-skin contact.

A. Background Of The Study

"Kangaroo mother care", "kangaroo care" or "skin to skin care" from 1 January 1960 to 24 April 2014. Two independent reviewers screened articles and abstracted data. Findings We screened 1035 articles and reports; 299 contained data on KMC and neonatal outcomes or qualitative information on KMC implementation. Eighty–eight of the studies (29%) did not define KMC. Two hundred and eleven studies (71%) included skin–to–skin contact (SSC) in their KMC definition, 49 (16%) included exclusive or nearly exclusive breastfeeding, 22 (7%) included early discharge criteria, and 36 (12%) included follow–up after discharge. One hundred and sixty–seven studies (56%) described the duration of SSC. Conclusions There exists significant heterogeneity in the definition of KMC. A large number of studies did not report definitions of KMC. Skin–to–skin contact is the core component of KMC, whereas components such as breastfeeding, early discharge, and follow–up care are context specific. To implement KMC effectively development of a global standardized definition of KMC is needed.

B. Need Of The Study

Starting kangaroo mother care immediately after birth has the potential to save up to 150,000 more lives each year, compared with the current recommendation of starting it only once a baby is stable. Current World Health Organization (WHO) recommendations indicate starting kangaroo mother care only after the baby is stabilized in an incubator or warmer, which can take on average 3-7 days.

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This new study suggests that, when compared with the existing practice, starting kangaroo mother care immediately after birth can save up to 150,000 more lives each year. Kangaroo mother care is already known to be effective, reducing mortality by 40% among hospitalized infants with a birth weight less than 2.0 kg when started once they are clinically stable.

A Kangaroo mother care needed to provide care and protection to the new born baby, so that the baby may heal and grow naturally. Kangaroo mother care was initially practiced for low birth weight and preterm or premature babies. The new born should maintain a temperature of 37 degree. The prevention of Hypothermia in new born babies, result in mature development of central nervous system, birth asphyxia, intracranial haemorrhage and failure to maintain an effective environment.

1) Regulates a baby's heartbeat and breathing.
2) Increase a baby's weight gain and decrease the risk of mortality this is especially important for premature babies.
3) Improve oxygen saturation levels.
4) Help to maintain body temperature.
5) Support longer period of quiet, calm, sleep.

KMC provided to stable babies in hospital is associated with a 40% relative reduction in the risk of death, 65% reduction in the risk of Nosocomial infection, and a 72% reduction in hypothermia, at discharge or 40-41 weeks post menstrual age compared to conventional care.

C. Statement Of Problem

A study to assess the effectiveness of structured teaching programme on knowledge regarding kangaroo mother care among post-natal mother care among post-natal mothers in selected area in Kanpur.

D. Objectives of The Study

The objectives of the study are to: -

1) To assess pre-test knowledge regarding kangaroo mother care among postnatal mothers.
2) To assess post-test knowledge regarding kangaroo mother care among postnatal mother.
3) To find out effectiveness of structured teaching program regarding kangaroo mother care among postnatal mother.
4) To find out the association between pre-test knowledge score regarding kangaroo mother care among postnatal mother with the selected demographic variables

E. Operational Definition

1) *Assess:* In this study assess means " gathering information for evaluation of knowledge regarding Kangaroo mother care by formulating close ended question."
2) *Effectiveness:* Producing the result that is wanted or intended; producing a successful result. In this study it refers to the output of structured teaching programme in terms of gain in knowledge among postnatal mother having low birth weight baby as assessed by a structure teaching programme.
3) *Structured Teaching Programme:* In this study structured teaching programmed is designed to provide information about Kangaroo care of domains among postnatal mother. the content includes the concept of Kangaroo care, components of Kangaroo care, preparation and procedure and maintenance of Kangaroo care, benefits of Kangaroo care, knowledge of caregiver regarding Kangaroo care and post discharge follow up.
4) *Knowledge:* It refers to the level of understanding on Kangaroo care as expressed through written response by the postnatal mother.
5) *Kangaroo Mother Care:* Kangaroo mother care practice of skin-to-skin contact between mother and infant in order to transfer the from the parent to the neonate. This help to prevent hypothesis."
6) *Postnatal Mother:* In this study postnatal mother refers to the after the delivery of the new-born baby in selected hospital Kanpur."

F. Assumptions

The study assumes that:

1) A structured teaching programme will help in enhancing the knowledge of postnatal mother, which in turn will improve the knowledge related to Kangaroo mother care.
2) Kangaroo mother care technique along with neonatal care reduce the neonatal mortality and morbidity.

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G. Hypothesis

1) H_1: There will be a significant difference between knowledge score of mothers regarding kangaroo mother care before and after administration of structured teaching programme.
2) H_2: There will be significant association between pre-test knowledge score and selected demographic variables at 0.05 level of significance.

H. Delimitations

The study will be delimited to

1) Mothers who are willing to participate in kangaroo mother care.
2) Available at the time of the study.

II. REVIEW OF LITERATURE

Research literature were reviewed and organized under the following headings.

- Studies related to Kangaroo mother care.
- Study related to Kangaroo Mother Care in postnatal mothers.
- A study to assess the knowledge on kangaroo mother care among post-natal mothers
- A Study Related to Effectiveness of STP on Knowledge of Postnatal Mothers Regarding Kangaroo

A. Studies Related to Kangaroo Mother Care

The study was conducted by WHO in the year 2010, approximately 6 to 8 million low birth weight infants are born in India annually; it is not possible to offer special care to all low-birth-weight babies. Mothers from age group 24-27 years of age were taken as a sample. The result of the study revealed that only 11% mother maintain first skin to skin contact with their new born at least 2 hours and 3% mother claimed first skin to skin contact last 30 min. The conclusion of the study is Student have more knowledge regarding kangaroo mother care. Student have sufficient knowledge about kangaroo mother care and has observe the knowledge is more important for healthy individual.

B. Study Related to Kangaroo Mother Care in postnatal mothers

A descriptive study was conducted to assess the knowledge regarding kangaroo mother care among postnatal mothers. The Data was collected regarding knowledge of kangaroo mother care by structured knowledge questionnaire. The study was conducted at JSS Hospital, Mysuru in 2015 among 60 post-natal mothers who were selected by using non probability convenience sampling technique. The results of postnatal mothers 32(53.3%) had poor knowledge regarding kangaroo mother care, followed by 27(45%) had average knowledge and 1(1.6%) had good knowledge regarding kangaroo mother care.

A descriptive study was conducted to assess the knowledge regarding Kangaroo mother care among postnatal mother in Rohilkhand Medical College Bareilly. The objective of the study is to find out the association between the levels of knowledge of postnatal mothers with their selected demographic variables. The nature of the study was non-experimental. The research design used was non-experimental. The data collected were analysed and interpreted by using descriptive and inferential statistics. The result of the study revealed that the knowledge score of the study,33.3% of the postnatal mother have good knowledge level,60% of the postnatal mother have average knowledge level, and 3.3% of the postnatal mother have poor knowledge level and mean was 17.76, median was 18, mode was 21 and standard deviation was 4.47. This study concluded that knowledge score was average regarding Kangaroo mother care, after implementation of a questionnaire program the knowledge of postnatal mother was improved

C. Study to assess the knowledge on kangaroo mother care among post-natal mothers

Parmar et al, (in 2009). A study was conducted on “the experience with kangaroo mother care in a neonatal intensive care unit (NICU) in Chandigarh, India”. The objective was to study the knowledge, feasibility and acceptability of kangaroo mother care on low-birth-weight infants in the NICU by mothers, family members, and health care workers. Family members had to complete a minimum of 4 hours of kangaroo care per day throughout their time on the unit, and were evaluated by observation. It was found that this method of care was accepted by 96% of mothers, 82% of fathers, and 84% of other family members. The study showed that 94% of health care workers also considered it to be a safe conservative method of care in these infants. Benefits of kangaroo care on babies’ behaviour and on maternal confidence were also reported.

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A study was conducted to assess the knowledge of postnatal mothers regarding kangaroo mother care and to prepare an educational tool regarding kangaroo mother care. The research design used for the study was Non-Experimental design. Convenient sampling technique was used to select 20 samples for the study. The tool used for the study was structured interview schedule. Data collection was done in selected hospitals at Kadapa. The data gathered were analysed by using descriptive statistic. This study revealed that out of 20 samples 48.15 % of postnatal mothers have good knowledge and 51.85% have poor knowledge regarding knowledge on kangaroo mother care. This study concluded that there is a lesser rate of knowledge among postnatal mothers regarding kangaroo mother care in overall view with adequate health awareness programme they may be motivated to know about kangaroo mother care

D. A Study Related to Effectiveness of STP on Knowledge of Postnatal Mothers Regarding Kangaroo

Siva Priya S, Subash J, Kamala S. (2008) conducted a quasi-experimental study to assess the knowledge of mothers of preterm babies regarding kangaroo mother care and to evaluate the effectiveness of structured teaching programme on kangaroo care among the mothers of preterm babies. A total of 35 mothers were selected for the study. Findings of the study revealed that, the pre-test knowledge of the Kangaroo Care was Nil. After the structured teaching programme post-test knowledge of the mother regarding Kangaroo Care was increased. 6 (17.10%) mothers had inadequate knowledge on Kangaroo Care, 25 (71.4%) mothers had moderately adequate knowledge and 4 (11.5%) mothers had adequate knowledge on 32 Kangaroo Care. Kangaroo Mother Care is a simple low cost and highly effective intervention for low-birth-weight babies. And also teaching programme can improve the knowledge of mothers on Kangaroo Care. So, educational programme on Kangaroo Care can be provided to Mothers, which in turn will improve the preterm and low birth care

III. OBJECTIVE OF THE STUDY

1) To assess pre-test knowledge regarding kangaroo mother care among post-natal mothers.
2) To assess post-test knowledge regarding kangaroo mother care among post-natal mother.
3) To find out effectiveness of structured teaching program regarding kangaroo mother care among post-natal mother.
4) To find out the association between pre-test knowledge score regarding kangaroo mother care among post-natal mother with the selected demographic variables.

A. Hypothesis

1) $H_{1:}$ There will be a significant difference between knowledge score of mothers regarding kangaroo mother care before and after administration of structured teaching programme.
2) H_2: There will be significant association between pre-test knowledge score and selected demographic variables at 0.05 level of significance.

IV. RESEARCH METHODOLOGY

A. Research Approach

To assess the knowledge regarding kangaroo mother care among post-natal mother care among post-natal mothers. Thus, Quantitative research approach was adopted.

B. Research Design

Research design is the framework of research methods and techniques chosen by a researcher to conduct a study. The design allows researchers to sharpen the research methods suitable for the subject matter and set their studies for success.

The study design selected for this study is quasi-experimental design. That is one group pre-test and post-test design.

GROUP	PRE-ASSESSMENT	INTERVENTION	POST ASSESSMENT
Experimental	O_1	X	O_2

1) *Key*

O 1 = Pre assessment of knowledge regarding kangaroo mother care.
X = Structured teaching programme regarding kangaroo mother care.
O 2 = Post assessment of knowledge regarding kangaroo mother care.

2) Variables

a) Dependent Variables: In this study the dependent variable is knowledge regarding Kangaroo mother care.

b) Independent Variables: In this study the independent variable refers to structured teaching programme on Kangaroo mother care.

- *Settings:* It can be described as the physical location and condition in which data collection take place.
- *Sample and Sample Size:* post-natal mothers who are admitted in hospital, and sample size for the study is 50.
- *Sample Techniques:* In this study non-probability sampling technique was used, in that purposive sampling was done.

V. DATA COLLECTION PROCEDURE

The main sample was selected through quasi-experimental sampling technique. Firstly, consent was taken from the samples. After that pertest was taken from the sample based on structured teaching programme was given to the samples for 30 mins. After that post-test was taken from the sample and the samples were analysed by chi square and t test formulae.

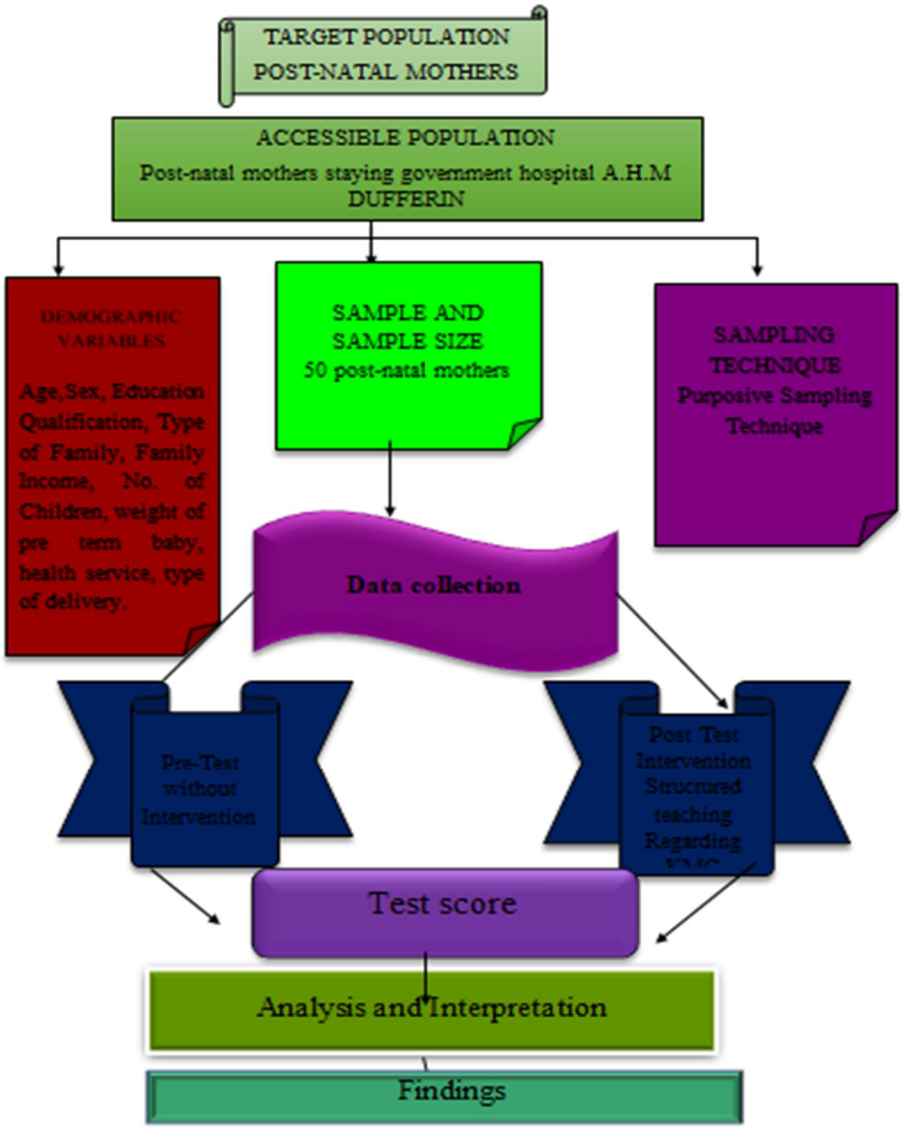


FIGURE.1 Schematic representation of research design

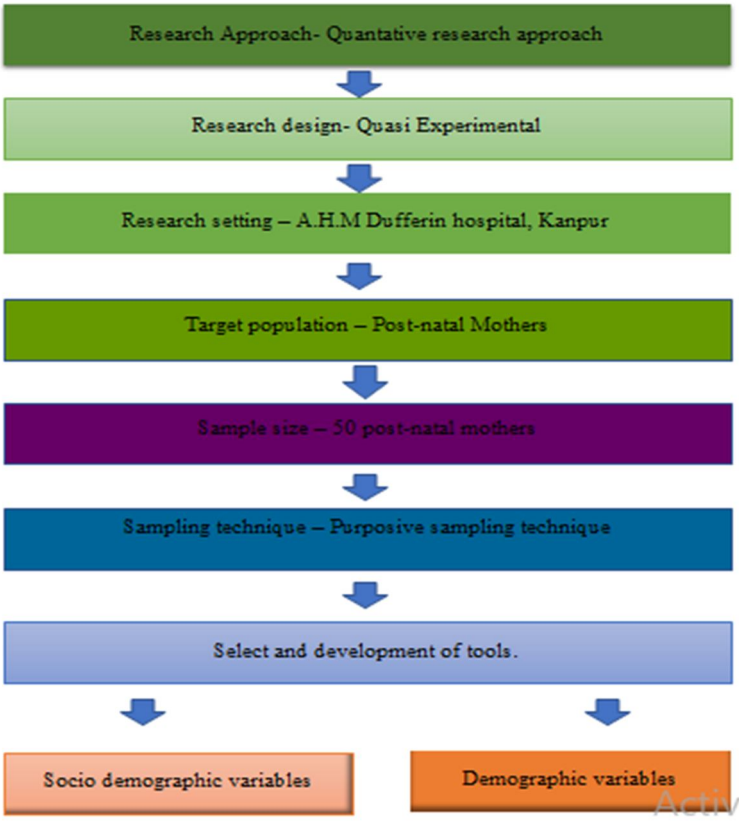


Figure 2- methodology flowchart

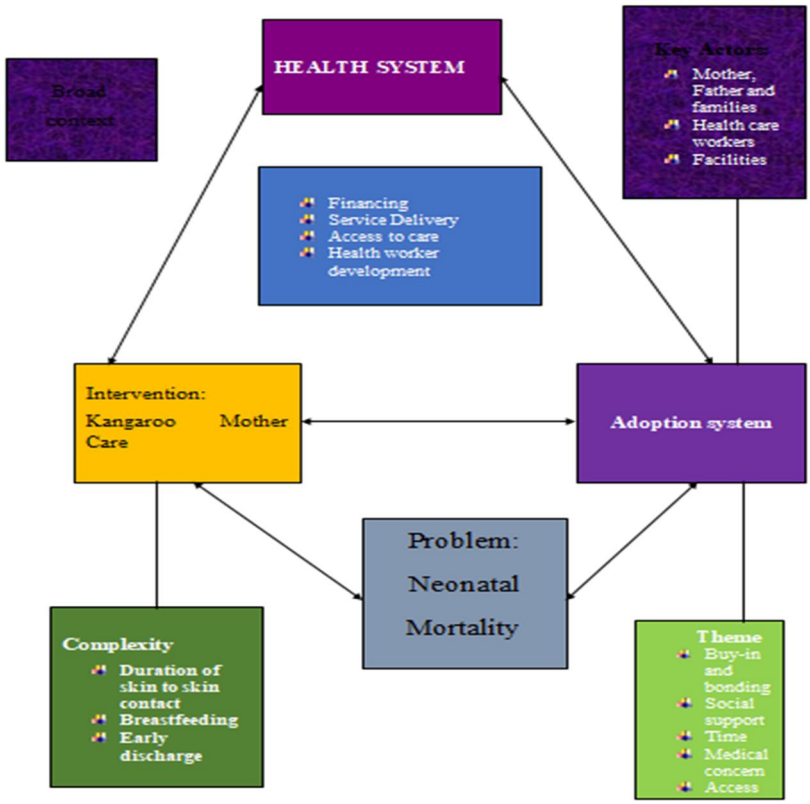


Fig: conceptual frame work

A. Analysis and Interpretation of Data

Organization and presentation of data

Data was organized and presented under the following headings.

1) Section I -Description of sample characteristics.
2) Section II- estimation of pre test awareness score regarding kangaroo mother care.
3) Section III- estimation of post-test awareness score regarding kangaroo mother care.
4) Section IV: Association between pre-test knowledge score regarding kangaroo mother care in post- natal mothers in selected demographical variables

VI. DESCRIPTION OF SAMPLE CHARACTERISTICS

Frequency and percentage distribution of post-natal mothers among kangaroo mother care according to demographic variables.

DEMOGRAPHIC VARIABLES		FREQUENCY	PERCENTAGE (%)
Age	Below 25	25	50.0
	26-30	17	34.0
	30-40	8	16.0
	Above 40	0	0.0
Religion	Hindu	24	48.0
	Muslim	24	48.0
	Christian	2	4.0
	Any others	0	0.0
Educational Status of Mothers	Illiteracy	7	14.0
	Primary school	16	32.0
	Middle school	11	22.0
	Secondary school	7	14.0
	Higher secondary school	8	16.0
	Degree	1	2.0
Occupation of the mothers	House wife	41	82.0
	Coolie	7	14.0
	Private job	1	2.0
	Government job	0	0.0
	Business/company	1	2.0
Type of family	Nuclear family	5	10.0
	Joint family	34	68.0

	Extended family	8	16.0
	Others	3	6.0
Family income per month	Below 1000	8	16.0
	1500-2000	9	18.0
	2000-2500	12	24.0
	Above 2500	21	42.0
No. of children in family	1 child	24	48.0
	2 child	21	42.0
	3 child	3	6.0
	4andabove children's	2	4.0
Weight of pre term baby	1 kg	0	0.0
	1.5kg	8	16.0
	2kg	17	34.0
	<2 kg	25	50.0
Health service Availed from	P.H.C	4	8.0
	Sub centre	3	6.0
	Nursing home	7	14.0
	Hospital	36	72.0
Type of delivery	Normal delivery	16	32.0
	Lower segmental caesarean section	30	60.0
	Forceps delivery	1	2.0
	Normal delivery with episiotomy	3	6.0

Table 1 :- shows the distribution of demographic Variables according to their age, sex, educational qualification and working experience.

VII. RESULT

A. Section 1: Description of sample characteristics

The sample were selected through sampling from the selected hospital Kanpur. the data were analysis using descriptive statistics and presented in terms of percentage.

1) Majority (50%) of the subjects were in the age group of 25 year below. ACCORDING age, 50 % (25) of respondents are in the age group of below 25 years, 34 % (17) of respondents are in the age group of 26 – 30 years , 16 % (8) of respondents are in the age group of 30 – 40 years

2) Majority (32%) of the subject were religion. According to the religion 48 % (24) of respondents are Hindu 48 %(24) of respondents are Muslim and 4%(2) respondents are Christian.

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3) Majority (32%) of the subject were educational status of mother. According to the educational status of the mother 14 % (7) are Illiterate. 32 % (16) primary school, 22 % (11) middle school, 14%(7) secondary school, 16% (8) higher secondary school. 2%(1) are degree.

4) Majority (82%) of the subject were occupation of the mother. According to the mothers occupation shows that his her percentage 82%(41) mothers were house wife, shows that his her percentage 14%(7) mothers were coolie, that his her percentage 2%(1) mothers were in private job and 0 % (0) mothers were working in Government Job.

5) Majority (68%) of the subject were type of family. According to the type of family , 10 % (5) of mothers belong to nucular family , 68%(34) of mothers belong to joint family .16%(8) of mothers belong to extended family, 6%(3) of mothers belongs to others .

6) Majority (42%) of the subject were family income per month. According to the family income of postnatal mothers shows that below thousand 16%(8) mothers were belong to 18%(9) 1500-2000, 24% (12) postnatal mothers shows that 2000-2500, 42%(21) were belongs to income above Rs. 2500/-.

7) Majority (48%) of the subject were no of children in family child. According to the no of children in the family, mothers were having that 48%(24)one children , mothers were having that 21%(42)two childrens,morthers were having that 6%(3)of 3 children's and mothers are having 4 and above children's 4%(2).

8) Majority (50%) of the subject were weight of pre term baby. According to the pre term baby weight is, mothers were shows that 0%(0)of 1kg of babies weight, mothers were shows that 16%(8)1.5kg of babies weight, mothers were shows that 34%(17)2kg of babies weight and 50%(25)of mothers having the baby weight is above <2kg.

9) Majority (72%) of the subject were health services availed from. According to the health services availed form shows that percentage 8%(4)of the mothers were belongs to PHC and health services availed form shows that percentage6%(3)of the mothers in sub center and health services availed form shows that percentage14%(7)mothers in nursing home and remaining 36%(72)of mothers in hospitals

10) Majority (60%) oh the subject were type of delivery. According to type of delivery the mothers belongs to normal delivery of percentage 32%(16), type of delivery the mothers belongs to LSCS 60%(30), type of delivery the mothers belongs to 2%(1)forceps delivery and type of delivery the mothers belongs to 6%(3)normal delivery with episiotomy.

B. Section 2: Estimation of pre-test Knowledge Score

PRE-TEST KNOWLEDGE SCORE	FREQUENCY	PERCENTAGE (%)
Average knowledge	28	56%
Poor knowledge	22	44%
Total	50	100%

Table 3: Estimation of pre-test knowledge score regarding kangaroo mother care .

Table shows that the identified pre-test knowledge score revealed that 56% had average knowledge, 44% had poor knowledge

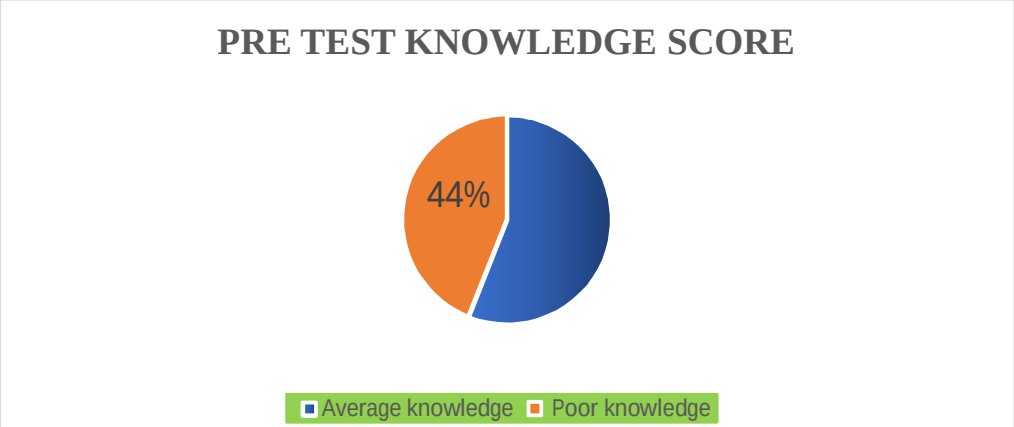


Figure12: Shows that the estimation of pre-test knowledge score regarding kangaroo mother care.

C. Section 3: Estimation of post-test Awareness Score

POST-TEST KNOWLEDGE SCORE	FREQUENCY	PERCENTAGE
Good knowledge	26	52%
Average knowledge	24	48%
Total	50	100%

Table 4: Estimation of post-test knowledge score regarding kangaroo mother care.

Table shows that the identified post-test knowledge score revealed that 52% good knowledge ,48% average knowledge.

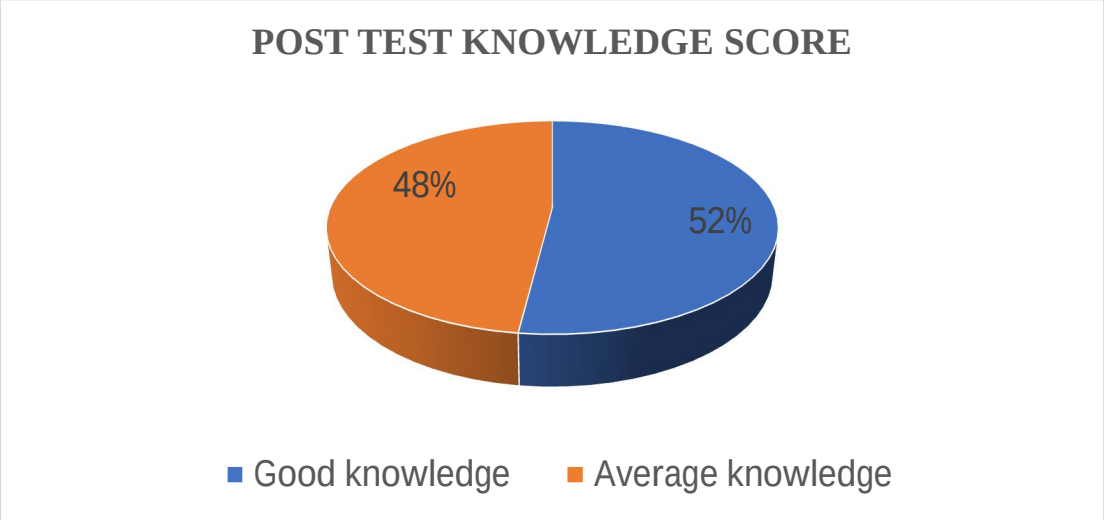


Figure 13: Shows that the estimation of post-test knowledge score regarding kangaroo mother care.

D. Section 4: Association between pre- test knowledge score selected demographic variable.

1) Association between pre-test knowledge score regarding kangaroo mother care and age. There was no significant different between pre-pest knowledge regarding kangaroo mother care and age (X^{2cal} (2) =1.318, p>0.05) at 0.05 level of significant. Hence the research hypothesis was rejected.

2) Association between pre-test knowledge score regarding kangaroo mother care and religion. There was no significant association between pre-test knowledge score regarding kangaroo mother care in post-natal mothers and religion (X^{2} ^{cal} (2)=4.173, p>0.05) at 0.05 level of significant. Hence the research hypothesis was rejected.

3) Association between pre-test knowledge score regarding kangaroo mother care and educational status of mother. There was no significant association between pre-test knowledge score regarding kangaroo mother care and educational status of mother (X^{2cal} (5) =5.245, p>0.05) at 0.05 level of significant. Hence the research hypothesis was rejected.

4) Association between pre-test knowledge score regarding kangaroo mother care and occupational of mother. There was no significant association between pre-test knowledge score regarding kangaroo mother care and occupational of the mother mother (X^{2cal} (3)=2.826, p>0.05) at 0.05 level of significant. Hence the research hypothesis was rejected.

5) Association between pre-test knowledge score regarding kangaroo mother care and type of family. There was no significant association between pre-test knowledge score regarding kangaroo mother care and type of family (X^{2cal} (3) =0.885, p>0.05) at 0.05 level of significant. Hence the research hypothesis was rejected.

6) Association between pre-test knowledge score regarding kangaroo mother care and family income per month. There was no significant association between pretest knowledge score regarding kangaroo mother care in post-natal mothers and family income per month (X^{2cal} (3) =2.193, p>0.05) at 0.05 level of significant. Hence the research hypothesis was rejected.

7) Association between pre-test knowledge score regarding kangaroo mother care and no. Of children in family. There was no significant association between pretest knowledge score regarding kangaroo mother care in post-natal mothers and number of children (X^{2cal} (3) =5.913, p>0.05) at 0.05 level of significant. Hence the research hypothesis was rejected

8) Association between pre-test knowledge score regarding kangaroo mother care and weight of pre term baby. There was no significant association between pretest knowledge score regarding kangaroo mother care in post-natal mothers and weight of preterm baby (X^{2cal} (2) =2.850, p>0.05) at 0.05 level of significant. Hence the research hypothesis was rejected.

9) Association between pre-test knowledge score regarding kangaroo mother care and health services availed. There was no significant association between pretest knowledge score regarding kangaroo mother care in post-natal mothers and health services available (X^{2cal} (4) =4.826 p>0.05) at 0.05 level of significant. Hence the research hypothesis was rejected

10) Association between pre-test knowledge score regarding kangaroo mother care and type of delivery. There was no significant association between pretest knowledge score regarding kangaroo mother care in post-natal mothers and type of delivery (X^{2cal} (2) =2.922, p>0.05) at 0.05 level of significant. Hence the research hypothesis was rejected.

VIII. SUMMARY

The chapter deals with the introduction, need of study. problem statement, aim objective operational definition hypothesis of the study. The review of literature provides information, which enable the investigation to study the extent of selected problem to develop conceptual framework, data analysis and integration. the conceptual framework for this study is based on kangaroo mother care. the study was conducted in HOSPITAL KANPUR UP. the research design selected for the study was one group pre-test and post-test design simple stratified technique was used to selected kangaroo mother care. the planned knowledge questionnaire was developed and used for data collection.

The mainly study was conduct in October 2022 with sample size 50. the test was done to know the level of knowledge of postnatal mother regarding kangaroo mother care. the obtained data was analysed in term of objective and hypothesis using descriptive and inferential statistics.

IX. FINDING OF THE STUDY

The finding of the study can be summarized as....

The knowledge score, indicate that sample

Chi- square test revealed that was no significance association between the post-test knowledge score of postnatal mothers and their demographic variables.

X. CONCLUSION

After the detailed analysis, the study leads to the following conclusion.

The post-natal mother of selected area Kanpur hospital dis have 90% improvement in knowledge regarding kangaroo mother care. they required further education and information because all of them need to enhance their knowledge regarding kangaroo mother care among post-natal mother. There was a significant increase in the knowledge of the subject after introduction of planned teaching programme, the mean pre-test value 44%and mean post-test value 59% which indicated significance increase knowledge of post-natal mother regarding kangaroo mother care.

Thus, it is concluded that the planned teaching programme on providing knowledge regarding kangaroo mother care is effective strategy. All of the selected demographic variables do not show a major role in pre-test knowledge score.

A. Recommendation

The study needs to be conducted on various method which can be used to improve the knowledge of kangaroo mother care regarding post-natal mothers in order to improve their health or gaining weight of the babies.

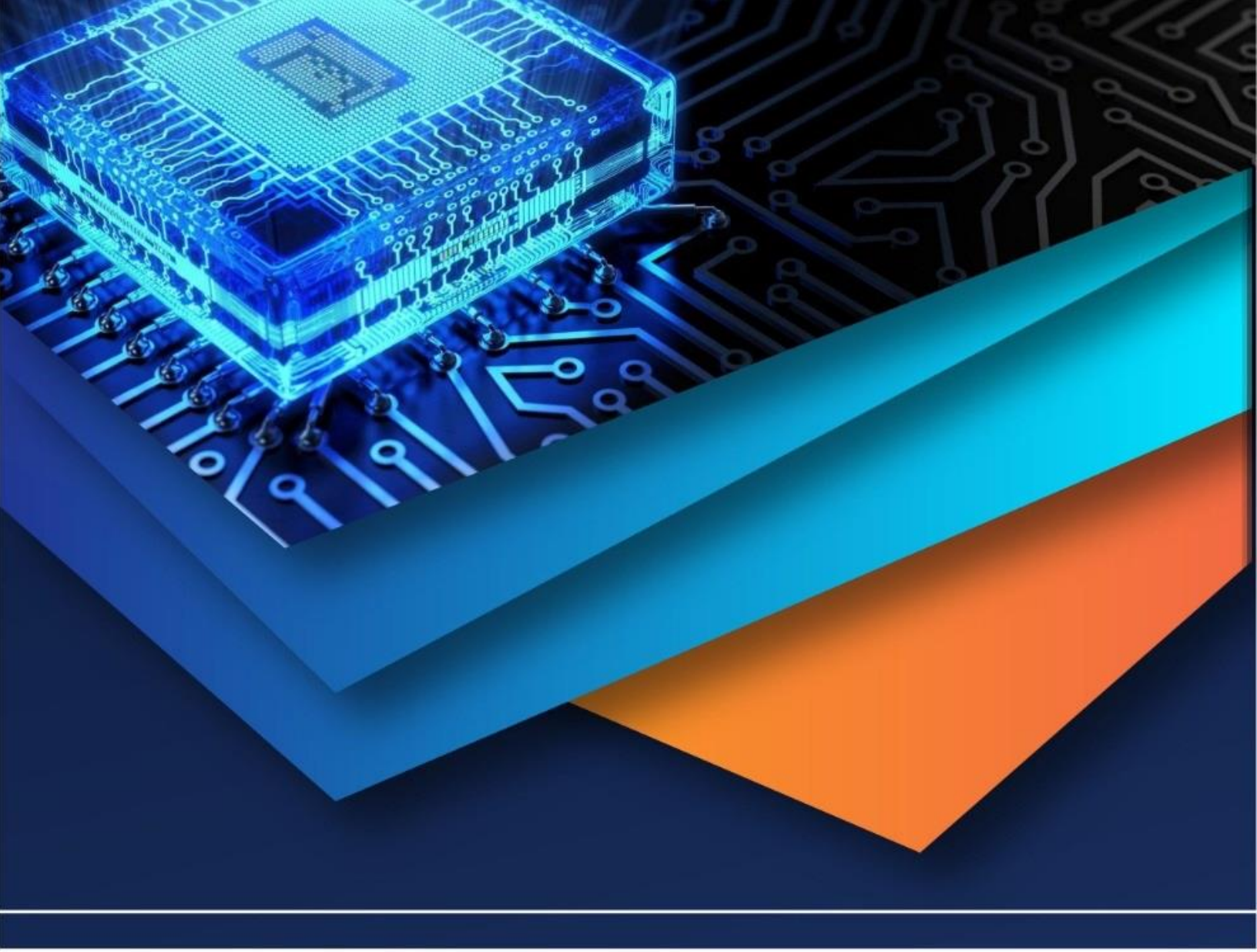
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