

Assess the Knowledge of Primi Post Natal Mothers Regarding Perineal Hygiene after Delivery in Selected Hospital Odisha

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Abstract

Life everywhere begins with women. Women as one half of the population have a tremendous role to play in the dynamic process of social change. She has repeated pregnancies and her circumstances are disadvantaged where the basic amenities are not within her Economical and social needs. There is water shortage which depletes her access to promote hygiene measures wearing clean cloths, perineal care during the puerperium. The second most common direct cause is infection, which is responsible for late postpartum deaths so perineal hygiene has most significant role among post-natal mothers. A descriptive design with a non-experimental approach as considered appropriate for the present study. A structured interview schedule was structured to assess the knowledge of primi postnatal mothers regarding perineal hygiene after delivery. The data was analysed by calculating Mean and standard deviation was used to identify the Knowledge of primi postnatal mothers. The Chi-square test was to find out association between knowledge of primi postnatal mothers and selected demographic variables & level of significance was set at 5% level. The finding of the study Maximum 53% of mothers got Poor score (21%-40%) and minimum 0% of mothers obtained Good score (61%-80%), 47% of mothers obtained Average score (21%-40%) and not even single mother score Very Poor (0%- 20%) and Very Good (81% - 100%). The conclusion of the study knowledge of primi postnatal mothers needs to be updated and improved related to health services.

Keywords: *Assess, Knowledge, Primi Postnatal Mothers, Perineal Hygiene.*

Introduction

Life everywhere begins with women. Women as one half of the population have a tremendous role to play in the dynamic process of social change. **Bhore committee (1946)** pointed out that an Indian woman must have a better access to health facilities with the advent of the need of the health for all by 2000 AD. Many diseases can be combated, pregnancies safer with lesser morbidity. The most common cause of maternal death is severe bleeding. Postpartum bleeding can kill a healthy woman within 2 hours, if she is not appropriately attended. The second most common direct cause is infection, responsible for late postpartum deaths. The common disorders for which postpartum women sought tertiary health care were puerperal sepsis, secondary postpartum hemorrhage, and postpartum eclampsia. Most common causes of sepsis were infected episiotomies at health care facilities where deliveries took place or infected vagina/ perineal tears in home deliveries. Secondary postpartum hemorrhage in some cases was from perineal and or vaginal tears and in others from retained placental pieces. The maternal mortality ratio in India is 407 per 100,000 live birth. The major causes of these deaths have been identified as hemorrhage, toxemia, anemia, obstructed labour, puerperal sepsis and unsafe abortion. According to national centre for health statistics, there were almost 6.4 million normal deliveries in 2005 among woman of all ages. The number of normal delivery rate being very high 72.30% per thousand births. Following vaginal delivery, the risks of perineal infections ranges from 2.8% to higher than 18%, the risk of infection can be as high as 20%. All the maternal death in Asia is due to high population density, poverty, low female literacy and poor health services (World Health Organization). The maternal mortality estimates were developed by WHO and UNICEF. The very high level of maternal mortality over 500 maternal deaths per 1,00,000 live births are generally associated with perineal sepsis.

Considering all the above factors the researcher had a genuine interest and felt the need to assess the knowledge and practice of personal hygiene and new-born care among postnatal mothers.

Need for the study

Perineal hygiene is maintaining hygiene between anus and the genitals. Puerperal sepsis, puerperal pyrexia and puerperal death are the most common cause of maternal morbidity and mortality due to poor perineal hygienic practice.

Maharaj D (2007) In India a study showed that 50% of maternal sepsis were related to unsafe induced abortion sepsis has been shown to have a very high case fatality rate.

Andy W Wong, MD (4 April 2010) Postpartum infections comprise a wide range of entities that can occur after vaginal and caesarean delivery or during breastfeeding. In addition to trauma sustained during the birth process or caesarean procedure, physiologic changes during pregnancy contribute to the development of postpartum infections.¹ The typical pain that many women feel in the immediate postpartum period also makes it difficult to discern postpartum infection from postpartum pain.

Wikipedia (6 January 2011) The incidence of puerperal sepsis shows wide variations among published literature — this may be related to different definition, recording etc.

Today in the United States,

puerperal infection is believed to occur in between one and 8 percent of all deliveries. About three die from puerperal sepsis for every 100,000 deliveries. The single most important risk factor is Caesarean section.

A study Conducted on survey on postnatal perineal morbidity. 482 women responded to questionnaire, overall high level of perineal morbidity was reported 87% complaining of morbidity, Instrumental birth high level of perineal morbidity. So the findings highlight the need for further research and provides a number of challenges for health care services and workers. Obstetric deaths are due to obstetric complications of puerperium infection maternal mortality rate is increase.

Material and methods

Objectives

1. Assess the knowledge of primi post-natal mother regarding perineal hygiene.
2. Find out association between knowledge of primi post-natal mother regarding perineal hygiene and their demographic variables.

Assumption

1. Primi postnatal mothers have some knowledge about perineal hygiene.

Methodology

A descriptive design with a non-experimental approach as considered appropriate for the present study to assess the knowledge of primi postnatal mothers regarding perineal hygiene after delivery. A structured interview schedule was structured to assess the knowledge of primi postnatal mothers regarding perineal hygiene after delivery. Dorothea E Orem” Self Care Deficit” provided the basis of the conceptual framework. Data was collected from 100 Primi postnatal of SCB Hospital, Cuttack(Odisha.). Data was collected through purposive sampling technique.

Pilot study was conducted to confirm the feasibility of the study and to assess the reliability and the validity of the tool. The prepared questionnaire was validated by the subject experts and reliability of the test was tested by using Test-retest method.

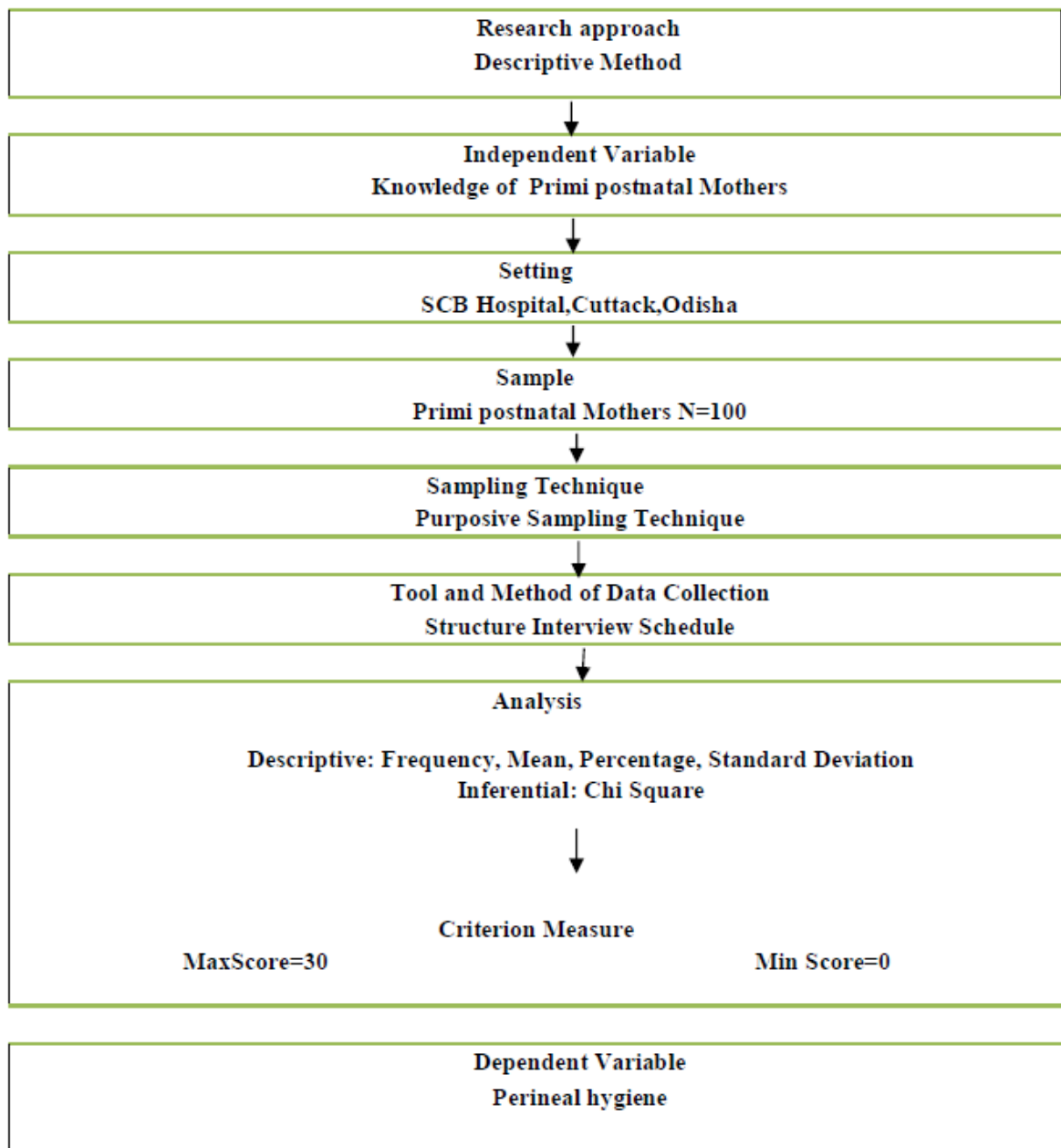


Figure 1. Schematic design of the study

Method of data collection

Data collection procedure

Phase I

A formal permission to conduct the study was obtained from Head of the department in SCB Hospital. and then Permission was taken from Head of the department of Gynaecology prior to the data collection.

Phase II

Investigator introduced herself and developed rapport with subjects. The investigator conducted the main study after getting consent from 100 samples by purposive sampling method at SCB Hospital, Cuttack, (Odisha.).

Phase III

Data collection is the gathering of information needed to address a research problem. A validated structured interview schedule was conducted to collect data about knowledge of perineal hygiene since this technique is feasible and suitable to collect data from all samples. Total samples of main study consisted of 100 primi postnatal mothers. Data was collected from the samples by administering structured interview schedule after obtaining consent from participants. Each day around 4-5 mothers were interviewed and each section lasted for 30-40 minutes and then afterwards 3-5 minutes were utilized to provide verbal guidelines to the respondents by investigator regarding perineal infection, its causes, and prevention and control. It took 1 months to complete the study.

Method of data analysis

Collected data was analysed on the basis of objectives of the study using descriptive and inferential statistics.

- 1) Interrelated data was illustrated in the form of tables and figures.
- 2) Frequency and percentage distribution was used to analyse demographic variables
- 3) Mean and standard deviation was used to determine the knowledge of primi postnatal mothers regarding perineal hygiene.
- 4) Chi square test was used for finding the association of knowledge of primi postnatal mothers and selected demographic variables.

Results

The data was analysed by calculating Mean and standard deviation was used to identify the Knowledge of primi postnatal mothers. The frequencies and percentage for the analysis of demographic data of the primi postnatal mothers. Chi-square test was to find out association between knowledge of primi postnatal mothers and selected demographic variables & level of significance was set at 5% level. The significant findings expressed in table and graphs.

Objective 1. Assess the knowledge of primi postnatal mothers regarding perineal hygiene after delivery.

Table 1. Frequency and percentage distribution of Level of knowledge of primi postnatal mothers regarding perineal hygiene after delivery
(N = 100)

S. No	Category	Frequency	Percentage	Mean	SD
01	Very poor 0-20% (score-0-6)	0	0		
02	Poor 21-40% (score 7-12)	53	53	9.68	1.41
03	Average 41-60% (score 13-18)	47	47	15.13	1.36
04	Good 61-80% (score 19-24)	0	0		
05	Very good 81-100% (score 25-30)	0	0		

Maximum Score: 30

Minimum Score: 0

Table 1. Figure 1: Shows the frequency and percentage distribution of level of knowledge of primi postnatal mothers regarding perineal hygiene after delivery. 0% of mothers obtained Very poor score (0-20%), 53% of mothers got Poor score (21%-40%), 47% of mothers obtained Average score (41%-60%), 0% of mothers obtained Good score (61%-80%), 0% of mother obtained Very Good score (81%-100%). and mean knowledge score of mothers regarding malnutrition.

The data presented in the table no 03 fulfil the objective (1) clearly indicates that 53primi postnatal mothers of have poor knowledge regarding perineal hygiene after delivery.

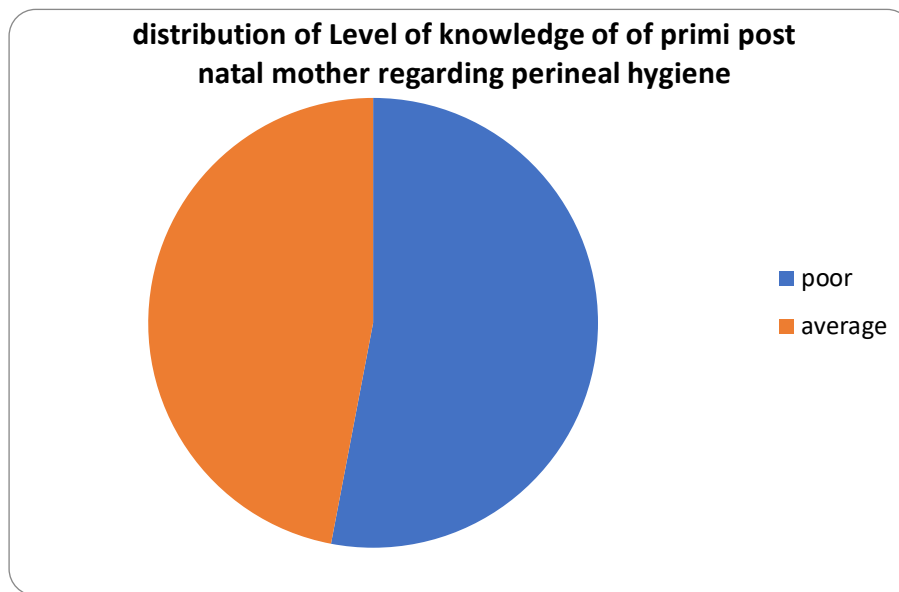


Figure 1. Percentage distribution of level of knowledge of Level of knowledge of primi post-natal mother regarding perineal hygiene.

Objective 2. Associate the knowledge of primi post-natal mothers regarding knowledge of perineal hygiene specific demographic variables i.e. age, education, type of family, income, & occupation

About the demographic variables According to age of mothers, depicts that maximum of mothers (80%) were in the age group of 26-30 years followed by minimum (2%) in the age group of 15-20 years Regarding educational status, maximum (53%) of subjects has higher education and minimum (14%) of subjects has secondary education. As regard to types of family (63%) of subject belong to nuclear family and minimum (37%) belong to joint family. As per income maximum (34%) of mothers earn above 6000 and minimum (6%) of mothers earn below2000. Regarding occupation of mother's Maximum (76%) of mothers were house wife's and minimum (%) of mother was on business.

According to frequency and percentage of knowledge of mothers regarding malnutrition with demographical variables

The highest frequency & percentage 80 (80%) of mothers were in age group of 21-25 years followed by lowest frequency & percentage 18 (18%) of mothers were in age group of 26-30 years. The difference in knowledge score was tested and found statistically Most-significant at 0.05 levels (p-value 0).

The highest frequency & percentage 53(53%) was found among the mothers with educational status of higher secondary education followed by lowest and lowest frequency & percentage 14 (14%) of those mothers who have higher secondary education. The difference in the knowledge score of mothers according to educational status was tested and found statistically Non- significant at 0.05 level (p-Value 0.26).

The maximum frequency & percentage 63 (63%) was found in mothers who belonged to nuclear family followed by minimum frequency & percentage 37 (37%) of mothers who belonged to joint family. The difference in the knowledge score of mothers according to type of family was tested and found statistically non- significant at 0.05 level (p-value 0.32).

The maximum frequency & percentage 34 (34%) was found in mothers who has monthly income above 6000 followed by minimum frequency & percentage 6 (6%) in those mothers who earn below Rs 2000. The difference in the knowledge score of mothers according to income was tested and found statistically non-significant at 0.05 level (p-value 0.16).

The highest frequency & percentage 76 (76%) was found among mothers who are house wife's followed by lowest frequency & percentage (2%) of those who were in a private job. The difference in the knowledge score of mothers according to occupation was tested and found statistically Non-significant at 0.05 level (p-Value 0.47)

Discussion

The present study was conducted to assess the knowledge of primi postnatal mothers of under five children regarding perineal hygiene. The non-experimental, descriptive method with Purposive sampling technique was used to select the sample. The data was collected from 100 primi postnatal mothers by using a structured interview schedule. The findings of the study have been discussed with reference to the objectives and assumption and with the findings of the other studies. The data is organized, analysed and presented in three sections.

Section A. Demographic profile of primi postnatal mothers.

Section B. Knowledge of primi postnatal mothers regarding perineal hygiene.

Section C. Association of demographic variables with levels of knowledge of primi postnatal mothers regarding perineal hygiene.

Section A. Demographic profile of primi postnatal mothers.

The characteristics of the demographic variables described in terms of their frequency and percentage of distribution which showed that 80 (80%) of mothers were in age group of 21-25 years, 53 (53%) of mothers were with educational status of higher secondary education, 63 (63%) of mothers were living in nuclear family, 34 (34%) of mothers has monthly income above Rs 6000, 76 (76%) of mothers were house wife's.

Section B. Knowledge score of primi postnatal mothers regarding perineal hygiene.

The first objective of the study was to assess the knowledge of primi post-natal mothers regarding Perineal hygiene.

The findings of the study revealed that the knowledge score of mothers regarding Perineal hygiene was 47 and Mean knowledge score of women regarding Malnutrition was 15.13 (SD-1.36).

Section C. Association of demographic variables with levels of knowledge of mothers regarding malnutrition.

The second objective of the study was to associate the knowledge of primi postnatal mothers regarding Perineal hygiene with specific demographic variables i.e. age, education, type of family, income, and occupation.

Association of demographic variables with level of knowledge was done by using Chi- Square Test. Although there was no statistical significant association found between level of knowledge and demographic variables such as education, type of family, income, occupation. There was a significant association found between level of knowledge and demographic variable such as marital status and religion at 0.05 levels. There was a most significant association found between level of knowledge and demographic variable such as Age of mother at 0.05 levels. This indicates that the level of knowledge of mothers varies according to Education, type of family, income and occupation.

Findings related with age The highest frequency & percentage 80 (80%) of mothers were in age group of 21-25 years followed by lowest frequency & percentage 2 (2%) of mothers were in age group of 15-20 years. The difference in knowledge score was tested and found statistically Most-significant at 0.05 levels (p-value 0).

Findings related with education the highest frequency & percentage 78 (53%) was found among the mothers with educational status of higher secondary education followed by lowest and lowest frequency & percentage 14 (14%) of those mothers who have secondary education. The difference in the knowledge score of mothers according to educational status was tested and found statistically Non-significant at 0.01 level (p-Value 0.26).

Findings related with type of family the maximum frequency & percentage 63 (63%) was found in mothers who belonged to nuclear family followed by minimum frequency & percentage 37 (37%) of

mothers who belonged to joint family. The difference in the knowledge score of mothers according to type of family was tested and found statistically non-significant at 0.05 level (p-value 0.32).

Findings related with income The maximum frequency & percentage 34 (34%) was found in mothers who has monthly income above 6000 followed by minimum frequency & percentage 6 (6%) in those mothers who earn below 2000. The difference in the knowledge score of mothers according to income was tested and found statistically non-significant at 0.05 level (p-value 0.16).

Findings related with occupation The highest frequency & percentage 76 (76%) was found among mothers who are house wife's followed by lowest frequency & percentage 2 (2%) of those who were in a business. The difference in the knowledge score of mothers according to occupation was tested and found statistically Non-significant at 0.05 level (p-Value 0.47).

Conclusion

The study findings concluded that primi post-natal mothers had average knowledge regarding perineal hygiene. So there is need of improve knowledge regarding perineal hygiene. The study was concluded by finding the knowledge level of primi post-natal mothers regarding perineal hygiene.

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