

Original article

Study on knowledge about postnatal care among mothers in selected urban communities

Maheen Doha¹, Meherunessa Begum², Masuda Sultana³, Tasnuva Rahman⁴

Abstract

In the maternity cycle post natal period is a danger time, because maternal & also new born deaths occur during this period, particularly just after the childbirth. So postnatal care in the first hour & days after childbirth could stop the mass of these deaths. To find the knowledge about postnatal care use among mothers in selected urban communities. It was a descriptive type of cross sectional study conducted purposively in selected 200 mothers who completed their puerperium period and had child birth within 3 months. Data was collected by self administered questionnaire. The study was conducted in selected vaccination centers of Mohakhali, Dhanmondi and Mohammadpur. The total period of study was 1 year from January to December 2014. Among 200 respondents their mean age was 25.02(±SD 6.53) years. Majority 184(92 %) were literate and 67% were housewife. About 93(46.5%) had 3-4 members in their family. 170(85%) were Muslims. About 191 (95.5%) had knowledge about PNC and 187(93.5%) used PNC. 106(56.7%) were used PNC for routine follow up. The respondent who knew about PNC more used that care than who had no knowledge about that (p<0.05). This study assessed the knowledge of mothers on their use of post natal care. The findings of the study indicated that postnatal service was quite satisfactory but still some intervention needed. Regular monitoring and supervision would certainly improve the quality of postnatal care service in Bangladesh.

Keyword: Postnatal care, Postnatal visit, urban communities.

Introduction

The postnatal period or puerperium is a period of adjustment after pregnancy when the anatomic and physiological changes of pregnancy are reversed and body returns to the normal state. This period starts as soon as the placenta is expelled and extends up to the period of six weeks. During this time, the women recover from the stresses of pregnancy and delivery. The requirements during this period are nutritious diet, personal hygiene, postnatal exercises, breast feeding, family planning and immunization to the baby.¹The postnatal period begins immediately after the birth of the baby and extends up to 6 weeks (42 days) after birth. The major purpose of postpartum and post-natal care is to maintain and promote the health of the woman and her baby and to foster an environment that offers help and support to the extended family and community for a wide range of related health and social care needs.^{2,3}

Postnatal care is the routine care services that every woman and her baby should be offered, appropriate to their individual circumstances after the birth of the baby until the conclusion of the postnatal period.⁴ Hence, having postnatal care is important for both the mother and the child to avoid the risk of preventable death by

treating complications arising from the delivery as well as to provide the mother with important information on how to care for herself and her child.⁵ Postnatal care is the care given to the mother after delivery, up to 6 weeks period, during which reproductive organs return to normal size, shape and optimum health is restored.⁶ Postpartum care should include the prevention and early detection and treatment of complications and disease, the provision of advice and services on breastfeeding, birth spacing, immunization and maternal nutrition.⁷ Pregnancy and childbirth are special events in a women's life. But during this period they are more vulnerable to disease and death. Many women who give birth in facilities are discharged within hours after childbirth, without any instructions about where they can obtain further care or support.⁸ Report focuses that around two-thirds of all deliveries occur at home with unskilled birth attendants. It is found that only 21% of mothers and 22% of neonates receive postnatal care (PNC) from a medically trained provider within 42 days after birth in Bangladesh.⁹All these maternal and neonatal problems could be reduced if women receive appropriate postnatal care.¹⁰ Importantly, although postnatal care has been shown to be beneficial and effective in preventing maternal and neonatal deaths.¹¹

1. Maheen Doha- Lecturer, Department of Community Medicine. Ibn Sina Medical College.
2. Meherunessa Begum- Associate Professor, Department of Community Medicine. Ibn Sina Medical College.
3. Masuda Sultana- Associate Professor, Department of Physiology. Ibn Sina Medical College.
4. Tasnuva Rahman- Associate Professor &HOD, Department of Mandy Dental College.

Correspondence to: Dr.Maheen Doha, Lecturer, Department of Community Medicine. Ibn Sina Medical College
E-mail : maheendoha29@gmail.com, Mob: 0187

Materials & method: It was a descriptive type of cross sectional study which was conducted in selected vaccination centers of Mohakhali (EPI), Dhanmondi (BMCH) and Mohammadpur. Data were collected from January to December 2014 and the sample size was 200. A pre designed questionnaire was developed to collect data. The study populations were the mothers who completed their puerperium period and had child birth within 3 months. Sample was selected purposively. Data were collected by face to face interview. Statistical analysis was done by SPSS version 17.0. Inferential statistics was assessed by chi-square (χ^2) test.

Ethical Consideration: Verbal consent was taken from the respondents before interviewing and they were guaranteed that the collected data would be kept secret.

Results : This descriptive type of cross sectional study was conducted among purposively selected 200 mothers who completed their puerperium period and had child birth within 3 months. The study was conducted in selected vaccination centers of Mohakhali, Dhanmondi and Mohammadpur. The total period of study was 1 year from January to December 2014. Majority respondents (45.0%) were aged in between the range of 20-29 years with the mean age 25.02 years. Majority of the respondents (34.5%) of them passed SSC examination and most (67.0%) of them were housewives. Most (85.0%) of the respondents were Muslim and the respondents (73.5%) who were lived in Pucca house. Most of them knowledge about post-natal care had (95.5%) and rests (4.5%) had no knowledge about that. This study found that majority(34%) of the respondents got information about PNC from private hospital including rests of them got information from government hospital (28.3%), family member (22%), health worker (16%), NGO (15.2%), television (14%), newspaper (11%), radio (06%) respectively. Most of the respondents (93.5%) were used PNC and (6.5%) were not used PNC. Majority of the respondents(36.5%)had their delivery at Non-government hospital,(20.0%) delivered at private clinic,(16.5%)delivered at Government hospital,(14.5%) delivered at home and rests (12.5%) delivered at NGO clinic. The findings of the current study shows(60.7%) had known that PNC use after 7days,(30.4%) had known that PNC use after 14 days and (8.9%) had known that PNC use after 42 days.(Table 1) Majority of the respondents (93.5%) were used PNC and (6.5%) were not used PNC. Among them (56.7%) were used PNC for routine follow up,(30.5%) used PNC for puerperal problems and rest of them (12.8%) used PNC to remove stitch.(Fig no-1) Most of the respondents (82.0%) taken adequate rest and (18.0%) no taken adequate rest in PNP.(Fig no-2) Most of them(68%) had knowledge about the harms of heavy work in PNP and (32.0%) had no knowledge about that. Majority respondents (68%) respondents known about rupture stitch, prolapsed uterus, lower abdomen pain, under nutrition, high blood pressure as a heavy work in PNP. Among them(34.6%)known about all the above conditions as harms of heavy work in PNP.(Fig no-3) Among the respondents who knew about PNC (97.9%) was used PNC and among the respondents who did not known about PNC (100.0%) where not used PNC.

This difference of PNC use by know about PNC was statistically significant (χ^2 test, df= 1, value = 135.562, p = 0.000). (Table-2)

This difference of PNC use by know about PNC was statistically significant (χ^2 Test, p<0.05).

Table 1: knowledge about post natal care of the respondents. (n=200)

Variables	Frequency	Percentage (%)
Knowing about PNC		
Yes	191	95.5
No	09	4.5
Source of information (multiple responses)		
Private hospital	68	34
Government hospital	56	28.3
Family member	44	22.0
Health worker	32	16.0
NGO	29	15.2
Television	28	14.0
News Paper	22	11.0
Radio	12	06.0
Use of PNC		
Yes	187	93.5
No	13	6.5
Place of PNC use (n=187)		
Govt. hospital	44	23.5
Private hospital	79	42.2
NGO	64	34.2
Knowing about time of PNC (n=191)		
After 7 days	116	60.7
After 14 days	58	30.7
After 42 days	17	08.9
Reasons of PNC(n=187)		
Routine follow up	106	56.7
Puerperal problem	57	30.7
To remove stitch	24	12.8

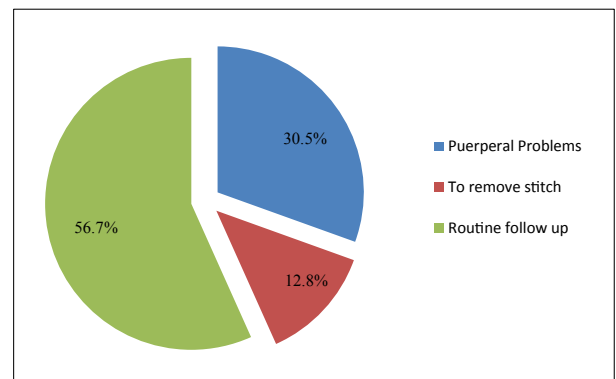


Figure 1: Distribution of the respondents reasons of PNC use (n=187)

Study on knowledge about postnatal care among mothers in selected urban communities

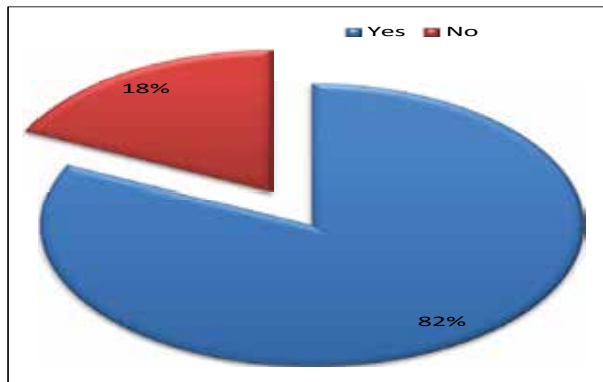


Figure 2: Distribution of the respondents by taking adequate rest in PNP [n=200]

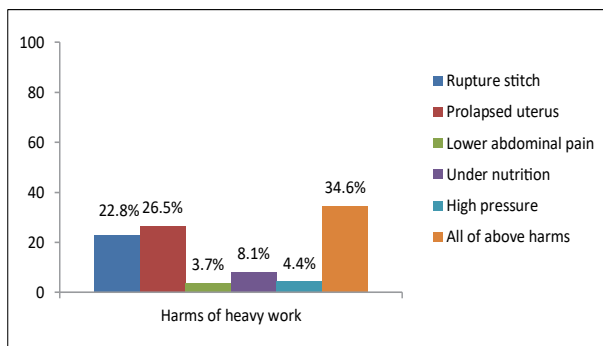


Figure-3: Distribution of the respondents by knowing about different harms of heavy work in PNP [n=136]

Table-2: Association between PNC use and know about PNC [n=200]

Know about PNC	PNC Use		Total f (%)
	Yes f (%)	No f (%)	
Yes	187(97.9)	04(2.1)	191(100.0)
No	00(0.0)	09(100.0)	09(100.0)
Significance	χ^2 test, df= 1, value= 135.562, p = 0.000		

Discussion

The study was conducted on sample of 200 mothers who completed their puerperium period and had child birth within 3 months. Data were collected purposively by face to face interview using a pre-tested semi-structured questionnaire. The total period of study was 1 year from January to December 2014. In the current study it reveals that, out of 200 respondents, the mean age was 25.02 years which were nearly same as the study conducted by Gebrehiwot G was 26.14 years.¹²The current study showed that out of 200 respondents literate 184(92%) and illiterate 16(8%) which is different from another study where (42.9%) of the mothers were illiterate.¹³In our study among 200 respondents 134(67%) were housewives but in other study which was not similar agriculture is a very significant contributor to Nepal's economy, with

almost three in four households involved in agriculture activities, primarily as subsistence agriculture.¹⁴ Among them majority 191 (95.5%) had knowledge about PNC but in other study it was not similar where 55% respondents had moderately adequate knowledge & only (05%)had adequate knowledge about PNC.¹⁵ In this study most of the respondents (34%) got information about PNC from private hospital which is different from other study where (32.5%) got from health workers .¹⁶ This study revealed that among 200, 187(97.9%) used PNC, mother's who do not have knowledge on PNC services not utilize the services. This finding was consist with the study done in Uganda that revealed among those who were aware of the PNC services, a large proportion of mothers utilized the services.¹⁷ This study showed that (23.5%) and (42.2%) respondents used govt. hospital and private hospital for PNC use respectively, another study also showed that place of delivery had a significant effect on PNC services utilization.¹³ 122(65.0%) visited one time and (35.0%) visited two times for PNC which is not similar with the study conducted by Angore BN.¹⁸ The current study showed that the main reason of PNC use was routine follow up 106(56.7%) which is different from the another study where the PNC service utilization was considered when the baby had received full immunization.¹⁹ According to WHO recommendations on postnatal care service of the mother and new born, mothers should visit for at least four times and the time of first visit should be within 24 h, to be followed on day 3(48-72h), between 7 and 14 days after birth, and 6 weeks after birth. The preferred early visits are within 7 days which is similar with this current study.²⁰ Among and among the respondents who did not know about PNC 100% were not used PNC. This difference of PNC use by know about PNC was statistically significant (χ^2 Test, p<0.05).In another study the main reason reported for not utilizing PNC service was lack of knowledge on the availability of PNC service in public health facilities. According to respondents, the contents of health information on postnatal care services women received were low. The factors that showed significant associations with PNC service utilization were knowledge on the availability of PNC services.¹²

Conclusion

The postnatal period is crucial for the women as she recovers from pregnancy related effects and child birth. If PNC is well utilized then determinant of maternal and neonatal mortality rate will be decrease. The finding of this study revealed that knowledge on postnatal care services of mother had positive impact on postnatal care service utilization. The current study clearly showed that female education, knowing about PNC, source of information, use, place, attending, reasons and time of PNC turned out important factors in determining the postnatal care utilization among the mothers. To inform the mother regarding postnatal care when they visit health care center for antenatal checkup and make aware

about the postnatal complications. Beside this build and reinforce linkages between community and facility by connect MNCH services at every service delivery level, empower family and community members, consider the use of maternity waiting homes and bridge the gap between PNC and family planning etc.

References

1. Park K. Textbook of Preventive and Social Medicine. 23 Ed (2015) Jabalpur: Banarasidas Bhanot Publishers.
2. UNFPA: Trends in maternal health in Ethiopia: in-depth analysis of the EDHS 2000–2011. Addis Ababa, December 2012. Available from: <https://www.medbox.org/trends-in-maternal-health-in-ethiopia/download.pdf>. Accessed 23 May 2018.
3. World Health Organization. WHO technical consultation on postpartum and postnatal care. Geneva: WHO; 2010.
4. Kosgey N. Factors influencing the timing of postnatal care services in Kenya. Kenya: University of Nairobi; 2009.
5. UNICEF, WHO, World Bank, UN-DESA Population division: Level & Trends in Child Mortality: Report 2013, Estimates Developed by Un Inter-agency Group for Child Mortality Estimation. Available: http://www.who.int/maternal_child_adolescent/documents/levels_trends_child_mortality_2013/en/. Accessed 23 May 2018.
6. Varney H. Nurse Midwifery. Boston: Jooness and Barlett Publication; 2006.
7. Safe Motherhood. In: Postpartum Care of Mother and Newborn: a practical guide. Maternal and newborn health: Safe motherhood unit Division of reproductive support. WHO. Geneva 1998. Available from URL: http://www.who.int/maternal_child_adolescent/document/who-rst-msm-983/en/
8. WHO Technical Consultation on Postpartum and postnatal care. Department of Making Pregnancy safer. World Health Organization. Available from URL: http://whqlibdoc.who.int/hq/2010/WHO-MPS_10.03_eng.pdf
9. Winch, P. J, M. A. Alam, et al. (2005). Local understandings of vulnerability and protection during the neonatal period in Sylhet district, Bangladesh: a qualitative study. *The Lancet* 366 (9484): 8.
10. World Health Organization: WHO Technical Consultation on Postpartum and Postnatal Care. Geneva: WHO; 2010.
11. Kinzie B, Gomez P. Basic Maternal and Newborn Care: A Guide for Skilled Providers. Baltimore, Maryland: JHPIEGO; 2004.
12. Gebrehiwot G, Medhanyie AA, et al. Postnatal care utilization among urban women in Northern Ethiopia: Cross-sectional survey. *Journal of BMC Women's health*, 2018; 18:78. p.1-10. Available from: <http://doi.org/10.1186/s12905-018-0557-5>.
13. Sharma A, Thakur PS, et al. Utilization of Postnatal Care in Tribal Area Of Madhyapradesh: A Community Based Cross Sectional Study. *International Journal of Medical Science and Public Health*, 2014; 3(10):1266-1271. <https://www.researchgate.net/publication/280926991>
14. Ministry of Health and Population (MOHP) [Nepal], New ERA, ICF International Inc: Nepal Demographic and Health Survey 2011 Kathmandu Nepal: Ministry of Health and Population, New ERA, and ICF International, Calverton, Maryland ; 2012.
15. A Pradhan, U Rani. Knowledge And Practice On Selected Aspects Of Postnatal Care Among Postnatal Mothers. *Journal of Universal College of Medical Sciences*, 2017; 5 No.01(15):p.37-41.
16. Nayan SK, Begum N, et al. Utilization of Postnatal Care Services among the Rural Women in Bangladesh. *Northern International Medical College Journal*, January 2017; 8 No2:p.208-212.
17. Aminah K. Factors determining utilization of postpartum care service in Uganda. *hdi5*; 2009. p. 1623u.
18. Angore BN, Tufa EG, et al. Determinants of postnatal care utilization in urban community among women in Debre Birhan Town, Northern Shewa, Ethiopia. *Journal of Health, Population and Nutrition*. 2018; 37:p.10. Available from <https://doi.org/10.1186/s41043-018-0140-6>
19. Tesfahun F, Worku W, Mazengiya F, Kifle M. Knowledge, perception and utilization of postnatal care of mothers in Gondar Zuria District, Ethiopia: a cross-sectional study. *Matern Child Health J*. 2014; 18(10):p.2341–51.
20. Organization Health Organization. WHO recommendations on postnatal care of the mother and newborn. Geneva: World Health Organization; 2014.