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Assess the Cultural Practices on Newborn Care among Mothers Residing in Kayamkulam

Dr. Kala Barathi S¹, Ms.Surumi.M²

¹Principal, Saveetha College of Nursing, SIMATS
Thandalam, Chennai 602105

² BSc (Nursing) IV Year, Saveetha College of Nursing, SIMATS
Thandalam, Chennai 602105

Abstract

The neonatal period is the most vulnerable period in the infant's life. Neonatal mortality contribute two third of infant mortality rate The issue of neonatal death is a serious national health concern, especially in developing countries where 96% of the World's approximates 5 million annual neonatal deaths occur. Each year in India over one million newborn die before they complete their first month of life. The objective of the study is to assess the cultural practices on newborn care among mothers. Descriptive design was adopted for the study. Convenient sampling technique was used with sample of 60 mothers between the age group of 22 to 60 years were selected. The data was collected, organized and analyzed in term of descriptive statistics. The study results revealed that 63.3% mothers fed their babies within half an hour, 70% gave holy water as 1st feed, 90% of mothers applied coconut oil before bath, 83.3% gave head bath daily, 56.6% tied black thread to prevent evil eye. 100% of mothers used to apply commercially available kajal on baby's eye, 50% had breastfed within 2 hours, and 33% used grape water for digestion. 43.3% used antibiotics for umbilical cord care, 100% of mothers expose the baby to sunlight when affected with jaundice, 43.33% used to burn or burry the umbilical cord when it dries, 100% does not apply any heat to umbilical cord to make it dry, 100% used to massage the baby before bath, 100% had given immunization at birth and 80% used to apply oil on ear. The study findings suggest that it is important to educate the mothers about the new born care, to promote their neonatal health safety.

Key Words: Cultural practice, New born care, Mothers

1. INTRODUCTION

Cultural practices, values and beliefs play an important role in the medical attention in newborn babies during the postnatal period. There are various traditional and cultural practices followed which affect the newborn¹. The moment a child is born, the mother is also born. She never existed before. The women existed but the mother never. A family which mirrors a values traditions, customs and beliefs, ie culture of a society to which it belongs, plays an important role in the health of children.

Across the lifespan, a human being faces the greatest risk of mortality during birth and the first 28 days of life the neonatal period. Good parenting is a challenging job and having a child is a greatest gift in the life. Newborn care is important for the proper development and healthy life of a baby. Most deaths during the neonatal period occur at home and are often unregistered, postnatal services were scarce and traditional practices, such as delayed breastfeeding, contributed to high newborn mortality rates. Principles of essential new born care are simple, requiring no expensive high technology equipment^{2,3}

The neonatal period is the most vulnerable period in the infant's life. Neonatal mortality contribute two third of infant mortality rate The issue of neonatal death is a serious national health concern, especially in developing countries where 96% of the World's approximates 5 million annual neonatal deaths occur. Each year in India over one million new born die before they complete their first month of life. India's current neonatal mortality rate of 44 per 1000 live births represents 1.2million children who die each year ⁴⁻⁷. To reduce neonatal mortality and morbidity, the **World Health Organization (WHO)** recommends essential

newborn care practices including promotion and support for early initiation of exclusive breastfeeding, thermal protection including promoting skin-to-skin contact, hygienic umbilical cord and skin care among others⁸.

Rahman, M., Haque, S. E., Zahan, S., & Islam, O. (2011) conducted a study on Non-institutional births and Newborn Care Practices among Adolescent Mothers in Bangladesh results show that Only 42.8% and 5.1% newborns received complete cord care and complete thermal protection. Only 44.6% of newborns were breastfed within 1 hour of birth. The proportion of the newborns that received postnatal care within 24 hours of birth was 9%, and of them 11% received care from medically trained providers (MTP). Higher level of maternal education and richest bands of wealth were associated with complete thermal care and postnatal care within 24 hours of birth but not with complete cord care and early breastfeeding. Use of sufficient ANC and assisted births by MTP were significantly associated with several of the newborn care practices ⁹.

Kabwijamu Lydia.,et al., (2016) conducted a study on Newborn Care Practices among Adolescent Mothers in Hoima District, Western Uganda results show that Sub optimal essential newborn care practice was noted especially in suboptimal cord care. Adolescent mothers should be a focus of strategies to improve maternal and neonatal health ¹⁰.

Neonatal deaths shoot from poor maternal health, inadequate care during pregnancy, inappropriate management of complications during pregnancy and delivery, poor hygiene during delivery and lack of new born care, mothers are the primary care givers of the

children good maternal nutrition, prevention and management of anaemia and high quality antenatal care will reduce the incidence of complications and thereby improve the chances of survival of the mother, the foetus, and the new born infants, universal access for women to care in pregnancy and child birth and care of the new born is required to improve the chances of survival for both mother and baby. If the mother is well equipped with the knowledge and importance of neonatal care it is believed that, neonatal deaths can be prevented. Rural mothers are influenced by the cultural beliefs and elder's opinions which may be the cause for neonatal deaths. So the researcher identified and investigated the Cultural Practices on Newborn Care among Mothers.

2. OBJECTIVES

To assess the Cultural Practices on Newborn Care among Mothers.

3. MATERIALS AND METHODS

Descriptive design was adopted by the investigator to assess the Cultural Practices on Newborn Care among Mothers. The study was conducted at Kayamkulam, TamilNadu. The samples who met the inclusion criteria were selected by using convenience sampling technique. Inclusion criteria for sample selection are women with age group of 19 to 21 years with infant's age between 1 month to 6 months and mothers with sick babies were excluded from the study. Sixty samples were selected for the study, each day six samples were selected and they were comfortably seated. Data was collected using structured interview schedule to assess demographic profile and the cultural practices on new born care. The project has been approved by the ethics committee of the institution. Informed consent was obtained from the participants before initiating the study

4. RESULTS

SECTION I

Out of 60 samples, 22 (36.66%) were in the age group of 20 -30 years, 32 (53.3%) belonged to nuclear family, 22 (36.66%) were below 5yrs of married life, 45 (76.66%) were married, 20 (33.33%) were illiterate, 42 (70) had 2 children, 38 (63.33%) belonged to Muslim religion and 34 (56.66%) were house wives.

SECTION II

Out of 60 samples 63.3% mothers fed their babies within half an hour, 70% gave holy water as 1st feed, 90% of mothers applied coconut oil before bath, 83.3% gave head bath daily, 56.6% tied black thread to prevent evil eye. 100% of mothers used to apply commercially available kajal on baby's eye, 50% had breastfed within 2 hours, and 33% used grape water for digestion. 43.3% used antibiotics for umbilical cord care, 100% of mothers expose the baby to sunlight when affected with jaundice, 43.33% used to burn or burry the umbilical cord when it dries, 100% does not apply any heat to umbilical cord to make it dry, 100% used to massage the baby before bath, 100% had given immunization at birth and 80% used to apply oil on ear. 63.33% mothers fed their babies within half an hour.

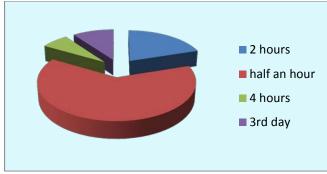


Fig: Initiation of First Feeding

The figure reveals that 20% babies were breastfed within 2 hours, 63.33% mothers fed their babies within half an hour, 6.66% fed within 4 hours, 10% fed their babies on 3rd day.

5. DISCUSSION

Devastating impact on health and quality of life as well as the enormous economic impact on health affect newborn care practice in India. If a newborn gets adequate care from the beginning the infant mortality rate can be reduced. The present study depicts that out of 30 samples 63.33% mothers fed their babies within half an hour, 70% gave holy water as 1st feed, 90% of mothers applied coconut oil before bath, 83.33% gave head bath daily, 56.66% tied black thread to prevent evil eye. 100% of mothers used to apply commercially available kajal on baby's eye, 50% were breastfed within 2 hours, and 33% used grape water for digestion. 43.33% used antibiotics for umbilical cord care, 100% of mothers exposed the baby to sunlight when affected with jaundice, 43.33% used to burn or burry the umbilical cord when it dries,100% does not apply any heat to umbilical cord to make it dry, 100% used to massage the baby before bath, 100% were given immunization at birth and 80% used to apply oil to the ear. The present study is supported by Asif Mohammed et.al. (2011) who conducted a descriptive study to assess the Knowledge and Attitude of Neonatal Care Practices among Post Natal Mothers in Tertiary Care Hospital in South India. The data was collected from 100 mothers by trained interviewers using a structured Performa. In addition to demographic data mothers were also asked about their knowledge and attitude towards neonatal care practices. Study revealed that knowledge was inadequate in areas of umbilical cord care (35%) thermal care(76%)¹¹. This is scope for improvement by providing better health education of antenatal mothers.

CONCLUSION

The study findings suggest that educating the mothers about the newborn care can promote their neonatal health safety.

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Authors Contribution

All the authors actively participated in the work of the study. All authors read and approved the final manuscript.

Conflict Of Interest

The authors declare no conflict of interests.

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