

“A Study to Assess the Effectiveness of Structured Teaching Programme On Knowledge Regarding Application of Breast Milk to Promote Healing of Sore Nipple Among Postnatal Mothers in Selected Rural Areas, Bhuj.”

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Abstract:

A level of knowledge regarding the application of breast milk to promote healing of sore nipple can help to post-natal mother for speedy recovery of sore nipple. The objective of the study to evaluate the effectiveness of structured teaching programme on level of knowledge regarding breast milk application on sore nipples among postnatal mothers. The research design adopted was pre-experimental [one group pre-test and post-test] design. The conceptual frame work for this study was based on general system theory of Ludwing von Bertalanffy. The study was conducted in rural area of Bhuj – Kutch. Non-probability purposive sampling technique had been adopted to select the desired samples. The sample size was 40. Each day the investigator collected data from 3-4 postnatal mothers to assess the level of knowledge on application of breast milk to promoting healing of sore nipple. As a part of intervention to assess the effectiveness of structured teaching programme on knowledge regarding application of breast milk to promote healing of sore nipple for that a structured questionnaire was distributed to the mothers to assess the pre-test level of knowledge on application of breast milk to promoting healing of sore nipple. Then followed by a structured teaching programme on sore nipple and its management were educated to the postnatal mothers. A post test was conducted to assess the level of knowledge with same questionnaire provided in the post test. The data were analysed by using both descriptive and inferential statistical method. Analysis revealed that the paired ‘t’ test value at 9.80, was highly significant at $p < 0.001$ level. It indicates the effectiveness of structured teaching programme on increasing the level of knowledge on application of breast milk to promote healing of sore nipple among postnatal mothers.

Keywords: effectiveness, breast milk application, sore nipples, postnatal mother.

1. Introduction:

Breastfeeding is very important for the health and well-being of infants and mothers. It has been traditional way of feeding newborn in our country and is one of the most natural and beneficial acts a mother can do for her child. Dramatic health benefits have been proven to pass from mother to child through breast milk. It is a common belief that breast feeding is a natural phenomenon and proceeds smoothly and uneventfully¹.

Breast feeding is a special gift from a mother to her baby. It not only provides a natural opportunity for bonding but also supports the growth and development of the new born. Many newborn lives are saved because breast milk provides important nutrients and protection against illness and infection. If every baby were exclusively breastfed from birth, about 1.5 million lives would be saved each year².

Nipple soreness is one of the most common reasons new mothers give for discontinuing breastfeeding, often during the first week of nursing. This is quite unfortunate, for nipple soreness is almost always a short-term problem, and can usually be corrected in a matter of days. Breastfeeding is encouraged in current obstetrical practice which is not supposed to hurt, even though most of the mothers are experiencing some degree of soreness during the early stages of nursing. The degree of soreness varies greatly, with some mothers experiencing slight tenderness, and others bleeding and cracked nipples³.

Need for the study:

Health promotion goals include increasing the duration of breast feeding because of its irrefutable advantages to the mother and baby, society and the environment. However, many mothers experience painful, sore nipples during breast feeding and stops nursing before they intended. The reported incidence of nipple pain and trauma varies between 34% and 96% of breast-feeding women. Characteristics associated with nipple pain include crack, sore, bleeding, oedematous, erythemic, blistered nipples that may have fissures. Several researchers have identified poor infant positioning or latch or both as the most common causes of sore nipples⁴.

An intervention study on the collagen's treatment of sore nipples among 66 primiparous mothers in turkey showed that approximately 65% of the lactating women experienced sore nipples. Lesions were found on the areola and nipple during immediate postpartum⁵.

A descriptive study was conducted on breastfeeding problems in the first six months of life in Karnataka of 420 mother-infant pairs showed that the onset of breastfeeding problems occurred in 31.7% of women during the first month of life and 76.9% in the first week, 7.7% in second and 15.4% in the third week respectively. Insufficient milk was reported by 53.6% while 23% of the mothers had other problems like sore nipple, mastitis and breast engorgement. The study concluded that the onset of breastfeeding problems was alarmingly high in neonatal period⁶.

2. Objectives:

The objectives of the study are to:

1. To assess the pre-test level of knowledge regarding application of breast milk to promote healing among postnatal mothers.

2. To assess the post-test level of knowledge regarding application of breast milk to promote healing among postnatal mothers.
3. To evaluate the effectiveness of structured teaching programme on level of knowledge regarding breast milk application on sore nipples among postnatal mothers.
4. To determine the association of pre-test level of knowledge on application of breast milk on sore nipple among postnatal mothers.

Hypotheses:

H₁- there will be significant difference between the pre-test and post-test knowledge scores.

H₂- there will be a significant association between pre-test and post-test level of knowledge and selected demographic variables.

3. Methodology:**Research approach:**

Quantitative research approach.

Research design:

Pre-experimental one group pre-test post-test design.

Research setting:

The study will be conducted in selected area of kutch district.

Population:

Target population: the target population of the study was post-natal mothers in selected rural area.

Accessible population: the accessible population of the study was post-natal mother who were available at the time of study of rural area.

Sample size:

The sample size will be 40.

Sampling technique:

The research study was conducted by non-probability purposive sampling technique.

Data analysis plan:

The collected data was analysed by using both descriptive and inferential statistics

Results:**Major findings of the study:**

1. Findings related to demographic variables:

- A) majority (70%) of the respondent were 26 – 30 years
- B) majority (50%) of the respondent were day 1st to 7ty day
- C) majority (65%) of the respondent were two
- D) majority (65%) of the respondent were every second hourly
- E) majority (72.5%) of the respondent were ten – fifteen minutes
- F) majority (67.5%) of the respondent were secondary education
- G) majority (77.5%) of the respondent were rs. 5001 - 10000
- H) majority (70%) of the respondent were vegetarian
- I) majority (75%) of the respondent were family member

The finding of pre-test score of level knowledge shows that, 23 (57.5%) of postnatal mother had inadequate knowledge and 14 (35%) of them had moderate knowledge and only 3 (7.5%) of them had adequate knowledge.

The finding of post-test score of level knowledge shows that, 2 (5%) of postnatal mother had inadequate knowledge and 8 (20%) of them had moderate knowledge and only 30 (75%) of them had adequate knowledge.

4. Conclusion:

The main conclusion from this present study is that most of postnatal mothers who attend the structured teaching programme on application of breast milk to promote healing of sore nipple got benefited and it will improve the knowledge of postnatal mothers.

Reference:

1. Breastfeeding [online] available from url: <http://en.wiipedia.org/wiki/breastfeeding>
2. Beek d, ganges f, goldman s, long p. Care of the newborn reference manual: successful breastfeeding. Washington dc: bill and melinda gates foundation; 2004
3. Anita singh. Problems of breastfeeding. The journal of perinatal and neonatal nursing october. December 2008; 34 (3): 92 – 99
4. Julie ackrend, sore nipple relief for breastfeeding moms relieving breast irritation; [http://www.breastfeeding. Com](http://www.breastfeeding.Com) feb 10 2009.
5. Sore nipple [online]. Available from: url: [http://en.wikipedia.org/wiki/breastfeeding with sore nipples. Com](http://en.wikipedia.org/wiki/breastfeeding_with_sore_nipples).2010.
6. Ramsingh bm, banapuramath s, kesaree n. Breastfeeding problems in first six months of life in rural karnataka. Indian paediatrics. 2002; 39: 861 – 64