## **RESEARCH ARTICLE**

# Assessment of knowledge and practice regarding postnatal exercises among mothers admitted in postnatal ward in Gauhati Medical College and Hospital

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#### **ABSTRACT**

**Background**: Pregnancy and delivery is an important life change where postpartum exercises are shown to create a more relaxed mother-child relationship. So the present study is conducted for assessment of knowledge and practice regarding postnatal exercises among mothers admitted in postnatal ward in Gauhati Medical College and Hospital (GMCH). **Material and methods:** 100 mothers admitted in the postnatal ward of GMCH during the period of 01.01.2013 to 20.01.2013 were assessed using the "Health Belief Model" designed by

Hochbaum (1958) and modified by Rosenstock (1974). A structured interview schedule was developed to assess the knowledge and practice regarding postnatal exercises among them.

Results: Half of the mothers (52%) had moderately adequate knowledge, 28% mothers had inadequate knowledge and lowest (20%) mothers had adequate knowledge regarding postnatal exercises.

Similarly, 53% mothers had moderately adequate practice of postnatal exercises and 47% of mothers had inadequate practice of postnatal exercises. Significant association between knowledge score with education and occupation of mothers; and between practice score with age, parity, education, occupation of mothers and source of information on postnatal exercises were observed.

**Conclusion:** It had been observed that there was inadequate knowledge and practice of postnatal exercises among postpartum mothers. Therefore, health awareness programme on postnatal exercises should be conducted by the health personnel to improve the knowledge and practice among the mothers.

**Key words:** Postpartum mother, postnatal exercise, knowledge of postpartum exercise, practice of postpartum exercise

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Becoming a mother is an important stage in every woman's life. Most different period in women's life is their growth into parenthood and is precisely post partum period. First time mothers in particular may feel anxious about how they are

going to cope up to look after themselves and their newborn. Most Indian women believe that they have little or no control over their pregnancies and its outcome. After giving birth, the mother's movements are restricted to the house. This

Received: 18 March 2014/ Accepted: 28 March 2014 Sarkar J, Konwar G, Das LK. Assessment of knowledge and practice regarding postnatal exercises among mothers admitted in postnatal ward in Gauhati Medical College and Hospital. Journal of Obstetrics & Gynaecology Barpeta, 1(1): 52-56 confinement period, usually 40 days, is believed to be a vulnerable period for the women. Carolyn Jenkins [1] states that the act of giving birth is the only moment where both pain and pleasure converge in a moment of time. The birth of a child is a life changing experience.

Following the birth of the baby and expulsion of the placenta, the mother enters a period of physical and psychological recuperation which is known as postpartum period. The overall expectation is that by 6 weeks after delivery, all the systems in the woman's body will have recovered from the effects of pregnancy and return to their non-pregnant state [2]. Once the baby is born, women should start exercising as soon as they feel able but this should be a gradual process. Postnatal depression is less likely in women who return to exercise relatively soon after birth. Exercise is physical exertion of the body. They help to improve the muscle tone of the abdomen and pelvic floor and also bladder and bowel function. Postnatal exercise is playing important role such as encourage drainage of lochia, encourage anteversion of the uterus, minimize the risk of deep venous thrombosis (DVT), contraction and relaxation of the pelvic floor muscles, diminish respiratory and vascular complications, minimize future prolapse and stress incontinence, prevent backache and genital prolapse, help in losing extra body weight and getting fit and healthy, concentrate on proper postures, body alignments and keep abdominal muscles contracted [3]. The recommended postnatal exercises include: deep breathing, circulatory exercise, brisk walking, abdominal exercises such as abdominal breathing, head and shoulder raising, leg raising, pelvic tilt, knee rolling, hip hitching and sit-ups [4, 5].

Many studies state that different postpartum exercises reduce stress incontinence, postpartum depression, backache, diastasis recti and other health problems. But it is estimated that between 65% and 85% of world's population fail to take enough exercises [6] and during the clinical posting in postnatal ward in GMCH, the investigator

observed that after delivery, postnatal mothers don't practice postnatal exercises during their hospital stay. Keeping these aspects the investigator felt that there is a need to assess the knowledge and practice of postnatal mothers regarding postnatal exercises admitted in postnatal ward in Gauhati Medical College and Hospital.

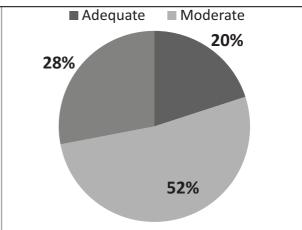
## Objectives of the study

- 1. To assess the knowledge among the mothers regarding postnatal exercises.
- 2. To identify the practice of mothers on postnatal exercises.
- 3. To find out the association between knowledge of mothers on postnatal exercises and demographic variables.
- 4. To find out the association between practice of mothers on postnatal exercises and demographic variables.

## Methodology

A descriptive research design was used for this study. 100 mothers were selected from postnatal ward of Gauhati Medical College and Hospital, Guwahati, Assam by using convenience sampling. The conceptual framework used in study was based on "Health Belief Model" designed by Hochbaum(1958) and modified by Rosenstock (1974). Both primi and multipara mothers who had normal vaginal delivery with or without episiotomy and from the day of delivery till 3 days

Fig 1. Pie diagram showing percentage distribution of level of knowledge score on postnatal exercises



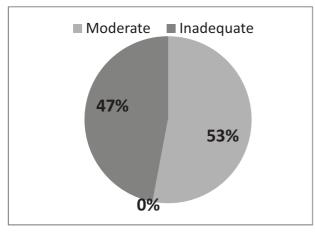


Fig 2. Pie diagram showing percentage distribution of level of practice score on postnatal exercises

of postpartum period were included in the study and mothers who had undergone caesarean section and with puerperal complications were not taken in the study. A structured interview schedule was developed to assess the knowledge and practice regarding postnatal exercises among mothers. The content of the tool was validated by the subject experts and the reliability of the tool was found to be 0.74 for knowledge section and 0.79 for practice section. Data was collected from 01.01.2013 to 20.01.2013. Analysis was done by using SPSS version 21.

## **Analysis and Discussion**

In relation to the demographic data, it had been observed that the majority of mothers (73%) were

Table 1. Association between knowledge score and demographic variables

SI. No	Demographic variables	Category		Knowledge	9	Chi aguara	df	P value
			Adequate	Moderate	Inadequate	Chi square	ai	
1.	Age	18-25 years	16	35	22		4	.975 NS
		26-33 years	6	11	8	.914		
		34-41 years	1	2	2			
2.	Religion	Hindu	16	36	21	1.478	2	.478 NS
		Muslim	4	12	11	1.470		
3.	Parity-	1	15	40	18		4	.066 NS
		2	5	7	11	8.808		
		3	0	1	4			
4.	Educational status	No formal education	0	0	11		8	0.00 S**
		Primary (I- V)	0	4	4			
		Higher primary (VI- VIII)	1	9	4	61.35		
		Higher secondary ( IX-XII)	9	33	13			
		Above Secondary	10	2	0			
	Occupation	Housewife	15	46	32		4	.003 S**
5.		Business	2	2	0	15.99		
		Service	3	0	0			
6	Type of family	Nuclear family	5	16	14	2.015	2	.365 NS
		Joint family	15	32	18			

\*Significant at p<0.05, \*\*Significant at p<0.02

Table 2. Association between practice score and demographic variables

SI. No	Demographic variables			Chi				
		Category	Adequat e	Moderate	Inadequat e	square	df	P value
1.	Age	18-25 years	0	45	28		2	.015 S
		26-33 years	0	7	15	8.338		
		34-41 years	0	1	4			
2.	Religion	Hindu	0	37	36	0.582	1	.446 NS
۷.	rieligion	Muslim	0	16	11	0.502		
	Parity-	1	0	43	30		2	.041 S*
3.		2	0	10	13	6.369		
		3	0	0	4			
	Educational status	No formal education	0	1	10		4	0.004 S**
		Primary (I-V)	0	3	5			
4		Secondary (VI-VIII)	0	5	9	15.289		
		Above primary (IX-XII)	0	36	19			
		Above Secondary	0	8	4			
	Occupation	Housewife	0	43	47		2	0.036 S*
5.		Business	0	4	0	6.675		
		Service	0	3	0			
6	Type of family	Nuclear family	0	14	21	3.63	1	0.06 NS
Ö		Joint family	0	39	26	3.03		
	Source of information on postnatal	Self learning	0	4	0		4	0.018 S*
		Media	0	21	24	1		
7		Parent/ friends / relatives	0	21	22	11.90		
	exercise	Health care personnel	0	7	1	) 05 **O:	.:6:	-1 -1 40 005

in the age group of 18-25 years, 73% mothers were Hindus, 73% mother's were primipara, 55% had higher secondary education, 93% were housewife, 65% of mothers were from joint family and 46 % mothers obtained information on post-natal exercises from media.

The study results revealed that majority of the mothers (52%) had moderately adequate knowledge, 28% mothers had inadequate knowledge and lowest 20% mothers had adequate knowledge

\* Significant at p<0.05, \*\*Significant at p<0.005

regarding postnatal exercises. [Fig 1.]

With respect to level of practice, it was revealed that the majority of mothers 53% had moderately adequate practice of postnatal exercises and 47% of mothers had inadequate practice of postnatal exercises. [Fig 2.]

Table 1 shows that there were significant association between knowledge score with education and occupation of mothers at p<0.05 level.

There were significant association between practice

score with age, parity, education, occupation of mothers and source of information on postnatal exercises at p<0.05 level. [Table 2]

### **Conclusion:**

From the findings of the present study, it can be interpreted that majority of the mothers lacked knowledge and had inadequate practice of postnatal exercises. Therefore, health awareness programme on postnatal exercises should be conducted by the health personnel to improve the knowledge and practice among the mothers which will contribute positively to maintain health status of the mothers.

### Recommendation

- 1. A similar study can be replicated on a large sample which may help to draw conclusions that are more definite and generalizable to a large population. Thus there is a need to repeat the study on a large scale.
- 2. A comparative study may be conducted between Urban and Rural mothers.
- 3. A study can be done by health care personals to find out the effectiveness of health awareness programme on postnatal exercises among the mothers.
- 4. An interventional study on postnatal exercises

- and its effectiveness on knowledge, attitude and practice of women in experimental and control group can be done.
- 5. A study can be conducted to find out the corelation between knowledge and practice of the mothers regarding postnatal exercises.

# References

- 1. Jenkins C. Postnatal exercise: The mother's well being is important too. J New Zealand medical association. 2005 June 24; 118:1541.
- 2. Dutta D.C. Text Book of Obstetrics. 7th ed. Calcutta: New Central Book Agency; 2011. p. 152-3.
- 3. After childbirth [Internet]. 2012 March [cited 17 Oct 2012]. Available from: http://www.betterhealth.postnatalexercise.html.
- 4. Rao A. Kamini. Textbook of midwifery and obstetrics. Elsevier; 2011. p. 110-8.
- 5. Lynna Y. Littleton Joan. C. Maternity woman's and newborns health care. 6th ed. Engabretson Publication; 2005. p. 898-900.
- 6. Postnatal exercise: Why exercise is important after baby [Internet]. 2007 June [cited 19 Oct 2012]; Available from http://www. TraceyMallett.com.
- 7. Pillitteri Adele. Maternal and child health nursing. New York: Lippincott Williams and Wilkins; 2007. p. 646.