



Effectiveness Of Planned Teaching On Knowledge Regarding Breastfeeding Techniques And Burping Among Primi Mothers In Selected Hospital

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Abstract: Aim: The study aims to assess the effectiveness of planned teaching on knowledge regarding breastfeeding techniques and burping among primi mothers. **Problem Statement:** A study to assess the effectiveness of planned teaching on knowledge regarding breastfeeding techniques and burping among primi mothers in selected hospital. **Objectives:** Primary objectives were to assess knowledge before and after planned teaching and evaluate its effectiveness. Secondary objectives included association of knowledge with demographic variables and identifying sources of prior knowledge. **Methodology:** A quantitative evaluative research approach with a pre-experimental one group pre-test post-test design was used. The study was conducted among 60 primi mothers using a structured questionnaire. **Results:** Pre-test findings showed majority (66%) had poor knowledge. Post-test results showed significant improvement in knowledge scores after planned teaching. Statistical analysis indicated effectiveness of intervention. **Conclusion:** Planned teaching was effective in improving knowledge of breastfeeding and burping techniques among primi mothers. **Keywords:** Breastfeeding, Burping, Primi Mothers, Planned Teaching, Knowledge

INTRODUCTION

Breastfeeding is a vital component of newborn care, providing essential nutrition and strengthening mother-infant bonding. Proper techniques such as positioning, latching, and burping play a crucial role in effective feeding and infant health. Primi mothers often lack experience and knowledge regarding correct breastfeeding techniques, which may lead to feeding problems, discomfort, and poor infant outcomes. Structured teaching by healthcare professionals can significantly improve maternal knowledge and confidence.

BACKGROUND OF THE STUDY

Globally, emphasis is placed on exclusive breastfeeding for the first six months. However, many first-time mothers face challenges due to lack of guidance. Proper breastfeeding and burping techniques are essential to prevent complications such as colic and feeding difficulties. Educational interventions in hospital settings can improve maternal practices effectively.

NEED OF THE STUDY

Breastfeeding is a learned skill. Lack of knowledge among primi mothers can result in improper feeding practices. Burping is often neglected but is essential for infant comfort. This study helps identify knowledge gaps and evaluates effectiveness of structured teaching to improve maternal practices.

Problem statement

“A study to assess the effectiveness of planned teaching on knowledge regarding breastfeeding techniques and burping among primi mothers in selected hospital.”

Objectives:

Primary objective:

- To assess knowledge before and after planned teaching
- To evaluate effectiveness of planned teaching

Secondary objectives:

- To associate knowledge with demographic variables
- To identify sources of knowledge

Hypothesis

H₀: There is no significant difference between pre-test and post-test knowledge scores.

H₁: There is a significant difference between pre-test and post-test knowledge scores.

REVIEW OF LITERATURE

The reviewed literature is categorized under the following headings:

1. Breastfeeding Techniques
2. Importance of Burping in Infants
3. Knowledge of Primi Mothers Regarding Breastfeeding and Burping
4. Barriers in Effective Breastfeeding Practices
5. Effectiveness of Planned Teaching on Breastfeeding and Burping

RESEARCH APPROACH

The research approach is a structured plan to investigate the phenomenon under study. It can be Quantitative, Qualitative, or a combination of both. In the present study, a Quantitative approach was used to assess the effectiveness of planned teaching on knowledge regarding breastfeeding techniques and burping among primi mothers.

RESEARCH DESIGN

Research design refers to the overall plan for obtaining answers to research questions and testing hypotheses. The selected design for this study was a Pre-Experimental One Group Pre-test Post-test Design, which is descriptive and **Non-experimental Descriptive Design** in nature.

POPULATION: The population of the study consisted of **primi mothers** admitted in the postnatal ward of the selected hospital.

Target population: The target population includes all **primi mothers** who are admitted in the postnatal wards of selected hospitals.

Accessible population: The accessible population includes the **primi mothers** who were available and willing to participate during the data collection period in the selected hospital.

SAMPLING

Sample: A sample refers to a subset of the population selected to participate in the research. The sample for this study consisted of primi mothers from the selected hospital.

Sampling technique: A non-probability convenience sampling technique was used to select the samples.

Data and Sources of Data

After obtaining a formal permission, the investigator has fixed the date and time for data collection. According to tentative schedule, the investigator has visited the area and collected data from 05.06.2025 to 11.06.2025. After due permission from hospitals the group of primi mothers were called to a one place and made comfortable seating arrangements. The investigator has handed over the SIS to parents with instructions and asked to handover the filled in SAQ. Further they were requested to read the question one by one and put () mark on right option mentioned below each question/statement. Doubts were clarified and collected back filled in SAQs after 45 minutes. Whole procedure of pre-test was carried out in the presence of a Investigator.

PLAN FOR DATA ANALYSIS

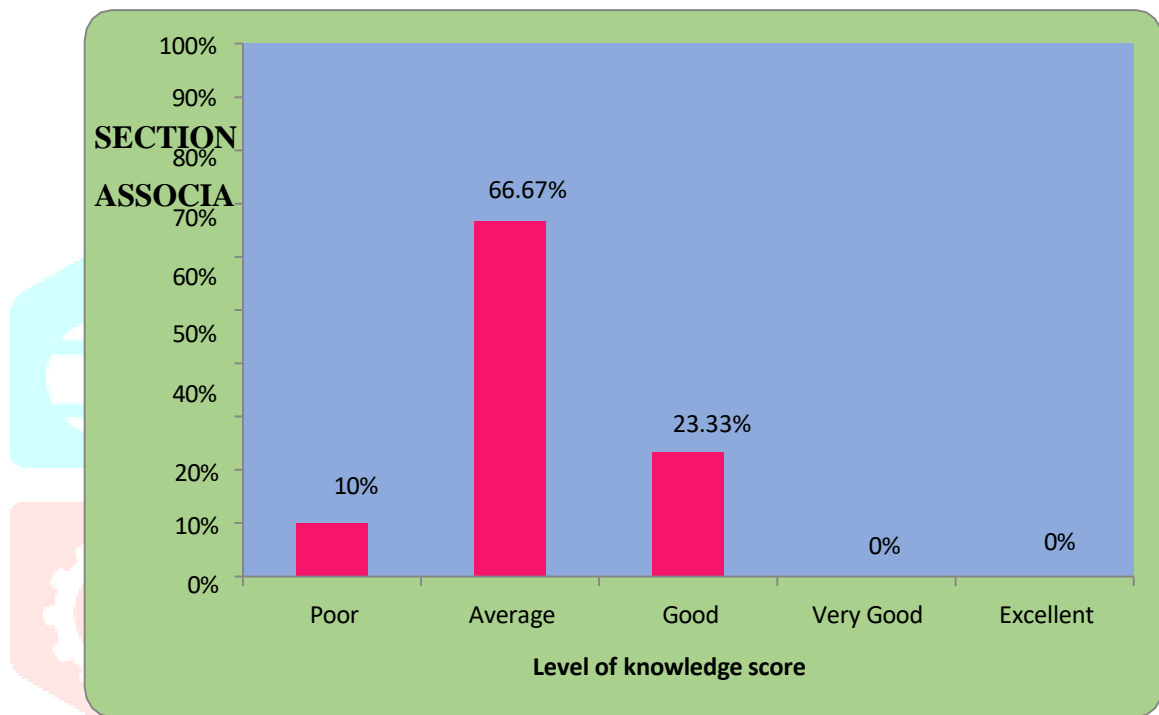
Collected data from parents was planned to analyze by using descriptive and inferential statistics. The descriptive statistics includes; percentage, mean, mean percentage and standard deviation. The inferential statistics includes; t test and Chi-square test using SPSS software. However, the tabulated data were planned to analyze underfollowing heading –

SECTION – I: Table no. IV.2: Percentage-wise distribution of primi mothers according to their demographic characteristics

Demographic Variables	No. of Primi mothers	Percentage
Age (yrs)		
18-21 yrs	28	46.7
22-25 yrs	29	48.3
26-29 yrs	3	5.0
≥30 yrs	00	
Marital Status		
Unmarried	7	11.7
Married	53	88.3
Religion		
Hindu	33	55.0
Muslim	11	18.3
Christian	1	1.7
Buddhist	15	25.0
Others	00	
Type of Family		
Nuclear	31	51.7
Joint	27	45.0
Extended	2	3.3
Area of Residence		
Urban	30	50.0
Rural	30	50.0
Knowledge of Breastfeeding techniques and burping		
Yes	9	15.0
No	51	85.0

Source of Knowledge		
Friends, family, teachers	3	33.3
Mass Media	4	44.4
Health Personnel	1	11.1
Newspapers and books	1	11.1

SECTION – III: FIGURE NO-10: Assessment level of knowledge score.

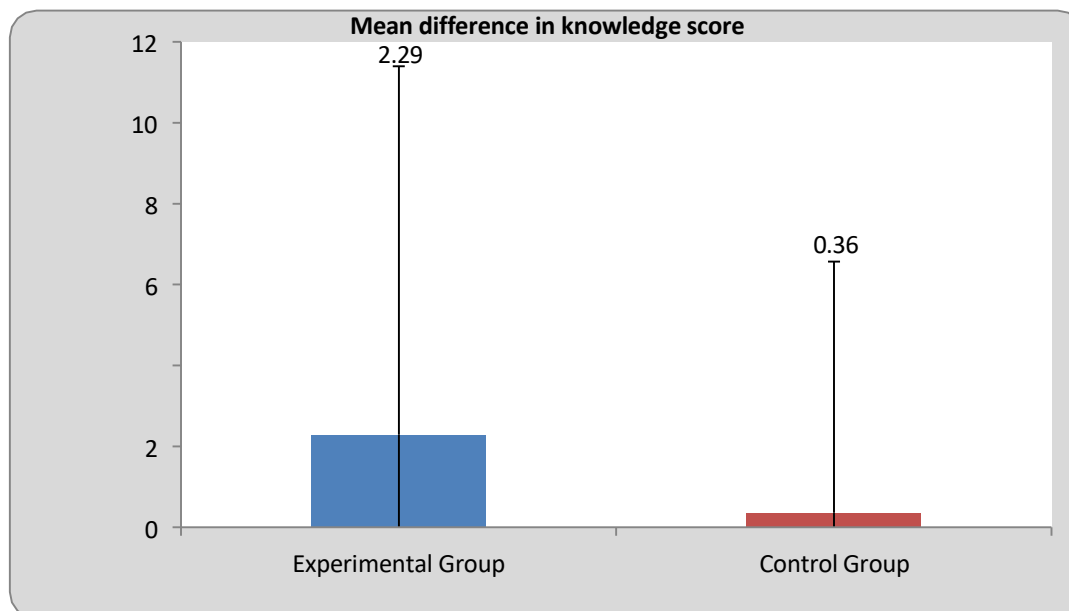


SECTION – IV Table no. IV-3: Assessment with level of knowledge score

Level of knowledge score	Score Range	Level of Knowledge Score	
		No of Primi mothers	Percentage
Poor	0-5(0-20%)	6	10
Average	6-10(21-40%)	40	66.67
Good	11-15(41-60%)	14	23.33
Very Good	16-20(61-80%)	0	0
Excellent	21-25(81-100%)	0	0
Minimum score		4	
Maximum score		15	
Mean knowledge score		8.71±2.61	

% knowledge score	34.86±10.46
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SECTION-V: As per Anova test Association between post-test knowledge score on prevention on behavioral problem among parents and their demographic variables in experimental group



ANALYSIS AND INTERPRETATION

Pre-test knowledge score

Table 1: Assessment with level of pre-test knowledge score

Level of Pre Test knowledge Score	Score Range	Level of Pre Test knowledge Score	
		Experimental Group(n=55)	Control Group(n=55)
Poor	0-6	5(9.09%)	4(7.27%)
Average	7-12	8(14.55%)	25(45.45%)
Good	13-18	7(12.73%)	19(34.55%)
Very Good	19-24	32(58.18%)	7(12.73%)
Excellent	25-30	3(5.45%)	0(0%)
Minimum score		3	5
Maximum score		26	22
Mean knowledge score		17.67±6.44	12.45±4.54
Mean % knowledge score		58.90±21.46	41.51±15.15

Table 1 shows that 9.09% of parents in Experimental Group and 7.274% in Control Group had poor level of knowledge score, 14.55% of parents in Experimental Group and 45.45% in control group had average level of knowledge score, 12.73% in experimental group and 34.55% in control group had good and 58.12% of parents in experimental group and 12.73% in control group had very good level of knowledge score. Minimum knowledge score in Experimental group was 3 and in control group it was 5 and maximum knowledge score in experimental group was 26 and in control group it was 22. Mean knowledge score in experimental group was 17.67 ± 6.44 and in control group it was 12.45 ± 4.54 and mean percentage of knowledge score in experimental group was 58.90 ± 21.46 and in control group it was 41.51 ± 15.15 .

Table 2: Assessment with level of posttest knowledge score

n=60

Level of Post Test knowledge Score	Score Range	Level of Post Test knowledge Score	
		Experimental Group(n=55)	Control Group(n=55)
Poor	0-6	3(5.45%)	9(16.36%)
Average	7-12	4(7.27%)	27(49.09%)
Good	13-18	2(3.64%)	7(12.73%)
Very Good	19-24	44(80%)	12(21.82%)
Excellent	25-30	2(3.64%)	0(0%)
Minimum score		4	5
Maximum score		26	23
Mean knowledge score		19.96 ± 5.52	12.09 ± 5.77
Mean % knowledge score		66.54 ± 18.40	40.30 ± 19.23

Table 2 shows that 5.45% of parents in Experimental Group and 16.36% in Control Group had poor level of knowledge score, 7.27% of parents in Experimental Group and 49.09% in control group had average level of knowledge score, 3.64% in experimental group and 12.73% in control group had good and 80% of parents in experimental group and 21.82% in control group had very good level of knowledge score. Minimum knowledge score in Experimental group was 4 and in control group it was 5 and maximum knowledge score in experimental group was 26 and in control group it was 23. Mean knowledge score in experimental group was 19.96 ± 5.52 and in control group it was 12.09 ± 5.77 and mean percentage of knowledge score in experimental group was 66.54 ± 18.40 and in control group it was 40.30 ± 19.23 .

Table 3: Significance of difference between knowledge Score in Pre and posttest of Parents- Experimental Group

Overall	Mean	SD	Mean Difference	t-value	p-value
Pre Test	17.67	6.44	2.29±9.11	2.86	0.045
Post Test	19.96	5.52			S,p<0.05

Table 3 shows the comparison of pretest and posttest knowledge score of parents from selected urban area of Maharashtra State. Mean, standard deviation and mean difference values are compared and student's paired 't' test is applied at 5% level of significance. The tabulated value for $n=55-1$ i.e. 54 degrees of freedom was 2.00. The calculated 't' value i.e. 2.86 are much higher than the tabulated value at 5% level of significance for overall knowledge score of Parents which is statistically acceptable level of significance. Hence it is statistically interpreted that Health Education on knowledge regarding prevention of behavioral problems in children among parents residing at selected urban region of Maharashtra State was effective

CONCLUSION

This study highlights the need for health education and training on breastfeeding techniques and burping for primi mothers. The results emphasize the importance of up skilling mothers to enhance their preparedness for handling breastfeeding techniques and burping effectively

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