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#### ORIGINAL RESEARCH

# An exploratory study to assess the knowledge regarding psychological complications during puerperium and its management among postnatal mothers in selected hospital of Moga, Punjab

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#### **Abstract**

In this study, a non experimental (exploratory) research design was used. Sample consists of 100 postnatal mothers was selected by simple random method of probability sampling technique at civil hospital, Moga, (Punjab). Maximum number 77 (77%) had average knowledge, followed by 12 (12%) of them had good knowledge and minimum number 11 (11%) of postnatal mothers had below average knowledge regarding psychological complications during puerperium and its management. From the findings of the study, it was concluded that age in years, education of mother, education of husband, family monthly income and source of information had significant impact on knowledge of postnatal mothers regarding psychological complications during puerperium and its management whereas gravida, mode of delivery, gender of newborn, religion and type of family had no significant impact on knowledge of postnatal mothers regarding psychological complications during puerperium and its management.

**Keywords:** Knowledge, psychological complications, puerperium, management, postnatal mothers, hospital.

#### **Background of the study**

Pregnancy is the most beautiful and memorable time in a woman's life. Apart from medical and obstetrical challenges it can involves a lot of emotional, psychological and social problems also. It is important to catch and treat signs of mental distress so as to prepare women for her approaching delivery, to optimise her role as a mother, and to prevent development of severe psychopathology. Maternal mental health problems pose a huge human, social and economic burden to women, their infants, their families and society which constitute a major public health challenge. Pregnancy and puerperium are highly stressful periods in women's life. As many as 56% mothers have minor to moderate mood swing symptoms of emotional upsets which may lead to psychological complications .

there are three psychiatric postpartum disorders: postpartum blues, postpartum depression, and postpartum psychosis. Postpartum blues is a self-limited period of instable mood and usually improves during the first weeks postpartum without treatment. It is detected in 39% to 85% of women after giving birth. Clinical manifestations of postpartum depression include sleep disturbances, mood swings, change in appetite, fear of harming the baby, extreme concern and worry about the baby, sadness, excessive crying, feelings of guilt and helplessness, concentration difficulties and memory disruption, loss of interest in daily activities, and recurrent thoughts of death, which may include suicidal ideation. Postpartum

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psychosis carries long-lasting consequences for mother and child. In addition to the suffering and impairment associated with this disorder, there are long-term risks associated with the illness.

Postpartum depression is a debilitating disorder that requires greater awareness and treatment. Depending on severity of symptoms, standard treatment calls for individual psychotherapy and medication. Although postpartum depression can lead to negative health outcomes for women and their offspring, numerous barriers prevent women from receiving appropriate care. It is needed to help identify cost-effective alternative therapies for treating postpartum depression. Combined with prevention and screening, treatment options that suit women's varied situations and preferences must be explored to increase reception and adherence to treatment and, ultimately, to improve outcomes.

#### **Statement of the problem**

An exploratory study to assess the knowledge regarding psychological complications during puerperium and its management among postnatal mothers in selected hospital of Moga, Punjab.

#### Purpose of the study

The purpose of the present study is to explore the knowledge regarding psychological complications during puerperium and its management among postnatal mothers.

#### Objectives of the study

- 1. To assess the knowledge regarding psychological complications during puerperium and its management among postnatal mothers.
- 2. To find out the relationship between knowledge score of postnatal mothers and selected demographic variables such as the age in years, gravida, education of mother, education of husband, mode of delivery, gender of newborn, religion, family monthly income, type of family and source of information.
- 3. To prepare and distribute an information booklet regarding psychological complications during puerperium and its management among postnatal mothers.

#### **Operational definitions**

**Assess**: It refers to find out the knowledge of postnatal mothers regarding psychological complications during puerperium and its management.

**Knowledge**: It refers to the range of factual information of postnatal mothers regarding psychological complications during puerperium and its management.

**Psychological complications**: It refers to problems which occur in mothers after the birth of the child, as postpartum depression, postpartum psychosis and postpartum blues.

**Puerperium:** It refers to the period begins immediately after the birth of a child and extends for about six weeks, as the mother's body returns to a non pregnant state.

**Management:** It refers to information regarding handling strategies to cope with psychological complications during puerperium.

**Postnatal mothers:** It refers to the mother with live baby, hospitalized or visited the hospital within 45 days after delivery.

**Hospital:** It is an institution providing medical and surgical treatment and nursing care for postnatal mothers.

#### Assumption

Postnatal mothers may have some knowledge regarding psychological complications during puerperium and its management.

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#### Research design

For the present study, **non experimental (exploratory) research design** was utilized to achieve the objective of the study.

#### **Research setting**

The present study was conducted in civil hospital, Mona.

#### **Target population**

The target population for the present study was postnatal mothers in civil hospital of Moga, Punjab.

#### Sample size and Sampling technique

Sample size for the present study was 100 postnatal mothers selected by using simple random method of probability sampling technique.

#### **Demographic variables**

In the study, selected demographic variables such as the age in years, gravida, education of mother, education of husband, mode of delivery, gender of newborn, religion, family monthly income, type of family and source of information.

#### Research variable

The research variables were the knowledge regarding psychological complications during puerperium and its management.

#### **Inclusion criteria**

- Postnatal mothers who were belong to age between 18 to 45 years.
- Postnatal mothers who were available during data collection.
- Postnatal mothers who were willing to participate in the study.

#### **Exclusion criteria**

- Postnatal mothers whose age was less than 18 or above 45 years.
- Postnatal mothers who were not available during data collection.
- Postnatal mothers who were not willing to participate in the study.

#### Selection and Development of the tool

As the study is to assess the knowledge regarding psychological complications during puerperium and its management among postnatal mothers in selected hospital of Moga, Punjab. Therefore, a structured questionnaire was prepared to assess the knowledge of postnatal mothers regarding psychological complications during puerperium and its management. Preliminary drafting of 30 multiple choice questions was prepared after extensive review of literature and thereafter consulting with subject guide.

#### **Description of tool**

The tool will be consisting of the following two parts:

#### **Part 1- Sample characteristics**

The part consist of demographic variables such as age in years, gravida, education of mother, education of husband, mode of delivery, gender of newborn, religion, family monthly income, type of family and source of information.

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# Part 2- A structured questionnaire to assess the knowledge regarding psychological complications during puerperium and its management.

This part consists of the multiple choice questions regarding psychological complications during puerperium and its management. A total of 30 questions are included and each question has a score of one mark. Each correct answer carry one mark and incorrect answer awarded with zero mark. Maximum score is 30 and minimum score is 0.

#### **Criterion measure**

Criterion measure used in this study was as follows:

Part I: It was related to sample characteristics which were not included in scoring system.

# Part II: A structured questionnaire to assess the knowledge regarding psychological complications during puerperium and its management containing 30 questions.

The criterion measure used in this study was knowledge score on psychological complications during puerperium and its management. The knowledge score refers to the total obtained score on knowledge items in the structured questionnaire by postnatal mothers.

#### The knowledge score is categorized into 3 levels:

| Level of knowledge | Score       | %              |  |
|--------------------|-------------|----------------|--|
| Good               | 23-30       | 76-100         |  |
| Average            | 16-22       | 51-75          |  |
| Below average      | <u>≤</u> 15 | <u>&lt;</u> 50 |  |
|                    |             |                |  |

Maximum score-30 Minimum score-0

#### **Content Validity of the tool**

Content validity of the tool was confirmed by the expert's opinions and suggestions regarding the relevance of the items. The experts included such as 13 from department of Obstetrics and Gynecological Nursing, 2 from department of mental health nursing, 2 from department of medical surgical nursing, 4 from department of community health nursing, 1 from department of child health nursing, 1 from department of maternal and child health nursing, 1 from MD gynecologist, and 1 from statistician. Their valuable suggestions were obtained and incorporated. The tool was modified according to expert's opinion. After considering the expert suggestions and modification the tool was finalized and translated in Punjabi and Hindi language.

#### Pilot study

The pilot study was conducted in the month of January 2019 at Astha hospital, Moga. The sample consists of 10 postnatal mothers. The time taken by each respondent for filling the tool was average 20 -30 minutes.

### Reliability of tool

The reliability of the tool was computed by split half method, Karl Pearson's co efficient of correlation, Spearman's Brown Prophecy formula. The reliability of tool was r = 0.80 and statistically validity was  $\sqrt{r} = 0.80 = 0.89$  that shows tool was highly reliable.

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#### **Data collection procedure**

Data was collected after obtaining formal permission from Senior Medical Officer of Civil hospital, Moga in the month of March 2019. The data was collected from postnatal mothers by using simple random method of probability sampling technique. The investigator gave self introduction to postnatal mothers and explains the purpose of gathering information they were assured that their response would be kept confidential and should be used for only research purpose. Informed consent was taken from the postnatal mothers .The data was collected from postnatal mothers in hospital by simple random method. The questionnaires were administered to postnatal mothers depending on the availability of postnatal mothers and questionnaires were administered individually and data was collected in English, Punjabi and Hindi language. The time taken by each respondent for filling the tool was average 20-30 minutes. At the end, information booklet was provided to postnatal mothers and quarries of subjects were clarified.

#### **Ethical considerations**

With the view of ethical considerations the researcher had taken the permission from research and ethical committee of Dr. Shyam Lal Thapar College of Nursing, Moga to conduct research study in selected hospital of Moga. Then discussed the type and purpose of the study with the Senior Medical Officer of civil hospital, Moga and Head of department of Obstetrics and Gynecological Nursing of civil hospital, Moga and written permission was obtained thereafter. Also the postnatal mothers were explained about the purpose of the study and informed consent was taken from the postnatal mothers for participation in the study. They were also informed about their right to refuse from participation in the study. The postnatal mothers were assured that information given by them will be kept confidential and will be used for research.

#### Plan for data analysis

Analysis and interpretation of the data in the accordance with the objective of the study. It was done by using descriptive and inferential statistics such as mean, percentage, standard deviation, coefficient of correlation and 'ANOVA -test', 'unpaired t- test', pie and bar diagrams are used to depict the findings of the study.

#### Organization of data analysis

The raw data collected were entered in a master sheet and analyzed and interpreted by using descriptive and inferential statistics. The data was organized and presented under following sections.

#### **Section I:** Sample characteristics

**Section II:** Findings related to assessment of knowledge of postnatal mothers regarding psychological complications during puerperium and its management.

**Section III:** Findings related to the relationship of knowledge score of postnatal mothers and selected demographic variables such as the age in years, gravida, education of mother, education of husband, mode of delivery, gender of newborn, religion, family monthly income, type of family and source of information.

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Section -I Sample Characteristics Table No. 1: Percentage distribution of Sample characteristics

| S. No.                | Characteristics           | n        | %   |
|-----------------------|---------------------------|----------|-----|
|                       | 1. Age in years           |          |     |
| a) 18-24              | 9 9                       | 19       | 19  |
| b) 25-31              |                           | 49       | 49  |
| c) 32-38              |                           | 25       | 25  |
| d) 39-45              |                           | 7        | 7   |
| u) 37 <del>1</del> 3  | 2. Gravida                | ,        | ,   |
| a) Primigravida       |                           | 57       | 57  |
| b) Multigravida       |                           | 43       | 43  |
| , 2                   | 3. Education of mother.   |          |     |
| a) Illiterate         |                           | 3        | 3   |
| b) Primary            |                           | 27       | 27  |
| c) Secondary          |                           | 27       | 27  |
| d) Higher Secondary   |                           | 33       | 33  |
| e) Graduate and above |                           | 10       | 10  |
|                       | 4. Education of husband   | 1        |     |
| a) Illiterate         |                           | 5        | 5   |
| b) Primary            |                           | 28       | 28  |
| c) Secondary          |                           | 35       | 35  |
| d) Higher Secondary   |                           | 24       | 24  |
| e) Graduate and abo   | ve                        | 8        | 8   |
| c) Graduate and acc   | 5. Mode of delivery       | <u> </u> | · · |
| a) Normal vaginal d   |                           | 19       | 19  |
|                       | elivery with episiotomy   | 40       | 40  |
| c) Caesarean section  |                           | 35       | 35  |
| d) Instrumental deliv |                           | 6        | 6   |
| ,                     | 6. Gender of newborn      |          |     |
| a) Male               |                           | 56       | 56  |
| b) Female             |                           | 44       | 44  |
|                       | 7. Religion               |          |     |
| a) Hindu              | <u> </u>                  | 33       | 33  |
| Muslim                |                           | _        |     |
| c) Sikh               |                           | 60       | 60  |
| d) Christian          |                           | 7        | 7   |
| e) Others             |                           | -        | -   |
| *                     | mily monthly income (in r | upees)   |     |
| a) ≤5000              | , (III I                  | 9        | 9   |
| b) 5001- 10,000       |                           | 27       | 27  |
| c) 10,001-15,000      |                           | 32       | 32  |
| d) ≥15,001            |                           | 32       | 32  |
| <u>~, ~10,001</u>     | 9. Type of family         | 34       | 32  |
| a) Nuclear            | -                         | 52       | 52  |
| b) Joint              |                           | 36       | 36  |
| c) Extended           |                           | 12       | 12  |

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#### **Section-II**

**Objective 1.** To assess the knowledge level of postnatal mothers regarding psychological complications during puerperium and its management.

Table-2: Frequency and Percentage distribution of knowledge scores of postnatal mothers regarding psychological complications during puerperium and its management.

| TA. 1 | 1  | Λ | n |
|-------|----|---|---|
| - 17  | =1 | u | ш |

| Level of knowledge | Score | Percentage   | n  | (%) |
|--------------------|-------|--------------|----|-----|
| Good               | 23-30 | 76-100%      | 12 | 12% |
| Average            | 16-22 | 51-75%       | 77 | 77% |
| Below average      | ≤15   | <b>≤</b> 50% | 11 | 11% |

Maximum knowledge score= 30

Minimum knowledge score =0

Table 2 and figure 4 depicts that maximum number 77 (77%) postnatal mothers had average knowledge, followed by 12 (12%) postnatal mothers had good knowledge and minimum number 11 (11%) of postnatal mothers had below average knowledge regarding psychological complications during puerperium and its management.

Hence, it was concluded that maximum number of postnatal mothers had average knowledge regarding psychological complications during puerperium and its management.

#### **Section -III**

**Objective 2:** To find out the relationship between knowledge score of postnatal mothers and selected demographic variables such as age of years, gravida, education of mother, education of husband, mode of delivery, gender of newborn, religion, family monthly income, type of family and source of information regarding psychological complications during puerperium and its management.

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Table -3
Mean knowledge score of postnatal mothers regarding psychological complications during puerperium and its management according to age in years.

|                |    |        |       | <u>N</u> =100 |
|----------------|----|--------|-------|---------------|
| Age in years   | n  | Mean   | SD    |               |
| a) 18-24       | 19 | 19.68  | 2.829 |               |
| b) 25-31       | 49 | 20.27  | 2.572 |               |
| c) 32-38       | 25 | 19.16  | 3.602 |               |
| d) 39-45       | 7  | 16.71  | 4.112 |               |
| Variance       | df | F      | P     |               |
| Within groups  | 96 |        |       |               |
| Between groups | 3  | 3.106* | 0.030 |               |

## Maximum knowledge score= 30 Minimum knowledge score= 0

\* Significant at p<0.05 level

Table 3 and figure 5 depicts that postnatal mothers who belongs to age group 25-31 years had maximum mean knowledge score (20.27), followed by postnatal mothers who belongs to age group 18-24 years had mean knowledge score (19.68), postnatal mothers who belongs to age group 32-38 years had mean knowledge score (19.16) and postnatal mothers who belongs to age group 39-45 years had minimum mean knowledge score (16.71) regarding psychological complications during puerperium and its management. The mean knowledge score was statistically significant at p< 0.05 level according to F ratio.

Hence, it was concluded that age in years had significant impact on mean knowledge score of postnatal mothers regarding psychological complications during puerperium and its management.

#### Conclusion

In the level of knowledge, maximum number 77 (77%) postnatal mothers had average knowledge, followed by 12 (12%) postnatal mothers had good knowledge and minimum number 11 (11%) postnatal mothers had below average knowledge regarding psychological complications during puerperium and its management.

#### Recommendations

- A similar study can be conducted on large sample for wonder generalization.
- A quasi experimental study can be done to assess the knowledge regarding psychological complications during puerperium and its management among postnatal mothers.
- A comparative study can be conducted to assess the knowledge regarding psychological complications during puerperium and its management among primigravida and multigravida mothers.
- ➤ A comparative study can be conducted between urban and rural postnatal mothers to assess the knowledge regarding psychological complications during puerperium and its management.

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