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## To assess the effectiveness of video assisted teaching programme on breast feeding techniques among primigravida mothers in Saveetha Medical College and Hospital

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### Abstract

This study was conducted to assess the effectiveness of video assisted teaching programme on breast feeding technique among primigravida mother's. Breast feeding techniques in the composite of positioning attachment and sucking position refers to the techniques in which the infant is held in relation to the mother's baby and attachments refers to whether the Infant has enough areola and Breast tissue on the mouth. A quantitative experimental research was conducted among 50 primigravida mother's. A convenient sampling technique was used to select the samples. Self-administered structured questionnaires were used to collect demographic data and knowledge assessed in Mother's. After pre test, intervention was given to the study participants i.e. video assisted teaching programme on breast feeding technique among primigravida mother's was given by video on one week. ( i.e. 3 days before and 3 days after video assisted). On 5<sup>th</sup> day after intervention post test was conducted by video assisted teaching programme. The present study also shows that the demographic variable and it has shown statistically significant association with the post-test level of breast feeding. The calculated paired 't' test value of  $t = 23.368$  was found to be statistically Highly programme on breast feeding technique administered to primigravida mothers resulted in a significant Improvement in the level of knowledge in the post test.

**Keywords:** Breast feeding technique of primigravida mother's

### Introduction

Pregnancy causes major physiological changes in a woman's body. These changes are mainly due to hormonal, metabolic and mechanical factors [2]. Breasts are accessory reproductive organs, where major changes occur. These changes are due to increased level of hormones like estrogen, progesterone and prolactin. The changes breast undergoes is increase in size, which makes it feel heavy and tender, along with that nipples also become tender. Many women due to these changes feel some sensation in their breasts such as tingling and soreness.

Breast feeding technique is the composite of positioning attachment and sucking. Positioning refers to the techniques in which the infant is held in relation to the mothers body and attachment refers to whether the infant has enough areola and breast tissues in the mouth. Women become mothers with little or no ability to breast feed, which makes them more vulnerable to difficulties. Problems associated with breast feeding can include engorgement, sore or painful nipples, plugged ducts and mastitis. Because of these problems, it causes distress, mild discomfort significant pain, which in turn prompts them to stop breast feeding after a few weeks. However, these problems can be treated effectively.

The above mentioned problems can be prevented effectively if due care is taken by the pregnant women from the beginning of pregnancy. To correct the anatomical defects, physical preparation such as nipple rolling should be taught during antenatal period as a way of making woman's nipples more protuberant. The other breast feeding related complications chances can be reduced by giving proper education in the antenatal periods.

Successful lactation is determined by early initiation of breastfeeding and continuation of lactation and again that is determined by positioning. Positioning is key to get Latch on.

A mother feeding her little bundle of joy is one of the most beautiful moments nature could ever create.

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There is no denying the fact that it is one of the simplest and natural phenomenon. Breastfeeding is a learning skill that takes practice. You need to learn how to hold and support your little one in the most comfortable position that requires both coordination and patience.

Holy Nishimura (2018), While breastfeeding rates have improved globally, disparities in breastfeeding practices persist particularly in rural and low resource settings. In India, only 56% of Indian mothers practice exclusive breastfeeding (EBF) for the recommended six months. As India leads the world in the number of preterm births, under 5 years of age malnutrition and neonatal mortality, understanding the factors associated with EBF can help improve the nutritional status for millions of infants. We assessed the factors associated with EBF in rural Mysore, India.

Emily Operto (2019), The prevalence of human immunodeficiency virus (HIV) in pregnant women was estimated at 6.1% in 2009, and in 2011, mother-to-child transmission (MTCT) of HIV resulted in 20 600 new paediatric HIV infections. A total of 50% of MTCT of HIV in Uganda occurs after birth, and this is partially attributable to poor adherence to infant feeding (IF) guidelines. Poor IF practices contribute to approximately 1.4 million deaths in children aged younger than five. In 2011, Uganda's rate of exclusive breastfeeding (EBF) was 62% for infants aged 0 to 5 months. Identifying barriers provides information on how to improve support for HIV-positive mothers' adherence to EBF, which may take the form of targeted interventions.

### Methods and materials

Final data was collected for one week of January 2020. Among primigravida mother's. Purpose of the study was explained to the subject. The subject were assured about anonymity and confidentiality of the information provided by them and written consent was taken from the primigravida mother's. Total 50 primigravida mother's were selected by using convenient sampling techniques pre-test was conducted using Questionnaires After pre-test Interventional was given to study participants i.e to assess the effectiveness of video assisted teaching programme on Breast feeding techniques. It was given by using Tamil written paper of Breast feeding techniques related Questionnaires 3 days and 2 days video assisted teaching has been given. And after one week later Intervention of post

test was conducted by Tamil written paper of Breast feeding Techniques Questionnaires. The data were analyzed using descriptive and Inferential statistics. The sample characteristics were described using frequency and percentage. Primigravida Mothers correlation coefficient was used to assess the effectiveness of video assisted teaching programme on breast feeding techniques of primigravida Mothers "chi square" was used to associated the post-test level of knowledge with the selected demographic variables.

### Results and discussion

The table 1 shows that most of the primi gravida mothers 21(42%) were in the age group of 18 – 20 yrs, 49(98%) were educated upto primary level, 26(52%) were housewives, 24(48%) were Muslims, 27(54%) belonged to nuclear family, 21(42%) had a family income of above 15,000, 38(76%) were vegetarian, 27(54%) were residing in rural area, 30(60%) were secondary gravida and 48(96%) had vaginal birth delivery.

The above table 2 shows that in the pretest, all 60(100%) had inadequate knowledge regarding breast feeding and whereas in the post test after the administration video assisted teaching programme on breast feeding 25(50%) had moderately adequate and adequate knowledge respectively.

The table 3 depicts that the pretest mean score of knowledge was 9.44 with standard deviation 2.23 and the post test mean score of knowledge was 22.62 with standard deviation 3.52. The calculated paired 't' test value of  $t = 23.368$  was found to be statistically highly significant at  $p < 0.001$  level. This clearly infers that video assisted teaching programme on breast feeding technique administered to primi gravida mothers resulted in a significant improvement in the level of knowledge in the post test.

**Section A:** The table 4 shows that the demographic variable age had shown statistically significant association with post test level of knowledge regarding breast feeding technique among primi gravida mothers at  $p < 0.05$  level and the other demographic variables had not shown statistically significant association with post test level of knowledge regarding breast feeding technique among primi gravida mothers.

### Section B: Assessment of level of knowledge regarding breast feeding among primi gravida mothers

**Table 2:** Frequency and percentage distribution of level of knowledge regarding breast feeding among primi gravida mothers. N = 50

Level of Knowledge	Inadequate ( $\leq 50\%$ )		Moderately Adequate (51 – 75%)		Adequate ( $> 75\%$ )	
	No.	%	No.	%	No.	%
Pretest	50	100.0	0	0	0	0
Post Test	0	0	25	50.0	25	50.0

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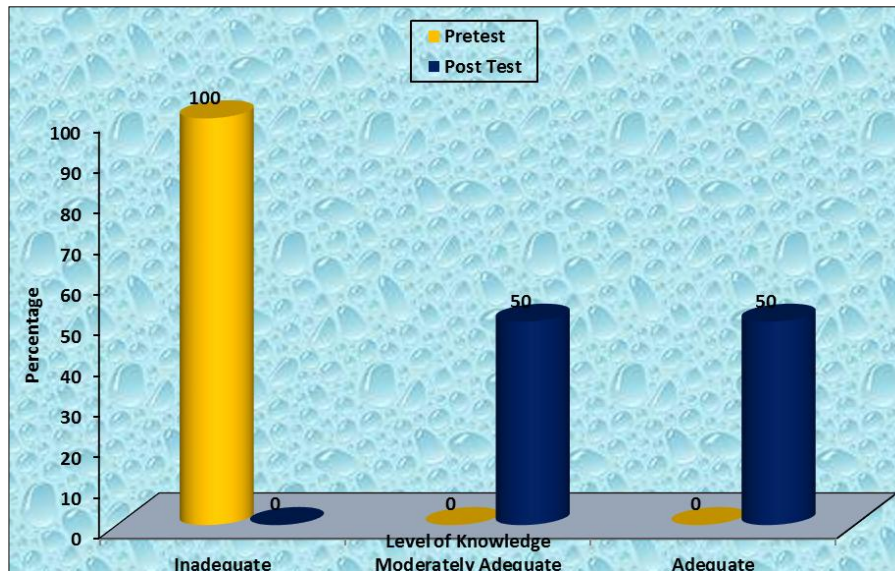


Fig 1: Percentage distribution of level of knowledge regarding breast feeding among primi gravida mothers

**Section C: Description of the demographic variables of primi gravida mothers.**

**Table 1:** Frequency and percentage distribution of demographic variables of primi gravida mothers. N = 50

Demographic Variables	Frequency (f)	Percentage (%)
<b>Age in years</b>		
18 – 20 yrs	21	42.0
21 – 25 yrs	17	34.0
26 – 30 yrs	12	24.0
<b>Educational status</b>		
Primary level	49	98.0
Secondary level	1	2.0
Graduates	-	-
<b>Type of job</b>		
Housewife	26	52.0
Private company	23	26.0
Any other jobs	1	2.0
<b>Religion</b>		
Hindu	15	30.0
Muslim	24	48.0
Christian	11	22.0
<b>Type of family</b>		
Nuclear family	27	54.0
Joint family	23	46.0
<b>Family income</b>		
Below 5,000	17	34.0
10,000 – 15,000	12	24.0
Above 15,000	21	42.0
<b>Type of foods</b>		
Vegetarian	38	76.0
Non-vegetarian	12	24.0
<b>Type of residence</b>		
Urban	23	46.0
Rural	27	54.0
<b>Type of gravida</b>		
Primary gravida	19	38.0
Secondary gravida	30	60.0
Third gravida	-	-
Multi gravida	1	2.0
<b>Type of delivery</b>		
Vaginal birth delivery	48	96.0
Natural birth	2	4.0
Scheduled cesarean	-	-
Unplanned cesarean	-	-

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**Author’s contribution**

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

**Conflicts of interest**

The authors declare no conflicts of interest.

**References**

1. Centre for community child health Breastfeeding practice, 2006. Promotion: resources. <http://www.rich.org.au/ccch>. Accessed on 13 July 2013
2. Brown A, Raynor P, Lee M. Young mothers who choose to breast feed: the importance of being part of supportive breast feeding community, 2011.
3. Davis SK, Articles JF, Spoeltler DM. Increasing Exclusive Breast feeding rates in the well baby population Nursing for womens Health 2015;16(6):460-470.
4. Press Information Bureau Government of India. Planning Commission, 2012. Found. Resources. <http://pub.nic.in/newsite printRelease.asp?relid=85362>, 2012 Accessed on 17 March 2017.
5. Breast feeding practices and beliefs among HIV+ pregnant and lactating women on jan 2012 Natamba BK The key carries to do uptake of PMTCT service in Ugand. Jan. Roberto. A project, 2014.
6. Sankar MJ, sonna B, Chowdhury R, Bhandari N, Taneja S, Martinez J *et al*. Optimal Breastfeeding practice and Infant and child mortality: a systematic

- review and meta analysis. *Acta paediatr.* 2015;104(467):3-13. doi: 10.1111/apa.1314+[pubmed] [cross Ref] [ Google scholar ].
7. Ministry of Health and family welfare International Institute for population science (IIPS) and ICF. National family health survey (NFHS-4)2015-2016 mumbai; India: ministry of Health ad family welfare, 2018.
  8. OGBO FA, AGHO KE. A Determinants of suboptimal breast feeding practice in Nigeria: Evidence from 2008 demographic and health survey *BMC public Health* 2015;15:259.
  9. Hinde K, German JB. Food in an evolutionary context: insights from mother's milk. *sci food Agric.* 2012;92:2219-2223. doi: 10.1002/jsfa.5720 (pmc free article). [Pubmed] [cross Ref] [google scholar].
  10. Akinremi Z, Samwel F. Knowledge and attitude of Exclusive Breast feeding among Hairdresser Apprentices in Ibadan, Nigeria. *British Journal of medicine and medical Research.* 2015;5(3):376-385. View at: publisher site /Google scholar.
  11. Tadele N, Hafa F. Knowledge, attitude and practice towards Exclusive Breast feeding and lactating Mother Mizan Aman Town, southwesters Ethiopia: Descriptive cross sectional Study *Journal of Health Education Research & Development.* 2015;03:03.
  12. SSFL. Breast pain in lactating mother's. *Hong Kong med J.* 2016;22:341-346. [pubmed] [google scholar].
  13. Ayed A. Knowledge, attitude and practice regarding exclusive breast feeding among mothers attending primary health care centre in Abha city, *International Journal of Medical science and public Health.* 2014; 3(11):1355. View at: publisher site/ Google scholar.
  14. Parashar M, Sigh S, Kishore Patavegar BN. Breastfeeding attachment and positioning technique, practice and knowledge of related issue among mothers in colony resettlement Delhi *ICAN* 2015;7:317-22.
  15. Tiruye G, Mesfin F, Geda B, shifera WK. Breastfeeding Techinque and associated factors among Breastfeeding mothers in Harar city. Eastern Ethiopia, *International Breastfeeding Journal* 2018;13(1):5.
  16. Vitura CG, Bahl R, Barros AJD, Franca GVA, Horton S, Krasevec J, et al. Breastfeeding mechanism, and lifelong effect. *The Lancet* 2016;387(10017):475-90.
  17. Mekuria G, Edris M. Exclusive Breastfeeding and associated factors among mothers in Debre Markos, Northwest Ethiopia: A cross sectional study. *Int. Breastfeed J* 2015;10:1. Wttp://doi.org/10.1186/S 13006- 014-0027-0 [PMC free article] [pubmed] [google scholar].
  18. Michelle Kominianek A, Priya Rajan. Nutrition Recommendations in pregancy and lactation *med lin North Am* 2017;100(6):1199-1215. Available at [www.ncbi.nlm.nih.gov](http://www.ncbi.nlm.nih.gov).
  19. An experimental Approach to study Individual Differences in Infants Intake and satiation Article, 2016. Alison k ventra Jul eA. Mennalla.
  20. Kakrani VA, Rathod Waghela HK, Mammulwar MS, Bhawalkar JS. Awareness about ten steps for successfully breastfeeding among medical and nursing students. *Int J prev Med,* 2015.
  21. Breast feeding in NSW-promotion, protection, and support, 2018. [www.health.new.gov.au](http://www.health.new.gov.au) App policy on Breast feeding, health initiative. 2018 [www.aap.org](http://www.aap.org).
  22. Knowledge, attitudes and determinants of exclusive breast feeding practice among, rural lactating, mother. Victor Magre, Michael Dery, patience K. Goa, 2016.
  23. Federal Ministry of Health. Integrated management of childhood illness. Addis abadu: federal ministry of Health, 2016. [google scholar].
  24. Kardel KR, Henriksen T, Iversen PO. (No effect of Energy supply during child birth on delivery outcomes in nulliparas women. A randomized double\_ blind placeto controlled trail.] *Obstet Gynecology* 2015;30:248-252.
  25. Fergusson DM, Beautrais AL, Silva PA. Breast Feeding and Cognitive Development in The First Seven Years of Life *Soc Sci Med.* 1982;6:1705-1708. doi:10.1016/0277-9536(82) 90096-x, Dol-pubmed.