

# Effectiveness of Self Instructional Module on MAA Programme Among Antenatal Mothers

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## ABSTRACT

Introduction: Breastfeeding is the most effective way to provide a baby with a caring environment and complete food. UNICEF stated that every year over one million infants die and millions of others are impaired for life time, because they are not adequately breastfeed. Every day between huge number of infants die from diarrhea and acute upper & lower respiratory tract infections because the inability to feed them adequately. The New Delhi Government launched National Breastfeeding Promotion Programme - MAA (mother's absolute affection) on Friday, 5 August 2016 to ensure adequate awareness is generated among masses, especially mothers, on the benefits of breastfeeding. Goal of the MAA programme that will continue for a year is to enhance optimal breastfeeding practices, which include initiation of breastfeeding within an hour of birth, Exclusive breastfeeding for the first six months. A study was carried out to assess the pre test knowledge score on breastfeeding among antenatal mother, to provide the self instructional module after assess the pretest knowledge score among antenatal mothers and to assess the post test knowledge score on breastfeeding among antenatal mother and to find out the association of knowledge score with selected demographic variable. Pre Experimental approach was adopted for the present study with pre test post test Research design. A total of 60 antenatal mothers were selected for the present study. The post test knowledge score is higher than the pre test knowledge score after administering the self instructional module to the antenatal mothers. This study concludes that, there was significant increase in the level of knowledge among antenatal mothers after the implementation of SIM (self instructional module) regarding MAA Programme.

**Keywords:** Effectiveness, Antenatal Mothers, Self Instructional Module, MAA Programme

## INTRODUCTION

Breastfeeding is the natural feeding and breast milk is best milk. The basic food of infant is mother's milk. Breastfeeding is the most effective way to provide a baby with a caring environment and complete food. Its meets the nutritional as well as emotional and psychological need of the infant. But there is a tendency to replace the natural means of infant feeding and introduction of breast milk substitutes. So, breastfeeding deserves encouragement from all concerned in the welfare of children. <sup>[1]</sup>

UNICEF stated that every year over one million infants die and millions of others are impaired, because they are not adequately breastfeed. Every day between 3000-4000 infants die from diarrhea and acute respiratory infections because the ability to feed them adequately has been away from their mothers. <sup>[1]</sup> Historically, breastfeeding has generally considered by health professionals as the ideal Feeding practice for infants. It is the first communication pathway between the mother and her infant. Previous studies

confirm that breastfeeding has advantages for both babies and mothers, including providing the needed nutrition for the babies, boosting the baby's immune system, helping mothers to lose weight after pregnancy, and stimulating the uterus to return to its previous position before pregnancy. In addition, infants can absorb and digest breast milk more easily than baby formula. Breastfeeding is the normal way of providing young infants with the nutrients they need for healthy growth and development. Breastfeeding is one of the most effective ways to ensure child health and survival. The principal composition of the breast milk are lactose 7g/100ml, fat 3.5g/100ml, protein 1.2g/100ml, sodium 7mmol/L, 89 % water and calories 75kcal/100ml. [7-9] Exclusive breast feeding for the first 6 month of life is probably the single most cost effective method to reduce the neonatal mortality rate and the infant's primary defence mechanism against infection. In this fast moving modern world this fact is being neglected by mothers, resulting in ill health and increasing morbidity among children.

Breastfeeding is an important topic in health education because of many benefit that can be gained for babies, mother and community. e.g. -the components of breast milk the needed nutrition for babies and boost the babies' immune system.

The New Delhi Government launched National Breastfeeding Promotion Programme - MAA (mother's absolute affection ) on Friday, 5 August 2016 to ensure adequate awareness is generated among masses, especially mothers, on the benefits of breastfeeding. Despite Breastfeeding being one of the most important interventions for child survival, dismal 64.9% children are exclusively Breastfeed for first six months in India. "Around 20% newborn deaths and 13% under 5 deaths can be prevented by early initiation of breastfeeding." CK Mishra said, Secretary (health), government of India, Beside it can also prevent child deaths associated with diarrhea and pneumonia.

Goal of the programme that will continue for a year, is to enhance optimal breastfeeding practices, which include initiation of breastfeeding within an hour of birth, Exclusive breastfeeding for the first six months. [2] The government will train nurse in government Hospital, ASHA, ANM to provide relevant information and counseling support to mothers for breastfeeding. Dedicated funds - Rs.4.3 lakhs per District .have been allocated to state for the programme which is in addition to the funds approved under National Health Mission's annual project implementation plan. To ensure effective roll out of the programme ministry of health has establishment MAA secretariat and a steering committee will be created in all states and at district level. The programme will be monitored by UNICEF and other partner. [UNICEF has roped in actor Madurai Dixit as brand ambassador to promote breastfeeding]. [3]

Approximately 13% children die in below 5 years of age, owing to poor breastfeeding practices.823000-Child death can be averted every year .156,000-Child death could be reduce in India with breastfeeding. 3.4MILLION/ Respiratory infection episode can be reduce 3.9 Million Diarrhea episode can be reduced 20000-Mothers death due to breast cancer can be averted globally. [4] Mydlilova, A. (2008) evaluated a prospective study on quality of breastfeeding preparation in the antenatal courses and to identify the other sources of breastfeeding information. Only 52.8% of mothers were satisfied with the course content. Women who attended the antenatal preparation were more informed about the correct breastfeeding technique, the harmfulness of bottle and pacifier usage, the disadvantages of the mother and newborn separation and alternative feeding methods than those who did not. The other sources of breastfeeding information were literature, magazines and Internet. The health professional participation was only 9%. During pregnancy 82.9% of women did not pass the breast examination. The study

concluded that it is necessary to improve the quality of antenatal courses on breastfeeding preparation and to increase the participation of health professional in breastfeeding information distribution. [5] Research shows that breastfeeding offers many health benefits for infants and mothers, as well as potential economic and environmental benefits for communities. Breastfeeding provides essential nutrition. Among its other known health benefits are some protection against common childhood infections and better survival during a baby's first year, including a lower risk of Sudden Infant Death Syndrome. [6]

Research has shown that mothers who nurse their infants as recommended by the AAP are less likely to develop premenopausal breast cancer and ovarian cancer, as well as osteoporosis, compared to women who do not breastfeed. Breastfeeding helps with weight loss after pregnancy, when mothers breastfeed exclusively for six months or longer. Mothers who breastfeed longer than six months report greater happiness and emotional security. Because their babies are healthier, working mothers are absent less often from work, are more productive, have reduced health care expenses and report that they experience less stress. [7]

**Problem statement:**

A pre experimental study to assess the effectiveness of Self Instructional Module on MAA programme among antenatal mothers in SGT Hospital, Gurugram, Haryana.

**Objectives:-**

1. To assess the pre test knowledge score on MAA programme among antenatal mothers.
2. To evaluate the effectiveness of self instructional module on MAA programme in terms of gain in knowledge score of antenatal mothers.
3. To find the association of pre-test knowledge scores with selected demographic variables.

**Research hypotheses:**

H<sub>1</sub>: The mean post-test knowledge scores of antenatal mothers undergone to Self instructional module will be significantly higher than the mean pre-test knowledge scores on MAA programme as measured by structured questionnaire at 0.05 level of significance.

H<sub>2</sub>: There will be significant association between the pre-test knowledge score with selected demographic variables such as age, education, parity and previous information about MAA programme.

**MATERIAL & METHODS**

**Research approach:** Quantitative research approach was used for the present study.

**Research design:** The design selected for the study was one group pre-test post design.

**Setting:** The study was conducted in antenatal ward of SGT Hospital, Gurugram.

**Population:** The population for the study was antenatal mothers at SGT Hospital of Gurugram

**Sample and Sample size:** The sample size was comprised of 60 antenatal mothers.

**Sampling Technique:** Purposive sampling technique was used for the present stud.

**RESULTS**

Data presented in Table 1 reveals the frequency and percentage distribution of characteristics of the demographics variables among antenatal mothers.

According to Age it was revealed that (21.7%) antenatal mothers were in group of below 21 years followed by (50.0%) in age group 21-25 years followed by (26.7%) in age group of 26- 30 years followed by (1.7%) in age group above 30 years.

As per education qualification of antenatal mothers (53.3%) metric followed by (30.0%) senior secondary followed by (16.7%) graduate. According to parity (80.0%) primipara and (20.0%) multipara. According to type of family maximum belong to joint family (70.0%), whereas

(23.3%) belong to nuclear family and (6.7%) belongs to extended family. According to occupation of the mothers maximum mothers are housewife (75.0%), whereas (11.7%) are private employee and

(8.3%) are government employee and (5.0%) any other occupation. On the basis of monthly income maximum income is (93.3%) 7001 and above, (6.7%) less than 5000- 7000Rs.

**Table 1: Frequency and Percentage Distribution of Demographic variables among antenatal mothers. N=60**

S.NO	DEMOGRAPHIC VARIABLES	FREQUENCY	PERCENTAGE (%)
1	<b>Age of mothers</b>		
	below 21 years	13	21.7%
	21- 25 years	30	50.0%
	26 -30 years	16	26.7%
	Above 30 years	31	1.7%
2	<b>Educational qualification of the mothers</b>		
	Metric	32	53.3%
	Senior secondary	18	30.0%
	Graduate	10	16.7%
3	<b>Parity:-</b>		
	Primipara	48	80.0%
	Multipara	12	20.0%
4	<b>Type of family:-</b>		
	Nuclear	14	23.3%
	Joint	42	70.0%
	Extended	4	6.7%
5	<b>Occupation of the mothers:-</b>		
	Housewife	45	75.0%
	Private employee	7	11.7%
	Government employee	5	8.3%
	Any others	3	5.0%
6	<b>Monthly incomes:-</b>		
	Less than 1000 Rs		
	1001-3000Rs		
	3001-5000Rs		
	5001- 7000Rs	4	6.7%
	7001 and above	56	93.3%
7	<b>No. Of family member :-</b>		
	2	4	6.7%
	3	11	18.3%
	4	14	23.3%
	5 and above	31	51.7%
8	<b>Source of health information:-</b>		
	Health personal	37	61.7%
	Mass media	8	13.3%
	Family and friends	15	25.0%
9	<b>ANC services:-</b>		
	Yes	55	91.7%
	No	5	8.3%
10	<b>Information on breastfeeding awareness among the respondent heard about exclusive breastfeeding:-</b>		
	Yes	31	51.7%
	No	29	48.3%
11	<b>Exclusive breastfeeding information sources :-</b>		
	Hospitals	19	31.7%
	Others	41	68.3%
12	<b>Have you received training on exclusive breastfeeding:-</b>		
	Yes	18	30.0%
	No	42	70.0%

According to no. of family members maximum family member 5 (51.7%) whereas 4 members (23.3%) whereas 3 members (18.3%) and 2 members (6.75).

According to source of health information (61.7%) health personal whereas (13.3%) is mass media and (25.0%)

family and friends. According to ANC services receiving by antenatal mothers (91.7%) maximum mothers received and (8.3%) is not received.

On the basis of information on breastfeeding awareness maximum (51.7%) mothers are aware and (48.3%) are not

aware. On the basis of exclusive breastfeeding information sources maximum (31.7%) hospitals and (68.3%) others.

**Table 2: Knowledge level of antenatal mothers regarding MAA Programme in pretest and posttest N=60**

Level of Knowledge	Pre test		Post Test	
	No.	%	No.	%
Inadequate (<50%)	7	11.7	-	-
Moderate (51-75%)	51	85	52	86.7
Adequate (>75%)	2	3.3	8	13.3
Total	60	100.0	60	100.0

Data presented in Table 2 depicts that majority (85%) of antenatal mother have moderate knowledge regarding

breastfeeding followed by (11.7%) of antenatal mother have inadequate knowledge and (3.3%) have adequate knowledge regarding breastfeeding in the pretest. While during post test majority (86.7%) antenatal mother showed adequate knowledge followed by (13.3%) antenatal mothers having moderate knowledge regarding breastfeeding.

Objective 2: To evaluate the effectiveness of self instructional module on MAA programme in terms of gain in knowledge score of antenatal mothers.

**Table 3: Significance of difference between pre test knowledge score and post test knowledge score among the antenatal mothers N=60**

Knowledge score	Mean	S.D	Mean difference	't' value	P value & Inference
Pretest	22.21	5.99	37.51	35.432	< 0.001 (S)
Posttest	55.23	4.55			

\*S- Significant, \*\*NS- Non Significant

Table 3 revealed that the average pretest knowledge score among antenatal mothers was found to be 22.21. After the self instructional module, the mean post test knowledge score was 55.23. This suggests that the mean post test score of antenatal mothers on MAA programme was significantly higher than the mean pretest knowledge scores. The standard deviation in pretest and post test was 5.99 and 4.55 respectively. Thus this signifies that the difference in the level of knowledge was (35.432), which was significant at  $p < 0.001$  level. Hence the null hypothesis  $H_{01}$  (statistical hypothesis) was rejected and research hypothesis  $H_1$  was accepted indicating that the gain in knowledge was not by chance. Therefore, it is concluded that the gain in knowledge of antenatal mothers was through the self instructional module on MAA programme was significant.

**Objectives 3: Association of pre-test knowledge scores with selected demographic variables.**

Sl.		$\chi^2$		Table	P	
No.	Demographic variables	value	df	value	value	Inference
1.	Age	0.500	1	3.84	$P > 0.05$	NS
2	Education	21.340	1	3.84	$P < 0.05$	S
3.	Parity	1.340	1	3.84	$P > 0.05$	NS
4.	Previous information	10.965	1	3.84	$P < 0.05$	S
		S: Significant, NS: Not Significance				

The data presented in table 4 shows that there was a significant association between the demographic variables such as education and previous information about MAA programme and the pre- test knowledge scores at 0.05 level of significance. But the other demographic variables such as age and parity do not shows statistical association with level of knowledge regarding MAA programme.

**Implications  
Nursing education**

The study has an important implication in the nursing education and other fields. One of the leading functions of nursing is to impart education with newer knowledge. The present study emphasized antenatal mothers had insufficient knowledge. Educating the mothers by self instructional module provides them a

confidence for good parenting. There is a need for continuing education offerings to inform community nurses about breastfeeding. While planning the curriculum, the nurse educators should encourage the students to participate in the public health education programme and expose them to develop booklet, handouts or role plays on breastfeeding and MAA programme.

### **Nursing practice**

Nurses are the backbone of the health care set up of any country. The nursing practice has gone many evolutions in the recent past. The expanded role of professional nurse emphasizes the activities which include promotive, preventive, curative and rehabilitative aspects. Nurses play an important role in disease prevention and health promotion. Health information and knowledge on breastfeeding through self instructional modules helps mothers to care for the newborn.

### **Nursing research**

A very few interventional studies have been conducted in SGT Hospital of Budhera, Gurugram on assessing the knowledge of antenatal mothers regarding breastfeeding.

New evidence based information becomes available every day on this subject. It is vital that student researchers update their knowledge constantly and are always willing to examine and alter their practice in the light of newly published evidence. Various methods may be used to strengthen the knowledge of the people by researches, which should be published for the benefit of those who are not able to participate in the study.

There is a great need for more research with various samples and different age groups. The challenge remains in turning knowledge gained from health education into lifelong practices and adopting new health behaviours

### **Nursing administration**

Nurse administrator may use the study findings to improve the quality of knowledge. The concept of extended role of

nurse offers many opportunities for a nurse administrator to improve the knowledge of antenatal mothers regarding breastfeeding. Continuing education and nursing education about breastfeeding need to be highly valued. Community health administrators should evaluate learning needs and provide continuing education via multiple channels to the community people.

## **DISCUSSION**

This study was carried out with an objective to prove the effectiveness of teaching program in improving the knowledge of antenatal mother regarding breastfeeding. In this study gross inadequacy of knowledge on breastfeeding among antenatal mothers was found during pre test which significantly improved during post test.

A similar study was conducted by Priyanka Kumari, Nila Vansa, Suman Lata (2015),<sup>[8]</sup> to assess the knowledge and attitude of mothers regarding exclusive breast feeding in selected rural and urban areas of district Jalandhar, Punjab. Objective of this research study is to assess and compare the knowledge and attitude in between the rural and urban mothers regarding exclusive breast feeding. Total 100 samples, half-half from the rural and urban mothers was assessed and compared by administering questionnaire and Likert scale. From the Results it is observed that 78% of urban mothers had good knowledge and 90% had positive attitude as compared by the rural mothers, 56% had average knowledge 24% had negative attitude towards the exclusive breast feeding. Urban area mean knowledge score (18.46) and attitude score (19.38) was higher as compared to the rural mothers (14.46) and (17.34). The calculated „value by using “t” Showed that (6.10) of knowledge and attitude (19.38) is greater than tabulated “ t” value (2.99) at the level of significance. Results concluded that the mother who is having knowledge definitely having positive attitude for exclusive breast feeding.

Mency Simon C, Neena M Sebastian, Neenu Alex, Anupama Tamrakar (2014),<sup>[9]</sup> conducted a study to assess the Knowledge Regarding Breast Feeding among Primi Mothers in Selected Hospital of Bangalore, Karnataka. The sample size is 30 Primi Para mothers age between 20- 40 age group. The study disclosed that more than three fourth of the respondents had inadequate knowledge and less than one fourth of them had moderately adequate knowledge regarding breastfeeding. None of them had adequate knowledge. The findings also illustrated that there was significant association between the knowledge scores of primi mothers and their educational status. Whereas, there was no significant association between the knowledge scores and age and type. The numerous health benefits of supreme breast milk cannot be ignored.

Therefore, it is concluded that there is inadequate knowledge regarding breastfeeding among primi mothers. There is the immediate need to create awareness regarding breastfeeding to the mothers to improve their breastfeeding Practice.

## CONCLUSION & RECOMMENDATION

This study concludes that ,there was a significant difference between level of knowledge among antenatal mothers after the implementation of SIM(self instructional module) regarding breastfeeding and assessed by administering questionnaire on various aspect of breastfeeding. In present study the mean knowledge score for samples were 3.32 & standard deviation were 4.83 hence the study shows that there is a strong need for such IEC(Information Education Communication) activities in the Hospital as well as in the community area.

### Recommendations

1. Similar study can be undertaken on a large sample for making a more valid generalization.
2. A true experimental study can be conducted at remote areas.

3. Study may be conducted on different samples.
4. Different method of imparting the education can be used.

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