

Effectiveness Of Educational Package on Knowledge and Practice of Wellbeing Among Postnatal Mothers

Prasannadevi.S¹, Prof.Porselvi.M², Dr.Karthi.R^{3*}

¹ M.Sc (N), E.S College of Nursing, Affiliated with The Tamilnadu Dr. M.G.R Medical University, Chennai, Tamilnadu, India.

² Principal, E.S College of Nursing, Affiliated with The Tamilnadu Dr. M.G.R Medical University, Chennai, Tamilnadu, India.

³ Professor cum Vice Principal, E.S College of Nursing, Affiliated with The Tamilnadu Dr. M.G.R Medical University, Chennai, Tamilnadu, India. (Corresponding Author)

*Corresponding author: Dr. Karthi R,

Email: karthir26@yahoo.com

(Orchid ID: 0000-0002-2227-7970)

ABSTRACT

Background: Wellbeing among postnatal mothers encompasses not only physical health but also emotional stability, social adjustment and readiness to assume maternal roles effectively. It includes practices such as maintaining personal hygiene, adhering to appropriate nutritional regimens, practicing safe breastfeeding techniques, engaging in light physical activity, monitoring for postpartum complications and seeking timely medical care when required. **Objectives:** (i) To assess the pre-test and post-test level of knowledge and practice of wellbeing among postnatal mothers. (ii) To assess the effectiveness of educational package in terms of gaining knowledge and practice of wellbeing among postnatal mothers. (iii) To find the association between the pre test knowledge and practice of wellbeing among postnatal mothers with their selected demographic variables. **Methodology:** A pre- experimental one group pre test and post-test research design was chosen for this study. 50 postnatal mothers were selected by using non- probability purposive sampling technique. The pre test and post-test level of knowledge and practice was assessed through the self structured knowledge questionnaires and self-reported practice checklist on wellbeing. **Results:** The finding shows that, in terms of knowledge level, mean difference score was 7.48 ± 0.43 . Practice level, mean difference score was 5.64 ± 0.47 shows statistically significant difference in pre test and post-test at $p < 0.05$. **Conclusion:** The study concluded that the educational package was effective in improving the knowledge and practice of wellbeing among postnatal mothers.

Keywords: Wellbeing, Postnatal mothers

How to cite this article: Prasannadevi S, Porselvi M, Karthi R. Effectiveness of educational package on knowledge and practice of wellbeing among postnatal mothers. Int J Drug Deliv Technol. 2026;16(75s): 403-408. DOI: 10.25258/ijddt.16.75s.44

INTRODUCTION

The postnatal or postpartum period, typically considered the first six weeks after childbirth, is a crucial time that requires careful attention to the mother's health and wellbeing. During this period, women experience significant physiological changes such as uterine involution, lactation initiation, and hormonal fluctuations, as well as emotional adjustments associated with the transition to motherhood. Ensuring optimal maternal wellbeing during this stage is not only essential for the mother's recovery but also for the newborn's growth and the overall health of the family unit.¹

the National Family Health Survey (NFHS-5, 2019–21) demonstrate substantial progress, with postnatal check-ups within two days of birth rising to 82.8%, yet challenges persist in terms of quality, follow-up visits, and equity of access.²

Wellbeing of the postnatal mothers includes practices such as maintaining personal hygiene, adhering to appropriate nutritional regimens, practicing safe breastfeeding techniques, engaging in light physical activity, monitoring for postpartum complications, and seeking timely medical care when required. However, studies have consistently shown that many postnatal mothers, especially in resource-constrained settings, lack adequate knowledge and demonstrate suboptimal practices regarding postnatal care. Cultural practices, lack of health literacy, limited access to healthcare services, and insufficient follow-up from healthcare providers often compound these gaps.³

OBJECTIVES OF THE STUDY

- To assess the pre-test and post-test level of knowledge and practice of wellbeing among postnatal mothers.
- To assess the effectiveness of educational package in terms of gaining knowledge and

Effectiveness Of Educational Package on Knowledge and Practice of Wellbeing Among Postnatal Mothers

practice of wellbeing among postnatal mothers.

- To find the association between the pre-test knowledge and practice of wellbeing among postnatal mothers with their selected demographic variables.

1.5. HYPOTHESES:

H1: There is a significant difference between pre-test and post-test level of knowledge and practice of wellbeing among postnatal mothers.

H2: There is a significant association between pre-test knowledge and practice of wellbeing among postnatal mothers with their selected demographic variables.

MATERIALS AND METHODS

A pre-experimental one group pre-test and posttest research design was chosen for this study, to assess the efficacy of educational package on knowledge and practice of wellbeing among postnatal mothers. 50 samples were selected by using non-probability purposive sampling technique, Based on the sample selection criteria as; **Inclusion Criteria:** Primi gravida aged between 18 to 40 years, Delivered through caesarean section, Available in postnatal ward till 5 day. **Exclusion criteria:** postnatal mother - undergone other surgical procedure, babies admitted to Neonatal intensive care unit. The pre and post-test level of knowledge and practice was assessed through the self-structured knowledge questionnaires and practice checklist on postnatal wellbeing among postnatal mothers. After pre-test Educational intervention was provided with an informational booklet on postnatal well-being, It comprise of information regarding postnatal period and postnatal wellbeing, importance of postnatal wellbeing, perineal care, postnatal diet, care of incision site, exclusive breastfeeding, and early ambulation. Data were analysed using descriptive and inferential statistics (t-test and chi-square test) significant at $p < 0.05$.

RESULTS

SECTION-I: Frequency and percentage distribution of selected demographic variables of postnatal mothers

With regards to **Age in years** 36 (72%) between 21 – 30 years, 8 (16%) participants were < 20 years, and 6 (12%) between 31 – 40 years. Concerning **Educational status** 16 (32%) secondary education, 16 (32%) higher secondary, 2 (4%) participants had no formal education, 3 (6%) primary education, 2 (4%) diploma, and 11 (22%)

graduate and above. In relation to **Occupation** 43 (86%) participants were home maker, 4 (8%) coolie, 2 (4%) private employee, and 1 (2%) a government employee. Pertaining to **Religion** 45 (90%) participants were Hindu, 5 (10%) Christian. Related to the **Type of family** 38 (76%) joint family, 12 (24%) participants belonged to nuclear family. Regarding to **Family income per month in Rs** 30 (60%) income between 10,001 – 50,000, 19(38%) participants had income below 10,000, and 1 (2%) income 50,001 and above. **Residence** 45 (90%) from rural area and 5 (10%) participants were from urban area. In **Dietary pattern** out of 50 samples, 13 (26%) participants were vegetarian, 35 (70%) non- vegetarian and 2 (4%) ova vegetarians. **Previous knowledge about postnatal well-being** is concerned, 26 (52%) participants answered Yes, and 24 (48%) answered No, among those who answered Yes, **the source of health information** were: 2 (8%) from friends, 19 (73%) family members and relatives, and 5 (19%) health care professionals.

SECTION – II: Frequency and percentage distribution of pre-test and post-test level of knowledge and practice of wellbeing among postnatal mothers.

Table-1: Frequency and percentage distribution of the pre-test and post-test level of knowledge of wellbeing among postnatal mothers.

N=50

Level of knowledge	Pre-test		Post-test	
	Freq uency	Perce ntage	Freq uency	Perce ntage
Adequate knowledge	2	4	47	94%
Moderate knowledge	47	94	3	6%
Inadequate knowledge	1	2	0	0%

The table-1 Reveals the frequency and percentage distribution of the pre-test level of knowledge 1 (2%) had inadequate knowledge, 47 (94%) had moderate knowledge and 4 (8%) had adequate knowledge. In post-test 47 (94%) had moderate knowledge 3 (6%) had adequate knowledge and none of them had inadequate knowledge.

Effectiveness Of Educational Package on Knowledge and Practice of Wellbeing Among Postnatal Mothers

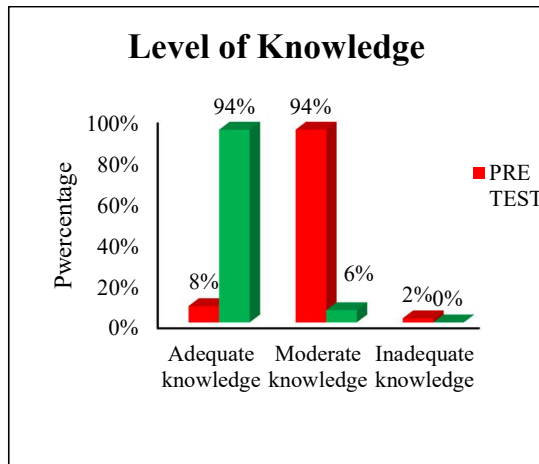


Figure - 1: Frequency and percentage distribution of the pre-test and post-test level of knowledge of wellbeing among postnatal mothers

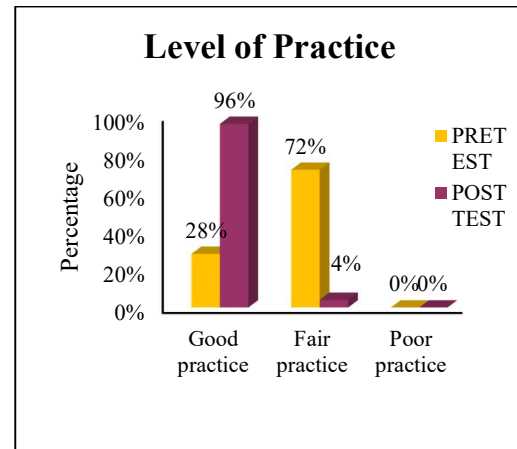


Figure - 2: shows that the Frequency and percentage distribution of the pre-test level of practice of wellbeing among postnatal mothers

Table-2: Frequency and percentage distribution of pre-test and post-test level of practice of wellbeing among postnatal mothers.

Level of practice	Pre-test		Post-test	
	Frequency	Percentage	Frequency	Percentage
Good practice	14	28%	48	96%
Fair practice	36	72%	2	4%
Poor practice	0	0%	0	0%

The table - 2 Reveals the frequency and percentage distribution of the pre-test level of practice 36 (72%) had fair practice, and 14 (82%) had good practice and none of them had poor practice. In post-test 48 (96%) had good practice, 2 (4%) had fair practice, and none of them had poor practice.

SECTION – III: Effectiveness of educational package in terms of gaining knowledge and practice of wellbeing among postnatal mothers.

Table - 3: Effectiveness of educational package on knowledge regarding postnatal wellbeing among postnatal mothers.
N=50

Pre test		Post test		Mean difference	Standard error	t Value
Mean	Standard deviation	Mean	Standard deviation			
15.36	3.1	22.84	1.85	7.48	0.43	17.39*

** $p < 0.05$ Highly significant

The table - 3 reveals that the mean difference was 7.48 with a standard error 0.43 and the calculated t-value of 17.39 was highly significant. This indicates a significant difference between the pre-test and post-test knowledge scores.

Table - 4: Effectiveness of educational package on practice regarding postnatal wellbeing among postnatal mothers.
N=50

Pre test		Post test		Mean difference	Standard error	t Value
Mean	Standard deviation	Mean	Standard deviation			

Effectiveness Of Educational Package on Knowledge and Practice of Wellbeing Among Postnatal Mothers

3		3				
0.	3.38	6.	2.32	5.64	0.47	12
6		2				*
4		6				

* $p < 0.05$ significant

The table 4.3.2: reveals that the mean difference was 5.64 with a standard error of 0.47, and the calculated t-value of 12 was significant. This indicates a significant difference between the pre-test and post-test practice scores.

SECTION – IV: Association between the pre-test knowledge and practice of wellbeing among postnatal mothers with their selected demographic variables

Table - 5: Association between the pre-test level of knowledge of wellbeing among postnatal mothers with their selected demographic variables
N=50

S.No	Demographic variables	Chi Square	P value
1	Age in years	0.994 df=4	0.91 NS
2	Educational status	4.934 df=10	0.895 NS
3	Occupation	0.519 df=8	0.999 NS
4	Religion	0.354 df=6	0.999 NS
5	Type of family	1 df=4	0.909 NS
6	Family income per month in Rs	0.105 df=6	0.999 NS
7	Residence	0.354 df=6	0.999 NS
8	Dietary pattern	1.367 df=6	0.967 NS
9	Previous knowledge about postnatal wellbeing	0.445 df=2	0.8 NS
9.a	If yes, source of health information	0.383 df=6	0.998 NS

* $p < 0.05$ significant

The table 5: reveals that there was no significant association between pre-test level of knowledge among postnatal mothers with their selected demographic variables

Table - 6: Association between the pre-test level of practice of wellbeing among postnatal mothers with their selected demographic variables.

N=50

S.No	Demographic variables	Chi Square	P value
1	Age in years	0.81 df=4	0.937 NS
2	Educational status	4.427 df=10	0.926 NS
3	Occupation	11.54 df=8	0.172 NS
4	Religion	0.231 df=6	0.999 NS
5	Type of family	0.772 df=4	0.942 NS
6	Family income per month in Rs	0.155 df=6	0.999 NS
7	Residence	0.231 df=6	0.999 NS
8	Dietary pattern	0.661 df=6	0.995 NS
9	Previous knowledge about postnatal wellbeing	0.003 df=2	0.998 NS
9.a	If yes, source of health information	12.48 df=6	0.061 NS

* $p < 0.05$ significant

The table - 6: reveals that there was no significant association between pre-test level of practice among postnatal mothers with their selected demographic variable.

DISCUSSION

The first objective of the study is “To assess the pre-test and post-test level of knowledge and practice of wellbeing among postnatal mothers”.

Level of knowledge: In the Pre-test 1 (2%) of them had Inadequate knowledge, 47 (94%) of them had Moderate knowledge and 4 (8%) of them had Adequate knowledge. In post-test 47 (94%) had moderate knowledge 3 (6%) had adequate knowledge and none of them had inadequate knowledge.

Level of practice: In the pre-test 14 (28%) of them had good practice, 36 (72%) of them had fair practice, and none of them in poor practice. In post-test 48 (96%) had good practice, 2 (4%) had fair practice, and none of them had poor practice.

The second objective of the study is to assess the effectiveness of educational package in terms of gaining knowledge and practice of wellbeing among postnatal mothers.

Knowledge:

Pre- test mean score was 15.36 with standard deviation of 3.1 and the post-test mean score was 22.84 with standard deviation of 1.85. The mean difference is 7.48 with a standard error of 0.43. The t value is 17.39 shows highly significance at the

Effectiveness Of Educational Package on Knowledge and Practice of Wellbeing Among Postnatal Mothers

$p < 0.05$ level. So there is significant difference between pre and post-test level of knowledge.

Practice

Pre- test mean score was 30.64 with standard deviation of 3.38 and the post-test mean score was 36.26 with standard deviation of 2.32. The mean difference is 5.64 with a standard error of 0.47. The t value is 12 shows significance at the $p < 0.05$ level. So there is significant difference between pre-test and post-test level of practice. **Hence H_1 hypothesis was accepted**

The finding of this study supported by **Madhumita Sarkar (2021)** conducted a study to assess the Effect of learning package on knowledge and practice regarding self care and child care among women undergoing caesarean section at bankurasammilani medical college and hospital, bankura, West Bengal. A quasi-experimental study was conducted. Using Ludwig Von Bertalanffy's system model as the conceptual framework, 64 antenatal women were selected through convenience sampling. Post-test scores showed significantly higher knowledge (18.68) and practice (26.06) in the experimental group compared to the control group (7.93 and 17.71, respectively), with significant " t " values ($p=0.05$). The learning package was found effective, and education level was significantly associated with improved outcomes.

The third objective of the study is to find the association between the pre-test knowledge and practice of wellbeing among postnatal mothers with their selected demographic variables.

There was no significant association between pre-test level of knowledge and practice among postnatal mothers with their selected demographic variables at $p < 0.05$. **Hence H_2 hypothesis was rejected.**

CONCLUSION

The finding clearly analysis that there is a significant difference between pre-test and post level of knowledge and practice of wellbeing among postnatal mothers. Hence the study concluded that the educational package was effective in improving the knowledge and practice of wellbeing among postnatal mothers

REFERENCE:

1. Romano M, Cacciatore A, Giordano R, La Rosa B. Postpartum period: three distinct but continuous phases. *J Prenat Med*. 2010 Apr;4(2):22-5. [PMC free article] [PubMed] [Reference list].

2. WHO, UNICEF UNFPA, WORLD BANK GROUP and UNDESA/Population Division. Trends in maternal mortality 2000 to 2020: estimates. WHO, Geneva. 2023. [Google Scholar].
3. Peer-review under responsibility of AMER (Association of Malaysian Environment-Behaviour Researchers), ABRA (Association of Behavioural Researchers on Asians/Africans/Arabians) and cE-Bs (Centre for Environment-Behaviour Studies), Faculty of Architecture, Planning & Surveying, Universiti Teknologi MARA, Malaysia. DOI: <https://doi.org/10.21834/ebpj.v7i20.3338>.
4. Liu, N.; Gou, W.H.; Wang, J.; Chen, D.D.; Sun, W.J.; Guo, P.P.; Zhang, X.-H.; Zhang, W. Effects of exercise on pregnant women's quality of life: A systematic review. *Eur. J. Obstet. Gynecol. Reprod. Biol*. 2019, 242, 170–177. [Google Scholar]
5. World Health Organization. (2023). Maternal health: Ensuring safe motherhood. <https://www.who.int/news-room/fact-sheets/detail/maternal-health>.
6. Hields A, de Assis V, Halscott T. Top 10 Pearls for the Recognition, Evaluation, and Management of Maternal Sepsis. *Obstet Gynecol*. 2021 Aug 01;138(2):289-304. [PMC free article] [PubMed] [Reference list]
7. Vogel JP, Chawanpaiboon S, Moller AB, Watananirun K, Bonet M, Lumbiganon P. The global maternal sepsis study and awareness campaign (GLOSS): study protocol *Best Pract Res Clin Obstet Gynaecol*. 2018 Oct;52:3-12. doi: 10.1016/j.bpobgyn.2018.04.003. Epub 2018 Apr 26.
8. Salama, Aml Ahmed; Salim, Samah Abdullallah; and Alkalash, Safa Hamdy (2024) "Prevalence and risk factors of post-partum infections at family health facilities in North Sinai, Egypt," *Menoufia Medical Journal*: Vol. 37: Iss. 1, Article 28. <https://doi.org/10.59204/2314-6788.1055>.
9. Sirilak T, Kanjanarat P, Nochaiwong S, Katip W. Incidence of postpartum infections and outcomes associated with antibiotic prophylaxis after normal vaginal birth. *Front Med (Lausanne)*. 2022 Sep 6;9:939421. doi: 10.3389/fmed.2022.939421. eCollection 2022. PMID: 36148454.

10. Journey to motherhood in the first year after child birth. Javadifar N, Majlesi F, Nikbakht A, Nedjat S, Montazeri A. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5241359/> J Family Reprod Health. 2016; 10:146–153. [PMC free article] [PubMed] [Google Scholar].
11. Hoffman BL, Schorge JO, Bradshaw KD, Halvorson LM, Schaffer JI, Corton MM. Williams Gynecology, Mc graw Hill professional, Apr 22 (2016).
12. Freaser Diane M., Cooper Margarate A. Myles Text book for Midwisves, 15th Edition (2008), Churchil Livindstone Elsevier Publication. Page no: (323- 424)
13. Hacker & Moore's, "Essentials of Obsetrics and Gynaecology, 15th Edition, (2011) Elsevier publication. Page no: (402- 411)