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A STUDY TO ASSESS THE PRACTICAL PROBLEMS FACED BY MOTHERS DURING POSTNATAL PERIOD OF MOTHERS ADMITTED IN POSTNATAL WARD IN SELECTED HOSPITAL, PUDUCHERRY

Prof. DR. JASMINE J, PhD, EBP Fellow.

ABSTRACT:

BACKGROUND: Each mother's experience with the postnatal period can vary widely. It's important for new mothers to seek support and communicate openly with their healthcare providers about any concerns or difficulties they encounter.

METHOD: The qualitative approach was used for this study and phenomenological research design was employed for this study. The research variable is practical problems faced by postnatal mothers and the study setting was post natal ward of Rajiv Gandhi Government Women & Children Hospital, Puducherry. The population for the study was postnatal mothers and sample are those who were undergone spontaneous vaginal delivery and admitted in post natal wards and sample size was 30.

PURPOSE: A phenomological study was conducted to assess the practical problems faced by post natal mothers.

RESULTS: The study revealed that 5 mothers (11.36%) had pain in the suture site, 3 mothers(6.81%) had back pain, 2 mothers(2.54%) had pain in shoulder while feeding the baby, 9 mothers(20.45%) had problems with positioning the baby while breastfeeding. Out of which, there are 7 primi mothers and 2 multigravida mothers. 2 Mothers (4.54%) had lack of knowledge regarding milk secretion and adequacy of feeding and both of them are primi mothers. 1 Mother (2.27%) had hygienic problem, 1 Mother (2.27%) had sleep disturbances during night time, 5 Mothers (11.36%) had pain in the breast during breast feeding, 5 Mothers (11.36%) had lack of knowledge regarding breastfeeding time, duration. Out of which, there are 4 primi mothers and 1 multigravida mothers. 3 Primi mothers (6.81%) had lack of knowledge regarding whether the baby taken adequate feed or not, 7 multigravida mothers (15.90%) had no problems during their postnatal period.

CONCLUSION: From this study, we can able to interpret that primi mothers faced most of the problems during postnatal period when compared to multigravida mothers.

BACKGROUND

The postnatal period, also known as the postpartum period, refers to the time after childbirth when a mother's body gradually returns to its pre-pregnancy state and adjusts to caring for a newborn. This period typically spans about six weeks but can extend longer, as each mother's experience is unique. Each mother's experience with the postnatal period can vary widely. It's important for new mothers to seek support and communicate openly with their healthcare providers about any concerns or difficulties they encounter.

PROBLEMS IDENTIFIED

Physical recovery includes:

- i. Uterine Involution: The uterus contracts and returns to its pre-pregnancy size. This process can cause cramping, known as afterpains.
- ii. Lochia: Vaginal discharge that includes blood, mucus, and uterine tissue. It gradually changes in color and amount over the weeks.
- iii. Breast Changes: Milk production begins, and breasts may become engorged or sore. Proper breastfeeding techniques can help alleviate discomfort.
- iv. Perineal Healing: If there was a tear or episiotomy during delivery, the perineum will heal. Good hygiene and care are essential.

Emotional and psychological adjustments include:

- i. Mood Swings: Hormonal changes can cause mood swings, irritability, or feelings of sadness, which are often temporary.
- ii. Postpartum Depression: Some mothers experience more severe or prolonged emotional difficulties, which require medical attention and support.
- iii. Bonding with Baby: Building a connection with the newborn is an important part of the postnatal experience and can affect both the mother's and baby's well-being.

Lifestyle changes include

- Sleep: New mothers often face sleep challenges due to the baby's feeding and sleep patterns. Nutrition:
 A balanced diet supports recovery and breastfeeding. Staying hydrated and eating nutrient-rich foods are important.
- ii. Support Systems: Emotional and practical support from family, friends, or professionals can make a significant difference.
- iii. A phenomological study was conducted to assess the practical problems faced by post natal mothers. The data was collected from 30 postnatal mothers admitted in postnatal ward and undergone spontaneous vaginal delivery at Rajiv Gandhi Government Women and Children Hospital, Puducherry.

Out of 30 mothers, 17 mothers (56.7%) are primi mothers and 13 mothers (43.3%) are multigravida mothers.

APPRAISAL OF EVIDENCE

- i. The Researcher conducted a comprehensive search of online research databases for articles regarding practical problems faced by mothers during postnatal period.
- ii. Evidence shown that primi mothers faced most of the problems during postnatal period when compared to multigravida mothers.

METHOD

The qualitative approach was used for this study and phenomenological research design was employed for this study. The research variable is practical problems faced by postnatal mothers and the study setting was post natal ward of Rajiv Gandhi Government Women & Children Hospital, Puducherry. The population for the study was postnatal mothers and sample are those who were undergone spontaneous vaginal delivery and admitted in post natal wards and sample size was 30.

Inclusion criteria of the study includes mothers those who are willing for the study, those who are available at the time of the study, mothers who can able to understand and talk tamil and exclusion criteria of the study includes mothers who are not willing to participate in the study, mothers who have undergone C-section.

The sampling technique employed for the study was simple random sampling. Ethical consideration was obtained from the ethical committee of Rajiv Gandhi Government Women & Children Hospital, Puducherry and oral and written consent was obtained from the participants and the data was collected using face to face interview method.

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OUTCOME

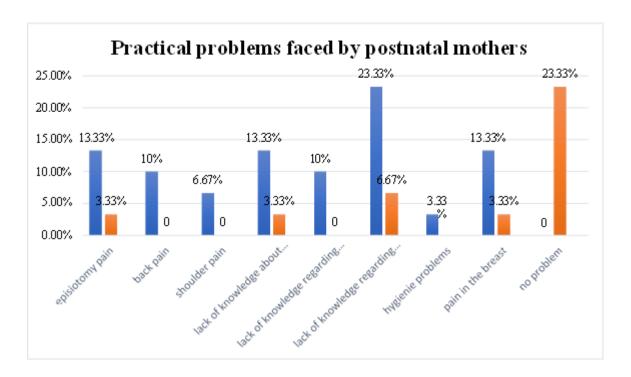
The phenomenological qualitative study was conducted among postnatal mothers admitted in Rajiv Gandhi Government Women & Children Hospital and undergone spontaneous vaginal delivery. The data collected from the study was categorized as

- · Episiotomy pain
- Back pain
- Shoulder pain
- Positioning of baby while breastfeeding
- Knowledge regarding milk secretion
- Hygienic problems
- Sleep disturbance for mother
- · Pain in breast during feeding
- Lack of Knowledge about breastfeeding
- Lack of knowledge about adequate feeding
- · No problems faced

The study revealed that 5 mothers (11.36%) had pain in the suture site (episiotomy site) and verbalized "I don't have any problem during breastfeeding but pain in suture site", "having pain in the suture site is the main problem I face". "Stiches under are very much painful while breastfeeding". 3 mothers(6.81%) had back pain and verbalized "I have back pain during breast feeding", "I had back pain while feeding the baby,". 2 mothers(2.54%) had pain in shoulder while feeding the baby and verbalized "shoulders becomes painful after holding baby for long period". 9 mothers(20.45%) had problems with positioning the baby while breastfeeding. Out of which, there are 7 primi mothers and 2 multigravida mothers. They verbalized "I don't know how to give breast milk in proper position", "I don't know what position for giving breast milk for the baby is".

- 2 Mothers (4.54%) had lack of knowledge regarding milk secretion and adequacy of feeding and both of them are primi mothers. They verbalized "while I am feeding I couldn't able to feel whether the milk is going to baby correctly or not". 1 Mother (2.27%) had hygienic problem and verbalized "My baby is crying while breastfeeding and not attach to the nipple because of bad odour". 1 Mother (2.27%) had sleep disturbances during night time and verbalized "I don't have enough sleep at night so I get tired at day time". 5 Mothers (11.36%) had pain in the breast during breast feeding and verbalized "my nipples are paining much while breast feeding", "while giving milk my nipples are paining".
- 5 Mothers (11.36%) had lack of knowledge regarding breastfeeding time, duration. Out of which, there are 4 primi mothers and 1 multigravida mothers. They verbalized "I don't know how to give milk", "I don't know how many in a day we have to give milk to the baby", "my baby is always sleeping then how can I give milk". 3 Primi mothers (6.81%) had lack of knowledge regarding whether the baby taken adequate feed or not, "I couldn't able to perceive whether adequate milk is being fed or not". 7 multigravida mothers (15.90%) had no problems during their postnatal period and verbalized that they don't have any practical problems during postnatal period.

PROBLEMS FACED	PRIMI MOTHERS	MULTI GRAVIDA MOTHERS
Episiotomy pain	4 (13.33%)	
Back pain	3 (10%)	0
Shoulder pain	2 (6.67%)	0
Lack of knowledge about breastfeeding	4 (13.33%)	1 (3.33%)
Lack of knowledge regarding adequacy of feeding	3 (10%)	0
Lack of knowledge regarding positioning	7 (23.33%)	2 (6.67%)
Hygienic problems	1 (3.33%)	0



CONCLUSION

From this study, we can able to interpret that primi mothers faced most of the problems during postnatal period when compared to multigravida mothers.

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