

Mothers' Level of Satisfaction with Postnatal Care

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A study to identify the level of satisfaction of mothers with postnatal care and its relationship with selected factors in a selected hospital of New Delhi.

A hospital may be soundly organized, beautifully situated and well equipped but if the nursing care is not of high quality, the hospital will fail in its responsibility. Nursing is an integral, indispensable and important component of the Health Care Delivery System.

The nursing profession is vested with duties and responsibilities of providing care to their clients. The health care system needs to be organized around population rather than diagnostic categories. Nursing is a significant, therapeutic and interpersonal process. It functions co-operatively with other human processes that makes health possible for individuals in communities.

With the advancement of education, development of communication, technology, growing health consciousness among the people and increasing maternal mortality rate in India there is a demand that consumer protection act be made applicable to nursing. In view of the growing need to evaluate the effectiveness of health care services provided from mother's point of view, the investigator felt that there is a need for study from the mother's level of satisfaction with postnatal care. This would help in improving the quality of postnatal care, evaluating nursing performances as well as improving nursing practice and education.

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Objectives of the Study

- ♦ To assess the level of satisfaction of mothers with postnatal care received.
- ♦ To determine area wise satisfaction of mothers with postnatal care received.
- ♦ To determine the relationship between the satisfaction of mothers with postnatal care with the selected factors:
 - (i) Parity
 - (ii) Education
 - (iii) Family Income
 - (iv) Type of delivery, and
 - (v) Sex of new-born.

Assumptions

- ♦ Postnatal mothers will be willing to provide information regarding their satisfaction with nursing care.
- ♦ Information provided by the mothers will closely reflect their actual state of satisfaction.
- ♦ Postnatal mother's level of satisfaction is measurable by the interview schedule.
- ♦ Satisfaction is very closely related to the mental state and physical well being.
- ♦ Understanding the relationship between the nurse and mothers brings about more satisfaction.
- ♦ Successful treatment gives satisfaction to the mothers
- ♦ Unmet needs bring dissatisfaction to the mothers.

Methodology

The conceptual framework adopted for the study was based

on Donabedian's framework "Structure, process and outcome evaluation". The research approach adopted for the study was descriptive co-relational survey. The tool used for data collection was structured interview schedule. Through the interview technique, the researcher may stimulate the subject to greater insight into his own experiences, and thereby explore significant areas not anticipated in the original plan of investigation. The interview is also appropriate when dealing with illiterates, those with language difficulties, and those of limited intelligence. Hence structured interview schedule was considered the most appropriate tool for the collection of data. The structured interview schedule was developed based on intense review of related literature, expert opinion and the researchers professional experience.

The structured interview schedule has two section: Section - I is designed to collect information of sample characteristics consisting of ten items. Section- II consisting of satisfaction scale of postnatal mothers which includes nine areas of postnatal care with 47 items. Maximum possible score was 141 and minimum possible score was 47 (Score range 47-141). The three responses were satisfied, partially satisfied and dissatisfied and were assigned score as 3, 2, and 1 respectively.

The content validity of interview schedule was established in consultation with guides and nine experts in the field of Obstetrics Nursing and Medical field.

Cronbach Alpha formula was used to test the reliability of the tool . (0.930)

A pilot study was conducted after assessing the effectiveness of the tool and to find out the feasibility of undertaking the final study and to decide the plan of statistical analysis. It was found that the tool was effective and feasible for the study. The pilot study subjects were not included in the final study.

A purposive sampling technique was used to select 100 postnatal mothers (Episiotomy mothers -58 and L.S.C.S. mothers-42) in Govt. Maternity Hospital, New Delhi. Mothers were interviewed personally by the investigator at the bedside from the third postnatal day onwards. The data was analyzed by using Descriptive and Inferential statistics in terms of frequency, percentage, mean, median, standard deviation and chi-square.

The data was organized and presented into four sections. Section-I : Description of sample characteristics; Section-II: Mother's level of satisfaction with postnatal care; Section -III : Area-wise satisfaction of mother's with postnatal care; and Section IV : Relationship between the postnatal mother's satisfaction with selected factors.

Findings

1. Findings related to sample characteristics:

As regards the age of subjects: Majority of the mothers (73%) belonged to the age group of 21-30 years, 23% were below 20 years and only 4% were above 31 years. As regards education: Maximum number of mothers' (48%) educational level upto 6th to 10th class standard; (24%) of mothers were illiterate; (17%) of mothers had 1st -5th class standard; (11%) of mothers had above 10th standard education. Majority of mothers (67%) belonged to

the income group of below Rs. 3000. Only (5%) belonged to the income group between Rs. 4001- Rs. 5000, whereas (14%) belonged to the income group between Rs. 3001- Rs. 4000 and above Rs. 5000.

Majority of mothers (98%) were housewives; working mothers were only 2%. As regards parity: Maximum numbers of mothers (51%) were primipara and 49% were multipara; 58% of mothers had vaginal delivery with Episiotomy, 42% of mothers had Caesarean delivery.

Majority of mothers (61%) stayed in hospital for 3-4 days; 18% stayed for 5-6 days, only 21% of mothers stayed for more than 6 days and these were caesarean mothers. As regards history of present pregnancy : Maximum numbers of mothers (96%) belonged to planned pregnancy and only 4% belonged to unplanned pregnancy.

As regards previous experience of hospitalization : 61% of mothers had no previous experience of hospitalization, whereas 39% of mothers had previous experience of hospitalization. Out of 100 babies of the subjects, 51% were male babies, whereas 49% were female babies.

2. Findings related to mother's level of satisfaction with postnatal care:

The overall mean satisfaction score of mothers was 92.98 and the median was 95. Standard deviation was 12.48. Majority of mothers (74%) were partially satisfied, 16% were found to be dissatisfied and only 10% were satisfied with the postnatal care received.

3. Findings related to area-wise satisfaction of mothers with postnatal care:

The areas of highest satisfaction as expressed by the mothers were Comfort and Safety (89.17%),

Treatment (87.56%). These were ranked as first and second, followed by Psychological Support (77.67%) and Diet (69.6%) which were ranked as third and fourth. Various procedures (69.13%) and Reception in the Ward (68.25%) were ranked as fifth and sixth. Postnatal Care areas of least satisfaction were Hygiene (57.90%), Care of Newborn (51%), Health Teaching (47.86%) which were ranked as seventh, eighth and ninth respectively.

4. Findings related to relationship between the postnatal mother's satisfaction with selected factors:

There was a significant relationship, between satisfaction of mothers with parity. The chi-square value of 7.40 (df-2) was significant at 0.05 level. There was a significant relationship between satisfaction of mothers with type of delivery on postnatal care received by them. The Chi-square value of 17.85 (df-2) was significant at 0.05 level. Multipara mothers were more satisfied than primipara mothers. Whereas Caesarean mothers were more satisfied than vaginal delivery with episiotomy mothers.

The chi-square test showed that there is no significant relationship between the satisfaction of mothers with their education, family income and sex of newborn on postnatal care received by them.

Conclusion and Implications

The study concluded that there is need to improve the quality of postnatal care. Only 10% of mothers were satisfied with the care received. To keep a balance in this changing scenario, nurses must provide quality care in their work setting by utilizing the resources, manpower and time, to make the parturient satisfied.

There is a need to develop evi-

dence based practice in the wards which should be emphasized on need based individualized care. Those areas of least satisfaction if properly carried out can lead to improved mother's satisfaction. In spite of pressures of workload a nurse must not neglect to perform these fundamental actions.

Administrator needs to be aware of standard of nursing practice and evaluation of mid-wife nursing practice standards should be facilitated by the administrator through in-service education and continuing education. He should maintain annual performance record for recommendation and selection of national awardees for the nurses, to inculcate the feelings of devotion towards the mothers care during the post-partum period.

The nursing service administration as well as the Hospital administration need to have joint responsibilities to supervise the delivery of postnatal care in order to have a better outcome.

Learning experience in the postnatal wards should be strengthened in basic nursing curriculum to provide quality care.

Nurses need to teach the family and community in order to empower women in decision making and to come up in life.

More research should be conducted on consumer satisfaction in midwifery practice.

The study has some limitations for generalization of its findings because the interview schedule used was structured and the responses were therefore restricted. The study is limited to a small sample due to shortage of time for data collection.

Recommendations

- ♦ A similar study may be replicated on a large sample drawn from Antepartal, Intrapartal and Postpartal Units in the hospital.

- ♦ A comparative study may be conducted between a government and a private hospital for further exploration.
- ♦ A similar study may be conducted on the care provided by various levels of midwifery personnel working in the Hospital or Community Health Centre.
- ♦ A similar study may be conducted through different tools.
- ♦ A study may be conducted to explore Hospital personnel's opinion, mother's attendant's opinion regarding the improvement of services which may open new areas of exploration.
- ♦ A study may be conducted to evaluate the quality of postnatal care through an analysis of written records maintained by the nurses in the patient's treatment file or through direct observation.

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