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Descriptive study to assess the knowledge on warning signs of selected newborn illness among the primimothers with a view to develop an information booklet

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Abstract
A descriptive research design was used to assess the knowledge on warning signs of selected newborn illness among the primimothers who are attending MCH center at Tirupati. A total of 100 primimothers were selected by convenience sampling technique. Tool used for conducting study was for data collection was a structured questionnaire on warning signs of selected newborn illness. Analysis was done SPSS package 21 version.

The findings of the study revealed that Among 100 primimothers 12% (12) primimothers had inadequate knowledge on warning signs of selected newborn illness, 57% (57) primimothers had moderate knowledge on warning signs of selected newborn illness, 31% (31) primimothers had knowledge on warning signs of selected newborn illness. Among 100 primimothers 31% (31) primimothers had inadequate knowledge on home care for selected newborn illness, 53% (53) primimothers had moderate knowledge on home care for selected newborn illness, 16%(16) primimothers had adequate knowledge on home care of selected newborn illness. Analysis revealed that there is a significant relationship between demographic variable and level of knowledge and at $p<0.01$ level and $p<0.05$ level.

Keywords: Warning signs, selected newborn illness, primimothers

1. Introduction
Neonates or newborns are the most delicate group among kids as they are not able to express their feelings of happiness, sad, pain or discomfort and their systems are immature, just starting to adjust to the extra uterine life. It is very difficult to see a newborn crying when he or she is sick. They are the heart and the soul of their parents, a precious gift to them after a long expectation of nine months. Being a mother for the first time is a wonderful and exciting feeling for any women in her life. Once she comes to know that she is going to be a mother, she starts preparing for motherhood and waits patiently and expectantly for her baby. The neonates are newborns from birth to 28 days. The neonatal deaths account for 56 percent of under-5 deaths in India which is much higher than the global average of 44 percent. The progress in reduction of neonatal mortality has been slow.

Each year, approximately three million children die in the first 28 days after birth, predominantly due to complications of preterm birth, asphyxia and sepsis. The three major causes of neonatal deaths worldwide are infections (36%), which includes (sepsis/pneumonia, tetanus and diarrhea), pre-term (28%), and birth asphyxia (23%). There is some variation between countries depending on their care configurations.

In India every year, 1.34 million children die before completing five years, of which 7,48,000 die within the first month of their life. "This means more than 2,000 newborn die each day in India. Andhra Pradesh has shown 17 percent decline during the same period.

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Mother plays an important role in identifying minor developmental deviations and early evidence of the disease process because she is constantly and closely watching her baby [7]. The most common minor problems occur in newborns are vomiting and reflux, constipation, diarrhea, failure to pass me conium and urine, physiological jaundice, hiccups, sneezing, yawning, dehydration fever, conjunctivitis, skin rashes, oral thrush, umbilical cord infection excessive crying, colic and abdominal distension.

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World health organization (WHO) estimates that more than nine million infants die before birth or in the first few weeks of life each year and that nearly all of these deaths occur in developing countries. Irrespective of various developments, the situation relating to neonatal health remains a major concern and a daunting challenge. Neonatal infections and the minor problems is one of the major leading causes of death during the neonatal period. It can contribute up to 13-15% of all deaths during the neonatal period with the mortality rate reaching as high as 50% for infants who are not treated timely. One of the aims of the Infant and Neonatal Health (INH) team within the WHO Department of Child and Adolescent Health and Development (CAH) is to reduce infant mortality and to ensure that newborns have the opportunity for a healthy start in life.

Three major causes contribute to about 60 per cent of all deaths in the newborn period: pre-maturity and low birth weight, birth asphyxia and infections. Inappropriate practices such as delayed initiation of breastfeeding, delayed clothing and early bathing, not seeking care when newborns are sick and applying harmful material on cord-stump increase the risk of newborndeaths [11]. Diarrhea is a fifth deadly disease in India among the newborns, despite the availability of easily implementable interventions and existence of National Guidelines for management at the community level.

Objectives
1. To assess the knowledge of the primimothers regarding warning signs of selected newborn illness.
2. To assess the knowledge of primimothers regarding home care for selected newborn illness.
3. To find out the association between knowledge on warning signs of selected newborn illness with selected demographic variables.
4. To find out the association between knowledge on home care for selected newborn illness with selected demographic variables.
5. To develop an information booklet.

Hypotheses
H$_1$: There will be inadequate knowledge on warning signs of selected newborn illness among primimothers who are attending MCH center at Tirupati.

H$_2$: There will be inadequate knowledge on home care for selected newborn illness among primimothers who are attending MCH center at Tirupati.

H$_3$: There will be a significant association between level of knowledge on warning signs of selected newborn illness with selected demographic variables.

H$_4$: There will be a significant association between level of knowledge on home care for selected newborn illness with selected demographic variables.

Methodology
A descriptive research design was used to assess the knowledge on warning signs of selected newborn illness among the primimothers who are attending MCH center at Tirupati. A total of 100 primimothers were selected by convenience sampling technique. Tool used for conducting study was for data collection was a structured questionnaire on warning signs of selected newborn illness. Data were analyzed with the help of descriptive and inferential statistics.

Results
Demographic profile of primimothers
Majority half of the primimothers to age between 21-25 years. In relation to religion majority 81% (81) belongs to Hindus. Regarding the education of the primimothers76% (76) belongs to collegiate education. In accordance with primimothers occupation 85% (85) belongs to home maker. With regard to family income 88% (88) had between 10.000-20.000 per month. With regard to type of family 79% (79) nuclear family. Regarding duration of marital life 45% (45) below 1year. In related to information received 67% (67) receiving from health care team. Considering to type of house 99% (99) had pakka house. Regarding type of drainage 97% (97) were had closed drainage system.

Knowledge among primimothers regarding warning signs of selected newborn illness

Table 1: level of knowledge among primimothers regarding warning signs of selected newborn illness

Level of Knowledge	Category	Frequency	Percentage
Inadequate	<50%	12	12%
Moderate	50-75%	57	57%
Adequate	>75%	31	31%

Table 1: Shows Out of 100 primimothers 12%(12) primimothers had inadequate knowledge on warning signs of selected newborn illness,57%(57) primimothers had moderate knowledge on warning signs of selected newborn illness, 31%(31) primimothers had adequate knowledge on warning signs of selected newborn illness.

Knowledge among primimothers regarding home care for selected newborn illness

Table 2: level of knowledge among primimothers regarding home care for selected newborn illness

Level of Knowledge	Category	Frequency	Percentage
Inadequate	<50%	31	31%
Moderate	50-75%	53	53%
Adequate	>75%	16	16%

Table 2: Shows Out of 100 primimothers 31% (31) primimothers had inadequate knowledge on home care for selected newborn illness, 53%(53) primimothers had moderate knowledge on home care for selected newborn illness, 16% (16) primimothers had adequate knowledge on home care of selected newborn illness.

Table 3: Mean and standard deviation for knowledge on warning signs of selected newborn illness and its home care among primimothers

S. No	Category	Mean	Standard Deviation
1	Knowledge on warning signs of selected newborn illness	2.19	0.631
2.	Knowledge on home care of selected newborn illness	1.85	0.672

Table 3: Shows that Mean and standard deviation scores on knowledge on warning signs of selected newborn illness were 2.19 and 0.631 and knowledge on home care for selected newborn illness were 1.85 and 0.672.

Association between socio-demographic variables with the level of knowledge regarding warning signs of selected newborn illness among primimothers

Table 4: Association between socio-demographic variables with the level of knowledge regarding warning signs of selected newborn illness among primimothers

S.NO	Demographic variables	Chi-square	p - value	Sig/SN
1	Age	17.180	0.009	**
2	Religion	4.004	0.676	@
3	Education of the mother	20.804	0.008	**
4	Occupation of the mother	8.021	0.091	@
5	Family income	12.602	0.002	**
6	Type of family	10.596	0.031	*
7	Duration of marital life	5.348	0.500	@
8	Source of information	10.418	0.008	**
9	Type of the house	0.762	0.683	@
10	Type of drainage	0.427	0.808	@

**= Significant 0.01level
* = Significant 0.05level
NS=Not significant

Table 4: It reveals that There is a significant association between level of knowledge Regarding warning signs of selected newborn illness among primimothers with age, education, family income, source of information at $p<0.01$ level,type of family at $p<0.05$ level.

Association between socio demographic variables with the level of knowledge regarding home care for selected newborn illness among primimothers:

Table 5: Association between socio-demographic variables with the level of knowledge regarding home care for selected newborn illness among primimothers

S.NO	Demographic variables	Chi-square	p - value	Sig/SN
1.	Age	13.764	0.032	*
2.	Religion	19.671	0.003	@
3	Education of the mother	22.496	0.0084	**
4.	Occupation of the mother	11.769	0.019	@
5.	Family income	6.849	0.033	*
6.	Type of family	7.757	0.101	@
7.	Duration of marital life	3.353	0.763	@
8.	Source of information	20.314	0.002	**
9.	Type of the house	2.248	0.325	@
10.	Type of drainage	6.607	0.037	*

**= Significant 0.01level
* = Significant 0.05level
NS=Not significant

Table 4: It reveals that There is a significant association between level of knowledge Regarding home care for selected newborn illness among primimothers with religion, education, source of information at $p<0.01$ level age, occupation, family income, type of drainage at $p<0.05$ level.

Discussion
The study revealed that Out of 100 primimothers 12% (12) primimothers had inadequate knowledge on warning signs of selected newborn illness, 57% (57) primimothers had moderate knowledge on warning signs of selected newborn illness, 31% (31) primimothers had adequate knowledge on warning signs of selected newborn illness and 31% (31) primimothers had inadequate knowledge on home care for selected newborn illness, 53% (53) primimothers had

moderate knowledge on home care for selected newborn illness, 16% (16) primimothers had adequate knowledge on home care of selected newborn illness.
The present study was supported by other studies:
K.C. Leena, DeepthiA. Koshy *et al* (2014), conducted a descriptive study to assess the Knowledge of Common Problems of Newborn among Primimothers. The results shown that present study the knowledge level on constipation and diarrhoea shows that 38 (63.34%) had an average level of knowledge, about 11 (18.33%) had a good level of knowledge, and 11 (18.33%) had a poor level of knowledge.
Priyanka Bansal, Merlin Mary James (2016), Conducted a descriptive study to assess the Knowledge of Postnatal Mothers regarding Essential Newborn Care. The results

shows that out of 50 primimothers 34(68%) were had average knowledge, only 6(12%) had above average knowledge and 10 (20%) had below average scores.

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