

## **CHAPTER 2**

### **PROJECT DESCRIPTION**

#### **2.1 Rationale**

Postpartum or puerperium refers to the period of about six to eight weeks since childbirth up until the mother's reproductive organs that have changed due to pregnancy and delivery return to their original non-pregnant condition.

Taking care of postpartum women during the postpartum is very important, especially in the first two hours after the delivery because it is reported that postpartum hemorrhage is the most frequently complication found and it is one of the main causes of maternal death. Postpartum hemorrhage results from the contraction of uterus or an overextended bladder, which can affect the uterine contraction. Consequently, maternal care services for postpartum mothers in this period would help decrease the maternal mortality rate.

The first two hours after the delivery process, postpartum mothers still need attentions and services as they may have complications due to infection, dehydration during the delivery or breast engorgement. Postpartum mother's body is in the

transition phase and needs attentive care so that they feel comfortable, healthy and ready for their new role; being a mother which is the most important role of female. Postpartum mothers have to adjust to many physical and mentally changes while they accept their new status as a postpartum mother (Panpilai Sriaporn, 1990: 1). This is the starting point for them to take the role of mother to their own baby. Postpartum mothers usually get confused and anxious about self-care and also their interpretation to the infant's gestures, reactions and responses to the infant's needs (Bull, 1991: 393-394). This is due to their inexperience and lack of information about infants care. As a result, postpartum mothers don't understand behaviors of their newborn baby. Curry (1993) found that 25% of postpartum mothers faced toughs times adjusting their role of being a mother. This happens because of lack of role model and inexperience of being a mother even though these days postpartum mothers are normally educated about self-care and newborn care.

Newborn care is also important and required a lot of attentions and cares because the newborns have a higher risk rate of mortality than other age groups and the ratio of death rate for the newborns is one third of all infants (Obstetrics nursing, Ministry of Public Health ,1997) because during and after the delivery is a crisis period and it is very crucial for the infants' lives. They may die in this period as they have to adapt themselves with new surroundings outside uterus but their organs still function differently from adults'; such as, Cardio vascular system, respiratory system, digestive system, excretive system, immunity and body temperature control . During this period if the infants are treated incorrectly, it would affect their physical development and they may be dead.

While postpartum mothers stay at the hospital for recuperation that usually lasts about two to three days, the hospital encourages the mothers to create mother-infant bonds in the postpartum period. It is very necessary and important because it would allow postpartum mothers a chance to touch their newborn baby and at the same time it would stimulate the infant to suckle the mother's breast milk which contains the best nourishment for infants.

The role of mother seems to be complicated and needs to be continually improved. In addition, postpartum mothers have to learn about mother- infant interactions and try to adjust themselves appropriately with their new roles and responsibilities. Taking the new role for postpartum mothers requires capability in physical, mental and social adjustments. They are also required to learn about their new role appropriately in the right way (Pridham et al., 1991: 21-22). Due to such problems, Sena hospital has implemented the project, "Live Births, Safe Motherhood" (initiated by Division of Health, MOPH) in order to prepare the readiness of postpartum mothers both physical and mental in self-care and infant care. Division of Health set up eleven characteristics for the hospital participating in the project. For maternal and infant care, the service must include pregnancy, delivery and postpartum. Two requirements related to maternal and infant care services must be implemented.

The first is the requirement number seven; standard of postpartum mothers care which states that (1) postpartum mothers must be educated at least once about how to do self-care and infant care; (2) breastfeeding must be promoted and; (3) Family planning and health checkup after postpartum period must be motivated. The other is

the requirement number eight regarding infant care; (1) Infants must be vaccinated for tuberculosis and hepatitis B prevention; (2) Infants must be roomed in with their mother and must be fed with breast milk from their mother and; (3) Infants must be closely monitored in respiration, body temperature, excretion and prevention of infection.

After having implemented the project in maternal and infant care, which applied the standard requirement number seven and eight, in Sena hospital since 1999, it was found that the number of clients who received this service was rather low. One month after the delivery, the number of mothers who had postpartum checkup, birth control and cervical cancer screening was just 30 percent and it was reported that only 10 percent of infants were fed on breast milk from their mothers for four months. In addition, those infants were reportedly fed on supplement food; such as, mashed banana and rice before the age of four months.

The Eighth of National Economic and Social Development Plan clearly set indicators for each unit, especially the maternal and infant care service. It is stated that the number of family planning must not be lower than 77 percent; the number of postpartum checkup must not be lower than 80 percent; the number of cervical cancer screening must not be lower than 50 percent; the number of infants who are fed with breast milk at least four months must not be lower than 30 percent; and the number of infants grown up according to average weigh criteria must not be lower than 80 percent.

Consequently, Sena Hospital has to improve the efficiency of its postpartum mother care services in order to reach the standard of the project “Live Births, Safe

Motherhood” and the Eighth National Social and Economic Development Plan. Sena Hospital, as a result, has developed postpartum maternal care services to educate postpartum mothers in self-care, postpartum checkup, family planning and cervical cancer screening. In addition, postpartum mothers are educated about infant care including breastfeeding and appropriate time to start supplement food. In the past, no systematic procedure was developed in maternal care services of postpartum ward. There was only one teaching session for postpartum mothers as a group once before they discharged from the hospital and many women didn't want to attend as they wanted to go home. So, postpartum ward will redesign its postpartum maternal care services. The new maternal care services comprise of four steps combining teaching sessions and or demonstrations and they are designed for postpartum mothers who stay in the hospital for two to three days in order to educate them about self-care and infant care. In addition, postpartum mothers can ask questions concerning their problems and obstacles so that they feel more confident of their motherhood.

After improving the postpartum maternal care services, there will be a monitoring and evaluation system to check whether postpartum mothers learn about self-care and infant care or not and to check if they can take care of their own health and their infant's health for future improvement.

## **2.2 Goal and Objectives**

The goal of postpartum maternal care services is to promote the healthiness of mothers and infants by providing knowledge of maternal and infant care. The followings are objectives of this study;

1. To increase the knowledge of postpartum mothers in self-care and infant care.
2. To increase the number of mothers who have postpartum checkup to 80 percent within the year of 2001.
3. To increase the number of mothers who have cervical cancer screening to 50 percent within the year of 2001 .
4. To increase the number of mothers who have family planning to 77 percent within the year of 2001.
5. To increase the number of infants who are fed exclusively on mother's breast milk for four months from 10 percent to 30 percent.
6. To decrease the number of the use of supplement food in infants before the age of four months to less than 50 percent.

## **2.3 Method**

### **2.3.1 Setting and participants**

The implementation of postpartum maternal care services in Sena Hospital started in April 2000 and it is responsible by postpartum unit. The target group for this

study is postpartum mothers and infants who are in normal conditions, referring to women and infants who do not have complications; such as, postpartum hemorrhage, hypertension and for infants; such as, those who don't have birth asphyxia and are not prematurely born. Postpartum mothers who have abnormal conditions will be taken to an exclusive special area and infants who are in abnormal conditions will be transferred to the infant intensive care ward, separating from the mothers.

### **2.3.2 Implementation**

The implementation is consisted of two steps; preparation and providing services.

#### **First step: Preparation**

This step comprises of three phases as follows;

1. Preparing the readiness of nurses in the aspect of their knowledge and skills by organizing a training program for 15 staff in postpartum ward who are responsible for maternal and infants care services. Lecturers will be contacted and documents will be distributed. The program will emphasize at the following two topics;

#### **1.1 Postpartum maternal care**

Lectured by an obstetrician for 2.30 hours. The focus of the lecture is postpartum maternal care in the first eight hours after delivery and prevention of complications; such as, prevention of postpartum hemorrhage, infective prevention and wound care.

### 1.2 Newborn infant care

Lectured by a pediatrician for 2.30 hours. The focus of the lecture is temperature control, respiratory checkup, breastfeeding, bathing, navel cleaning, vaccination for infants and the use of supplement food with newborn infants.

1.3 All nurses have already had skills in giving information to postpartum mothers. Demonstrations will be conducted under supervision of health nurses who will give advice and techniques in-group and in person.

2. Preparing contents and teaching processes by brainstorming (among the nurses) and then combining it with the standard of mother self-care and as infant care.

3. Preparing tools and teaching materials in each step; such as, producing slides which will be utilized in teaching self-care for mothers and infant care, checkup appointment, family planning, vaccination and supplement food.

## **2.4 Providing Service**

Postpartum maternal care services will be provided to every mother. The procedure comprises of four steps as follows; (1) Educate postpartum mothers about self-care within the first 2-8 hours after delivery; (2) Educate postpartum mothers about vaccination for newborn infants; (3) Educate postpartum mothers about infant bathing, eyes and umbilical care and; (4) Educate postpartum mothers about self-care and infant care at home and appointments for postpartum checkup.



### First Step: Instructing postpartum mothers in nursing care after delivery

After two hours of delivery, postpartum mother will be transferred from delivery room to postpartum ward. To prevent postpartum hemorrhage, they are recommended to gentle massage uterus in the front to stimulate the contracting of uterus. When it reaches six hours, postpartum mothers will be advised to pass urine in order to empty the urinary bladder. If the bladder is extended of urine, it will hinder the contracting of uterus, leading to postpartum hemorrhage.

- Prevention of stroke after delivery.

Postpartum mothers will take a rest as needed and they will be encouraged to have a meal and drink water.

- Prevention of infection.

Bathing and cleaning episiotomy wound with hygiene water are emphasized. Postpartum mothers will be recommended to clean the wounds from the vagina to anus every time after an excretion and urination. They are also advised to use sanitary pads and change the pads frequently. In the first month as they may have lochia seeping from the uterus.

- Newborn infant care

Infants will be roomed in and sleep with their mother in the same bed and nurses will recommend the mothers of the benefit of breast milk and assist them to breastfeed the infants in the right way so that the infants will receive enough portion of breast milk as breast milk contains necessary nutrients for their growth and immunization which helps maintaining the infant's healthiness. In addition, while breastfeeding their infant, the mother has to hold the infant and the infant will feel the love and tenderness from the mother, creating mother-infant bonds.

Mothers will be advised to look after the infant's first excretion and urination. If the infant doesn't defecate within 24 hours and doesn't urinate within 48 hours, it is the sign of abnormalities.

#### Second step: Instructing postpartum mother in vaccinations for the newborn

At this stage, nurses will instruct postpartum mothers in groups in essential vaccinations for the newborn. Each group is consisted of five to ten mothers. There are two types of the vaccinations; first is BCG to prevent tuberculosis. Infants will be vaccinated BCG at the left shoulder and after the vaccination about one month, there will be a scar. If not, repeated BCG vaccination is required. The second is hepatitis B virus vaccination to prevent hepatitis B virus. Infants must be vaccinated hepatitis B virus three times; at birth, at the age of two months and six months.

After the instructions, the nurse will vaccinate all infants and make a record in infants' health books. Later, the nurse will advise postpartum mothers about vaccinations for their infants which must be conducted at the age of two months, four months and one year, as written in infant's health books.

#### Third step: Instruction of newborn infant care

The nurses will instruct postpartum mothers in cleaning newborn infants by organizing a demonstration. The demonstration will emphasize at cleaning the infant's body and prevention of infection; such as, bathing, hair washing, eyes and umbilical cleaning. Infants must be bathed to clean every part of their body and the umbilical

must be cleaned and dry after bathing or every time it is wet. If the umbilical is not cleaned and wet, it may be an access of diseases into the infant's body.

The nurses will introduce tools and bathing procedures thoroughly including hair washing and wiping, body wiping and eyes and umbilical cleaning. Then, the nurses will demonstrate how to bath, clean eyes and umbilical of the infant to postpartum mothers once and after the demonstration, postpartum mothers will be encouraged to bath their own infant and wipe the infant's eyes and umbilical under supervision of the nurses.

Fourth step: Instructing postpartum mothers in self-care, infant care and appointments of health checkup

The nurses will instruct postpartum mothers in groups and each group has five to ten persons. The instruction includes self-care, infant care and appointments of health checkup. The detail of each topic is as follows;

- Self care of postpartum mothers

The nurses will instruct in nutrition, personal hygiene, rest, movement and daily routine and appointments for checkup; such as, postpartum checkup, cervical cancer screening and family planning. The nurses will also give advice about the checkup appointment and in case they forget the date of appointment, the nurse will inform the mothers that they should visit the hospital as soon as they realize it even though it is not the date of appointment.

- Infant care

This topic includes feeding infants with breast milk, supplement food and health checkup for infants. The nurse will use teaching materials; such as, slides and will divide the mothers into groups.

## **2.5 Activity Plan**

The implementation of this project; “PP maternal care service”, will follow this monthly schedule, beginning with teaching material production, data gathering, monitoring and evaluation, data analysis. Time duration for these activities was first planned for eight months but the project was delayed due to some problems about report writing (see table 2.1).

**Table 2.1: Schedule of implementation**

Activities	2000					2001						2002		
	Mar.	May	July	Sep.	Nov.	Jan.	Mar.	May	July	Sep.	Dec.	Feb.	Apr.	May
1. Teaching materials production														
2. Proposal writing	x													
3. Process of care services	x	x	x	x	x	x	x	x	x	x	x	x	x	x
4. Collecting data about PP mothers		x	x	x										
5. Collecting data about the number of mothers who have postpartum checkup		x	x											
6. Follow up		x	x											
7. Follow up			x	x										
8. Gathering all data		x	x											
9. Data analysis					x	x	x	x	x	x	x	x		
10. Writing report							x	x	x	x	x	x	x	x

## 2.6 Problems

At first it was found that nurses in postpartum ward, who were responsible for teaching mothers, had different levels of skills in providing knowledge and organizing group activities. So, the researcher developed a course to train the nurses in teaching skill. After the training, the disparity of the skill among the nurses disappeared.