

Maternal Satisfaction on Nursing Care among Postnatal Mothers in Selected Teaching Hospital, Kaski District

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Abstract:- Postnatal care refers to the care from the childbirth upto 6 weeks after delivery. Postnatal care and services is shared responsibility of the provider, family, community and women herself. Postnatal care (PNC) is an important part of maternal care, as serious and life-threatening complications can occur in the postpartum period, even in a woman who had an uneventful pregnancy and delivery. PNC is also crucial for detecting and managing neonatal problems. Major changes occur during this period which determines the health and well-being of mothers and newborns. Patient satisfaction has become increasingly an established outcome indicator of the quality and the efficiency of the health care systems. Patient satisfaction with nursing care is considered the most important factor and cornerstone of forming the overall patient satisfaction with hospital services. The research was conducted to assess the maternal satisfaction on nursing care among postnatal mothers admitted in GMCTHRC. A descriptive cross-sectional study design was done among 150 postnatal mothers. The sample was selected using non-probability, purposive enumerative sampling technique. Data was collected through structured interview and analyzed by descriptive statistics (frequency and percentage) and inferential statistics (chisquare) was used for the study. Out of 150 participants, the findings showed that 114 (76%) postnatal mothers were moderately satisfied, 22(14.7%) were fully satisfied, 12(8%) were minimal satisfied, 2(1.3%) were satisfied with nursing care among postnatal mothers. There was significant association between level of maternal satisfaction with religion, family type, occupation. Similarly, there was no significant association with other selected variables like age, educational status, monthly income, mode of delivery with $p < 0.05$.

Keywords:- Maternal Satisfaction, Nursing Care, Postnatal Mother.

I. INTRODUCTION

Postnatal period synonymously termed as Puerperium is the period following childbirth during which the body tissues specially the pelvic organs revert back approximately to the prepregnant state both anatomically and physiologically up to 6 weeks after delivery. It is one of the crucial time after childbirth in women's life as it has a substantial psychological, emotional and physical impact. Maternal satisfaction on services provided by the nurses helps to determine the quality of care and appropriate treatment. The postnatal nursing care includes measures to improve her general health, prevention, early detection and treatment of complications, provision of counseling on breastfeeding & birth spacing, educate immunization, maternal nutrition and continuance of supplementary iron therapy. Routine examination of postnatal care includes recording weight, pallor, vital signs, check fundal size of uterus, hemorrhage & postnatal examination.¹

A report of National Health policy on postnatal care in Bangladesh showed that 51% respondents were fully satisfied while 32% were partially satisfied and 16% were dissatisfied with the nursing care.²

Postnatal mothers' satisfaction depends upon availability of human resources and physical infrastructure (essential equipments, nurses knowledge and in-service training), attributes of quality postnatal care (nurses technical skills, services provided for the mother, monitoring and examination of postnatal care), health education and counseling (services offered to the baby monitoring and examination of babies), nurses interpersonal skills.³

Patient satisfaction is an important health outcome to measure quality of health care services hence health indicators is used by health care providers and administrators to assess the quality of care. Satisfaction identifies the strengths and weaknesses within this health system and to associate the level of satisfaction. Several studies in both high- and low-income countries have identified the importance of the postpartum period for acute short-term, long term and chronic morbidity.⁴

In Nepal, the satisfaction among postnatal mothers with the information received showed a strong correlation with the politeness of staff, involvement in decision making and overall satisfaction with the care received whereas satisfaction with waiting time, information received and overall care in the maternity care showed strong associations with willingness to return of facility.⁵

A study done to assess maternal satisfaction about Prenatal and postnatal care in Vaginal and Caesarean Section Delivery in Iran showed that 23 % mothers were satisfied with information aspect, 54 % were in physical aspect and 42% were in ethical aspect of postpartum care.⁶

This study aims at examining the satisfaction level of PNC services. This study will be important in the context of current efforts to address poor maternal and child health outcomes in Nepal. The generated information will be useful to health research and initiatives relating to maternal and neonatal health. These include the provision of PNC services in all health facilities, training, and capacity building in the PNC services, as well as formulation of indicators to monitor the services.

II. METHODOLOGY

This research aimed at assessing the maternal satisfaction on nursing care among postnatal mothers.

✓ *Research approach and design*

A descriptive cross-sectional research design was used to conduct the study on nursing care among postnatal mothers .

✓ *Setting*

This study was conducted among 150 postnatal mothers admitted in the hospital till discharge in Gandaki

Medical College. It is one of the tertiary hospitals of Pokhara.

✓ *Sampling Procedure*

The sample was selected using non-probability, purposive enumerative sampling technique fulfilling inclusion criteria. One hundred and fifty samples were taken for the study.

✓ *Ethical Approval*

Ethical clearance was obtained from Institutional Research Committee of Gandaki Medical College. Informed written consent will be taken from each respondents after giving information about the nature of the study and use of the data. Confidentiality will be maintained by not disclosing the name and using the information only for study purpose.

✓ *Data collection technique*

A semi-structured interview schedule was developed through review of literature and consultation of experts which was organized into three parts: Part I consisted of semi-structured questions related to socio-demographic characteristics which included age, ethnicity, religion, marital status, types of family, education, occupation, family income, mode of delivery. Part II consisted of structured questions related to maternal satisfaction among postnatal mothers. The scoring of part II consisted of sixty statements using 5 point Likert scale (1. Strongly disagree, 2. Disagree, 3. Neutral, 4. Agree, 5. Strongly agree). The total score ranging from 60 to 300 and respondents satisfaction level was analyzed in five categories in percentage. 26-36% referred to not satisfied, 37-52% satisfied, 53-68% minimal satisfied, 69-84% moderate satisfied and 85-100% fully satisfied.

III. RESULTS

Organization and interpretation of the study findings

Table 1: Frequency and percentage distribution of demographic characteristics
n=150

| Sample Characteristics | Frequency | Percentage (%) |
|---|-----------|----------------|
| Age | | |
| <25 | 76 | 50.7 |
| >25 | 74 | 49.3 |
| Religion | | |
| Hinduism | 140 | 93.3 |
| Buddhism | 9 | 6 |
| Christinity | 1 | .7 |
| Ethnicity | | |
| Dalit | 53 | 35.3 |
| Disadvantaged janajatis | 29 | 19.3 |
| Disadvantaged non-dalit terai caste group | 3 | 2 |
| Relatively advantaged Janajati | 17 | 11.3 |
| Upper caste groups | 48 | 32 |

| | | |
|------------------------------------|-----|------|
| Marital status | | |
| Married | 149 | 99.3 |
| Windowed | 1 | .7 |
| Family Type | | |
| Nuclear | 7 | 4.7 |
| Joint | 143 | 95.3 |
| Educational status | | |
| Illiterate | 0 | 0 |
| literate | 150 | 100 |
| Educational level | | |
| Can read and write | 81 | 54 |
| Basic Level (up to 8 class) | 43 | 28.7 |
| Secondary Level (9 to 12) | 20 | 13.3 |
| Bachelor | 6 | 4 |
| Occupation | | |
| Government Service | 3 | 2 |
| Non-Government Service | 3 | 2 |
| Self-employed/Business | 8 | 5.3 |
| Farmer | 6 | 4 |
| Animal Husbandry | 1 | .7 |
| Daily Labour | 6 | 4 |
| Homemaker | 122 | 81.3 |
| Student | 1 | .7 |
| Monthly Income in Rupees | | |
| <10,000 (Low Income) | 118 | 78.7 |
| 10,000-36000 (Medium Income) | 28 | 18.7 |
| 36000-111000 (Upper medium income) | 4 | 2.7 |
| Mode of delivery | | |
| Caesarean Section | 65 | 43.3 |
| Vaginal Delivery | 85 | 56.7 |

The data presented in table 1 showed that out of 150 respondents, most of the participants 76 (50.7%) age were less than 25 with mean and median = 25, SD = 4.5, 140 (93.3%) followed Hindu religion, 53 (35.3%) belonged to Dalit ethnicity, 149 (99.3%) were married, 143(95.3%) belonged to joint family, all the participants were literate

and among them most of them 81 (54%) can read and write, 122 (81.3%) were housemaker and 117(78%) have no income. Out of 33 participants, most of them have medium income per month ranging from Rs 10,000-36000 per month, 85 (56.7%) participants delivered by vaginal mode of delivery.

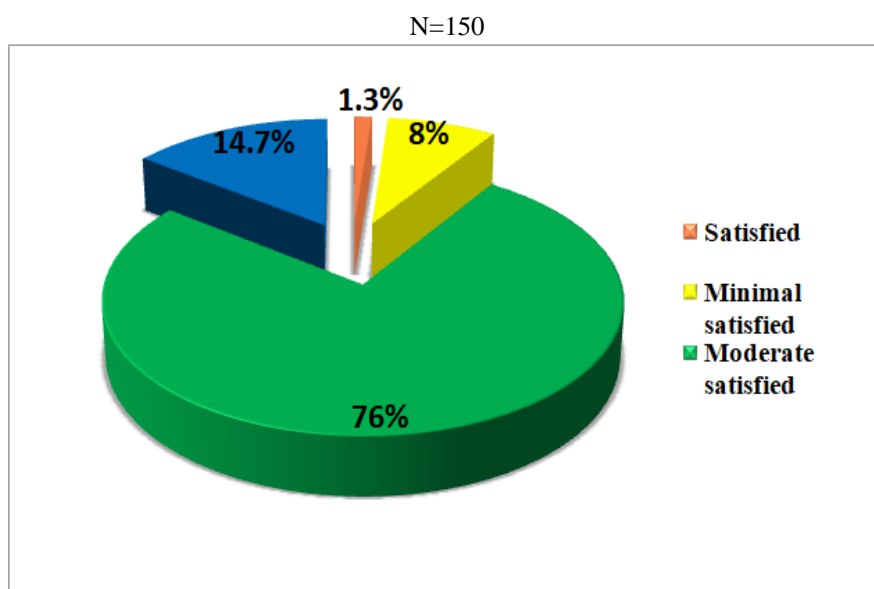


Fig 1: Level of Maternal Satisfaction on Nursing Care among Postnatal Mothers

Figure 1 illustrates the level of maternal satisfaction on nursing care among postnatal mothers into five categories which showed that most of the participants 114 (76%) were moderately satisfied, 22(14.7%) were fully satisfied, 12(8%)

were minimal satisfied, 2(1.3%) were satisfied with nursing care among postnatal mothers. Data presented above showed that all the postnatal mothers were satisfied with the nursing care.

Table 2: Association of level of maternal satisfaction on nursing care with selected variables
n=150

| Variables | Satisfied | Fully satisfied | χ^2 | p-value | Inference |
|--------------------------|-----------|-----------------|---------------------|--------------------|-----------|
| Age | | | | | |
| <25 | 6 | 70 | 0.377 | 0.539 | NS |
| >25 | 8 | 66 | | | |
| Religion | | | | | |
| Hinduism | 9 | 131 | 16.107 ^C | .000 | S |
| Non Hinduism | 5 | 5 | | | |
| Ethnicity | | | | | |
| Dalit | 3 | 50 | 0.722 ^C | 0.396 | NS |
| Others | 11 | 86 | | | |
| Marital status | | | | | |
| Married | | | | 1.000 ^F | NS |
| Windowed | | | | | |
| Family Type | | | | | |
| Nuclear | 3 | 4 | 6.039 ^C | .014 | S |
| Joint | 11 | 132 | | | |
| Educational status | | | | | |
| Illiterate | 3 | 9 | 2.038 ^C | 0.152 | NS |
| literate | 11 | 127 | | | |
| Educational level | | | | | |
| Upto primary level | 12 | 112 | .000 ^C | 1.000 | NS |
| More than primary level | 2 | 24 | | | |
| Occupation | | | | | |
| Homemaker | 7 | 115 | 7.839 ^C | 0.005 | S |
| Others | 7 | 21 | | | |
| Monthly Income in Rupees | | | | | |
| <10,000 (Low Income) | 9 | 109 | 1.075 ^C | .300 | NS |
| >10,000 | 5 | 27 | | | |
| Mode of delivery | | | | | |
| Caesarean Section | 6 | 59 | .001 | .970 | NS |
| Vaginal Delivery | 8 | 77 | | | |

Pearson's chi-square test, C- Continuity Correction, F-Fisher's exact test, S- Significant, NS- Non significant, The result of the table 2 showed that there was significant association between level of maternal satisfaction with religion, family type, occupation. Similarly, there was no significant association with other selected variables like age, educational status, monthly income, mode of delivery.

IV. DISCUSSION

➤ Major findings

Findings of demographic characteristics

1. Most of the participants 76 (50.7%) age were less than 25 with mean and median = 25, SD = 4.5,
2. Majority of them 140 (93.3%) followed Hindu religion
3. 53 (35.3%) belonged to Dalit ethnicity
4. 149 (99.3%) were married
5. 143(95.3%) belonged to joint family
6. All the participants were literate and among them most of them 81 (54%) can read and write
7. 122 (81.3%) were house maker

8. 117 (78%) have no income
9. Out of 33 participants, most of them have medium income per month ranging from Rs 10,000-36000 per month
10. 85 (56.7%) participants delivered by vaginal mode of delivery.

A pilot study was conducted to evaluate the level of satisfaction perceived by postnatal mothers following nursing care in postnatal wards following nursing care in postnatal wards. The result showed that most of the participants (30%) belonged to age group of 22-26 years.⁷

Similarly a study was done to assess maternal satisfaction with intrapartum care and associated factors among 398 mothers in public hospitals of North Wollo Zone, Northeast, Ethiopia. The study revealed that 379 (95.2%) were married, 265 (66.6%) were housewife, 365 (91.7%) delivered by vaginal delivery.⁸

➤ *Findings of level of maternal satisfaction on nursing care among postnatal mothers*

The result showed that most of the participants 114 (76%) were moderately satisfied, 22(14.7%) were fully satisfied, 12(8%) were minimal satisfied, 2(1.3%) were satisfied with nursing care among postnatal mothers.

The study done in Mid-Western Nepal on Maternal satisfaction on Delivery service among postnatal mothers in a Government Hospital showed that majority of the postnatal mothers 160 (89.89%) were satisfied with the delivery service.⁹

A cross- sectional study was done among 66 women receiving postpartum care in Ibadan, Nigeria. The study showed that majority of the respondents 98.5% perceived the perinatal care as high quality, 94% and 98% were satisfied with services and facilities used for their care respectively. The cause of dissatisfaction were due to dirty hospital environment, inadequate water supply and hospital facilities, distance of hospital location, cost of materials, time wasting, inadequate staffing and poor attitude and verbal and physical abuse.¹⁰

➤ *Findings of the Association of level of maternal satisfaction on nursing care with selected variables*

There was significant association between level of maternal satisfaction with religion, family type, occupation. Similarly, there was no significant association with other selected variables like age, educational status, monthly income, mode of delivery.

These study findings were similar with the comparative study conducted on Ethiopia with the objectives to assess maternal and partner's level of satisfaction on the delivery room service. The findings showed that there was significant association between level of maternal satisfaction with religion with $p = 0.05$, occupation $p = 0.01$.¹¹

The study done in Mid-Western Nepal on Maternal satisfaction on Delivery service among postnatal mothers in a Government Hospital showed that there was no significant association between level of maternal satisfaction with variables like age, educational status, educational level, occupation, religion, family income.⁹

V. CONCLUSION

Major changes occur during postnatal period in terms of wellbeing of mother and newborn so patient satisfaction with nursing care is considered the most important factor and cornerstone of forming the overall patient satisfaction with hospital services. The findings of the study revealed that most of the postnatal mothers were moderately satisfied with the nursing care provided in the hospital and level of maternal satisfaction were associated with variables like religion, family type and occupation. Overall the postnatal mothers were not fully satisfied with the nursing care and still needs to improve the care.

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