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## Practices regarding newborn care adopted by mothers in selected rural areas of Ambala, Haryana

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### Abstract

**Background of the Study:** The goals of essential newborn care (ENC) are to ensure that the umbilical cord is cut with sterile instruments, that nothing is applied to the chord, that the infant is dried and kept warm as soon as possible (within five minutes), that bathing is delayed until at least 72 hours after birth, and that nursing is started within the first hour after birth. When women in rural areas give birth at home without the help of trained medical professionals, they often resort to using hazardous techniques on their newborn.

**Aim of the Study:** To evaluate the newborn care practices adopted by mothers in designated rural areas.

**Methodology:** Due to the problem and study goals, a quantitative non-experimental method was used to study rural Ambala mothers' baby care behaviors. Descriptive surveys were best for rural Ambala moms' newborn care behaviors. The investigation took place in seven rural Ambala areas: Singhpura, Barara, Budiyaon, Ugala, Adhoa, Kalpi, Seembla. The study comprises 60 new mothers. This study used "purposive sampling" to select newborn mothers. A checklist and "expressed practice" questionnaire were used to observe rural Ambala women' baby care. The observational checklist and expressed practice questionnaire examined mothers' baby care habits using observation and interview methods, respectively. 60 mothers from seven rural locations in Sirsagarh, Brara, Budiyaon, Uglā, Adhoa, Kalpi, and seembla provided data from March 31 to April 1. Purposeful sampling was used. One mother's newborn care practices were collected in 40–45 minutes (30 minutes for demographics and an observational checklist, 15 minutes for stated practices). Data analysis employed descriptive and inferential statistics.

**Conclusion:** Concerning the care of newborns, mothers demonstrated a high degree of practices. It was revealed that there was a substantial association between the amount of practices and the age of the moms.

**Keywords:** Practices, new born care, mothers, rural area

### Introduction

A newborn is considered an infant until the age of 28 days. Care techniques soon following delivery increase the risk of illness and mortality in newborns. Prematurity and its sequelae are major causes of neonatal mortality, and the newborn period is naturally important to tribal populations, with a strong commitment to traditional traditions. They are viewed as impediments to the so-called modernization process.

One of nature's greatest gifts is the birth of a healthy newborn. The birth process lasts only a few hours, yet it is the most dangerous period of life because it is associated with the greatest number of deaths when compared to any other stage of life. When a baby is born, he or she must adjust from fetal to extrauterine life. The infant enters a very fragile time in which significant psychological and physiological changes to life outside the uterus must be achieved. If they fail, it results in death and morbidity. To ensure the baby's life and optimal growth and development, basic care must be provided.

The care provided by family members before, during, and after delivery has a significant impact on the newborn's chance of survival. It is influenced not only by the mother's beliefs, but also by her immediate family's perceptions. Antenatal, intrapartum, and postnatal practices that improve neonatal survival. India faces a greater difficulty with newborn health than any other nation on earth. It is estimated that nearly two-thirds of neonatal deaths occur

in the first month of life, with more than two-thirds dying in the first week and two-thirds dying in the first twenty-four hours.

Although the neonatal mortality rate exhibits a decreasing trend, the decline in neonatal fatalities in the 1990s was only 15%, compared to a decrease of 25% in the 1980s, regardless of urban-rural differences in NMR. Globally, the leading causes of infant mortality were estimated to be prematurity-related complications (27%), sepsis and pneumonia (26%), birth asphyxia and trauma (23%), tetanus (7%) and diarrhea (3%).

Women enjoy motherhood. Mothers are crucial to their children's lives. Sir Johnson Spencer's "One-thousand-families-survey" is worth remembering to understand the mother's role in childrearing. "In the study of these families and attempting to correlate their environment with the health of the children, there emerged one dominating factor—the capacity of the mother," he stated. Failure hurt her children. She protected their health by handling life well. Despite mistakes, the mother was the family's foundation and the child's primary protector. Thus, the mother guards the child's health.

### Need for the Study

Approximately 50% of all infant deaths occur within the first month of life. The first week of life is the deadliest for young babies. Infant mortality rates in India remain high when compared to industrialized nations. In our country, we lose a million newborns every year. There are a disproportionate number of deaths among newborns in India (63.7 percent). Every year, 27% of all newborn deaths occur in India. Health issues experienced by infants within their first month of life are given great focus in efforts to decrease infant mortality. Infant death rates are estimated to be 36% due to severe illnesses, with sepsis and pneumonia accounting for 26%, tetanus for 7%, and diarrhea accounting for 3% each.

Various hospital-based studies in India indicate that one-third of all neonatal fatalities are caused by perinatal hypoxia with or without birth trauma. The infection of the umbilical cord is a leading cause of mortality, and it is caused by unhygienic practices. The umbilicus is a common entry point for bacterial infection in newborns, and fifty percent of these fatalities occur within the first four weeks of life. Neonatal tetanus caused by the application of cow dung to the umbilical stump results in septicemia and causes the mortality of newborns. Neonatal sepsis is life-threatening if left untreated; therefore, early diagnosis and treatment are crucial for the child's survival.

In India, where a quarter of the world's neonatal deaths occur, 50 to 60 percent of infants perish within the first four weeks of life, and more than half die within one year, according to the national family health survey. The greatest risk occurs within the first 24 to 48 hours after birth.

We may not need advanced technology to reduce neonatal deaths, but we do need clean delivery, resuscitation at birth, adequate temperature regulation, exclusive breast milk feeding, infection prevention, early detection, and prompt treatment of minor issues. First-day problems are most common. Preventing them requires attentive vigilance.

Poor sucking, rapid breathing above 60 breaths/minute, difficult breathing, body cold to touch, lethargy, up-rolling eyeballs, jaundice, abdominal distention, and cyanosis are

indications of an unwell infant. Her child care depends on her infant care knowledge, practices, and attitude<sup>10</sup>.

Thus, newborn care behaviors of moms must be identified. This will lower the country's 96/1000 newborn mortality rate. Thus, investigators felt the need to research moms' newborn care behaviors.

### Statement of the Problem

A study to assess the practices regarding newborn care adopted by mothers in selected rural areas of Ambala, Haryana.

### Objectives

1. To evaluate the newborn care practices adopted by mothers in designated rural areas.
2. Determine the relationship between the level of neonatal care practices and selected demographic variables.

### Methodology

**Research Approach:** To examine mothers' newborn care habits in selected rural Ambala areas, a quantitative non-experimental technique was chosen due to the nature of the problem and the study's goals.

**Research Design:** The best method for assessing mothers' newborn care behaviors in rural Ambala was a descriptive survey.

**Settings of the Study:** The setting of present study were seven rural Areasi, Singhpura, Barara, Budiyon, Ugala, Adhoa, Kalpi, Seembla of Ambala.

**Sample Size and Sampling Technique:** The study's group includes 60 mothers of newborns. In the present study, mothers of newborns were chosen using a method called "purposive sampling."

**Data Collection Tools and Techniques:** A observational checklist and a "expressed practice" questionnaire were made to find out how mothers in some rural parts of Ambala cared for their babies. The observation technique was employed for the observational checklist, and the interview technique was used for the expressed practice questionnaire to examine mothers' infant care practices.

**Data Collection Process:** From March 31st to April 1st, data was collected from 60 mother's chosen from seven rural regions in Sirsgrah, Brara, Budiyon, Ugla, Adhoa, Kalpi, and seembla. The technique of purposeful sampling was adopted. It took 40-45 minutes to collect data from one mother about her newborn care practices (30 minutes for demographic characteristics and an observational checklist, and 15 minutes for the expressed practices question).

**Table 1:** Description of sample selection from rural areas

Area	Number of Mothers of New Born
Sirsgrah	5
Brara	28
Budiyon	5
Ugala	8
Adhoa	3
Kalpi	6
Seembla	5

**Data Analysis:** Both descriptive and inferential statistics were to be used in the data analysis.

occupation, income, parity, mode of delivery, place of delivery, delivery conducted by, type of family, income, number of live children, age of newborns, vaccination frequency, and percentage.

### Results Interpretation

The section describes the demographic characteristics of mothers, including their age, religion, education status,

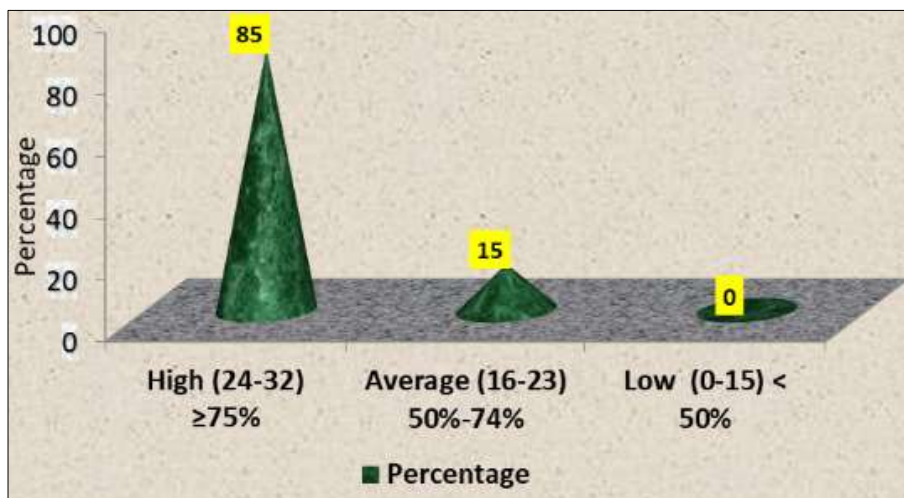
**Table 2:** Frequency and Percentage Distribution of Demographic Characteristics of Mothers in Rural Areas (N = 60)

Sr. No	Demographic Characteristics	f	%
<b>1</b>	<b>Age (in years)</b>		
1.1	18-23	20	33.3
1.2	24-29	34	56.7
1.3	30-35	05	8.3
1.4	Above 35	01	1.7
<b>2</b>	<b>Religion</b>		
2.1	Hindu	56	93.3
2.2	Muslim	02	3.3
2.3	Sikh	02	3.3
2.4	Christian	00	0
<b>3</b>	<b>Education</b>		
3.1	Primary	08	13.3
3.2	High	31	51.7
3.3	Senior secondary	14	23.3
3.4	Graduation	05	8.3
3.5	Illiterate	02	3.3
<b>4</b>	<b>Family</b>		
4.1	Joint	52	86.7
4.2	Nuclear	08	13.3
4.3	Extended	00	0.0
<b>5</b>	<b>Occupation</b>		
5.1	Housewife	60	100.0
5.2	Labour	0	0.0
5.3	Government job	0	0.0
<b>6</b>	<b>Total family income (Rs)</b>		
6.1	≤1000	2	3.3
6.2	1001-5000	27	45.0
6.3	5001-10000	28	46.7
6.4	10001-15000	2	3.3
6.5	≥15000	1	1.7
<b>7</b>	<b>Number of delivery</b>		
7.1	Primipara	30	50.0
7.2	Multipara	30	50.0
<b>8</b>	<b>If multipara, no of live children</b>		
8.1	≤2	20	33.3
8.2	3-5	10	16.7
8.3	≥5	0	0
<b>9</b>	<b>Place of delivery</b>		
9.1	At home	0	0.0
9.2	Institutional	60	100.0
<b>10</b>	<b>If institutional</b>		
	Government	25	41.7
<b>11</b>	<b>If government</b>		
11.1	Sub Centre	0	0.0
11.2	PHC	4	6.7
11.3	CHC	13	21.7
11.4	District hospital	8	13.3
<b>12</b>	<b>If private</b>		
12.1	Nursing home	5	8.3
12.2	Hospital	19	31.7
12.3	Institutional hospital	11	18.3
<b>13</b>	<b>Way of delivery</b>		
13.1	Normal vaginal delivery	47	78.3
13.2	Operation	13	21.7
13.3	Institutional delivery	0	0.0
<b>14</b>	<b>Who had done delivery</b>		
14.1	Trained Dai	0	5.0
14.2	Untrained Dai	0	0.0

14.3	ANM	0	0.0
14.4	ASHA	0	0.0
14.5	Doctor	46	76.7
14.6	Nurse	14	23.3
14.7	Neighbor	0	0.0
<b>15</b>	<b>Newborn age(days)</b>		
15.1	0-10	10	16.7
15.2	11-20	15	25.0
15.3	21-28	35	58.3
<b>16</b>	<b>Vaccination</b>		
16.1	Yes	57	95.0
16.2	No	3	5.0

The majority of mothers (56.7%) in rural areas were between the ages of 24 and 29 according to the data presented in table 2. The majority of mothers (93.3%) were Hindu, and 86.7% were from a nuclear family. 100% women were domestic. The family income of the majority of mothers (46.7%) was between Rs 501 and Rs 10,000. Half of mothers (50%) were first-time mothers, and half

were multigravida. 100% of the mothers gave birth in a medical facility. The majority of mothers (78.3%) gave birth vaginally. The majority of deliveries (76.7%) were performed by physicians. Nearly half of newborns (58.3%) belonged to the age group 21-28 days, and the vast majority (95%) of newborns were immunized.



**Fig 1:** Percentage distribution according to level of practices of mothers in rural areas

Figure - 1 shows that 51 (85%) of mothers had high levels of newborn care practices, while 9 (15%) of mothers had average levels of newborn care practices. So, the researchers

came to the conclusion that most mothers took good care of their babies.

**Table 3:** Area wise Range, Mean, Mean Percentage and Standard Deviation of Practice Score on Observational Checklist of Mothers in Rural Areas Regarding Newborn Care (N=60)

Areas of expressed practices	Range	Mean	Mean %	Standard deviation
Feeding	8-16	14.20	88.75	$\pm 1.527$
Thermoregulation	3-5	64.67	93.33	$\pm 0.601$
Skin and cord care	3-10	6.98	63.48	$\pm 2.063$

Table 3 shows that mothers in rural areas had the highest mean percentage practice score on the observational checklist for newborn care in the area of thermoregulation (93.33), followed by feeding (88.75), and the lowest score in

the area of skin and cord care (63.48). So, mothers in rural places took better care of their babies in terms of thermoregulation.

**Table 5:** Item Wise Frequency and Percentage Distribution of Practices of Mothers in Rural Areas on Observation Checklist. N=60

Statement	f	%
<b>Feeding</b>		
Breast Feeding		
Feeds the Baby		
<b>Mouth wide Open</b>		
Yes	47	83
No	9	17
<b>Lower Lip turned outwards</b>		

	Yes	37	66
	No	19	34
	<b>Areola more visible on top rather below</b>		
	Yes	37	66
	No	19	34
	<b>Chin touching the breast</b>		
	Yes	52	93
	No	4	7
	<b>Clean breast before feeding with plain water/wet cloth</b>		
	Yes	46	83
	No	10	17
	<b>Takes precaution while giving breastfeed to avoid pressing of nose.</b>		
	Yes	56	100
	No	0	0
	<b>Feed the baby in proper position</b>		
	Yes	30	54
	No	26	46
	<b>Burps after feeding the baby</b>		
	Yes	46	83
	No	10	17
	<b>Uses katori (Bowl) and spoon feeding if baby is not able to take breast feeding</b>		
	Yes	4	6.6
	No	56	93
	<b>Washes Bowl (katori) and spoon before feeding</b>		
	Yes	3	75
	No	1	25
	<b>Dries Bowl and spoon before adding feed</b>		
	Yes	3	75
	No	1	25
	<b>Gives only breast milk by Bowl and spoon</b>		
	Yes	1	25
	No	3	75
	<b>Gives formula milk by Bowl and spoon</b>		
	Yes	3	75
	No	1	25
	<b>Any other</b>		
	<b>Gives bottle feed</b>		
	Yes	4	6.6
	No	56	93
	<b>Gives breast milk through bottle</b>		
	Yes	1	25
	No	3	75
	<b>Gives formula milk through bottle</b>		
	Yes	3	75
	No	1	25
	<b>Thermoregulation</b>		
	<b>Provides warmth to newborn with appropriate clothing according to season</b>		
	Yes	60	100
	No	0	0
	<b>Exposes newborn to sunlight for sometime</b>		
	Yes	60	100
	No	0	0
	<b>Checks the newborn temperature by touch</b>		
	Yes	49	81.66
	No	11	18.66
	<b>Keeps fan, doors and window, closed</b>		
	Yes	51	85
	No	9	15
	<b>Removes wet nappy immediately</b>		
	Yes	60	100
	No	0	0
	<b>Skin care and cord care</b>		
	<b>Washes hands with soap and water before and after touching newborn</b>		
	Yes	60	100
	No	0	0
	<b>Changes newborn clothes daily</b>		
	Yes	35	58.33
	No	25	41.66

<b>Cuts newborn nails short</b>			
Yes	44	73.33	
No	16	26.66	
<b>Changes newborn napkin, whenever soiled</b>			
Yes	29	48.33	
No	31	51.66	
<b>Baby sheet changed whenever soiled</b>			
Yes	58	96.66	
No	02	3.33	
<b>Handles newborn in less frequency</b>			
Yes	58	96.66	
No	02	3.33	
<b>Changes newborn position frequently</b>			
Yes	19	31.66	
No	41	68.33	
<b>Tie black thread and beads around the neck and the waist of the newborn</b>			
Yes	38	68.33	
No	22	36.66	
<b>Applies kajal in the eyes of newborn</b>			
Yes	19	31.66	
No	41	68.33	
<b>Ties newborn cord with thread</b>			
Yes	17	28.33	
No	43	71.66	
<b>Dresses the newborn in old clothes without Washing</b>			
Yes	5	8	
No	55	92	

Table 4 shows that 83% of rural newborns breastfed with their mouths open. 66% of newborns breastfed with their bottom lip outward. Most moms (66%) breastfed with their areola on top. 93% of newborns underwent chin-to-breast feeding. All mothers avoided nose pressing while breastfeeding. 83% of mothers burped their babies after feeding. (6.6%) used katori and spoon-feeding for non-breastfed babies. All 33 mothers cleansed katori and spoon before feeding. Most mothers (96.66%) breastfed just with katori and spoon. All mothers administered formula milk through katori and spoon.

100% of mothers dressed their newborns warmly and exposed them to sunlight. Most moms (81.66%) monitored

neonates' temperatures by stroking their foreheads, and 85% kept fans off, doors, and windows closed. All mothers quickly removed wet garments or diapers. All mothers cleansed their hands before and after touching neonates, and 58.33% trimmed their nails. 58.33% of mothers changed soiled newborn dippers. 96.66% of mothers changed dirty baby sheets. 96.66% of mothers rarely handled newborns. Only 31.66% of mothers often repositioned their babies. 68.33% of mothers put black thread and beads around their newborn's neck and waist. Only 28.33% of women wrapped their newborn's cord with thread and 31.66% put kajal in their newborn's eyes.

**Table 5:** Frequency and Percentage Distribution of Practices of Mothers in Rural Areas on Expressed Practices (N=60)

Sr. No	Statement	f	%
1.	<b>Do you give breast feed your baby?</b>		
	Yes	56	93
	No	4	7
2.	<b>Do you give formula milk to your baby?</b>		
	Yes	4	7
	No	56	93
	<b>If yes by which mode do you give?</b>		
	i. Bottle feed	2	50
	ii Mixed feed (Breast feed + katori+ spoon feeding)	2	50
3.	<b>Have you give colostrum to your baby?</b>		
	Yes	43	72
	No	17	28
4.	<b>When did you start first feed to your baby?</b>		
	0-1 hrs	38	63
	1-2 hrs	10	17
	2-3hr	7	12
	Any other (After 4hrs)	5	8
5.	<b>Have you given pre-lactal feed to your baby?</b>		
	Yes	15	25
	No	45	75
	If yes then what:		
	a. Honey	13	86
b. Sugar	2	14	



	c. Gripe water	0	0
<b>6.</b>	<b>Do you clean your breast before feeding?</b>		
	Yes	43	72
	No	13	23
	If yes then what:		
	a. With Soap & water every time	10	23
	b. Soap & water once a daily	21	49
	c. Water before every feed	0	0
	d. Wet towel before every feed	12	28
<b>7.</b>	<b>Do you give your newborn different type of milk like cow's milk &amp; buffalo's</b>		
	Yes	4	7
	No	56	93
<b>8.</b>	<b>What do you give to satisfy thirst to you baby?</b>		
	a. Never give anything else breast milk	56	93
	b. Water	0	0
	c. Milk from outside	4	7
<b>9.</b>	<b>Do you support your breast while giving feed to your baby?</b>		
	Yes	47	84
	No	9	16
	If Yes:		
	a. Place Index Finger above and middle finger below nipple	23	49
	a. Place thumb above and index and middle finger below nipple	24	51
<b>10.</b>	<b>Do you give night feed to your baby?</b>		
	Yes	58	97
	No	2	3
	if yes, When:		
	a. 2 times in night	8	14
	b. 3time in night	15	25
	c. 4time in night	22	38
	d. 5 times in night	15	26
<b>11.</b>	<b>How do you hold your baby while breastfeeding?</b>		
	a. Cradle	35	62.5
	b. Cross cradle	17	30
	c. Football	2	3.5
	d. Lying down	2	3.5
<b>12.</b>	<b>When did you give first bath to your baby?</b>		
	a. Immediately after birth	12	20
	b. Within 24 Hrs	6	10
	c. 24-48 hrs	42	70
<b>13.</b>	<b>Do you bath your baby regularly?</b>		
	Yes	49	82
	No	11	18
	If yes, With:		
	a. Milk	10	17
	b. Curd	15	25
	c. Soap water	35	58
<b>14.</b>	<b>Do you clean your Newborn Perineal area?</b>		
	Yes	53	88
	No	7	12
<b>15.</b>	<b>Do you clean your newborn's Body?</b>		
	Yes	53	88
	No	7	12
<b>16.</b>	<b>Do you clean your newborns eyes?</b>		
	Yes	37	62
	No	23	38
	If yes, How:		
	a With warm water	20	54
	b With lukewarm water	17	46
<b>17.</b>	<b>Do you plug newborn's ears during bath?</b>		
	Yes	37	62
	No	23	38
	If yes, How:		
	a. With cotton	21	57
	b. With Finger	16	43
<b>18.</b>	<b>Do you clean your newborn's buttocks after passing the stool?</b>		
	Yes	51	85

	No	9	15
	If yes, With:		
	a. Soap and water	15	29
	b. Savlon solution	20	39
	Any other (wet cloth)	16	31
<b>19.</b>	<b>Do you dry clothes of newborn in sunlight?</b>		
	Yes	53	88
	No	7	12
<b>20.</b>	<b>Do you wash newborn's clothes separately?</b>		
	Yes	52	87
	No	8	13
<b>21.</b>	<b>Do you keep newborn's clothes separately?</b>		
	Yes	51	85
	No	9	15
<b>22.</b>	<b>Do you use any baby product for your baby?</b>		
	Yes	52	87
	No	8	13
	If yes then what?		
	a. Baby oil for massage if yes, specify.....Johnson	44	10
	b. Baby powder if yes, specify.....Johnson	43	72
	c. Kajal if yes, Specify...(homemade)..	6	10
	d. Baby soap if yes specify..... Johnson	43	75
<b>23.</b>	<b>Have thermal care given to your baby after birth?</b>		
	Yes	45	75
	No	15	25
	If yes; How?		
	a. Newborn dry after birth	32	53
	b. Newborn wrapped soon after birth	31	52
	c. Wet linen removed after birth	20	33
<b>24.</b>	<b>Have all arrangement were done for maintaining thermal environment for your baby at birth?</b>		
	Yes	47	78
	No	13	22
	If yes, what all arrangement were done for maintain thermal environment:		
	a. Fan off	23	38
	b. Windows and door closed	46	77
	c. Pre warm linen ready and radiant warmer was put	22	37
<b>25.</b>	<b>Have all arrangement done for maintaining thermal environment for your baby?</b>		
	Yes	53	88
	No	7	12
	What all are done?		
	a. Fan off	38	63
	b. Window and doors closed	43	72
	c. Mother and baby in contact with each other for maximum time	50	83
	d. Any other.....blower	6	11.3
<b>26.</b>	<b>Where your baby sleep?</b>		
	a. With you	57	95
	b. In cot	1	2
	c. In another room	2	3
<b>27.</b>	<b>How many times you change your baby's clothes?</b>		
	a. Once a day	0	0
	b. Two times in a day	15	25
	c. Three times in a day	8	13
	d. Whenever soiled	37	62
<b>28.</b>	<b>Do you keep your baby warm?</b>		
	Yes	50	83
	No	10	17
	If yes, how:		
	a. Warm clothes	47	78
	b. Keep baby with mother	50	83
	c. Keep windows and door	44	73
<b>29.</b>	<b>Do you use diaper?</b>		
	Yes	10	17
	No	50	83
<b>30.</b>	<b>If use diaper, How frequently change the diaper?</b>		
	a. Once a day	0	0
	b. Two times in a day	0	0



	c. Three times in a day Whenever solied	28	2080
<b>31.</b>	<b>Have you immunized your baby?</b>		
	Yes	53	88
	No	7	12
<b>32.</b>	<b>Do you apply anything on the cord of baby?</b>		
	Yes	12	20
	No	48	80
	If yes, What		
	a. Oil	7	58
	b. Turmeric	2	17
	c. Talcum powder	3	25

Table 5 shows that 93% of rural mothers breastfed. 72% of mothers gave colostrum's. 63% of mother's breastfed within 1 hour. 75% of mothers did not feed prelacteal. 72% of mothers wash their breasts before breastfeeding, and 49% wash daily with soap and towel. Most mothers (93.3%) did not offer their babies separate milk. Most (84%) breastfeed. 97% of women breastfed their babies at night, with 38% giving 4 times. 70% of women bathed their newborn within 24-48 hours, 82% bathe regularly, and 58% use soap and water. 88% of mothers clean newborn perineal region and body. Nearly half (62%) of mothers wipe baby eyes and ears. 54% of bathers wipe their eyes with warm water and 57% block their ears with cotton. 85% of mothers wipe newborns' buttocks after pooping, and 39% use savlon. Mothers (88%) dry their newborn's garments in sunlight and

(87%) wash them separately. 87% of mothers use baby products. 75% of women use Johnson baby soap. 75% of mothers gave their babies thermal treatment, and 53% dried and wrapped them. Most mothers—78%—made all thermal arrangements. 83% of mothers warm their babies. 83% of women do not diaper their babies. Most mothers (88%) immunized their babies. The cords of 80% of mothers were untreated. 58% of women oiled their newborn's cord. (58.33%) cleaned newborn dippers. 96.66% of mothers changed dirty baby sheets. 96.66% of mothers rarely handled newborns. Only 31.66% of mothers often repositioned their babies. 68.33% of mothers put black thread and beads around their newborn's neck and waist. Only 28.33% of women wrapped their newborn's cord with thread and 31.66% put kajal in their newborn's eyes.

**Table 6:** Chi square showing association between level of practices scores of mothers regarding newborn care and selected demographic variables

Sr. No.	Demographic Variables	Good	Average	X <sup>2</sup>	df
<b>1</b>	<b>Age</b>				
	18-23	19	1		
	24-29	26	8	9.115*	3
	30-35	5	0		
	Above 35	0	1		
<b>2</b>	<b>Religion</b>				
	Hindu	47	9		
	Muslim	2	0	0.756 (N/S)	2
	Sikh	2	0		
<b>3</b>	<b>Education</b>				
	Primary	8	0		
	High	24	7		
	Sr. Sec.	13	1	5.066 (N/S)	4
	Graduation	5	0		
	Illiterate	2	0		
<b>4</b>	<b>Family</b>				
	Joint	43	9	0.554 (N/S)	1
	Nuclear	08	0		
<b>5</b>	<b>Total family income (Rs)</b>				
	≤ 1000	2	0		
	1001-5000	24	3	2.951 (N/S)	4
	5000-10000	23	5		
	10001-15000	1	1		
	≥15000	1	0		
<b>7</b>	<b>No. of Delivery</b>				
	Primary Para	26	4		
	Multi Para	25	5	0 (N/S)	1
<b>8</b>	<b>If Multi Para, No. of Live Children</b>				
	≤ 2	18	2		
	3-5	7	3	0.750 (N/S)	1
<b>9</b>	<b>Place of Delivery</b>				
	Institution	51	9		
<b>10</b>	<b>If Institutional</b>				
	Govt.	21	4		
	Private	30	5	0.034 (N/S)	1

11	<b>If Govt.</b>					
	PHC	4	0	1.311 (N/S)	2	
	CHC	10	3			
	Distt. Hospital	7	1			
12	<b>If Private</b>					
	Nursing Home	5	0	1.061 (N/S)	2	
	Hospital	16	3			
Institute Hospital	10	1				
13	<b>Way of Delivery</b>					
	Operation	10	3	0.233 (N/S)	1	
	NVD	41	6			
14	<b>Who had done delivery</b>					
	Trained Dai	3	0	5.082 (N/S)	2	
	Doctor	41	5			
Nurse	7	4				
15	<b>New Born</b>		9	1	1.699 (N/S)	2
	11-20	14	1			
	21-28	28	7			
16	<b>Vaccination</b>					
	Yes	49	8	0.007 (N/S)	1	
	No	2	1			

Keys: - \*(significant –  $p < 0.05$ ) N/S- (not significant)

The table 6 depicts the association between the practices score of mothers regarding newborn care with selected demographic variables. The results revealed that on applying chi square practices of mothers regarding newborn care was associated with age as computed chi square value (9.115) was more than the table value.

#### Conclusion

Concerning the care of newborns, mothers demonstrated a high degree of practices. It was revealed that there was a substantial association between the amount of practices and the age of the moms.

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#### Conflict of Interest

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