6.1 Summary

Postnatal care is the care given after delivery until six weeks and it is the most neglected area of health care where the health status of mother and child is held vulnerable, with increase in postnatal complications leading to increase in maternal morbidity and mortality rate, therefore it is important to take care of the postnatal mother after delivery. Puerperium is the period following the body tissues especially the pelvic organ revert back approximately to prepregnant state both anatomically and physiologically by within six weeks (DC. Dutta 2016)

It is hard, irritable and stress full period where the mother needs to be cared well to protect her from immediate health problems, Though physiological changes in puerperium occurs naturally there are several nursing problems faced by the postnatal mothers in their crucial puerperal period, both mother and child are in risky period and are vulnerable to postnatal complications.

In this study mainly concentrates on elicitation of outcomes of the postnatal nursing care problems after implementation of CPNS in study group and routine care in control group. Outcomes are assessed under three important domains, first one is assessment of postnatal physical nursing problems, after implementation of specific postnatal physical nursing care strategies with aim to reduce postnatal physical nursing problems which will be less that leads to physiological wellbeing in the postnatal mother, interventions that promote physical wellbeing includes assistance to mother to do early ambulation which prevents the risks of thromboembolism causing leg pain, assistance in meeting hygienic care which prevents unclean skin, breast, nipple and perineal illness, early detection of minor illness such as hyperpyrexia, pain in the breast, legs, back and lower abdominal pain, heavy blood flow, severe headache and blurred vision, Second one is assessment of postnatal functional problems, by implementation of specific postnatal functional nursing care strategies with aim to enhance post functional wellbeing and reduce postnatal functional nursing problems.
which is assessed regular as check of any variations in postnatal vital index that includes check on body temperature, pulse, respiration, blood pressure every 4-6hrs and height of the uterus every day at same time.

Third domain is assessment of postnatal psychological problems, by implementation of specific postnatal psychological nursing care strategies with aim to reduce psychological nursing care problems and enhance psychological wellbeing has being assessed, where the mothers are given guidance counseling about all the aspects of postnatal care such as breast feeding, care of breast, perineum, postnatal diet, family planning, immunization, newborn care, detect early signs minor illness in mother and newborn, discharge instruction and follow up care, by following above strategies early psychological changes where one such reason is knowledge deficit leading to fear, anxiety, mood swings leading to depression can be prevented.

Along with three domains, level of satisfaction of CPNS is assessed among the postnatal mothers in study group, and are correlated with postnatal nursing problems, as the level of satisfaction increases with decrease in postnatal nursing problems, whereas level of satisfaction decreases with increase in postnatal nursing problems. In this study the nurses are trained and reinforced with CPNS for 7 Saturdays as 7 sessions as Continuing nursing education program in all twelve settings, after the session study participants are requested to implement the comprehensive postnatal strategies, total available sample of nurses are 86 in study and 86 in control group out of 24 maternity centers, total postnatal mothers were 430 in study group and 440 in control group for study selected as per convenient non-probability sampling based on their availability but chosen as per inclusive criteria, the postnatal mothers on their first day are chosen and included for the study after getting informed consent, as per the standard staff patient ratio norms 1:5 sample size is allocated that means one nurses allocated for each five postnatal mothers for both study and control group respectively.

The objectives of the study were:
1. To determine the outcome of Postnatal Nursing Problems in postnatal mothers after implementation of CPNS by the nurses in the study group and control group
2. To compare the outcome of Postnatal Nursing Problems and satisfaction level after implementation of CPNS among the postnatal mothers in control and study group.

3. To compare satisfaction level after implementation of CPNS among the postnatal mothers in control and study group.

4. To find out the correlation with outcome of postnatal nursing problems and satisfaction level among the postnatal mothers in study group who received CPNS in study group.

5. To find the association of selected demographic variables of postnatal mothers and the outcome of Postnatal Nursing Problems in the study and control group.

6. To find the association of satisfaction level and selected demographic variables of postnatal mothers after implementation of CPNS by nurses in the study group.

To answer the research questions the hypotheses formulated were as follows:

1. There will be significant difference in the outcome of postnatal nursing problems after implementation of CPNS by nurses in study group than the routine postnatal nursing care in control group.

2. There will be significant difference between the outcome of postnatal nursing problems and satisfaction level among postnatal mothers after implementation of CPNS in study group.

3. There will be significant difference in the satisfaction of CPNS Implementation by nurses among postnatal mother in study group than the postnatal mother who availed routine postnatal nursing care in control group.

4. There will be significant correlation between the outcome of postnatal nursing problems and satisfaction level among postnatal mothers after implementation of CPNS in study group.

5. There will be association with selected demographic variables of postnatal mothers and the outcome of postnatal nursing problems in study and control group.

6. There will be association with satisfaction level of CPNS implementation among postnatal mothers with their selected demographic variables in study group.
Related literature were reviewed and Donabedian’s structure-process-outcome model was adapted for designing the conceptual model. The research design adopted was nonequivalent control group posttest only design, manipulation included training and reinforcement of CPNS to nurses who work in postnatal ward, booklet on CPNS training was issued after the session for continuous practice of nursing care, session continued for a period of 30 minutes to 1hr, there were 7 sessions conducted for seven batch of nurses at the weekend on Saturdays 12-1pm, and very next day every nurse were requested to follow the CPNS to practice in their wards. The control group received the CPNS sessions after the completion of the study period, similarly booklets were issued to control group nurses also to practice in their wards.

The study was conducted in postnatal ward in twenty four settings of BBMP hospitals in Bangalore, samples were selected using non probability convenient sampling, population included were the postnatal mothers undergone normal delivery and the nurses who work in BBMP hospitals.

The nurses who work in postnatal ward, and the postnatal mothers from their first postnatal day were selected, and those who fulfilled the selection criteria during the period of study were selected as samples. Estimated sample size of nurses 86 in study and 88 in control group, whereas in postnatal mother sample size were 430 in study group with 440 subjects in control group.

**The instruments used had 4 parts:**
- Section: I Demographic variables of postnatal mother
- Section: II Demographic variables of nurses
- Section: III Interview schedule on outcomes of postnatal nursing problems after implementation of CPNS
- Section: IV Interview schedule on satisfaction level after implementation of CPNS by nurses among postnatal mothers

The instruments were validated by experts and reliability was checked using cronbach’s alpha, the data on demographic variables was collected on first day, outcomes of postnatal nursing problems and satisfaction on fifth postnatal day.
A pilot study was conducted with 20% of the proposed sample size helped to assess the reliability and feasibility of the instruments. Modifications were done based on the pilot study results and experts recommendations.

MAJOR FINDING OF THE STUDY:

The major finding of the study is presented under the following headings:

1. Findings on Demographic variables of postnatal mothers in study and control group.
2. Findings on Description of demographic characteristics of nurses in both study and control group.
3. Findings to elicit outcomes on Comparison of overall postnatal nursing problems between study and control group.
4. Findings to elicit outcomes on Comparison of postnatal physical nursing problems between study and control group.
5. Findings to elicit outcomes on Comparison of postnatal functional nursing problems between study and control group.
6. Findings to elicit outcomes on Comparison of postnatal psychological nursing problems between study and control group.
7. Findings on comparison of overall satisfaction level in between study and control group.
8. Findings to compare the outcomes on Comparison of postnatal nursing problems and satisfaction level in between study and control group
9. Findings on Correlation between overall postnatal nursing problems and satisfaction level among postnatal mothers in both the study and control group.
10. Findings on Correlation between postnatal physical nursing problems and satisfaction level among postnatal mothers in both the study and control group.
11. Findings on Correlation between postnatal functional nursing problems and the study and control group
12. Findings on Correlation between postnatal psychological nursing problems and satisfaction level among postnatal mothers in both the study and control group.
13. Findings on Association between outcomes of postnatal nursing problems among postnatal mothers and their selected demographic variables in study group and control group.
14. Findings on Association between satisfaction levels with selected demographic variables of postnatal mothers in study group.

Demographic data:
I. Findings on Demographic variables of postnatal mothers in study and control group:

From the Table 11 (figure 4-9) shows findings of selected demographic variables of postnatal mother includes Age, education, Gravida caretaker, source of information and health status of the mother, All through the descriptive analysis of demographic variables of postnatal mother, the Chi-square results was found to be remain not significant (p>0.05).

It is evidenced that the sample of postnatal mothers observed in study and control group were found to be homogeneous in their demographic characteristics as per the requisite of base line characteristics of study and control study.

II. Findings on Description of demographic characteristics of nurses in both study and control group. (Table 12, Figure 10 to15)

Findings From the table 12 (figure 10-15) reveals the distribution of nurses according to their demographic variables which include age, course, type of family, monthly income, designation and experience in postnatal ward both the groups.

The Chi-square test was performed to assess the significance of proportion of nurses according their demographic characteristics in between the study and control group.

All through the table the Chi-square results was found to be remain not significant (p>0.05). It evidences that the sample of nurses observed in study and control group were homogeneous in their demographic characteristics as per the requisite of base line characteristics of study and control study.
Elicit the outcomes of postnatal nursing problems:

III. Findings to elicit the outcomes Comparison of overall postnatal nursing problems in between study and control group.

Findings from the table 13 shows that in study group None of them had high level of overall postnatal nursing problems, 223(51.9%) had low postnatal nursing problems, whereas in control group majority 284(64.5%) had high postnatal nursing problems, (Figure-16) from the findings it is evident that high level of physical, functional and psychological wellbeing of postnatal mothers are enhanced who availed CPNS in study group.

The above study findings supported by Lydia Kanise Chimtembo (2013), conducted study to assess quality of comprehensive postnatal care that midwives provide to women seeking comprehensive postnatal services, actual practice was observed and compared to a standard checklist on postnatal care practice, study findings reveal that comprehensive postnatal services reduces the overall postnatal nursing problems.

a. Findings on postnatal physical problems:

From the table 14 findings reveal that in study group none of them had high level postnatal physical nursing problems, 223(51.9%) had very low postnatal physical nursing problems in study group who received CPNS, whereas in control group majority 284(64.5%) had high postnatal physical nursing problems who received routine care. (Figure-17). The above study findings supported by Stephanie brown (2005) conducted a study to investigate the relationship between maternal physical and emotional health problems among postnatal mothers after childbirth, where implementation of comprehensive postnatal strategies play vital role in decrease of postnatal physical nursing problems.

b. Findings on postnatal functional problems:

From the table 15 findings reveal that in study group None of them had high level postnatal functional nursing problems, in 368(85.6%) had low level of postnatal functional nursing problems in study group who received CPNS, whereas in control group majority 430(97.7%) had moderate and none of them had high postnatal functional nursing problems who received routine care (Figure-18)
The above findings are supported by the study conducted by Kairithia Fredrick (2015) to assess the Adequacy of vital signs monitoring in post-delivery mothers at the Naivasha District Hospital in Kenya.

The study recommended that there is need to emphasis on monitoring and documentation of maternal vital signs as a means of early detection of post-delivery complications.

c. Findings on postnatal psychological nursing problems:

From the table 16 in study group findings reveal that none of them had high level postnatal psychological nursing problems, 238(55.3%) in study group had low level of postnatal psychological nursing problems, whereas in control group majority 284 (64.5%) had moderate level of postnatal psychological nursing problems (Figure-19).

The study finding were supported by Deborah McCarter et al (2016) who conducted study on Effectiveness of Discharge Education on Postpartum Depression to determine effectiveness of an educational intervention in reducing or preventing symptoms of postpartum depression, It is evidenced that postnatal mothers who received guidance and counselling as a part of CPNS proved that majority of postnatal mothers elicited low postnatal psychological problems.

IV. Findings to compare the outcomes on Comparison of postnatal nursing problems and satisfaction level in between study and control group.

Findings from the table 19 and 20 (Figure: 22) compares Mean, SD, Mean Percentage, unpaired t test and p value compares overall postnatal nursing problems and satisfaction of CPNS in study group and control group.

Overall postnatal nursing care problems in study group mean value 42.56 and SD of 10.421, whereas in control group the mean value of 73.0 and SD of 12.423. Therefore overall Mean difference were of -30.44 and unpaired test t-value is -39.107 (p<0.001) shows statistically significant in study group than the control group.
Regarding the overall satisfaction level of CPNS the mean score value 37.87, SD 6.394 out of maximum score of 42 in study group, whereas in control group mean value is 20.55, SD 6.994. Therefore overall Mean difference value were 17.32 and unpaired test t-value is 38.077 (p<0.001) shows statistically significant in study group than the control group.

Regarding the aspect of postnatal physical nursing problems the mean value was 28.15 and SD of 9.0504 out of the maximum score of 57 in study group. But in control group, mean value was 48.93 and SD of 11.807, Therefore Mean difference were 20.78, and unpaired test t-value is -28.555 (p<0.001) shows statistically significant in study group than the control group.

Regarding the aspect of postnatal functional nursing problems, the mean value were of 5.72 and SD 1.758, out of the maximum score of 15 in study group, whereas in control group mean value 9.93 and SD of 0.581, Therefore Mean difference value were of 4.21, and unpaired test t-value is -47.645 (p<0.001) shows statistically significant in study group than the control group.

Regarding the aspect of postnatal psychological nursing problems, the mean value were of 8.69 and SD 2.988, out of the maximum score of 18 in study group, whereas in control group mean value 14.14 and SD of 2.878, Therefore Mean difference value were of 5.45, and unpaired test t-value is -27.396 (p<0.001) shows significant statistically significant in study group than the control group.

It is evidenced that from the analysis of comparison of outcomes of Mean, SD, Mean difference and unpaired t test values with (p<0.001) of postnatal nursing problems and level of satisfaction after implementation of CPNS was found to be effective, since majority of postnatal mothers elicited low level of overall postnatal physical, functional and psychological nursing problems indicating high level physical, functional and psychological well-being respectively.

It is evidenced that from the analysis of comparison of outcomes of postnatal nursing problems and level of satisfaction after implementation of CPNS was found to be effective than the routine care, majority of postnatal mothers had low postnatal
nursing problems with high satisfaction, than the postnatal mothers who availed routine care in control group which has been found to be significant with the p-value p<0.001, this finding are supported by the study conducted by Somayyeh Naghizadehet (2013) to assess patients’ satisfaction with postpartum care in teaching and nonteaching hospitals in Tabriz, Iran.

The findings of the study directed the investigator to accept the research hypothesis (H1), there will be significant difference between the outcome of postnatal nursing problems and satisfaction level among postnatal mothers after implementation of CPNS in study group.

V: Findings on comparison of overall satisfaction level in between study and control group:

In study group majority of postnatal mothers 304(70.7%) had high level satisfaction of CPNS implementation, In control group majority of postnatal mothers 233(53%) had poor level of satisfaction of routine care and none of them had high level of satisfaction of routine care.(Figure 20), From the table: 18 elicits the Mean 37.87 and SD 6.37 in study group is higher than Mean 20.55 and SD 6.994 in the control group with t value 38.077 and were statistically significant with p value < 0.001 indicates high level of satisfaction of CPNS who availed in the study group than the routine care in control group.

Findings of the study was supported by Jipi Varghese, (2012) conducted study to evaluate the level of satisfaction perceived by postnatal mothers following nursing care in postnatal wards.

The findings of the study proved overall reduction in postnatal nursing problems increases the satisfaction of the postnatal mothers and there is correlation found as the postnatal nursing problems decreases, satisfaction level increases, this finding are supported by study conducted by Somayyehnaghizadehet (2013) to assess patients’ satisfaction with postpartum care.

The findings of the study directed the investigator to accept the research hypothesis that (H2), there will be significant difference in the satisfaction of CPNS
Implementation by nurses among postnatal mother in study group than the postnatal mother who availed routine postnatal nursing care in control group.

VI: Findings on Correlation between postnatal nursing problems and satisfaction level among postnatal mothers in both the study and control group:

From the table 21 it reveals that overall Postnatal nursing problems there is negligible negative correlation exist between level of satisfaction and overall Postnatal nursing problems with \( r = -0.159 \), \( P<0.001 \) were statistically significant in study group, there is negligible negative correlation exist between level of satisfaction and overall Postnatal nursing problems \( r = -0.056 \) with \( p 0.238 \) were statistically not significant in control group.

Regarding aspects Physical Postnatal nursing problems there is negligible negative correlation exist between level of satisfaction and Physical Postnatal nursing problems with \( r =0.172 \) \( P<0.001 \) were statistically significant in study group , there is negligible negative correlation exist between level of satisfaction and Physical Postnatal nursing problems \( r = -0.055 \) with \( p 0.253 \) were statistically not significant in control group.

Regarding aspects functional Postnatal nursing problems there is negligible positive correlation exist between level of satisfaction and functional Postnatal nursing problems with \( r = 0.077, P=0.110 \) were statistically not significant in study group , there is negligible positive correlation exist between level of satisfaction and functional Postnatal nursing problems \( r = 0.071\)with \( p= 0.137 \) were statistically not significant in control group.

Regarding aspects psychological Postnatal nursing problems there is negligible negative correlation exist between level of satisfaction and psychological Postnatal nursing problems with \( r =-0.051, P= 0.289 \) were statistically not significant in study group , there is negligible negative correlation exist between level of satisfaction and psychological Postnatal nursing problems \( r =-0.033 \) with \( p=0.486 \) were statistically not significant in control group.
It evidenced that there is negligible negative correlation exist in overall postnatal nursing problems and level of satisfaction findings of the study elicits that low postnatal nursing problems has correlation with in high satisfaction level among the postnatal mothers received the CPNS through nurses in study group than control group. The findings of the study are supported by study conducted by Hanan Mohamed Soliman (2015) on Correlation between Patients' Satisfaction and Nurses' Caring Behaviors Patients have the right to expect Quality of care.

The findings of the study directed the investigator to accept the research hypothesis (H₃), there will be significant correlation between the outcome of postnatal nursing problems and satisfaction level among postnatal mothers after implementation of CPNS in study group.

VII: Findings on Association between outcomes of postnatal nursing problems among postnatal mothers and their selected demographic variables in study group:

Findings From the table 22 reveals the association of demographic variables of postnatal mother with the low and moderate level of postnatal nursing problems as follows.

Age group of the chi-square value 6.882 and p value p=0.076, Education chi-square 3.514, and p value p=0.319, Gravida -chi-square value 1.363, with p value p=0.506, Caretaker chi-square value 2.472, with p value p=0.480, source of information chi-square value 2.724, with p value p=0.436 and Health status of postnatal mother chi-square value 0.952, with p value p=0.813 respectively with are not statistically significant in association of mother with low level and moderate level of postnatal nursing care problems.

Findings of Multinominal regression analysis in study group

Findings from Odds ratio and confidence interval and the p value indicates:

- Age -On comparing the reference age group 34-38 with other (OR: 1.136, CI: 326 to 3.954, P=.841) more likely to have low postnatal nursing problems, than moderate postnatal nursing problems in postnatal mother which are not statistically significant.
- Education –Graduate with mothers who completed Primary school has less likely (OR: 627, CI: .321 to 1.224, P=.171), Higher secondary school (OR: 1.065, CI: .613 to 1.850, P=.822) and PUC (OR: 1.073 ,CI: .649 to 1.773, P=.784) are more likely to have low postnatal nursing problems than moderate postnatal nursing problems in postnatal mother which are not statistically significant
- Gravida -Grand multi Gravida with Primi Gravida has more likely (OR: 1.215, CI: .328 to 4.503, P=.771) Grand multi Gravida with Multi Gravida has less likely (OR: 1.215, CI: .328 to 4.503, P=.771) to have low postnatal nursing problems than moderate postnatal nursing problems in postnatal mother which are not statistically significant
- Caretaker -friends with Mother (OR: 1.215, CI: .328 to 4.503, P=.771) and friends (OR: 1.295, CI: .579 to 2.895, P=.530) more likely to have low postnatal nursing problems but with Mother in law there is less likely (OR: .918, CI: .382 to 2.207, P=.849) to have low postnatal nursing problems than moderate postnatal nursing problems in postnatal mother which are not statistically significant
- Source of information -media with parents there is more likely (OR: 1.176, CI: .640 to 2.159, P=.602) to have low postnatal nursing problems, media with relatives (OR: .752, CI: .447 to 1.264, P=.282) friends and there is less likely (OR: .750, CI: .447 to 1.256, P=.274) to have low postnatal nursing problems than moderate postnatal nursing problems in postnatal mother which are not statistically significant.
- Health status of mother On comparing reference of -No identified medical and pregnancy induced illness- Normal pregnancy with Gestational diabetes there is more likely (OR: 1.169 , CI: .545 to 2.508, P=.688) to have low postnatal nursing problems ,whereas Pregnancy Induced hypertension (OR: .732 , CI: .421 to 1.274, P=.270),and Anemia there is Less likely (OR: .902 , CI: .531 to 1.530, P=.701) to have low postnatal nursing problems than moderate postnatal nursing problems in postnatal mother which are not statistically significant.
- From the above table 23 findings reveal that there is no statistically significant association of selected demographic variables with low and
moderate level of postnatal nursing problems in study group.

- It is inferred that after chi-square test and multinomial regression analysis to assess the strength of association of selected demographic variables such as age, education, caretaker, source of information and health status of the postnatal mothers with low postnatal nursing problems and moderate postnatal nursing problems in postnatal mother were not statistically significant in study group.

- Therefore findings direct the investigator to accept the null hypothesis that there is no significant association with selected demographic variables of postnatal mothers and the outcome of postnatal nursing problems in study group.

VIII. Findings on Association between outcomes of postnatal nursing problems among postnatal mothers and their selected demographic variables in control group

Findings from the table 24 reveals the chi-square test findings on association of demographic variables of postnatal mother with the low, moderate and high postnatal nursing problems in control group as follows.

Age of the postnatal mother with (chi-square value 10.396, and p=0.10), Education with (chi-square value 5.353, and p=0.499), Gravida with (chi-square value 3.922 and p=0.417), Caretakers with (chi-square value 4.074 and p=0.667), Source of information with chi-square value 2.137 and p=0.907 and Health status of postnatal mother with (chi-square value 8.193 and p=0.224) are not statistically significant with association of low level, moderate and high level of postnatal nursing care problems respectively.

Therefore from the Findings from the above table 23 findings reveal that there is no statistically significant association of selected demographic variables with low, moderate and high level of postnatal nursing care problems in control group.

Therefore findings direct the investigator to accept the null hypothesis that there is no significant association with selected demographic variables of postnatal mothers and the outcome of postnatal nursing problems in control group.
Multi nominal regression analysis for control group :( low and high postnatal nursing problems)

From the table 25 reveals the findings on extent of association of outcome-low postnatal and high postnatal nursing problems with categories of demographic variables in control group, Odds ratio and confidence interval-lower and upper with p value as follows:

**Age:** On comparing reference age 34-38 yrs with the 18-23 yrs (OR: .214, CI: .043 to 1.058, P=.059) whereas 24-28 years age group (OR: .143, CI: .027 to 763, P=.023*) are less likely to have low postnatal nursing problems than high postnatal nursing problems which is statistically significant.

**Education** primary school has less likely (OR: .250, CI: .028 to 2.241, P=.216) to have low postnatal nursing problems but with higher secondary (OR: 1.572, CI: .519 to 4.761, P=.424) and PUC (OR: 1.112, CI: .362 to 3.416, P=.853) are more likely to have low postnatal nursing problems than high postnatal nursing problems which is not statistically significant.

**Gravida** with primi Gravida (OR: .412, CI: .094 to 1.793, P=.237) and multigravida (OR: .274, CI: .058 to 1.297, P=.103) less likely to have low postnatal nursing problems than high postnatal nursing problems which is not statistically significant.

**Caretaker**-mother (OR: 1.270, CI: .236 to 6.819, P=.781) and relatives (OR: 1.106, CI: .200 to 6.111, P=.908) more likely to have low postnatal nursing problems, whereas mother-in law (OR: .668, CI: .077 to 5.785, P=.714) less likely to have low postnatal nursing problems than high postnatal nursing problems which is not statistically significant.

**Source of information** with media with parents (OR: .829, CI: .224 to 3.072, P=.779) and friends (OR:.481, CI: .130 to 1.783 P=.274) were less likely to reveal low postnatal nursing problems whereas with relatives more likely (OR: 1.383, CI: .475 to 4.028 P=.552) to have low postnatal nursing problems than high postnatal nursing problems which is not statistically significant.
Health status of postnatal mother with No identified medical and pregnancy induced illness- Normal pregnancy with Gestational diabetes (OR: 3.185, CI:.765 to 13.250 P=.111), Pregnancy Induced hypertension (OR: 1.568, CI: .386 to 6.366 P=.529 and Anemia in the postnatal mother were more likely (OR: 4.247, CI: 1.478 to 12.200 P=.007) to have low postnatal nursing problems respectively than high postnatal nursing problems which is not statistically significant.

Postnatal mother in age group 24-28 yrs less likely to have associated with outcomes of low postnatal nursing problems than high postnatal nursing problems also found to be statistically significant, whereas other age groups, education, Gravida, caretaker, source of information and health status of the postnatal mother are not found be associated with outcomes low and high postnatal nursing problems in control group

Therefore findings direct the investigator to accept the null hypothesis that there is no significant association with selected demographic variables of postnatal mothers and the outcome of postnatal nursing problems in control group.

Multi nominal regression analysis for control group: (moderate and high postnatal nursing problems)

From the above table 26 reveals the findings on extent of association of outcome- moderate postnatal and high postnatal nursing problems with categories of demographic variables in control group, Odds ratio and confidence interval-lower and upper with p value as follows:

Age: From the findings on comparing reference age 34-38 yrs with the 18-23 and 24-28 age groups has less likely to have moderate postnatal nursing problems than high postnatal nursing problems in postnatal mother which are not statistically significant.

Education: From the findings on comparing reference graduate with the primary school and PUC has less likely to have moderate postnatal nursing problems than high postnatal nursing problems whereas graduate with the higher secondary has more likely (OR: 1.217, CI: .687to2.154 P=.501) to have moderate postnatal nursing problems than high postnatal nursing problems in postnatal mother which are not statistically significant.
**Gravida:** From the findings on comparing reference grand multigravida with the primi and multi Gravida mother has less likely (OR: .601, CI: .256 to 1.415, P=.244) to have moderate than high postnatal nursing problems in postnatal mother which are not statistically significant.

**Care taker:** From the findings on comparing reference for caretaker as friends with Mother, Mother-in-law and relatives has less likely to have moderate postnatal than high postnatal nursing problems in postnatal mother which are not statistically significant.

**Source of information:** From the findings on comparing reference for source of information as media with parents and friends has less likely to have moderate than high postnatal nursing problems in postnatal mother whereas with friends has more likely (OR: 1.011, CI: .580 to 1.763, P=.969) to have moderate than high postnatal nursing problems in postnatal mother which are not statistically significant.

**Health status of postnatal mother:** From the findings on comparing reference for health status of postnatal mother with No identified medical and pregnancy induced illness- Normal pregnancy with gestational diabetes, pregnancy induced hypertension and Anemia has more likely to have moderate than high postnatal nursing problems in postnatal mother which are not statistically significant respectively.

Therefore findings direct the investigator to accept the null hypothesis that there is no significant association with selected demographic variables of postnatal mothers and the outcome of postnatal nursing problems in control group.

**IX: Findings on Association between satisfaction levels with selected demographic variables of postnatal mothers in study group:**

Findings From the table 24 reveals the association of demographic variables of postnatal mother with the level of satisfaction of postnatal mother after implementation of CPNS in study group as follows:
• **Age** of the postnatal mother are not statistically significant with association of moderate level and high level of satisfaction found to be significant with chi-square value 0.361 and \( p=0.948 \)

• **Education** of the postnatal mother are not statistically significant with association of moderate level and high level of satisfaction with chi-square value 6.319 and \( p=0.097 \)

• **Gravida** of the postnatal mother are not statistically significant with the association of moderate level and high level of satisfaction with chi-square value 2.322 and \( p=0.313 \)

• **Caretakers** of the postnatal mother are not statistically significant with the association of moderate level and high level of satisfaction with chi-square value 6.755 and \( p=0.080 \)

• **Source of information** in the postnatal mother are not statistically significant with the association with moderate level and high level of satisfaction with chi-square value 2.510 and \( p=0.474 \)

• **Health status of postnatal mother** in the postnatal mother are not statistically significant association with moderate level and high level of satisfaction with chi-square value 1.754 and \( p=0.625 \)

Findings from the table 24 reveal that there is no statistically significant association of selected demographic variables with moderate and high level of satisfaction in study group.

Therefore findings direct the investigator to accept the null hypothesis that there will be no association of satisfaction level of CPNS implementation among postnatal mothers with their selected demographic variables in study group.

### 6.2 CONCLUSION:

The study concluded that CPNS implementation by the nurses are found to be effective and elicits the reduction of actual postnatal physical, functional and psychological nursing problems with increase the satisfaction level among the postnatal mothers, since from the findings it is clear that reinforcement of existing standard nursing practices with regular evaluation of nursing care is essential to
prevent the potential complications, further strict adherence to systematic nursing practices reduces the potential maternal mortality rate, from this study it is evident that outcome of postnatal nursing problems after CPNS implementation elicited as high level of physical, functional and psychological wellbeing with reduced physical, functional and psychological postnatal nursing problems the conclusions of the study findings are supported by study conducted by Mervat Hassan.(2016) recommends strict implementation of standards for immediate postpartum nursing care in labor rooms, and in postnatal wards and to activate the policies and regulations of nurse patient ratio will not only improve the quality of health care but also reduces the potential nursing problems in postnatal mother.

6.3 NURSING IMPLICATIONS

Implications for Nursing practice:

In this study CPNS training module structured based on WHO recommendations on postnatal care guide is adopted from standard nursing care practice recommended by WHO(2013 and 2015),USAID and ministry of health and family welfare’s new approach on strategies for reproductive maternal child and adolescent health.

The study provides an insight to evaluate the all existing practice of nursing care in any setting as per the standards helps to prevent potential postnatal nursing problems; further study can be implemented in all postnatal wards as routine.

The study portraits that perinatal care can be segmented and researched to evaluate the existing nursing care practice in order to determine the quality care is provided, thereby it helps prevent the nursing care problems in mothers.

Implications for nursing education:

This study will be helpful to understand the lacunae in the clinical practice though the nurses are trained and have experience of practice but it is important to reinforce the standards of practice and evaluate the present practice in the clinical area in our nursing curriculum, nursing theory and practice.
This study portrays the importance of reinforcement of comprehensive nursing care because not only learning and gaining the knowledge about the nursing care is important, but gained knowledge should help every nurse to attain the caring attitude and practice the learned skills effectively without omitting or neglecting the essential care.

Nurse educators can promote the improvisation of nursing care by conducting regular education programs to the nursing fraternity, reinforce the bedside nurses to update their knowledge and practice the standard protocols of nursing.

**Implications for nursing administration:**

This study will help the nursing officers and leaders to plan and organize the staff as per the Indian council norms, avoid the staff turnover, burnouts, and implement the nursing and patient care without the interference of any factors.

Potential nursing problems can be reduced if regular evaluation of nursing protocol is carried out for all nursing interventions.

Importance of reinforcement of existing practices and the planning and implementing resource requirements that needed to practice standard protocol are recommended through this study.

**Implications in nursing research:**

This study can be conducted to based on the updated recommendations by WHO on antenatal care, intranatal care and newborn care as a descriptive study to learn the existing practice and outcomes.

Study can be done in large scale on district hospitals, community health centers to evaluate the existing practices on perinatal care.

Study can be done evaluating the satisfaction of nursing care provided by the nurses among the antenatal mothers admitted for safe confinement.
6.4 RECOMMENDATIONS:

From this study it is clear that good outcome depends on better practices of standard postnatal nursing care, and it is possible only where postnatal nursing problems are reduced better will be the outcome and satisfaction also the findings clearly elicit that it is important to reinforcement of practicing existing care and supervising and improving the areas of lacunae will reduce postnatal nursing problems and gives good outcome, the following are the recommendations:

- Study can be conducted to assess the outcomes of antenatal and intranatal nursing problems where we can check the existing comprehensive antenatal and intranatal n practice and elicit the nursing care problems and the outcome.
- Study can be conducted in large scale in private hospitals other than BBMP hospitals
- A comparative study can be conducted between private set-up and government Set-up.
- Comparative study can be conducted between rural and urban mothers.
- Research should be continued on the need of practices and effectiveness of perinatal nursing care strategies
- Study can be done evaluating WHO guidelines on perinatal care based on updated recommendations.