



International Journal of Advance Research in Community Health Nursing

E-ISSN: 2664-1666

P-ISSN: 2664-1658

www.communitynursing.net

IJARCHN 2022; 4(1): 15-18

Received: 07-11-2021

Accepted: 10-12-2021

Curie Tali

MSc Nursing Student, Sikkim
Manipal College of Nursing,
Sikkim Manipal University,
Sikkim, India

Arkierupaia Shadap

Faculty, Sikkim Manipal
College of Nursing, Sikkim
Manipal University, Gangtok,
Sikkim, India

Binita Khati

Faculty, Sikkim Manipal
College of Nursing, Sikkim
Manipal University, Gangtok,
Sikkim, India

Corresponding Author:

Arkierupaia Shadap

Faculty, Sikkim Manipal
College of Nursing, Sikkim
Manipal University, Gangtok,
Sikkim, India

Knowledge and practice of immediate newborn care among student nurses in labour room of selected hospital, Sikkim

Curie Tali, Arkierupaia Shadap and Binita Khati

DOI: <https://doi.org/10.33545/26641658.2022.v4.i1a.92>

Abstract

Neonatal period is the most sensitive period and it is the period that has an impact on the child's survival according to GHO data. The proper care of a newborn after birth is vital for the survival of newborn. The present research study assessed the knowledge and the practice of immediate newborn care among 40 nursing students in the labor room of the selected hospital, Gangtok, Sikkim. It was also to find out correlation between the knowledge and their practice.

Methods: The investigator adopted a quantitative approach with a descriptive correlational research design. A purposive sampling technique was used for the sample selection. A pre-designed structured knowledge questionnaire and observational checklist on practice were developed and validated. Data was collected after getting ethical clearance and written consent from the participants. Collected data were analyzed using frequency and inferential statistics.

Results: Finding shows that 85% (34) of the sample had average knowledge, 12.5% (5) had good knowledge and 2.5% (1) had poor knowledge regarding immediate newborn care. The majority 95% (38) had satisfactory practice and 5% (2) had unsatisfactory practice. Karl Pearson's correlation coefficient was found to be $r=0.462$, which indicates a moderately positive correlation between knowledge and practice of students regarding immediate newborn care. There is an association between knowledge and practice with religion ($p<0.05$), whereas, there is no association between knowledge and practice with other demographic variables. The study concluded that majority of the samples are having average knowledge and practice satisfactorily. The findings necessitate a need to further improve the cognitive level of the student and to attain good knowledge and 100% satisfactory practice. As nurses, we play a vital role in providing competent care to newborns; so, the enhancement of both knowledge and practice regarding immediate newborn care is important in any form.

Keywords: knowledge, practice, immediate newborn care, student nurses, labor room

Introduction

Every neonate has the right to grow in a healthy environment. Neonatal period is the crucial period that requires careful observation and care. It is a period of transition adjustment from the intrauterine to extra-uterine environment. The neonatal period is the first 28 days of life that carries the highest risk of mortality per day than any other period during the childhood^[1]. Nearly, 0.75 million neonates died in India in 2013, the highest for any country in the world. The annual burden of neonatal deaths has reduced from 1.35 million in 1990 to 0.75million in 2013^[1]. India contributes to one –fifth of global live births and more than a quarter to neonatal deaths^[2]. Globally, 2.6million children died in the first month of life in 2016 – approximately 7,000 newborn deaths every day- most of which occurred in the first week with about 1million dying on the first day and close to 1million dying within the next 6days^[3]. Immediate newborn care interventions are part of essential newborn care used to protect against newborn morbidity and mortality by thermal care including drying, rapping of the newborn with dry linen immediately (to maintain the temperature and prevent from heat loss after delivery), clearing the airway, late cord clamping (performed 1-3mins after birth) and cord care, delaying the newborn's first bath for at least 24 hours or several days to limit hypothermia risk and also to evaluate Cardiorespiratory function, administration of vitamin K, providing eye care with sterile gauze, initiation of breastfeeding within the first one hour of birth and early skin-to-skin contact with the mother^[4]. Quality midwifery care provided by midwives educated to international standards, reduces maternal and newborn

health outcomes. Midwifery education is a key solution to the challenge of providing universal and quality maternal and newborn care to meet our sustainable development goals. While improving, access to care is critical; ensuring good quality of care has an even greatest impact in terms of lives saved.⁵

Methods and Material

Research approach: Quantitative non-experimental approach.

Setting of the study: STNM Hospital, Gangtok.

Population: Nursing students of nursing institutions.

Sample, sample size: 40 students from 3rd Year & 4th Year BSc Nursing.

Sampling technique: Purposive sampling technique

Criteria: Inclusion- students providing care to neonate and ho are willing to participate

Exclusion- students who provided care to newborn of Rh negative mothers.

Research variables: Knowledge and Practice regarding immediate newborn care.

Data collection tools and technique: Demographic

proforma, pre-designed structured knowledge questionnaire and Practice Observational checklist were developed and sent for validation. Reliability of tool ($r=0.4$) and pilot study was conducted. Data was collected after getting ethical clearance and written consent from the participants. The collected data were analyzed using the descriptive and inferential statistics by SPSS 16.

Results

The findings of the study showed the frequency and percentage distribution of sample characteristics in Table 1 were majority 78% belonged to the aged group 20-22, 50% were Hindu by religion, majority 65% have obtained 61-70% in the last examination, majority 68% were 4th Year BSc Nursing students, majority 88% have conducted up to 5 normal deliveries and 100% have not attended any workshop/seminar on immediate newborn care. Figure 1 depicted the knowledge score of the students on immediate newborn care. Figure 2 depicted the level of practice regarding immediate newborn care. Karl Pearson's correlation coefficient was used to find out the correlation and it was found that there was a moderately positive correlation between knowledge and practice ($r=0.462$; $p<0.01$) as shown in Table 2. The study also found that there is an association between knowledge and practice with religion ($p<0.05$), whereas, there is no association between knowledge and practice with other demographic variables.

Table 1: Frequency and percentage distribution of sample characteristics.

[N=40]

S/L	Items	Frequency	Percentage (%)
1	Age (in years)		
	a. 17-19	3	8
	b. 20-22	31	78
	c. >23-25	6	15
2	Religion		
	a. Christian	9	23
	b. Hindu	20	50
	c. Buddhist	11	28
3	% obtained in last exam		
	a. ≤ 50	1	3
	b. 51-60	5	13
	c. 61-70	16	65
	d. 71-80	8	20
4	Present year of study		
	a. 3 rd Year BSc N	13	33
	b. 4 th Year BSc N	27	68
5	No. of normal delivery conducted		
	a. 1 - 5	34	88
	b. ≥ 6	5	12
6	Any workshop or seminar on immediate newborn care attended?		
	a. Yes	0	0
	b. No	40	100

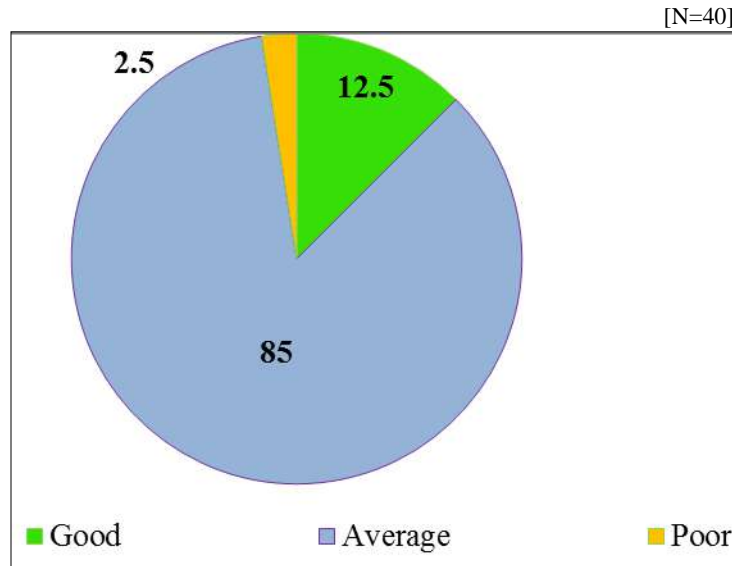


Fig 1: Pie diagram showing the knowledge score regarding immediate newborn care.

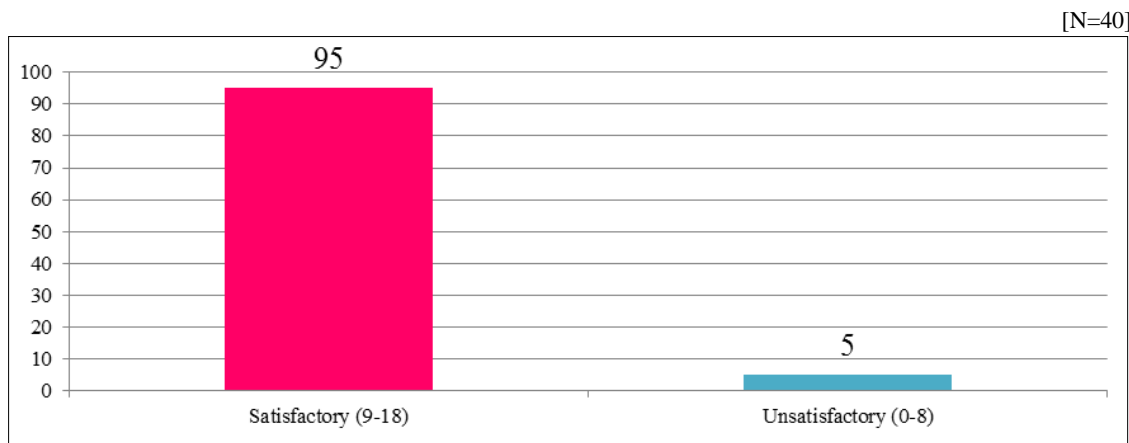


Fig 2: Bar diagram showing the distribution of practice regarding immediate newborn care

Table 2: Correlation between knowledge and practice regarding immediate newborn care among student nurses.

Variable	Mean	Standard deviation	Correlation
Knowledge	22.62	3.505	0.462
Practice	10.40	1.105	

Discussion

The findings of the present study revealed that majority of the students 34 (85%) had average knowledge, 5 (12.5%) had good knowledge and 1 (2.5%) had poor knowledge. This is in consistent with the findings of the study conducted by Devi. N.Y *et al.*, which shows that 72% had average knowledge, 28% had good knowledge and none had poor knowledge [6]. The findings of the present study revealed that majority of the students 35 (95%) practice the immediate newborn care satisfactory and 2(5%) practice it unsatisfactory. This is n consistent with findings of the study conducted by Devi. N.Y *et al.*, which shows that majority of the staff nurses 98% had good practice, 2% had average practice and none had poor practice [6].

Implications

The findings of the study have implications directed towards the nursing education, nursing administration, nursing research, nursing practice and community health nursing.

Recommendation

To be conducted on larger sample size and among staff nurses working in the labour room.

Conclusion

The study concluded that majority of the students were having average knowledge and practice is satisfactory (majority all steps were followed). The findings necessitate a need to further improve the knowledge of the student and to attain 100% satisfactory practice. As nurses, we play a vital role in providing comprehensive care to newborns. Educating them through educational material and update their knowledge and skills is a must. This will improve the newborn care and will eventually improve the morbidity & mortality rate in the country.

Acknowledgements

We would like to thank the students who participated in the study, Sikkim Manipal College of Nursing and Research Unit, SMIMS.

References

1. Shanker MJ, Neogi SB, *et al.* State of newborn health. Journal of Perinatology. All India Institute of Medical Sciences. Ansari Nager. New Delhi, 2016.
2. Registrar General of India. Sample registration system

- (SRS) statistical report. New Delhi, 2013.
3. Global Health Observatory data. WHO – Neonatal Mortality. Available from <http://.ho.int/gho/child-health/mortality/neonatal-text/en>
 4. HO Recommendations on Newborn health: Guidelines approved by the HO Guidelines Review Committee. Geneva: World Health Organization, 2017. (HO/MCA/17.07). License: CC BY-NC-SA3.0 IGO
 5. WHO. <https://.who.int/maternal-child-adolescent/topics/quality-of-care/midwifery/strengthening-midwifery-education/en/>.
 6. Devi NY, Mahadalkar P, Vaeghese R, *et al.*, A knowledge and self-reported practices regarding immediate newborn care among the staff nurses from birthing units of selected hospitals of Pune City. International Journal of Applied Research. 2017;3(6):499-502.