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The perception of doctors and nurses regarding “The role of mothers in the care of high-risk newborn” in selected hospitals, Chennai.

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ABSTRACT

The term high-risk newborn commonly refers to the baby within the age of 28 days with greater chance of morbidity and require special care in Neonatal Intensive Care Unit. High-risk newborn, who are admitted in Neonatal Intensive Care Unit, are physiologically unstable and neurologically immature. They are subject to many illnesses and are deficient in the capacity to cope with extra-uterine environment. Newborn babies are especially vulnerable to diseases. But standard precautions followed by the mothers will prevent diseases and deaths in neonates. The mother should create an ideal environment for the newborn at home that should resemble an in-utero environment which provides a conducive environment, regular nourishment, stimulation and rest. **Objectives:** 1. To assess the perception of doctors regarding the role of mothers in the care of high-risk newborn 2. To assess the perception of nurses regarding the role of mothers in the care of high-risk newborn 3. To compare the perception of doctors and nurses regarding the role of mothers in the care of high-risk newborn 4. To associate the perception of doctors and nurses regarding the role of mothers in the care of high-risk newborn with selected demographic variables. **Method:** Descriptive, exploratory survey design was adopted for the study. Samples for this study were 60 (30 Doctors and 30 Nurses) working in NICU at different hospitals. Simple random sampling technique was used to select the sample. Data collection was done by using the structured open ended questionnaire. **Results:** 1. All 100% of the doctors perceived that mothers have a role in prevention of infection and follow-up care of high-risk newborn. 2. Majority (73.3%) of the nurses perceived that mothers can be involved in meeting the nutritional needs 3. 96.7% of the nurses stated that mothers have a role in maintaining the temperature of high-risk newborn. 4. All 100% of the nurses perceived that mothers have a role in meeting the nutritional needs of high-risk newborn. 5. Majority (70%) of the nurses stated that mothers can promote parent-infant bonding by providing kangaroo mother care to the high-risk newborn and 66.7% of the nurses stated that mothers have a role in controlling stress to the high-risk newborn. **Conclusion:** The study reveals that majority of the doctors and nurses perceived that mothers have role in all the aspects of care of high-risk that will influence the high-risk newborn.

Keywords : Perception, doctors and nurses, high risk newborn.

INTRODUCTION

Every family looks forward to the birth of a healthy newborn. It is an exciting time with so much to

look forward to. In some cases, though, unexpected difficulties and challenges occur along the way, some newborns are considered being on high-risk. This means that a newborn has a greater chance of complications because of conditions that occur during fetal development, conditions of the mother during pregnancy or problems that may occur during labour and birth. Some complications are unexpected and may occur without warning.

Newborn begin to develop a sense of trust as they learn the feel, sound and smell of their mothers. When a newborn and mothers are separated, the necessary bonding time is greatly diminished. It is important for the mothers to be enveloped in the care of their newborn. During this time, the mothers also discover the personality of their baby and how to recognize their needs by the behavioral cues displayed. When their time is limited in the NICU, All high-risk newborn need specialized care in the Neonatal Intensive Care Unit (NICU) until they recover. They require care and attention by their mothers apart from the nurses in respect of maintaining thermoregulation, meeting the nutritional needs, promoting parent-infant bonding, promoting hygienic needs, prevention of infection and control of stress.

OBJECTIVES

1. To assess the perception of doctors and nurses regarding the role of mothers in the care of high-risk newborn in selected hospitals, Chennai.
2. To compare the perception of doctors and nurses regarding the role of mothers in the care of high-risk newborn in selected hospitals, Chennai.
3. To associate the perception of doctors regarding the role of mothers in the care of high-risk newborn with selected demographic variables.
4. To associate the perception of nurses regarding the role of mothers in the care of high-risk newborn with selected demographic variables

MATERIAL AND METHODS

Descriptive, exploratory design was found to be relevant for this study. The aim is to describe the relationship among the demographic variables,

Which helps to provide factual information about the existing phenomena. It also helps to study the current status by further exploration and understanding of the present condition. Non-probability Convenient sampling method was used.

The tool consists of two sections; Section-I: Items on demographic variables like **Section- A:** Structured questionnaire consists of closed ended questions to collect demographic details of the doctors. **Section-B:** Structured questionnaire consists of closed ended questions to collect demographic details of the nurses.

Section-II: Structured questionnaire consists of open ended questions to obtain information on the perception of doctors and nurses regarding the role of mothers in the care of high-risk newborn. The baseline data on perception of doctors and nurses

Collected using structured questionnaire. Approximately 20-30 minutes was taken by the doctors and nurses to fill the tool

Descriptive statistics:

1. Frequency and percentage distribution were used to analyze the baseline data of the doctors and nurses.

- Frequency and percentage distribution were used to assess the perception of the doctors and nurses regarding the role of mothers in the care of high risk newborn.

Inferential statistics:

- Chi square test was used to compare the perception of doctors and nurses.
- Chi square test was used to analyze the perception of doctors and nurses regarding the role of mothers in the care of high risk newborn with selected demographic variables

Comparison of the perception of doctors and nurses regarding the role of mothers in the care of high-risk newborn

N=60

Role of mothers in the care of high-risk newborn		Doctors		Nurses		Chi square value	P value
		F	%	F	%		
Areas of care in which the mothers should be involved in care of high-risk newborn							
Thermoregulation	Meeting the nutritional needs	16	53.3	11	36.7	7.331	0.197
	Promoting the hygienic needs	20	66.7	22	73.3		
	Promoting the parent-infant bonding	5	16.7	9	30		
	Prevention of infection	1	3.3	7	23.3		
	Participate in routine care.	4	13.3	3	10		
		4	13.3	2	6.7		
Role of mothers in maintaining the temperature of high risk newborn							
a)	Yes	27	90	29	96.7	1.071	0.301
b)	No	3	10	1	3.3		
Role of mothers in meeting the nutritional needs of high-risk newborn							
a)	Yes	29	96.7	30	100	1.017	0.313
b)	No	1	3.3	-	-		
Role of mothers in promoting the PIB							
	Provide kangaroo mother care	9	30	21	70	0.215	0.643
	Promote breast feeding	10	33.3	18	60		
Role of mothers in controlling stress							
a)	Yes	21	70	20	66.7	0.077	0.781
b)	No	9	30	10	33.3		
Role of mothers in promoting hygienic needs of high-risk newborn							
	Keeping the baby and surroundings in a clean state	21	70	25	83.3	5.312	0.070
	Change the wet nappy immediately	3	10	13	43.3		
	Cut short/ or trim the nails	4	13.3	2	6.7		

Role of mothers in prevention of infection to the high-risk newborn							
a)	Yes	30	100	30	100	0.000	1.000
b)	No	-	-	-	-		
The responses are							
	Wash the hands before and after handling the baby	19	63.3	26	86.7		
	Maintain cleanliness of the baby	6	20	11	36.7		
	Maintain hygienic feeding technique	11	36.7	4	13.3	7.908	0.095
	Change the wet nappy frequently	1	3.3	5	16.7		
	Maintain the personal hygiene of the high-risk newborn	4	13.3	7	23.3		
Role of mothers in follow-up care of the high-risk newborn							
		30	100	28	93.3	2.069	0.150
		-	-	2	6.7		
a)	Yes						
b)	No						
Any other role (other than which are mentioned above) which the mother can play in taking care of high-risk newborn							
a)	Yes	2	6.7	1	3.3	0.351	0.554
b)	No	28	93.3	29	96.7		

RESULT AND DISCUSSION

Most of the doctors responded to the areas of care in which the mother should be involved in the care of high risk newborn in different ways. Majority of the doctors said that mothers can take care of their babies in the areas of thermoregulation and meeting the nutritional needs. High risk newborn babies (preterm and low birth weight babies) are placed in a prone to promote their lung maturation and it is also mother's responsibility to maintain the position of the newborn while taking care of the baby in NICU.

CONCLUSION

The study reveals that majority of the doctors and nurses perceived that mothers have role in all the aspects of care of high-risk newborn like thermoregulation, nutritional needs, promotion of parent-infant bonding, control of stress, promotion of hygienic needs, prevention of infection and follow-up care.

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