



Factors Influencing Newborn Resuscitation among Nurses and Midwives in the Eastern Region, Ghana.

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BACKGROUND

Intrapartum-related complications, including birth asphyxia, are the leading cause of newborn morbidity and mortality in Sub-Saharan Africa including Ghana.¹ Studies have shown that effective Newborn Resuscitation (NR) within the first minute of life can reduce newborn mortality.¹

Hence the role of nurses and midwives is crucial in ensuring that every baby breathes within the first minute of life.² Nurses and midwives are at the forefront of caring for newborns with birth asphyxia.² Their behaviour, therefore, toward newborn resuscitation is critical to the newborn's survival.

OBJECTIVES

- Describe the attitudes of nurses and midwives towards new-born resuscitation
- Explain the beliefs and perception (subjective norms) of nurses and midwives towards new-born resuscitation
- Identify the behavioural intentions of nurses and midwives towards the performance of newborn resuscitation
- Investigate the practices (behaviour) of newborn resuscitation among nurses and midwives.

METHODS

- A qualitative exploratory-descriptive approach
- Purposive sampling was employed to recruit nurses and midwives who work in the Labour Ward and Neonatal Intensive Care Units (NICU) of the two healthcare facilities in the Eastern Region of Ghana
- In-depth interviews were conducted face-to-face and audio recorded. The semi-structured questions elicited information regarding the experiences and practices of participants with newborn resuscitation.
- Transcripts generated were coded and thematic analysis done

ETHICS STATEMENT

Ethics approval was acquired from the Ghana Health Service Ethics Committee (GHS-ERC 050/03/21), and consent was granted by the local institutional review boards of the two Hospitals.

Signed consent was obtained from each participant, to participate in the study. Participants were made aware of their right to withdraw from the study even after consenting to take part.

Privacy was ensured throughout data collection and pseudonyms were used to conceal the identity of participants.

RESULTS

All participants in the study were females representing various cadres of nurses and midwives working at the Nsawam Government Hospital and the Eastern Regional Hospital, Koforidua. All participants had been practicing for over a year. Three main themes and nine subthemes emerged.

CADRE OF NURSES AND MIDWIVES AND THEIR YEARS OF EXPERIENCE

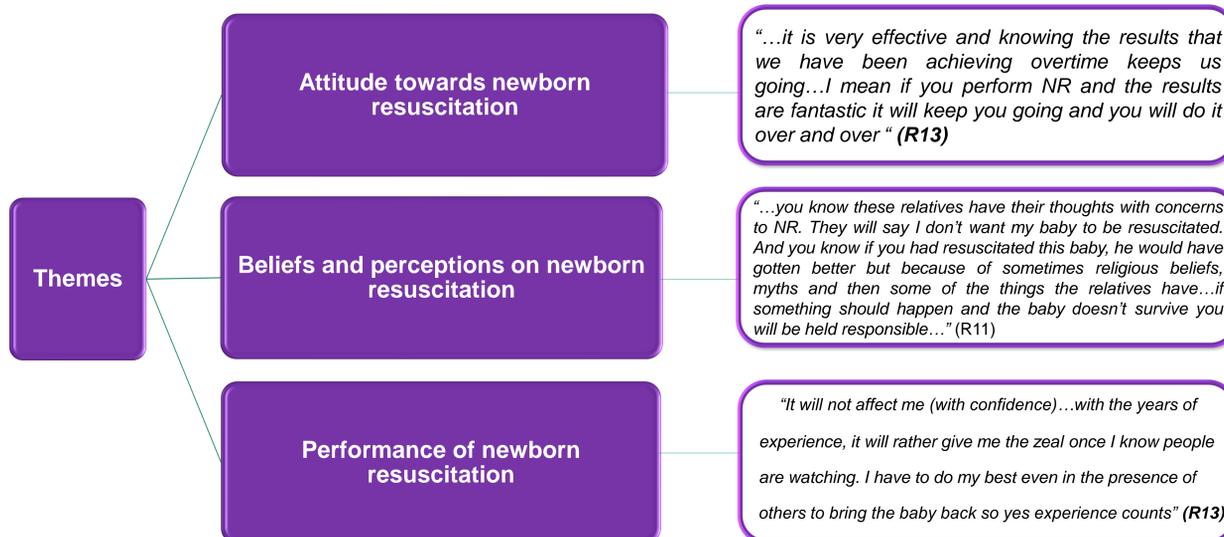
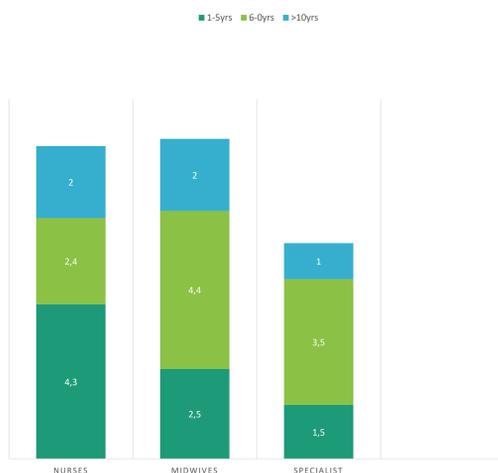


Photo of a successfully resuscitated newborn



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DISCUSSION

Participants specialised in Paediatrics and Neonatal nursing had a more positive attitude and understanding towards NR

Family presence during NR had negative influence on nurses and midwives who had worked less than three (3) years

Participants preferred learning NR skills from senior colleagues, ward in-charges, and clinicians employing outdated/archaic techniques rather than using those that have been scientifically proven such as the Helping Babies Breathe (HBB) protocol.

Other factors such as provision of equipment, regular training and monitoring of staff were identified as areas that promoted effective NR practices among nurses and midwives

CONCLUSION

The more experienced nurses and midwives were more comfortable with performing NR

Good knowledge, work experience, and professionalism influenced NR practices among nurses and midwives

Over-reliance on old methods impeded the performance of NR

The behaviours, actions, and support of ward sisters, doctors, and some family members who acted as people of referents, had a great influence on the performance of NR.

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