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### **Review Article**

# A descriptive study to assess the knowledge regarding integrated management of neonatal and childhood illness among staff nurses in selected hospital Ludhiana, Punjab

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#### ABSTRACT

Children are our future and our most precious resources. Today's children are the citizen's of tomorrow's world. Healthy children are not only assets but also the stepping stone to build a strong and prosperous nation. Their survival and protection is prerequisite for the future development of humanity. Every child represents the unit of human capital. Child has the potential to grow into a productive adult and contribute to the economic and social development of the country. A Descriptive study to assess the knowledge Regarding integrated Management of Neonatal And Childhood illness among staff nurses in selected hospital Ludhiana, Punjab was undertaken with objectives (1) To assess the knowledge regarding Integrated management of neonatal and childhood illness among staff nurses (2). To identify the relationship between knowledge regarding Integrated management of neonatal and childhood illness among staff nurses with selected variables Age, Gender, Religion, Type of qualification, Professional experience, Area of working, Area of residence, Monthly income, In-service Training, Professional training institute(3). To find out area of deficit knowledge and prepare information booklet regarding Integrated Management of Neonatal and Childhood Illnesses for Staff Nurses. The conceptual framework for the present study was based on Fishbone diagram' given by Kaovu Ishiqava.

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### 1. Introduction

Globally 10 million children including 4 million neonate die each year worldwide. <sup>1</sup> Reduction in child and neonatal mortality are major public and global health challenges. The fourth Millennium Development goal represents commitment to reduce mortality in children younger than 5 years by two-third between 1990 and 2015. <sup>2</sup> Input of efforts between 1960 and 2000, resulted in reduction in child mortality (from months 2 to age 5 years), unfortunately the neonatal mortality rate could not be reduced desirably. <sup>3</sup> To meet the goals, a substantial reduction in child mortality especially neonate mortality 38% of all deaths in children less than 50 in high mortality countries is needed. <sup>4</sup> Major reduction in children under 5 is achieved by

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providing special nursing care to neonate.<sup>5</sup> An integrated approach is needed to manage sick children to achieve better outcomes. Child health programmes need to move beyond tackling single diseases in order to address the overall health and well being of the child. Because many children present with overlapping signs and symptoms of diseases, a single diagnosis can be difficult and may not be feasible or appropriate.<sup>6</sup> Integrated Management of Neonatal and Childhood Illness (2007) is considered as the center piece of newborn and child health strategy. Due to which more physicians and health workers are being trained in Integrated Management of Neonatal and Childhood Illness where young infants and sick children are being referred to first referral facilities. Medical officers and Staff Nurses working in these facilities would be responsible for providing optimum care for referred sick

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infants and children. Therefore IMNCI is the central pillar of child health interventions under the RCH II<sup>nd</sup> April, 2005strategy.<sup>7</sup>

### 2. Objectives of the study

To assess the knowledge regarding Integrated management of neonatal and childhood illness among Staff Nurses

- 1. To identify the relationship between knowledge regarding Integrated management of neonatal and childhood illness among Staff Nurses with selected variables, Age, Gender, Religion, Type of qualification, Professional experience, Area of working, Area of residence, Monthly income, In-service Training, Professional training institute.
- 2. To find out area of deficit knowledge and prepare information booklet regarding Integrated Management of Neonatal and Childhood Illness for staff nurses.

### 3. Materials and Methods

### 3.1. Research approach

Quantitative approach

### 3.2. Research design

Non-experimental descriptive research design

### 3.3. Research Setting

The present study was conducted in all the wards (general ward, pediatric ward, OPDs, gyane ward in Oswal Hospital, Ludhiana, Punjab.

### 3.4. Population

Sample for this study were recruited from each ward of Oswal Hospital, Ludhiana

### 3.5. Inclusion criteria

- 1. Staff nurse working in hospital
- 2. Staff nurses who were willing to participate.
- 3. Both male and female staff nurses were chosen for study sample.

### 3.6. Sample size and sampling Technique

100 Staff nurses were selected using non probability purposive sampling technique

### 3.7. Development of Tools

The tools consisted of the following parts:

Part A: Socio-Demographic data Part B: Structured questionnaire

### 3.8. Data collection procedure

Data was collected through structured questionnaire. Personal one to one questionnaire was filled by each staff nurse of Oswal Hospital, Ludhiana

### 3.9. Plan for data analysis



## Levels of Knowledge

Fig. 1: Depicting Percentage of staff nurses according to Levels of knowledge

### 4. Results

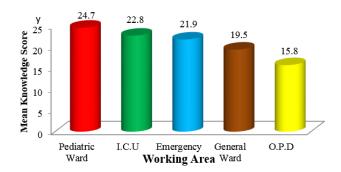
Majority of staff nurses were in age group of 21-25 years, maximum were female, belongs to Sikh religion. Most of the staff nurses were General Nurse Midwife with professional experience of >4years.Majority of staff nurses were working in Intensive Care Unit and belongs to urban area and earning of staff nurses was ≥15000 undergone Inservice training and most of staff nurses persuaded there training from private institution without parent hospital.



Fig. 2:

Above figure highlights that staff nurses who had professional experience of >1 years got maximum mean score of knowledge. Hence it can be concluded that Professional Experience had influence on the knowledge of

staff nurses regarding Integrated Management of Neonatal and Childhood Illnesses



**Fig. 3:** 

Above figure-3 predicts in Pediatric ward maximum mean score of knowledge i.e. 24.7 Hence, it can be concluded that working Area had influence on the knowledge of staff nurses Regarding Integrated Management of Neonatal and Childhood Illnesses.



Fig. 4:

Above Figure 4 reveals that staff nurses who had professional training from private with parent hospital had maximum mean score of knowledge i.e. 24.0.

Hence, it can be concluded that staff nurses who had professional training from private institution with parent hospital had maximum knowledge score therefore professional training institute had influence on the knowledge of staff nurses regarding Integrated Management of Neonatal and Childhood Illnesses

### 5. Discussion

According to the first objectives of the study i.e. to assess the knowledge among staff nurses regarding integrated management of neonatal and childhood illness. It was assessed with the help of structured questionnaire. The findings of the present study reveals that 15% staff nurses had excellent knowledge with mean score of 36.4 and majority of staff nurses i.e. 49% had good knowledge score with mean score of 27.1 followed by 30% staff nurses had average knowledge with mean score of 22.6, and 6% nurses had below average knowledge with mean score of 14.5.

Joshi P, Vatsa M (2014) the above findings are consisted with the study conducted a cross-sectional survey of nursing personnel's knowledge, attitude and their consultations with sick children under 5 years of age. The findings shows that Majority of nursing personnel had good knowledge 94(51.4%) and excellent attitude 98 (53.55%) scores related to IMNCI programme. Nursing personnel performed best in assessing sick children (2 months-5 years) in areas of fever (89.7%), cough (89.2%), and identifying treatment (89.1%). Their performance in identifying classifications related to diarrhea (74.1%), malnutrition (67.2%), anemia (77.3%), immunization (78.9%) and feeding problem (75.9%) was relatively less. Similarly, in assessing young infants (0-2) performance of nursing personnel was best in the areas of possible serious bacterial infection (PSBI) (88.1%), and identifying the treatment (86.7 %) and low in dehydration (70.8%), feeding problem (50.5%), feeding assessment (50.6%), and immunization (70%). <sup>1</sup>

Furthermore the present study is supported by Stevens and Shi (2002) reviewed that staff nurses of government hospital had average knowledge as compared to nongovernmental institution staff nurses had good knowledge regarding IMNCI .Major findings concluded that 57% of staff nurses who are qualified from private collages had good knowledge regarding IMNCI can be concluded that staff nurses who had professional training from private institution with parent hospital had maximum knowledge score. 8

### 6. Conclusion

Age, Gender, Religion, Type of qualification, Professional experience, Area of working, Area of residence, Monthly income, In-service Training, Professional training institute had no influence on integrated management of neonatal and childhood illness.

 Professional experience, Area of working, Professional training institute had influence on integrated management of neonatal and childhood illness.

### 7. Recommendations

- 1. The study needs to be replicated on large sample to validate and generalize the findings.
- Comparative study can be done to assess the knowledge of integrated management of neonatal and childhood illnesses among health care providers i.e

Doctors and nurses

3. A quasi-experimental study can be conducted to assess knowledge of integrated management of neonatal and childhood illnesses among health staff nurses

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### 9. Conflict of Interest

The authors declare they have no conflict of interest.

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