

# Knowledge and Attitude Regarding 'Perinatal Bereavement Care' among Nurses Working in the Maternity Unit and Neonatal Intensive Care Unit

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## Abstract

Perinatal bereavement is a unique mourning situation, as the parent's expectation and joy at the prospect of a new life change into a despair and grief. IUFD may represent a significant loss of the mother's perception of her body's functional adequacy associated with body image and feelings of self-worth.

### Objectives:

1. To assess the knowledge and identify attitude regarding perinatal bereavement care among nurses.
2. To find the correlation between knowledge and attitude among the nurses regarding perinatal bereavement care.

**Methods:** The research approach for the study was descriptive survey. The sample size considered for the study was 30 registered nurses working in maternity and NICU. The sampling technique used for the study was purposive. The tool used for gathering relevant data was a structured knowledge questionnaire.

**Results:** The results revealed that majority of the nurses 23(76.6%) belonged to a age group of 21-23 years.

Majority 17(56.6%) of the nurses had experience of less than one year in maternity unit and NICU.

Maximum nurses 25(83.3%) had no previous experience in managing perinatal bereavement.

None of the nurses 30(100%) had attended any in service education. Majority 15(50%) of nurses had poor knowledge about the concept of perinatal bereavement. Maximum 13(43%) of the nurses had average knowledge of perinatal bereavement care, while minimum 5 (16.6%) had fair knowledge of the specified area. Half 15(50%) of the nurses possessed a positive attitude towards perinatal bereavement care. There is no correlation between knowledge and attitude of nurses with regards to perinatal bereavement care.

**Conclusion:** In order to facilitate a normal grieving process among bereaved families, the nurse should be equipped with adequate knowledge, a positive attitude and skill in rendering such care.

**Keywords:** Perinatal bereavement, intrauterine fetal demise-Edinbergh separation scale.

## INTRODUCTION

The study of grief and loss has a more than fourty years history in family research, but there is a smaller body of studies concerning perinatal loss. Theoretical models of grief have changed over the past two decades with the traditional models of grief have changed over the past two decades with the traditional model focusing on "Letting go" and the contemporary model placing emphasis on "Holding on" to the emotional relationship with the child that has been lost. The major focus in the literature has been on maternal perspectives of perinatal loss and very minimal studies have explored the field of nurses perspectives of perinatal loss.<sup>1</sup>

World wide, 9-15% of total pregnancies land up in abortion (40-60 million per year). In India, it is estimated that about 6 million abortions take place every, of which 2 million are spontaneous and 4 million are induced.<sup>2</sup> Of the induced, nearly 5-6 lakhs are legal and the rest rate illegal. Still birth rate in India is 9/1000 live births while perinatal mortality is 33/1000 live birth. Neonatal mortality rate in Karnataka is 6% in urban and 48.3% in rural areas.<sup>3</sup>

On considering the dimensions of this event of perinatal loss from the health professionals point of view, where is the happiest place in the hospital? Ask nurses and they'll probably tell you it's the maternity unit! It's a great place to work when a nurse gets to care for proud parents and their smiling healthy

newborn.<sup>4</sup> But what is it like when the outcome is less than happy? In moments like these, nurses often find themselves at a loss, uneasy in large part because they may lack knowledge and skills when caring for grieving families.<sup>5</sup> Sadly, this aspect of care is so necessary and yet often missing in the unit-specific nursing orientation.

**DESIGN**

Descriptive survey design.

**METHODS**

The present study was done on 30 registered nurses working in maternity and neonatal intensive care unit (NICU). The study was conducted in KLES Dr. Prabhakar Kore Hospital and MRC, Belgaum, Karnataka.

**TOOL DESCRIPTION**

A structured knowledge questionnaire consisting of 26 items on concept of perinatal bereavement and perinatal bereavement care. Each correct answer were scored '1' and incorrect answer is scored '0' and Likert type, 5 point attitude scale having 5 options (that is strongly agree, uncertain, disagree, strongly disagree) was used to assess attitude towards perinatal bereavement. The minimum score is 20 while the maximum score is 100 the scale consists of 10 positive statements and 10 negative statements. Reverse scoring pattern is applied for the negative statements.

**ANALYSIS**

It was done using descriptive and inferential analysis.

**RESULTS**

The data on sample characteristics revealed according to Table 1.

The data presented in Table 1 indicates that majority of the nurses 23(76.6%) belonged to a age group of 21-23 years while minimum 1(3.3%) belong to age group of 27-29 years. Majority 17 (56.6%) of the nurses had experience of less than one year maternity unit and neonatal intensive care unit, 7(23.3%) had more than one year but less than 2 years of experience while only 6(20%) had more than 2 years of experience in the above mentioned units. Maximum of 25(83.3%) nurses had no previous experience in managing perinatal bereavement while minimum 5(16.6%) had managed perinatal bereavement. None 30(100%) of the nurses had attended any inservice education program on perinatal bereavement care.

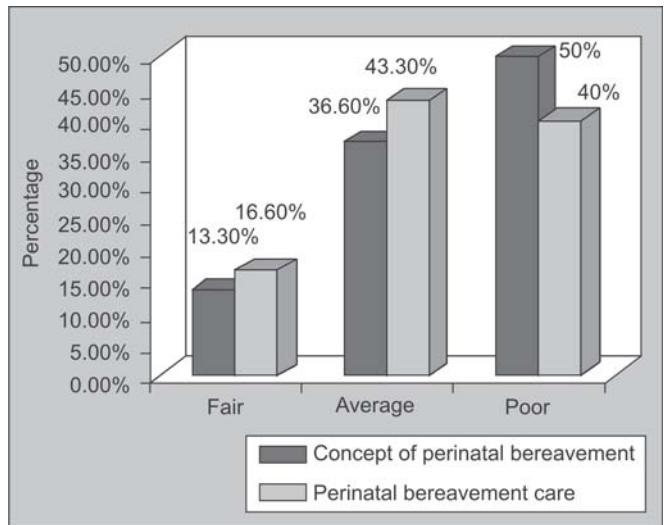
*The data on knowledge scores on perinatal bereavement care revealed according to Graph 1.*

Data in Graph 1 shows that majority of the nurses 15(50%) had poor knowledge about the concept of perinatal bereavement, 11(36.6%) had average knowledge while minimum 4(13.3%) had fair knowledge in the specified area. Maximum

**Table 1:** Frequency and percentage distribution of nurses working in maternity unit and NICU according sample characteristics:

n=30

S. No.	Variables	Frequency (f)	Percentage (%)
1	Age in years		
	21-23	23	76.6
	24-26	3	10.0
	27-29	1	3.3
2	Experience in maternity/ NICU unit		
	1month-1 year	17	56.6
	1-2 years	7	23.3
	2-3 years	3	10.0
	3-4 years	3	10.0
3	Previous experience in bereavement management		
	Yes	5	16.6
4	Attended in-service education program on perinatal bereavement management		
	No	25	83.3
	Yes	0	0
	No	30	100



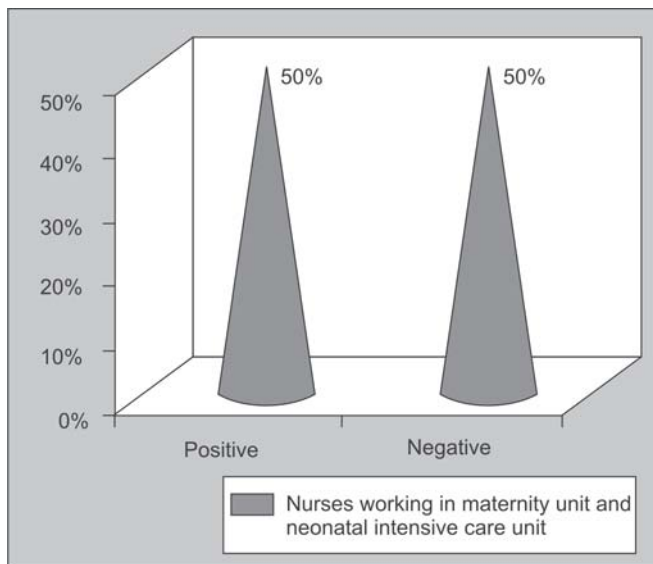
**Graph 1:** Knowledge scores on perinatal bereavement care

13(43.3%) nurses had average knowledge perinatal bereavement care, 12(40%) had poor knowledge while minimum 5(16.6%) fair knowledge about perinatal bereavement care.

*Data on attitude towards perinatal bereavement care revealed according to Graph 2.*

Data in Graph 2 reveals that 15(50%) of the nurses working in the maternity unit and NICU had positive attitude towards perinatal bereavement care while 15(50%) possessed a negative attitude.

*Correlation between knowledge and attitude regarding perinatal bereavement care revealed that the value of 'r' using*



**Graph 2:** Attitude towards perinatal bereavement care

Karl Pearson's coefficient of correlation was computed for the two variables viz: Knowledge and Attitude and the resultant value was  $r = 0.143$ .

It was therefore inferred that, the value of 'r' is considerably small and hence there exists no significant correlation between knowledge and attitude of the nurses ( $n = 30$ ) working in maternity unit and NICU regarding 'Perinatal bereavement care'.

## DISCUSSION

This study was conducted to assess the knowledge and identify the attitude of nurses working in maternity unit and NICU with regards to "Perinatal bereavement care". To achieve the set objectives a total of 30 subjects were studied. The findings of the study are discussed under following headings:

### SAMPLE CHARACTERISTICS

In the present study majority of the nurses 23(76.6%) belonged to a age group of 21-23 years similar findings were noted in a study conducted in Hongkong on attitude of midwives towards perinatal bereavement where 63(40.9%) midwives were younger. In contradiction to this finding, Engler AJ et al in their study had registered nurses whose mean age was 41 years.

Majority 17 (56.6%) of the nurses had experienced of less than one year in maternity unit and NICU. Similar findings were seen by Chan MF in his study where in 63 (40.9%) nurses had less obstetric and gynecology experience. Engler AJ et al in this study on neonatal staff and advanced practice nurses perception of bereavement care had subjects who had mean of 12.7 years of experience.

A maximum of 25 (83.3%) nurses had no previous experience in managing perinatal bereavement. Contradictory findings were noted in the study conducted by Chan MF. Where 91(59.1%) nurses had experience in caring for grieving parents.

None 30(100%) of the nurses had attended any inservice program on perinatal bereavement care. By contrast, in the study conducted by Chan MF. 39.3% ( $n = 130$ ) nurses had bereavement related training.

*Knowledge regarding perinatal bereavement care among nurses working in maternity unit and NICU.*

Majority of the nurses 15(50%) had poor knowledge about the concept of perinatal bereavement, while 13(43.3%) had average knowledge about perinatal bereavement care. In the study conducted in Hong Kong by Chan MF. 89.9% nurses showed they needed to be equipped with relevant knowledge in the care and support of bereaved parents. These findings clearly indicate the need to make training on 'Perinatal grief support and care' a mandatory component of nursing orientation, especially, in the maternity units and NICU.

*Attitude towards perinatal bereavement care among nurses working in maternity unit and NICU.*

Half the nurses 15(50%) possessed a positive attitude while other half 15(50%) possessed a negative attitude towards perinatal bereavement care. A contradictory finding in the study conducted by Chan MF revealed that majority of the nurses held positive bereavement care attitudes.

*Correlation between knowledge and attitude regarding perinatal bereavement care among nurses working in maternity unit and NICU.*

The findings using *Karl Pearson's coefficient of correlation* showed that there existed no correlation between the two variables of study. In contradiction to the above findings, Chan MF in this study, discovered existence of a positive correlation between attitudes towards bereavement care and educational need.

## SUMMARY

In summary major findings are as follows:

23 (76.6%) nurses belonged to a age group of 21-23 years. 17(56.6%) of the nurses had experience of less than one year in Maternity unit and NICU. Maximum nurses 25(83.3%) had no previous experience in managing perinatal bereavement. 30(100%) nurses had not attended any inservice education on Perinatal bereavement Care. 15(50%) of nurses had poor knowledge about the concept of perinatal bereavement. 15(50%) of the nurses possessed a positive attitude towards perinatal bereavement care. There was no correlation between knowledge and attitude of nurses with regards to perinatal bereavement care ( $r = 0.143$ ).

## CONCLUSION

In order to facilitate a normal grieving process among bereaved families, the nurse should be equipped with adequate knowledge, a positive attitude and skill in rendering such care.

Based on the findings of this study, it is evident that the nurses working in the maternity unit and NICU of the selected hospital need to be provided with in-service education in the field of perinatal loss and bereavement care to equip them to practice compassionate, comprehensive and considerate care

in the unit. This requires prompt attention and cooperation of Hospital and Nurse administrators in order to develop 'Perinatal bereavement care and counseling training' and introduce it as a component of Introductory and advanced continuing education programs for the nurses working in the maternity unit and the NICU.

Both individual and organizational change needs to be integrated to introduce and provide consistently excellent bereavement care for the individuals and families.

## RECOMMENDATIONS

A similar study can be carried out on a large scale in the different maternity units and neonatal intensive care units in view of planning a concrete training program in management of perinatal bereavement and counseling skills' for these professionals.

Further study can be undertaken, on a large scale, to identify the expectations and perceptions of bereaved parents to build appropriate, need-based evidence to motivate tertiary care hospitals and maternity hospitals to start 'Bereavement Cell' which presently is a neglected area in the Health Care facility in India.

More and better research can be carried out in the different areas requiring palliative, end-of-life or bereavement care to increase our understanding of clinical, cultural, organizational and other practices or perspectives that can improve such care.

## ACKNOWLEDGMENTS

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