A Study To Assess Knowledge Regarding Water Birth Among Staff Nurses


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ABSTRACT: Background: Water birth is the process of giving birth in a tub of warm water. The theory behind water birth is that the baby has been in the amniotic sac for 9 months and birthing into a similar environment is gentler for the baby and less stressful for the mother. Method: A non-experimental approach was considered the best to determine the level of the tool, pilot study, data collection and plan for analysis. A descriptive approach and convenience sampling was used to select the samples the data was collected from 100 staff nurses by using self structured administrative questionnaires. Result: The levels of knowledge were seen into 5 categories, poor, average, good, very good and excellent. 32% of health care workers had average level of knowledge score and each 34% of them had good and very good level of knowledge score. Conclusion: Water birth is safe and provides benefits to mother and infant including pain relief and less traumatic birth experiences for the baby.

Key Words: Knowledge, Water birth, staff nurses.

INTRODUCTION
Water birth may have been practiced for centuries around the world. There are reports that Japanese women had labored in the sea and have given birth in saunas. The French obstetricians Frederick and Oden used water immersion during birth in the late 1960s, the practice became popular in 1980s and it has been extensively documented and studied since that time.

In India it is currently practiced in Delhi, Mumbai, Goa, Kochi, Hyderabad. Tulip women’s health care center has the privilege of delivering the first water baby in India. The first water baby, Nishant Prabhudesai was born in October 2003. It is also been practiced in Kerala and Janvi is first water baby, born on January 8th 2010.

OBJECTIVES
1. To assess the knowledge regarding water birth among staff nurses.
2. To find out the association between the level of knowledge regarding water birth and selected socio-demographic variables among staff nurses.

HYPOTHESIS
H1: There is significant association between the knowledge score regarding water birth with selected demographic variables among staff nurses.

ASSUMPTIONS
Staff nurses have some knowledge regarding water birth.

MATERIAL AND METHODS
This study is based on non-experimental approaches with Descriptive research design. The population was staff nurses. In this study, 100 staff nurses are included.

Inclusion criteria:
1. Staff nurses who are working in maternity department.
2. Staff nurses who are willing to participate.
3. Staff nurses who are present at the time of data collection.

Exclusion criteria:
1. Auxiliary Nurse Midwives
TOOLS FOR DATA COLLECTION
Section A: Demographic variables are age, religion, marital status, professional qualification, place of nursing training, and total years of experience in nursing, years of experience in OBG department, experience in abroad, any previous information regarding water birth.
Section B: Structured questionnaire regarding water birth

PLAN FOR DATA ANALYSIS:
The data analysis was planned on the basis of objectives of the study. The data obtained is analyzed by using descriptive and inferential statistics. The plan of data analysis was follows
Section A: Socio Demographic data was analyzed by using frequency and percentage.
Section B: The assessment of the questionnaire on knowledge among staff nurses will be analyzed in terms of frequency, percentage, mean and standard deviation.
Section C: Chi-square test will be used to analyze the association between the level of knowledge and socio demographic variables.

RESULT
SECTION A
This section deals with percentage wise distribution of staff nurses from selected hospitals of the Wardha district regarding water birth.
Percentage wise distribution of staff nurses according to their demographic characteristics.
• Distribution of staff nurses according to age in years 45% of the staff nurses were in the age group of 21-30 years, 32% in the age group of 31-40 years, 20% in the age group of 41-50 years and only 3% of the staff nurses were more than 50 years respectively.
• Distribution of staff nurses according to marital status. 11% of the staff nurses were single, 88% were married and only 1% were separated.
• Distribution of staff nurses according to their religion 59% of staff nurses hindus, 1% were Christian, 5% were muslim and 35% were belonging to other religion.
• Distribution of staff nurses according to educational qualification. 70% of the staff nurses were educated upto GNM, 22% were upto BSC Nursing and 8% of them were educated upto Post Basic B.Sc. Nursing and none were post graduates.
• Distribution of staff nurses according to years of experience in nursing. 65% of the staff nurses had years of experience up to 5 years and 35% had years of experience between 5-10 year.

SECTION B
ASSESSMENT OF KNOWLEDGE REGARDING WATER BIRTH AMONG STAFF NURSE.
Distribution of staff nurses with regards to level of knowledge regarding water birth
The levels of knowledge were seen into 5 categories, poor, average, good, very good and excellent. 32% of health care workers had average level of knowledge score and each 34% of them had good and very good level of knowledge score. Mean knowledge score of the health care workers was 17.08 ± 5.71 and mean percentage score was 50.23±16.81.

SECTION C
ASSOCIATION OF KNOWLEDGE ON WATER BIRTH AMONG STAFF NURSES WITH SELECTED DEMOGRAPHIC VARIABLES
Association of knowledge score regarding water birth in relation to age in years
The tabulated 'F' values was 2.68(df=3,96) which is much higher than the calculated 'F' i.e. 1.58 at 5% level of significance. Also the calculated 'p'=0.19 which was much higher than the acceptable level of significance i.e. 'p'=0.05. Hence it is interpreted that age in years of staff nurses is statistically not associated with their knowledge score.
Association of knowledge score regarding water birth in relation to marital status
The tabulated 'F' values was 3.07(df=2,97) which is much higher than the calculated 'F' i.e. 2.01 at 5% level of significance. Also the calculated 'p'=0.13 which was much higher than the acceptable level of significance i.e. 'p'=0.05. Hence it is interpreted that marital status of staff nurses is statistically not associated with their knowledge score.
Association of knowledge score regarding water birth in relation to their religion
The tabulated 'F' values was 2.68(df=3,96) which is much higher than the calculated 'F' i.e. 0.73 at 5% level of significance. Also the calculated 'p'=0.53 which was much higher than the acceptable level of significance i.e.
Association of knowledge score regarding water birth in relation to their educational level

The tabulated ‘F’ values was 3.07(df=2,97) which is much higher than the calculated ‘F’ i.e. 0.80 at 5% level of significance. Also the calculated ‘p’=0.44 which was much higher than the acceptable level of significance i.e. ‘p’=0.05. Hence it is interpreted that educational level of staff nurses is statistically not associated with their knowledge score.

Association of knowledge score regarding water birth in relation to years of experience in nursing.

The tabulated ‘t’ values was 1.98(df=98) which is much higher than the calculated ‘t’ i.e. 0.32 at 5% level of significance. Also the calculated ‘p’=0.74 which was much higher than the acceptable level of significance i.e. ‘p’=0.05. Hence it is interpreted that years of experience in nursing of staff nurses is statistically not associated with their knowledge score.

DISCUSSION

The present study is an effort to find out the knowledge among staff nurses regarding water birth. In order to achieve the objectives, a descriptive approach was adopted and convenience sampling technique was used to select the samples. This study was conducted over a period of one week from January 7th to January 13th, 2019. The data was collected from 100 staff nurses by using structured self-administered questionnaires.

The findings of the study have been discussed based on the objectives and with the supportive study.

1. The first objective is to assess the level of knowledge regarding water birth among staff nurses.

The levels of knowledge were seen into 5 categories, poor, average, good, very good and excellent. 32% of health care workers had average level of knowledge score and each 34% of them had good and very good level of knowledge score. Mean knowledge score of the health care workers was 17.08 ± 5.71 and mean percentage score was 50.23±16.81. A similar study was conducted in USA to assess the knowledge of staff nurses regarding knowledge about alternate birthing methods among 200 nurses working in OBG department. The findings revealed that 28% were having adequate knowledge, 30% of staff nurses were having moderate knowledge and 42% of staff nurses have adequate knowledge.

2. The second objective is to find out the association between the level of knowledge regarding water birth and selected socio demographic variable:

The association between the level of knowledge and selected socio demographic variables was done using chi-square formula. All the selected variables were not statistically significant with knowledge scores. The demographic variables such as age, years of experience in nursing, years of experience in OBG department and previous information received regarding water birth were found to be significant. Textual narratives published on the internet influenced mother's knowledge and will continue to influence knowledge the personal childbirth decisions of pregnant women who use the internet as an educational tool. The participants in this research demonstrated the authoritative value they put into the voices of other mothers.

IMPLICATIONS TO NURSING

NURSING PRACTICE: Nurses are the key resource person to give health education, nurse can introduce innovative strategies newly married couples, pre-pregnant women, pregnant mothers and also other people by addressing there wards of delivering baby under water.

NURSING EDUCATION: Adequate supervision and guidance of experienced teachers and staff nurses are necessary for the improvement of student nurses. Formal and informal teaching should be made available for nurses so that they can provide standardized nursing care to patients.

NURSING ADMINISTRATION: Client’s education services are an integral part of nursing care. The nursing administrator should see that the aspect of health promotion is included while providing care. Nurse administrators can plan for in-service and continuing nursing education regarding water birth.

NURSING RESEARCH: Nurse researchers can also take required measures to implement findings of the present study to develop health teaching programs and family teaching programs. By pursuing research, the nurse could contribute towards enriching the knowledge about the efficiency of nursing intervention in relieving their difficulties.
RECOMMENDATION

1. Similar study can be conducted by administering a self-instructional module among staff nurses.
2. A similar study can be conducted on large population to generalize the findings.
3. A similar study can be conducted on assessment of knowledge and attitude and practice regarding water birth among staff nurses.
4. Similar study can be conducted in a different population.

CONCLUSION

In the present study a sample of 100 staff nurses were selected. A descriptive research design was adopted for the study with a view to measure the staff nurse knowledge regarding water birth. The data was collected and analyzed statistically based on the objectives of the study.

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