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Sustainable Development Goals: The Relevance of Nurses' Professional Development for the Well-being of Newborns in Rwanda



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BACKGROUND

- The sustainable development goals (SDGs) aim at the well-being of all people in all countries
- Nearly 99% of global neonatal deaths (Berkley, Dybul, Godal, & Lake, 2014) occur in developing countries
- In most developing countries, midwives and/or nurses are the only available health care providers to help mothers during childbirth (WHO, 2004)
- Neonatal asphyxia is the 3rd leading cause for neonatal deaths in Rwanda
- Inadequate care received by babies during the perinatal period contributes to a great portion of neonatal deaths
- The maternal, newborn, and child health (MNCH) in Rwanda project was led by a team at Western University and funded by the Canadian International Development Agency
- By the request of the Rwandan Ministry of Health, the MNCH in Rwanda project coordinated the provision of Helping Babies Breathe (HBB[©]) courses to nurses, midwives, and physicians between 2011 and 2013
- The HBB[©] course is a neonatal resuscitation course developed by the American Academy of Pediatrics in 2010 specifically for resource-limited settings
- This study focused on the 3rd SDG: good health and well-being for all
- The targets for this goal include a reduction of neonatal mortality rate to 12 per 1,000 live births in all countries by 2030

PURPOSE and QUESTIONS

- To explore nurses' experiences of translating the competencies gained from HBB[©] courses into nursing practice in selected Rwanda hospitals.
- How do nurses apply knowledge and skills gained from HBB[©] courses into practice?
- What are the contextual factors that influence the ability of nurses to translate knowledge and skills into practice after involvement in an HBB[©] course in Rwanda?

METHODS

- Study design: descriptive qualitative (Sandelowski, 2000)
- Sample and sampling strategy: convenience sample of 10 nurses
- Data collection: semi-structured individual interviews
- Data analysis: inductive content analysis for generation of categories and the use of NVIVO for data management
- Ethical considerations: ethical approvals obtained from Western University's Research Ethics Board and the Rwanda National Ethics Committee

RESULTS

Three categories emerged from the data:

- 1) application of competencies acquired from education sessions to practice
- 2) benefits of continuing professional development
- 3) facilitators and barriers to the application of competencies into practice

Application of competencies acquired from education sessions to practice

Enhanced ability to integrate theoretical knowledge with psychomotor skills related to newborn resuscitation

Importance of the first minute after birth in the life of the newborn

"I realized that the first minute is crucial, the same minute I used to spend looking for materials, while I should have gathered materials before and being ready to help the baby instead of helping him/her after two or three minutes after birth when the problem is worse"

Benefits of continuing professional development

Improved confidence and autonomy in decision making pertaining to neonatal resuscitation

"...before the course, I used to think that I had to wait for the physician's instructions. If the physician would not be around, I would panic calling for him to come and give me instructions. But the course increased my confidence in taking decisions whether the physician is around or not, and provide the required care to the baby"

Feelings of professional satisfaction

"I feel very proud and happy that we are saving more babies because of the knowledge and skills we gained from the course [HBB© course]"

Facilitators and barriers to the application of competencies into practice

Facilitators

"...my team was very cooperative and they were willing to listen to what I told them about helping the baby to breathe and to change their practice. We all considered the baby as ours. We worked together as a team".

Barriers

"...for example, you can prepare the equipment for a newborn and it happens that you have more than one birth at the same time and you miss the necessary equipment for each of the babies because you have to share the available materials between the two".

"it is recommended that two or more nurses provide care during resuscitation. However, the shortage of staff cannot allow this to happen".

IMPLICATIONS

To assist in achieving the targets of the 3rd SDG as they relate to the well-being of newborns:

- The Rwanda National Council of Nurses and Midwives, in collaboration with the Ministry of Health, and the Schools of Nursing could initiate ongoing CPD programs designed to update nurses in the area of neonatal care
- Structural barriers to the full application of knowledge and skills nurses gain from CPD courses need to be addressed
- Need to address the issue of insufficient basic equipment and materials for newborn resuscitation, and of nurses' shortage
- Nurse managers, in collaboration with hospital administrators, could examine human resource deployment strategies that fully utilize nurses' expertise
- Future studies to investigate the long-term impact of HBB[©] courses on neonatal mortality rates in Rwanda
- Future studies to explore the ways to overcome structural barriers that prevent nurses from fully applying their acquired competencies

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