

ORIGINAL RESEARCH

Knowledge and attitude of maternity nurses regarding perinatal bereavement care

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Abstract

Background: Parents whose infants had died are in need for especial care and support, these needs are difficult and stressful. This study was aimed to evaluate knowledge and attitude of maternity nurses regarding perinatal bereavement care.

Method: A convenience sample including 50 maternity nurses were participated in the current study. Design: A descriptive study design was utilized to conduct the current study. Tools: Two tools were used for data collection, an interview schedule and attitude likerate scale.

Results: The current study findings revealed that, nurses had inadequate level of knowledge, positive and highly positive attitude regarding perinatal bereavement care were presented in (26%, & 64%) of nurses respectively. Nurses reside in rural areas, had personal grieving experiences and those had past experience in handling grieving parents had a highly positive attitude toward perinatal bereavement care.

Conclusion: This study finding showed that, bereavement counseling education and preceptorship supervision are recommended to reduce this stressful experience, increase the confidence and expertise of nurses, and lead to increased quality of care for bereaved parents.

Key Words: Perinatal bereavement care, Nurses' attitude, Nurses' knowledge

1 Introduction

Being a parent is an important developmental milestone that is in prospect by most males and females in our Egyptian society. Perinatal bereavement is the non-voluntary end of pregnancy from the beginning of conception, during pregnancy period, or up to 28 days of the newborn's life. Also, perinatal bereavement includes; spontaneous abortion, ectopic pregnancy, stillbirth, late-pregnancy loss, and newborn death.^[1] Bereavement is overwhelmingly been misunderstood, stigmatized and failed to receive adequate confession.^[2]

The partners' response to perinatal bereavement is individually differs, but is commonly very vehement. Men and women grieve differently, which can sometimes cause conflict between partners. Women usually tend to grieve more openly than men; also they may have physical changes. Grieving may continue to a few weeks, several months, or often longer than a year. The grief and distress experienced by parents has been documented across qualitative and quantitative studies.^[1,3-5]

Bereavement care is recommended to be immediately after perinatal bereavement because it can provide tremen-

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dous benefits, validating a woman's response to the loss and providing her a great opportunity to express her feelings.^[6] Perinatal death is still marginalized in medical researches and sophisticated investigations of parents' experiences has emphasized the importance of events and care provided at this sensitive time, and everyone involved had only once chance to get it right.^[7]

Grieving parents recognize the full worth to health care professionals when they conveying respect for their particular needs and avow to the significance of their loss, parents persist to report emotional, spiritual, or practical needs that unfulfilled in hospitals, in its turn, which leads to increases family distress during and after a newborn's death,^[2] they values are empathetic, humble, consistent, and honest communication during their crisis.^[5]

Maternity nurses must have a powerful influence on how parents experience and cope with perinatal bereavement.^[8] Many nurses grieve when patients stop living; however, nurses' grief is not often acknowledged or discussed. Also, little attention is given to make nurses get ready for this experience in nursing curriculum and in orientations to health care organizations.^[9] The purpose of this research was to evaluate knowledge, and attitude of maternity nurses regarding perinatal bereavement care.

1.1 Significance of the study

Maternity nurses are often relied on to care for bereaved parents and families affected by perinatal bereavement traumatic events, which are stressful for all involved,^[10] and are expected to interact with the bereaved in a supportive manner, regardless whether they feel adequately prepared or disposed to do.^[11] So, the present study is intended to assess knowledge and attitude of maternity nurse regarding perinatal bereavement care.

1.2 Aim of the study

The aim of the present study was to evaluate knowledge, and attitude of maternity nurses regarding perinatal bereavement care.

1.3 Research question

- What is the level of maternity nurses' knowledge regarding perinatal bereavement care?
- What is the attitude of maternity nurses regarding perinatal bereavement care?
- Is there is a relation between the studied nurses' personnel characteristics and their knowledge and attitude regarding perinatal bereavement?

2 Methodology

2.1 Design

A descriptive study design was utilized to conduct the current study.

2.2 Setting

The present study conducted at labor, antepartum, postpartum, and gynecologic units affiliated to obstetric and gynecologic department, Benha University Hospital.

2.3 Subjects

A convenience sample of a total fifty maternity nurses working in obstetric and gynecology medicine department at Benha University hospital that met the following inclusion criteria were recruited at the study.

2.4 Inclusion criteria

Nurse who had at least one year of experience at obstetric and gynecologic department was involved in the current study.

2.5 Tools of data collection

Two tools were utilized for data collection.

Tool 1: An interviewing schedule questionnaire: A questionnaire sheet was developed by the researcher after reviewing related literature, it was consisted of two parts, the first part was concerned with personnel characteristics data (*i.e.* age, education level, *etc.*), past experiences (*i.e.* personal grieving, handling grieving clients, and years of work in the obstetrics and gynecologic department), and training programs (*i.e.* bereavement care), while the second part deals with knowledge regarding bereavement care; it was consisted of (9) questions on concepts of perinatal bereavement and bereavement care. Each correct answer were scored (1), and incorrect were scored (0). Sum the score for each question, total score was calculated as 60.0% or more was considered adequate and less than 60.0% was inadequate.

Tool 2: A likert scale was utilized to evaluate maternity nurses attitude regarding perinatal bereavement care (modified version): It was adopted from Chan *et al.* (2004), and it was modified by the researcher to measure nurses' attitudes towards bereavement care using a Likert-type, 3 point scale ranging from "1 = disagree to 2 = uncertain, and 3 = agree". It was consisted of two parts; first part concerning with nurses attitude regarding importance of perinatal bereavement; it includes eight statements, while the second part measuring nurses attitude regarding factors affecting perinatal bereavement care; it also was included eight statements. Total attitude score was assigned as; highly positive attitude (> 75.0%), positive attitude (50.0% – 75.0%), and negative attitude (< 50.0%).

2.6 Field of work

Written approvals were obtained from Benha University Hospital and research committee at Benha University. The purpose of the study was explained to each participant, assured confidentiality and informed about their right to withdraw from the study at any time without giving any reason. A written consent was obtained from each participant. The researcher was explained the items of tool to each participant, and the questionnaire was filled in by the participants over a time of 30 minutes. Data was collected over a period from January, 2014 to March, 2014.

2.7 Validity and reliability

Tool validity test was done through five panels of expertise in the field of maternity and psychiatric nursing to test the content validity. Modification was carried out according to the panel judgment on clarity of sentences and appropriateness of content. The internal consistency of likert scale has been tested using Cronbach's alpha coefficient. Cronbach's alphas were (0.964, & 0.875) for attitude of nurses regarding importance of perinatal bereavement and factors affecting perinatal bereavement care respectively.

2.8 Pilot study

A pilot research was carried out on 10.0% of the total sample to check clarity and feasibility of tool and estimated the time needed for data collection. All nurses who participated at research pilot study were excluded from the research sample.

2.9 Ethical considerations

The purpose of the study was explained to each nurse and a written informed consent was obtained from 50 enrolled nurses after explaining the purpose of the study, assuring confidentiality and their right to withdraw from the study at any time without any reason.

2.10 Research strength

The responsible authorities and participants were cooperated with the researcher at the time of the present study.

2.11 Statistical analysis

Data entry and statistical analysis were performed using personal computer software, the statistical package for social sciences (SPSS), version 14. Suitable descriptive statistics were used such as; frequency, percentage, median, mean and standard deviation. Chi-square test was used to detect the relation between the variables. In addition, correlation coefficient (r) test was used to estimate the closeness association between variables. For all the tests, statistical significance was considered at p -value < .05.

3 Result

Table 1 illustrates general characteristics of participants, the table shows that, the age of nurses under study was ranged between (20-45 yrs) with a mean of (29.60 ± 6.80), the minority of them was highly educated (14.0%). The same table manifest that, all nurses had not received any educational programs about bereavement care.

Table 1: Frequency of the studied participants regarding their personnel characteristics

Variables	Frequency	%
Age in years		
20-	27	54.0
30-	17	34.0
40-45	6	12.0
Mean ± SD	29.60 ± 6.80	
Educational qualification		
Secondary nursing education	29	58.0
Technical nursing education	14	28.0
Bacculare of nursing education	7	14.0
Years of experience		
< 5 years	23	46.0
5-10	20	40.0
> 10 years	7	14.0
Mean ± SD	11.5 ± 7.3	
Marital status		
Single	7	14.0
Married	41	82.0
Widow	2	4.0
Residence		
Urban	41	82.0
Rural	9	18.0
Personal grieving experiences		
Yes	11	22.0
No	39	78.0
Taken training/courses related to bereavement care		
Yes	0	.0
No	50	100.0
Past experience in handling grieving parents		
Yes	17	34.0
No	33	66.0

Note. SD= standard deviation

Table 2 describes the level of nurses' knowledge about perinatal bereavement regarding; definition, factors that affect parents experience and cope with their loss, basics skills of bereavement counseling, essential steps to counseling bereaved parent and risks for complicate grief. The same table noticed that, the majority of nurses had inadequate knowledge about perinatal bereavement (82.0%).

Table 3 shows attitude of nurses regarding importance of perinatal bereavement as agree, uncertain or disagree. Approximately two thirds (72%, 74%) of them agreed that bereaved parent's feelings and needs should be respected, all those involved in the care of bereaved parents should be well-informed and , It is normal for women to experience sadness for six weeks following perinatal loss respectively.

Table 2: Distribution of the studied participant according to their knowledge level about perinatal bereavement (n = 50)

Item	Inadequate		Adequate	
	No	%	No	%
Meaning of bereavement care.	33	66.0	17	34.0
Factors that might have an impact on how different parents experience and cope with their loss	35	70.0	15	30.0
Basics skills of bereavement counseling.	29	58.0	21	42.0
Essential steps to counseling bereaved parent.	37	74.0	13	26.0
Risks for complicate grief	33	66.0	17	34.0
Effect of perinatal bereavement on the couple relationship	38	76.0	12	24.0
Psychological effect of perinatal bereavement on mothers.	35	70.0	15	30.0
Psychological effect of perinatal bereavement on fathers	42	84.0	8	16.0
Medical needs after perinatal bereavement	37	74.0	13	26.0
Total score	41	82.0	9	18.0

Table 3: Attitude of the studied participants regarding importance of perinatal bereavement (n = 50)

Item	Disagree		Uncertain		Agree	
	No	%	No	%	No	%
The grief caring program provides psychological support to the bereaved parents.	0	.0	26	52.0	24	48.0
Bereaved parent's feelings and needs should be respected	3	6.0	11	22.0	36	72.0
communication with parents in a clear, sensitive and honest manner	4	8.0	12	24.0	34	68.0
Bereaved parents should be given time to grieve.	7	14.0	12	24.0	31	62.0
All those involved in the care of bereaved parents should be well-informed.	1	2.0	12	24.0	37	74.0
Bereaved families require professional follow up in order to cope with the experience of perinatal loss.	1	2.0	15	30.0	34	68.0
It is normal for women to experience sadness for six weeks following perinatal loss.	0	.0	13	26.0	37	74.0
Grief felt after early pregnancy loss can be equal to grief felt with any other loss.	5	10.0	18	36.0	27	54.0

Table 4 shows attitude of nurses regarding factors affecting care of perinatal bereavement. The majority of nurses agreed to join a training program on bereavement care (90.0%). Approximately two thirds of them agreed that all maternity care staff should participate in bereavement care, share experiences with colleagues and working as a team

(74.0%), and 68.0% of them agreed that, the unit should have a clear policy for the management of bereavement. Moreover this table indicates that 10.0% of nurses had a negative attitude towards bereavement care, 26.0% of them had positive attitude, compared with 64.0% of them had a highly positive attitude.

Table 4: Attitude of the studied participants regarding factors affecting care of perinatal bereavement (n = 50)

Item	Disagree		Uncertain		Agree	
	No	%	No	%	No	%
The maternity care unit should have a clear policy for the management of perinatal bereavement	2	4.0	17	34.0	31	62.0
All maternity care staff should be well-informed about the policy	2	4.0	16	32.0	32	64.0
All maternity care staff involved should understand the policy.	6	12.0	15	30.0	29	58.0
All maternity care staff should join a training program on bereavement care.	3	6.0	2	4.0	45	90.0
All maternity care staff should participate in bereavement care	3	6.0	7	14.0	40	80.0
All maternity care staff should share experiences with colleagues and working as a team while caring bereaved parents.	1	2.0	11	22.0	38	76.0
All maternity care staff should seek support when experiencing 'burnout'	2	4.0	16	32.0	32	64.0
Proper training should provide for all staff Participate in bereavement care	1	2.0	13	26.0	36	72.0
Total attitude score	Negative No %		Positive No %		High positive No %	
	5 10		13 26		32 64	

Table 5 shows the relation between total knowledge score and nurses' personnel characteristics. It was observed that, there were a statistically significance relation between age, educational level and knowledge level whereas ($p < .05$).

Table 6 illustrates that, there were a highly statistically significance relation between residence, personal grieving experience, past experience in handling grieving parents and nurses' attitude toward perinatal bereavement ($p < .000$).

Table 5: Relation between total knowledge score and personnel characteristics among studied participants (n = 50)

Variables	Total knowledge score				χ^2	p
	Inadequate N = 41		Adequate N = 9			
	No	%	No	%		
Age in years						
20-	19	46.3	8	88.9	5.48	< .05*
30-	16	39.0	1	11.1		
40-45	6	14.6	0	.0		
Educational qualification					6.14	< .05*
Secondary nursing education	23	56.1	6	66.7		
Technical nursing education	14	34.1	0	0.0		
Bacculare of nursing education	4	9.8	3	33.3		
Years of experience					2.67	> .05
< 5 years	17	41.5	6	66.7		
5-10	17	41.5	3	33.3		
>10 years	7	17.1	0	0.0		
Marital status					0.993	> .05
Single	5	12.2	2	22.2		
Married	34	82.9	7	77.8		
Widow	2	4.9	0	.0		
Residence					1.74	> .05
Urban	35	85.4	6	66.7		
Rural	6	14.6	3	33.3		
Personal grieving experiences					0.822	> .05
No	33	80.5	6	66.7		
Yes	8	19.5	3	33.3		
Past experience in handling grieving parents					0.002	> .05
No	27	65.9	6	66.7		
Yes	14	34.1	3	33.3		

* statistical significant difference

Table 6: Relation between total attitude score and personnel characteristics among studied participants (n = 50)

Variables	Total attitude score						χ^2	p
	Negative N = 5		Positive N = 13		Highly positive N = 32			
	No	%	No	%	No	%		
Age in years								
20-	2	40.0	6	46.2	19	59.4	1.27	> .05
30-	2	40.0	5	38.5	10	31.3		
40-45	1	20.0	2	15.4	3	9.4		
Educational qualification							1.89	> .05
Secondary nursing education	2	40.0	9	69.2	18	56.3		
Technical nursing education	1	20.0	2	15.4	4	12.5		
Bacculare of nursing education	2	40.0	2	15.4	10	31.3		
Years of experience							1.89	> .05
< 5 years	1	20.0	7	53.8	15	46.9		
5-10	3	60.0	4	30.8	13	40.6		
> 10 years	1	20.0	2	15.4	4	12.5		
Marital status							1.91	> .05
Single	1	20.0	1	7.7	5	15.6		
Married	4	80.0	12	92.3	25	78.1		
Widow	0	.0	0	.0	2	6.3		
Residence							6.17	< .05*
Urban	5	100.0	13	100.0	23	71.9		
Rural	0	.0	0	.0	9	28.1		
Personal grieving experiences							7.93	< .05*
Yes	0	.0	0	.0	11	34.4		
No	5	100.0	13	100.0	21	65.6		
Past experience in handling grieving parents							14.48	< .001**
Yes	0	.0	0	.0	17	53.1		
No	5	100.0	13	100.0	15	46.9		

* statistical significant difference; ** highly statistical significant difference

Table 7 indicates that there was a highly statistical significant correlation between maternity nurses' knowledge and attitude regarding perinatal bereavement.

Table 7: Correlation between knowledge and attitude of studied participants

Attitude	r	p
Knowledge	.680	.000**

** Correlation is significant at the 0.01 level (2-tailed).

4 Discussion

The aim of present study was to evaluate knowledge and attitude of maternity nurses regarding perinatal bereavement care. This aim was highly significantly achieved through the present study findings. The current study findings were observed that, 82.0% of nurses had inadequate knowledge about perinatal bereavement care. These findings are in the same line with the study conducted by Raddi, Samson, and Kharde^[12] to assess knowledge and attitude of nurses regarding bereavement; they were noted that 40.0% of nurses had poor knowledge.

In the current study lack of educational programs about bereavement care leads to poor knowledge level. Moreover 90.0% of nurses agreed to attend bereavement training programme. These findings are in agreement with Zhang and Lane^[13] who pointed out that, nurses need to be knowledgeable about end of life and bereavement issues to provide quality care. Also, these findings are in accordance with (Eckerd 2009; Chan *et al.*, 2007; Chan, Chan and Day 2004)^[14-16] who were added that, small numbers of nurses and midwives report having had bereavement care training.

In addition Montero *et al.* (2011) stated that, specific training was needed on perinatal grief, communication skills and help relation techniques. Education is the key that will allow health professionals to manage perinatal loss in a constructive way.^[17] In a study involving American obstetricians, it was observed that, in one year, these professionals could deliver care to 12 women having perinatal death.^[18]

Positive and highly positive attitude regarding perinatal bereavement care were presented in (26.0%, & 64.0%) of the studied participants, these findings are similar to Raddi, Samson, and Kharde, who were reported that, 50.0% of nurses had a positive attitude towards perinatal bereavement care.^[12] In addition, Chan was found that, the majority of nurses in their study held a positive attitude towards be-

reavement care.^[19]

Regarding nurses attitude in relation with their personnel characteristics the present study revealed that, nurses reside in rural areas, had personal grieving experiences and those had past experience in handling grieving parents had a highly positive attitude toward perinatal bereavement care. These findings are in the same line with Moon Fai Chan & David Gordon Arthur, who pointed out that, there was a significant relation between nurses attitude and their experience in handling grieving parents.^[20]

In relation to correlation of nurses' knowledge and attitude, the current study was showed that, there was a highly significant correlation between nurses' knowledge and attitude. These results were supported by Chan, who found a positive significant correlation between attitude toward bereavement care and knowledge.^[19]

These findings are in contradiction with Raddi, Samson, and Kharde who were noticed no significant correlation between knowledge and attitude of nurses regarding bereavement.^[12]

5 Conclusion

This is the first study examining knowledge and attitude of maternity nurse regarding perinatal bereavement care in Egypt, and concluded that, the majority of nurses had inadequate knowledge and 26.0%, & 64.0% of them had a positive and highly positive attitude regarding bereavement care and 90.0% of them agreed that they should attend perinatal bereavement training program to enable them to provide care for bereaved parents.

Recommendations

- Bereavement care should be included in Nursing Schools and Faculties curriculums'.
- Educational programs should be conducted to update nurses' knowledge and enhance their attitude about bereavement care.
- It was advised to conduct the present study on a large sample with different personal characteristics and different geographical areas.

Conflicts of Interest Disclosure

The authors declare that there is no conflict of interest statement.

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