Nurses' Knowledge and Attitude regarding Women's Sepsis during Postpartum Period

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Abstract

Background: Puerperal sepsis is an infective condition of the woman following childbirth and one of the leading causes of death. **Aim of study**: Was to assess nurses' knowledge and attitude regarding women's sepsis during postpartum period. **Design:** A descriptive study design was utilized**. Setting:** The study was conducted at obstetrics and gynecological department in Benha university hospital. **Sample:** A convenient sample included 70 maternity nurses. **Tools of data collection:** Two tools were used. **Tool (I):** Self- administered questionnaire sheet to assess demographic characteristics of the studied nurses and knowledge of maternity nurses regarding women's sepsis during postpartum period. **Tool (II):** A modified likert scale to assess nurses' attitudes regarding women's sepsis on postpartum period. **Results:** More than half of the studied nurses had poor knowledge while a minority of them had good knowledge regarding women's sepsis during postpartum period. Also, less than half of the studied nurses had positive attitudes, While, more than half of them had negative attitudes about women's sepsis during postpartum period. and negative attitude regarding women's sepsis during postpartum period respectively. **Conclusion**: There was positive statistically significant correlation between total knowledge and total attitude scores of the studied nurses. **Recommendations:** Developing a periodical training and educational program for nurses working at obstetrics department for improving their knowledge and acquiring positive attitude regarding control of women's sepsis during postpartum period.

Keywords: Attitudes, Knowledge, Nurses, Postpartum period, Women's sepsis.

Introduction

Puerperium is considered an important aspect of maternity care that has received relatively less attention compared to pregnancy and delivery. Though, the majority of the alarming complications arises immediately following delivery**.** The postpartum period covers a critical transitional time for mother, newborn and family on a physiological, emotional and social level. Nonetheless, in both developing and developed countries mother's and newborn's needs during this period neglected compared to pregnancy and child birth **(Bowyer et al., 2019).**

Sepsis is a life-threatening condition that arises when the body's response to infection causes injury to tissues and organs. As infections frequently complicate serious diseases, sepsis is a final common pathway to death from both communicable and non-communicable diseases around the world. Women's sepsis refers to infection that develops during pregnancy, during or after childbirth and that occurs after abortion **(Kaur et al., 2019).**

Women's sepsis during postpartum is defined as infection of the genital tract that occurs during labour or within 42 days of the postpartum period. The puerperal sepsis

presents commonly with fever and other symptoms like pelvic pain, foul smelling vaginal discharge and delayed reduction of the uterine size **(Murray et al., 2019).**

The modes of transmission of women's sepsis are typically categorized into nosocomial, exogenous, and endogenous factors. Nosocomial infections are acquired in hospitals or other health facilities and may come from the hospital environment or from the woman's own flora. While, exogenous infections come from external contamination, especially when deliveries take place under septic conditions. Endogenous infection, caused by mixed flora that colonizes the woman's own genital tract, and also a source of infection in women's sepsis **(WHO, 2019).**

The first week after delivery is the most critical time in the postpartum period, with most complications occurring in the first two days. The most common fatal complications are postpartum hemorrhage, sepsis. Women's sepsis in the postpartum period can lead to death or disability for the mother and increased the likelihood of early neonatal infection and other adverse outcomes **(Monif and Baker, 2020).**

Hence, early identification and diagnosis of women's sepsis is known to improve outcomes. The prevention, early diagnosis, and prompt management of sepsis are key factors for reducing related morbidity and mortality. So, the availability of nursing management protocol in the postpartum period is necessary to improve women's health state and decrease the potential adverse effects that can arise during such period **(Mandel, 2019).**

Therefore, postpartum care is one of the most important maternal health-care services to prevent impairment, disabilities as well as reduce maternal morbidity and mortality. Aseptic precautions, advances in investigations and antibiotics have played a major role in reducing the incidence of puerperal infections. Maternity nurses should be knowledgeable with evidence based practices related to the control of women's sepsis in the postpartum period and should have positive attitude regarding it **(Bonet and Olladspo, 2020).**

Nurses are the vital members of the health care, so the nurses are responsible for providing a substantial frontline defense in the fight against infectious diseases through understanding how pathogens spread, taking precautions to prevent transmission, and facilitating women education to reduce the likelihood of outbreaks and improve the safety of both mother and fetus **(Daftry and Shirish, 2019).**

Also, nurses in maternity units should be followed the provision of sterile instruments, hand hygiene, personal protective clothing and general environmental cleanliness in health facilities can decrease infection rates. Standard infection prevention and control measures such as hand hygiene, use of sterile equipment and proper waste disposal is a cornerstone of postpartum infection prevention **(Momoh et al., 2019).**

Significance of the study:

Women's sepsis during postpartum constitutes the third most common cause of maternal death worldwide. Globally, the maternal mortality ratio was 152 deaths per 100,000 live births in 2020, constitutes around 10.0% of all maternal deaths, and with about 6 million had developed puerperal sepsis and around 77,000 women died. Women's sepsis during postpartum was the highest in upper-middle-income countries which represented 106 per 1000 live births and were the lowest in high income countries that represented 39 per 1000 live births. In Egypt maternal mortality

ratio was 42 maternal deaths per 100,000 live births **(WHO, 2020).**

Nurses' knowledge and attitude have been a basic part of nursing for a considerable significant period of postpartum. In addition, to the best of our knowledge; There was no researches had been conducted about assessment of nurses' knowledge and attitude regarding women's sepsis during postpartum period before at Faculty of Nursing, Benha university. So, this study was conducted to assess nurses' knowledge and attitude regarding women's sepsis during postpartum period

Aim of the study

The study aimed to assess nurses' knowledge and attitude regarding women's sepsis during postpartum period.

Research questions:

- What is the level of nurses' knowledge regarding women's sepsis during postpartum period?
- What is the response of nurses' attitude toward women's sepsis during postpartum period?
- Is there a relation between nurses' knowledge and attitudes regarding women's sepsis during postpartum period?

Subjects and method

Study design

A descriptive study design was utilized to fulfill the aim of the current study.

Study setting

The study was conducted in obstetrics and gynecological department at Benha University hospital. This department located at the sixth floor and consisted of eight rooms, every room contains four beds. Also, an operating theater of obstetrics and gynecological is present at the same floor.

Subjects:

Sampling Type: A convenient sample

Size: All maternity nurses who were working in the Obstetrics and Gynecological department at the
time of data collection. The total number was (70) maternity nurses.

Tools of data collection: Two tools were used for data collection:

Tool (I): A self-administered questionnaire:

It was designed by the researcher after reviewing the related literature (**Hiran et al., 2019; Sichundu et al., 2019**).It was written in a simple Arabic language and consisted of two parts:

Part (1): Demographic characteristics of the studied nurses included (age, educational level, occupation, years of experience, attendance of training courses regarding women's sepsis during postpartum period and number and time of training courses regarding women's sepsis during postpartum period).

Part (2): Knowledge of maternity nurses regarding women's sepsis during postpartum period. It was consisted of 23 items and divided into three sections:

Section (a): General knowledge about infection included 5 items (definition of infection, source of infection, causes of infection, types of microbes causing infection and prevention of infection).

Section (b): Specific knowledge about women's sepsis during postpartum period, included 8 items (definition of postpartum period, types of sepsis during postpartum period, factors that lead to sepsis during postpartum period, causes of sepsis during postpartum period, mode of transmission of sepsis during postpartum period, warning signs, factors that contribute to the incidence of sepsis, complications of postpartum sepsis).

Section (c): Specific knowledge about predisposing factors of sepsis during postpartum period, included 5 items (signs of bleeding, signs of urinary tract infection, signs of wound and episiotomy infection, signs of endometritis, signs of mastitis and breast abscess).

Section (d): Maternity nurses' knowledge about methods of prevention of women's sepsis during postpartum period, included 5 items (general methods of preventing postpartum infection, standard precaution of infection control at postpartum unit, role of nurse to prevent postpartum sepsis, role of nurse to prevent urinary tract infection and role of nurse to prevent mastitis and breast abscess).

Knowledge's scoring system

Each item of knowledge was given a score of (3) for complete correct answer, score (2) for incomplete corrected answer and score (1) for don't know. The total knowledge score were calculated by the addition of the total score of each items which ranged from 23-69 and classified into three categories as following:

- Poor knowledge < 60 %. (1 < 42)
- Fair knowledge 60 < 75 %. (42 < 52)
- Good knowledge 75≤ 100 %. (52 ≤ 69)

Tool (II): A modified likert scale:

This tool was designed by the researcher after reviewing relevant literature(**Siamak et al., 2019; Natalie et al., 2019**) to assess nurses's attitude regarding women's sepsis on postpartum period and consisted of 17 items.

Attitude scoring system:

Each item was assigned based on 3 points likert scale as following score of (3) for agree, (2) neutral and (1) for disagree. The total score was ranged from 17-51and classified into two categories as following:

- Negative attitude < 60% (1< 31)
- Positive attitude ≥ 60%. (31≤ 51)

Tools validity and reliability:

Tools of data collection were reviewed by three professor of Obstetrics and Gynecological Nursing Faculty of Nursing Benha University to test content validity. According to jury's opinions the tools was clear, feasible and there was no ambiguity in the language. Modifications were done in the light of valuable comments such as modify some words to give the most appropriate meaning for the phrase which were not clear. Reliability was done by Cronbach's alpha test which revealed that each of tools consisted of relatively homogenous items as indicated by moderate to high reliability of each tool. The internal consistency was 0.79 for knowledge and it was 0.84 for attitude.

Ethical considerations:

Ethical aspects were considered before starting the study as the following:

- The study approval was obtained from Scientific Research Ethical Committee at Faculty of Nursing, Benha University before starting the study
- Each maternity nurse was informed about the study aim then an oral consent was obtained before starting the data collection.
- No harm or any physical, social or psychological risk for participants.
- Confidentiality was ensured throughout the study process, and the maternity nurses were assured that all data was used only for research purpose.
- Each maternity nurse was informed that participation is voluntary and freedom to withdraw from the study at any time.
- Each maternity nurse was informed about the purpose and benefits of the study.

Pilot study:

The pilot study was conducted on 10 % of the total sample (7 nurses) to assess the clarity, feasibility and applicability of the

study tools, estimate the time required to fill in the questionnaires. Based on the pilot study, no modification was done in the tools of data collection. So nurses in the pilot study were included in the total sample size

Field work

-The study was started by reviewing current and related literatures. Also, theoretical knowledge of various aspects of the study using books, articles, periodicals, magazines and internet was obtained to develop tools of data collection.

-The study was carried out from the beginning of July, 2021 till the end of December, 2021 covering six months.

-The researcher visited the Obstetrics and Gynecological department two days per week (Sunday and Tuesday) from 9AM to 2 PM to collect data from maternity nurses until sample size was completed.

- At the beginning, the researcher introduced herself, greeted each nurse and explained the aim of the study for obtaining their cooperation and assurance.

-Then, the researcher distributed tool (I) a self-administered questionnaire to assess nurses' demographic characteristics and knowledge regarding women's sepsis during postpartum period. This tool took about 20 minutes.

-Then, the researcher used tool (II) a modified likert scales, to assess nurses' attitude regarding women's sepsis on postpartum period. This tool took about 20 minutes.

-Average time needed for the interview to every nurse was 25-45 minutes.

-Average number of nurses interviewed was 3-4 nurses per week.

-After, finishing the interview the collected data was analyzed and tabulated to achieve aim of the study and answer the research questions.

Statistical analysis:

The data were coded, computed and statistically analyzed by using Statistical Package of Social Sciences version (SPSS version 25). Data were presented as frequency and percentages (qualitative variables) and mean and standard deviation (quantitative continuous variables). Correlation coefficient was calculated between knowledge, and attitude scores. A statistically significant difference was considered at p-value ($P \leq 0.05$), and a highly statistically significant difference was considered at p-value ($p \leq .001$).

Results:

Table (1): Shows that 52.9% of the studied sample was in age groups 20 < 30 years old with the mean age of 32.68±7.09 years. Regarding educational level, 44.3% of the studied sample were institute nursing graduates and 31.4% were diploma nurse. Concerning occupation, about 90% were nurses. Moreover, 48.6% of the studied sample had 5<10 years of experience with mean 7.92±3.71 years. Regarding attending training courses, about 80.0% of the studied sample didn't attend any training courses regarding postpartum sepsis and 20% of them attended training courses with about 42.8% of them attending only one course.

Table (2): Illustrates that 52.9%, 50.0% and 61.4% of the studied sample had poor knowledge regarding general knowledge about infection, specific knowledge about postpartum infection and knowledge about preventive measures of infection during postpartum period respectively.

Figure (1): Shows that minority of the studied nurses (18.6%) had good knowledge, less than one quarter had fair knowledge (20.0%) and more than half of studied nurses (61.4%) had poor knowledge about women's sepsis during postpartum period.

Figure (2): Reveals that nearly less than half of the studied nurses (37.1%) had positive attitudes, and more than half of the studied nurses (62.9%) had negative attitudes about women's sepsis during postpartum period.

Table (3): Illustrates that there was statistically positive correlation between total knowledge and attitude scores ($p<0.05$).

Table (1): Distribution of the studied sample according to demographic characteristics (n=70)

Demographic characteristics	No.	%
Age (years)		
20 < 30	37	52.9
30 < 40	23	32.9
40 < 50	7	10.0
≥ 50	3	4.2
Mean ±SD	32.68±7.09	
Educational level		
Diploma of nursing	22	31.4
Institute of nursing	31	44.3
Bachelor of nursing	17	24.3
Occupation		
Nurse	63	90.0
Supervisor	7	10.0
Experience years		
< 5	22	31.4
5< 10	34	48.6
≥10	14	20.0
Mean ±SD	7.92±3.71	
Attendance of training courses regarding postpartum sepsis		
No	56	80.0
Yes	14	20.0
Number of training courses regarding postpartum sepsis (n=14).		
One	6	42.8
Two	4	28.6
Three	4	28.6
Time of training courses regarding postpartum sepsis (n=14)		
Since one year	9	64.3
Since two year	5	35.7

Table (2): Distribution of studied sample regarding subtotal knowledge regarding women's sepsis during postpartum period (n=70)

Total	Good		Fair		Poor	
	No	%	No	%	No	%
General knowledge about infection	14	20.0	19	27.1	37	52.9
Knowledge about postpartum infection	11	15.7	24	34.3	35	50.0
Knowledge about preventive measures of infection during postpartum period	7	10.0	20	28.6	43	61.4

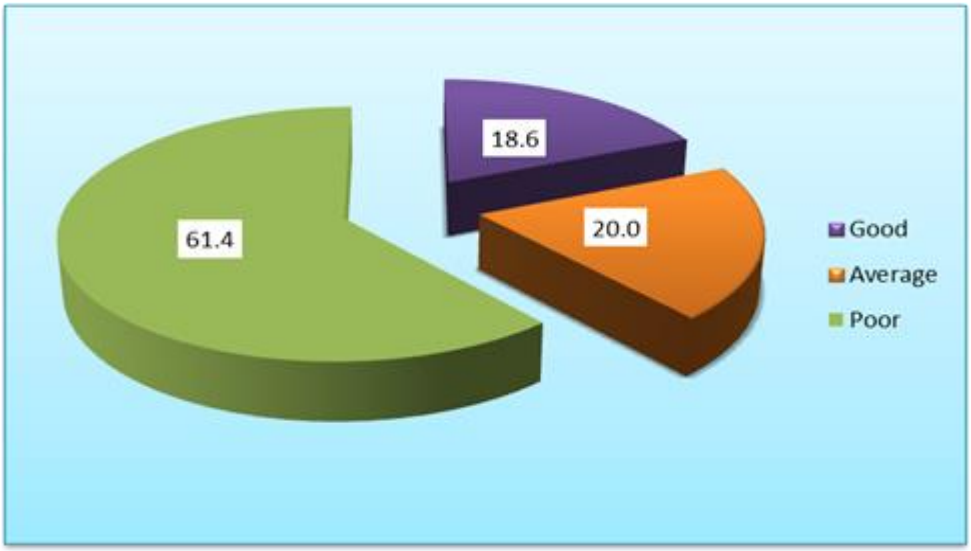

Figure (1): Distribution of studied sample regarding level of total knowledge (n=70)

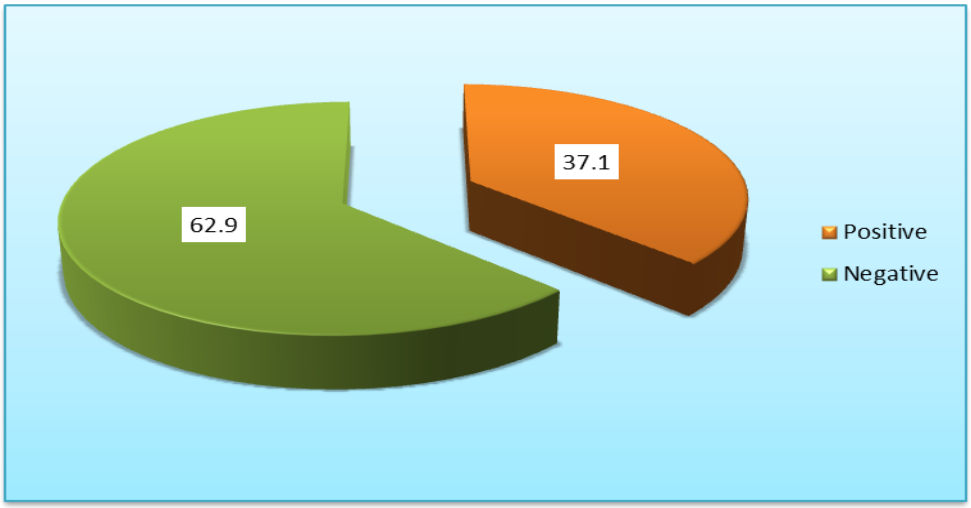

Figure (2): Distribution of studied sample regarding level of total attitude toward women's sepsis during postpartum period (n=70)

Table (3) Correlation between total knowledge and attitude scores regarding women's sepsis among studied sample (n=70)

	Total knowledge score	
	r	p-value
Total attitude score	0.631	0.026*

Discussion

The aim of this study was to assess nurses' knowledge and attitude regarding women's sepsis during postpartum period. This aim was achieved through assessing nurses' knowledge and attitude regarding women's sepsis during postpartum period.

The findings of the current study were be presented under four main sections, demographic characteristics of the studied sample, nurses' knowledge regarding women's sepsis during postpartum period, nurses' attitude toward women's sepsis on postpartum period and correlation between total knowledge and total attitude scores.

Regarding the demographic characteristics of the studied nurses, the current study showed that more than half of the studied nurses were in age group 20 <30 years old with the mean age of 32.68±7.09 years. This result agreed with **Rashmi et al., (2021)** who performed study about" Knowledge, Attitude and Practice on Prevention of infection-associated with postpartum period among Nurses of a Tertiary Care Hospital in India and revealed that more than half of the studied nurses were equal or less than 30 years old.

Also, **Richard et al., (2019)** who assessed " The postnatal health care workers knowledge and attitudes related to postnatal care in Uganda" found that more than half of the studied nurses also aged between 25 and 29 years old. This result may be due to nurses with young age are full of energy and hyperactivity which is always required in such crucial departments.

Meanwhile, this result is in disagreement with **Fahmy et al., (2017)** who conducted study about " Nurse`s Skills Regarding Prevention of Postpartum Infection" and showed that that mean age of studied nurses was 34,10 ± 13,98 years old and more than half of them aged above 30 years. This may be due to difference in the setting of study and different personal characteristics of the studied group.

In relation to educational level of the studied nurses, the present study illustrated that more than one third of the studied nurses were technical nurse, less than one third were diploma nurses while less than one quarter had bachelor level of education.

The current study findings agreed with **Singh et al., (2021)** who performed a study about "knowledge, attitude, practice regarding postpartum infection among nurses in central India" who illustrated that more than half of the studied nurses had secondary nursing education and graduated since long time. Furthermore, the current results were similar to a study conducted by **Abdelati et al., (2018)** about "Nurses' compliance with infection control measures and barriers to precautions in the delivery room" and showed that majority of nurses had secondary level of education and only two of nurses had bachelor nurse.

Meanwhile, the current results disagree with **Abdalla and El-Mohsen, (2018)** who

conducted a study about "Effectiveness of infection control standers on practice among health care personnel working in MCH centers at Quena governorate" and indicated that more than two thirds of the studied nurses had diploma education.

Concerning years of experience of the studied nurses, the result of the current study showed that less than one third of the studied nurses had experience less than five years, less than half of nurses had 5< 10years of experiences and less than one quarter had ≥ 10 years of experience with mean years of experience 7.92±3.71 years. This result is nearly in the same line with **Ibeid et al., (2021)** who conducted a study about" Assessment of nurses's knowledge and performance regarding infection control using mind map at obstetric and gynecological department in Gaza Strip " who found that less than half of the studied nurses have an experience less than 5 years.

This finding also agreed with **Khalifa, (2018)** who conducted a study about "Assessment of nurse's performance regarding reducing or prevention of nosocomial infection for patients with cancer⁄ suggested nursing, master degree in medical–surgical nursing, faculty of nursing Assiut University, Egypt" who reported that more than half of the studied nurses had less than twenty five years old, and less than half of them had an experience less than 5 year.

According to the researcher point of view, these results are all reasonable as the nurses who are actually included in the field of practice are mostly of young age and fewer years of experience and the older nurses are mostly included in supervising jobs.

Additionally, the result of the current study illustrated that more than three quarters of the studied nurses didn't attend any training courses about women's sepsis during postpartum period. These results came in accordance with **Rashmi et al., (2021)** who performed study about" Knowledge, Attitude and Practice on Prevention of infection-associated with postpartum period among Nurses of a Tertiary Care Hospital in India" who showed that the majority of the studied nurses didn't attend continuous in –service educational training courses.

In this regards, **Abdelati et al., (2018)** who showed that more than half of nurses did not attend any previous training course related to infection prevention and control. The majority of nurses did not attend any training programs because the organization did not arrange any upgrading programs for nurses about infection control measures.

Regarding nurse's knowledge about women's sepsis during postpartum period, the current study results showed that the minority of nurses had good knowledge, less than one quarter had average knowledge, and more than half had poor knowledge regarding women's sepsis during postpartum period. This result may be due to absence of training course regarding women's sepsis during postpartum period, absence of refreshing guidelines and limited number of nurses who attended the training courses.

Regarding nurses' knowledge about general knowledge of infection, the present study revealed that more than half of the studied nurses didn't know the mode of transmission of infection, causes of infection and types of microbes causing infection. These results disagree with **Fahmy et al., (2017)** who showed that more than two third of studied nurses had good knowledge about the mode of transmission of infection and causes of infection.

Regarding total nurses' attitudes regarding women's sepsis on postpartum period, the current study showed that more than half of the studied nurses had negative attitudes

while less than half of them had positive attitudes. This result may be due to that more than half of them had poor knowledge about women's sepsis during postpartum period that reflected on their attitude. Also, the majority of the studied nurses didn't attend any training courses regarding postpartum sepsis.

Concerning the correlation between total knowledge and total attitude scores regarding women's sepsis among studied nurses the current study illustrated that there was positive statistically significant correlation between total knowledge and total attitude scores ($p<0.05$). This result reflects the positive relationship between nurses' knowledge and attitudes.

This finding is congruent with **Richard et al., (2019)** who assessed " The postnatal health care workers knowledge and attitudes related to postnatal care in Uganda" and found that there was positive statistically significant correlation between total knowledge and total attitude scores of the studied nurses ($p<0.05$).

Also, this finding is correspondent with **Mangala, (2019)** who found that there was positive statistically significant correlation between total knowledge and total attitude scores of the studied nurses($p<0.05$).

The above-mentioned findings reflected our attention on the need for training programs to be integrated into the clinical practices of nurses working at obstetrics and gynecological departments. Also, strong clinical leadership is required to ensure that maternity nurses apply the knowledge and skills that they learned appropriated and work professionally to improve the quality of nursing care and reduce maternal morbidity and mortality in the postpartum period.

Conclusion:

The minority of the studied nurses had good knowledge, less than one quarter had fair knowledge and more than half of them had poor knowledge regarding women's sepsis during postpartum period. Also, less than half of the studied nurses had positive attitudes, While, more than half of them had negative attitudes about women's sepsis during postpartum period. Also, there was a positive statistically significant correlation between total knowledge and total attitude scores. Hence, the aim of the study was achieved, and the research questions were answered.

Recommendations:

- Developing a periodical training and educational program for nurses working at obstetrics department for improving their knowledge and acquiring positive attitude regarding control of women's sepsis during postpartum period
- Preparing booklet regarding care of women's sepsis during postpartum period should be available in obstetrics and gynecological department to be accessible to all nursing staff.
- Designing protocol of care and guideline for nurses regarding preventive measures of women sepsis during postpartum period.

Further studies to be performed:

-Implementing awareness program for pregnant women to improve their perception toward infection control precautions during postpartum period.

- Replication of the present study on large sample on different setting for generalization of results.

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معلومات وإتجاهات الممرضات تجاة عدوى السيدات أثناء فترة ما بعد الولادة

إنجى نبيل فايز - أمل أحمد حسن عمران - هند عبد الله السيد عفيفى - زينب ربيع عبدالمرضى

عدوى النفاس هى عدوى تصيب المرأة بعد الولادة وأحد الأسباب الرئيسية للوفاة .لذا هدفت الدراسة الحالية إلى تقييم معلومات وإتجاهات الممرضات تجاه عدوى السيدات خلال فترة ما بعد الولادة. وتم استخدام الدراسة الوصفية لتحقيق هدف الدراسة الحالية. أوقدُجريت الدراسة بقسم أمراض النساء والتوليد بمستشفى جامعة بنها على العينة المتاحة حيث إشتملت على جميع الممرضات العاملات بقسم النساء والتوليد بمستشفى بنها الجامعى (70) ممرضة. حيث كشفت نتائج الدراسة أن أكثر من نصف الممرضات كان لديهن معلومات ضعيفة فيما يتعلق بعدوى السيدات خلال فترة ما بعد الولادة وإتجاهات سلبية تجاه عدوى السيدات خلال فترة ما بعد الولادة و بناءً على نتائج الدراسة الحالية ، يمكن الاستنتاج أن: أقلية من الممرضات الخاضعات للدراسة لديهن معلومات جيدة ، وأقل من ربعهن كان لديهن معلومات متوسطة وأكثر من نصفهن كان لديهن معلومات ضعيفة عن عدوى السيدات خلال فترة ما بعد الولادة. بالإضافة إلى ذلك ، كان لدي أقل من نصف من الممرضات الخاضعات للدراسة إتجاهات إيجابية وأكثر من نصفهن كان لديهن إتجاهات سلبية عن عدوى السيدات خلال فترة ما بعد الولادة.وأوضحت الدراسة أنة كان هناك إرتباط إحصائى إيجابى بين المجموع الكلى للمعلومات والمجموع الكلى لإتجاهات الممرضات، وبذلك تم تحقيق هدف الدراسة والإجابة على أسئلة البحث.كما أوصت الدراسة بتطويربرنامج تعليمي وتدريبى دورى لممرضات قسم النساء للإرتقاء بمعلوماتهن وإكسابهن السلوك الإيجابى تجاة التحكم فى عدوى السيدات أثناء فترة مابعد الولادة.