

BOOK OF ABSTRACTS

8TH ANNUAL GENERAL MEETING AND 4TH SCIENTIFIC CONFERENCE

OCTOBER 8-13, 2023

Acknowledgement

The 2023 Annual General Meeting and Scientific Conference Organizing Committee (2023 AGMS COC) of the Ghana College of Nurses and Midwives extends its deepest gratitude to the dedicated panel of reviewers who generously contributed their time and expertise in reviewing the abstracts for this book. Their meticulous review process, insightful feedback, and thoughtful suggestions have been instrumental in shaping the quality and relevance of the content presented.

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Kudos to everyone!

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Brief about the 2023 Annual General Meeting & Scientific Conference

The Ghana College of Nurses and Midwives is by law mandated to provide specialist and postgraduate education in nursing and midwifery, continuous professional education, and also contribute to policy formulation for improved healthcare outcomes. To accomplish this, the College since its inception has been diligently running 4 levels of professional development, adding on programmes in a progressive fashion. They include short Continuous Professional Development, 1-year Associate Membership, 3-year Membership and 2-year Fellowship programmes, carefully selected and developed under the Nursing, Midwifery, Mental Health and Public Health Nursing divisions. The purpose for running these programmes has been threefold: to strengthen the Nursing and Midwifery workforce to meet the changing dynamics in disease trends; to address the national need for specialized nursing and midwifery care for optimal health outcomes; and to provide opportunity for diverse career choices for the hardworking nurses and midwives in Ghana and beyond.

With barely a decade remaining to meet the target of Universal Health Coverage (UHC), many actors in the global health community are looking to the adoption of innovative solutions to improve efficiency in access and promote health. Ghana is a signatory to the goal of reaching UHC by 2030 (SDG 3, target 3.8), "while leaving no one behind". The integration of innovations within the health sector has become a priority for health care delivery in Ghana, as these innovations are shaping the healthcare experience. From education, through practice, procedures, and governance, healthcare is getting more and more highly technical and specialist nurses and midwives in Ghana are at the forefront of using innovative solutions to improve health delivery outcomes.

The 8th Annual General Meeting and 4th Scientific Conference, served as a special edition that brought Nurses and Midwives from far and near to update their knowledge, celebrate our achievements over the past 10 years and discuss next steps towards postgraduate nursing and midwifery specialization for the next 10 years. The conference theme was **"A Decade of Nursing and Midwifery Specialist Education in Ghana: Innovative and High Impact Interventions towards Universal Health Coverage (UHC)".** Presenters highlighted the growing interest in innovations in health care delivery and adaptable practices driving improved access to quality specialist nursing and midwifery care for all under the following **sub-themes**:

- 1. Quality Healthcare Delivery for National Development: the role of the contemporary specialist nurse/midwife.
- 2. Improving maternal, neonatal and child health services through nursing and midwifery specialization.
- 3. Health system strengthening: advocating for nursing and midwifery practice.
- 4. Innovations and excellence in nursing and midwifery specialist care.
- 5. Promoting Integrity, Professionalism and Excellence in specialist nursing and midwifery education and practice.

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Numbering Key

O = Oral presentationP = Poster presentation

Abstracts

01.

Knowledge on Diet and Dietary Practices among Pregnant Women in an Urban Hospital, Accra Metropolis, Ghana

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Submission ID #: GCNM/AGMS/O1

Introduction

Dietary habits among pregnant women from preconception through to lactation can influence growth, development and long-term health of their children as well as the health of the mother.

Purpose

This study sought to evaluate the knowledge and dietary practices among pregnant women at an Urban Hospital in Accra.

Methods

The study used a cross-sectional descriptive quantitative design which employed purposive sampling technique. Structured questionnaire was used to collect information from 150 pregnant women. Statistical Package for the Social Sciences (SPSS) software version 25.0 was used for the analysis of the data.

Results

The study revealed that about half of the pregnant women had little or no knowledge about the sources of the main food groups or balanced diet. Additionally, about onethird of the pregnant women did not know that intake of iron-folate supplement prevents the development of anaemia. Moreover, some of the pregnant women had wrong notion that increased food intake was beneficial simply because they were pregnant. There were varied opinions among the pregnant respondents: some thought it beneficial to consume more carbohydrates during pregnancy, while others believed that increasing the intake of fruits and vegetables was more advantageous.

Conclusion

There is a clear need for enhanced nutritional education for pregnant women. Midwives, therefore, should focus on providing comprehensive dietary guidance during antenatal sessions to address any existing knowledge gaps in diet and dietary practices during pregnancy.

Keywords: Diet, Dietary practices, Pregnant woman, Knowledge, iron-folate supplements

O2.

Acceptance and Adaptation to Infertility Among Women with Secondary Infertility in Tamale Metropolis

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Submission ID #: GCNM/AGMS/O2

Introduction

Secondary infertility poses significant psychological and emotional challenges for women, affecting their quality of life and sexual satisfaction. Despite the enormous negative effects that infertility has on couples, particularly in sub-Saharan Africa, infertility still appears to be a neglected area of sexual and reproductive health in Africa.

Purpose

The purpose of the study was to explore acceptance and adaptation to infertility among women with secondary infertility in the Tamale metropolis.

Methods

A qualitative exploratory descriptive design was used. Individual in-depth interviews were conducted using a semi-structured interview guide. Ethical approval was received from the Ghana Health Services Ethics Review Committee. Fourteen (14) participants with secondary infertility receiving treatment at the Tamale Teaching Hospital were purposively selected and interviewed for the study, each lasting about 30 minutes to one hour. The interviews were audiotaped with permission from the participants, transcribed verbatim and content analysed.

Results

Out of the fourteen women interviewed, thirteen of them sadly narrated that sexual intercourse had become mechanical or a chore rather than pleasure with intimacy resulting in low sexual drive and painful sexual intercourse. The findings from this study revealed that happiness, well-being, sexual satisfaction and value in life were compromised among these women affecting their ability to accept and successfully adapt to infertility.

Conclusion

Women with infertility experience a lot of psychological distress. Social support and access to quality medical treatment can enhance adaptation. The study highlights the need for professional-led support groups to address the sexual dissatisfactions and compromised health experienced by women with secondary infertility.

Keywords: Secondary infertility, acceptance and adaptation, quality of life, sexual dysfunction, women's health

O3.

Workplace Violence Against Nurses in the Emergency Department at the Korle-Bu Teaching Hospital

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Introduction

Workplace Violence (WPV) is a shared problem in healthcare setting as well as a complex and perilous universal concern, specifically for the nursing profession. Violence in the various Emergency Departments (ED) has increased in recent years, with accumulative data of nursing staff exposed to violent behaviours in the health sector that negatively affect the quality of care provided.

Purpose

The purpose of the study was to explore the experiences of the nurses on workplace violence (WPV) at the emergency department of the Korle Bu Teaching Hospital.

Methods

A qualitative design, using an explorative-descriptive approach was employed to delve into the experiences of the nurses' who have had WPV at the ED. A purposive sampling technique was used to select 20 participants. Data was collected using semi-structured interview guide, until saturation was attained. Thematic analysis using Braun & Clarke (2006) approach was adopted to analyse the data.

Results

Four major themes identified were: understanding WPV, coping strategies, effects on work performance; experiences and response to WPV. Participants reported encountering incidences of violence at the workplace. Verbal abuses were perceived as predictable and increasing in intensity and frequency.

Conclusion

The study identified verbal abuse as the paramount WPV which significantly affects the quality of service rendered to patients. There is the need for effective workplace violence prevention policy and guidelines to appropriately respond to incidents of violence against nurses at the ED.

Keywords: Workplace violence, victim, abuse, perpetrators, thematic analysis

O4.

Medication Administration Errors Among Paediatric In-Patients at the Upper East Regional Hospital

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Introduction

Errors in medication administration in the care of children have several detrimental effects including delayed healing, drug resistance, morbidity and mortality. There is, however, limited empirical data on the incidence of medication administration errors (MAEs) experienced by children admitted to healthcare facilities in Ghana.

Purpose

The study sought to investigate the incidence of MAEs among healthcare providers in the paediatric inpatient units at the Upper East Regional Hospital (UERH).

Methods

A cross-sectional survey was employed to obtain data from 399 participants at the paediatric units using a convenient sampling method. Data were collected by reviewing participants' medical records and observing healthcare providers. The review of records focused on dosage, duration, frequency, time, authorization, and omission of medications. Healthcare providers were also observed during the administration, reconstitution, and labelling of medications for any errors. Descriptive and inferential statistical analyses were conducted to determine the incidence and factors influencing MAEs.

Results

The incidence of MAEs was 65.9%. The intravenous medication route was the most common route involved in MAEs (48.1%). The wrong frequency of medication administration (41.9%) was the most common type of MAE. The least type of MAE was unauthorized medication (0.8%). Additionally, there was a significant relationship between the occurrence of MAEs and the hospital ward (χ^2 =13.1, p<0.001), the age of the child (χ^2 = 19.254, p<0.001), and the patient's weight (χ^2 =5.740, p<0.05). Children were 2.5 times more likely to experience a medication administration error if they moved from the paediatric to the newborn care unit.

Conclusion

The incidence of MAEs is high among paediatric inpatients, especially among children receiving IV medications. Refresher training on medication administration for staff

working in paediatric units as well as measures for supportive supervision to ensure the safety of these children must be enforced.

Keywords: Medication administration error, children, health facilities

O5.

Beliefs and Perceptions of Midwives on Prevention of Mother-To-Child Transmission of Hepatitis B in Selected Primary Health Care Facilities in Ghana

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Introduction

Mother-to-child transmission (MTCT) of hepatitis B remains an important public health concern globally with difficult preventive strategies. In Ghana available information about the knowledge of midwives' beliefs and perceptions on the prevention of MTCT (PMTCT) of Hepatitis B Virus (HBV) is limited.

Purpose

The purpose of the study was to explore midwives' beliefs and attitudes toward PMTCT of Hepatitis B.

Methods

An exploratory descriptive qualitative design was used to engage fourteen (14) midwives who were purposively sampled from selected health facilities in the La-Nkwantanang Municipality, Accra. Individual face-to-face interviews were conducted using an interview guide after ethical approval was obtained. Data were content analysed and methodological rigor was maintained.

Results

The findings of the study reported two (2) major themes (Beliefs and perceptions of midwives and Attitude towards PMTCT of Hepatitis B) and five (5) sub-themes. The findings established that the midwives had perceptions and beliefs that HBV was very infectious and dangerous though they still cared for pregnant women living with HBV. Midwives who understood the importance of PMTCT displayed positive attitudes towards pregnant women who had HBV, indicated by the willingness of the midwives to participate in activities that ensured PMTCT such as screening, health education and Hepatitis B vaccination. However, negative attitudes were manifested in exaggerated wearing of protective clothing, speaking harshly to pregnant women, and prompting their colleagues about the status of such clients receiving facility-based care.

Conclusion

Midwives were identified to be high risk of Hepatitis B cross-infection due to increased proximity to maternal health care delivery and infectious sources. Special training on

PMTCT of viral Hepatitis B, and HBV vaccination for midwives are needed. Midwives need to be supported to advocate for health promotion activities on Hepatitis B PMTCT in Ghana.

Keywords: Midwives, Hepatitis B, Prevention-of-Mother-To-Child Transmission, Beliefs, Attitudes

O6.

Nurses in the Lead: Nurses' Involvement in Health Policy Formulation

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Introduction

Nurses are strategically positioned to contribute immensely to policy formulation, but it is evident in literature that there is limited involvement of nurses in health policy formulation and decision-making due to various barriers. Though nurses possess invaluable insights and expertise garnered from their frontline experiences, their active participation in shaping health policy is often impeded by several significant challenges.

Purpose

This paper examines the crucial role nurses play in the policymaking process, reflecting on their unique position as both care providers and patient advocates. It underscores the importance of nurses' contributions to policy discussions due to their frontline insights into patient care and system efficiencies.

Methods

This discussion paper stems from a qualitative case study on the implementation of the Community-Based Management of Acute Malnutrition in Ghana. Key informant interviews were conducted with 34 participants located in both rural and urban health institutions in Ghana.

Results

The study revealed that despite their critical perspectives, nurses often remain underrepresented in health policy formulation. This study identifies structural barriers that inhibit nurses' participation, including limited professional preparation in policy development, hierarchical organizational structures, the stereotype that policymaking is solely within the domain of doctors or administrators and a lack of formal mechanisms for inclusion in policy debates.

Conclusion

Targeted strategies are needed to enhance the involvement of nurses in policy formulation. These include educational programs focused on policy literacy, leadership training, and structured advocacy platforms. This recommendation will leverage the expertise of nurses to foster more responsive and effective health policy environments. By recognizing and actively mitigating the challenges, nurses can be empowered to play a pivotal role in shaping health policy.

Keywords: Nurses, policy implementation, policy formulation, decision making

07.

Impact of Paediatric Nurse Specialists' on Service Delivery and Patient Outcomes

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Introduction

Paediatric Nurse Specialists while providing quality healthcare at various levels of the healthcare system have identified gaps in paediatric care including poor knowledge of case management among staff on the wards, poor infection prevention and control practices, high incidence of medication administration errors and ineffective perinatal death audit at the Neonatal Intensive Care Unit (NICU); and the absence of NICU in some healthcare facilities.

Purpose

The objective of the study was to assess neonatal care and improve the quality of case management through quality improvement (QI) methodologies.

Methods

Quantitative research methods were used to determine the incidence of neonatal sepsis, causes of neonatal mortality, antibiotic sensitivity and medication errors at the Sogakope District Hospital, Dormaa West District Hospital and the Upper East Regional Hospital. The study employed QI methodologies to train healthcare providers in paediatric case management and the establishment of a NICU.

Results

Causative organisms mostly implicated in Neonatal Sepsis were Staphylococcus Aureus and Staphylococcus Epidemidis. Factors related to medical personnel accounted for 56% of neonatal deaths. The antibiotic sensitivity pattern found Amikacin, Erythromycin and Levofloxacin as the most sensitive while Cefotaxin and Flucloxacillin recorded the highest levels of resistance. Patterns of medication errors revealed that over 48% of errors were associated with the intravenous route of medication administration. Nurse-led interventions including training on Emergency Triage Assessment and Treatment (ETAT), Malaria and Seizure management and supportive supervision reduced case fatality and mortality rates from 1.63% in 2019 to 0.37% in 2022 in the selected facilities.

Conclusion

Nurse Specialists possess immense knowledge and skills to improve the quality of care and patient outcomes significantly. Stakeholders should invest in nurse specialists' education and support their practice to accelerate the achievement of Universal Health Coverage by 2030. **Keywords**: Paediatric Nurse Specialist, case management, mortality, medication errors

O8.

Impact of Haematology Nurse Specialists on Service Delivery and Patient Outcomes

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Introduction

Haematology Nurse Specialists (HNS) play a key role in healthcare service delivery and patient outcomes in Ghana. The comprehensive curriculum, faculty dedication, clinical rotations, and core modules in leadership management equip HNS to practice independently and make significant contributions in their field.

Purpose

The purpose of this study is to describe the impacts of HNS on service delivery and patient outcomes in Ghana.

Methods

Input was gathered from practicing HNS in Ghana regarding their areas of impact and challenges faced during their practice.

Results

The results highlight the impacts of five HNS across various healthcare levels in Ghana, categorized under the scope of practice for nurse specialists. These impacts include clinical care, mentorship, facilitation, supportive supervision, advocacy, leadership/management, and research.

In clinical care, HNS have established and conducted nurse-led haematology clinics, provided comprehensive care through a multidisciplinary team approach, implemented pain management protocols, and supported patients and families during admission. They also engage in mentorship, facilitating and developing continuous professional development programmes, and training nurses for specialized clinics.

Advocacy efforts include public education sessions, awareness creation through media, and participation in world celebration days. In leadership/management roles, HNS serve as lead nurses, managers, and committee members, contributing to policy implementation and program development.

Research involvement ranges from publishing papers in peer-reviewed journals to participating in clinical trials related to Sickle Cell Disease (SCD) and haemophilia. Challenges identified include inadequate clinical space and support services.

Conclusion

The specialized knowledge and skills of HNS significantly enhance patient care, leading to improved outcomes and satisfaction. Their impact extends beyond individual patient care to ensuring the development and establishment of strategic measures to influence policy, conducting research, and promotion of innovations in the field of haematology.

Keywords: Nurse-led clinic, clinical trial, Haematology nurse specialist

09.

Contribution of Women's Health Specialists to Universal Health Coverage

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Submission ID: GCNM/AGMS/O9

Introduction

The Ghana College of Nurses and Midwives was established in line with the Specialist Health Training and Plant Medicine Act (Act 833) to train specialist nurses and midwives with high-quality skills and competencies to bridge the gap between theory and practice. The College was established in 2013 and has produced five batches of specialists since 2018 in twenty specialty areas.

Purpose

The purpose of this presentation is to describe the contribution of Women's Health Specialists to Universal Health Coverage (UHC) in Ghana.

Methods

The researchers collated a list of women's health specialists who have graduated from the College, identified their workplaces and compiled innovations and initiatives implemented by each of them since their graduation and placement.

Results

The findings revealed that 19 women's health specialists had so far graduated comprising of 5 from Advanced Midwifery, 9 from Women's Health, and 5 from Well-woman Care programmes. These specialists, work in four regions of Ghana: Greater Accra, Ashanti, Upper East and Northern regions. The levels of operation of the specialists are Ghana Health Service headquarters, regional, district, and quasi hospitals, polyclinics and in communities. To improve the quality of care and access to care, Women's Health Specialists operate at managerial, as well as facility and community levels. At the managerial level, they contribute to policy and guideline development and health service delivery strategies. Facility activities include high-level patient care and wellness clinics which extend to community levels. Innovations put in place include App development for antenatal attendance, clinical booking for ANC, and use of digital technologies to improve access to health information on sexual and reproductive health.

Conclusion

The findings from the study revealed the need for continuous integration of midwife specialists in the Ghana Health Service delivery system.

Keywords: Policy and Guideline development; Universal Health Coverage; Women's Health Specialists

O10.

Perinatal Mental Health of Adolescent Mothers in Ghana

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Submission ID: GCNM/AGMS/O10

Introduction

The perinatal period is globally recognized as a vulnerable period for adolescents. Adolescents are transitioning between childhood and adulthood and are confronted with multiple stressors. Most adolescent pregnancies are 'accidental' and therefore fraught with many problems: physically, socially, and especially, psychologically.

Purpose

The purpose of this study was to explore the mental health of adolescent mothers in the Awutu Senya District during the perinatal period.

Methods

This study employed a concurrent mixed-methods approach. The study was conducted in the three (3) public health facilities of Bawjiase, Bereku and Senya, all in the predominantly urban (59.8%) Awutu Senya District of the Central Region (CR) of Ghana. Participants included adolescents, with pregnancies of at least 12 weeks gestation or with children 12 months and below. Sample size for quantitative data was 93, and that for qualitative data, 13. The Perceived Stress Scale (PSS-14), The Edinburgh Postnatal Depression Scale (EPDS), The Perinatal Anxiety Screening Scale (PASS-31) and a semi-structured interview guide were used for data collection. Data was analysed using descriptive statistics and content analysis.

Results

The study found that the most prevalent Common Mental Disorder (CMD) was perceived stress (100%), followed by anxiety (93.5%), depression (78.5%) and suicidal ideations (3.2%). Some CMDs were observed to be comorbid with others. Additionally, content analysis revealed four (4) major themes: social support, support from the school system, support from the health care system and resilience.

Conclusion

The study revealed that adolescent mothers during the perinatal period had mental health issues. They however had support systems available, although most of them reported receiving inadequate financial support. It is recommended that national guidelines and policies on perinatal mental health be enacted and enforced to promote good maternal and infant health outcomes.

Keywords: Adolescence, adolescent mothers, perinatal period, perinatal mental health and common mental disorders

P1.

Best Practices Used in Managing Postoperative Pain Among Hospitalised Children (0-3 Years): A Scoping Review

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Submission ID: GCNM/AGMS/P1

Introduction

Postoperative pain is described as pain experienced after surgical intervention. All persons including children are entitled to effective management of postoperative pain as a fundamental human right. To improve pain management, best practice guidelines are available globally for nurses and caregivers to use. Regardless of the existence of such guidelines, postoperative pain management of children remains suboptimal.

Purpose

This review aimed to identify best practices used by nurses and caregivers in managing postoperative pain among hospitalised children (0-3 years).

Methods

This review followed Arksey and O'Malley's five-step methodological framework for conducting scoping reviews including formulating the research question; identifying relevant studies; selection of eligible studies; charting the data; and collating, summarizing, and reporting the results. Search terms were created and a total of five databases (PubMed, ProQuest Central, EBSCOhost, SCOPUS, and Web of Science) were searched. ProQuest Thesis and Dissertation, ProQuest Central Newspaper and hospital websites were also searched for grey literature on best practice guidelines.

Results

A total of 4917 articles were identified from various databases. After removing duplicates, 23 eligible articles were selected, focusing on pharmacological (n=14) and combined pharmacological and non-pharmacological interventions (n=9). Combined interventions primarily included pharmacological components, such as paracetamol, ibuprofen, corticosteroids, and midazolam. Non-pharmacological interventions included breastfeeding, distraction techniques, positioning, and parental presence. Nurses were the target users of all the best practice guidelines reviewed, except for one targeting parents.

Conclusion

There is a paucity of guidelines focused on non-pharmacological interventions. Therefore, more research is needed on the use of non-pharmacological interventions in the management of postoperative pain among children (0- 3 years) and the involvement of caregivers.

Keywords: Postoperative, pain management, pharmacological, non-pharmacological, guidelines

P2.

Incivility In the Workplace: A Study of Nursing and Midwifery Staff in Northern Ghana

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Submission ID: GCNM/AGMS/P2

Introduction

Recent studies suggest that incivility in healthcare settings has perilous effect on nursing and patient outcomes globally. The presence of incivility among nurses and midwives can affect safe patient care and turnover intentions. There is a dearth of knowledge on the prevalence, sources and effect of incivility in healthcare settings in Ghana.

Purpose

The study was to assess the sources, prevalence, and effect of incivility in a tertiary hospital in Northern Ghana.

Methods

A descriptive cross-sectional survey was conducted among 321 nurses and midwives at a tertiary level hospital in Northern Ghana between October and November 2022. The participants responded to an online questionnaire using the 43-item incivility scale of 1-5 (1=no incivility, 2=few of the times, 3=sometimes, 4=most of the times, and 5=all the time) and 8-item questionnaire adapted from the Patient Safety Culture survey tool. Data collected were exported into SPSS version 21 and analyzed using descriptive statistics.

Results

The participants reported experiencing incivility from general, coworkers (nurses), direct supervisors, doctors, and patients/relations sources. The greatest mean prevalence incivilities recorded were 3.1 for general and 3.1 for patients' sources respectively. Moreover, in terms of incivility reported under the Nursing Incivility subscales, the greatest mean prevalence recorded was 3.5 for displaced frustration under patients/relations source. The least mean prevalence recorded was 2.2 for abusive supervision under direct supervisors' source. There was a negative correlation between incivility and safe patient care and turnover intention. (r = -0.28, p < 0.001).

Conclusion

The presence of incivility does not support safety in healthcare settings, and this may influence turnover intentions and safe patient outcomes.

Keywords: Incivility, nurses, hospital, safe patient care, turnover intention

P3.

Bridging the Theory-Practice Gap: Nurse Specialists' Perceptions of Knowledge Translation in Ghana, an Exploratory Qualitative Study

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Submission ID: GCNM/AGMS/P3

Introduction

The disparity between knowledge and practice is a global concern because of its detrimental effects on the quality of healthcare. Despite the increased interest in basing decisions on reliable scientific data, there appears to be a gap between the knowledge and practice of healthcare providers. The gap in the translation of knowledge into healthcare delivery results in poor health outcomes, increased mortality rates and higher healthcare expenditure. Knowledge translation is essential for nurses, who are the core of the healthcare system and are required to use evidence in patient care.

Purpose

The study seeks to explore the perceived enablers and barriers of nurse specialists in their quest to apply their acquired knowledge and skills to improve patient outcomes.

Methods

Guided by the PARIHS framework, this study will employ a qualitative approach to explore the perception of nurse specialists about knowledge translation. An interview guide will be used to elicit information from participants. The study will be conducted among nurse specialists who have completed various membership programmes and have been reintegrated into the healthcare system across the country. Participants will be identified using maximum variation purposive sampling to ensure the inclusion of the various specialties. Ethical clearance will be obtained from the Noguchi Memorial Institute for Medical Research, and participants will be required to give consent. Data will be analyzed using thematic analysis. The outcome of the study is expected to provide context-specific recommendations to guide the training of nurse specialists and measures to create a conducive atmosphere for knowledge translation among nurse specialists practicing in Ghana.

Conclusion

Nurse specialists have the requisite knowledge and skills to provide quality improved care. An enabling environment that allows for applying their knowledge and skills into clinical practice is imperative for improved healthcare outcomes and job satisfaction.

Keywords: Evidence-based practice, knowledge translation, nurse specialist

P4.

Impact of International Migration of Nurses on Health System Performance in Low- and Middle-Income Countries Post-Covid-19: A Systematic Review Protocol

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Introduction

The international migration of nurses from low and middle-income countries threatens the capacity of the health system to function effectively. Global demand for the nursing workforce and worsening conditions in departure countries post-COVID-19 have fuelled migration trends, creating a disproportion in health workforce density, which has implications for Universal Health Coverage targets. Despite this, there is a dearth of literature on the effect of nurses' migration post-COVID-19 on low- and middle-income countries.

Purpose

This systematic review seeks to explore and assess the current status of the international migration of nurses from low-and middle-income countries post-COVID-19 and the indirect impact on healthcare system performance.

Methods

The research questions for this ongoing review are guided by a modified version of the Sample, Phenomenon of Interest, Design, Evaluation, and Research type (SPIDER) tool. Reporting will be done using the PRISMA guidelines for systematic review. A protocol has been developed and registered in Prospero. The study is focused on peer-reviewed literature on the impact of the international migration of nurses post-COVID-19 on the quality of care. This comprises qualitative, quantitative, and mixed-method studies in low-middle-income countries from 2020 to 2024 as well as grey literature in the English language. The literature is being sought from three major scientific databases, which include Science Direct, PubMed, and CINAHL in addition to Google Scholar. Three researchers are separately extracting data from the included papers. Consideration is given to agreement and consensus among the three researchers on the articles selected and the data extracted.

Conclusion

The study's findings are anticipated to shape policies that regulate the international migration of nurses. This aims to maintain the necessary skill mix for high-quality patient care and reduce the challenges faced by nurses who stay in their home countries.

Keywords: Post-COVID-19, low- and middle-income countries, health system performance, nurses, international migration

P5.

Innovation and Excellence in Nursing and Midwifery Specialist Care

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Submission ID: GCNM/AGMS/P5

Introduction

Specialist nurses spearheaded a significant reduction in mortality rates within the paediatric ward of the Upper East Regional Hospital. 2018 data of the ward revealed occurrence of preventable deaths contributing to the total mortality rate of 1.5%, which prompted further investigation. Through a comprehensive review of 2018 data on causes and contributory factors of deaths, with subsequent intervention in 2019, mortality rates declined.

Purpose

The interventions in 2019 were however, not continued after the exit of the only specialist Nurse leading to deterioration in mortality rates between 2020 (2.3%) to 2021 (2.8%). It therefore became necessary to replicate the 2019 interventions in 2022 (as the same challenges prevailed) with the staffing of two nurse specialists.

Methods

Cause of death certificates and Morbidity and Mortality data were compiled, reviewed and analysed. Through interviews, feedback was solicited from staff on causes of mortality.

Results

Lack of clinical meetings and mortality audits, financial barriers hindering access to medications and referrals, task-based nursing and knowledge deficiencies on early detection and management of shock, hypoglycaemia, severe dehydration and Severe Acute Malnutrition were identified as contributing factors to mortality. A fund was established to tackle financial barriers hindering access to medications and referrals, biweekly clinical meetings were held, a care tracker tool was developed assigning nurses to render total nursing care, and an Identification, Situation, Background Assessment and Recommendation (ISBAR) model was applied while focal persons conducted specific assignments. There was a remarkable reduction in mortality rate from 1.5% in 2018 to 1.2% in 2019 and from 2.8% in 2021 to 1.7% in 2022 when the intervention was replicated.

Conclusion

The interventions substantially reduced paediatric mortality rates, demonstrating the effectiveness of targeted strategies in addressing systemic healthcare challenges.

Keywords: Paediatric ward, Mortality reduction strategies, Nurse Specialist, Upper East Regional Hospital

Closing Remarks

I wish to extend my heartfelt gratitude to each and every one who contributed to the success of the 2023 Annual General Meeting and Scientific Conference (AGM&SC) of the Ghana College of Nurses and Midwives (GCNM).

The theme for the Conference, "A Decade of Nursing and Midwifery Specialist Education in Ghana: Innovative and High Impact Interventions towards Universal Health Coverage (UHC)," has been both a profound reflection on the past achievements of the College, and a forward-looking call to action. Over the past decade, the strides the College has made in nursing and midwifery education have not only advanced the field but have significantly contributed to the broader goal of Universal Health Coverage.

This Book of Abstracts stands as a testament to the rigorous and impactful work carried out by our dedicated researchers and practitioners in our two noble professions of Nursing and Midwifery. I take the opportunity to commend the authors and express my sincere appreciation to fellow members of the committee who worked tirelessly to review and curate these abstracts. Your commitment to maintaining high international standards and delivering this work within a limited timeframe has been truly exemplary.

The innovations and interventions showcased in this book reflect a remarkable journey of growth and excellence. As we move forward in our nursing and midwifery professions, let us continue to build on these successes and leverage the insights gained to drive further advancements in our field. Our collective efforts and dedication will be crucial in addressing the evolving challenges and opportunities in nursing and midwifery.

Once again, I thank the leadership, staff, faculty and members of our Great College, and all stakeholders and friends of our noble professions for your involvement and participation in the AGSM of the GCNM. Together, we are shaping the future of healthcare in Ghana and contributing to the global discourse on Universal Health Coverage.

Dr. Abigail Agartha Kyei

Chairperson of Committee for Review of Scientific Papers