Challenges and Barriers Perceived by Professionals in the Implementation of the NIDCAP Training in a Middle Income Country

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Aims/Purpose
The purpose of this study is to describe the experience and challenges faced during NIDCAP training and implementation in a middle income country. The research questions were the following:

1) What are the barriers and challenges perceived by professionals during NIDCAP training and implementation?
2) What is the staff’s perception regarding the NIDCAP’s impact on infants’ well-being, parental participation and working conditions in the unit?

Methods
Design: This is a cross sectional survey with descriptive design.
Setting: The study is carried out in a level III neonatal Intensive care unit in a middle income country for two months.
Participants: All nurses and physicians (50) who worked in the NICU for at least one year prior to and during the implementation of NIDCAP training were invited to participate using an online questionnaire.
The Questionnaire: The questionnaire was adapted from a previous Swedish study; it has been used previously to survey staff opinion after NIDCAP implementation in several European countries. The questionnaire is based on the Theory of Planned Behavior (TOPB); it includes 19 questions that measure the perception of staff, and is divided into five factors: attitude (8 items), perceived behavioral control (4 items), subjective norm (4 items), intention (2 items) and behavior (1 item). The items are formulated as statements using a five point Likert scale ranging from 1 (totally disagree) to 5 (totally agree); another six related questions were added to monitor the process of NIDCAP implementation. Questions related to participants’ characteristics and open ended questions were formulated to explore the staff experiences during the NIDCAP training implementation.

Procedure: After Institutional Review Board approval his participants were invited to answer an anonymous online survey after being briefed about the study.

Statistical Analysis: The Statistical Package for Social Sciences (SPSS), version 24 will be used for quantitative analysis. Mean scores and 95% confidence intervals of the means will be calculated for the 19 items measuring the impact of NIDCAP on NICU conditions.

Results/Findings
The Institutional Review Board approval has been secured. The questionnaire was adapted and piloted by five health care professional for clarity of content and applicability to our setting. They stated the tool is simple, easy to use and applicable to our setting; the language is clear and the content is understandable. No modifications to the existing questions were made. Additional questions were added as described above.

Analysis will be done after completion of the survey. Results will be compared amongst the different participants’ based on their demographic characteristics. The content of the open ended questions will also be analyzed.

Conclusion
There is limited research exploring challenges faced by NICU nurses during the implementation of NIDCAP training in a middle income setting. This study will be the first to describe nurses’ perception regarding the impact of NIDCAP training on infant well-being, parental participation and staff development. Understanding barriers in this particular setting of an Arabic speaking country will help translate NIDCAP theory to practice in other settings similar to ours. Findings would serve as grounds for us and others to promote and improve NIDCAP implementation in limited resource areas.