

Awareness And Opinion Regarding Nurse Practitioner In Midwifery Course Among Stakeholders At Healthcare Settings In Delhi: A Descriptive Study

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Abstract:

Background: Nurse Practitioners in Midwifery (NPMs) play a crucial role in maternal and neonatal healthcare, yet their integration into healthcare system varies globally. **Objectives:** to assess the awareness and opinion regarding Nurse Practitioner in Midwifery course of stakeholders, to find the difference between awareness and opinion of stakeholders, to find the relationship between the awareness and opinion of stakeholders and to find the association of awareness and opinion of stakeholders with selected socio-demographic variables. **Methods and material:** A descriptive survey was conducted with a sample of 600 stakeholders (Doctors, Nursing Faculty and Practicing Nurses) using purposive and snowball sampling technique. **Tool:** socio-demographic variables, Structured Awareness Questionnaire using multiple choice questions and Structured Opinion Rating Scale using five-point Likert scale. After obtaining ethical clearance the data was collected with the help of Google form and consent taken from the stakeholders. **Results:** The findings show that majority 116 (59.8%) doctors, 128 (63.05%) nursing faculty and 128 (63.05%) practicing nurses were having adequate awareness about NPM course. Total number of 35 (18.04%) doctors, 51 (25.1%) nursing faculty and 48 (25.12%) practicing nurses were having moderately adequate awareness about NPM course. Remaining 43 (22.2%) doctors, 24 (11.8%) nursing faculty and 27 (11.82%) practicing nurses were having inadequate awareness about NPM course, majority 104 (53.6%) doctors, 107 (52.7%) nursing faculty, 109 (53.7%) practicing nurses had neutral opinion. Total 83 (42.8%) doctor, 89 (43.8%) nursing faculty and 86 (42.4%) practicing nurses had favorable opinion. Remaining 7 (3.6%) doctors, 7 (3.4%) nursing faculty and 8 (3.9%) practicing nurses had unfavorable opinion. There were no significant differences in awareness and opinion of different stakeholders at 0.05 level of significance. There was a weak negative correlation between awareness and opinion of stakeholders regarding NPM course, which was significant at 0.05 level of significance. There was a significant association of awareness of stakeholders with the selected socio-demographic variables (age, gender and years of experience) at 0.05 level of significance. **Conclusion:** The study concluded that there was an adequate awareness, and neutral opinion about NPM course among stakeholders. While the introduction of the NPM course holds promise for strengthening midwifery services, concerted efforts are required to bridge knowledge gaps and align stakeholder perceptions with the course's objectives. By fostering a well-informed and supportive environment, the full potential of Nurse Practitioners in Midwifery can be realized, ultimately contributing to improved healthcare outcomes in Delhi.

Keywords: Awareness, Opinion, Nurse Practitioner in Midwifery, Advance practice nurse.

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I. Introduction

The word midwife in the true sense means “being with women.” Over many centuries, midwifery practices have transformed along with advancement and development in scientific medicine. The first Midwives Act was passed in 1902 in the British Parliament, recognizing midwives as independent practitioners.¹

Nurses are the most widely distributed professional group performing most diverse roles when compared to any other health professional. If millions of nurses in a thousand places articulate the same ideas and convictions about primary care, and come together as one force, they could act as a power house for change.³

The Maternal Mortality Ratio (MMR) of India has reduced from 301 maternal deaths per 100,000 live births in 2001–03 as per the Registrar General of India, Maternal Mortality Ratio (MMR) of India for the period 2018-20, as per the latest report of the national Sample Registration system (SRS) data is 97/100,000 live births, declining by 33 points, from 130/100,000 live births in 2014-16. This translates to 8,580 additional mothers saved annually in 2020 as compared to 2016.⁴

Still, this impressive increase has not led to an expected commensurate decline in maternal and neonatal mortality. Nearly 32,000 pregnant women in 2019 lost their lives during pregnancy, childbirth and the postnatal period. In addition, 5,90,000 newborns die each year in the first month of life. The neonatal mortality rate (NMR) in India was 24 per 1000 live births in the year 2019-21, whereas the early neonatal mortality rate is 18 per 1000 live births which is a serious cause of concern.⁵

There is a need for improving quality of care during intrapartum period in public and private healthcare institutions. Many pockets of populations within India face an acute shortage of trained human resources.⁵

The midwifery initiative was launched in the year 2018 by the Government of India in view to improve the quality in the care provided to the maternal and child health of the country. Inference to the above initiative a new cadre titled as Nurse Practitioner in Midwifery (NPM) is created who will be skilled and trained to render women centered care in reference to the international confederation of Midwives (ICM). The main reason is non access to the primary care services by the people at the grass-root level, mainly due to lack of trained health-care resources.⁵

Considering the necessity for trained human resources to give quality care to 30 million pregnancies each year in India and at a similar time recognizing the challenges earlier, Government of India has proposed an alternate model of service provision for strengthening reproductive, maternal and neonatal health services by nurse practitioners in midwifery through Midwife Led Care Units (MLCUs).⁹

The NPM is a registered nurse-midwife with an additional 18 months of post basic training in midwifery. Generally, 'in service' candidates who are GNM/BSc level staff nurses with 2 years of experience in maternity care are eligible for 18 months NPM training. This training will enable them to combine high quality clinical skills with evidence-based decision making. The education and training of NPMs must be carried out at accredited NPM Training Institutes recognized by INC. Training must be skill based and should be in accordance to the 'Essential Competencies for Midwifery Practice (2018 Update)' defined by International Confederation of Midwives.⁵

The provision of midwife-led continuity of care by competent midwives has been shown to decrease neonatal deaths by 16% and preterm births by 24%. Midwives provide care related not only to health outcomes that reduce mortality morbidity but also to patients' overall health and well-being, ensuring mother-baby bonding and family participation.⁹

There is an increased need for NPs because of increasing health problems and significant health disparities. According to census of India 2011, 83.3 crore (70%) live in rural areas, while 37.7 crore stay in urban areas where 75 percent of Indian medical practitioners are positioned.¹²

Objectives

- To assess the awareness and opinion regarding Nurse Practitioner in Midwifery course among stakeholders working in healthcare settings in Delhi.
- To find the difference in awareness and opinion regarding Nurse Practitioner in Midwifery course among stakeholders.
- To find the relationship between the awareness and opinion regarding Nurse Practitioner in Midwifery course among stakeholders.
- To find the association between awareness and opinion of stakeholders with selected demographic variables.

II. Methods And Materials

A descriptive study design was used to accomplish the objectives. Study was undertaken on 600 stakeholders working in selected healthcare settings in Delhi by using purposive and snowball sampling technique. Participants were selected based on inclusion criteria. Socio-demographic variables, structured awareness questionnaire and structured opinion rating scale were used to assess the level of awareness and opinion regarding nurse practitioner in midwifery.

Tool

The data was collected by using socio-demographic variables, structured awareness questionnaire and opinion rating scale and the content validity of the tool was established by nine nursing experts in the field of Obstetrics and Gynecology and nursing education.

Description of the Tool

In order to meet the objectives of the study, the following tools were constructed which consists of three sections:

Section I: Socio-Demographic data - It consists of age, gender, education, profession (Doctor, Practicing Nurse, Nursing Faculty), years of experience.

Section II: Structured awareness questionnaire

Section III: Structured opinion rating scale

Data Collection

For conducting the main study, the data collection period was scheduled from 15 January 2024 to 31st January 2024. After getting ethical clearance from the Ethical Committee of Holy Family Hospital, New Delhi, a formal permission was obtained from participants and were informed regarding the study.

III. Results

Frequency and percentage distribution of socio-demographic variables of the stakeholders.

Table 1: Frequency and percentage distribution of socio-demographic variables of the stakeholders.
n = 600

S. No.	Socio-Demographic Variable	Frequency (f)	Percentage (%)
1.	Age in years		
	21-30 years	288	47.76
	31-40 years	181	30.01
	41-50 years	104	17.24
	51-60 years	27	4.47
2.	Gender		
	Male	145	24.04
	Female	455	75.45
3.	Education		
	Diploma Nursing	139	23.05
	BSc Nursing	146	24.21
	MSc Nursing	116	19.23
	PhD Nursing	4	0.66
	MBBS	36	5.97
	MS/MD/DNB	125	20.72
MCh/DM	34	5.63	
4.	Profession		
	Doctor	194	32.17
	Nursing faculty	203	33.66
	Practicing Nurse	203	33.66
5.	Years of experience		
	Less than 1 year	109	18.07
	1 – 5 years	209	34.66
	5 – 10 years	142	23.54
	10 – 20 years	95	15.75
	More than 20 years	45	7.46

Data in Table-1 shows that majority of stakeholders 288 (47.76%) were in the age group of 21-30 years, 181(30.01%) were in age group 31-40 years, 104(17.24%) were in the age group 41-50 years and 27 (4.47%) were in the age group 51-60 years. Majority of stakeholders 455 (75.45%) were females and 145 (24.04%) were males. In the term of education, majority of stakeholders 146 (24.21) were B.Sc. Nursing, 139 (23.05%) were Diploma in Nursing, 125 (20.72%) were MS/MD/DNB, 116(19.23%) were M.Sc. Nursing, 36(5.97%) were MBBS, 34(5.63%) were MCh/DM and 4(0.66%) were PhD in Nursing. Majority of stakeholders 203 (33.66%) were Nursing faculty and 203 (33.66%) were practicing nurses and 194 (32.17%) were Doctors. As per years of experience, majority 209 (34.66) were between 1-5years of experience, 109 (18.07%) were less than 1year experience, 142 (23.54%) were between 5-10 years of experience, 95 (15.75%) were between 10-20 years of experience, and 45 (7.46%) were more than 20 years of experience.

Table-2: Frequency and percentage distribution of level of awareness regarding nurse practitioner in midwifery among stakeholders.

n = 600

Level of Awareness	Frequency	Percentage (%)	Mean	SD	Range of score	Total score
Adequate (>8)	372	61.69	8.27	2.32	1-10	16
Moderately Adequate (6 – 8)	134	22.22				
Inadequate (<6)	94	15.58				

Data in Table-2 shows that majority of stakeholders 372 (61.69%) were having adequate awareness, 134 (22.22%) stakeholders were having moderately adequate awareness and 94 (15.58%) stakeholders were having inadequate awareness.

Table-3: Frequency and percentage distribution of level of opinion regarding nurse practitioner in midwifery course among stakeholders.

n = 600

Categories	Doctor		Nursing faculty		Practicing Nurses		Mean	SD	Range of score	Total score
	f	%	f	%	f	%				
Unfavourable	7	3.6	7	3.4	8	3.9	71.7	13.7	1-18	20
Neutral	104	53.6	107	52.7	109	53.7				
Favourable	83	42.8	89	43.8	86	42.4				

Data in Table-3 shows that majority 104 (53.6%) of doctors were having neutral opinion, 83 (42.8%) doctors were having favorable opinion and 7 (3.6%) doctors were having unfavorable opinion. Majority 107 (52.7%) of nursing faculty were having neutral opinion, 89 (43.8%) nursing faculty were having favorable opinion and 7 (3.4%) nursing faculty were having unfavorable opinion. Majority 109 (53.7%) of practicing nurses were having neutral opinion, 86 (42.4%) practicing nurses were having favorable opinion and 8 (3.9%) practicing nurses were having unfavorable opinion.

Table-4: Findings related to mean, standard deviation and f-value of difference in awareness regarding Nurse Practitioner in Midwifery course among stakeholders using ANOVA.

n = 600

Stakeholders	Mean	SD	f-value	p-value
Doctor	7.82	2.92	1.437	0.239
Nursing Faculty	8.64	1.82		
Practicing Nurses	8.36	2.32		

Note: p<0.001, S – Significant

Data in Table-4 shows that for awareness questionnaire. Mean awareness of doctors was 7.82 with standard deviation 2.92, Mean awareness of nursing faculty was 8.64 with standard deviation 1.82 and Mean awareness for practicing nurses was 8.36 with standard deviation 2.32. The calculated F-value was 1.437 (p-0.239) which was not significant at 0.05 level of significance. Hence null hypothesis (H₀) was accepted and failed to accept the research hypothesis. This indicates that there is no significant difference in awareness regarding Nurse Practitioner in Midwifery course among stakeholders at 0.05 level of significance.

Table-5: Findings related to mean, standard deviation and f-value of difference in opinion regarding Nurse Practitioner in Midwifery course among stakeholders using ANOVA.

n = 600

Stakeholders	Mean	SD	F-value	p-value
Doctor	71.88	14.4	0.931	0.395
Nursing Faculty	72.46	14.2		
Practicing Nurses	70.64	12.5		

Note: p<0.001, S – Significant

Data in Table-5 shows that Mean opinion for doctors was 71.88 with standard deviation 14.4, Mean opinion for nursing faculty was 72.46 with standard deviation 14.21, Mean opinion for practicing nurses was 70.64 with standard deviation 12.54. The calculated F-value was 0.931 (p-0.395) which was not significant at 0.05 level of significance. Hence null hypothesis (H₀) was accepted and failed to accept the research hypothesis. This indicates that there is no significant difference in opinion regarding Nurse Practitioner in Midwifery course among stakeholders at 0.05 level of significance.

Table-6: Karl Pearson’s coefficient correlation between awareness and opinion regarding Nurse Practitioner in Midwifery course among stakeholders.

n = 600

Variables	Mean	S.D.	“r”-value	p-value
Awareness Score	8.27	2.32	-0.123	0.003
Opinion Score	71.7	13.7		

Note: p<0.001, S – Significant

Data in Table-6 shows that, mean awareness score was 8.27 with standard deviation 2.32 and mean opinion score was 71.7 with standard deviation 13.7. The calculated “r”-value was -0.123 (p-0.003) which indicates there was a negative weak correlation between awareness and opinion of stakeholders regarding NPM course which was significant at 0.05 level of significance that indicates as awareness increases, opinion decreases

regarding NPM course. Hence, we reject the null hypothesis (H0₂) and accept the research hypothesis. This indicates that there is a significant relationship between the awareness and opinion regarding Nurse Practitioner in Midwifery course among different professions of stakeholders at 0.05 level of significance.

**Table-7: Association of awareness of stakeholders with selected socio-demographic variables).
n=600**

Socio-Demographic Variables	Doctor		Nursing faculty		Practicing Nurse		χ ² value	p-value
	f	%	f	%	f	%		
Age							101.5*	<0.001
21 – 30 years	43	22.2	112	54.4	133	65.5		
31 – 40 years	71	36.6	65	31.5	45	22.2		
41 – 50 years	60	30.9	23	11.2	21	10.3		
51 – 60 years	20	10.3	3	1.4	4	1.9		
Gender							135.9*	<0.001
Male	104	53.6	18	8.7	23	11.3		
Female	90	46.4	185	89.8	180	88.7		
Years of experience							88.6*	<0.001
<1 year	11	5.7	34	16.5	64	31.5		
1-5 years	47	24.2	94	45.6	68	33.5		
5-10 years	64	33.0	44	21.3	34	16.7		
10-20 years	45	23.2	24	11.6	26	12.8		
> 20 years	27	13.9	7	3.4	11	5.4		

***P<0.05, significant at 0.05 level of significance**

Data in Table-7 shows that the computed chi-square value 101.5 to establish the association of awareness regarding Nurse Practitioner in Midwifery course with age as socio-demographic variable of stakeholders was found to be statistically significant at 0.05 level of significance. The computed chi-square value 135.9 to establish the association of awareness regarding Nurse Practitioner in Midwifery course with gender as socio-demographic variable of stakeholders was found to be statistically significant at 0.05 level of significance. The computed chi-square value 88.604 to establish the association of awareness regarding Nurse Practitioner in Midwifery course with years of experience as socio-demographic variable of stakeholders was found to be statistically significant at 0.05 level of significance. Hence, we reject the null hypothesis (H0₃) and accept the research hypothesis concluded that awareness regarding NPM course was found statistically significant with the selected socio-demographic variable (age, gender and years of experience) of stakeholders at 0.05 level of significance.

IV. Discussion

The present study findings showed that the majority of stakeholders (59.8% Doctors, 63% Nursing Faculty and 63% Practicing Nurses) have adequate awareness regarding NPM course. A similar study conducted by **Kulo L et al (2023)**¹¹ assessed awareness regarding Independent Nurse Midwifery Practitioner among Students Nurses and results reported as majority 201 (93.1%) had moderately adequate awareness and majority 214 (99.1%) had moderately adequate interest regarding Independent Nurse Midwifery Practitioner. Another similar study conducted by **Mathew D et al (2016)**³ found awareness among general public, nurses and doctors were 40%, 56% and 13% have average awareness regarding the INP.

The present study findings showed that the majority of stakeholders (53.6% Doctors, 52.7% Nursing Faculty and 53.7% Practicing Nurses) have favourable opinion regarding NPM course. A similar study conducted by **Yadav R et al (2022)**¹³ showed that all the participants had positive opinions about INMP. Another similar study conducted by **Guleria S et al (2019)**¹⁵ showed that majority of doctors, nurses and key informants had high opinion about competency of nurses. But nurses had low opinion score than doctors.

The present study findings showed that there was a very weak negative correlation between awareness and opinion of stakeholders regarding NPM course which was significant at 0.05 level of significance. But similar study of **Kulo L et al (2023)**¹¹ found a weak positive correlation (Correlation value of r=0.278) between awareness and interest which was statistically significant.

The present study found statistically significant with the selected socio-demographic variable (age, gender and years of experience) of stakeholders at 0.05 level of significance. A similar study conducted by **Guleria S et al (2019)**¹⁵ found a significant association opinion score of doctors with their gender; nurses with their age, working experience and previous knowledge about INMP and among key informants with their educational and occupational status.

V. Conclusion

The findings of the present study concluded that majority of stakeholders 372 (61.69%) has adequate awareness regarding Nurse Practitioner in Midwifery course. Majority of stakeholders 320 (53.33%) has neutral opinion regarding Nurse Practitioner in Midwifery course. There is no significant difference between awareness and opinions of stakeholders with different professions at 0.05 level of significance. There is a significant correlation between the awareness and opinion of stakeholders regarding Nurse Practitioner in Midwifery course at 0.05 level of significance. There is a significant association between awareness of stakeholders with selected socio-demographic variables.

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