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"This Nursing Honor's Thesis Research Project Aims to Understand the Barriers and Facillitators to Providing Skin-to-Skin Care during Cesarean Birth from the Perspective of Healthcare Providers

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Project Summary – This Nursing Honors Thesis research project aims to understand the barriers and facilitators to providing skin-to-skin care during cesarean birth from the perspective of healthcare providers.

Numerous studies demonstrate significant association between the practice of skin-to-skin and vaginal birth with positive maternal and newborn outcomes such as improved physiologic stability, enhanced breastfeeding and maternal attachment. Maternal outcomes related to immediate skin-to-skin care after birth include improved scores on tests that measure strength of attachment to baby; improved maternal responsiveness; reduced maternal pain, and improved breastfeeding outcomes. Skin-to-skin care may also reduce maternal stress during a cesarean and improve satisfaction with the surgical experience. Newborn outcomes related to immediate skin-to-skin care include improved physiologic stability, enhanced self-regulation, reduced stress, reduced newborn crying; improved physiologic outcomes; enhanced breast-seeking behaviors, and improved breastfeeding outcomes.

The vast majority of studies about immediate skin-to-skin care were conducted following vaginal birth. A few studies have focused on shortening the time between a cesarean and the beginning of skin-to-skin care; minimizing maternal and newborn separation following a cesarean; and, describing the impact of these interventions on breastfeeding outcomes and maternal satisfaction. Despite the significant improved maternal and newborn outcomes of immediate skin-to-skin care, **no studies** have evaluated physiologic maternal and newborn outcomes, including the measures proposed in this study, when skin-to-skin care begins immediately in the operating room compared to skin-to-skin care that begins in the recovery room or standard care (delayed or absent skin-to-skin care) following a scheduled elective cesarean.

This RCEU project is in conjunction nurse researchers, Ellise Adams and Jeanette Crenshaw, Texas Tech University Health Sciences Center. The funded study is a feasibility/pilot, quasi-experimental, time-interrupted study conducted using a convenience sample at Baylor University Medical Center Dallas. The purposes of this study are to (a) develop a sound research protocol for a larger study measuring the effect of maternal/newborn skin-to-skin care that begins in the operating room (OR) during an uncomplicated cesarean (Group 1) as compared to standard care, defined as maternal and newborn skin-to-skin care that begins after an uncomplicated cesarean (Group 2/Control Group), on maternal nausea, vomiting, and pain; maternal and newborn physiologic stability and stress; maternal satisfaction; and newborn exclusive breast milk feeding rate at hospital discharge; and, (b) to obtain preliminary data that

can be used to answer the following research questions: 1) Is there a difference between maternal nausea and vomiting, pain, temperature and vital signs oxygen saturation, stress and satisfaction when skin-to-skin care begins in the operating room during surgery compared to skin-to-skin care that begins after surgery, in women having an uncomplicated cesarean? 2) Is there a difference in newborn temperature and vital signs oxygen saturation and stress when skin-to-skin care begins in the operating room during surgery compared to skin-to-skin care that begins after surgery, in women having an uncomplicated cesarean? And 3) Is there a difference in exclusive breast milk feeding rates at hospital discharge when skin-to-skin care begins in the operating room during surgery compared to skin-to-skin care that begins after surgery, in women having an uncomplicated cesarean?

This proposed RCEU study will be a qualitative study following-up with healthcare providers involved in the Baylor study. The student researcher will use validated, qualitative questions from the Adams/Crenshaw Skin-to-Skin Beliefs instrument.

Student Prerequisites – The student must be accepted into the Honors College, the College of Nursing and be in academic good standing. Ideally the honor student will be enrolled in an honors section of NUR 307 or have completed. The student must also be available for travel to the clinical site.

Student Duties –

The student researcher will begin with a thorough literature review related to the topic, skin-to-skin care in the operating room. The student will be involved in data collection, data analysis and discovery of findings in the larger outcomes study conducted by Dr. Adams. In addition, the study will create a thorough database of all healthcare providers who participated in the care provided to participants in the larger outcomes study. Contacts will be made by the student researcher through a variety of methods but be limited to personal, voice-to-voice interactions. Data will be collected, recorded and transcribed by the student researcher. Narrative content analysis will occur in collaboration with Dr. Adams and validated by Dr. Crenshaw. The data analysis is expected to provide an understanding of barriers and facilitators related to providing skin-to-care for mothers and newborns in the operation room setting.

This summer experience will contribute to the honor student's thesis submitted to the UAH Honors College prior to graduation. Additionally, the student researcher will be expected to develop a publishable manuscript or poster presentation detailing this project.

This project will afford multiple benefits to the student researcher. First, the student will be able to be involved in a larger outcomes study that is funded and conducted at a larger, urban teaching hospital. Secondly, the student will have the opportunity to work with not only Dr.

Adams but Dr. Crenshaw who is an expert in the field of skin-to-skin care and the Chair Elect, Board of Directors, the United States Breastfeeding Committee. This is a benefit rarely gleaned by an undergraduate student at this stage of nursing school.

Mentor Supervision and Mentoring –During this 10 week RCEU experience Dr. Adams will supervise all research activities. The student will maintain weekly sessions for the purpose of reviewing and synthesizing literature, knowledge obtained in the clinical setting and other information gathered during the student's experience. Later in the semester, weekly sessions will be used to guide the student researcher in data analysis, writing the results, poster production and manuscript development. Written and verbal feedback related to all aspects of the research process will be provided to the student resesarcher.