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## **Judgment related to the Interaction Mother with Nurse in Caring for preterm infants**

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### **Abstract**

Treatment requires that preterm infants admitted to the NICU infants. Isolation and strict observation for in the NICU is a source of considerable stress for parents, especially mothers. Stress experienced by the mother will lead to inability in making decisions that affect the interaction with nurses. Judgment made mothers of preterm infants is accept or reject the state of her baby. This attitude will affect the interaction when dealing with nurse. The purpose of this study was to analyze the relationship between judgment and interaction mother in caring for preterm infants. Analytic observational study on mothers of preterm infants in several hospitals in the city and Mojokerto in August until October 2014. The study sample of 56 samples by consecutive sampling. The research variables are Judgment and interactions. The research instrument used questionnaires to measure judgment and checklists to measure interactions. Data is presented in a frequency distribution table and tested with Pearson correlation to analyze the relationship between judgment and interaction mother. The result showed the highest maternal judgment in the low category (69.65%) and maternal interactions are mostly in the low category is 64.3%. Pearson correlation test showed  $p = 0.000$ . There is a relationship between judgment and interaction. The higher decision the higher interaction. Mothers aware of the state of their babies requiring intensive care will be able to take the right decision. The right decision will cause the interaction will take place with a good mother because the mother realized the importance of information and health education are sufficient to implement ways of treatment of preterm infants after discharge from the hospital.

**Keywords:** Judgment; Interaction; Preterm Infant; Nurse.

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## **1. Introduction**

Treatment of preterm infants in the NICU done [1]. Ratio of nurses and baby actually monitored and addressed if preterm infants admitted to the NICU. Isolation and strict observation for in the NICU is a source of considerable stress for parents due to the cost factor, the factor of time and extra attention. Stress includes concern for the survival of infants and the potential effects on the development of life [2].

Parents tend to see themselves as secondary caregivers for infants, while nurses in the NICU is seen as the primary caregiver [3]. Parental stress and competence in caring for preterm infants less have long-term implications for children and parents as well; so as to delay the achievement of the role of parents [4].

Preliminary studies conducted by researchers at the General Hospital in one of the main cities in East Java shows the incidence of preterm birth is high [5]. Data obtained from medical records from 2009 through 2014 showed the incidence of preterm birth is still above 12%. Head room Perinatal stated that the treatment of preterm infants in the NICU stationed there and in the isolation room. During hospitalization, nursing mothers interaction occurs when the mother came to breastfeed performed 3 to 4 times a day.

Maternal interaction with nurses who are lacking in infant care during hospital will cause an independent in treating infants after discharge from the hospital. Mothers are less able to recognize the symptoms and signs of problems that occur in babies at risk and therefore cannot provide proper care to their infants after discharge from the hospital. The role of parents who are less will cause preterm infants experiencing growth disorders during their lifetime<sup>4</sup>.

Important task nurses to design and assess interventions that focus on the mother and baby. The purpose of intervention, so that the mother can maximize interaction with nurses so get experience for the baby at the hospital. Complaints mother and maternal difficulties in caring for the baby in the hospital can be addressed during the interaction and can apply self-care in preterm infants after discharge from the hospital. Imogene M. King. King [6] explains that nursing is an open system framework, and this theory as the basis of the achievement of goals. Achievement goals in theory King built through perceptions, judgments and actions of patients and nurses. These three components will form the interaction and ends on the achievement of objectives (transactional). This theory is appropriate when applied to the interaction between mothers of preterm infants with a nurse. Many research and studies that support the theory King centered on the technical aspects of client care and nursing care systems. This theory is adequate, and the logical sequence of events in nursing [7].

## **2. Materials and Methods**

Correlation studies using analytical methods. The approach used is cross sectional. Population is the mother who gave birth to a baby preterm in one city in East Java. The sample size is 56 samples. Sampling technique using consecutive sampling inclusion criteria were selected with a minimum of elementary education, the mother gave birth to a single baby and was born spontaneously, 2000-2500 grams body weight, gestational age 34-37 weeks and spawned the first time. Variable research that judgment and interaction mothers of preterm infants. The instrument used was a questionnaire to measure judgment and checklists to measure interactions with nursing

mothers. Data were analyzed using Spearman rank test.

### 3. Results and Discussion

The results of the study as shown in the table below:

**Table 1:** Distribution of Frequency Variable Capital Factors, Sub Mothers of preterm infants Judgment Variables in dr. Wahidin Sudiro Husodo Mojokerto and Hospital Prof. Dr Soekandar Mojokerto 2014

| No | Judgment Indicator       | Category |      |       |      |      |      | Total |     |
|----|--------------------------|----------|------|-------|------|------|------|-------|-----|
|    |                          | Less     |      | Quite |      | Good |      | Σ     | (%) |
|    |                          | (f)      | (%)  | (f)   | (%)  | (f)  | (%)  |       |     |
| 1  | treat infants with apnea | 47       | 87,5 | 0     | 0    | 9    | 12,5 | 56    | 100 |
| 2  | PreventionHipotermi      | 30       | 53,6 | 21    | 35,5 | 5    | 8,9  | 56    | 100 |
| 3  | To meet nutrition        | 51       | 91,1 | 0     | 0    | 5    | 8,9  | 56    | 100 |
| 4  | Prevention infection     | 37       | 66,1 | 16    | 28,6 | 3    | 5,4  | 56    | 100 |

Based on Table 1 Mothers of preterm infants in reaching a judgment when faced with the problems faced by the baby while experiencing apnea is still lacking in the amount of 87.5%, as well as in how to deal with hypothermia and how to meet the nutritional needs. Being the mother's judgment when the baby at risk of infection mostly in the poor category is equal to 66.1%.

**Table 2:** Distribution of Frequency Variable Interactions Mothers of preterm infants in dr. Wahidin Sudiro Husodo Mojokerto and Hospital Prof. Dr Soekandar Mojokerto 2014

| No | Interaction indicator  | Category |      |       |      |      |     | Total |     |
|----|------------------------|----------|------|-------|------|------|-----|-------|-----|
|    |                        | Less     |      | Quite |      | Good |     | Σ     | (%) |
|    |                        | (f)      | (%)  | (f)   | (%)  | (f)  | (%) |       |     |
| 1  | <i>Attending skill</i> | 42       | 75   | 11    | 19,6 | 3    | 5,4 | 56    | 100 |
| 2  | <i>Respect</i>         | 36       | 64,3 | 17    | 30,3 | 3    | 5,4 | 56    | 100 |
| 3  | <i>Empaty</i>          | 41       | 73,2 | 10    | 19,9 | 5    | 8,9 | 56    | 100 |
| 4  | <i>Responsiveness</i>  | 42       | 75   | 11    | 19,6 | 3    | 5,4 | 56    | 100 |

Data Table 2 shows that the preterm infant's mother has a skill attending mostly in the category of less that 75%, respect mother nature take care of preterm infants also largely lacking categories of 64.3%. Likewise, maternal

empathy and responsiveness most categories of less respectively by 73.2% and 75%.

Statistical analysis showed  $p = 0.000$  value of  $\alpha > p$ . The judgment thus affects the interaction. The results of this study prove judgments significantly influence the interaction. This situation can be explained that the judgment is a dynamic and systematic process whereby goal-directed alternative option, felt, made and acted upon by an individual or group to answer questions and goals (King, 1990). Judgment-making occurs when the choices made in the allocation of resources to support the goals of the system. Resources include both people (health professionals and their clients) and money, goods, and services for the items needed to carry out certain activities. Mothers should be conscious, active, and cognitively able to participate in making or judgment.

In the context of this study maternal judgment faced with the choice of action to treat infant apnea, preventing hypothermia, meet nutrition and prevent infection. Mothers are required to take the right judgments when the baby is having problems. Mother right judgment, will determine the safety of preterm infants at risk of having problems at any time due to immaturity of the organs. The better the mother's judgment the better the interaction with the nurse in the care of preterm infants. Conversely the less the mother's judgment, the interaction with the nurse's mother is also getting less. A significant relationship between the two variables shows that the mother's judgment striving to increase interaction with nurses in caring mothers of preterm infants.

#### 4. Conclusions and Recommendations

1. Interaction effect on the mother's judgment in the care of preterm infants. Good interaction will increase the mother's perception of preterm infants so that the mother can take good judgments in determining the treatment of preterm infants.

#### 2. Suggestions

- a. Preterm infant's mother to keep active asked the nurse or midwife who cared for the baby of the difficulties in taking care of babies.
- b. Nurses to always involve the mother in caring for her baby so she experienced in caring for her baby.
- c. Hospitals provider makes standard operating procedure maternal involvement in the care of preterm infants.

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