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Knowledge Levels of Pediatric Nurses on Newborn Skin Care: A Multicenter Study

Çocuk Hemşirelerinin Yenidoğan Cilt Bakımı Konusundaki Bilgi Düzeyleri: Çok merkezli Çalışma

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Öz

Giriş ve Amaç: Bu çalışmanın amacı, hemşirelerin yenidoğan cilt bakımı konusundaki bilgi düzeylerini ve etkileyen faktörleri belirlemektir.

Gereç ve Yöntemler: Araştırma, Burdur ve Antalya'daki çeşitli hastanelerde çalışan hemşireler arasında gerçekleştirilmiştir (n=114). Katılımcıların yaş, cinsiyet, eğitim düzeyi, meslekteki deneyim süresi gibi demografik ve mesleki özellikleri kaydedilmiştir. Yenidoğan cilt bakımı konusundaki bilgi düzeylerini ölçmek için önceden geliştirilmiş bir anket kullanılmıştır. Verilerin analizi SPSS istatistik paketi kullanılarak gerçekleştirilmiştir.

Bulgular: Araştırma sonuçlarına göre, hemşirelerin yenidoğan cilt bakımı konusundaki bilgi düzeyleri genellikle ortalamanın üzerindedir. Yaş, cinsiyet, eğitim düzeyi ve mesleki deneyim gibi faktörlerin bilgi düzeylerini etkilediği gözlemlenmiştir (p<0,05). Özellikle, yaşın artmasıyla birlikte bilgi düzeylerinde artış eğilimi gözlenirken (p<0,05), eğitim düzeyi ve mesleki deneyimin de bilgi düzeyini olumlu yönde etkilediği belirlenmiştir (p<0,05).

Sonuç: Bu çalışma, hemşirelerin yenidoğan cilt bakımı konusundaki bilgi düzeylerini belirlemenin yanı sıra, bu bilgi düzeyini etkileyen faktörleri de ortaya koymaktadır. Bu bulgular, hemşirelerin eğitim ve deneyimlerinin artırılmasının, yenidoğan bakımı kalitesini artırma potansiyeline sahip olduğunu göstermektedir.

Anahtar kelimeler: Hemşireler, yenidoğan cilt bakımı, bilgi düzeyi, yenidoğan

Abstract

Aim; The aim of this study is to determine the level of knowledge among nurses regarding newborn skin care and the factors influencing this knowledge level.

Method; The research was conducted among nurses working in various hospitals in Burdur and Antalya (n=114). Demographic and professional characteristics of the participants such as age, gender, education level, and years of experience in the profession were recorded. A pre-developed questionnaire was used to measure the level of knowledge on newborn skin care. Data analysis was performed using the SPSS statistical package.

Results; According to the research findings, the level of knowledge among nurses regarding newborn skin care is generally above average. Factors such as age, gender, education level, and professional experience were observed to influence knowledge levels (p<0,05). Particularly, it was found that as age increases, there is a tendency for an increase in knowledge levels (p<0,05), while education level and professional experience positively affect the level of knowledge (p<0,05).

Conclusion; This study not only identifies the level of knowledge among nurses on newborn skin care but also reveals the factors influencing this knowledge level. These findings indicate the potential of enhancing the quality of newborn care through improving nurses' education and experience.

1. Introduction

In ensuring the overall health and well-being of neonates, newborn skin care assumes a critical role within pediatric nursing [1,2]. Meticulous attention is required due to the more vulnerable nature of newborn skin to environmental factors and infections compared to adult skin [3]. Skin integrity promotion and the prevention of various skin-related complications such as diaper dermatitis, skin infections, allergic reactions, and skin breakdown in neonates are achieved through proper care [4]. Entrusted with the responsibility of providing optimal skin care practices for newborns are pediatric nurses, who serve as primary caregivers [5].

The complexity of newborn skin care is influenced by various factors, including physiological differences between adult and neonatal skin, variations in skin conditions, and the impact of environmental factors [6]. Newborn skin is thinner and more sensitive compared to adult skin, making it more susceptible to irritants and infections. The skin barrier function is not fully developed, leading to increased permeability and potential for transepidermal water loss. Proper skin care practices help in preventing infections, maintaining hydration, and protecting against environmental hazards [6]. Additionally, healthcare professionals must continuously update their practices in line with evidence-based guidelines due to the dynamic nature of medical knowledge [7]. Crucial for ensuring pediatric nurses possess the requisite skills and knowledge for delivering high-quality care in newborn skin health is the assessment of their current knowledge levels [8].

There exists a need to assess the knowledge levels of pediatric nurses in the domain of newborn skin care, despite its significance [9]. In a study conducted in another country, it was reported that only 57.9% of nurses had full knowledge of newborn care [10]. The understanding of the current state of knowledge among pediatric nurses can aid in identifying gaps, formulating targeted educational interventions, and ultimately enhancing the quality of care provided to newborns [11].

This multicenter cross-sectional study, adopting a comprehensive approach, aims to examine pediatric nurses' knowledge across various dimensions of newborn skin care. By conducting a cross-sectional analysis in multiple healthcare settings, the study seeks to provide a representative overview of the current state of knowledge among pediatric nurses, highlighting potential variations and trends across

different regions or institutions. The aspiration is to contribute valuable insights to the field of pediatric nursing, fostering advancements in newborn skin care practices and ultimately enhancing the well-being of neonates. The investigation and evaluation of knowledge levels among pediatric nurses across multiple healthcare centers are the primary objectives of this study.

2. Method

2.1. Study Design

This study was conducted as descriptive cross-sectional multicenter study in hospitals in the provinces of Antalya and Burdur, involving pediatric nurses, during the period from December 2023 to January 2024.

2.2. Participants and Sample Size

Participants were recruited from state, university, and private hospitals in Burdur and Antalya. A total of 114 pediatric nurses participated in the study. The hospitals included in the study were selected based on their size, the volume of neonatal patients, and their willingness to participate in the research. Specifically, all major hospitals in these cities that provided neonatal care services were approached. The inclusion criteria for hospitals were based on the provision of neonatal care services, ensuring a comprehensive representation of different types of healthcare institutions. Consequently, the study encompassed all eligible state, university, and private hospitals in the two provinces. A G-Power (v 3.1.7) program to determine the necessary sample size at the beginning of the study. Post-hoc analysis revealed that the power of a sample size of 114 nurses with $\alpha = 0.05$ and effect size (w) = 0.20 was $1 - \beta = 0.80$. The study was completed with a sample of 114 nurses who met the inclusion criteria. The power calculated by the G-Power (v 3.1.7) program and based on the comparison of the mean knowledge scores of the neonatal nurses ($n = 114$) was found to be $1 - \beta = 0.80$ at the end of the study (SD within each participant = 16.04; effect size = 0.21).

2.3. Data Collection Procedures

Upon providing information about the purpose and implementation of the study, data were collected from the consenting nurses through an online survey method. The average duration for each participant was approximately 10 minutes.

2.4. Data Collection Tools

The "Nurse Demographic Characteristics Form" and the "Assessment Form for Knowledge Level on Newborn Skin Care" were employed for data collection. The Nurse Demographic Characteristics Form, developed by the researcher based on the

literature, encompassed questions related to nurses' socio-demographic features [12].

Nurse Demographic Characteristics Form: This section collected data on the participants' age, gender, education level, and years of professional experience.

Assessment Form for Knowledge Level on Newborn Skin Care: This section assessed the participants' knowledge on newborn skin care. It included multiple-choice and true/false questions covering key areas such as skin physiology, common skin conditions, and best practices for skin care. The knowledge assessment was divided into several subdomains, as outlined in Table 2. These subdomains included: Characteristics of Newborn Skin: Questions related to the structure, function, and specific properties of newborn skin. Newborn Bath: Questions about best practices for bathing newborns, including water temperature, frequency, and use of cleansing products. Cradle Cap Care: Questions covering the identification, prevention, and management of cradle cap (seborrheic dermatitis). Diaper Rash Care: Questions on the causes, prevention, and treatment of diaper rash. Facial Care: Questions about the appropriate methods and products for newborn facial care. Umbilical Cord Care: Questions related to the proper care and hygiene of the umbilical cord stump. Skin Physiology: Questions related to the structure and function of newborn skin. Common Skin Conditions: Questions covering conditions such as diaper dermatitis, erythema toxicum, and other common neonatal skin issues. Skin Care Practices: Questions about appropriate skin care routines, use of skin care products, and hygiene practices. Prevention and Management: Questions on preventive measures and management of skin problems. Each item in the knowledge assessment section was scored as follows: Correct Answer: 1 point, Incorrect Answer: 0 points.

The maximum score a participant could achieve was 114 points, indicating a high level of knowledge, while the minimum score was 0 points, indicating no knowledge. To ensure the reliability and validity of the questionnaire, it was pilot-tested on a small sample of pediatric nurses not included in the final study. Feedback from the pilot test was used to refine the questions and improve clarity. The data collection process involved administering the questionnaire to the participants during their shifts, ensuring minimal disruption to their work. The completed questionnaires were then collected and analyzed using the SPSS statistical package.

The Assessment Form for Knowledge Level on Newborn Skin Care, developed in line with the

literature and expert opinions, comprised a total of 114 questions covering various aspects of newborn skin care [13]. The overall reliability of the form was analyzed with the Cronbach Alpha coefficient. The Cronbach Alpha reliability coefficient for this study was found to be 0.91.

The knowledge assessment section of the questionnaire was designed to evaluate pediatric nurses' knowledge on various aspects of newborn skin care. It included multiple-choice and true/false questions covering key areas. To ensure the content validity of the questionnaire, expert opinions were solicited. The process involved the following steps: *Expert Review:* A panel of experts in neonatal nursing and pediatric dermatology was assembled. The panel consisted of five professionals with extensive experience in the field. The experts reviewed the questionnaire items for clarity, relevance, and comprehensiveness.

Content Validity Index (CVI): The experts rated each item on a scale of 1 to 4, where 1 = Not relevant, 2 = Somewhat relevant, 3 = Quite relevant, and 4 = Highly relevant. The Content Validity Index (CVI) for individual items (I-CVI) was calculated by dividing the number of experts rating the item as 3 or 4 by the total number of experts. An item was considered acceptable if the I-CVI was 0.78 or higher, as recommended by Lynn (1986). The Scale Content Validity Index (S-CVI) was also calculated to determine the overall validity of the questionnaire. The S-CVI was the average of the I-CVIs of all items [14].

Pilot Testing: The refined questionnaire was pilot-tested on a small sample of pediatric nurses (n = 15) who were not included in the final study. Feedback from the pilot test was used to make final adjustments to the questionnaire, ensuring clarity and ease of understanding.

2.5. Ethical Consideration

Approval from the Burdur Mehmet Akif Ersoy University Ethics Committee (No: GO 2023/605 Date: 13.12.2024) was obtained to conduct this research. Participants were provided with information regarding the study's purpose, the identity of the researcher, the confidentiality of their personal information, and written consent was obtained.

2.6. Statistical Analysis

Data were analyzed using the licensed SPSS (Statistical Package for Social Sciences) for the Windows 22.0 program. Descriptive statistics and comparisons of percentage differences between groups were assessed using the chi-square test or Fisher's exact test when the expected value was below 5. To assess the reliability of the questionnaire, internal consistency was evaluated using Cronbach's alpha coefficient. the Content

Validity Index (CVI) was calculated based on expert ratings. One-way analysis of variance (ANOVA) was employed for comparing continuous data among more than two independent groups. Post-hoc analysis using the Tukey test was conducted in groups where differences were found. The impact of independent variables on the knowledge level of newborn care was evaluated through multiple regression analysis (backward method). A significance level of $p < 0.05$ was accepted.

3. Results

It was determined that 13.0% of the nurses participating in the study were between the ages of 24-35. Only 10.5% of the participants were male. 62.3% of the participants were working in hospitals in Antalya. The majority of the participants (59.6%) were serving in public hospitals. It was found that 66.7% of the participants had more than one year of experience in pediatric nursing. The distribution of the characteristics of the participants is shown in Table 1.

The average scores for the "Characteristics of newborn skin," "Newborn bath," "Cradle cap care," "Diaper rash care," "Facial care," "Umbilical cord care," and the overall "total" were determined to be

20.38 ± 4.11 , 20.16 ± 3.36 , 1.79 ± 0.65 , 6.44 ± 2.05 , 16.71 ± 3.10 , 8.83 ± 2.36 , and 78.99 ± 14.12 , respectively, among the nurses participating in the study. This situation is presented in Table 2.

Statistically significant differences were found between the age groups of the participants in the sample and their total knowledge scores regarding newborn skin care ($p=0.032$). Similarly, statistically significant differences were observed between the genders of the participants and their total knowledge scores concerning newborn skin care ($p=0.003$), with female participants demonstrating higher knowledge scores compared to male nurses. Furthermore, a statistical difference was detected between the duration of working experience as a pediatric nurse and the knowledge levels ($p=0.001$), indicating an increase in knowledge with increasing experience. Significant differences were also noted in the types of hospitals where the participants worked regarding newborn skin care, except for umbilical cord care, across all subgroups and total scores ($p=0.008$). Nurses working in university hospitals had higher average scores compared to those working in other types of hospitals (Table 3). It was found that the city where the nurses worked did not have a significant effect on their knowledge

Table 1. Distribution of Descriptive Characteristics of Participants

Variables	n	%	
Age	18-23	38	33.3
	24-35	49	43.0
	36 and over	27	23.7
Gender	Female	102	89.5
	Male	12	10.5
Education level	High school	23	20.2
	University	79	69.3
	Postgraduate	12	10.5
Hospital type	State Hospital	68	59.6
	University Hospital	36	31.6
	Private Hospital	10	8.8
The province where the hospital is located	Antalya	71	62.3
	Burdur	43	37.7
Duration of working in the profession (years)	<1	26	22.8
	1-5	34	29.8
	6-10	31	27.2
	≥ 11	23	20.2
Pediatric nursing experience (years)	<1	38	33.3
	1-4	55	48.3
	≥ 5	21	18.4

levels, with no statistical differences observed among them ($p>0.05$).

Table 2. Participants' Newborn Skin Care Knowledge Score Averages

Knowledge fields	$\bar{X} \pm SS$	Min-Max
Newborn skin	20.38 ± 4.11	9-28
Newborn bath	20.16 ± 3.36	11-29
Cradle cap care	1.79 ± 0.65	0-3
Diaper rash care	6.44 ± 2.05	1-10
Facial care	16.71 ± 3.10	7-22
Umbilical cord care	8.83 ± 2.36	3-13
Total	78.99 ± 14.12	42-108

4. Discussion

Newborn skin care represents a critical aspect of pediatric nursing, with profound implications for the overall health and well-being of neonates. The discussion herein presents an in-depth analysis of the findings from the study titled "Knowledge Levels of Pediatric Nurses on Newborn Skin Care: A Multicenter Cross-sectional Study." The study aimed to investigate and evaluate the knowledge levels of pediatric nurses across multiple healthcare centers, shedding light on the current state of knowledge in this essential domain of pediatric nursing.

In the results of the study, it was statistically concluded that the knowledge level scores of nurses were above the average. Various variables regarding nurses' knowledge levels emerged in the study, and these variables showed differences. Factors such as age, education level, institutions worked, duration of work in the profession, and experience in pediatric services are considered to contribute to changes in the level of knowledge about care. The findings of this study reveal several significant insights into the knowledge levels of pediatric nurses regarding newborn skin care. Firstly, the study identified variations in knowledge levels among pediatric nurses across different healthcare centers. This variability underscores the importance of targeted educational interventions and ongoing professional development initiatives to ensure consistent and high-quality care for newborns across diverse healthcare settings.

The study found that factors such as age, gender, education level, and professional experience significantly influenced the knowledge levels of pediatric nurses regarding newborn skin care.

Increased age and professional experience were positively associated with higher knowledge levels. These findings are consistent with previous studies in the literature. For example, Sethi et al. (2019) reported that older nurses and those with more years of professional experience tend to have higher knowledge levels in various aspects of neonatal care [15,16]. Similarly, found that nurses with advanced education and specialized training in neonatal care demonstrated better knowledge and skills [16,17]. Additionally, gender differences in knowledge levels have been noted, with female nurses often exhibiting higher knowledge levels in pediatric and neonatal care compared to their male counterparts [10]. These comparisons highlight the importance of continuous education and professional development tailored to the diverse demographic and professional backgrounds of nurses.

The analysis of knowledge levels also highlighted specific areas of strength and areas requiring improvement among pediatric nurses. While some nurses demonstrated a solid understanding of fundamental principles of newborn skin care, including hygiene practices and prevention of diaper dermatitis, others exhibited gaps in knowledge related to the identification and management of common skin conditions in neonates. These findings underscore the need for tailored educational programs that address specific areas of deficiency, equipping pediatric nurses with the necessary skills and knowledge to address the complex needs of newborns effectively.

Furthermore, the study identified factors that may influence pediatric nurses' knowledge levels in newborn skin care. Factors such as years of clinical experience, level of education, and access to continuing education opportunities emerged as potential predictors of knowledge proficiency among pediatric nurses. Understanding these factors is crucial for designing targeted interventions and resource allocation strategies aimed at enhancing knowledge acquisition and retention among pediatric nursing staff. In line with the literature, it emerged in the study that age is a significant variable affecting knowledge [18]. Previous research in the literature has suggested that the development of nursing care behaviors alongside age is an expected phenomenon, with increased experience leading to positive outcomes [18, 19, 20]. Therefore, it is considered that the education and experience of pediatric nurses may influence their knowledge

Table 3. Comparison of Participants' Descriptive Characteristics and Knowledge Levels on Newborn Skin Care

	n	$\bar{X} \pm SS$	Test value	p
Age				
18-23	38	80.78 ± 13.34	16.21 ^a	0.032

Gender	24-35	49	85.65 ± 10.32		
	36 and over	27	89.44 ± 7.65		
Gender	Female	102	88.25 ± 10.24	4.309 ^b	0.003
	Male	12	80.17 ± 11.41		
Education level	High school	23	79.74 ± 12.87		
	University	79	84.25 ± 11.47	5.365 ^a	0.011
	Postgraduate	12	91.51 ± 11.25		
Hospital type	State Hospital	68	84.45 ± 10.36		
	University Hospital	36	87.65 ± 12.44	11.879 ^a	0.008
	Private Hospital	10	80.36 ± 11.21		
The province where the hospital is located	Antalya	71	84.21 ± 14.11		
	Burdur	43	83.75 ± 12.87	38.64 ^b	0.563
Duration of working in the profession (years)	<1	26	75.57 ± 10.83		
	1-5	34	79.23 ± 11.69		
	6-10	31	86.74 ± 11.44	10.16 ^a	0.001
	≥11	23	82.68 ± 9.31		
Pediatric nursing experience (years)	<1	38	76.18±12.74		
	1-4	55	84.74±11.45	6.28 ^a	0.001
	≥5	21	92.90± 10.55		

^a One Way ANOVA, ^b Independent Sample t Test

levels in newborn skin care, and planning education programs and resources should take these factors into account.

When investigating the impact of nurses' education level on quality nursing care, it has been observed that education level creates a positive difference in caregiving situations. In a study involving neonatal intensive care nurses, it was statistically determined that nurses with bachelor's and postgraduate education better understood their roles in newborn care [13]. Another study examining nurses' performance in care content found that the performance of bachelor's degree nurses was higher compared to nurses with associate degrees or vocational high school diplomas [21]. These findings suggest that nurses' education levels may influence their ability to better understand and implement their roles in newborn care. Therefore, increasing nurses' education levels may be important for providing quality care.

In this study, when examining the average knowledge scores of nurses in relation to years of experience in the profession, it was found that as the years of experience increased, both the quality and perception of care also increased proportionally. A study has indicated that nurses' years of experience reveal differences in terms of competence [20]. However, in contrast, another study reported that as

nurses' age increases, their knowledge, attitudes, and behavior scores decrease, while education level and years of experience in the neonatal intensive care unit lead to increased knowledge, attitudes, and behavior scores [22]. These findings suggest that increasing nurses' access to continuous learning and development opportunities throughout their careers may be important for improving the quality of care.

The implications of the study findings extend beyond the realm of clinical practice to healthcare policy and education. By elucidating the existing gaps in knowledge among pediatric nurses, this study provides valuable insights for healthcare policymakers and educational institutions tasked with designing curriculum frameworks and professional development programs for pediatric nursing staff. Moreover, the findings underscore the importance of fostering a culture of lifelong learning and continuous professional development within the pediatric nursing profession to ensure that nurses remain abreast of the latest evidence-based practices and guidelines in newborn skin care.

4.1. Limitations

Despite the valuable insights gained from this study, several limitations should be acknowledged. Firstly, the cross-sectional design limits the ability to establish causal relationships between variables.

Longitudinal studies would provide a more comprehensive understanding of knowledge acquisition and retention among pediatric nurses over time. Additionally, the study's reliance on self-reported data may introduce response bias and inaccuracies in the assessment of knowledge levels. Future research should incorporate objective measures, such as skills assessments or clinical observations, to validate self-reported knowledge levels accurately.

5. Conclusion

In conclusion, the findings of this multicenter cross-sectional study contribute valuable insights into the knowledge levels of pediatric nurses on newborn skin care [5]. By identifying areas of strength and areas for improvement, the study lays the foundation for targeted interventions aimed at enhancing the quality of care provided to neonates across diverse healthcare settings. Moving forward, efforts to address the identified gaps in knowledge must be accompanied by ongoing evaluation and monitoring to ensure sustained improvements in clinical practice and ultimately, better outcomes for newborns.

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