

The Impact of Adopting UNICEF Growth and Development Modules in Enhancing Nursing Students' Knowledge: A Qualitative Study

Yousef Aljeesh¹, Mahmoud Ayash^{2*}

¹Islamic University of Gaza, Gaza- Palestine, yjeesh@iugaza.edu.ps

²European Gaza Hospital, Gaza- Palestine, Mahmoudayash1995@hotmail.com

Abstract

Background: The growth and development phase are an essential and critical period of human life, especially in the early stages. It was defined by most professionals as the interval from conception to eight years of age. This interval is vital for brain growth. In addition, these developmental years have a significant and lifelong impact on children. Thus, almost all children in these years need to be well cared. Aim: The study aimed to assess the impact of adopting UNICEF modules on nursing students' knowledge about growth and development concepts. Design: A qualitative study design was used to conduct the study. Participants: 40 nursing students participated in the study. Methods: Four focus nursing students' groups were interviewed. They included two groups of the traditional curriculum, and two others for the modified curriculum according to UNICEF's modules for growth and development. Setting: The study was conducted at the Islamic University of Gaza. Results: Most of the students in the the new curriculum mentioned that they received and learned a lot of knowledge about growth and development themes and subthemes while, unfortunately, the traditional curriculum groups did not. Conclusion: The new curriculum modified according to UNICEF modules for growth and development was effective in enhancing nursing students' knowledge about growth and development concepts.

Keywords: Growth and Development, Nursing Students, Qualitative Study, UNICEF Modules

* corresponding author

1- Introduction

Background

Early childhood is a critical developmental stage in human life. It was defined by most professionals as the interval from conception to eight years of age. This interval is vital for brain growth and its function. Thus, almost all children in this stage need to have good nutrition and healthcare and be closely attached to their primary caregiver and stimulus (Importance of Early Childhood Development | Early Brain Development and Human Development, n.d.). By the age of three to six, the child should begin to have pre-literacy and pre-numeracy skills, share in group activities, have a better sense of self, discover, share playing with peers, and grow self-trust (Engle et al., 2007). This stage is useful for children, especially those who descend from low-income families. It is commonly agreed that enrollment in formal education in primary schools usually begins by the age of six, in which the child will be mature and ready enough to get involved in school study. In addition, a child needs a smooth and good transition from the pre to school phase at the ages of 6-8 years to have a good rhythm of schooling for easy success and great achievement in this educational stage. These developmental years have a significant and lifelong impact on children, so they need much care (Grantham-McGregor et al., 2007), (Suter, 2006), (Shonkoff et al., 2012) & (*In Brief: The Science of Early Childhood Development*, n.d.).

It is also important to build a good and strong foundation for healthy early children's growth and development in the early years of their lives. These actions will positively impact their health, wellness, success, and productivity, and create better communities with stronger and healthier citizens, or else it might lead to unhealthy and less productive communities with stress, instability, physiological interruptions in brain growth and development and other body organs functions. (Walker et al., 2011) & (Chege & Ucembe, 2020).

Research problem

The researchers noticed that the knowledge about growth and development among nursing students in the Gaza Strip is scarce. To enrich and address this issue, they conducted this study.

The importance and aim of the study

This study aimed to motivate students, academics, researchers, and directors of nursing to do research based on new nursing standards and growth and development curricula.

The researchers also aimed to assess the impact of adopting UNICEF modules on nursing students' knowledge of growth and development concepts.

2- Methods

2.1 Design:

A qualitative design was used to conduct the study.

2.2 Participants:

40 nursing students participated in the study.

2.3 Data collection:

The researchers used a probability-stratified random sampling method in selecting the participants from the 3rd and 4th level nursing students, while the 1st and 2nd levels were excluded. Four focus group interviews were conducted with nursing students, two groups of the traditional curriculum, and two groups who adopted the curriculum which was modified according to UNICEF modules for growth and development.

The researchers structured two focus group interviews with male students and two focus group interviews with female students separately; each group was comprised of ten participants.

The questions were related to the developmental domain, developmental milestones, the term toxic stress and its effect on brain development, reducing risk factors and reinforcing protective factors, common developmental disabilities, and the team around the child.

2.4 Setting:

The study was conducted at the Islamic University of Gaza.

2.5 The qualitative part of the analysis was done using open-ended questions:

1. Reading the transcripts.
2. Labelling relevant phrases, opinions, and words related to the question.
3. Creating codes from the labels.
4. Creating concepts by bringing several codes together, and then labelling the concepts.

2.6 Data analysis:

Transcription of focus group interviews, video recordings, and coding is done to generate concepts and sub-concepts. The qualitative analysis of the data was carried out based on three elements, namely: concepts, categories, and propositions (GROVE, 2011). To begin with, the concepts that were derived from the conceptualization of the data were the primary unit of evaluation. When compared to concepts, the categories were better in degrees and had greater summaries. The propositions also assisted to connect the categories and concepts. To make sure that everything about the transcription of the interviews was relevant, the researchers

edited them many times, the raw data supplied by the participants were read carefully and the codes have emerged via an open coding process. Coding in qualitative studies is a word or string of words used as titles for categories generated throughout the evaluation process. It is also step one in going past concrete statements within the data to make analytical interpretations. Qualitative techniques use codes to categorize data instead of quantifying it. This technique can assist generate sub-categories and themes from textual data. Data were compared for similarities and differences to offer significant and interconnected categories and subcategories. Using a comparative content material evaluation, the researchers compared every interview with the others. The researchers also worked hard to perceive the phenomenon well by interviewing people from distinctive corporations in the Gaza Strip. Finally, the researchers actively used those strategies to increase objectivity. Through this process, subcategories of phenomena that researchers have explored, led to discoveries (Polit, D. (2010) Statistics and Data Analysis. Lippincott, New York. - References - Scientific Research Publishing, 2014) & (Mabbott, 2008).

2.7 Methodological considerations:

To ensure the trustworthiness of the data, the researchers considered its credibility, dependability, confirmability, and transferability.

2.8 Ethical issues:

The approval was taken from the Faculty of Nursing at the Islamic University of Gaza to conduct the study and consent forms were taken from the participants providing they keep them confidential.

3- Results

While the researchers were cautiously testing the scripts of responses of the participants, they recognized the rising subject matters and subthemes and coded them into the subsequent main themes: developmental domain, developmental milestones, the term toxic stress, reducing risk factors, and reinforcing protective factors, common developmental disabilities, and the team around the child (Table 1). Under each theme, several subthemes have emerged. Under the developmental domain theme, the following subthemes have emerged: physical, social and emotional development, cognitive domain, communicative development, and adaptive skills. Under the theme of the developmental milestone, the subthemes of taking the first step, smiling for the first time, and waving "bye-bye" have emerged. Under the term toxic stress and its effect on brain development theme, the subthemes of physical or emotional abuse, chronic neglect, severe maternal depression, and parental addiction or family violence have emerged.

Under reducing risk factors and reinforcing protective factors' theme, the subthemes of biological risks (chronic under-nutrition, iron and iodine deficiency, intrauterine growth restriction, and human immunodeficiency virus infection), psycho-social risks (poor caregiver-child interaction, maternal depression, institutional rearing, exposure to violence and poor learning environment), protective factors (good nutrition, responsive & nurturing parenting, safe and stimulating environment, health care "prenatal, maternity, newborn, infant" and adequate family income) have emerged. Under the common developmental disabilities theme, the subthemes of cerebral palsy& neural tube defects, intellectual disability, autism spectrum disorders, expressive language disorder (receptive language disorder& stuttering), hearing or vision impairment, emotional/behavior disorder, attention deficit hyperactivity disorder/attention deficit disorder, and multiple disorders have emerged.

Finally, the team around the child theme included the following subthemes: the child is treated holistically and all areas of development are together stimulated, the family is reinforced and treated holistically, and the parents are identical members of the team around the child/intervention team, education and therapy are combined in a holistic approach and there is a single multi-agency action plan to support the child and the family.

Table 1: Growth and development themes and subthemes

Developmental domain	Developmental milestones	The term toxic stress and its effect on brain development
<ul style="list-style-type: none"> - Physical development - Social and emotional development - Cognitive domain - Communicative development - Adaptive skills 	<ul style="list-style-type: none"> - Taking the first step - Smiling for the first time - waving "bye-bye" 	<ul style="list-style-type: none"> - Physical or emotional abuse - Chronic neglect - Severe maternal depression - Parental addiction or family violence
Reducing risk factors and reinforcing protective factors	Common developmental disabilities	The team around the child
<ul style="list-style-type: none"> - Biologic risks - Psychosocial risks - Protective factors 	<ul style="list-style-type: none"> - Cerebral palsy and neural tube defects - Intellectual disability - Autism spectrum disorders - Expressive language disorder, receptive language disorder& stuttering 	<ul style="list-style-type: none"> - The child is treated as a whole child and all developmental areas are stimulated together - The family is supported and treated as a whole family

3-1 Developmental domain

Most of the participants in the adopted curriculum mentioned that they had a lot of knowledge about the developmental domain except for one student. On the other hand, four students in the traditional curriculum had received knowledge about the developmental domain.

3-2 Developmental milestones

Most of the participants in the adopted curriculum mentioned that they received and learned a lot about the developmental milestones except for two students. On the other hand, two students in the traditional curriculum received knowledge about the developmental milestones.

3-3 The term toxic stress and its effect on brain development

All of the participants in the adopted curriculum mentioned that they learned a lot about the term toxic stress and its effects on brain development. On the other hand, all students in the traditional curriculum were unaware of the knowledge about the term toxic stress and its effect on brain development.

3-4 Reducing risk factors and reinforcing protective factors

Most of the participants in the adopted curriculum mentioned that they had knowledge deficit about reducing risk factors and reinforcing protective factors except for three students. On the other hand, all students in the traditional curriculum had knowledge deficit about reducing risk factors and reinforcing protective factors.

3-5 Common developmental disabilities

Most of the participants in the adopted curriculum mentioned that they received a lot of knowledge about the common developmental disabilities except for two students. On the other hand, all students in the traditional curriculum had not enough knowledge about the common developmental disabilities.

3-6 Team around the child

All of the participants in the adopted curriculum mentioned that they learned a lot about the team around the child except one student. On the other hand, two students in the traditional curriculum mentioned that they had knowledge about the team around the child.

4- Discussion

The results of the study showed the effectiveness of adopting UNICEF modules on nursing students' knowledge about growth and development, and these results were consistent with UNICEF growth and development modules (Supporting Families for Nurturing Care | ISSA, n.d.). Most of the students in the adopted curriculum mentioned that they received a lot of knowledge about all growth and development themes and subthemes. However, in reducing risk factors and reinforcing protective factors' theme, they showed knowledge deficit in this theme because it is not widely common or investigated here in the Gaza Strip. While most of the students in the traditional curriculum showed an absence of knowledge or knowledge deficit in most of the growth and development themes and subthemes and that was expected as a result of depending on the traditional curriculum which lacks growth and development modules. There are a few numbers of students in the traditional curriculum who showed some knowledge about some growth and development modules and that could be attributed to their self-study or their previous experience with it.

5- Limitations

The study was conducted just at the Islamic University of Gaza excluding the other universities across the Gaza strip alongside the lack of relevant previous studies. Thus, the discussion was mainly based on the authors' opinions together with some studies.

6- Conclusion

The adopted curriculum which was modified according to UNICEF modules for growth and development was effective in enhancing students' knowledge as most of the students who adopted this curriculum mentioned that they learned a lot of about growth and development themes and subthemes in comparison with the students who learned using the traditional curriculum.

7- Recommendations

Nursing faculties need to modify their curriculum according to UNICEF modules to enhance their students' knowledge about growth and development as proved by this study's results and this study will be a good base for other relevant research activities for nursing research interests.

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أثر اعتماد وحدات اليونيسف للنمو والتطور في تعزيز معرفة طلاب التمريض: دراسة

نوعية

يوسف الجيش¹، محمود عياش^{2*}

¹الجامعة الإسلامية بغزة، غزة- فلسطين، yjeesh@iugaza.edu.ps

²مستشفى غزة الأوروبي، غزة- فلسطين، Mahmoudayash1995@hotmail.com

الملخص

مرحلة النمو والتطور هي فترة أساسية ودرجة من حياة الإنسان، وخاصة في المراحل المبكرة، ويعرفها معظم المهنيين بأنها الفترة الزمنية الممتدة من الحمل إلى ثماني سنوات من العمر. هذه الفترة الزمنية حيوية لنمو الدماغ. إلى جانب ذلك، فإن هذه السنوات التنموية لها تأثير كبير - وعلى مدى الحياة - على الأطفال. لذلك يحتاج جميع الأطفال في هذه السنوات إلى رعاية جيدة. وتهدف الدراسة إلى تقييم أثر اعتماد وحدات اليونيسف على معرفة طلاب التمريض في مفاهيم النمو والتطور. وتم استخدام تصميم دراسة نوعية لإجراء الدراسة التي شارك فيها أربعون طالبا وطالبة من طلاب التمريض. وأجريت أربع مقابلات جماعية مركزة مع طلاب التمريض، ومجموعتان من المناهج الدراسية التقليدية، ومجموعتان اعتمدتا المنهج الدراسي الذي تم تعديله وفقا لوحدات اليونيسف للنمو والتطور. وكان مسرح هذه الدراسة في الجامعة الإسلامية في غزة. وكان من أبرز نتائجها ما ذكره معظم الطلاب الذين تبنا المنهج الجديد، أن لديهم كثيراً من المعرفة حول مواضيع النمو والتطور والموضوعات الفرعية، بينما ذكر طلاب من مجموعات المنهج التقليدي أن لديهم عجزا معرفيا حوله. واستنتج من ذلك أن المنهج المعتمد الذي تم تعديله وفقا لوحدات اليونيسف للنمو والتطور، كان فعالا في تعزيز معرفة طلاب التمريض بمفاهيم النمو والتطور.

الكلمات الدالة: النمو والتطور، طلاب التمريض، دراسة نوعية، وحدات اليونيسف

*الباحث المراسل