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Delivery Health Care Providers' Compliance with the Unang Yakap Protocol and Its Perceived Effects on Neonatal and Maternal Outcomes: Proposed Policy Enhancement in a Provincial Hospital in Cotabato

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ABSTRACT

Immediate newborn care is crucial in improving neonatal survival and maternal well-being. This study aimed to determine the level of compliance of delivery health care providers with the Unang Yakap Protocol and assess its perceived effects on neonatal and maternal outcomes in a Provincial Hospital in Cotabato as a basis for proposing policy enhancements to increase compliance with the protocol. A quantitative descriptive-correlational research design was employed involving 60 nurses and midwives selected through total enumeration. Data were gathered using a survey questionnaire. Findings revealed that health care providers complied highly with immediate and thorough drying, skin-to-skin contact, proper cord clamping and cutting, and non-separation during breastfeeding initiation. The protocol was also perceived as highly effective in improving neonatal and maternal outcomes. No significant differences in compliance were found when respondents were grouped by age, sex, and years of service, whereas significant differences were observed by relevant training ($p < 0.001$). No significant relationship was found between compliance and perceived outcomes ($p = 0.58$). The absence of a significant relationship between compliance and perceived outcomes suggests that improving maternal and neonatal outcomes requires not only adherence to the Unang Yakap Protocol but also strengthened institutional support, continuous competency-based training, and adequate resources, all of which are reflected in the proposed policy enhancement aimed at increasing compliance with the Unang Yakap Protocol in a Provincial Hospital in Cotabato.

Keywords**:** *Unang Yakap Protocol, compliance, neonatal outcomes, maternal outcomes, policy enhancement, essential newborn care.*

INTRODUCTION

The immediate postnatal period is critical for both mothers and newborns, as evidence-based interventions during this stage significantly influence neonatal survival and maternal outcomes. To address preventable causes of neonatal mortality such as hypothermia, infection, and delayed breastfeeding, the Philippines adopted the Unang Yakap Protocol, which promotes immediate drying, skin-to-skin contact, delayed cord clamping, non-separation of mother and baby, and early initiation of breastfeeding (WHO, 2022; Odira et al., 2025; Ajmal, 2024; Modak et al., 2023).

Although Unang Yakap has been institutionalized nationwide, variations in compliance among health care providers persist. Global and local studies indicate that while evidence-

based newborn care practices improve neonatal and maternal outcomes, compliance is often affected by inadequate training, staffing shortages, high workloads, insufficient resources, weak supervision, and inconsistent monitoring (Tunçalp et al., 2020; Malabanan, 2021; Hipona et al., 2023; Kitila et al., 2020; He et al., 2024).

Thus, this study aimed to provide baseline data on compliance levels, identify implementation gaps, and inform policy enhancements, training programs, and monitoring systems to strengthen adherence to evidence-based newborn care practices and improve maternal and neonatal outcomes in a Provincial Hospital in Cotabato.

Statement of the Problem

This study aimed to determine the level of compliance of the health care providers of the Unang Yakap protocol and its effects on the neonatal and maternal outcomes in a Provincial Hospital in Cotabato.

Specifically, it sought to answer the following questions:

1. What is the profile of the delivery room health care workers in terms of age; sex; year of service; and relevant training on Unang Yakap?
2. What is the level of compliance of health care workers to the Unang Yakap Protocol in terms of: immediate and thorough drying; skin-to-skin contact; proper cord clamping and cutting; and non-separation of the baby from the mother
Breastfeeding initiation?
3. What are the perceived effects on neonatal and maternal outcomes of compliance with the Unang Yakap protocol?
4. Is there a significant difference in the compliance of the health care personnel to the Unang Yakap protocol when grouped according to profile variables?
5. Is there a significant relationship between level of compliance and the perceived effects on neonatal and maternal outcomes of compliance with the Unang Yakap Protocol
6.What policy enhancement can be proposed to increase the compliance rate with the Unang Yakap Protocol in a Provincial Hospital in Cotabato?

Scope and Delimitations

This study focused on assessing the compliance of delivery health care providers with the Unang Yakap Protocol and its perceived effects on neonatal and maternal outcomes in a Provincial Hospital in Cotabato.

The participants of the study were 60 delivery health care providers (such as nurses and midwives assigned in the delivery room). This was limited to compliance with the key components of the Unang Yakap Protocol, namely: immediate and thorough drying, skin-to-skin contact, proper cord clamping and cutting, non-separation of the newborn from the mother, and early initiation of breastfeeding.

Review of Related Literature

Essential Newborn Care (ENC) refers to a package of evidence-based interventions provided immediately after birth to promote newborn survival, thermal protection, infection prevention, and successful feeding. These interventions include immediate drying, maintaining warmth, assessing breathing, hygienic cord care, and early initiation of breastfeeding (World

Health Organization [WHO], 2022; Ricci, 2024).

The importance of ENC is closely linked to global efforts to reduce neonatal morbidity and mortality, particularly during the first day of life when newborns are most vulnerable. Timely and standardized newborn care supports neonatal stabilization, maternal recovery, and improved birth outcomes (WHO, 2022; Ashorn et al., 2023). Central to ENC are mother–baby-centered practices such as uninterrupted skin-to-skin contact and early breastfeeding, which promote thermoregulation, strengthen maternal–infant bonding, and minimize unnecessary separation (Ricci, 2024; WHO, 2022).

In the Philippines, the Unang Yakap Protocol reflects the principles of ENC by promoting immediate drying, skin-to-skin contact, proper cord care, and early breastfeeding as standard newborn care practices. These interventions are supported by evidence showing that consistent newborn care improves physiologic stability, feeding outcomes, and overall neonatal well-being (WHO, 2022; Humphreys, 2023). Moreover, routine essential newborn care, including warmth, feeding support, and infection prevention, contributes significantly to newborn survival, especially among small and vulnerable infants (Berkelhamer et al., 2020; Ashorn et al., 2023).

Despite its documented benefits, compliance with ENC remains a challenge in many health care settings due to limitations in staffing, training, resources, and institutional support (Efa et al., 2020; Aneji & Little, 2021) Furthermore, successful breastfeeding outcomes require both adherence to clinical protocols and broader policy and program support (Hernández-Cordero et al., 2022; WHO, 2022). Consequently, strengthening compliance through continuous training, monitoring, quality improvement initiatives, and supportive institutional policies remains essential for improving neonatal and maternal outcomes (Malabanan, 2021; Hipona et al., 2023; Ashorn et al., 2023; Humphreys, 2023).

Theoretical Framework

This study was anchored on the Donabedian Model of Health Care Quality, the Theory of Planned Behavior, and Mercer's Theory of Maternal Role Attainment (Becoming a Mother), supported by the principles of Essential Newborn Care (ENC). These theories collectively explain how health care provider characteristics, behaviors, and care practices influence compliance with the Unang Yakap Protocol and how such compliance affects neonatal and maternal outcomes.

Conceptual Framework

Figure 1 presents the Input–Process–Output (IPO) framework of the study. The input includes the profile of delivery health care providers, their level of compliance with the Unang Yakap Protocol, and its effects on neonatal and maternal outcomes. The process involves the questionnaire, pilot testing, and data gathering, while the output is the proposed Policy Matrix based on the study findings.

METHODOLOGY

Research Design

This study employed a quantitative descriptive–comparative correlational research design to determine the level of compliance of delivery health care providers with the Unang Yakap Protocol and to examine its perceived effects on neonatal and maternal outcomes in a provincial hospital in Cotabato.

Research Steps

Ethical approval and institutional permission were obtained prior to data collection. Eligible nurses and midwives who provided informed consent completed structured questionnaires on their profile, compliance with the Unang Yakap Protocol, perceived outcomes, and implementation challenges. Using total enumeration, all qualified delivery health care providers were included. Collected data were kept confidential and analyzed using appropriate statistical tools.

Data Collection and Sample Selection

The data collection process commenced with the administration of the validated survey questionnaire to the health care professionals serving as respondents of the study. These respondents are involved in the maternal care department of the study hospital.

Data Analysis Methods

Frequency counts, percentages, means, and standard deviations were used to describe the respondents' profile, level of compliance with the Unang Yakap Protocol, and perceived neonatal and maternal outcomes. Independent samples t-test and one-way ANOVA were employed to determine significant differences in compliance when respondents were grouped according to profile variables, while Pearson's r correlation was used to examine relationships among variables.

Research Hypotheses and Validation

The study tested several null hypotheses at the 0.05 level of significance to determine whether significant differences and relationships existed among the variables. It also tested whether a significant differences across profiles and relationship existed between the health care providers' level of compliance with the Unang Yakap Protocol and the perceived neonatal and maternal outcomes.

Study Limitations and Ethical Considerations

The study adhered to ethical protocols by obtaining informed consent from all healthcare providers, ensuring anonymity and confidentiality, and allowing participants to withdraw at any time. Respondents' answers were used for the analysis and reporting.

RESULTS AND DISCUSSION

Profile. The respondents were predominantly 36–45 years old (53.33%), female (80.00%), and had less than one year of service (56.67%). In terms of training, 40.00% had hospital-based training, 40.00% had no relevant training, and only 20.00% had attended DOH training, indicating a need to strengthen formal training opportunities for delivery health care providers.

Level of Compliance. Health care workers demonstrated a high level of compliance with all components of the Unang Yakap Protocol. Immediate and thorough drying (WM = 3.75), skin-to-skin contact (WM = 3.71), proper cord clamping and cutting (WM = 3.70), and non-separation of the baby from the mother with breastfeeding initiation (WM = 3.75) were all rated Highly Complied, indicating strong adherence to evidence-based newborn care practices.

Perceived effectiveness of the Unang Yakap Protocol. Respondents perceived the Unang Yakap Protocol as Very Effective in improving both neonatal and maternal outcomes. For neonatal outcomes, the overall mean was 3.75, with breastfeeding initiation and physiologic stability receiving the highest ratings. For maternal outcomes, the overall mean was 3.70, with mother–infant bonding receiving the highest rating. These findings suggest that health care workers recognize the protocol's positive impact on newborn health, breastfeeding success, and maternal well-being.

Significant Difference in Compliance. No significant differences in compliance were found when respondents were grouped by age ($p = 0.904$), sex ($p = 0.865$), and years of service ($p = 0.871$). However, a significant difference was observed when respondents were grouped by relevant training ($p < 0.001$), indicating that training plays a crucial role in compliance with the Unang Yakap Protocol.

Relationship Between Compliance and Perceived Effectiveness. Although respondents reported high compliance and perceived the protocol as very effective, the analysis revealed no significant relationship between compliance and perceived effectiveness ($p = 0.58$). This suggests that positive neonatal and maternal outcomes are influenced not only by adherence to the protocol but also by other factors, including institutional support, staffing, resources, maternal condition, and overall quality of care.

Policy Enhancement. Based on the findings, a policy enhancement is proposed to strengthen the implementation of the Unang Yakap Protocol through continuous training, competency development, regular monitoring, supportive supervision, and strengthened institutional support systems.

SUMMARY

Unang Yakap Protocol and its perceived effects on neonatal and maternal outcomes in a Provincial Hospital in Cotabato using a quantitative descriptive-correlational design. The findings showed that health care workers highly complied with all components of the protocol and perceived it to be very effective in improving neonatal and maternal outcomes. No significant differences in compliance were found by age, sex, or years of service, but a significant difference was observed by relevant training. Furthermore, no significant relationship existed between compliance and perceived outcomes. Based on these findings, an Enhanced Unang Yakap Compliance and Quality Improvement Policy was proposed to strengthen protocol implementation.

CONCLUSIONS

The study concluded that health care workers consistently complied with the Unang Yakap Protocol and perceived it as highly effective in improving neonatal and maternal outcomes. While training significantly influenced compliance, positive outcomes were found to depend not only on protocol adherence but also on institutional support, adequate resources,

and comprehensive maternal and newborn care practices.

RECOMMENDATIONS

Hospital administrators should strengthen the implementation of the Unang Yakap Protocol through enhanced training, monitoring, and institutional support systems. Future studies may further examine factors affecting protocol effectiveness using larger samples and multiple health care settings.

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AI DECLARATION STATEMENT

AI-supported tools helped with grammar and structure in creating this article. No AI tools were used to collect, analyze, or interpret data; all authors are credited for their academic contributions.

REFERENCES

Ashorn, P., Ashorn, U., & colleagues. (2023). Essential newborn care interventions and neonatal survival: Current evidence and implications. *The Lancet Child & Adolescent Health*, 7(4), 256–267.

Berkelhamer, S. K., Mestan, K. K., & Steinhorn, R. H. (2020). Essential newborn care and outcomes among vulnerable infants. *Clinics in Perinatology*, 47(2), 345–358.