

# Parents' Perspectives of Closeness and Separation With Their Preterm Infants in the NICU

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## Keywords

closeness  
neonatal intensive care unit  
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## ABSTRACT

**Objective:** To discover parents' perceptions of closeness to and separation from their preterm infants in the NICU.

**Design:** Qualitative descriptive.

**Setting:** Urban Level III NICU.

**Participants:** Twenty parents of preterm infants in the NICU.

**Methods:** After ethics approval, data were collected with a smartphone application created for this study. Parents recorded their descriptions of moments of closeness and separation over a 24-hour period in the NICU. Data were transcribed verbatim and content was analyzed.

**Results:** Five themes related to parents' perceptions of closeness and separation were identified: *Having a role as a parent; Feeling autonomous and making decisions; Providing for and getting to know the infant; Feeding, holding, and interacting; Support from staff; Reluctantly leaving the infant's bedside; and NICU environment.*

**Conclusion:** Autonomy is a key element of a parent's perception of closeness. Staff in the NICU can facilitate autonomy by involving parents in the care of their preterm infants as much as possible to reinforce the parental role. Parents described leaving their infants' bedsides as very difficult.

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Approximately 14.9 million infants worldwide are born at less than 37 weeks gestation every year (Blencowe et al., 2013). Many of these infants require neonatal intensive care because they are born very prematurely at less than 32 weeks gestation, weigh less than 1,500 g, or have medical conditions that require intensive care. Infants are hospitalized in the NICU for long periods of time that last from weeks to months after birth. Parents described NICU hospitalization as a stressful experience (Lindberg & Öhrling, 2008; Miles, Burchinal, Holditch-Davis, Brunssen, & Wilson, 2002; Miles, Funk, & Kapser, 1991) during which they learned to become close and connected to their newborns (Fenwick, Barclay, & Schmied, 2008).

Having a newborn hospitalized in the NICU was associated with significant anxiety, depression, and fatigue in parents (Busse, Stromgren, Thorngate, & Thomas, 2013). This experience was also described as traumatic, and parents

were left feeling overwhelmed and disoriented in a liminal state between being and not being parents (Lasiuk, Comeau, & Newburn-Cook, 2013). Fathers described the process of caring for their infants in the NICU as a fragile pendulum that easily moved toward feelings of distance because of worry or the infant's unstable condition (Lundqvist, Westas, & Hallström, 2007).

Admission of an infant to the NICU is often experienced as a separation. The NICU environment contributes to feelings of physical separation, and parents indicated that the presence of equipment created a barrier between them and their infants (Athanasopoulou & Fox, 2014; Cervantes, Feeley, & Lariviere, 2011; Raiskila, Axelin, Rapeli, Vasko, & Lehtonen, 2014). In addition, limitations in space, lack of accommodations, and visiting restrictions fostered a sense of physical separation between parents and their infants (Greisen et al., 2009; Skene, Franck, Curtis, & Gerrish, 2012). Such physical

**The purpose of this study was to examine parents' perceptions of closeness to and separation from their infants in the NICU.**

separation hindered satisfaction of the emotional needs of parents to be close to their infants (Fenwick et al., 2008; Flacking et al., 2006; Lindberg & Öhrling, 2008).

Separation may also be felt emotionally as a disconnection or alienation from an infant (Flacking et al., 2012). An infant's physical appearance, including small size and presence of medical equipment, may foster a sense of emotional separation for parents (Cervantes et al., 2011; Vazquez & Cong, 2014). Being separated from their infants in the NICU left parents feeling as if they were visitors who were insecure in their parenting roles, and they felt unimportant when health care professionals assumed tasks associated with newborn care (Fenwick et al., 2008; Finlayson, Dixon, Smith, Dykes, & Flacking, 2014; Flacking, Ewald, Nyqvist, & Starrin, 2006).

In addition to alienating parents from their roles, separation also impedes the attachment process between parent and infant (Flacking et al., 2006; Flacking et al., 2012; Vazquez & Cong, 2014). Proximity to their infants is very important to parents so they can form attachments to their children in the NICU (Fegran, Helseth, & Fagermoen, 2008). However, parents have reported reluctance to touch their infants for fear of making their conditions deteriorate (Feeley, Waitzer, Sherrard, Boisvert, & Zekowitz, 2012; Sisson, Jones, Williams, & Lachanudis, 2015; Vazquez & Cong, 2014). This reluctance to touch further fosters parents' feelings of separation.

Similar to separation, closeness may be physical or emotional. Flacking et al. (2012) defined physical closeness as a range of behaviors from touching the infant to being present without physical contact; they defined emotional closeness as "feelings of strong and consistent love, care, affection and/or connection...to their infant" (p. 1032). Different forms of emotional and physical closeness, such as providing skin-to-skin care and talking to the infant, reduce stress, anxiety, and depression (Athanasopoulou & Fox, 2014; Nyqvist et al., 2010) and help to re-establish feelings of being a parent (Fenwick et al., 2008; Flacking et al., 2006).

Nurses can promote or impede parent closeness and, consequently, the attachment between parent and infant (Guillaume et al., 2013). Parents highlighted the importance of their relationships with health care professionals, especially nurses, in feeling comfortable and welcome when they visited the NICU (Gibbs, Boshoff, & Stanley, 2015; Wigert, Berg, & Hellström, 2010) and in promoting their interactions with and ability to provide care for their infants (Finlayson et al., 2014; Guillaume et al., 2013; Vazquez & Cong, 2014). It is important to understand which nursing actions in the NICU are perceived to promote closeness or separation to ensure that nurse efforts have positive effects. To date, parents' perceptions of interventions that create a sense of closeness or separation between them and their infants have not been widely studied.

Although much is known about parents' overall experiences of having infants in the NICU, few researchers have examined parents' perceptions of what specifically fosters feelings of closeness or separation. Moreover, previous investigators used interviews with parents during hospitalization or afterward or used self-report questionnaires. Thus, the aims of our study were to discover and describe parents' perceptions of closeness and separation with their preterm infants in the NICU and understand nurse behaviors that contribute to these perceptions. We used an innovative approach to collect data, and a newly developed smartphone application was used to allow parents to share their thoughts soon after they experienced an event that they considered to be closeness or separation. This application was used successfully in two previous studies with perinatal nurses (Feeley, Genest, Niela-Vilén, Charbonneau, & Axelin, 2016; Niela-Vilén, Feeley, & Axelin, 2016) to gather rich data on nurses' experiences.

## Methods

### Design

We used a qualitative descriptive design, because this design is well suited to seek a straightforward, in-depth description of experiences and answer questions of interest to clinicians (Sandelowski, 2000). The hospital ethics committee granted ethical approval to our study.

### Setting and Participants

Twenty parents were recruited from a Canadian tertiary care center between February 2015 and

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