

Original article

Perceived stress and positive and negative emotions in parents of preterm babies



Juan Ignacio Capafons*, Omaira Darias, Pedro Prieto, Carmen Dolores Sosa, Gloria Lastenia Hernández

Department of Clinical Psychology, Psychobiology and Methodology, Campus de Guajara, University of La Laguna, Tenerife, Spain

ARTICLE INFO

Article history:

Received 1 March 2016

Accepted 27 March 2017

Available online 3 May 2017

Keywords:

Emotions

Prematurity

Neonates

Stress

Positive emotions

Negative emotions

ABSTRACT

The arrival of a new-born baby drastically changes the parents' lives. Several authors have reached the conclusion that this vital event can even lead to a post-traumatic stress disorder. This fact is especially relevant when it comes to correctly coping with this situation. The role played by the emotions involved in this process as well as the stress suffered by parents experiencing such a change are recognized by previous studies. In this paper, we carried out a comparative study between the emotions and stressful situations experienced by preterm and term babies' progenitors. The results show how the group of parents of preterm babies is more affected by stress and negative emotions. In this sense, the spectrum widens to an almost unprecedented relevant field in psychological research that allows us to see how the parents of premature children experience this circumstance.

© 2017 Sociedad Española para el Estudio de la Ansiedad y el Estrés - SEAS. Published by Elsevier España, S.L.U. All rights reserved.

Estrés percibido y emociones negativas y positivas en padres de niños prematuros

RESUMEN

La llegada de un nuevo hijo cambia drásticamente la vida de los padres. Algunos autores han llegado a la conclusión de que estos eventos vitales incluso pueden llegar a producir un trastorno de estrés postraumático. Este hecho es especialmente relevante para afrontar correctamente la situación. Está reconocido el papel que tienen las emociones involucradas en este proceso así como el estrés que sufren los padres que experimentan este cambio. En este trabajo desarrollamos un estudio comparativo entre las emociones y las situaciones de estrés experimentadas en padres con niños que han nacido a término frente a padres de niños que han nacido prematuros. Los resultados muestran cómo el grupo de padres de niños nacidos prematuros sufre más estrés y emociones negativas que el grupo de padres de niños que nacen a término. En este estudio se abre la puerta a un campo relevante casi inédito en la investigación psicológica que nos permite ver cómo los padres de niños prematuros viven esta circunstancia.

© 2017 Sociedad Española para el Estudio de la Ansiedad y el Estrés - SEAS. Publicado por Elsevier España, S.L.U. Todos los derechos reservados.

Palabras clave:

Emociones

Prematuridad

Neonatos

Estrés

Emociones positivas

Emociones negativas

The phase of pregnancy is a vital event in people's lives, both for future mothers and also fathers. Therefore, the moment of birth as well as the caring of the baby define a period of crucial change for progenitors. In this sense, emotions reflect what happens to us; they are signs and symptoms which provide feedback concerning

the way we confront different situations. The events lived during the perinatal stage (especially during the first hours after birth) bear great relevance in order to understand the process of changes experienced by progenitors of full-term babies. But what about the parents of premature infants? Prematurity increases the biological and psychological risk factors in babies and parents. The study of preterm birth will allow us to observe the psycho-emotional consequences (disorders of early interaction, exercise of parental roles, the ability to cope with stress, amongst others) that are generated

* Corresponding author.

E-mail address: jcapafon@ull.es (J.I. Capafons).

by the biological risk factors (neurodevelopmental problems). This will make it possible to design procedures of intervention adapted to the needs of children and parents (Karen, Tyano, & Sirota, 2000).

It is estimated that nearly 15 million premature babies (that is to say, those who are born with less than 37 weeks of gestation) are born in the world each year (Platt, 2014). In 2015, WHO reported that the rate of preterm births fluctuated between 5% and 18% (WHO, 2015). In Europe, this rate varies between 5% and 11% depending on the country (Zeitlin, Mohangoo, & Delnor, 2010). According to the National Institute of Statistics (Instituto Nacional de Estadística, INE), each year during the last decade, more than 30,000 children were born prematurely in Spain and more than 1000 of them in the Canary Islands. This represented 6.5% and 6.8% of the population, respectively in 2014 (INE, 2014). There is broad consensus that, at birth, age is more important than the weight, because the former is what really determines the maturity of the major organs. The immature child has a greater risk of not successfully completing the process of adaptation to external and autonomous life, so this critical phase can have medical and psychological sequelae for the rest of the baby's life (Horbar et al., 2002).

The emotional situation of preterm babies' parents is subject to high levels of uncertainty and ambiguity. In a couple of hours, the preterm baby's situation can change, whether with a positive or tragic end, or it can continue in an imprecise and uncertain way. How do parents react to this experience of uncertainty, stress and fear? Is it advisable to proceed with a professional psychological plan? How should this plan deal with this situation? Currently, there is little empirical evidence that helps to answer these questions.

Psychological stress is considered as "a particular relationship between the person and environment that is appraised by the person as taxing or exceeding his or her resources and endangering his or her well being" (Lazarus & Folkman, 1984). When a person considers that he/she does not have enough resources to face the situation, his/her well-being can be negatively affected. Also, if this psychological tension is not dispelled appropriately, it can lead to mental diseases related to anxiety and depression (Boullosa, 2004). Besides, it is likely that the birth of a baby (especially when it is a preterm birth) increases the stress levels and the negative emotional status of the parents, thus making the development of a post-traumatic stress disorder possible (Pierrehumbert, Nicole, Muller-Nix, Forcada-Guex, & Ansermet, 2003). Probably, the adequate management of these stressful events can help to create a more adapted and healthy management of the situation.

Finally, Plutchik's evolutionary theory of emotions contributes with a complementary conceptual frame to this quandary. In the case of premature births, it appears that interactive behaviors are worthy of particular attention, and their origin depends on multiple factors. The emotional suffering of parents, especially the mother's suffering, has been attributed to the immaturity of the premature infant, as well as the early separation of the child from the parents (Crnic, Ragozin, Greenberg, Robinson, & Basham, 1983; Miles & Holditch-Davis, 1997; Muller-Nix et al., 2004). There are studies comparing the behavior of preterm infants' mothers with that of mothers with healthy children born at term. The former are presented as more active, more vigilant and less sensitive to answer inadequately to certain baby's necessities (take longer to perceive and respond to the baby's physical and emotional alterations) (Joo, Choi, Rha, Kwak, & Park, 2015; Muller-Nix et al., 2004; Wijnroks, 1999).

The main aim of this study is to compare the levels of stress and the emotional state between the parents of premature babies and parents of infants born at term. This comparison is made in two different instances; firstly during the first days of the baby's

life (12–72 h) and finally after 6 living weeks. This will allow us to recognize the evolution in both groups.

More specifically, what this paper is trying to detect is whether there is a higher rate of positive emotions instead of negative ones in the group of parents of full-term neonates, as compared to the preterm one, and whether these differences are still present with the passing of time. Also whether there are any existing differences between the stress perceived by the preterm group in opposition to the full-term group, both in the first and second phase (first hours against 6 weeks).

Method

Sample

The sample is made up of 54 parents who have been looked after at the University Hospital of the Canaries (Complejo Hospitalario Universitario de Canarias – CHUC) from June 2012 to March 2013. Women represent 74% of the total sample whereas men represent 26%. There are two different groups, parents of preterm babies and parents of full-term babies who participate voluntarily. The latter is made up of 30 participants with an average age of 29.96 years old, while the group of preterm neonates' parents is made up of 24 participants with an average age of 32.52 years old (approximately a 5% of the whole population of preterm babies' parents at the province of Santa Cruz de Tenerife).

Instruments

Throughout the development of this work, we have used two paper-and-pencil questionnaires:

The Perceived Stress Scale (PSS: Cohen, Kamarck, & Mermelstein, 1983). In this case, a scale of 14 items has been employed and adapted to the Spanish population with an internal consistency of .81 (alpha coefficient) and a test-retest reliability of .73. Remor (2006) informs of the meaningful correlations (Pearson) between the scale of distress (.71) and anxiety (.64).

The Scale of Positive and Negative Affects (PANAS; Watson, Clark, & Tellegen, 1988). It is divided into two sub-scales: the positive affect (PA) and the negative affect (NA), each of them with 10 items. What the authors seek is the purest affect descriptors. The reliability for the NA and PA scales, estimated through alpha coefficients, was .89 for men and .87 for women in the PA subscale, while the corresponding alpha in the case of NA subscale was .91 for men and .89 for women (Sandín et al., 1999).

Procedure

The recruitment of participants was carried out in the University Hospital of Tenerife. The sample of full-term babies' parents came from the gynecology area. A group of collaborators visited the rooms where mothers were hospitalized and the latter were offered the possibility of participating together with their partners. The same procedure was carried out at the Neonatal Intensive Care Unit (NICU) with parents of preterm babies. Once the purpose of the research was explained and participation was accepted, parents filled in the questionnaires. A brief interview then served to collect useful data. The same steps were followed 6 weeks later either in person or via telephone, to gather full data of all participants.

Results

Data analysis

Both groups in the two aforementioned stages, both in the field of emotions and perceived stress, were compared. For the data

Download English Version:

<https://daneshyari.com/en/article/7261535>

Download Persian Version:

<https://daneshyari.com/article/7261535>

[Daneshyari.com](https://daneshyari.com)