

## Parental Perception of their Involvement in the Care of their Children in Neonatal Units

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### Abstract

The experience of becoming the parent of a sick newborn can be particularly distressing for parents. They often encounter challenges to the development of their parenting roles. Perception of the hospital stay has never been analyzed on a large scale. The objective of this study is to analyze parents' perception of their involvement in the care of their newborns. The investigation started in neonatology department at university hospital Mohammed VI, Marrakech in July 2019. The survey was completed by 40 parents, 98% of whom were mothers. The infants had a mean gestational age of 36 weeks and a mean birth weight of 2600g. Parents perceive their first care of their infant with mixed emotions (joy, stress, etc). Parents were willing to practice new skills through guided participation, even for more complex care. Skin-to-skin care was proposed at the first day of hospitalization for the new born stable; 10% of the parents did not feel secure during this practice. The need for privacy and professional guidance was essential for meaningful skin-to-skin contact. Parents' perception of participating actively in their infant's care was positive and they felt guided by the nursing team. Most of them would have been more active with guidance. Skin-to-skin care was appreciated and desired, but could become stressful if the conditions were not.

**Keywords:** Parental Perception; Skin to Skin; Care; Medical Staff

### Introduction

Giving birth to a sick infant is a stressful event for parents. The parents' presence and participation in the care of the infant is fundamental to reduce this stress and to provide optimal care for both the preterm or sick infant and family. The brittle body of preterm and the medical technical environment (monitoring, respirator, nasogastric tube...) increase the stress parental. A few investigations were studied the parent's participation in the care of their infants.

### Results

At July 2019, 40 parents of newborns hospitalized in neonatal unit were participated to the survey; 98% whom were mothers. Their middle age was 29 years old and 37.6% of them were multiparous. The level of study was primary school or high school in 40%. The infants had a mean gestational age of 36 weeks and a mean birth weight of 2600g, 35% of newborns were preterm.

Parents perceive their first care of their infants with mixed emotions (joy, stress, etc). One of questions in the survey was to describe their emotions at the first participation in the care of their children, the majority of them describe ambivalent emotions and 56% of them had a feeling of fear, stress, and clumsiness. Some parents said that this panic and fear are contribute to that they don't know how to manipulate the incubator and the medical materiel (CPAP, VNI, phototherapy...). A minority of parents were angry and useless.

The analysis of the answers of preterm parents less than 30 SA describe that their emotions were negative (60%), just a minority of them reported a positive emotions (20%). The support of the medical staff to the newborn's parents was reported in the answers.

Some parents wanted to participate in complex care like putting a giving medicine in nasogastric tube, aspiration, stopping alarms; putting the newborn in phototherapy..., a portion of them reported that the absence of the nurses was the reason that they can't participate in this complex care.

Skin to skin contact was an important moment for the newborns and their parents, but it's necessary to be supported by the medical staff, 89% of parents were informed about the benefits of skin to skin contact. It was recommended at the first day for the neonates clinically stable, but those with respiratory support the skin to skin contact was recommended after stabilization, 45% of parents practice it with their children and 55% of them didn't, the reasons were: fear, lack of privacy, the supporting of nurses and the absence of kangaroo unit.

### Discussion

Parental perception of their involvement in the care of their children in neonatal units has never been analyzed on a large scale. Our analysis concern the participation of parent and the demonstration of their emotions at the first care of their children and their ability to participate in specific and technical care. The skin to skin contact is an important moment for the parent and their babies and need the support of the medical staff. There is a few analysis about the skin to skin contact of newborn in the neonatal units. A large analysis about the parent's feeling of newborn hospitalized in neonatal unit was done in France. The goals of survey were: describing the participation of parents in their children care and analyzing their feeling. The results showed the emotions and the ability of parents to participate in their children care. The majority of them were participated to the first care of their babies and the medical staff support them to do more complex care. The skin to skin contact was proposed for all parents and 80% of them practice it. That is too close to our study's results.

Some Americans studies and one French are reported the experience of parents and showed that parents need clears information about the health of their children; the contact of them, be more supported by the nurses, doing individual cares to their babies, knowing about the treatment administrated. The parents see that some actions of the medical staff can support them like: the emotional support, autonomy, welcoming environment and learning cares bring to their children.

Experience of "skin-to-skin care" and "rooming in" may help parents to be acquainted with their infant and thus prepare for the transition to home. However, despite these positive effects of rooming-in, some negative effects (less sleep and lack of privacy) have been described by parents who have stayed with their child in a pediatric unit [1-3].

The hospitalization may challenge the normal attachment process and parents' confidence as caregivers; parents' preparation for bringing the infant home is thus essential [4]. Going home is a happy event, but at the same time it is combined with parental anxiety. Parents' pervasive uncertainty, medical concerns and adjustment to the new parental and partner-adjustment role are common concerns. To make parents confident and prepared for taking their infant home tailored information, guidance and hands-on experience caring for their infant before discharge is crucial [1].

A French study about parental perception about care of the preterm newborn hospitalized in neonatal unit, showed that despite the parental stress, they are integrated in the cares of their preterm babies and tried to practice skin to skin contact to develop more relation with their children. However, in our study the preterms parents had negative emotions and didn't participate actively in their children cares.

Different studies showed that the parents of preterm newborn suffer usually from a post traumatic stress situation, the feeling of avoidment, intrusion, reminiscence, neurovegetative reaction (sleep disorder, irritability, disorder concentration...) [4].

The study showed also the importance of method of coping that help parents to support the stress they feel in neonatal unit. More than 50% of parents adopt this method: having good communication between the family's members and with the medical staff to reduce the stress in neonatal units. In our study, the nurses and doctors listen to parents and help them to understand their children's care and specially preterm newborns, they help them to take care of them and to participate in the almost of cares of their preterm children [5,6].

### Conclusion

This study identified parent's participation in their children's care. The majority of them were satisfied to participate in care activities. Pediatric nurses need to be aware of parent's varied preferences for participation and provide support for participation, especially for parents of preterm infant. Many authors have known ledged about the need for qualitative and quantitative research to study the need of providing parental emotional support to children hospitalized in neonatal unit, driving their decision to stay with their child and to participate in care. The early skin-to-skin contact after birth is internationally recommended and has well-documented importance for the baby and for the parents.

### Bibliography

1. Hanne Aagaard., *et al.* "Parents' experiences of transition when their infants are discharged from the Neonatal Intensive Care Unit: a systematic review protocol". *JBIM Database of Systematic Reviews and Implementation Reports* 13.10 (2015): 123-132.
2. C Zaoui-Grattepanche., *et al.* "The portage of newborns skin to skin". *Perfection in Pediatrics* 1 (2018): 100-107.
3. C Caspera., *et al.* "Parental perception of their involvement in the care of their children in French neonatal units". *Pediatric Archives* 9 (2016): 974-982.
4. Flora Koliouli., *et al.* "To be the father of a preterm newborn. Summary of the results of a study in hospital of neonatology". *Journal of Social and Family Policies* (2017).
5. Daria Romaniuk., *et al.* "Preterm +Are Parents Doing What They Want To Do? Congruency Between Parents' Actual And Desired Participation In The Care Of Their Hospitalized Child". *Comprehensive Child and Adolescent Nursing* 37.2 (2014): 103-121.
6. Nicole Guédeney., *et al.* "Parental Involvement in Neonatology And Care Giving". *Devenir* 24 (2012): 9-34.

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