Man to Man: Perspectives on Being the Father of a Very-Low-Birth-Weight Infant Through Interpretive Phenomenology
I have no conflicts of interest to disclose.
Objectives

- Significance of Study
- Methods
- Phenomenology
- Data Collection/Analysis
- Findings
- Implications for Practice
- Future Research
NICU nurses play vital role supporting parents of neonates and preparing for discharge

- Must understand issues affecting each parent
- Fathers needs/stressors hidden behind a mask of stoicism.
Current knowledge about fathers experiences taken from:

- “Parent” studies
- Studies in other countries
- One study in Mid-West
  - Female interviewer, mom present
  - No studies in Southern U.S.; no ethnic/racial diversity; no unmarried or unemployed dads
Methods

Research Questions:

1. What does it mean to be the father of a VLBW infant?

2. How do the expectations, needs and experiences of these fathers change over time?

Design: Interpretive Phenomenology (Heidegger)
Example...
Interpretive Phenomenology

- Researcher strives to uncover the *meaning* that a particular situation has for a participant, as found in his/her stories.

- Researcher is *co-participant* in research, bringing his/her experience into every phase of investigation.
Respiratory Therapist and Nurse in NICU x18 years
Father of two neonates
Current literature not reflective of personal experience
Witnessed fathers struggles daily; disappearing dads; angry dads; banned dads
Table 1

Demographic Characteristics of Sample

<table>
<thead>
<tr>
<th>Age</th>
<th>Married</th>
<th>Time with Mom</th>
<th>Live Together?</th>
<th>Race</th>
<th>Highest Education</th>
<th>Employment</th>
<th>Other Children</th>
<th>Interviews completed</th>
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<tbody>
<tr>
<td>FN1</td>
<td>50</td>
<td>N</td>
<td>5 yrs</td>
<td>Y</td>
<td>B</td>
<td>HS</td>
<td>8</td>
<td>2</td>
</tr>
<tr>
<td>FN2</td>
<td>34</td>
<td>N</td>
<td>unknown</td>
<td>N</td>
<td>B</td>
<td>HS</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>FN3</td>
<td>22</td>
<td>N</td>
<td>&gt;2 yrs</td>
<td>Y</td>
<td>B</td>
<td>HS</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>FN4</td>
<td>35</td>
<td>Y</td>
<td>5 yrs</td>
<td>Y</td>
<td>Indian</td>
<td>MD</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>FN5</td>
<td>28</td>
<td>N</td>
<td>1 yr</td>
<td>N</td>
<td>B</td>
<td>HS+ SC</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>FN6</td>
<td>25</td>
<td>N</td>
<td>9 mos</td>
<td>Y</td>
<td>B</td>
<td>Lt HS</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>FN7</td>
<td>21</td>
<td>N</td>
<td>19mos</td>
<td>Y</td>
<td>B</td>
<td>HS</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>FN8</td>
<td>19</td>
<td>N</td>
<td>9 mos</td>
<td>N</td>
<td>B/Asian</td>
<td>HS</td>
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<td>3</td>
</tr>
<tr>
<td>FN9</td>
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<td>N</td>
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<td>N</td>
<td>B</td>
<td>HS</td>
<td>0</td>
<td>3</td>
</tr>
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<td>Y</td>
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<td>Y</td>
<td>B</td>
<td>HS</td>
<td>3</td>
<td>3</td>
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<td>FN11</td>
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<td>N</td>
<td>4 yrs</td>
<td>Y (dec)</td>
<td>B</td>
<td>HS</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

Abbreviations: HS, high school; LtHS, less than high school; SC, some college
Data Collection/Analysis

- 3 interviews, 3 points in time
- Semi-structured, digitally recorded; transcribed verbatim.
- Data analyzed concurrently
  - Max van Manen’s methodology
  - Structured using Heidegger’s philosophical concepts
Findings

- Categorized using two Heideggerian concepts:
  - Being in the World
  - Being with Others
  + New concept: Being a Changed Man
Themes

Being in the World

- shock; exploring hostile terrain; fearing the unnatural/abnormal; feeling powerless; unpredictability; survival skills; baggage

Being with Others

- feeling left out; feeling misunderstood; needing/accepting support; holding back from Mom; doubting/accepting paternity.

Being a Changed Man
**Powerlessness**

“That’s what made me mad... that’s the hurting thing man, when you know that’s your child, and you don’t have no say so of them whatsoever.”

“It’s almost like I have a child but I don’t, ‘cause I don’t get to interact with her.”

**Shock**

“It was very tough to look at the first day. I was like ‘Oh my God, look at the baby’s color!’ And you guys probably see it all the time. Maybe, oh yeah, that’s just normal, but I see MY child, so I was very upset, disappointed even, or scared... it’s a trauma.”
Hostile Terrain: Language barrier

“But half the stuff they be talking, man, I don’t understand it. Just ‘yeah, alright.’ ... It be so much running through my mind about him, that some stuff people say to me, I can listen to them but it ain’t gonna sink in until I think about it, so... Really, I be just like, ‘Is he okay?’”

Fearing the unnatural/abnormal

“It was so small... so thin... blue colored... just one eye open...”
“I started taking pictures recently, when she really kind of looked, you know, like a baby.”
“Looking forward to walking in one day and finding him looking just normal.”
“Scared something be wrong with her. .. Like mental retardation or something like that—that’d probably be the worst.”
Feeling Left Out

“They tell her when they feed and burp and everything else. They don’t let me know when or how to do it. They just come to her with it. I just gotta listen in. I guess I just feel a little left out.”

Baggage: Bearing Burdens of the Home World

“It was just crazy, because everything was happening so fast--I tried to be here, I had to do this, I had to do that. And then at the same time you know you gotta think, she was in the hospital and I had to get my little girl. I had to go get my little girl from my mother-in-law, or take her to my mom’s, take her from my mom’s, take her up here, come back from up here, and it was kinda taking a toll on me.”
Let's Break it Down!!!
Hostile Terrain: Building a New Concept

- Elements of hostile terrain
  - Navigational barriers - locked doors, one-way passages, separate elevators
  - Foreign language – abbreviations, medical terminology, jargon
  - Arbitrary rules – visitation times, passwords, procedures
  - Alien equipment – ventilators, incubators, monitors, tubes, beeping alarms

These factors put father in defensive posture on first visit; Perceives NICU as hostile, enemy environment; father is on a mission FROM MOM to gather intel.

Behind Enemy Lines: “Operation Recon”
Survival Skills and Beyond (a/k/a coping)

1. Being strong/persevering
2. Being there, presence at bedside
3. Choosing battles - choosing what to think about, where to expend energy
4. Acclimating
5. Having faith
Summary of Findings

Fathers:

- Struggle with powerlessness
- Troubled by abnormality; fluctuations in medical status
- Desire tasks to perform
- Choose battles logically
- Feel left out and misunderstood
- Hide thoughts/feelings to protect self and family
Extends previous research regarding *powerlessness*; in addition to feeling trapped in a *location* where they lack control (Lundqvist & Jakobsson, 2003; Arockiasamy et al., 2008; Pepper, Rempel, Austin, Ceci & Henderson, 2012). This study adds aspects of *powerlessness* in terms of *time, knowledge, and emotions*.

Feelings of *greed and envy* have not been described in previous studies on fathers of preterm infants.
Pohlman (2005) found that the fathers of neonates were frustrated by the “inability to do something about their situation” and met that need by *returning to work*. None of the fathers in this study expressed comfort related to going to work; spoke of work only in terms a *burden*

Parenting in NICU previously referred to as “plunging into a strange land” (Pepper et al., 2012, p. 306). Reinforces *strange* land concept through the metaphor of crash landing on a foreign planet, and adds the concept of “*hostile terrain*.”
Implications for Practice

- Give NICU tour to redefine “normal”
- Explain equipment to reduce perceived threat; model calm reactions
- Minimize medical jargon
- Assist in navigation
- Offer options for purposeful activity
- Encourage focus on weekly progress, not daily; Call with good news
- Emphasize importance of paternal role; encourage hands-on interaction; give equal coaching in infant care
Recommendations for Future Research

- Focus on specific ethnic/racial groups
- Multiple interviews with at least one post-discharge
- Male interviewer, similar demographics or experience; no ties to nurses caring for infant
- Others excluded from interview to minimize disguising
- Value partial data from absentee dads
Thank you.