Title:
Fathers’ Experiences in the Neonatal Intensive Care Unit: A Research Proposal

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Abstract Summary:
The aim of this study is to understand experiences of fathers of premature infants in the NICU and to generate an interpretation of the meaning of the father-infant interaction in the circumstances of premature birth.

Learning Activity:

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<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
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<td>The learner will be able to formulate an understanding of the need to study fathers’ experiences in the NICU through qualitative analysis</td>
<td>Through a research study proposal presented through a poster presentation</td>
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<td>The learner will recognize how a hermeneutic phenomenological approach can yield valuable information on the experiences of fathers in the NICU</td>
<td>Through a poster presentation of the proposed research study</td>
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Abstract Text:

Purpose: Prematurity is a global, national, and regional problem affecting one in ten babies each year. The costs associated with prematurity are multifaceted, since prematurity impacts families, healthcare, society, and parents. Infant costs include immediate and long lasting negative effects including pathologies that result in impairments and even death. Infants born prematurely often exhibit varying neurological deficits including developmental delays, behavioral problems and mental retardation. Hence, health care expenditures associated with prematurity are staggering. For instance, the average health care expenditures for a preterm birth/low birth weight infant are more than 10 times that of the cost of an uncomplicated newborn.

Societal costs associated with prematurity also are high since resources used to treat the condition include medical care, special education, and developmental services. It is known that parent-infant bonding can mitigate problems associated with these costs. Close physical contact between infants and their parents enhances the bonding process, improves infant outcomes and reduces cost. However, most of the research has considered the mothers’ experiences of having a premature infant and the quality of the mother-infant bonding process. Evidence suggests that the father-infant bonding process and fathers’
involvement with their infant is also associated with improved developmental outcomes. Bonding can be described as the establishment of an emotional connection between the parent and infant. This process may be impeded or disturbed by several factors associated with timing of birth and/or prolonged hospitalization, which many of these premature infants require. Survival rates and lengths of hospitalization are increasing, which can affect both the mother-infant and the father-infant bonding process. Research is needed specifically to address the gap in knowledge regarding fathers’ experiences.

The aim of this study is to understand experiences of fathers of premature infants in the neonatal intensive care unit (NICU) and to generate an interpretation of the meaning of the father-infant interaction in the circumstances of premature birth. A hermeneutic phenomenological approach will be used to collect and analyze data. Fathers of infants of various gestational ages and lengths of stay (n=15) will be interviewed in a private, one-on-one setting. The audio-recorded, de-identified transcripts will be analyzed by a team of investigators with skills in phenomenological analysis, resulting in patterns and interpretive commentary. A literature review was undertaken to explore extant research on fathers’ experiences of caring for their infants admitted to a NICU. Seventeen papers reporting primary research were identified. In highlighting the experiences of fathers, this study will add to the extant literature and raise awareness of the needs, perceptions, and experiences unique to fathers in the context of the NICU. Given the importance of positive infant outcomes, this study will be a valuable contribution to the literature that may promote fathers’ early interactions with their infants and foster healthy relationships and infant development.