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Psychological Distress And Perceived Social Support In Fathers Of Preterm Babies - A Survey

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ABSTRACT

Background: A premature baby's delivery is an immediate and significant source of worry for parents. Research has shown that parents of preterm infants endure much more stress than parents of full-term infants. Support and care are needed for both moms and fathers of infants in the neonatal intensive care unit (NICU). Parents find the experience of their prematurely born child being admitted to the neonatal intensive care unit (NICU) to be upsetting, and it has been linked to symptoms of anxiety, sadness, and post-traumatic stress disorder.

Methodology:

Parental Stressor Scale- Neonatal Intensive Care Unit and Multidimensional Scale of Perceived Social Support these scales were taken. Both the scales were translated in local language i.e. Marathi. A total 30 samples were selected randomly. Both scales were administered in local language.

Data analysis & Results - Descriptive analysis was used for PSS-NICU and MSPSS. As per PSS-NICU More than 70 % fathers have stress. On MSPSS they reported that they have social support from family and friends.

Discussion- For the question on not having time to be alone with my baby 6.67% had a little stressful, 16.67% had moderately stressful, 16.67% had very stressful and 30.00% had extremely stressful experience. According to Palma E et.al [2017] the fathers are not together anymore, medical treatments keep them from touching one other, and other people spend more time with the baby. Their relationship suffers as a result of their

shared fears and feelings of inadequacy.⁵ These things could be the reason for the father's experiencing stress for not having time to be alone with the baby.

Furthermore 80% fathers agreed that there is a special person with whom I can share my joys and sorrows, and approximately 87% of fathers who answered the question "there is a special person in my life who cares about my feelings" agreed. It has been noted that social support has various positive effects on physical health and successfully reduces psychological suffering, such as depression, during stressful times. Fathers who had less social support in their lives were more stressed.⁸ In Gao LL et.al [2009] study lower stress levels were linked to social support scores that were higher. Social support is believed to operate as a stress-reduction buffer.⁹

Conclusion:

According to our study we conclude that father's also experience stress when the child is in NICU. Social support is essential in this crucial period when the baby is in NICU. More than 70% fathers feel they have support from friends and family. It may be due to inclusivity of family members in decision making and supportive Indian culture.

Key words: fathers of preterm babies, NICU, stress, social support.

INTRODUCTION

A premature baby's delivery is an immediate and significant source of worry for parents. Research has shown that parents of preterm infants endure much more stress than parents of full-term infants. For both moms and fathers, having a preterm baby presents unique pressures and challenges. These include emotions of anxiety, loss of control, changing roles, being apart from the baby, and fearing for the baby's future and wellbeing. It has been discovered that fathers of preterm babies are more stressed than fathers of term babies. When visiting neonatal units, fathers may experience marginalization and be significantly less involved in providing care for their children than moms are. According to earlier studies, fathers and mothers consider each other to be the most prevalent source of support.¹

Parents find the experience of their prematurely born child being admitted to the neonatal intensive care unit (NICU) to be upsetting, and it has been linked to symptoms of anxiety, sadness, and post-traumatic stress disorder.² Fathers of premature babies in a medical NICU showed persistently high levels of stress in all categories of the stress measure throughout time.³ Fathers feel dread, anger, and guilt, just like moms do, and they continue to report feeling stressed while their babies are in the hospital.⁴ They are no longer together, medical procedures prevent them from having physical touch, and other individuals spend more time with the infant. This frequently results in insecurities and feelings of incompetence that damage their relationship.⁵

METHODOLOGY

This study was conducted after the approval of the Institutional Ethical Committee (IEC). The scales for parental stress and perceived support were identified. Parental Stressor Scale- Neonatal Intensive Care Unit and Multidimensional Scale of Perceived Social Support these scales were taken. Both the scales were translated in local language i.e. Marathi. Later the validation was done by the field expert. Parents who gave their written consent were included. Those who were not willing to participated in the study and who were not willing to provide their written consent were excluded. After getting the required validity and authenticity the

questionnaire was given to the participants. A total of 30 participants were included in the survey. Data was analysed using descriptive statistics.

RESULT AND DATA ANALYSIS

OBSERVATIONS AND RESULTS

Table No.1: Age distribution:

Age in years	Number	Percentage (%)
20-30 yrs.	16	53.34%
31-40 yrs.	13	43.33%
>40 yrs.	1	3.33%
Total	30	100.00%
Mean $\pm$ SD	28.68 yrs. $\pm$7.97 yrs.	

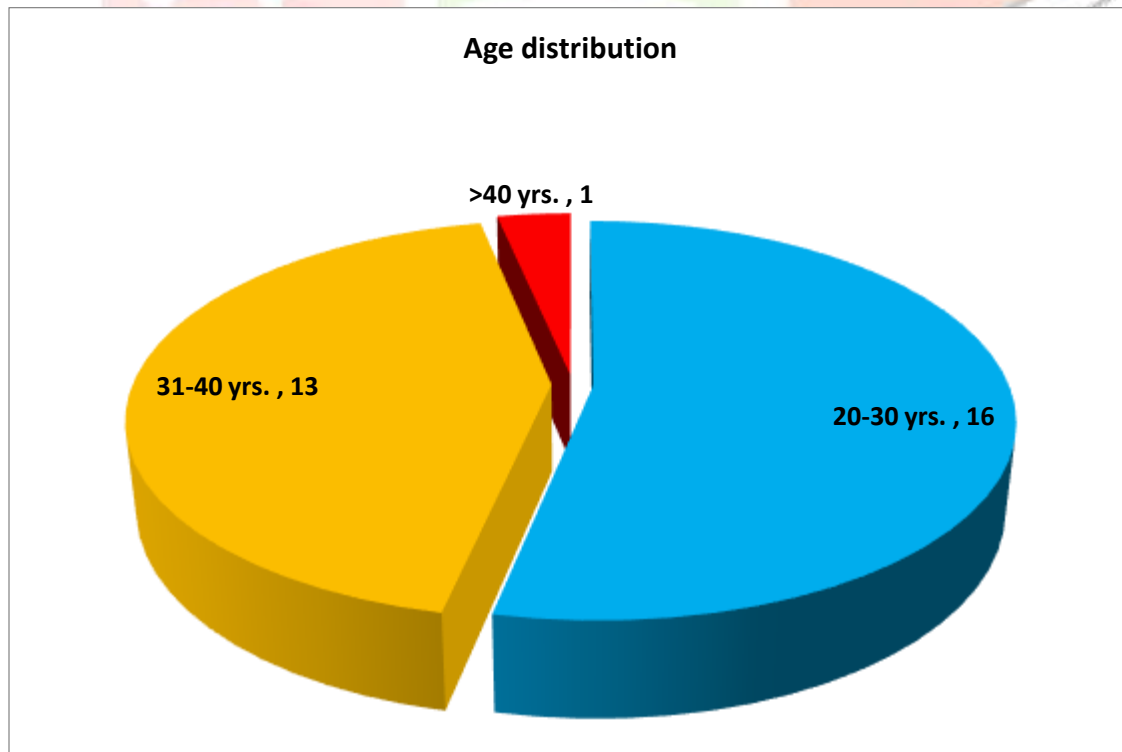


Table No.2: Responses for knowing about view of how stressful sights and sounds commonly experienced in an NICU? (PSS: NICU-16):

Questions	NA = Not Applicable	1 = Not at all stressful	2 =A little stressful	3 =Moderately stressful	4 =Very stressful	5 = Extremely stressful
	No. (%)	No. (%)	No. (%)	No. (%)	No. (%)	No. (%)
Q1:The presence of monitors and equipment	11(36.67%)	8(26.67%)	7(23.33%)	2(6.67%)	1(3.33%)	1(3.33%)
Q2:The constant noises of monitors and equipment	22(73.33%)	3(10.00%)	1(3.33%)	2(6.67%)	2(6.67%)	0(0%)
Q3:The sudden noises of monitor alarms	21(70.00%)	4(13.33%)	0(0%)	1(3.33%)	1(3.33%)	3(10.00%)
Q4:The other sick babies in the room	8(26.67%)	6(20.00%)	8(26.67%)	3(10.00%)	3(10.00%)	2(6.67%)

Responses for knowing about view of how stressful sights and sounds commonly experienced in an NICU? (PSS: NICU-16)

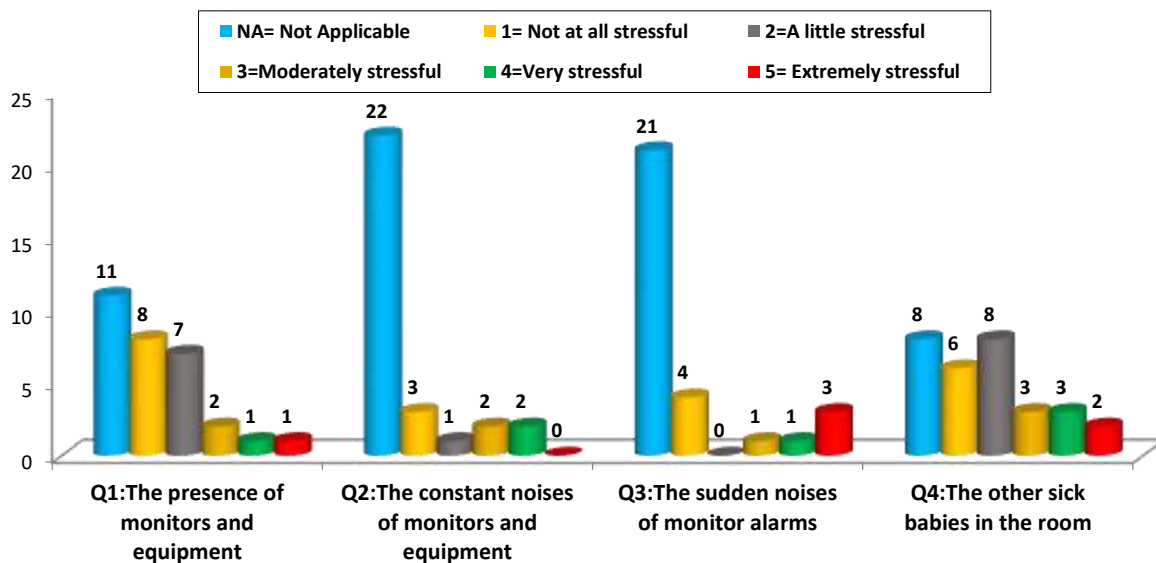


Table No.3: Responses for knowing about view of baby looks or looked and behaves or behaved while you are or were visiting in the NICU? (PSS: NICU-16):

Questions	NA = Not Applicable	1 = Not at all stressful	2 =A little stressful	3 =Moderately stressful	4 =Very stressful	5 = Extremely stressful
	No. (%)	No. (%)	No. (%)	No. (%)	No. (%)	No. (%)
Q1:The unusual color of my baby (for example looking pale or yellow jaundiced)	22(73.33%)	3(10.00%)	1(3.33%)	2(6.67%)	2(6.67%)	0(0%)
Q2:My baby's unusual or abnormal breathing patterns	16(53.33%)	2(6.67%)	5(16.67%)	3(10%)	2(6.67%)	2(6.67%)
Q3:My baby being fed by an intravenous line or tube	6(20.00%)	5(16.67%)	6(20.00%)	7(23.33%)	2(6.67%)	4(3.33%)
Q4:The limp and weak appearance of my baby	6(20.00%)	5(16.67%)	11(36.67%)	0(0%)	4(3.33%)	4(3.33%)
Q5:Jerky or restless movements of my baby	22(73.33%)	2(6.67%)	0(0%)	3(10%)	2(6.67%)	1(3.33%)
Q6:My baby not being able to cry like other babies	18(60.00%)	3(10.00%)	3(10%)	4(3.33%)	1(3.33%)	1(3.33%)
Q7:Having a machine (respirator) breathe for my baby	13(43.33%)	1(3.33%)	3(10%)	7(13.33%)	4(3.33%)	2(6.67%)

Responses for knowing about view of baby looks or looked and behaves or behaved while you are or were visiting in the NICU? (PSS: NICU-16)

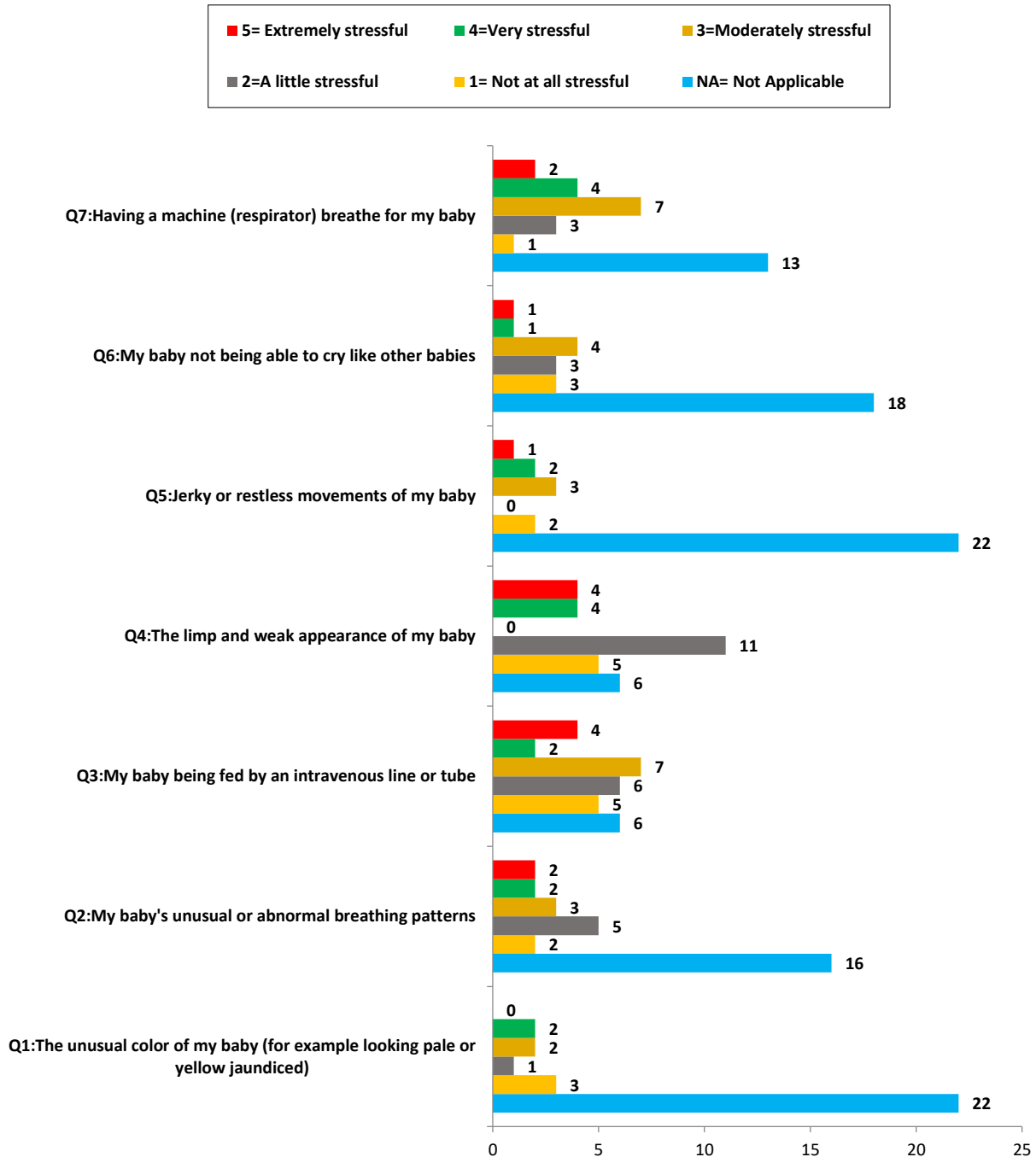


Table No.4: Responses for knowing about parent relationship with baby and parental role with the baby in the NICU (PSS: NICU-16):

Questions	NA = Not Applicable	1 = Not at all stressful	2 =A little stressful	3 =Moderately stressful	4 =Very stressful	5 = Extremely stressful
	No. (%)	No. (%)	No. (%)	No. (%)	No. (%)	No. (%)
Q1: Being separated from my baby	4(13.33%)	5(16.67%)	3(10.00%)	6(20.00%)	5(16.67%)	7(23.33%)
Q2: Not feeding my baby myself	2(6.67%)	9(30.00%)	5(16.67%)	5(16.67%)	5(16.67%)	4(13.33%)
Q3: Not being able to care for my baby myself (for example, changing nappies, bathing)	4(13.33%)	10(33.33%)	4(13.33%)	4(13.33%)	4(13.33%)	4(13.33%)
Q4: Feeling helpless about how to help my baby during this time	2(6.67%)	8(26.67%)	5(16.67%)	6(20.00%)	5(16.67%)	4(13.33%)
Q5: Not having time to be alone with my baby	3(10.00%)	6(20.00%)	2(6.67%)	5(16.67%)	5(16.67%)	9(30.00%)

Responses for knowing about parent relationship with baby and parental role with the baby in the NICU (PSS: NICU-16)

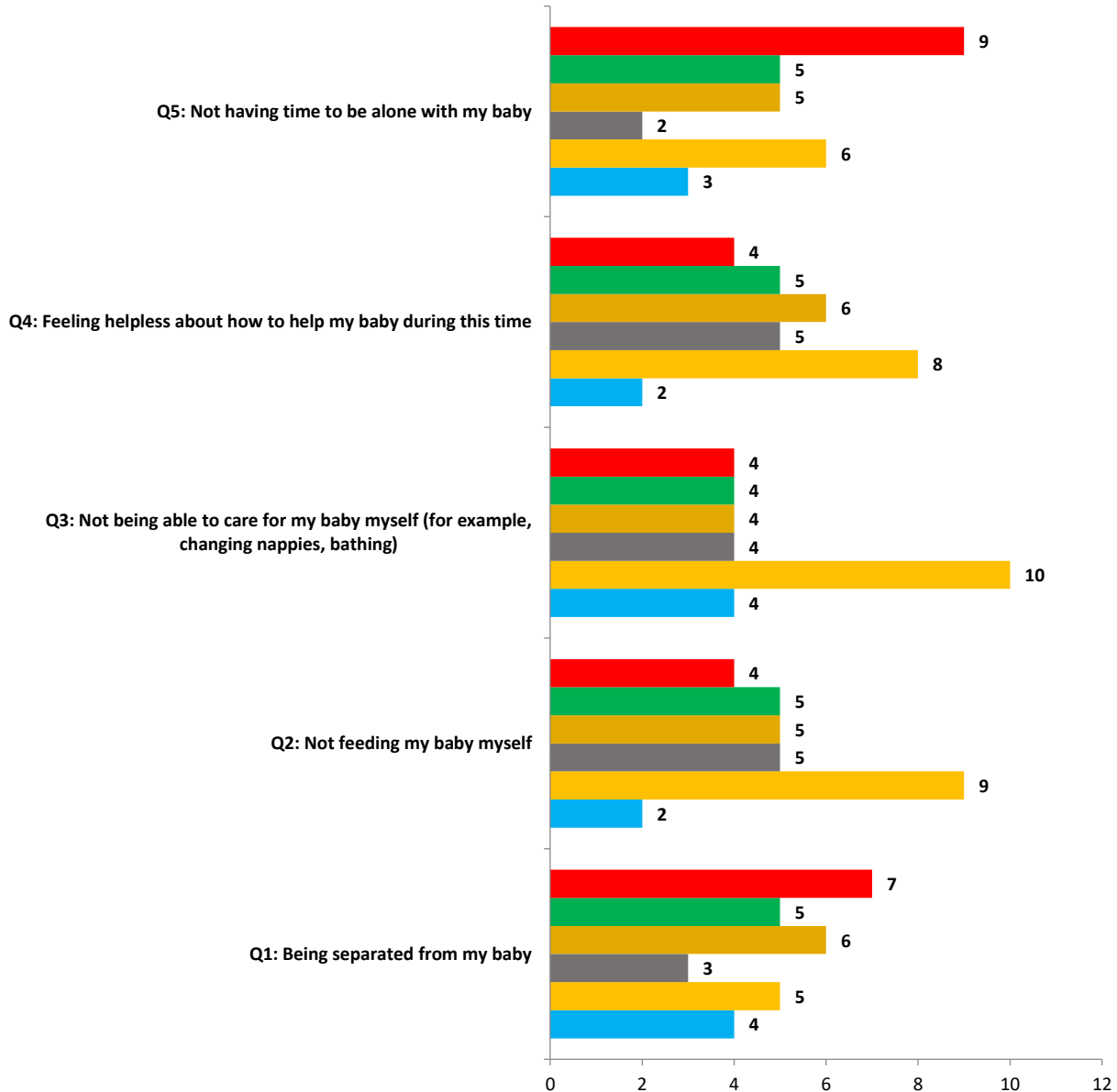
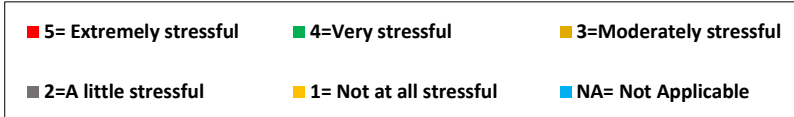
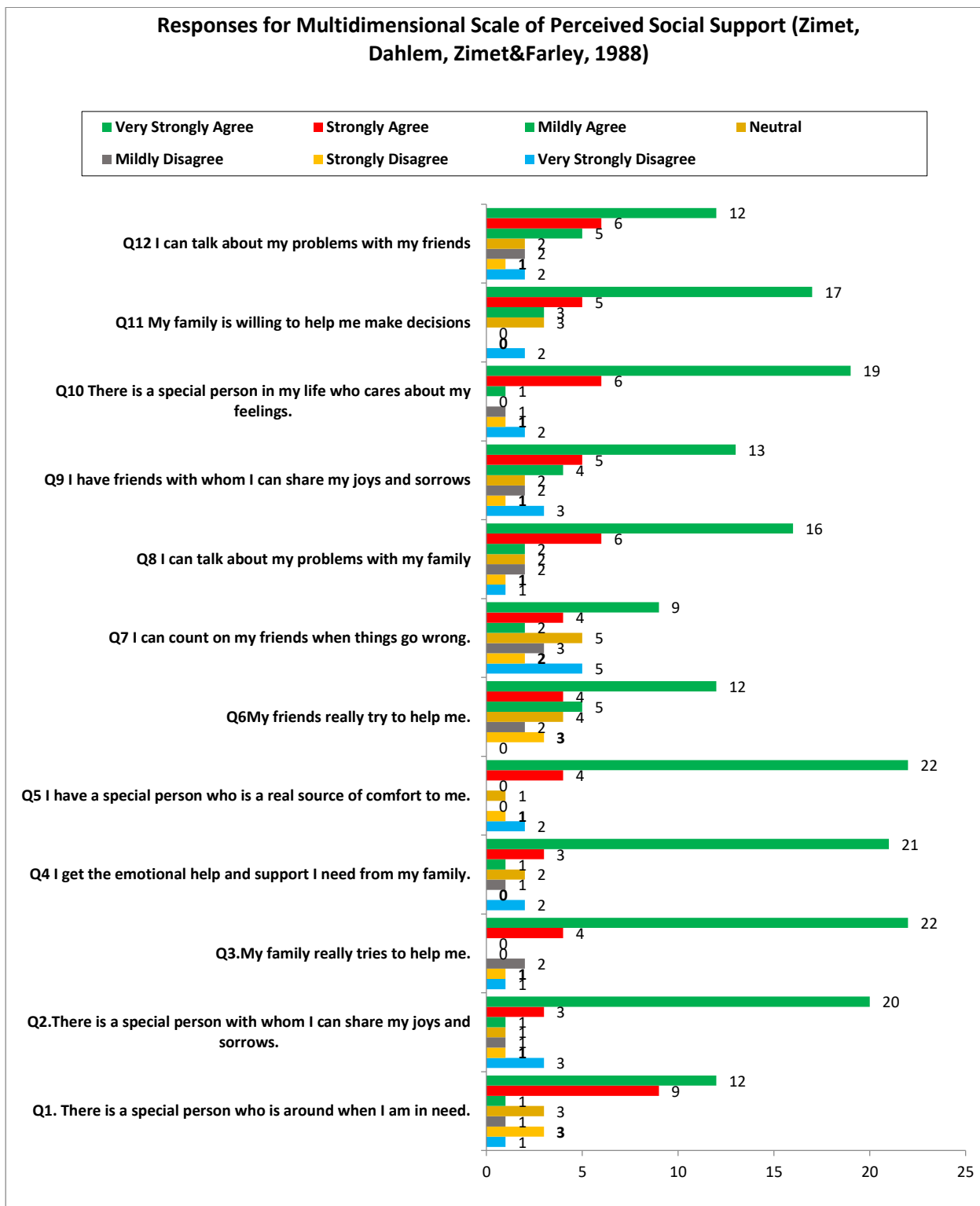


Table No.5: Responses for Multidimensional Scale of Perceived Social Support (Zimet, Dahlem, Zimet&Farley, 1988):

Questions	1 = Very Strongly Disagree	2 = Strongly Disagree	3 = Mildly Disagree	4= Neutral	5 = Mildly Agree	6 = Strongly Agree	7 = Very Strongly Agree
	No. (%)	No. (%)	No. (%)	No. (%)	No. (%)	No. (%)	No. (%)
Q1. There is a special person who is around when I am in need.	1(3.33%)	3(10.00%)	1(3.33%)	3(10.00%)	1(3.33%)	9(30%)	12(40%)
Q2. There is a special person with whom I can share my joys and sorrows.	3(10.00%)	1(3.33%)	1(3.33%)	1(3.33%)	1(3.33%)	3(10.00%)	20(66.67%)
Q3. My family really tries to help me.	1(3.33%)	1(3.33%)	2(6.67%)	0	0	4(13.33%)	22(73.33%)
Q4 I get the emotional help and support I need from my family.	2(6.67%)	0	1(3.33%)	2(6.67%)	1(3.33%)	3(10.00%)	21(70%)
Q5 I have a special person who is a real source of comfort to me.	2(6.67%)	1(3.33%)	0	1(3.33%)	0	4(13.33%)	22(73.33%)
Q6 My friends really try to help me.	0	3(10.00%)	2(6.67%)	4(13.33%)	5(16.66%)	4(13.33%)	12(40%)
Q7 I can count on my friends when things go wrong.	5(16.66%)	2(6.67%)	3(10.00%)	5(16.66%)	2(6.67%)	4(13.33%)	9(30%)
Q8 I can talk about my problems with my family	1(3.33%)	1(3.33%)	2(6.67%)	2(6.67%)	2(6.67%)	6(20%)	16(53.33%)
Q9 I have friends with whom I can share my joys and sorrows	3(10.00%)	1(3.33%)	2(6.67%)	2(6.67%)	4(13.33%)	5(16.66%)	13(43.33%)
Q10 There is a special person in my life who cares about my feelings.	2(6.67%)	1(3.33%)	1(3.33%)	0	1(3.33%)	6(20%)	19(63.33%)
Q11 My family is willing to help me make decisions	2(6.67%)	0	0	3(10.00%)	3(10.00%)	5(16.66%)	17(56.67%)
Q12 I can talk about my problems with my friends	2(6.67%)	1(3.33%)	2(6.67%)	2(6.67%)	5(16.66%)	6(20%)	12(40%)



DISCUSSION

It has been found that out of 30 father's the maximum number of fathers i.e. 54.34% in the age group of 20-30 years and 43.33% were in the age group of 31-40 years. The average age of 30 fathers was 28.68 years.

The present study showed father's view on knowing about stressful sights and sounds commonly experienced in an NICU. The questionnaire (PSS:NICU-16) was asked to father's and their responses were noted and it was found that for question on the presence of monitors and equipment 23.33% fathers had a little stressful, 6.67% showed moderately stressful, 3.33% showed very stressful and 3.3% showed extremely stressful experience. According to Turan T et.al [2008] monitors, ventilators, and warning noises are all frightening. Families may experience increased stress as a result of tubes and monitors placed next to or attached to

incubators and babies. These could be the things that made the sights and sounds that the fathers frequently encountered so unpleasant.⁶ For the question on the limp and weak appearance of my baby 36.67% had a little experience, 0% had moderately stressful, 3.33% had very stressful and 3.33% had extremely stressful experience. According to the study by Joseph RA et.al [2007] parents may feel overwhelmed, afraid, or shocked. The parents now have to replace their mental picture of a healthy baby with that of a little, frail, sick child in need of surgery.¹⁰ Thus the weak appearance of their baby could be stressful for the fathers.

According to Carson C [2015] preterm birth can include a significant lot of uncertainty, separation, and exposure to situations where there is a possibility of the baby's death.⁷ According to Palma E et.al [2017] the fathers are not together anymore, medical treatments keep them from touching one other, and other people spend more time with the baby. Their relationship suffers as a result of their shared fears and feelings of inadequacy.⁵ These things could be the reason for the father's experiencing stress for not having time to be alone with the baby.

During hospitalization of babies the family and social support is essential for parents. To assess the perception of social support we used Multidimensional Scale of Perceived Social Support.

Nearly 80% of fathers agreed that they can talk to their family about their problems if the family structure and friendship is good and they feel supported. It is also related to the inclusivity of all the family members including grandparents, partner, siblings in decision making and supporting in Indian culture as compared to western. According to Bansal SB et.al [2014] joint families benefit from having someone to care for your children, sharing jobs and expenses, having guidance and support available, and never having to worry about family members being alone.¹¹

It has been noted that social support has various positive effects on physical health and successfully reduces psychological suffering, such as depression, during stressful times. Fathers who had less social support in their lives were more stressed.⁸ In Gao LL et.al [2009] study lower stress levels were linked to social support scores that were higher. Social support is believed to operate as a stress-reduction buffer.⁹

CONCLUSION

According to our study we conclude that father's also experience stress when the child is in NICU. This stress can be due to monitors, equipments, ventilators, their alarms etc. Further staying away from the baby and their hospitalisation, financial burden, child's condition also played role in the stress of fathers.

Social support is essential in this crucial period when the baby is in NICU. More than 70% fathers feel they have support from friends and family. It may be due to inclusivity of family members in decision making and supportive Indian culture.

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