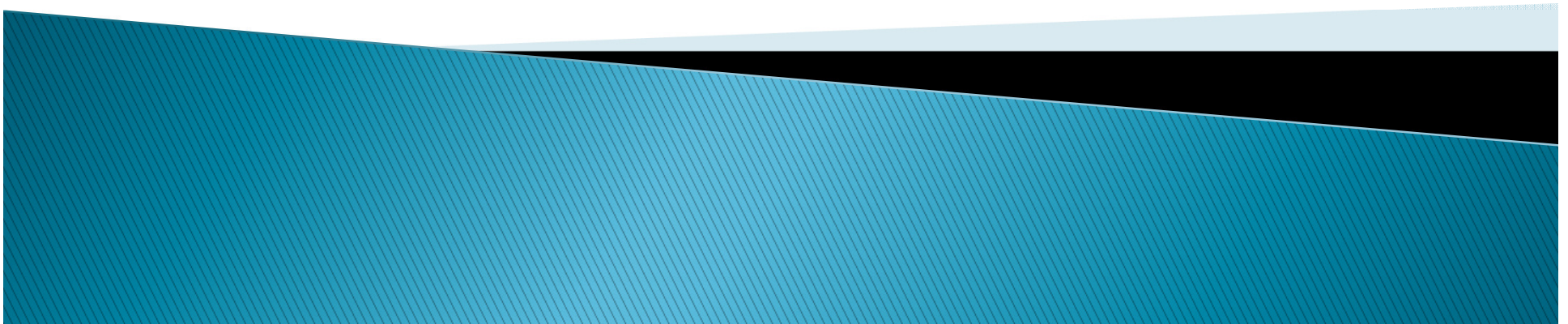
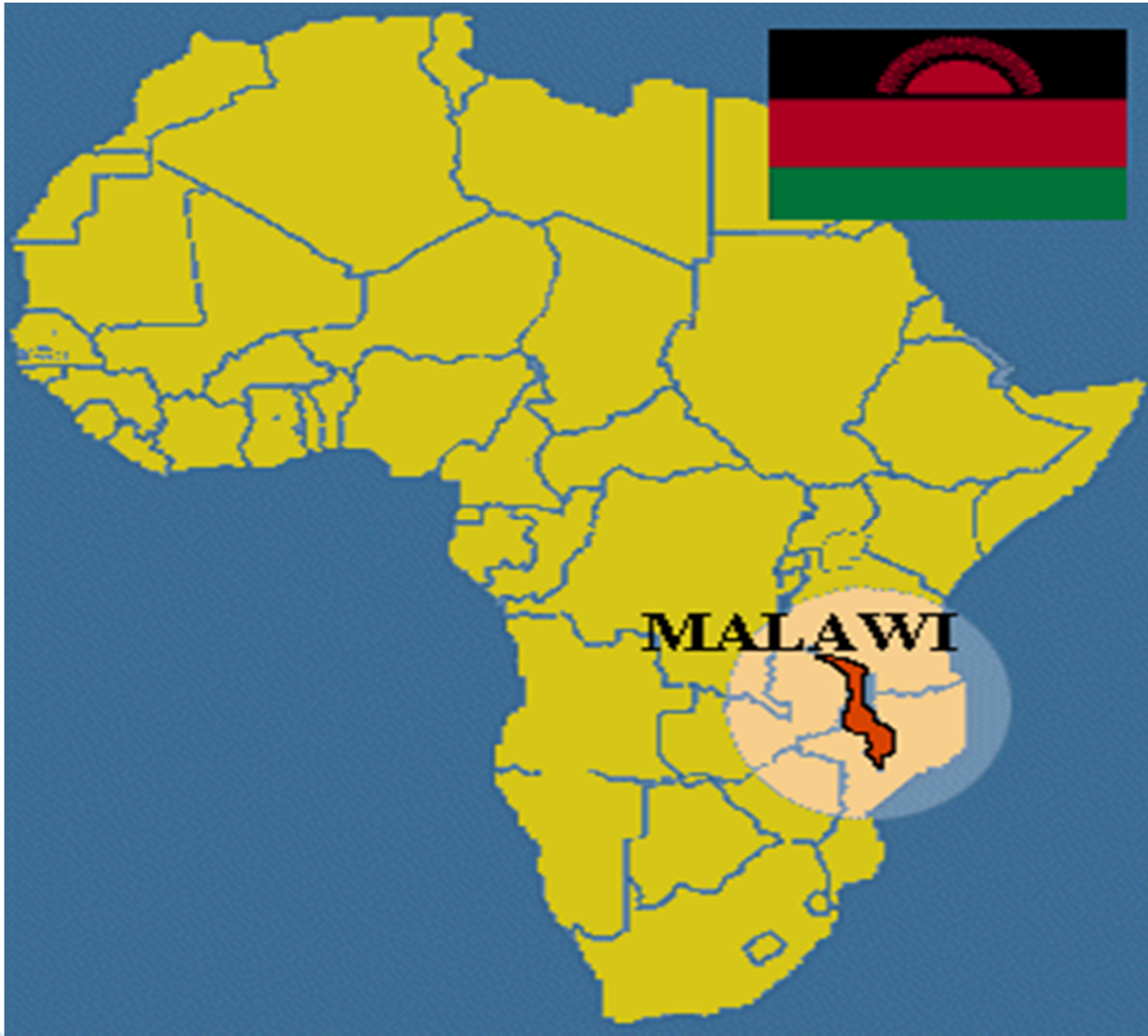


Strategies to support maternal–newborn bonding for mothers of newborn babies admitted in a neonatal intensive care unit at one of the tertiary hospitals in Malawi

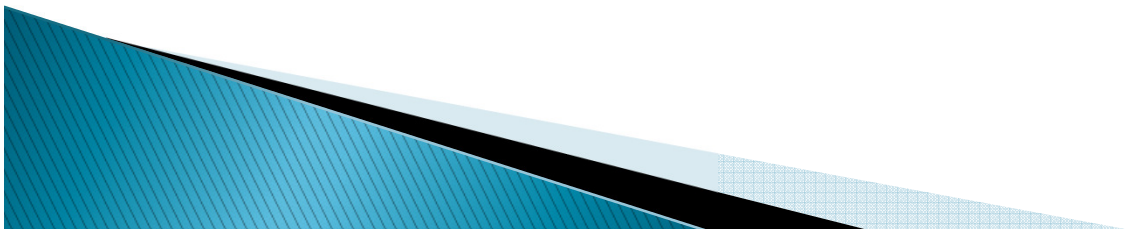
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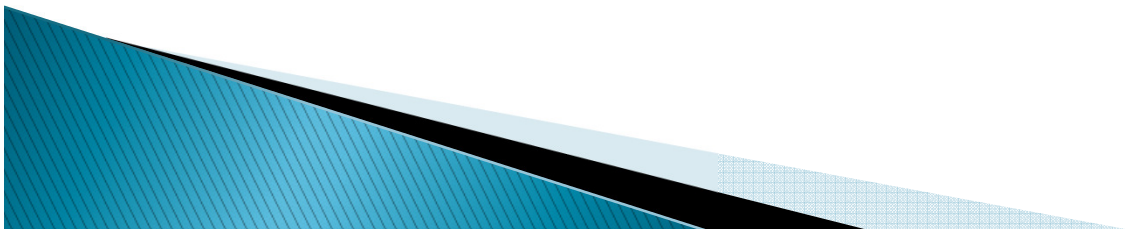
Introduction

- ▶ Bonding is considered the central developmental force across the lifespan (Feldman, Weller, Leckman, Kuint, & Edelman, 1999).
- ▶ To enhance maternal-newborn attachment infants need to be close to their mothers to cue their needs and mothers need to be close to respond to them (Karl et al., 2006).



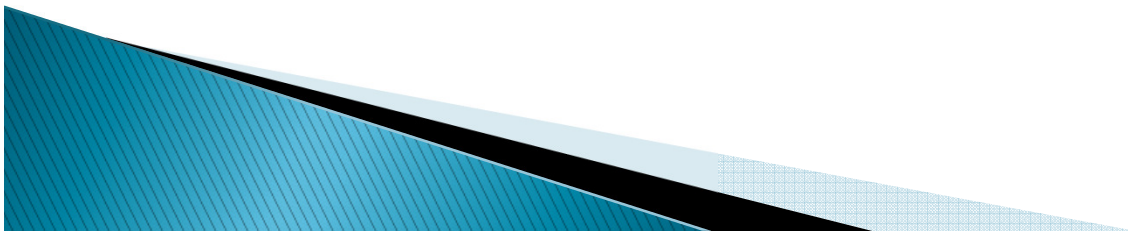
Introduction cont.

- ▶ Illness and hospitalization of a newborn baby may interfere with the natural maternal–infant bonding and attachment process
- ▶ Mothers struggle in getting connected with their newborn babies due to restrictions in the neonatal intensive care units



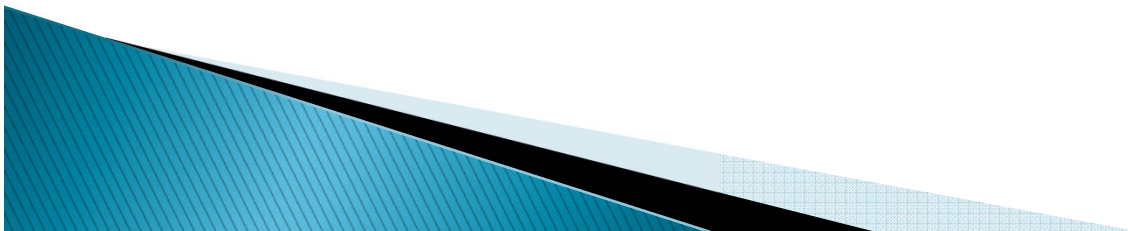
Introduction cont.

- ▶ Studies show that nurses play an important role in supporting maternal–newborn bonding while providing specialised care in the neonatal intensive care unit (Kearvell & Grant, 2010; Obeidat et al., 2009).



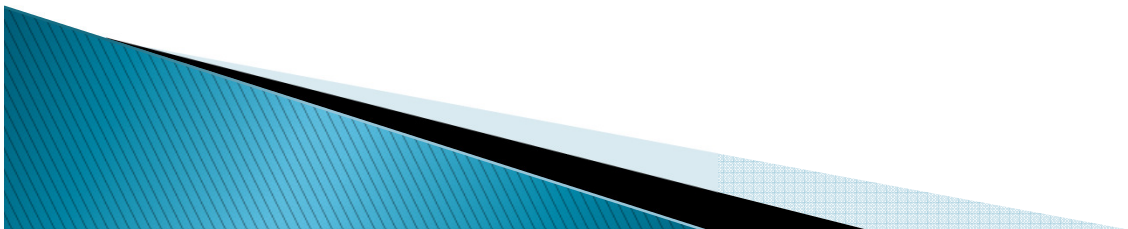
Purpose

- ▶ To explore the strategies used by nurses and midwives to support maternal–newborn bonding and attachment for mothers with neonates admitted in a neonatal intensive care unit



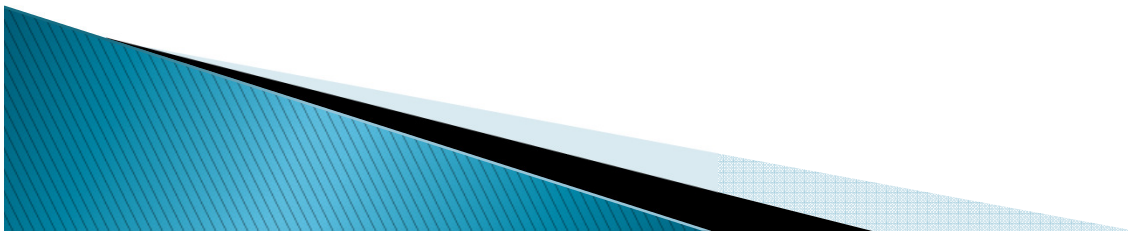
Methodology

- ▶ The study was conducted at a tertiary hospital in the Eastern part of Malawi
- ▶ Qualitative-in-depth interviews and observations
- ▶ 15 participants were included-10 caregivers and 5 nurses and midwives
- ▶ Data was transcribed verbatim and content analysis used to identify themes and patterns in the text



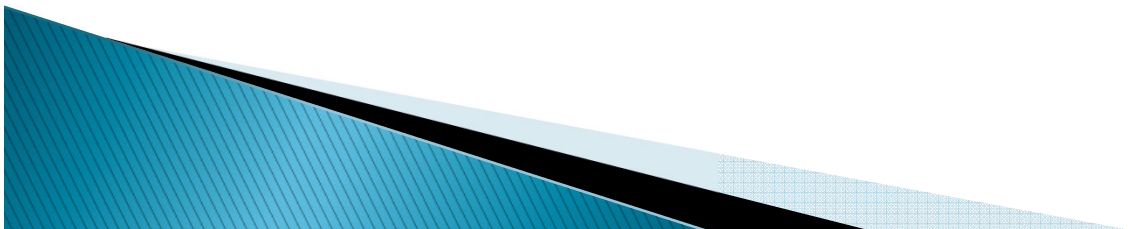
Ethical considerations

- ▶ The study met all the ethics requirements
- ▶ Participants gave both verbal and written consent
- ▶ Integrity, privacy and confidentiality was observed throughout the process



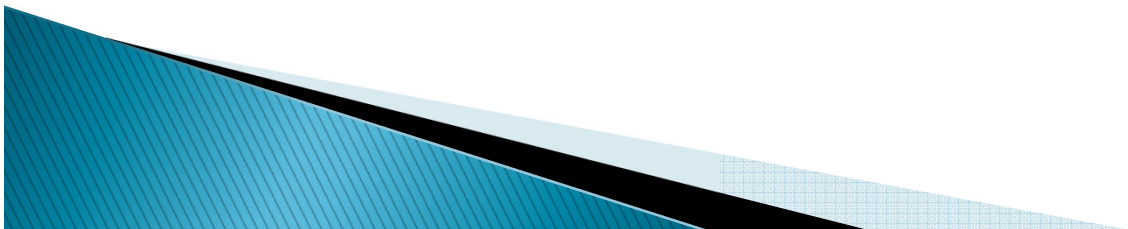
Results

- ▶ Results revealed that nurses use several strategies to support maternal–newborn bonding
- ▶ Two themes
 - Maternal–newborn interaction
 - Maternal–nurse/midwife interaction



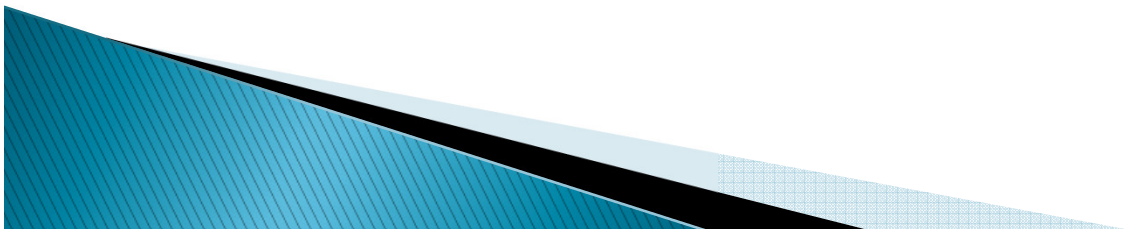
Maternal–newborn interaction

- ▶ Nurses and midwives use different approaches to promote maternal–newborn bonding
 - Breastfeeding–promoted a feeling of ‘being together’
 - *“when the neonate is admitted in this unit...usually we encourage the mother to be coming for breastfeeding...feeding their babies, it is important...for attachment as well”* (Nurse–Midwife)



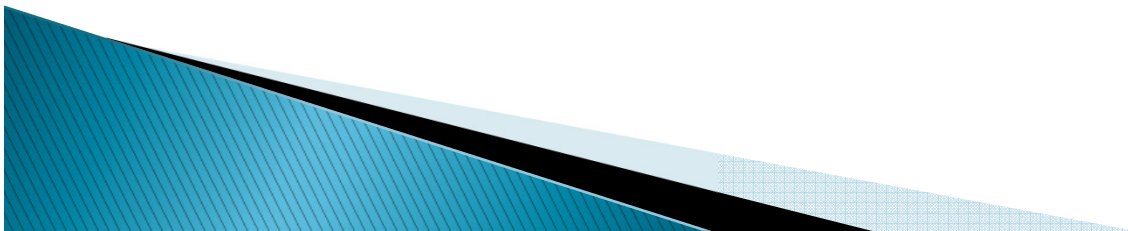
Maternal–newborn interaction cont.

- ▶ Caregiver participation in newborn’s routine care
 - Mothers involved in newborn care i.e. feeding, touching, changing nappies
 - “...they assist us, they also involve us...like feeding the baby, we do it ourselves...sometimes changing nappies. The nurses also encourage us to communicate with the baby...playing with the baby...”
(Mother)



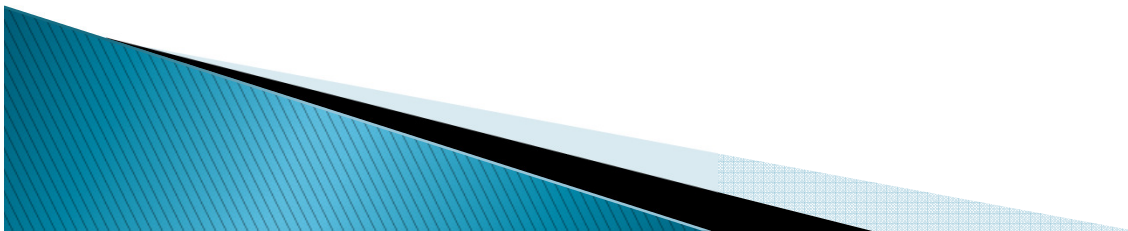
Maternal–newborn interaction cont.

- ▶ Kangaroo mother care
 - Mothers with premature babies encouraged to do KMC—to promote skin-to-skin contact–reciprocal pleasure



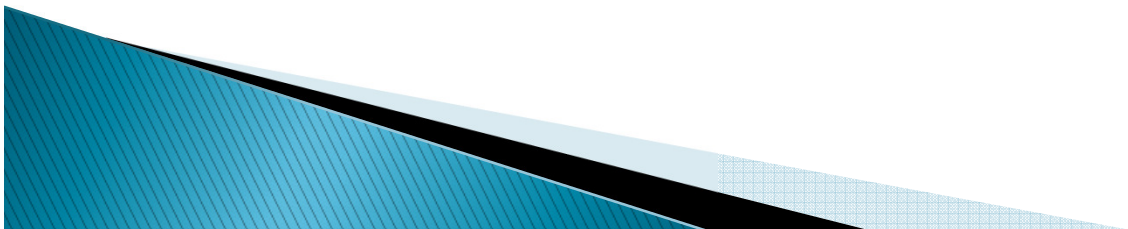
Maternal–nurse interaction

- ▶ The relationship between the mother and nurse was viewed as important in supporting a mother to establish a connection with her infant
- ▶ Friendly and sensitive nurses were viewed as being supportive to the mothers
 - guided and strengthened maternal responses to their infants



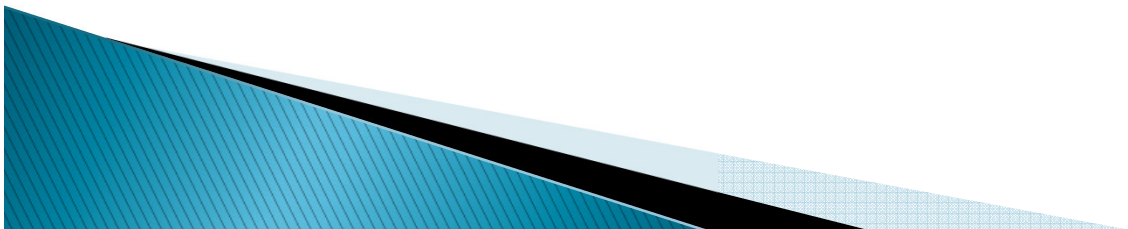
Maternal–nurse interaction cont.

- ▶ Mothers reported developing a positive connection with their newborn babies when they were assisted by the nurses
- ▶ The nurses and midwives provided psychosocial support to the mothers
 - Guidance, emotional support, encouragement and education–maternal confidence



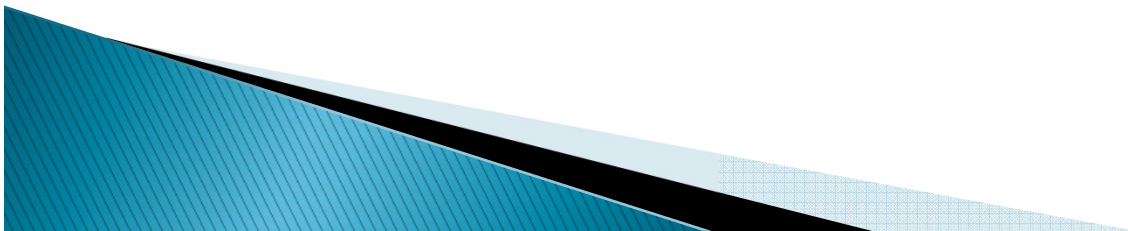
Maternal–nurse interaction cont.

- ▶ Continuous communication with mothers
 - Mothers reported that nurses who continuously communicated with caregivers enhanced attachment i.e.
 - There was reduced anxiety among mothers
 - Mothers understood the health status of their newborn babies
 - Mothers developed confidence in the care provided to the newborn babies



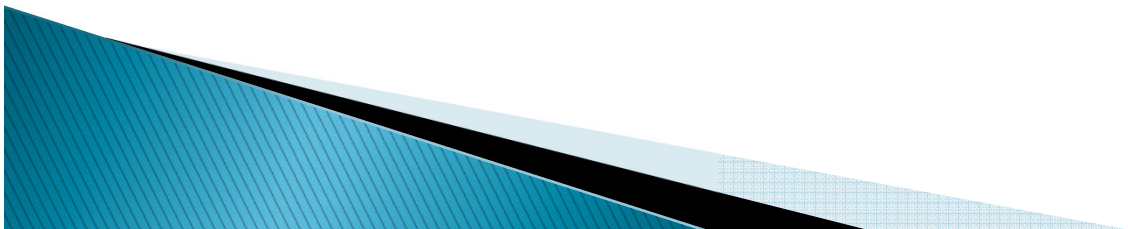
Conclusion

- ▶ Nurses and midwives who encourage mother–newborn interaction through breastfeeding, maternal participation in newborn care, KMC, in addition to maternal–nurse interaction through psychosocial support and communication are key to promoting maternal–newborn bonding



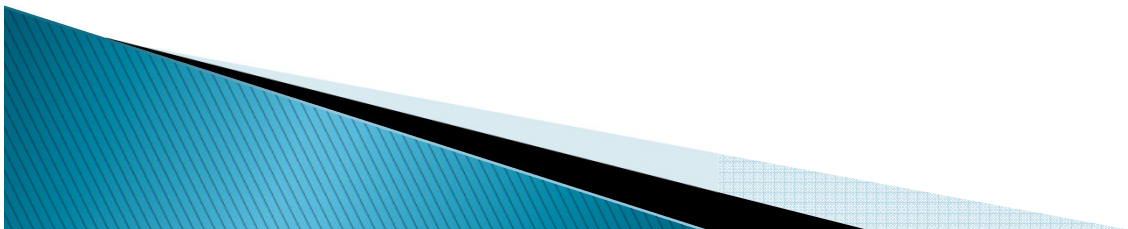
Conclusion cont.

- ▶ Nurses need to be active in initiating these strategies to facilitate maternal–newborn bonding and attachment
- ▶ Nurses need adequate support and clear guidelines for effective support to mothers with newborn babies in the intensive neonatal care units.



References

- ▶ Obeidat, H.M., Bond, E.A. & Callister, L. C. (2009). The Parental Experience of Having an Infant in the Newborn Intensive Care Unit. *Journal Perinatal Education*. 18; 23-29. doi: 10.1624/105812409X461199



References cont.

- ▶ Kearvell, H. & Grant, J. (2010). Getting connected: How nurses can support mother/infant attachment in the neonatal intensive care unit. *Australian Journal of Advanced Nursing*, Vol. 27; 75–82.

