

CHAPTER 5

Conclusions and Recommendations

This chapter presents the conclusions of the study, lessons learnt, implications and limitation of the study. Finally, some recommendations for further study are described.

Conclusions of the Study

The major purpose of this study was to gain a better understanding of parent involvement in caring for hospitalized preterm infants in the Thai context. Attachment theory was used as the theoretical framework of this study and focused ethnographic approach was selected as a research design. Various data collection techniques were employed to gather data, including participant observation, in-depth interviews, and supplementary sources. Purposive sampling was used to recruit both key informants and general informants. Twenty-two of preterm infants in the SNB of a regional hospital in Eastern Thailand were the key informants and the general informants included two grandmothers of preterm infants and three nurses. Data were analyzed by using Braun and Clarke's thematic analysis method (2006). The findings of the study followed the research questions: the perceptions of parents and the caregiving practices related to caring for their hospitalized preterm infants and the socio-cultural factors influencing their involvement in the baby's care.

The findings are divided into two parts. The first part is the perceptions and the caregiving practices of parents, and the four themes that emerged: 1) uncertainty about their child's condition, 2) desire to be close to their preterm babies, 3) lack of confidence in providing care for their preterm babies, and 4) overcoming difficulties in breastfeeding. Most parents were uncertain about their child's condition. When they saw their babies, they were worried about their babies. They tried to seek information about their child's condition, treatment and the test result by asking from a physician or nurse. Some of them also prayed to the Buddha and made a vows to shrines as they

believed that their preterm babies would become healthy. Most parents desired to be close to their babies as they longed for performing maternal role. They sought any chance to be involved in caring for their babies. However, while parents were taking part in the care, most of them lacked confidence and were afraid that they could put their babies at risk. They viewed that they received insufficient information about how to care for their babies and they performed care with insufficient skills. They only provided care for their babies according to the nurse's advice. Moreover, informant mothers were trying to overcome difficulties in breastfeeding. Most of them preferred to feed breast milk to their babies as they strongly believed in the benefits of breast milk that it is good for baby's health. Therefore, they tried many ways to produce enough milk supply. While some mothers were breastfeeding, they showed effective bonding with their babies. Some had conflicts with forcing their preterm babies to suck, struggled with babies who were unable to latch, and were exhausted from 24-hour breastfeeding.

The second part revealed that parent involvement in caring for their hospitalized preterm infants were influenced by the socio-cultural factors which included 1) parental involvement policy, 2) lack of parental involvement guidelines, 3) passive recipient of health care, 4) employee leave policy, and 5) family support. The findings revealed that the SNB implemented the policy of promoting bonding and newborn development and the policy of preparing parental skills for discharge. These policies enabled parents to be involved in caring for their hospitalized preterm infants. However, there were no parental involvement guidelines in caring for hospitalized preterm infants; therefore, the information provided by each nurse was varied and sometimes nurses did not cover all information to all parents. In addition, parents were passive recipients of care from physicians or nurses rather than an actively role in care. They were less involved in decision-making and left care decision to physicians or nurses. Some parents were reluctant to ask information from physicians or nurses, especially when they saw them busy working. Moreover, employee leave policy and support from their family facilitated them to be involved in caring for their preterm infants.

In summary, this ethnographic study heightened the perceptions and caregiving practices of parents when they involved in the care for their hospitalized preterm infants

and parent involvement was influenced by Thai socio-cultural factors which facilitated or limited their involvement.

Lesson Learned

1. Learning about ethnography from textbooks is not adequate when conducting a study in a real situation. Particularly, a novice researcher who anticipates the using of ethnographic approach need to be well-organized and prepared to conduct the field work.

2. Selecting suitable participants with rich information and building a trustworthy relationship with them is one of the most important aspects of an ethnographic study. The researcher need to spend more time in the field to understand participants and to build rapport with them.

3. Participant observation is the primary data collection method in an ethnographic approach. Therefore, during the period of observation, the researcher should be sensitive in an ear and eye to unspoken messages such as environment, activities, and interaction of participants.

4. The notes during the interviews need to be done and need to probe for clarifying information from the participants.

Implications of the Study

The findings of this study will be useful for healthcare provider in taking care of parents and their preterm infants. The findings can enhance understanding of healthcare providers on the perceptions of parents when they involved in caring for their hospitalized preterm infants and the socio-cultural factors influencing parent involvement should be concerned. The findings provide several implications for nursing practice and nursing policy.

Implications for Nursing Practices

The findings could be used as baseline data for nurses to effectively enhance parents to be involved in caring for their preterm infants by improving intervention strategies and supporting parents with a focus on individualized care. The nurses who work closely with parent have the capacity to enhance parent involvement in caring for hospitalized preterm infants. The implications for nursing practice are as follows:

1. Nurses should develop a parental involvement guideline in order to provide consistent direction to encourage or promote parent involvement in caring for their preterm infants effectively.

2. Nurses should provide sufficient information about baby's condition, treatment and care for parents by assessing parents' ability and willingness to involve in their baby care as well as giving an opportunity for parents to involve in decision-making process about their baby's care.

3. Nurses should encourage fathers and grandmothers of hospitalized preterm infants to take part in the care in order to supporting and empowering mothers to provide care for their babies.

4. Nurses would develop intervention program for preparing parents to get involved in caring for their preterm infants. In this way, this program should be concerned about individualized parents such as baby's condition and needs, parents' own capability, parental beliefs and backgrounds, and other socio-cultural contexts that could influence parent involvement. Importantly, the program should include the key person of parents such as their spouses and grandmothers who will receive information about care and support mothers and/or fathers of preterm infants.

Moreover, the programs should be developed by nurses, other healthcare providers and parents who involve in their infant's care in order to suitable with their needs. In the process, this program could be implemented before the first visit to the SNB. Particularly, the beginning of the program should provide overall information about the characteristics of preterm infant, health condition, and treatment as well as environment of the units. In addition, the program needs to assess the perceptions of

each parent on infant' illness and treatment, the need of parents in providing care as well as parent's ability in care at the early stage of involvement before parents perform care and give a chance for the parents to make a decision about involvement in care. To give the information to the parents, it is required to use simple terms to make parents understand easily. For preparing parental knowledge and skills in care, the program would provide leaflets, pamphlets, or visual media (a video) about how to care for their infants, give a demonstration and let parents repeat the demonstration in some procedures. During parent involvement in care, the program has to provide emotional support and encouragement of their parental role.

Implications for Nursing Policy

The findings of this study showed that parent involvement in caring for their hospitalized preterm infants were influenced by the socio-cultural factors which related to nursing and health policy. The implications of these findings for nursing and health policy are as follows:

1. The finding showed a lack of parental involvement guidelines, making the information given by each nurse varied. Therefore, nurse administrators should develop parental involvement guidelines and determine their use in nursing practice to be able to enhance parent involvement in caring for preterm infants effectively.

2. The finding showed that the hospital tried to reduce parent-infant separation and promoted parent involvement in care for their preterm infants. However, parents still showed that they felt uncertainty about their child's condition. Therefore, hospital and nurse administrators should consider allowing unrestricted visiting hours of 24 hours a day to nursing practice in order to reduce parents' uncertainty and to support parent involvement.

3. The finding showed that parents played a role of passive recipients of health care rather than equal partners in care. Therefore, hospital administrators should consider and determine the family-centered care as a policy of caring for preterm infants which help nurses understand more and give opportunity for the parents to collaborate in caring for their preterm infants.

Limitation of the Study

In this study, the interview data were primarily obtained from mothers because fathers were employed; therefore, an understanding of fathers' unique perspective is limited.

Recommendations for Further Study

This study demonstrated the importance of exploring Thai parent involvement in caring for hospitalized preterm infants. Based on the above findings, there are some recommendations for further study.

1. Further research is needed to the development of intervention programs to enhance parent involvement in caring for hospitalized preterm infant by using these findings to be the basis information and focusing on the socio-cultural factors influencing parent involvement.
2. Further research is needed to develop a parental involvement guideline by using these findings which help to improve the quality of care for preterm infants and to enhance parent involvement effectively.
3. Further research should recruit more fathers into the study, which will allow nurses to gain more understanding of fathers' perspective on involvement in caring for hospitalized preterm infants.

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