

**MAINTAINING EQUILIBRIUM: ALTERING
MATERNAL PERCEPTIONS OF
MOTHERING IN THE NICU**

by

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For the award of

Master of Nursing

Faculty of Nursing, Midwifery and Health
University of Technology, Sydney

2006

CERTIFICATE OF AUTHORSHIP/ORIGINALITY

I certify that the work in this thesis has not previously been submitted for a degree nor has it been submitted as part of requirements for a degree except as fully acknowledged within the text.

I also certify that the thesis has been written by me. Any help that I have received in my research work and the preparation of the thesis itself has been acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

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Acknowledgements

I would like to express my gratitude to the people who have supported and encouraged me throughout the process of completing this research.

Firstly, I would like to thank my Primary Supervisor, Professor Sue Nagy for her consistent encouragement and practical support over the last three years. I would also like to thank my Co-supervisor, Professor Lynn Chenoweth whose expertise in grounded theory research was invaluable. I would like to thank Kay Thorp, for advice on editing this thesis.

Next I would like to thank the Faculty of Nursing, Midwifery and Health, University of Technology, Sydney and the staff of Grace Centre for Newborn Care, Children's Hospital at Westmead for providing me the opportunity to embark on this research. I would also like to thank my friends and neonatal nursing colleagues who provided feedback and encouragement at different stages throughout my candidature.

I would especially like to acknowledge my family for their ongoing support. In particular I would like to thank my daughter who has acted as my sounding board for ideas and concepts relating to the developing theory. She has encouraged me through her participation in many lengthy discussions.

Finally, I would like to take this opportunity to especially thank the mothers who described the experience of mothering in the neonatal intensive care. These mothers shared their personal memories with me, some of which were emotionally very difficult for them to recall. I am extremely grateful to them for their generosity and honesty.

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ABSTRACT

The aim of this study was to examine the developing relationship between infants and their mothers when facing serious illness in the Neonatal Intensive Care Unit. (NICU) The complexity of the NICU environment is confronting for many families and may interfere with the quality of the developing parent-infant relationship.

This research is a grounded theory analysis of mothers' perceptions of their relationships with their infants. Symbolic interactionism provided the theoretical perspective for studying how mothers interpreted their world and how this interpretation influences their behaviour in the NICU. Mothers of 12 infants diagnosed with a congenital anomaly requiring surgery were interviewed just before discharge using an unstructured interview technique.

Data were concurrently collected, coded and analysed. Comparative analysis of data with previously collected data provided theoretical leads, which were then followed by interviewing participants who were thought to be able to shed light on emerging concepts. The choice of which mothers to interview next was therefore based on theoretical purpose and relevance.

The identified core category of “*maintaining equilibrium*” described the way in which mothers dealt with their predominant problem, identified as “preserving a relationship while enduring a crisis”. Mothers endured this problem within the context of, the “*diagnosis to discharge continuum*”. What emerged from this study was the level of anxiety mothers undergo during their journey from diagnosis of their infant's anomaly to discharge of the infant from hospital. This journey equates to a series of crises which they are challenged to overcome. Three mediating factors were found to impact on mothers' perceptions of their situation during each crisis event - “*interaction with others*”, “*interaction with health system*” and “*mother and infant interaction*”. The way in which mothers managed each crisis event was able to be explained through the “*maintaining equilibrium*” process. Mothers were able to regain some control of the situation

which in turn enabled them to maintain contact with their infant and sustain their developing relationship.

Armed with this knowledge the neonatal nurse can potentially alter mothers' perception of the situation, thereby lessening the distress associated with the experience and facilitating the mother-infant relationship. Recommendations for practice have been described which surround the introduction of alternative models of practice which support the efforts of mothers to develop relationships with their sick newborns. In order to implement family-centred interventions, neonatal nurses require support through educational preparation and professional development.