# COPING AND STRESS MANAGEMENT PRACTICES AMONG MOTHERS OF PRETERM BABIES IN A TERTIARY HOSPITAL IN LAGOS.

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# ABSTRACT

Prematurity is defined as a birth that occurs at 37weeks of gestation and coping is a way by which an individual adjust to normal homeostasis during a situation, crisis or circumstance. The study examined the coping, stress management practices and challenges faced by mothers of preterm babies in Lagos University Teaching Hospital, Idi-Araba, Lagos. The study adopted descriptive crosssectional study. Self-administered questionnaire was used to elicit information from mothers of preterm babies in the neonatal unit of Lagos University Teaching Hospital and analyzed using SPSS version 20. Categorical variables were tested for statistical significance using chi-square at 0.05 p-values. The results shows that measures used in practicing stress management are to confront the situation (56%), self-control (68%), seeking social support (59%), accepting responsibilities (86%) and praying to God during the situation (86%). The results also shows that Challenging issues faced by the mothers of preterm babies are sleep disturbances (76%), Involvement with the care of the baby (56%) and anxiety (50%). There was significant relationship between coping and practice of stress management by mothers of preterm babies at p < 0.05. Health education should be given by the nurses on measures and strategies used in coping with the stress and challenges to the preterm baby's mothers during this period to achieve a very good positive outcome.

**Keywords**: Premature, Gestation, Babies, Anxiety.

# INTRODUCTION

The World Health Organization defined a premature infant as one born before 37 completed weeks of gestation or less than 259 days since the first day of the last menstrual period of the mother (World Health Organization 2018). This definition is distinct from "low birth weight" which describes infants with a birth weight below 2500g and includes appropriate-for-gestational-age premature infants and small-for-gestationalage premature and term infants. (Bladh, Josefsson, Carstensen, Finnstrom & Sydsjo 2015). Prematurity is defined as a birth that occurs before 37 weeks of gestation. It is associated with about one-third of all infant deaths in the United States and accounts for approximately 45 percent of children with cerebral palsy, 35 percent of children with vision impairment, and 25 percent of children with cognitive or hearing impairment. Approximately 50,000 infants per year (961 per week) are born at less than 28 weeks of gestation in the US (Stoll, 2010).

The risk of problems associated with prematurity increases with decreasing gestational age and birth weight. The most immature infants (those born before 28 weeks of gestation) have the highest mortality rate, and if they survive, they are at the greatest risk for long-term problems, (Johnson, 2009). Infants defined by a birth weight of less than 2500g had a higher risk of adverse outcomes such as mental retardation, cerebral palsy and death. However, health care professionals caring for preterm and term infants observed that not all of these infants require the same level of care.

Preterm birth defined as birth prior to 37 weeks of gestation is caused by different risk factors and implies an increased risk for disease and early death for the child, (Bladh, Josefsson, Carstensen, Finnstrom & Sydsjo 2015).

According to Bolisety, Bajuk, Me, Vincent, Sutton and Lui (2006), having a newborn infant hospitalized in the neonatal intensive care unit (NICU) is an unexpected and traumatic event that could lead to stress. Stress is the feeling of being under too much mental or emotional pressure which turns into stress when one feels unable to cope. People have different ways of reacting to stress, so a situation that feels stressful to one person may in fact be motivating to another. Many of life's demands can cause stress, especially work, relationships and money problems, and when one feels stressed, it can affect everything one does. Stress can affect how one feels, thinks or behaves and how one's body works. Sleeping problems, sweating, loss of appetite and difficulty concentrating are common signs of stress. (Crump, Sundquist, Sundquist & Winkleby 2011).

Stress is not itself an illness but it can cause serious illness if not tackled. It is important to recognize the symptoms of stress early. Spotting the early signs of stress will also help prevent it worsening and potentially causing serious complications, such as high blood pressure, anxiety and depression.

It was observed that parents find it difficult to cope with the care of preterm babies since they have not experienced such before and it could be so devastating having babies admitted into the neonatal intensive care unit until they are able to cope with the environment outside the womb and caring for them could cause an emotional and psychological instability to the parents also.

In view of the above, this study assessed the coping and stress management among mothers of preterm babies in Lagos University Teaching Hospital (LUTH) Idi-Araba, Lagos state, Nigeria.

# **MATERIALS AND METHODS**

Descriptive cross-sectional study design. Selfadministered questionnaire was used to elicit information from mothers of preterm babies in the neo-natal unit of LUTH, Idi-Araba, Lagos. The estimated admission of preterm babies for six months was 180 babies. The Yaro Yamane (1967) formula was used to calculate the sample size for this study, with 10% atresia making a total of 140 respondents for the sample size. Convenient sampling technique was used for the selection of 140 respondents and the instrument used for the study was self-administered questionnaire. Ethical approval was taken from Lagos University Teaching Hospital, Health Research Ethics Committee. Data collected was analyzed using SPSS version 20. Descriptive and inferential statistics were used and chisquare test was used to test for significance among variables at 0.05 p-values.

#### RESULTS

Table 1 shows that 21(15%) of the participants were within the age less than 24 years; 50(36%) were within the age range 25-34 years; 39(28%) participants were within the age range 35-44 years while 30(21%) fall within the age of 45 years and above. Also, 32(23%) were single, majority of the participants 102(73%) were married; 2(1%) of them were divorcee while the remaining 4(3%) were separated. Hundred respondents 100(71%) were Christians, 36(26%) were Muslims. In the same way, 86(62%) of the respondents were Yorubas, 44(31%) were Igbos while 8(6%) were Hausas and the remaining 2(1%) claimed others. The table also shows that 48(34%) of the respondents were self-employed, 75(53%) were employed, 12(9%) were students. The results also shows that 4(3%) had primary school certificates, 36(26%) had senior secondary school certificates, while majority of the respondents 91(65%) had tertiary school certificates.

**Tables** 1: Socio-Demographic Data

Variables N Percentage (100%)						
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Age:						
Less than 24 years	21	15				
25 - 34 years	50	36				
35 - 44 years	39	28				
45 years and above	30	21				
TOTAL	140	100				
Marital Status:						
Single	32	23				
Married	102	73				
Divorce	2	1				
Separated	4	3				
TOTAL	140	100				
Religion:						
Christianity	100	71				
Islam	36	26				
Others	4	3				
TOTAL	140	100				
Ethnic Group:						
Yoruba	86	62				
Igbo	44	31				
Hausa	8	6				
Others	2	1				
TOTAL	140	100				
Occupation:						
Self - employed	48	34				
Employed	75	53				
Student	12	9				
Others	5	4				
TOTAL	140	100				
Educational Qualification:						
Primary	4	3				
Secondary	36	26				
Tertiary	91	65				
Others	9	6				
TOTAL	140	100				

Table 2 shows measures used in practicing stress management of the respondents (56%) stated that they confront the situation, self-control was used by (68%) of the respondents, seeking social support in practicing stress management by (59%) of the respondents, majority of the respondents (86%) used accepting responsibilities in stress management. Also, (86%) of the respondents reported that praying to God about the situation

was one of the measures used for coping and stress management. Others are seeking information from caring team about my baby's condition (75%), seeking emotional support from spouse and family members (64%), and positive appraisal (81%) were essential measures used by mothers of preterm babies for coping and stress management during the period admission in Lagos University Teaching Hospital.

Table 2: Measures used in practicing stress management

Questions	•	YES	N	10	TO	OTAL
	F	%	F	%	F	%
Confronting the situation	78	(56%)	62	(44%)	140	(100%)
Self – control	95	(68%)	45	(32%)	140	(100%)
Seeking social support	83	(59%)	57	(41%)	140	(100%)
Accepting responsibilities	120	(86%)	20	(14%)	140	(100%)
Praying to God about it	120	(86%)	20	(14%)	140	(100%)
Talking to nurses about my concern	102	(73%)	38	(27%)	140	(100%)
Seeking information from caring team about my baby's condition	105	(75%)	35	(25%)	140	(100%)
Seeking emotional support from spouse and family members	89	(64%)	51	(36%)	140	(100%)
Seeking financial support	56	(40%)	84	(60%)	140	(100%)
Positive appraisal	114	(81%)	26	(19%)	140	(100%)

Table 3 shows the challenging issues faced by mothers with coping and stress management of preterm babies in Neonatal Intensive Care Unit in Lagos University Teaching Hospital. The results reveals that: sleep disturbance (76%) seemed to be a very strong challenging issue,

followed by not involved in the care of my baby (56%), followed by experienced anxiety (50%). Though sight of neonatal intensive care unit (46%) and baby's appearance (44%) did not seem to have issues with the respondents.

Table 3: Challenging issues faced by mothers with practicing stress management

Item Issues faced by mothers	Respondents	Percentage (%)	
Experienced anxiety	70	50	
Neonatal Intensive Care Unit is not friendly	65	46	
Baby's appearance	62	44	
Sleep disturbance	107	76	
Involvement in the care of my baby	79	56	

Table 4 reveals that the p-value is .000 which is less than 0.05, the calculated Chi-square,  $X^2 = 171.164$ ; p = 0.05. Therefore, the null hypothesis is rejected, which implies that there

is significant relationship between coping and practice of stress management by mothers of preterm babies in LUTH.

Table 4 Chi-square to test hypothesis one

	Value	df	Asymp. Sig
Pearson Chi-Square	171.164	12	.000
No. of Valid Cases	140		

# **DISCUSSION**

This study identify the coping, stress management practices and challenges faced by mothers of preterm babies in Lagos University Teaching Hospital, Idi-Araba, Lagos.

The demographic characteristics of respondents shows that majority are within the age range 25-34 years and majority are married. Study further observed that majority of respondents are Christians and are Yorubas. It was also noted that majority of respondents are employed and had tertiary school certificates.

Our study identified self-control (68%) seeking social support (59%), accepting praying to God responsibilities (86%), about the situation (86%), seeking information from caring team about my baby's condition (75%), seeking emotional support from spouse and family members (64%), and positive appraisal (81%) measures used by mothers of preterm babies for coping and stress management during the period admission in Lagos University Teaching Hospital. This study support that of Heidari, Hasenpour and Fooladi (2017) on stress management among parents of neonates hospitalized in NICU, the findings revealed that mothers practice of stress management was by getting information from the nurses and health team in general and this results into reduction in anxiety among the parents of the neonates. This finding of this study is also in agreement Arzani, Valizadeh, Zamanzadeh and Muhammadi (2015) who conducted a study on mothers and strategies used in handling the prematurely born -infants during hospitalization in Iran and the results shows that mothers practice stress management by asking for help/support, reducing personal responsibilities, commitment/involvement, emotional support from husband, relatives and friends which is also in agreement with this present study.

The findings of this study also reveals that challenges faced during care of preterm babies by their mothers are, sleep disturbance (76%), followed by involvement in the care of the baby (56%), followed by experienced anxiety (50%), these findings are in accordance with Ashwani, Rekha and Kumar (2017), they conducted a study on parent of preterm-born Children sources of stress and worry by revealed that parent faced challenges such as the experience create anxiety, the NICU environment is not friendly or scary, sleep disruption.

The findings of the hypothesis tested in this study reveal that there is significant relationship between coping and practice of stress management by mothers of preterm babies in LUTH.

# **CONCLUSION**

The mothers of preterm babies in NICU LUTH effectively used the following measures of practice of stress management by exercising self-control, accepting responsibilities, praying to God, talking to nurses about their concern, seeking

information from the caring team, emotional support from spouse and positive appraisal while seeking financial support from spouse and family was not effectively used by the mothers of preterm babies in NICU, LUTH. The major challenged faced were experiencing of anxiety, sleep disturbance and involvement of mothers in the care of the baby during admission. The study also concluded that there was a significant relationship between coping and practice of stress management by mothers of preterm babies. Therefore, the nurses should give adequate health education to preterm mothers on the role, coping, practice and stress management during hospitalization.

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