

ABSTRACT

The Lived and Educational Experience of Mothers Having an Infant with Neonatal Jaundice
Margaret (Meg) Brethauer, RN MSN

Purpose: This study describes the lived and educational experience of mothers having an infant with neonatal jaundice; documents the content, source, timing, of infant care advice received by mothers having an infant with neonatal jaundice, and explores the impact of infant care advice on the mother's perceptions of her mothering role, her infant, and infant feeding decisions.

Study Design and Methods: Data were analyzed using Streubert's (1991) method of phenomenology. The content, source, and timing of infant care advice received by the six participants were categorized and compared with American Academy of Pediatrics (AAP) Clinical Practice Guideline for the Management of Hyperbilirubinemia in the Newborn Infant 35 or More Weeks of Gestation (2004).

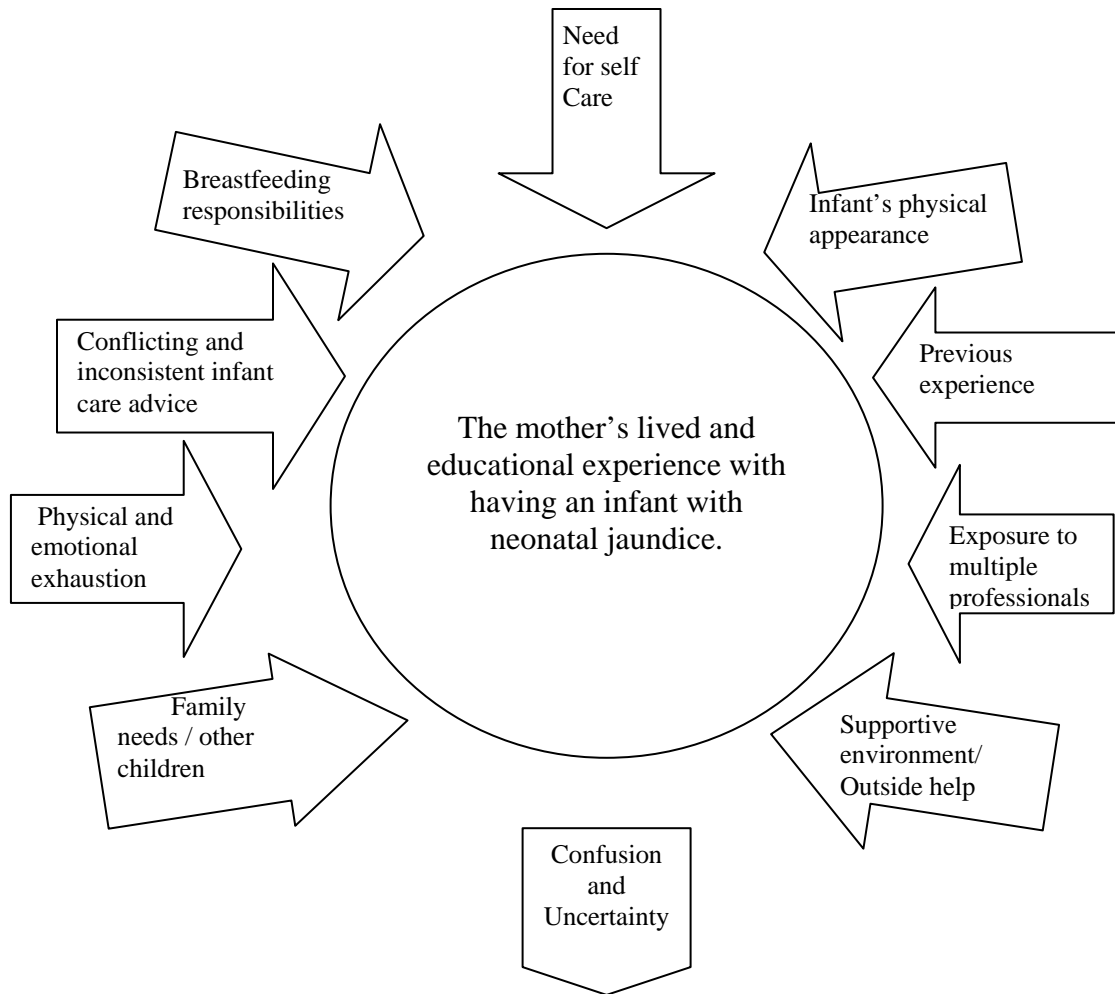
Results: Eight major themes emerged from the data relating to the mother's lived experience. The 8 major themes were: 1) physical and emotional exhaustion; 2) feeling robbed; 3) distressed by infant's physical appearance; 4) loss of control; 5) maternal vigilance; 6) feeling discounted but only for so long; 7) family impact; and 8) supportive environment. A model of factors contributing to the maternal experience of having an infant with neonatal jaundice was developed.

Mothers reported receiving infant care advice contrary to the AAP Guideline (2004) including the use of sunlight as a treatment for neonatal jaundice from registered nurses, family practice physicians, pediatricians, and auxiliary personnel. Participants were exposed to multiple professionals advocating a diverse array of infant care advice creating confusion and uncertainty of whom to listen to or which advice to follow. Participants had no recall of receiving verbal or written information from their physicians or nurses, in prenatal classes, or at hospital discharge.

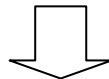
Participants described a range of responses related to their mothering role, their infants, and their infant feeding decisions. None of the mothers changed their long term infant feeding plans despite receiving recommendations to stop breastfeeding for 48 hours, supplement with sterile water, formula and Pedialyte by family, friends, and health care professionals.

Implications: Findings from this study inform the development of effective educational strategies to facilitate maternal recognition of neonatal jaundice and compliance with management and treatment plans. Educational strategies need to be reevaluated which reflect the mother's physical and emotional state and readiness to learn. Health care professionals must keep current with latest clinical practice guidelines in order to disseminate accurate infant care advice.

Model of the factors contributing to the mother's experience of having an infant with neonatal jaundice.



Impacts mother's perception of self and mothering role



Impacts mother's compliance with infant care advice relating to neonatal jaundice.

Brethauer (2007): Model of factors contributing to the maternal experience of having an infant with neonatal jaundice.