F2.2: The Nursing Support Intervention for African American Mothers of Prematures: Infant Health and Development Effects

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Abstract:
Introduction: African American prematures are at higher risk for health and developmental problems than other prematures because of interactions among parenting, poverty, and maternal emotional distress. This study examined the effectiveness of a culturally congruent, supportive nursing intervention on use of child services and on infant health and development.

Method(s): 177 African American mothers and their prematures (76 boys, 101 girls, mean birthweight 1102 gm) were randomly assigned to groups and followed until 24 months corrected for prematurity. The intervention involved a contact in the hospital followed by a home visit 1-2 weeks after discharge and at 5, 10 and 15 months with phone contacts in between. Previous analyses indicated the intervention reduced maternal worry through 24 months and improved parenting at 6 months. Outcomes included how long mothers used well-child care, child services coordination, and neonatal follow-up. Health was measured by growth and 7 common health problems. The Bayley Scales of Infant Development assessed cognitive and motor skills at 12 and 24 months.

Results: Survival analyses indicated intervention mothers continued neonatal follow-up and child services coordination longer than control mothers, but these differences were not significant in intent-to-treat analyses. The 36 mothers receiving nearly complete intervention continued child services coordination significantly longer than control mothers. General linear mixed models indicated the groups did not differ on growth in weight, height, or head circumference. Generalized estimating equations indicated that the groups did not differ on number of rehospitalizations, outpatient surgeries, or 4 health problems. Intervention mothers were significantly less likely to report their infants had poor weight gain, and intervention infants were more likely to have fever at 24 months and less likely to have thrush at 6 months. None of the developmental outcomes differed between the groups.

Discussion & Conclusions: Despite having effects on maternal psychological well-being and parenting, the intervention had minimal effects on infant health and development.

Abstract History:
This abstract has been published or accepted for publication. This abstract has not been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.

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