A longitudinal evaluation of Kangaroo Care for preterm infants in Thailand

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Thesis submitted in total fulfilment of the requirements for the Degree of Doctor of Philosophy

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June 2012
Contents

SUMMARY ................................................................................................................................. VII
DECLARATION ........................................................................................................................... X
ACKNOWLEDGEMENTS ........................................................................................................... XI
GLOSSARY OF TERMS ........................................................................................................... XIII

CHAPTER 1: INTRODUCTION ................................................................................................. 1

1.1 INTRODUCTION ............................................................................................................. 1

1.2 BACKGROUND TO THE STUDY ................................................................................... 2

1.2.1 Preterm birth in developing and developed countries ........................................... 6
1.2.2 World Health Organization (WHO) and health policies in Thailand ................ 9
1.2.3 Cultural beliefs and professional staff in Thailand ......................................... 13
1.2.4 Baby Friendly Hospital Initiative (BFHI) ........................................................... 17
1.2.5 Breastfeeding in Thailand ................................................................................... 21
1.2.6 Standard care in the Maternity Ward in Thailand ......................................... 25
1.2.7 Kangaroo Care ................................................................................................. 26
1.2.8 Initiation and history of Kangaroo Care ........................................................... 28
1.2.9 Kangaroo Care in Thailand ............................................................................ 30

1.3 CATALYSTS FOR THE RESEARCH ........................................................................... 34

1.4 RESEARCH AIMS AND INTENDED OUTCOME ......................................................... 34

1.5 SUMMARY .................................................................................................................... 35

CHAPTER 2: LITERATURE REVIEW ............................................................................ 36

2.1 INTRODUCTION .......................................................................................................... 36

2.2 CONCEPTUAL FRAMEWORK ..................................................................................... 37

2.2.1 Anderson's Mutual Caregiving Model .............................................................. 38
2.2.2 Assumptions guiding this study ......................................................................... 41

2.3 KANGAROO CARE ...................................................................................................... 42

2.3.1 Kangaroo Care: historical background ........................................................... 43
2.3.2 Effects of Kangaroo Care on mothers and their infants .................................. 45
2.3.3 Infant readiness for Kangaroo Care ................................................................. 46
2.3.4 Parental readiness for Kangaroo Care ............................................................ 66
2.3.5 Institutional readiness for Kangaroo Care ....................................................... 68
2.3.6 Limitations of Kangaroo Care ....................................................................... 70

2.4 BONDING AND ATTACHMENT BETWEEN MOTHERS AND PRETERM INFANTS ........ 71

2.4.1 Historical background to bonding and attachment ........................................ 72
2.4.2 Maternal-infant bonding .................................................................................. 72
2.4.3 Differences between bonding and attachment ............................................... 75
2.4.4 Factors facilitating bonding between mothers and infants ............................ 76
2.4.5 Factors impeding bonding between mothers and infants ............................... 77
2.4.6 Outcomes of mother and infant bonding ....................................................... 79

2.5 BREASTFEEDING ....................................................................................................... 82

2.5.1 Relationship between breastfeeding and Kangaroo Care ............................. 82
2.5.2 Importance of breastfeeding for preterm infants ........................................... 84
2.5.3 Difficulties preterm infants experience with breastfeeding ........................... 86

2.6 SUMMARY .................................................................................................................... 87

CHAPTER 3: METHODS ..................................................................................................... 90

3.1 INTRODUCTION .......................................................................................................... 90

3.2 RESEARCH DESIGN .................................................................................................. 90

3.3 ADVANTAGES AND DISADVANTAGES OF A QUASI-EXPERIMENTAL DESIGN ........ 93
5.5.1 Aim 1: To discover whether Kangaroo Care can increase bonding between mothers and their preterm infants as measured by the MIBQ and the BOCL over a six-month period ................................................................. 174

5.5.2 Aim 2: To discover whether Kangaroo Care can promote breastfeeding practice and hence increase breastfeeding rates in preterm infants .............................. 183

5.5.3 Aim 3: To discover whether Kangaroo Care should be introduced as part of the ‘Baby Friendly Hospital Initiative’ policy for preterm infants in all hospitals in Thailand................................................................. 196

5.6 SUMMARY ............................................................................................................... 199

CHAPTER 6: CONCLUSION AND FINAL COMMENTS ............................................. 201

6.1 INTRODUCTION ....................................................................................................... 201

6.2 LIMITATIONS TO THE STUDY ................................................................................... 201

6.2.1 Data collection ............................................................................................... 201

6.2.2 Weather conditions and newborn procedures in Thailand ............................ 202

6.2.3 Sample size and hospital setting .................................................................... 203

6.3 RECOMMENDATIONS ............................................................................................... 204

6.4 FURTHER RESEARCH ............................................................................................... 205

6.5 FINAL COMMENTS ................................................................................................... 205

REFERENCES .............................................................................................................. 206

APPENDIX 1: ETHICS APPROVAL ........................................................................ 238

APPENDIX 2: PARTICIPANT INFORMATION SHEET ...................................... 242

APPENDIX 3: CONSENT FORM FOR ALL MOTHERS AND ADDITIONAL INFORMATION FOR INTERVENTION GROUP ..................... 246

APPENDIX 4: DEMOGRAPHIC DATA QUESTIONNAIRE – MOTHER ............ 254

APPENDIX 5: DEMOGRAPHIC DATA QUESTIONNAIRE – INFANT ............. 261

APPENDIX 6: MATERNAL INFANT BONDING QUESTIONNAIRE ................. 266

APPENDIX 7: BONDING OBSERVATION CHECK LIST ................................... 281

APPENDIX 8: KANGAROO CARE PROTOCOL .................................................. 287

List of tables and figures

FIGURE 2.1: CONCEPTUAL FRAMEWORK FOR THE STUDY ........................................ 41

FIGURE 3.1: FLOWCHART OF PARTICIPANT RECRUITMENT AND DATA COLLECTION ........ 96

TABLE 4.1: DEMOGRAPHIC CHARACTERISTICS OF MOTHERS’ AGE .................. 112

TABLE 4.2: DEMOGRAPHIC CHARACTERISTICS OF MOTHERS’ EDUCATION .......... 113

TABLE 4.3: DEMOGRAPHIC CHARACTERISTICS OF MOTHERS’ OCCUPATION ........ 114

TABLE 4.4: DEMOGRAPHIC CHARACTERISTICS OF MOTHERS’ RELIGION .......... 115

TABLE 4.5: DEMOGRAPHIC CHARACTERISTICS OF FAMILY INCOME ............... 116

TABLE 4.6: DEMOGRAPHIC CHARACTERISTICS OF MOTHERS’ WISHES REGARDING PLACEMENT OF INFANT IMMEDIATELY AFTER BIRTH ....................... 117
TABLE 4.7: THE RESULTS OF THE COMPARISON BETWEEN THE NON-INTERVENTION AND INTERVENTION MOTHERS’ GROUPS FROM THE DEMOGRAPHIC DATA .......... 119
TABLE 4.8: DEMOGRAPHIC CHARACTERISTICS OF INFANTS’ GENDER.............................. 120
TABLE 4.9: DEMOGRAPHIC CHARACTERISTICS OF INFANTS’ GESTATIONAL AGE .......... 120
TABLE 4.10: DEMOGRAPHIC CHARACTERISTICS OF INFANTS’ WEIGHT ...................... 121
TABLE 4.11: DEMOGRAPHIC CHARACTERISTICS OF INFANTS’ LENGTH ...................... 122
TABLE 4.12: THE APGAR SCORE ......................................................................................... 122
TABLE 4.13: DEMOGRAPHIC CHARACTERISTICS OF INFANTS’ Apgar score at one minute after birth ................................................................. 123
TABLE 4.14: DEMOGRAPHIC CHARACTERISTICS OF INFANTS’ Apgar score at five minutes after birth ................................................................. 124
TABLE 4.15: DEMOGRAPHIC CHARACTERISTICS OF INFANTS’ ILLNESS ...................... 125
TABLE 4.16: DEMOGRAPHIC CHARACTERISTICS OF INFANTS’ POSTPARTUM WARD TO WHICH THE MOTHER WAS ADMITTED ......................................................... 125
TABLE 4.17: DEMOGRAPHIC CHARACTERISTICS OF INFANTS’ PERIOD OF LOW RISK .... 126
TABLE 4.18: DEMOGRAPHIC CHARACTERISTICS OF INFANTS’ AGES, IN DAYS, AT DISCHARGE ................................................................................................ 127
TABLE 4.19: DEMOGRAPHIC CHARACTERISTICS OF HOURS PER DAY SPENT BY MOTHERS WITH THEIR PRETERM INFANT IN NURSERY 2 ........................................ 128
TABLE 4.20: THE RESULTS OF THE COMPARISON BETWEEN THE NON-INTERVENTION AND INTERVENTION INFANT GROUPS FROM DEMOGRAPHIC DATA OF THE PRETERM INFANTS .......................................................................................... 129
TABLE 4.21: THE RESULTS OF THE MIBQ QUESTIONNAIRE’S SIX SUBSCALES AT DAY 1 .. 130
TABLE 4.22: RESULTS OF THE MIBQ QUESTIONNAIRE’S SIX SUBSCALES AT WEEK 4 ...... 131
TABLE 4.23: RESULTS OF THE MIBQ QUESTIONNAIRE’S SIX SUBSCALES AT WEEK 12 ..... 131
TABLE 4.24: RESULTS OF THE MIBQ QUESTIONNAIRE’S SIX SUBSCALES AT WEEK 24 .... 132
TABLE 4.25: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 1 ‘PERCEPTION OF INFANT FEATURES’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 ................. 133
TABLE 4.26: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 1 ‘PERCEPTION OF INFANT FEATURES’ BETWEEN THE TWO GROUPS AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................... 134
FIGURE 4.1: LINE GRAPH COMPARISON OF RESULTS FOR MOTHERS IN THE NON-INTERVENTION AND INTERVENTION GROUPS FOR THE MIBQ QUESTIONNAIRE’S SUBSCALE 1 ‘PERCEPTION OF INFANT FEATURES’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 ......................................................................................... 134
TABLE 4.27: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 2 ‘ATTENTION AND CONNECTION TO THE INFANT’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 ................................................................................. 134
TABLE 4.28: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 2 ‘ATTENTION AND CONNECTION TO THE INFANT’ BETWEEN THE TWO GROUPS AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 ................................................................................. 136
FIGURE 4.2: LINE GRAPH COMPARISON OF RESULTS FOR MOTHERS IN THE NON-INTERVENTION AND INTERVENTION GROUPS FOR THE MIBQ QUESTIONNAIRE’S
TABLE 4.29: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 3 ‘ACCEPTANCE OF THE INFANT’S INDIVIDUALITY’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................................................................................... 137

TABLE 4.30: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 3 ‘ACCEPTANCE OF THE INFANT’S INDIVIDUALITY’ BETWEEN THE TWO GROUPS AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 ............................................................................................................. 138

FIGURE 4.3: LINE GRAPH COMPARISON OF RESULTS FOR MOTHERS IN THE NON-INTERVENTION AND INTERVENTION GROUPS FOR THE MIBQ QUESTIONNAIRE’S SUBSCALE 3 ‘ACCEPTANCE OF THE INFANT’S INDIVIDUALITY’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................................................................................... 138

TABLE 4.31: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 4 ‘ACCEPTANCE OF THE ROLE OF MOTHER’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24.......................................................................................................................... 139

TABLE 4.32: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 4 ‘ACCEPTANCE OF THE ROLE OF MOTHER’ BETWEEN THE TWO GROUPS AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................................................................................... 139

FIGURE 4.4: LINE GRAPH COMPARISON OF RESULTS FOR MOTHERS IN THE NON-INTERVENTION AND INTERVENTION GROUPS FOR THE MIBQ QUESTIONNAIRE’S SUBSCALE 4 ‘ACCEPTANCE OF THE ROLE OF MOTHER’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................................................................................... 139

TABLE 4.33: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 5 ‘PREPARATION FOR NURTURING THE INFANT’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................................................................................... 140

TABLE 4.34: THE RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 5 ‘PREPARATION FOR NURTURING THE INFANT’ BETWEEN 2 GROUPS AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................................................................................... 140

FIGURE 4.5: LINE GRAPH COMPARISON OF RESULTS FOR MOTHERS IN THE NON-INTERVENTION AND INTERVENTION GROUPS FOR THE MIBQ QUESTIONNAIRE’S SUBSCALE 5 ‘PREPARATION FOR NURTURING THE INFANT’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................................................................................... 140

TABLE 4.35: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 6 ‘DESIRE TO TOUCH OR HOLD THE INFANT’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................................................................................... 141

TABLE 4.36: RESULTS OF THE MIBQ QUESTIONNAIRE’S SUBSCALE 6 ‘DESIRE TO TOUCH OR HOLD THE INFANT’ BETWEEN THE TWO GROUPS AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................................................................................... 141

FIGURE 4.6: LINE GRAPH COMPARISON OF RESULTS FOR MOTHERS IN THE NON-INTERVENTION AND INTERVENTION GROUPS FOR THE MIBQ QUESTIONNAIRE’S SUBSCALE 6 ‘DESIRE TO TOUCH OR HOLD THE INFANT’ AT DAY 1, WEEK 4, WEEK 12 AND WEEK 24 .......................................................................................................................... 141

TABLE 4.37: RESULTS OF THE INFANTS’ GENDER AND MIBQ AT DAY 1 ................................................................................................. 145

TABLE 4.38: RESULTS OF THE INFANTS’ GENDER AND MIBQ AT WEEK 4 ................................................................................................. 145

TABLE 4.39: RESULTS OF THE INFANTS’ GENDER AND MIBQ AT WEEK 12 ................................................................................................. 146

TABLE 4.40: RESULTS OF THE INFANTS’ GENDER AND MIBQ AT WEEK 24 ................................................................................................. 146

TABLE 4.41: RESULTS OF THE BOCL (14 ITEMS) AT DAY 1 ................................................................................................. 148
Summary

The percentage of premature births is increasing worldwide (Hoyert, Mathews, Menacker, Strobino & Guyer 2006). In terms of statistics for preterm births in Government hospitals in Thailand between 1999–2004, the first and second largest numbers of live preterm births were at Nakhon-Si-Thammarat (the study site) and Songkla respectively (Health Information Unit, Bureau of Health Policy and Strategy 2004). The number of preterm births in Thai Government hospitals increased from 89,569 in 2003 to 91,722 in 2004 (Health Information Unit, Bureau of Health Policy and Strategy 2004), which may have been due partly to the fact that in developing countries, financial and human resources for neonatal care are limited and hospital wards for Low Birth Weight (LBW) infants are often overcrowded (Conde-Agudelo, Diaz-Rossello & Belizan 2003). The most recently reported rate of neonatal abandonment in Thailand ranges from 20–25 infants per day (Thai Government 2010). This occurs mainly in the hospital situation. At the study site, the Maharat Hospital, there were 5–10 preterm abandonments per month in 2008 and 2009 (Kongsuk and Committee on the Information Centre, Maharat Hospital 2010). Researchers have suggested that preterm infants are at increased risk of abandonment, abuse, and neglect related partially to maternal separation in the early stages after birth (Dodd 2005), which is known to affect children’s growth and development (Kennell & Klaus 1998).

This thesis reports research involving mothers and preterm infants from Thailand and Kangaroo Care (KC), an experimental intervention aimed at increasing mothers’ bonding with their infants. The research aimed to discover whether Kangaroo Care
could increase mothers’ bonding with, and their responsibility towards their preterm infants. The research is long-term and based in Thailand for Thai people. Data was collected in Thailand in Thai language.

The objective of this research was to evaluate the 18-item Kangaroo Care protocol used in this study, and to show that Kangaroo Care can promote breastfeeding in preterm infants (and therefore increase mother-infant bonding) and should be introduced as part of the Baby Friendly Hospital Initiative policy for preterm infants in all hospitals in Thailand. Despite the Thai Government implementing a Baby Friendly Hospital Initiative for birthing, part of which is the aim to increase breastfeeding as part of overall improved Child Health Care in this developing country, there is still much neglect for preterm infants from their mothers in Thai hospitals.

The participants in this study comprised 36 mothers and preterm infants admitted to Maharat Hospital, in Nakhon-Si-Thammarat, a southern province in Thailand. Participants were randomly allocated to either an intervention (Kangaroo Care) or non-intervention group—there were 18 participants in each group. All mothers gave their standard care to their preterm infant but mothers in the Kangaroo Care group followed the additional Kangaroo Care protocol. All mothers in the study were given a total of four questionnaires at Day 1: one described their socio-demographic details; one described their preterm infant’s demographic details; and two assessed bonding between mother and preterm infant (Mother Infant Bonding Questionnaire [MIBQ], self-administered by the mothers and Bonding Observation Check List [BOCL], administered by the researcher). The researcher then visited the mothers in their homes at Weeks 4, 12, and 24 in order to observe them with their infants, at
which time the mothers again completed the MIBQ and the researcher completed the BOCL to assess mother-infant bonding behaviour. Statistical analysis was used to analyse this data.

The mothers were similar demographically but the infants’ demographic data showed a statistically significant difference for both the Apgar score at one and five minutes, and the hours per day spent by mothers with their infant in Nursery 2. In terms of bonding scores, there was a statistically significant difference between the two groups in six subscales of the MIBQ. Comparative analysis showed significantly higher mean scores for mothers in Kangaroo Care group compared to mothers in the non-intervention group for the MIBQ and the BOCL from Day 1 to Week 24.

Taking external influences and limitations of the study into account, the results support the hypothesis that Kangaroo Care does improve infant-mother interaction and subsequent bonding. The results provide evidence to support the introduction of Kangaroo Care as a method of caring for preterm infants at Maharat Hospital, Nakhon-Si-Thammarat, Thailand. Consequent to this, a recommendation will be made to the Health Department and appropriate Ministries of Health in Thailand for the Kangaroo Care 18-item protocol to become part of the hospital policy.
Declaration

I certify that this thesis does not incorporate without acknowledgement any material previously submitted for a degree or diploma in any university; and that to the best of my knowledge and belief it does not contain any material previously published or written by another person except where due reference is made in the text.

Signed:  

(Miss. Thidarat Eksirinimit)
Acknowledgements

This thesis has been accomplished through the encouragement, guidance and support of several people. Special thanks and great appreciation go to my advisor and co-advisors, Associate Professor Dr. Lidia Mayner, Dr. Trudi Mannix and Dr. Ian Blackman for their expert knowledge, for their respectful and warmly supportive manner, for their understanding, and for their precious guidance throughout the research process. I wish to thank Ms Margaret Bowden for her professional advice regarding the formatting of this thesis.

Sincere thanks go to the mothers and preterm infants who were willing to participate in this study as well as to their families; and to those at Maharat Hospital—the Director, the Chief Nurse Executive, the head nurses of the labour room, sick newborn ward and postpartum wards, and the staff—for their cooperation and support during the data collecting process.

I am very grateful and give sincere thanks to Jim and Jennie Garsden for their warm support, teaching and help in the English versions and everything since I have studied at Flinders University, Australia.

My thanks go to Dr. Loucine M. Huckabay for her valuable comments and permission to use the Bonding Observation Check List; to the Office of Graduate Studies of Mahidol University for permission to use the Maternal-Infant Bonding Questionnaire; and to Mrs. Kanokrat Wanthong for her valuable information about Maharat Hospital, and Jidapa and Amnoey Kongkapatch, Taungrat Yanarat and Juriwan Bunyawong for their encouragement and support.
I would like to offer thanks to the School of Nursing, Walailak University for their financial support and time to continue my doctoral education in Australia; and to the School of Nursing & Midwifery, Flinders University, for the partial funding (RSM) of this thesis.

My thanks also go to all of my instructors, colleagues, and friends for caring and being there when I needed help; to my close friends Busakorn Punthmatharith and Kamonwan Phuwattananon for their assistance and encouragement, and other friends in Adelaide, Australia and in Thailand.

A special thank you to my friends and fellow PhD students for their support and friendship throughout this time.

Lastly, I want to say very special thanks to my loving parents; Mr. Mitree and Mrs. Suthee Eksirinimit as well as my family members for their never-ending support and contributions.