



Abstract

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PI Title:

Project Title: Improving Outcomes of LBW Premature Infants and Parents

Abstract: *DESCRIPTION: Although the mortality rate of low-birth-weight (LBW) premature infants has declined dramatically over the past several years, morbidity remains high as the result of negative cognitive, neurodevelopmental, and behavioral sequelae. Studies indicate that parents of LBW premature infants experience multiple ongoing stressors that result in short- and long-term negative coping outcomes, such as anxiety and depression, as well as dysfunctional parenting patterns. In the proposed study, we will build upon our prior work and previous studies that have supported the positive benefits of educational-behavioral interventions with mothers of hospitalized young children and LBW premature infants. Among the unique contributions of this study include: (a) development of a theoretically-driven, reproducible intervention that can be easily translated into clinical practice and widely disseminated; (b) evaluation of our intervention with fathers/significant others as well as mothers; (c) a prospective cost-effectiveness analysis; and (d) an intervention that begins early in the NICU stay, prior to parents developing negative perceptions of their infants and the establishment of ineffective parent-infant interactions. The primary aim of this multi-site study is to evaluate the effects of a theoretically driven, reproducible intervention (COPE = creating Opportunities for Parent Empowerment) on the process and outcomes of mothers and fathers/significant others' coping with a LBW premature infant and infant developmental outcomes. The secondary aims are to: (a) explore how the coping process and outcomes of mothers and fathers together contribute to the outcomes of LBW premature infants; (b) determine the cost-effectiveness of the COPE program; and (c) explore what factors moderate the effects of the intervention program (e.g. temperament, family structure, SES). A two-group experiment will be used with 240 mothers and 240 fathers/significant others*

of LBW premature infants in the NTCU. Measures of both process and outcome variables, including parental beliefs, anxiety, depression, parent-infant interaction, and infant developmental outcomes will be assessed during hospitalization and up to the infants' 2-year corrected ages. Findings from a recent pilot study with 42 mother-infant dyads support undertaking this full-scale clinical trial in that mothers who received the COPE program, versus those who received a comparison program, had more positive coping outcomes and their infants scored significantly (14 points) higher on the Mental Development Index of the Bayley Scales of Infant Development at 6-months corrected age.

Thesaurus Terms:

*coping, education evaluation /planning, growth /development, low birth weight infant human, nursing intervention, parent offspring interaction, premature infant human child behavior, clinical trial, cognition, depression, emotion, family structure /dynamics, gender difference, longitudinal human study, neonatal intensive care, outcomes research, personality, socioeconomics
adult human (19+), behavior test, behavioral /social science research tag, clinical research, human subject, questionnaire, statistics /biometry*

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