EARLY INTERVENTION FOR PARENTS OF LOW BIRTH WEIGHT PREMATURE BABIES: DEVELOPMENT OF A PROGRAMME FROM AN EDUCATIONAL PSYCHOLOGICAL PERSPECTIVE

by

DOROTHEA GÜLDENPFENNIG

Submitted in partial fulfilment of the requirements for the degree of

PHILOSOPHIAE DOCTOR (Educational Psychology)

in the

UNIVERSITY OF PRETORIA

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PRETORIA

2000

Promoter: Dr. Hella M. Prinsloo

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DEDICATION

This study is dedicated to my Heavenly Father, my inspiration and strength.

The financial assistance of the National Research Foundation towards this research is hereby acknowledged. Opinions expressed in this thesis and conclusions arrived at, are those of the author and are not necessarily to be attributed to the National Research Foundation.
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ABSTRACT

Early intervention in the case of LBW premature babies prevents later problems and this study describes the contribution that an educational psychologist can make. Low Birth Weight (LBW) premature babies have been shown to present with learning, developmental, behavioural, and emotional maladjustment some years after their birth. Social influences and family factors have a much more profound influence on a child’s subsequent development than the biological factors which resulted in the child being born with LBW. Literature shows that the premature baby’s parents’ anticipated normal delivery and short hospital stay are suddenly replaced by a stressful birth, followed by feelings of shock, denial, sadness and anger. Although professionals working with premature infants have come to recognise that the experiences of parents during the infant’s hospitalisation and homecoming are stressful and difficult, the predominant focus in most neonatal intensive care units (NICU’s) is still the acute care needs of the infants. Because parents will ultimately assume care of the infant and will strongly influence the child’s developmental outcome, NICU procedures and early intervention need to include psychological interventions for parents. The educational psychologist’s field of expertise includes devising preventative strategies and providing guidance to parents and other relevant role-players in the upbringing, education and development of children. This study aims to develop a cost-effective early intervention programme for parents of LBW premature babies as a means of providing parent support and counselling. Theoretical aspects that were deemed critical to the development of the programme, as well as the results of the situation analysis, determined the programme’s content. Other relevant disciplines (such as speech therapy, occupational therapy, physiotherapy, paediatrics, nursing and welfare), which successfully contributed to the educational psychology perspective, were liaised with. The programme targeted not only literate parents, but also semi-literate and illiterate parents. The programme was developed within the South African context, but in such a way that it can be adapted to be implemented in other developing countries in Africa as well. Egypt can be used as an example. The programme was implemented (for a second time, since it had been implemented once before) at Mataria Teaching Hospital in Egypt as part of the formative evaluation of the programme. The qualitative analysis of the pilot implementation, done at the Pretoria Academic Hospital, resulted in significant changes being made to The Güldenpfennig early intervention programme for parents of LBW premature babies. The role of the educational psychologist in relation to the content and feedback of the sessions, the participation of the interpreter, and also cultural sensitivities were outlined as part of the qualitative analysis of the results of the second implementation. This programme intended and succeeded to change subjective areas such as parental knowledge, opinions, attitudes, feelings, and in some instances behaviour. Short-term effects were immediately evident, and it is to be hoped that these would be sustained over a long period of time. Establishing the long-term outcomes that this programme may have on LBW premature babies and their families would be the next logical area for research. Relevant recommendations have been made.
OPSOMMING

Literatuur bewys dat premature babas met 'n lae geboortemassa later leer-, ontwikkelings-, gedrags- en emosionele probleme kan ontwikkel. Die vroeë en stresvolle geboorte van die baba wek gevoelens van skok, ontkennings, hartseer en aggressie by die ouers. Die oorheersende fokus van die meeste neonatale intensiewe sorgehede is die akute versorgingsbehoeftes van die babas. Die ouers se stresbelaaide belewing en verse word deur geen professionele persoon ondervang nie. Omdat ouers uiteindelik die sorg van hulle babas moet oorneem en dus die ontwikkelingsuitkomste sterk beïnvloed, behoort neonatale intensiewe sorgehede in vroeë intervensies ook sielkundige intervensies vir die ouers in te sluit. Sosiale invloede en gesinsfaktore het 'n baie groter invloed op 'n kind se verdere ontwikkeling as biologiese faktore wat 'n lae geboortemassa tot gevolg gehad het. Die opvoedkundige sielkundige se kundigheidsveld sluit die ontwikkeling van voorkomende strategieë en die voorsiening van ouerleiding in, asook leiding aan ander toepaslike rolspelers in die opvoeding, onderwys en ontwikkeling van kinders. Hierdie studie het ten doel om 'n koste-effektyiewe vroeë intervensieprogram (The Gülデンpfennig early intervention programme for parents of LBW premature babies) vir die ouers van premature babas met 'n lae geboortemassa te ontwikkel as 'n metode om ouerondersteuning en -berading te voorsien. Teoretiese aspekte wat as krities vir die ontwikkeling van die program beskou is, sowel as die resultate van 'n situasieanalyse, het waardevolle inzette ten opsigte van die programinhoud verskaf. Daar is met ander relevante dissiplines geskakel wat suksesvol tot die opvoedkundige sielkundige perspektief kon bydra (spraak-, arbeids- en fisioterapie, pediatrie, verpleegkunde en welsyn). Die program het geletterde, semi-geletterde en ongeletterde ouers as teikengroep gehad. Alhoewel die program in 'n Suid-Afrikaanse konteks ontwikkel is, is dit op so 'n wyse gedoen dat dit aangepas en gebruik kan word in ander ontwikkelende Afrika-lande. Egito is as voorbeeld van so 'n land geneem, en die program is ook in die Mataria Opleidingshosptaal in Kairo geïmplementeer as deel van die formatiewe evaluasie daarvan. Die kwalitatiewe analyse van die loodsimplemtenering in die Pretoria Akademiese Hospitaal het geleë tot noemenswaardige veranderinge in die "The Gülデンpfennig early intervention programme for parents of LBW premature babies". Die rol van die opvoedkundige sielkundige met betrekking tot die inhoud, hantering en terugvoer van sessies, die deelname van die tolk, asook die hantering van kulturele sensitiviteit, is omskryf as deel van die kwalitatiewe analyse van die daaropvolgende (tweede) implementering. Hierdie program het ten doel gehad om sekere subjektiwe areas, byvoorbeeld die ouers se kennis, opinies, houdings, gevoelens, en in sekere gevalle gedrag, te verander, en dit het ook daarin geslaag. Korttermynresultate het dadelik geblyk, en hopelik sal hierdie resultate oor 'n lang tydperk volggehou kan word. 'n Logiese uitvloeisel van hierdie navorsing sou wees om die langtermyn uitkomste te bepaal wat hierdie program vir premature babas met 'n lae geboortemassa en hulle families mag hê. Relevante aanbevelings is gemaak.
KEY WORDS

Early intervention programme
Formative evaluation
Educational psychological perspective
Preventative strategy
Parent support and counselling
Adult learning
Parent-infant interaction
Low Birth Weight premature babies
Infant development
The educational psychologist as a facilitator

SLEUTELTERME

Vroeë intervensieprogram
Formatiewe evaluasie
Opvoedkundige sielkundige perspektief
Voorkomende strategie
Ouerondersteuning en -leiding
Volwasse leer
Ouer-baba interaksie
Premature babas met lae geboortemassa
Ontwikkeling van die baba
Die opvoedkundige sielkundige as fasiliteerder
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