# **NICU Baby Love Letters**

<u>Jessica Bowen</u>, MSW, LCSW Jean Powlesland, MS, RN

# A. Introduction/Background/Purpose of Your Topic

In supporting the relationship between parents and baby, it's important for NICU providers to understand how the parent views their baby. Research has shown that a parent's view of their child will impact how they interact with them and how they parent. Many parents start to imagine and attach to their baby while the baby is still in the womb. This time is cut short for NICU parents, sometimes nearly in half. It's critical to understand how a NICU parent views their child, how they imagine who the baby already is and to help them create a rich and full understanding of their child's strengths and challenges in the NICU and beyond. As we support the mission of NIDCAP, UI Health NICU created *Baby Love Letters* written from the voice of the newborn to help parents bond, understand and support their baby while in the NICU.

### **B.** Objectives

- -Parents perceptions of their baby are formed in utero and continue to form in the NICU.
- -Parents need support from staff to feel confident interacting and bonding with their baby.
- -Love letters provide a sentimental yet functional value in helping parents bond and support the development of their baby.

# C. Approach

UI Health NICU piloted the *Baby Love Letter* program in January 2017 by crafting templates using *Parenting Based on the Developmental Progression of Preterm Infants (Children's Medical Venture 2006)* as a guide. Distinct from NIDCAP observations, the templates are written in the first person of the NICU baby to his/her parent(s). Since every baby is different, the baby's primary therapist using a synactive theory approach, helps individualize the templates. The letters are both provided to the family and entered into the electronic medical chart.

Since January, any parent with a baby born at 29 weeks and younger have been invited to receive a love letter every 2 weeks. At this time, all parents have opted to receive the letters; we have 21 babies (17 families when accounting for twins). When possible, we collect basic survey data near discharge and also touch base throughout the NICU journey for oral feedback on the experience of receiving the letters. During this period, two babies in the program died. The letters left behind are valuable resources in grieving and remain a keepsake for these families.

### D. A Comprehensive Summary or Conclusion

The goal of the *Baby Love Letters* is to help parents to see their baby as a unique person and to help them feel like a parent. We assess whether we are meeting this goal qualitatively by asking parents about their experience with the letters. Some oral feedback from parents *during* their NICU stay include:

A Mom of twin boys said that she would like to frame the first letter because it was the first thing she received that was signed by both her boys. Later, this mom said that she used the letters to

help engage the anxious dad . She said at first, he was skeptical because of the way the letters were written in the "baby's voice" but now he really likes them. He especially likes that they are individualized to each boy. Mom used the baby love letters that discussed skin to skin holding with him to help him build the confidence he needed to Kangaroo with them.

Another mom posted the first letter on facebook and proudly reported it received 107 likes. She was excited to have had her friends and family read the letter from her very small 26 week baby girl. Mom expressed gratitude and told NFS that she reads the letters often and they make her cry "in a good way." She has scrapbooked all of the letters. Mom stated that she waits to open her letters until Dad is with her, like a ritual. He usually reads the letters out loud to her.

We also gathered quantitative data with a survey designed to capture the mother's attitude towards her child and her feelings of closeness to her child as well as her role as a mother. At this time, we have had 6 families discharged and have collected 4 surveys. All mothers' either *Agreed* or *Strongly Agreed* on the following statements:

- 1. I feel secure taking the responsibility of caring for my baby, e.g., changing diapers, bathing, tucking into bed.
- 2. I feel that my baby likes to have contact with me in the form of touch, voice, scent, eye contact (all separate questions).
- 3. It was easy for me to assume my role as a mother.

More feedback obtained from the Discharge Survey:

- Please describe your experience receiving love letters from your baby.
  - "I LOVED THEM! Even though I know it wasn't from her literally it felt like everything she would say. I always felt warm reading them and they were a huge help in getting me through."
  - "Oh my God I loved da letters they were amazing."
  - "I liked it- it was a good experience because I learned things I didn't know she would like- like she likes her head rubbed!"
  - "I enjoyed reading them, they helped me feel like I was included in his development.
    It provided great ideas and clues regarding the things he was going through.
    Although I know other mothers receive the same letter or are very similar, it felt very personal and went according to my sons development."
- Three words to describe your baby
  - Silly, quiet, explorer
  - Strong, beautiful, blessing
  - Feisty, precious, demanding
  - Mighty, Determined, Responsive (aware, receptive)

#### **Case Study**

A mom delivered a baby girl at 31+4 days. This mother is 31 years old and expressed that she was not really sure she ever wanted children. She said this pregnancy came as a surprise. She had a difficult pregnancy. She chose to have a tubal ligation after her early birth. Mom's clinic notes indicated she had experienced depression during pregnancy and indicated "light suicidal ideation with no plan." The father of the baby was incarcerated.

During our first visit, mom was able to describe her first encounter with her baby- She awed at how tightly her baby could hold on to her finger and expressed how intensely she wanted to hold her. She expressed that she thought her baby was the most beautiful baby in the NICU and that she didn't know that she could love someone like she loves her. She also expressed that she was in disbelief that she was a mom. When asking her for 3 words to describe her daughter, Mom described her as feisty both inside and outside the womb. She later became tearful because she felt like she did not know her own baby.

Reacting to the first letter, mom said "I loved it so much. I read it twice at home and cried. I want as many of those as I can have." Later mom expressed how kind they are and how sweet it was to receive words from her baby. Later, when asked for three words to describe her baby, mom excitedly said, "only three words?!" She thought about it and chose: Feisty, Commanding, and Sweet and was able to explain in detail why she chose each word.

#### E. References

Cherry, A., Blucker, R., Thornberry, T., Hetherington, C., Mccaffree, M. A., & Gillaspy, S. (2016). Postpartum depression screening in the Neonatal Intensive Care Unit: program development, implementation, and lessons learned. *Journal of Multidisciplinary Healthcare*, 59. doi:10.2147/jmdh.s91559

Gillaspy, S., Tahirkheli, N., Cherry, A., Mccaffree, M. A., & Tackett, A. (2014). Postpartum depression on the neonatal intensive care unit: current perspectives. *International Journal of Women's Health*, 975. doi:10.2147/ijwh.s54666

Griffin, T., & Celenza, J. (2014). *Family-centered care for the newborn: the delivery room and beyond*. New York, NY: Springer Publishing Company, LLC.

Guillaume, S., Michelin, N., Amrani, E., Benier, B., Durrmeyer, X., Lescure, S., . . . Caeymaex, L. (2013). Parents' expectations of staff in the early bonding process with their premature babies in the intensive care setting: a qualitative multicenter study with 60 parents. *BMC Pediatrics, 13*(1). doi:10.1186/1471-2431-13-18 Kearvell, H., & Grant, J. (2010). Getting connected: How nurses can support mother/infant attachment in the neonatal intensive care unit. *AUSTRALIAN JOURNAL OF ADVANCED NURSING, 27*(3), 75. (2012, March 31). Retrieved April 07, 2017, from https://youtu.be/6bul1meciGE

Paul, C., & Salo, F. T. (2014). *The baby as subject: clinical studies in infant-parent therapy.* London: Karnac. Slate, A. (June/July 2002). Keeping the Baby in Mind: A Critical Factor in Perinatal Mental Health. *Zero to Three*, 10-16.

Orzalesi, M., & Aite, L. (2011). Communication with parents in neonatal intensive care. *The Journal of Maternal-Fetal & Neonatal Medicine*, *24*(Sup1), 135-137. doi:10.3109/14767058.2011.607682

Twohig, A., Reulbach, U., Figuerdo, R., Mccarthy, A., Mcnicholas, F., & Molloy, E. J. (2016). Supporting Preterm Infant Attachment And Socioemotional Development In The Neonatal Intensive Care Unit: Staff Perceptions. *Infant Mental Health Journal*, 37(2), 160-171. doi:10.1002/imhj.21556

### F. Statement of Financial Support

Jessica Bowen and Jean Powlesland have no financial relationships with commercial entities to disclose.