Emotional Responses of Parents

Having a premature baby is one of the most stressful experiences a parent can have. Most parents find it very difficult to go through the experience of having their baby in a NICU (Neonatal Intensive Care Unit) without needing emotional support. It is normal for parents to feel overwhelmed by stress and confused by their feelings.

How can I get help?

The doctors, nurses, and social workers on the unit can be wonderful sources of support. Many hospitals have parent support groups. These groups include parents who have already gone through what you are facing now. Advice from these veteran parents can be very comforting. If your nursery does not have a support group, there are support groups on the worldwide web.

What are some common feelings of parents of premature babies?

I feel guilty that I did something to cause my baby to be premature.
This is a common reaction of many parents. It is important to realize that many parents of premature infants feel some guilt, even if they took excellent care of themselves during pregnancy. Mothers who have had excellent prenatal care, who have watched their diet, and who have neither smoked nor drank alcohol may still have premature babies. It will be important to find out if the doctors know what caused your baby to be premature. In most cases, the cause will be something out of your control. Talking with your doctor or others will help these feelings of guilt go away.

I worry that I don't feel more love for my baby.
When premature babies are born, almost all parents have some fear that their baby will die. Because of this fear, parents naturally have what is known as anticipatory grief. Anticipatory grief is a way of preparing yourself emotionally, in case your baby would die. Anticipatory grief both helps parents and causes them problems. Anticipatory grief helps reduce the pain already felt by premature parents. For example some parents of premature babies delay giving their baby a name. These parents believe that their baby's death would be easier to adjust to, if their baby had no name. This fear of death creates a temporary separation of the bond between premature babies and parents. And this is the reason why many parents wonder why they don't love their baby more. When their baby starts to get healthy, almost all parents of premature babies re-establish their bonds of love with their baby. If you find that you continue to have problems loving your baby for a few weeks, it would be helpful to talk to someone on the
medical staff. They are very familiar with your worries because this worry is very common.

I am grieving.
Having a premature baby involves many losses. It is natural to grieve. During pregnancy and even before, parents create many hopes and dreams for their expected baby. You may have had hopes for a boy or girl, blue eyes or brown, dark hair or blond. You also had hopes for a healthy, full term baby, and these hopes were shattered. You are coping with shattered dreams now, and that involves grieving. Many women also feel inadequate that they did not carry their pregnancy to full term. Often mothers of premature infants feel that they are not complete women or mothers. You want to do so much for your baby, but there is little you actually can do while your baby is sick. It is normal for you to grieve the loss of the pregnancy and health baby, just as you would feel sorry if someone you loved moved away from you or died. Support from others can help you in your grief.

I am worried that my baby will not know that I am his/her parent.
It is normal to have this worry, but it is very likely that your baby already knows that you are its parent. Babies learn to recognize their mothers voices while they are in the womb. So a premature baby can already tell the differences between its mothers voice and the voices of nurses and doctors. It has been shown that the oxygen saturation of premature babies improves when their parents are close by. Unfortunately, the treatment of premature babies requires painful procedures that are done by doctors and nurses. But this gives babies the opportunity to learn that their parents do not cause pain. So when you gently stroke your baby, talk softly. Your baby will then learn that you have the voice that is special; the voice that gives comfort, the voice your baby will want to go home with.

I am worried that the treatment in the NICU will have long-lasting emotional effects on my baby, which will be bad.
Research indicates that there are no long-term emotional effects of the painful procedures used in the NICU. Premature babies grow up to be just as emotionally normal as babies that are born healthy at full term.

I am afraid to ask questions of the doctors and nurses.
Having a baby on the NICU is the quickest way for any parent to feel dumb and ignorant. There are so many medical terms and abbreviations used, that no parent (even those with PhDs) can understand them all. Many parents are afraid to ask questions because they don't want to appear to be dumb. But remember that the doctors and nurses had to go to school for years to learn these terms, so they certainly can't expect that you will learn it all in a few weeks or days. And it is very important for you to understand what is going on with your baby. Most of the time getting an answer to your question will help to reduce your worries. Please ask questions. There are no dumb questions. If you feel confused by
what is going on, try to have someone else with you (your spouse, your own
parent, or a friend) when you ask questions. This may clarify your understanding.

Why are my spouse and I not communicating well about how we feel?

Mothers and fathers tend to cope well together during the early days of having a
premature baby. This togetherness comes from the realization that often there is
a danger threatening the family. Later on, many mothers and fathers have
different ways of coping with a premature baby. This difference is usually easy to
understand. For example, many mothers take longer than fathers to grieve over
not delivering a healthy baby, and fathers may not understand this. Fathers can
also become frightened over the mother's health and become more over-
protective than the mother wishes. Both mothers and fathers become frustrated
over the roller coaster of emotions they feel when their baby has setbacks. This
frustration may lead to anger. Another source of frustration comes when
parents feel that they are often powerless to help their baby's recovery. But
parents are not powerless. Parents can learn to accept that it is OK for each
other to have different ways of coping with a premature baby. Then parents can
help each other cope, rather than be irritated because the other person is being
insensitive. This understanding is really the best why to cope as a family.

Why am I afraid even though my premature baby is getting healthy?

Unfortunately, many parents find that fearing for their baby's life does not go
away as rapidly as they would like. Even when a premature baby comes home,
some (perhaps many) parents have flashbacks of fear about their baby's birth or
hospitalization. These are normal reactions to the stress of having a premature
baby. Sometimes parents feel like they are not normal because they are still
afraid, even though they "know in their mind" that their baby is healthy. Realizing
that these flashbacks are common helps parents to cope with them. The
flashbacks decrease over time and they do go away.

Why do I feel sad and depressed and have so little energy?

Sadness and depression are common reactions to having a premature baby.
Everyone dreams of giving birth to a healthy, full-term baby. Not having this
dream come true is a natural cause of sadness. No one in their right mind would
want to experience the following sequence of events: mother on bed rest, an
emergency C-section, fearing that mother and baby might die, visiting the
NICU day after day after day, hearing bad news about the baby's health,
worrying about the rest of your family and facing huge amounts of debt. Even
taking a healthy premature baby home is a source of stress. Parents who are sad
because some of this has happened are having very normal feelings. Sadness
and depression may become excessive, however. If feelings of depression become very troublesome, it would be wise to ask the medical staff for help.

**Are my fears and feelings excessive? Am I going crazy?**

The majority of parents of premature infants feel this way, so these feelings are not signs of insanity. Unfortunately, having many feelings of distress is a normal coping pattern for parents of high-risk babies. Here are some common fears and feelings of parents of premature babies.

- "When the telephone rings at home I panic because it might be a call from the hospital with bad news."
- "I am afraid to walk into the hospital because something bad may have just happened."
- "I am afraid that I won't find my baby in the isolette."
- "This experience has been so terrible that I sometimes wish that my baby would just die, so that the whole thing would be over."
- "I feel like an awful person for thinking this."

Many times parents are afraid to talk about these feelings because parents are concerned that someone will think that they are coping poorly. Experienced members of the medical staff and other parents of premature infants have come to learn that feelings like these are common. It can be comforting to talk about these feelings with someone who can understand you.

**Why am I angry with the medical staff about my baby's treatment?**

The causes of anger are pain, suffering, and frustration. Parents of premature babies are in frustrating situations that produce pain and suffering; so, of course, many parents will feel anger. Often parents are afraid to express anger to the medical staff, but this fear should not stop parents from expressing their concerns. A recent emphasis in perinatal care and neonatal care is called "Family-Centered Care". This means that the medical staff is concerned with the well-being of families, in addition to the well-being of babies. In order for "Family-Centered Care" to work well, parents should be encouraged to express their concern, even if they are angry concerns.

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