

Are there racial disparities in parental support in the Neonatal Intensive Care Unit (NICU)? Evaluation of Racial Disparities in a NICU Parental Support Bundle



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Purpose

The purpose of this program evaluation is to examine for the presence of racial disparities in a parental "Support Bundle" in a Level IV, 72 bed NICU in a children's hospital in Southeast Virginia.

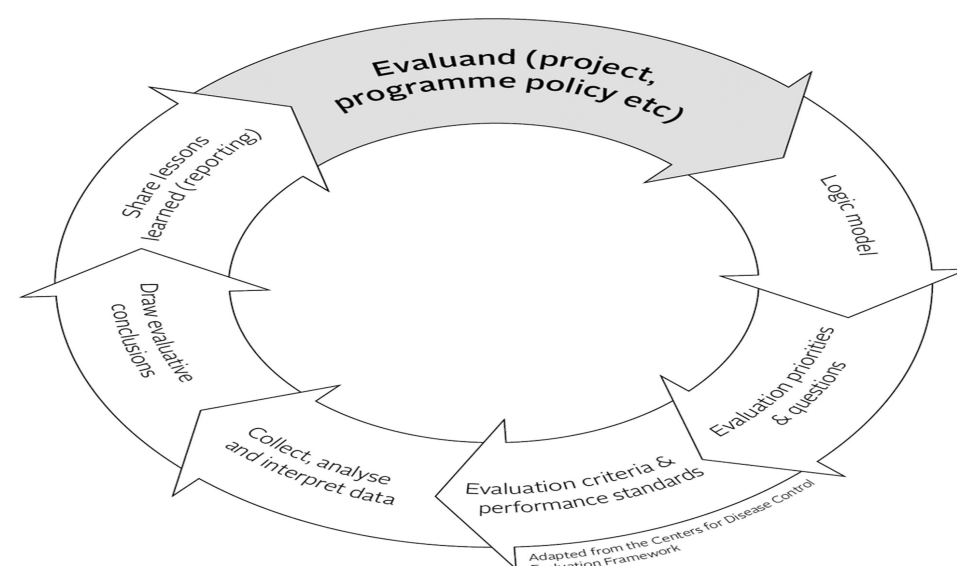
Background

- Preterm birth rates for Black women are 49% higher than NonBlack women in the United States (Sigurdson et al, 2019)
- Black neonates experience severe complications related to preterm birth (Ravi et al & Glazer et al, 2021)
- Black neonates receive disproportionate quality of care contributing to increased rates of adverse developmental outcomes (Johnson et al, 2022)
- Racism and inequality of care are contributing social determinants impacting health outcomes for Black neonates and their families (Beck et al, 2019 & Montoya-Williams et al, 2022)

Review of Literature

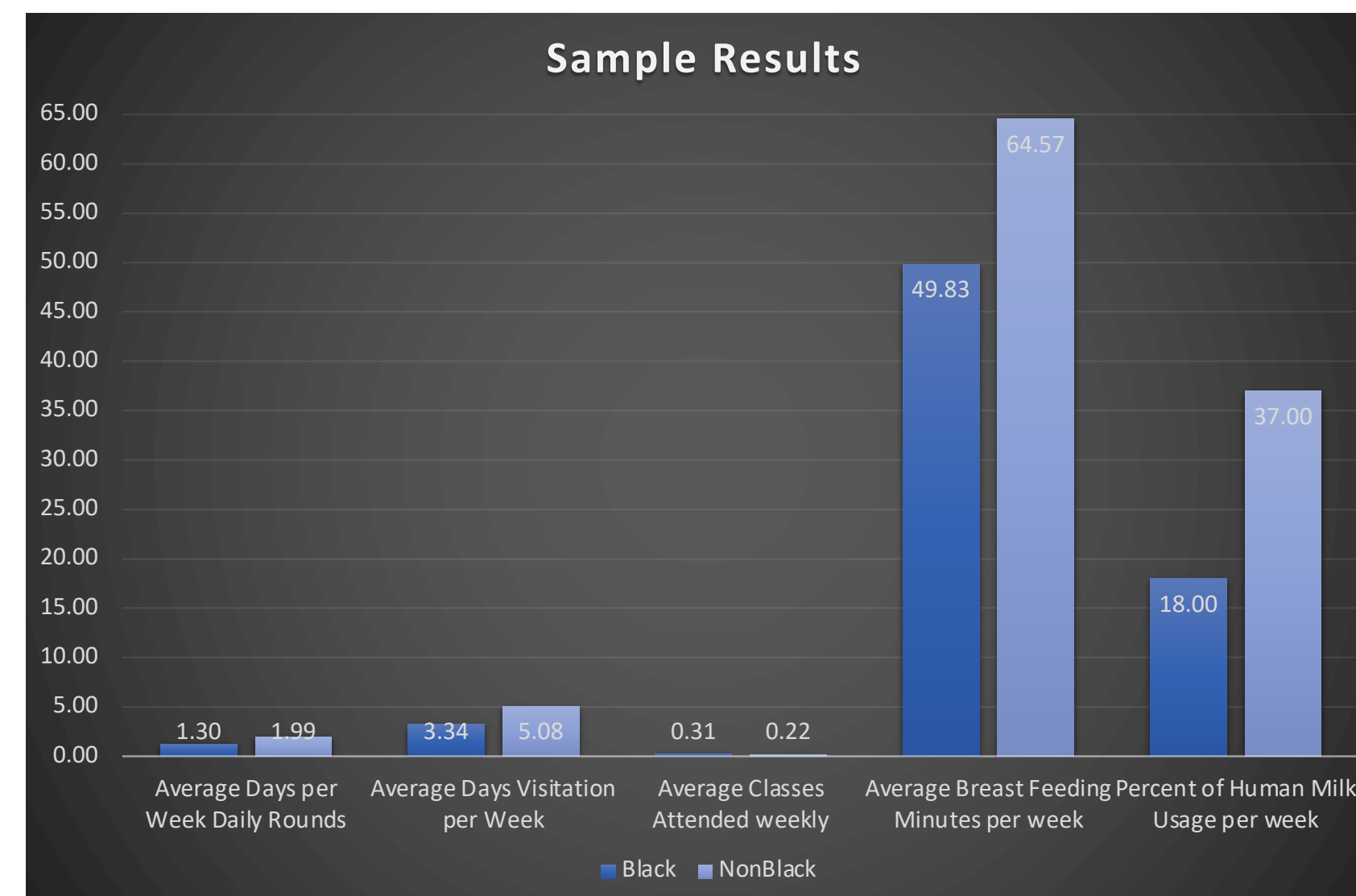
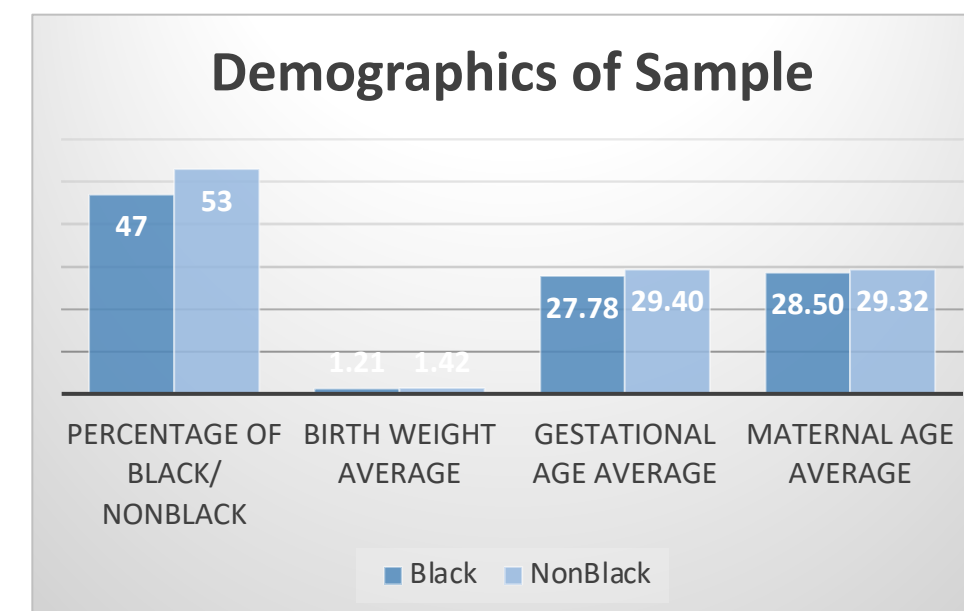
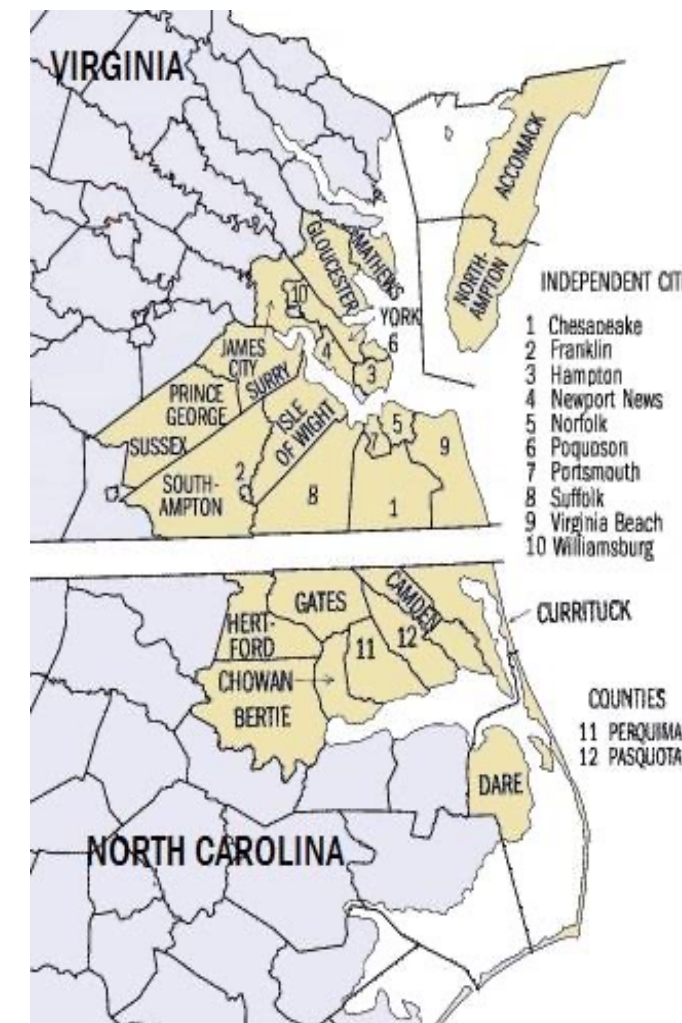
- Gaps in literature regarding experiences specific Black neonates and their families in the NICU (Glazer, 2021)
- Feeling consulted, included, and engaged in regular communication with the healthcare team is critical to Black NICU parents (Glazer, 2021 & Waldron, 2022)
- Clinicians should establish relationships of trust and respect the needs of Black neonates and their families (Ravi et al, 2021)
- Multiple factors (resources/support, implicit bias of clinicians, maternal age, low socioeconomic status, other children, marital status, maternal health, etc.) contribute to Black mother's usage of human milk (Patel et al, 2019)

Framework – Easy Evaluation



Methods/Design

- Analysis of a support bundle was explored for 38 random neonates and their families
- Neonates admitted and/or discharged within the 6 week period were excluded from the evaluation
- Analysis of demographics among Black and NonBlack (White, Hispanic, and Asian) neonates was conducted using descriptive statistics
- Collection of 5 data points "Support Bundle" from the electronic medical health record and class facilitators:
 - ✓ Parental attendance in daily rounds
 - ✓ Parental daily visitation
 - ✓ NICU classes attended
 - ✓ Breastfeeding/breastfeeding minutes
 - ✓ Usage of human milk



Conclusions

- There were no comparable differences in parental attendance in daily rounds. Parental attendance of daily rounds averaged about 2 days a week for all NICU neonates, Black and NonBlack
- Black neonate parents visited 2 days a week less than NonBlack neonates
- There was minimum participation in NICU class attendance, with no comparable difference between Black and NonBlack neonates
- Black neonates were breast fed 15 minutes less per week compared to NonBlack neonates
- The percent of human milk usage was almost 20% less for Black neonates compared to NonBlack neonates

Implications for Practice

- Evaluation of the effectiveness of communication/consultation during daily rounds between clinicians and parents is needed to determine reasons for decreased parental attendance
- More information is needed regarding why Black neonate parents visit less frequently compared to NonBlack neonates
- Consider alternatives to visitation (childcare support for other siblings during visits) and formats for NICU classes such as virtual and/or increase in frequency of classes should be explored to increase participation in educational offerings
- Consider additional breastfeeding support options for Black neonates such as: a breastfeeding support group for Black mothers and a modified Breastfeeding Friendly Hospital Initiative (Petit et al, 2021)
- More information is needed related to factors contributing less usage of human milk among Black neonates
- To increase the usage of human milk in Black neonates consider; implicit bias education for clinicians and providing Black lactation consultants (Adams et al, 2021 & Witt et al, 2022)

References

