

## ABSTRACT

**Background:** An infant is considered preterm when born before a gestational age of 37 weeks (1). In Canada, Black women are at an increased risk for preterm birth (8.9%) compared to White women (5.9%) (2), and Alberta has the second highest rate of preterm births (9.2%) of all provinces and territories (3). Though Black preterm infants have similar outcomes in the neonatal intensive care unit (NICU) compared to White infants of the same gestational age, they have poorer outcomes after discharge (4). This phenomenon is believed to be related to differential access to services and supports in the community setting (2, 4). Minimal research explores this area in Canada. As such, this study aims to explore Black parents' experiences of caring for their preterm infant post-discharge and the perspectives of parents and health service providers on factors within the community setting that contribute to infants' outcomes.

**General Methods:** Using a qualitative case study design (5), I will conduct longitudinal interviews with a purposeful sample of Black parents (n=3-5 families) of preterm infants and their health service providers. Initial interviews will take place during their NICU admission and at 3 and 6 months after discharge. Interviews will be audio-recorded and transcribed verbatim; will be analyzed using the constant comparative method and cross-case, time-series analysis; and will be triangulated through document analysis (5,6).

**Results/Conclusions:** This project will provide insight into Black parents' experiences of accessing care for their Black preterm infants in Alberta. It will highlight where gaps exist in support during this transitional stage and will inform community-based strategies to transform the health outcomes of Black preterm infants.

*Keywords:* preterm, infant health, Black population



## POR

### PATIENT-ORIENTED RESEARCH

Consultations with community partners:

- Co-develop research tools
- Support data analysis
- Provide feedback on preliminary findings
- Support knowledge translation

Advisory committee of Black parents with children who were born premature

- Lived experience of accessing care for their preterm infants in the community
- Ensures relevant focus of study, feasibility of research design and methods
- Co-develop research tools
- Contribute to data analysis
- Provide feedback on preliminary findings
- Support knowledge translation

## EDI

### EQUITY, DIVERSITY, & INCLUSION

- Reflecting on researcher positionality and biases
- Engaging in ongoing reflexivity
- Addressing power imbalances
- Inclusion of partners in the research process
- Inclusive approaches to data collection
- Compensation for community partners and participants
- Accessible language and transparent communication
- Use of intersectional, social justice lens

## SGBA+

### SEX- & GENDER-BASED ANALYSIS +

- Use of gender-inclusive language
- Data collection on the gender identity of all participants
- Acknowledgement that individuals with different gender identities have dissimilar experiences of navigating health institutions and services
- Use of a critical framework that considers the intersectionality of gender with race, class, and other social identities and how they contribute to variable experiences of care-seeking

## REFERENCES

1. Centers for Disease Control and Prevention. (n.d.). *Preterm birth*. <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/pretermbirth.htm>
2. McKinnon, B., Yang, S., Kramer, M. S., Bushnik, T., Sheppard, A. J., & Kaufman, J. S. (2016). Comparison of black-white disparities in preterm birth between Canada and the United States. *Canadian Medical Association Journal*, 188(1), E19–E26.
3. Canadian Institute of Health Information. (2022). *QuickStats: Childbirth indicators by place of residence*. [https://apps.cihi.ca/mstrapp/asp/Main.aspx?evt=2048001&documentID=029DB170438205AEBCC75B8673CCE822&Server=apmstrextrpd\\_i&Project=Quick+Stats&](https://apps.cihi.ca/mstrapp/asp/Main.aspx?evt=2048001&documentID=029DB170438205AEBCC75B8673CCE822&Server=apmstrextrpd_i&Project=Quick+Stats&)
4. Karvonen, K. L., Baer, R. J., Rogers, E. E., Steurer, M. A., Ryckman, K. K., Feuer, S. K., Anderson, J. G., Franck, L. S., Gano, D., Petersen, M. A., Oltman, S. P., Chambers, B. D., Neuhaus, J., Rand, L., Jelliffe-Pawlowski, L. L., & Pantell, M. S. (2021). Racial and ethnic disparities in outcomes through 1 year of life in infants born prematurely: A population based study in California. *Journal of Perinatology*, 41(2), 220–231.
5. Merriam, S. B. (1998). *Qualitative research and case study applications in education* (2nd ed.). Jossey-Bass Publishers.
6. Yin, R. K. (2003). *Case study research: design and methods* (3rd ed.). Sage Publications.
7. Marks, P. (n.d.). A black and white close-up of a preemie's hand holding his dad's finger [Photograph]. Shutterstock. <https://www.shutterstock.com/image-photo/black-white-close-preemies-hand-holding-30359689>

## FUNDING

Mary Olukotun, RN, BScN is a recipient of the 2023 Alberta SPOR Graduate Studentship in Patient-Oriented Research. Alberta SPOR Graduate Studentships in Patient-Oriented Research are jointly funded by Alberta Innovates and the Canadian Institute of Health Research.

This research study is also been funded by: Women and Children's Health Research Institute (WCHRI) Graduate Studentship, Empowering Next-Generation Researchers in Perinatal and Child Health Research (ENRICH) Doctoral Award; Canadian Institute of Health Research (CIHR) Doctoral Research Award.