



Health Knowledge Is Power

PhD student **Mia Waldron** studies ways to improve care for preterm babies and their parents

Mia Waldron understands the incredible anxiety parents feel when they take their baby home from the neonatal intensive care unit. That apprehension can be made worse by the avalanche of information they receive during the discharge process. What should they do? How can they best care for their child?

“When people’s stress levels are high, their ability to process health information—their health literacy—is severely limited,” says Waldron, a NICU nurse and staff educator by training. “It has nothing to do with IQ and education level. You can be an astrophysicist and not necessarily understand health information.”

INCREASING HEALTH LITERACY

Waldron wants parents and babies in these high-pressure situations to succeed. A PhD student in Villanova’s College of Nursing, the New York City native is researching how prepared parents are to care for their newborns after discharge and what changes to the discharge process may help them better synthesize the data they receive.

“I want to find out how well parents understand the health information about their children,” Waldron says. “For instance, if you have a preterm baby, you have to use a specific formula and calculate the amount you give the baby.”

Waldron hopes to test the thesis that alternative methods of information delivery—perhaps demonstrations instead of literature, for example—will make a difference in parents’ confidence in caring for their children.

Waldron’s dissertation focuses specifically on African-American parents, whose newborns have a preterm birth rate and infant mortality rate two times higher than babies in other racial and ethnic groups. Her goal is to find out whether increasing the health literacy of those parents during their newborns’ stays in the NICU will lead to improved infant outcomes after they go home. To that end, she is charting parents’ health literacy when they leave the hospital and then following up three months later.

“I’ve been so impressed by Mia’s work, and I believe it will have great impact,” says Lesley Perry, PhD, RN, interim dean of the College of Nursing. “Mia is really devoted to this topic area and is focused and goal-oriented. This is a passion for her.”

BUILDING ON CLINICAL WORK

The dissertation is part of Waldron’s crowded schedule, which includes raising five children, ages 8 to 16, with her husband, Christopher, an attorney.

In addition, Waldron runs four clinical studies at Children’s National Health Center in Washington, D.C. One of her current studies looks at parents of children with cancer in the pediatric ICU and the end-of-life decisions some parents have to make.

She also is looking at the adverse effects of cancer treatment on pediatric patients. Rather than merely monitoring vital signs, Waldron speaks directly to the young people.

“In the past, children were not asked about the effects,” she says. “Some symptoms are subjective, such as fatigue and depression. We want to identify a core group of symptoms that children experience and that disrupt their lives.”

In another project, Waldron is investigating how fathers and mothers of children in the NICU handle parenting when their babies have never been home. And the fourth study is in conjunction with George Washington University’s School of Engineering and Applied Science to see how telerobotic-assisted technology can help with various tasks in the NICU.

It’s a robust lineup, and together with Waldron’s PhD work, it is giving her tremendous knowledge and insight into the treatment of sick babies.

“Mia is gaining hands-on experience with a variety of research methods,” says Professor Nancy Sharts-Hopko, PhD, RN, FAAN, who was director of the College’s PhD in Nursing program for 15 years. “That will be a great advantage throughout her career as a researcher.” ■

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MICHAEL
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