

Family-Centered Care and KMC in Term and Preterm Infants



Raylene M. Phillips, MD, MA, FABM, FAAP , IBCLC

Loma Linda University Children's Hospital

Loma Linda, California, USA

rphillips@llu.edu

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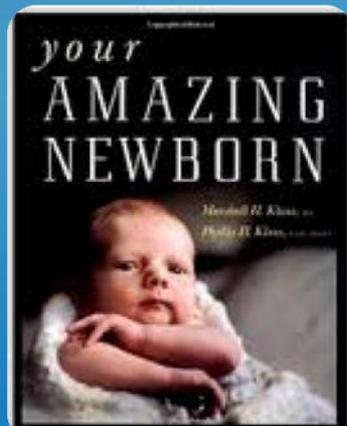


Acknowledgements

Marshall Klaus, MD

Pioneer

Master of the art of observing infant behavior
and understanding the importance of mother-infant attachment
and the critical period immediately after birth



Acknowledgements

Nils Bergman, MB ChB, DCH
(USA equiv: MD, MPH ,PhD)

Global Advocate

Single-mindedly raising awareness of the critical importance
of keeping babies together with their mothers
in skin-to-skin contact after birth



www.kangaroomothercare.com



A Parent's View of the NICU

“Where is my baby?”



The Preterm Infant

- Is suddenly, unexpectedly, and prematurely separated from mother.



Parents are “Premature Parents”

- Who often feel **guilty, helpless** and **terrified** for the life of their baby.



Family-Centered Care

- An approach to planning, delivery, and evaluation of healthcare that supports partnerships among patients, families, and healthcare team.
- It is founded on the principle that the family plays a vital role in ensuring the health and well-being of patients of any age.
- Over time, the family has the greatest influence on an infant's health and well-being.

Family-Centered Care

- *Four Guiding Principles*
 - Dignity and respect
 - Information sharing
 - Participation
 - Collaboration

American Hospital Association
Institute for Family Centered Care



Goals of Family-Centered Care

- To reunite the family
- To resume interrupted parent-infant bonding
- To support parents in their role as the **most important** caregivers for their infant



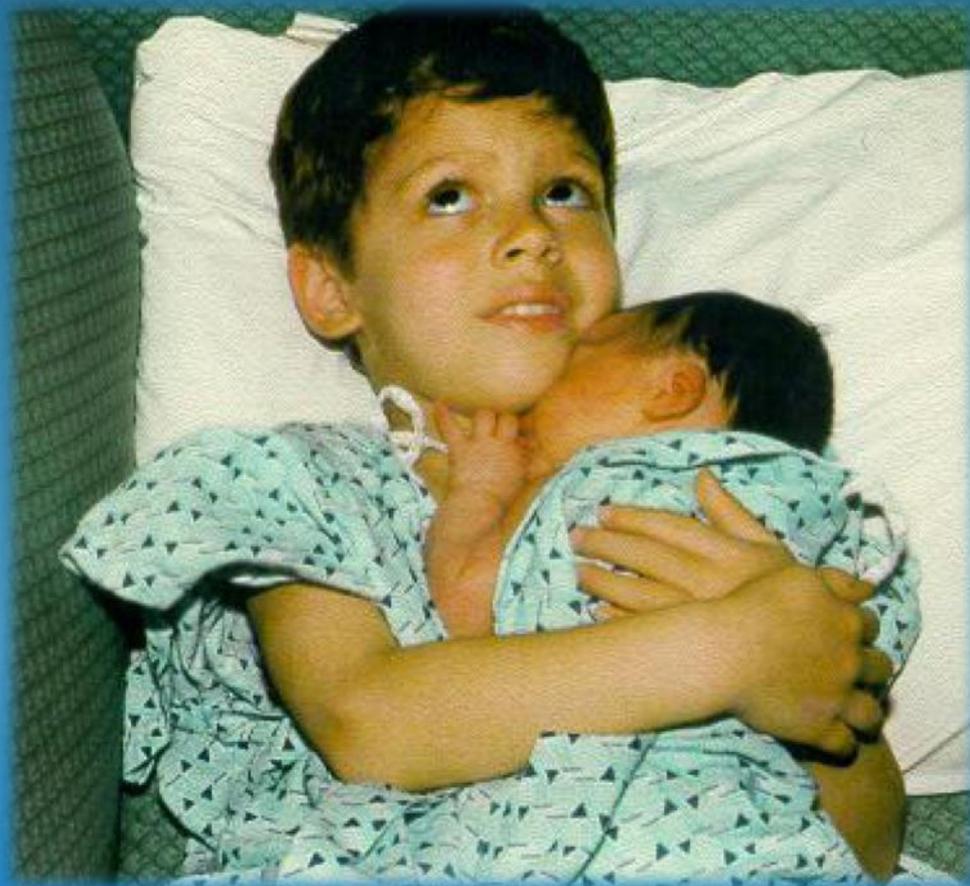
Goals of Family-Centered Care

- To help parents
 - Understand their baby's medical and developmental needs
 - Become competent in caring for their baby
 - **Develop healthy bonds with their baby**
- To help babies
 - **Develop secure attachments with their parents**

Other Models

- **Family Integrated Care** - Estonia, Canada
- **Neonatal Intensive Parenting Unit (NIPI)**
 - Neuroprotective Family-Centered Developmental Care
 - Lactation and breastfeeding support
 - Psychosocial support for parents
 - Psychologist, Social Worker
 - Coordinated discharge planning with parents
 - Follow up program
- **Kangaroo Mother Care** – Bogota, Columbia
 - Continuous kin-to-skin, Exclusive breastfeeding,
 - Early discharge, Close follow-up

Siblings are part of the family, too!



Grandparents, too!



- Parents are not viewed as “visitors” but are considered **vital members of the caregiving team** and have
- Have 24-hr/day access to their baby.



- Parents are encouraged to participate in daily caregiving of their baby and are supported in doing so.





Skin-to-Skin Contact

- Has many well documented benefits
- For both *mother* and *baby*



Natural Habitat for All Newborns



Natural Habitat for All Newborns



Natural Habitat for All Newborns



Promotes Physiologic Stability

- Decreases oxygen requirement
- Increases temperature stability



Co-Regulation

Mothers use “hidden regulators” to stabilize their newborns



Mothers are Superior to Incubators in stabilizing healthy preterm infants at birth



Randomized Controlled Trial
of **Skin-to-Skin Contact from Birth**
vs.
Conventional Incubator Care
for
Physiological Stabilization
in 1200-2199 Gram Newborns

Bergman NJ, Linley LL, Fawcus SR,
Acta Paediatrica 2004;93(6); 779-785

Newly born low birth weight infants
stabilize better in skin-to-skin contact than
when separated from their mothers: a
randomized controlled trial

Birth weight 1500-2500 g

Luong KC, Nguyen TL, Thi HDY Carrara HPO and Bergman NJ,
Acta Paediatrica. April 2016;105(4):381-390.

Connection vs. Isolation



vs.





Mother & Ventilator Stabilizing Newborn

Increases Immune Protection

- Increases antibodies in mother's milk
- Decreases incidence and severity of infections



Hurst, Journal of Perinatology, 1997, Conde-Argudelo, Diaz-Rossello, & Belizan, 2003

Increases Mother's Milk Supply

- Prolongs the duration of breastfeeding



Ludington-Hoe, 1996, Mohrbacher & Stock, 2003

Weight Gain and Length of Stay

- Associated with increased weight gain
- Decreased length of hospital stays



Sieratzi, *Lancet*, 1996, Charpak, Ruiz-Pelaez, & Figueroa, 2005,

Improves Infant Sleep

- Impacts brain development, healing, and growth



Effect of kangaroo care on sleep time for neonates. *Pediatric Nursing*, 23(4), 408-14. Ludington-Hoe, et al. 2005. Anderson GC, Current knowledge about skin-to-skin (kangaroo) care for preterm infants. 1991. *J Perinatol* 11:216-226. Messmer, P.R., Rodriguez, S., Adams, J., Wells-Gentry, J., Washburn, K., Zabaleta, I., Abreu, S. (1997).

Helps Mothers Cope With Grief

- Loss of a term pregnancy
- Loss of her expected normal newborn



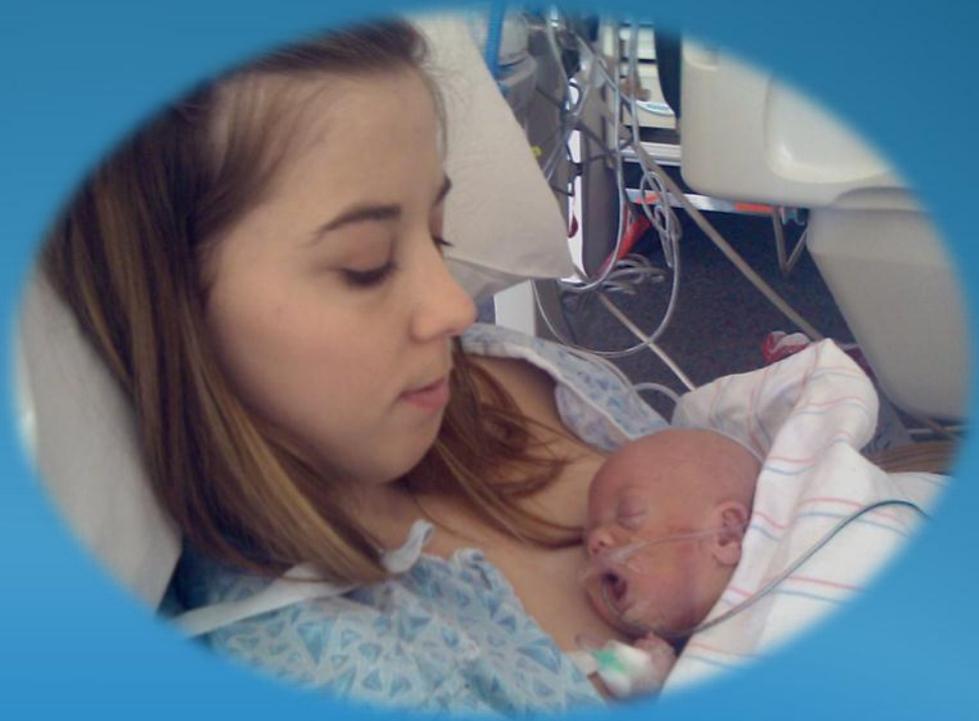
Uvnas-Moberg, 2003, Tessier et al., 1998, Kirsten, Bergman, & Hann, 2001 Conde-Agudelo, Diaz-Rossello, & Belizan, 2003;

Brings babies back into contact with their mothers

- Helps to complete “gestation” outside the womb



Promotes Attachment and Bonding



Uvnas-Moberg, 2003, Tessier et al., 1998, Kirsten, Bergman, & Hann, 2001, Conde-Agudelo, Diaz-Rossello, & Belizan, 2003

Mother-Baby Dyad

A **Single** Psychobiological **Organism**

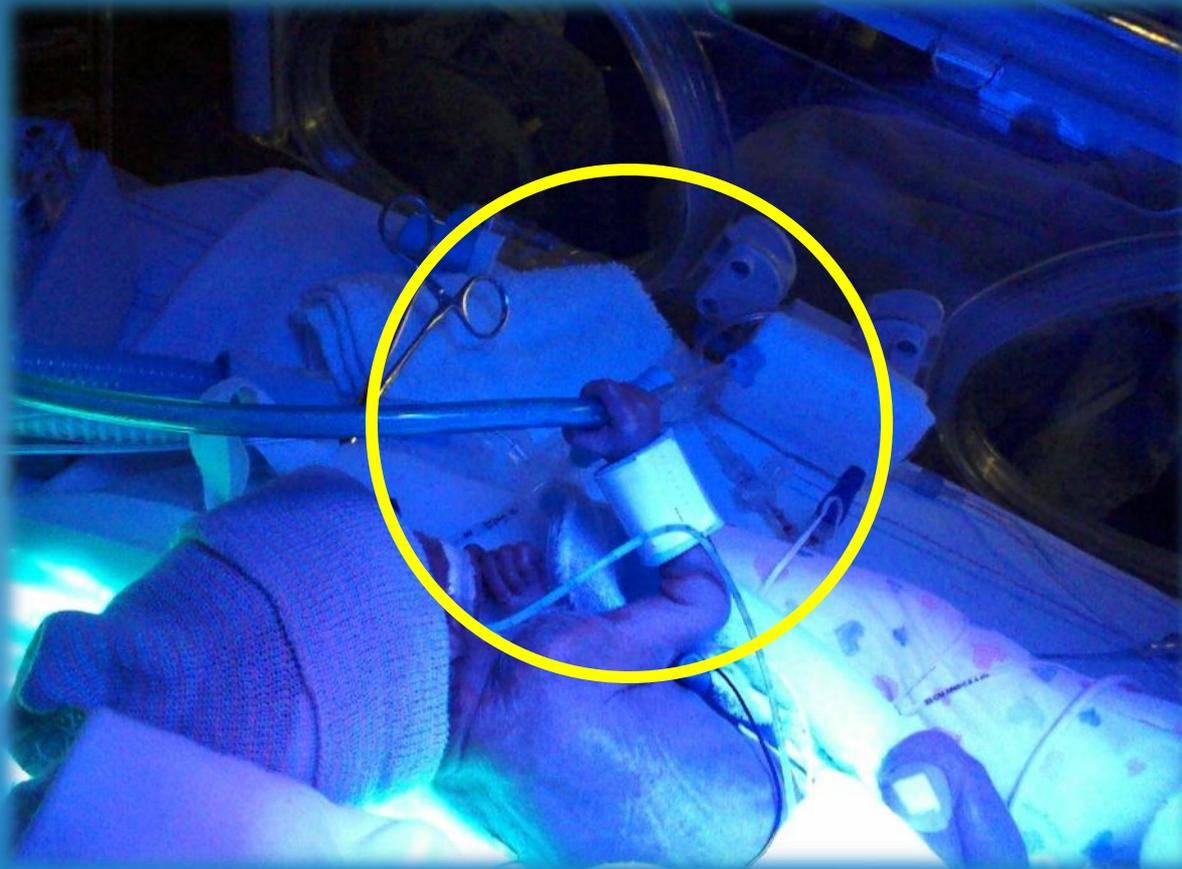


“There is no such thing as an infant.
The **infant and maternal** care **together** form **a unit.**”
Winnicott, 1965

In many NICUs
mother and baby are separated



Baby's Perspective: *"Where is my mother?"*



Parent's Perspective:

“Where is my baby?”



Supporting Attachment in the NICU

- **Every NICU admission**

- Break in attachment process
- Emotional wounds

- **Emotional wounds affect babies**

- Stress of separation affects physiological stability
- Impaired attachment affects neurodevelopment
- Short-term and long-term effects are well documented

- **Emotional wounds affect parents**

- Guilt, grief, anxiety, anger, helplessness
- Postpartum Depression, Anxiety Disorders, and PTSD



Healing the Emotional Wounds of Parents in the NICU

- **Welcoming** parents to their baby's bedside
- Acknowledging **ambivalent feelings**
- Facilitating **skin-to-skin contact** at every opportunity
- Encouraging time just to **"be with their baby"**
- Supporting **emotional closeness**
- Empowering parents to do **daily cares - be a parent**
- Teaching **infant massage**
- Informing about **risks** for depression, anxiety, & PTSD
- Providing **resources** for professional help and support

Healing the Emotional Wounds of Babies in the NICU

“Talking to Babies”

Myriam Szejer, MD

Telling babies their stories is healing



Healing Attachment Wounds

Holding Babies

...with your heart



Healing Attachment Wounds

Holding Babies

...with your **eyes**



Healing Attachment Wounds

Holding Babies

...with your hands



Healing Attachment Wounds

Holding Babies

...with your **arms**



Healing Attachment Wounds

Holding Babies

...in skin-to-skin contact



Skin-to-Skin Contact

A Primary Modality
to

Support initial bonds of attachment

Heal wounded bonds of attachment



Prioritizing Skin-to-Skin Contact in the NICU

- **Staff motivation**
 - Education about impact on neurodevelopment
 - All staff - nurses, therapists, physicians, administrators
- **Staff training**
 - Safe techniques
 - Challenges and barriers
 - Multidisciplinary team support
 - Sensitivity to parental readiness
- **Parent education**
 - Benefits to babies
 - Benefits to parents
 - Safety
 - NICU staff support



Early, frequent, prolonged
Skin-to-skin contact

25 3/7 w GA, 625 g – 5 days old
High Frequency Jet Ventilation



“We’re in this together.”



A Familiar Heartbeat



Mommy is Here





9 Months Old

(6 months PMA)











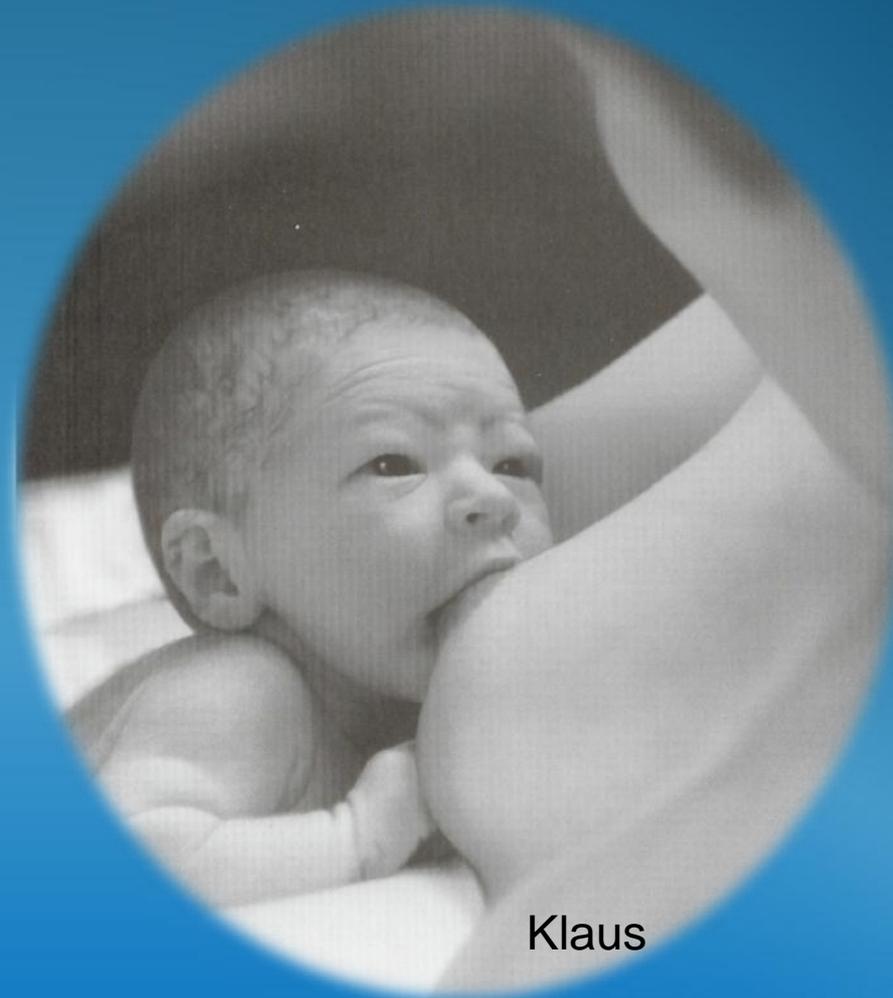
KMC is not just for the NICU

- Mothers who held their babies skin to skin for several hours a day during the first month postpartum had reduced psychological distress and postpartum depression in the first 3 months after birth.
- Babies who were held skin to skin in the first month were noted to have social bidding interactions with their mothers earlier than expected in the Still Face Task.



A Bigelow, 2012

Human Connections



Klaus

Human Connections



Skin-to-skin contact
is for ALL babies!



*“If we hope to create a non-violent world where **respect** and **kindness** replace fear and hatred, we must begin with how we treat each other at the **beginning of life**.*

*For that is where our deepest patterns are set. From these roots grow fear and alienation – or **love** and **trust**.”*

Suzanne Arms

We have the *power* to influence the future of countless lives.



We have the *privilege* of making a lasting difference for families.



By thoughtful focus on facilitating
parent-infant connections
through
Family-Centered Care and Skin-to-Skin Contact



WE can make a difference
in the lives of term and preterm infants and their families
that will last a lifetime.

Thank You



Klaus

rphillips@llu.edu

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