

## Care Practice #6: No Separation of Mother and Baby, With Unlimited Opportunities for Breastfeeding

Jeannette Crenshaw, RN, MSN, IBCLC, LCCE, FACCE

### ABSTRACT

This updated edition of *Care Practice Paper #6* presents the evidence for the benefits of keeping mothers and babies together after birth. The normal physiology of the postpartum and early newborn periods is explained. The author reviews the influence of early and frequent skin-to-skin contact and rooming-in on breastfeeding and early attachment. Women are encouraged to choose a birth setting that does not routinely separate mothers and babies and to plan for early and frequent skin-to-skin contact and rooming-in.

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*After giving birth, a woman held her healthy newborn baby for a few minutes. Then her baby went to the well-baby nursery, and she went to her hospital room. Her baby stayed in her room during the day and stayed in the nursery at night because she was told she would get more sleep this way. The mother realizes that she has spent a lot of time apart from her baby. She wonders what the research reveals about the needs of mothers and babies after birth.*

Years ago, when birth moved from homes to hospitals, most babies did not stay with their mothers. The mother went to a hospital room, while her baby was cared for in a nursery. Mothers waited long hours to see their babies. Their babies' visits were often only during feeding times. The medical community thought that babies were safer and mothers

more rested when babies were cared for in the nursery.

### **YEARNING FOR CLOSENESS**

Since the beginning of time, women needed and wanted their babies close to them. In their arms following birth, and while resting or sleeping, women kept their babies safe, warm, and nourished. Today, we know this “yearning for closeness” is a physical and emotional need shared by mothers and babies.

In recent years, studies have shown that it is best for mothers and babies to stay together after birth (Anderson, Moore, Hepworth, & Bergman, 2003; Bergman, Linley, & Fawcus, 2004; Bystrova, Matthiesen, et al., 2007; Bystrova, Widstrom, et al., 2007; Christensson et al., 1992; International Lactation Consultant Association, 1999; Moore & Anderson, 2007; World Health Organization [WHO], 1998).



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## THE SIX CARE PRACTICES THAT SUPPORT NORMAL BIRTH

### Care Practice #6: No Separation of Mother and Baby, With Unlimited Opportunities for Breastfeeding

#### Key Points

- Mothers and babies share a natural instinct to be close after birth.
- Holding your baby skin-to-skin has many benefits. For example, it makes breastfeeding easier, enhances bonding, and also helps your baby stay warm and cry less.
- Babies cared for in the hospital nursery cry more and may have more trouble breastfeeding than babies who “room-in” with their mothers.
- You will get as much sleep with your baby in your room as you will if your baby is in the nursery.

Additionally, experts agree that, unless a medical reason exists, healthy mothers and babies should not be separated after birth and during the early days following birth (Academy of Breastfeeding Medicine Protocol Committee, 2003; American Academy of Pediatrics [AAP] Expert Workgroup on Breastfeeding, 2005; American College of Obstetrics and Gynecology [ACOG] Committee on Health Care for Underserved Women & Committee on Obstetric Practice, 2007; International Lactation Consultant Association, 1999; UNICEF/WHO, 2004; WHO, 1998). Interrupting, delaying, or limiting the time that a mother and her baby spend together may have a harmful effect on their relationship and on breastfeeding success (Enkin et al., 2000).

### KEEPING MOTHERS AND THEIR BABIES TOGETHER

Babies stay warm and cry less, and breastfeeding gets off to a better start when mothers and their babies have frequent time together, beginning at birth. Mothers learn to recognize their baby’s needs, responding tenderly and lovingly. A connection that lasts a lifetime begins to form.

### THE MOMENT OF BIRTH

Nature prepares you and your baby to need and seek each other from the moment of birth. Oxytocin, the hormone that causes your uterus to contract, will stimulate “mothering” feelings after birth as you touch, gaze at, and breastfeed your

baby (Uvnas-Moberg, 1998). More oxytocin will be released as you hold your baby skin-to-skin. Your brain will release endorphins, narcotic-like hormones that enhance these mothering feelings. These hormones help you feel calm and responsive and cause the temperature of your breasts to rise, keeping your baby warm (Uvnas-Moberg, 1998). Because of the normal “adrenaline rush” babies have right after birth, your baby will be bright, alert, and ready to nurse soon after birth (Porter, 2004; Righard & Alade, 1990). During the hours and days following birth, you will learn to understand your baby’s cues and unique way of communicating with you.

### SKIN-TO-SKIN CONTACT

Healthy babies placed skin-to-skin on their mothers adjust easily to life outside the womb. They stay warm more easily, cry less, have lower levels of stress hormones, and breastfeed sooner than newborns who are separated from their mothers (Bystrova et al., 2003; Bystrova, Widstrom, et al., 2007; Christensson, Bhat, Amadi, Eriksson, & Hojer, 1998; Christensson et al., 1992; Mikiel-Kostyra, Mazur, & Boltruszko, 2002; Uvnas-Moberg, 1998). The benefits of skin-to-skin contact continue beyond the first hour. The longer and more often mothers and babies are skin-to-skin in the hours and days after the birth, the greater the benefit (Moore & Anderson, 2007; Syfrett, Anderson, Neu, & Hilliard, 1996). Babies who are cold, including premature babies, return to a normal temperature more quickly when held skin-to-skin by their mothers (Charpak et al., 2005). When a mother and her baby are skin-to-skin, the baby is exposed to the normal bacteria on the mother’s skin, which may protect the baby from becoming sick due to harmful germs (WHO, 1998). Research suggests that women who hold their babies skin-to-skin following birth care for their babies with more confidence and recognize and respond to their babies’ needs sooner than mothers who are separated from their babies (Widstrom et al., 1990).

Other benefits to babies from skin-to-skin contact include easier breathing, higher and more stable blood sugar levels, and a natural progression to breastfeeding (K. Christensson, Cabrera, E. Christensson, Uvnas-Moberg, & Winberg, 1995; Christensson et al., 1992; Johanson, Spencer, Rolfe, Jones, & Malla, 1992). Babies placed skin-to-skin with their mothers after birth have a natural instinct to attach to the breast and begin breastfeeding, usually within 1 hour

(Righard & Alade, 1990; Widstrom et al., 1990). Mothers who hold their babies skin-to-skin after birth are more likely to make greater amounts of breast milk, breastfeed longer, and breastfeed without offering formula (Anderson, et al., 2003; Bystrova, Matthiesen, et al., 2007; DiGirolamo, Grummer-Strawn, & Fein, 2001; Mikiel-Kostyra et al., 2002). (Experts recommend *exclusive* breastfeeding—no other foods or liquids—during the first 6 months of life [AAP Expert Workgroup on Breastfeeding, 2005].)

### **ROOMING-IN WITH YOUR BABY**

In the days following birth, whether at home, in a hospital, or in a birth center, mothers' and babies' physical and emotional needs for each other continue. The more time two people spend together, the sooner they get to know each other. Mothers who are with their babies for longer periods of time, including during the night, have higher scores on tests that measure the strength of a mother's attachment to her baby (Klaus et al., 1972; Norr, Roberts, & Freese, 1989; Prodromidis et al., 1995). While together, mothers quickly learn their babies' needs and how best to care for, soothe, and comfort their newborns.

Keeping your baby with you continuously during the day and at night (called "rooming-in") has many benefits. Rooming-in with your baby makes breastfeeding easier. Studies suggest that mothers who room-in with their babies make more milk, make more milk sooner, breastfeed longer, and are more likely to breastfeed exclusively compared with mothers who have limited contact with their babies or whose babies are in the nursery at night (Bystrova, Matthiesen, et al., 2007; Daglas et al., 2005; Declercq, Sakala, Corry, & Applebaum, 2006; Fairbank et al., 2000; Flores-Huerta & Cisneros-Silva, 1997; Lindenberg, Cabrera Artola, & Jimenez, 1990; Mikiel-Kostyra, Mazur, & Wojdan-Godek, 2005; Perez-Escamilla, Pollitt, Lonnerdal, & Dewey, 1994; Syafruddin, Djauhariah, & Dasril, 1988; Yamauchi & Yamanouchi, 1990).

Rooming-in is better for babies. While babies are with their mothers, they cry less, soothe more quickly, and spend more time quietly sleeping (Keefe, 1987). Babies who room-in with their mothers take in more breast milk (Bystrova, Matthiesen, et al., 2007), gain more weight per day (Yamauchi & Yamanouchi, 1990), and are less likely to develop jaundice, a yellowing of the skin that sometimes requires treatment (Syafruddin et al., 1988).

Normal baby care (e.g., exams, vital signs, and baths) can be done while rooming-in. You can be close to your baby and even help with some of the care if you wish. Babies bathed by their mothers and held skin-to-skin stay just as warm as babies bathed in the nursery and placed in warmers (Medves & O'Brien, 2004).

Well-meaning friends and family may advise you to let your baby stay in the nursery at night so that you can get more sleep. However, studies show that mothers whose babies are cared for in the nursery do not get more sleep than mothers who room-in with their babies at night (Keefe, 1987, 1988; Waldenstrom & Swenson, 1991). Many mothers sleep more peacefully knowing that their babies are with them.

Rooming-in may have other long-term benefits for mothers and babies. Research suggests that rates of child abuse, neglect, and abandonment are lower for mothers who have frequent and extended contact with their newborns during the early postpartum period (N. Lvoff, V. Lvoff, & Klaus, 2000; O'Connor, Vietze, Sherrod, Sandler, & Altemeier, 1980).

### **RECOMMENDATIONS FROM EXPERTS**

The benefits of keeping moms and babies together are so impressive that many professional organizations have made recommendations promoting skin-to-skin contact and rooming in and opposing routine separation of mothers and babies after birth. These organizations include the Academy of Breastfeeding Medicine (2003); American Academy of Pediatrics (AAP Expert Workgroup on Breastfeeding, 2005); American College of Obstetricians and Gynecologists (ACOG Committee on Health Care for Underserved Women & Committee on Obstetric Practice, 2007); Association of Women's Health, Obstetric and Neonatal Nurses (2000); International Lactation Consultant Association (1999); and World Health Organization (1998).

### **RECOMMENDATIONS FROM LAMAZE INTERNATIONAL**

You wait 9 months to meet your baby. You dream about your baby and look forward to the moment of birth with excitement. After birth, you and your baby will want and need to be together. Studies show that being together is best for both of you. Lamaze International joins with the many organizations that recommend keeping mothers and babies together after birth. Lamaze International

recommends that you give birth in a place where you and your baby can be together without unnecessary interruptions. If you are having your baby in a hospital, tell your caregiver that you plan to hold your baby skin-to-skin after birth and keep your baby with you throughout your stay. Ask that your baby's routine care be done in your room. Lamaze International encourages you to be confident in your decision to keep your baby with you after birth and to reassure your friends and family that the best place for your baby is with you.

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JEANNETTE CRENSHAW is President of Lamaze International (LI). She is LI's representative to the United States Breastfeeding Committee (USBC) and serves on the USBC leadership team. She is a clinical education specialist at Texas Health Resources, The Center for Learning, in Arlington, Texas, and a member of the graduate faculty in the University of Texas at Arlington School of Nursing.