Research Question

- This research will entail the exploration of skin-to-skin contact (SSC) between mothers and their preterm infants. Specifically, it will encompass the physiological and psychological effects that skin-to-skin care has on the dyad and their relationship during the early postpartum period and throughout the beginning years of their shared life.

Are the effects that skin-to-skin care have on mothers and neonates lasting? If so, for how long?

Definitions

- **Skin-to-Skin Care (SSC)**: This is a method of care in which the neonate rests diaper-clad or naked on the bare chest of the mother.
- **Kangaroo Care (KC)**: This is similar to SSC, but in some cases, the infant rests on the mother’s abdomen rather than her chest. The effect is similar, but does not facilitate breastfeeding as much as SSC does.
- **Dyad**: Two individuals in a significant relationship. In this case, it is the mother-child dyad.
- **Neonate**: A newborn child, especially a child less than one month old.
- **Pre-term**: This refers to neonates born prior to 37 weeks gestation.
- **Preterm Neonate Skin Care (SSC)**: This refers to SSC in the early postpartum period and throughout the beginning years of their shared life.

Background

**Origins**
- A shortage of incubators in Bogota, Columbia led to utilizing natural, maternal body heat to provide physical and emotional comfort in addition to physiological stabilization.
- By the early 1990s, SSC had spread to Europe and the U.S. as a preferred method of care in hospitals (Feldman, 2004).

**Benefits**

- **Benefits to Mothers**:
  - Lower rates of postpartum depression.
  - Further production of oxytocin.
  - Experience of a decrease in cortisol levels – this is indicative of lower stress levels (Bigelow, Power, MacLellan-Peters, & Alex, 2012).
- **Benefits to Neonates**:
  - Reduction of pain perception (Castral, Warnock, Leite, Haas, & Scochi, 2008).
  - When in physical contact with mother, they experienced less pain from the routine heel pricks.
  - Facilitated development of the infant microbiome ( Hendricks-Multiple et al., 2015).

Barriers

- Certain situations may prevent immediate skin-to-skin contact after birth.
- These should be addressed in order to further promote SSC and its benefits in the healthcare setting.
- Complications at birth, vaginal or Cesarean, may necessitate other care methods and limit, if not fully prevent immediate skin-to-skin contact (Mangan & Mosher, 2012).
- Visitors, the mother’s fatigue, and concerns for modesty are other barriers.
- These issues may be addressed by regulating visitor hours, designating a naptime, and a provision of a comfortable garment, respectively (Ferrarello & Hatfield, 2014).

Methods

- A comprehensive literature analysis of articles and books will be performed.
- The approach to the question and topic will include:
  - Analysis of key concepts and considerations by personnel in the field of medicine pertaining to maternal and neonatal health.
  - Discussion of past studies and exploration of the disparate research methods, sample sizes, and contributions to public knowledge and understanding of SSC.
  - Analysis of other written works designed for the general populace, such as novels written by doctors, nurses, and practitioners that provide different perspectives of and recommendations for SSC.

Anticipated Outcomes

- This research will conclude that benefits of skin-to-skin contact and care are lasting and will positively impact the mother and child.
- The effects they will benefit and improve the dyad’s health and relationship for a long period of time.
- It is thus important to continue studying and promoting skin-to-skin care.
- A better understanding of skin-to-skin care will increase its popularity and with that, the facilitation of physical and emotional bonding between mother and child at the very beginning of their relationship will foster.
- In addition, as knowledge of human health and the field of medicine is dynamic, its is vital to review what has previously and is currently understood about our physiology in order to move forward and better the health of the members of society.

Significance

Research has demonstrated that SSC supports and better the health of the mother and the neonate. It can be concluded that along with improved health follows a positive, healthy relationship.

- Not enough studies, however, have been discovered to fully support the hypothesis that skin-to-skin care also better the dyad’s health and relationship for a long time period.
- It is thus important to continue studying and promoting skin-to-skin care.
- A better understanding of skin-to-skin care will increase its popularity and with that, the facilitation of physical and emotional bonding between mother and child at the very beginning of their relationship will foster.
- In addition, as knowledge of human health and the field of medicine is dynamic, it is vital to review what has previously and is currently understood about our physiology in order to move forward and better the health of the members of society.

References


Contact

Pristine Bui

CSU, Stanislaus
University Honors Program

Email: ph@csustan.edu