Enhancing Skin-to-Skin Contact Implementation: A Call to Action!

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INTRODUCTION



- * Benefits: Thermoregulation, breastfeeding, bonding
- ★ Objective: Explore global use for full-term normoweight newborns born vaginally
- ★ Origin: Bogotá, Colombia, 1970s
- ★ Definition: Newborn on mother's bare chest
- ★ Outcome: Optimize maternal-infant health
- ★ Gap: Recommended vs. actual practice
- ★ Barriers: Low Apgar scores, NICU admissions
- ★ Advantages: Reduces mortality, illnesses
- ★ Focus: Strengthening mother-infant bond for well being (1)

METHODOLOGY











Research Question: How does skin-to-skin contact benefit newborns and their mothers?

Search Strategy Terms: Newborns, Mothers, Skin-to-skin contact, Benefits. Used Boolean operators (AND, OR) and Mesh terms: Skin-to-skin Contact, Newborn, Infant and Mothers.

Focus on full-term newborns (37-42 weeks, 10th-90th percentile weight).

- > Included: Vaginal births, Norm weight babies, English or Spanish articles (2014-2024).
- > Excluded: Preterm, cesarean births, low birth weight, COVID-19 studies and other caregivers.

Methodological Approach:

- Narrative review synthesizing SSC and KMC literature.
- Emphasis on physiological and psychological benefits.
- Examined studies from 2014 to February 2024

AIMS OF THE STUDY

General Objective: Investigate the benefits of skin-to-skin contact (SSC) for full-term newborns and strategize its integration into neonatal care for health and bonding.

Studies from databases/registers (n = 173)

CINAHL (n = 102) PubMed (n = 33)PsycINFO (n = 25)Scopus (n = 13)

Studies excluded (n = 13) Preterm babies (n = 7) Caesarean births (n = 1) Inappropriate weight for gestational age (n = 2) COVID-19 pandemic / related infections (n = 1) Fathers / other caregivers (n = 2)

Studies included in review (n = 18)



Infant Newborn Mothers

Kangaroo Mother Care

Benefits

RESULTS

Physiological Advantages	Psychological Advantages	Historical and Cultural Significance	Advocacy and Implementation
Thermoregulation	Maternal-infant bonding	Evolution of KMC	Healthcare provider education crucial for SSC support
Vital signs stability	Reduced stress	From a life-saving measure to standard of care	Clear hospital policies and protocols for SSC initiation
Neurodevelopmental benefits	Diminished anxiety	Culturally accepted	Technological innovations to promote SSC accessibility
Early breastfeeding initiation		Symbolizing love and family connection	Family-centered care models to empower families in newborn care
Reduced infection risks			(2)

CONCLUSIONS

- * Research: Guiding Future Studies. Directs research on educating healthcare professionals and families about KMC benefits.
- **❖ Teaching:** Awareness Building. Raises awareness among students and professionals.
- Clinical Practice: Guideline Development. Supports creating standardized protocols for KMC.





