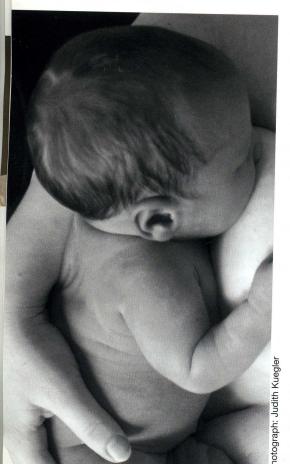
Skin to skin

Indira Lopez-Bassols recommends skin-to-skin contact after birth

> Skin-to-skin contact means that your baby is naked, not wrapped in a blanket, and placed on your naked skin (usually your chest or tummy).

Skin-to-skin contact immediately after birth promotes the release of the love-and-nurturing hormone oxytocin, as well as prolactin and beta-endorphins, which stimulate and reinforce breastfeeding. It can help start you off on the best possible track of your breastfeeding journey.

Michel Odent, father of the modern natural birth movement, follows a



similar line of thought: "[The first hour and after] may determine, in part, how children relate to their mothers, which in turn could affect how they will approach other people and the world around. This critical period after birth may well influence a person's capacity for loving, and for attachment in general."

After a Caesarean birth, skin-to-skin contact is just as beneficial. "Even after a long and difficult childbirth, a woman will cuddle and gaze at her baby and engage in loving exploration if she is protected and supported. This behaviour is 'programmed' genetically to ensure a continuum after delivery that has encouraged the survival of our species."²

Sarah Buckley, Australian doctor. mother of four and the author of Gentle Birth, Gentle Mothering, also believes that when labour has been difficult or traumatic, or separation has taken place, skin to skin and breastfeeding can still stimulate the release of the right hormonal cocktail. If for whatever reason you did miss that first chance, you may be reassured, as "skin to skin in contact in a bath [can] re-enact the time after the birth, allowing the baby to use the amazing primitive reflexes, which are only present in the early weeks. To crawl up to the mother's body, find the nipple and self latch."3

Sadly, as a birth doula, I have witnessed that the reality in many hospitals is that skin-to-skin contact, if it does happen, is rushed. It is much easier and quicker to teach or show a mum manually how to latch on her baby, then tick the box and finish writing the medical notes. But is this common approach really empowering the mother and giving her confidence that she and her baby can successfully breastfeed?

Lennart Righard's wonderful DVD Delivery Self Attachment shows beautifully the first journey of a baby born without labour drugs; he is placed on his mum's chest right after delivery and makes it all the way to the breast on his own.⁴ It is truly puzzling yet amazing to watch such a fragile and small human being able to visually find the areola, smell the breast, crawl unassisted, root, suck and then triumphantly latch on.

skin-to-skin contact promotes the release of the love and nurturing hormone oxytocin

In contrast, babies who are taken away for a few minutes, bathed, wrapped and then given back to their mothers will sometimes experience more difficulty in spontaneously making the unassisted journey to the breast and latching on. An example of this is also depicted on Righard's DVD, and the findings should shed light on the importance of immediate and undisturbed mother-baby skin-to-skin contact.

The ideal is for undisturbed and unlimited skin-to-skin contact to become more of a reality in hospital settings and not just part of a birth plan never fulfilled. This is because it gives mother and baby a unique and highly fertile window of opportunity to bond, attach and establish the optimal initiation of breastfeeding.

The immediate and best place for your newborn to be is on your warm naked chest, as close as possible to the rhythm of your familiar heartbeat.

References

- 1 Michel Odent, *Birth Reborn: What Childbirth Should Be* (Souvenir Press Ltd, 1994).
- 2 Mary Kroeger & Linda J. Smith, Impact of Birthing Practices on Breastfeeding (Jones & Bartlett, 2004). 3 Sarah Buckley, Gentle Birth, Gentle Mothering: A Doctor's Guide to Natural Childbirth and Gentle Early Parenting Choices (Celestial Arts, 2009).
- 4 Lennart Righard, *Delivery Self Attachment* (DVD, 1995).

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