

The benefits of kangaroo care

The World Health Organization (WHO) recently rolled out [new guidelines](#) to improve survival and health outcomes for small babies under 5.5 pounds or babies born before 37 weeks of pregnancy. WHO recommends [kangaroo mother care](#), also known as skin-to-skin care, start as soon as possible after birth rather than the infant first spending time in an isolette to keep them warm and maintain their body temperature.

It's an issue worth paying attention to. In 2021 in Illinois and Michigan, around one in 10 live births was preterm, according to [a new report](#) from the March of Dimes.

So, will these new WHO guidelines soon sweep through hospitals across the world?

There are a lot of factors to consider, says Nicole Nyberg, a neonatal nurse practitioner at [OSF HealthCare in Urbana, Illinois](#), who herself gave birth to a [preterm baby](#) in 2014. Aside from her day job, Nyberg now [does outreach](#) to help mothers whose newborns wind up in the neonatal intensive care unit (NICU).

What is kangaroo care?

Kangaroo care started in Colombia in 1978. It takes its name from baby kangaroos being up against their mother's belly in her pouch.

For humans, kangaroo care involves holding your baby – usually clothed with just a diaper – upright against your bare chest with a blanket covering the baby's backside for as long as is comfortable for both. For the rest of the day, the baby would be in an isolette.

Kangaroo care should not be done while the mother is sleeping.

The benefits of kangaroo care are many, Nyberg says. It helps maintain the baby's temperature and cardiorespiratory status. It fosters better sleep and weight gain for the infant and better breastfeeding for the mother. It's bonding time, too.

"Parents can hold their baby while the child has a lab drawn," at the hospital, Nyberg also says. "That has been shown to help reduce pain for the baby."

Kangaroo care can continue after the child goes home, and other family members can get involved if everyone is healthy.

"That's something that would need to be communicated between the NICU care team and the parent. But it's encouraged for several hours a day or as much as the baby tolerates," Nyberg says.

The new WHO guidelines

While kangaroo care is common these days, Nyberg doesn't expect the new WHO guidelines to immediately become the standard. It will take some time for medical professionals and mothers to soak in the information, and each health care facility will craft guidelines.

There are also times when skin-to-skin care is not possible immediately after birth. If the baby is not breathing or otherwise needs resuscitated, they would need to go into a warmer where providers can be close by, Nyberg says.

The bottom line, like any other pregnancy decision, is to talk with your care team about what is right for you and your child.

"It's all very situational. It has to be a conversation among the provider, the nurses and the parents," Nyberg says. "We want to make sure we're doing what's best medically for the infant. If they need resuscitation or extra support, we make that our top priority. But we try to get the baby skin-to-skin as quickly as we can after."

Learn more

Learn more about pregnancy and birth care on the [OSF HealthCare website](#).