

Family-Centered Care in the First Postpartum Year

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The aim of this position statement is to define family-centered care (FCC) in the context of an extended postpartum period, examine why it is necessary and who might provide services, and identify strategies that, if adopted, may support FCC within a new postpartum care paradigm.

Position

The weeks and months following birth represent a significant transition for a new mother, her infant, and her other family members. Many mothers experience multiple challenges, including physical recovery, sleep deprivation, hormonal shifts, psycho-emotional adjustments, and changes in family and professional relationships. Integrated into this milieu of adaptations is a woman's deep desire to comfort, nourish, and care for her infant. Each woman should have the right to timely and accessible healthcare in the first year following birth, which is delivered by appropriate professionals from the interdisciplinary team. All women should be welcomed to fully engage in self care and infant care and have at their disposal health care services that are high quality, well-coordinated, safe, and centered on their unique needs.

What Is Family-Centered Care in the First Postpartum Year?

Recently, the medical and nursing literature has highlighted the need to improve health care services for women during the postpartum period.¹⁻⁵ Family-centered care includes the “planning, delivery and evaluation of health care that is grounded in mutually beneficial partnerships among health care providers, patients, and families.”⁶

The American College of Obstetricians and Gynecologists¹ (ACOG) proposed a new paradigm for postpartum care focused on the first twelve weeks postpartum, also known as the fourth trimester. Endorsed by five national organizations, the committee opinion supports FCC as it outlines the need for services and support to be “tailored to each woman's individual needs” and incorporate ongoing, coordinated care to include assessment in physical, social, and psychological domains, and counseling services when indicated. The ACOG recommendations represent a significant departure from the traditional single encounter postpartum checkup and the notion that the postpartum period is six weeks in length. The recommendations begin to build a framework for redefining how postpartum care may be delivered in a more comprehensive manner. Suggested elements of this novel postpartum care plan are enveloped in providing patient-guided anticipatory guidance during the prenatal period that addresses healthy self-care initiatives and the transition to parenthood.

Nurse experts agree a new approach to postpartum care is long overdue. The potential to redefine postpartum care models by placing women and their infants at the center of care represents opportunities to reduce fragmentation and provide care coordination and continuity of care. Midwives and/or nurses are ideally situated to facilitate family-centered postpartum care by acting as a point of contact for the mother-infant dyad during the postpartum period.³

Some experts recommend the timeline for postpartum care should be extended beyond the fourth trimester to include the entire first year after birth.⁵ This approach would create more opportunities for nurses, midwives, physicians, and other interdisciplinary team members to partner with the family and provide ongoing care, coordinate referrals, share relevant community resources, and create a reliable online presence.

The American Academy of Pediatrics (2018) recently reaffirmed the importance of FCC, outlining the benefits of FCC to physicians and making recommendations on how FCC can be operationalized in hospitals, clinics, and community organizations.⁷ In FCC parents are respected and invited to participate in health care decisions for their infants, taking an active role in creating a plan of care that incorporates family values and preferences, and taking ownership of the plan. Fundamental to an infant's well-being is the ability of parents to create a safe environment free of potential harm.⁸ Health care professionals can promote parenting knowledge, attitudes, and practices that are in the best interest of children. Infants need care that supports physiological safety, and love and affection to ensure positive emotional health and well-being.⁸ The opportunity to empower parents to build and maintain strong familial support systems can have far-reaching effects on the long-term health and wellness of their infant.

Basis for Family-Centered Care in the Postpartum Period

In the United States, approximately four million women give birth each year,⁹ all of whom must manage physical recovery as well as adjust to the new responsibilities of motherhood. Almost 99% of births occur in a hospital,¹⁰ setting the stage for FCC in the antenatal and postpartum units. However, given the extensive and sometimes

complex health care needs of new mothers and/or their infants, the window of opportunity is all too brief. Although discharge planning and teaching begin upon admission and are standards of care, the delivery of information is not consistent,¹¹ standardized,¹² or grounded in the mutually beneficial partnerships of a family-centered model. Despite the willingness of maternal-infant care providers to give comprehensive care and up-to-date information, and the parents' eagerness to recover and learn, the first days of postpartum care delivery do not fully address the physical, psycho-emotional, or informational needs parents experience after discharge.

Following discharge from the hospital, women continue to experience considerable challenges related to their transition. In the current postpartum model of care, most women must independently navigate their physical and psycho-emotional recovery.¹ By defining the postpartum period beyond the first six weeks after birth, maternal infant providers and other stakeholders have an opportunity to embrace and create new modalities of care that have the potential to deliver high-quality, high-value care to all new mothers and their infants. Women would benefit from increased access to highly skilled, committed maternity care providers, who in turn can assess for a wide variety of health conditions known to affect women within the first year following birth. Timely detection and early intervention and treatment may prevent the unintended harmful sequelae associated with some pregnancy complications such as maternal mortality and morbidity,^{2,13} postpartum psychological disorders,^{14,15} hypertensive disorders,¹⁶ cardiovascular disease,¹⁷ diabetes,¹⁸ and other chronic health conditions.

A critical aspect of adapting to parenthood is the acquisition of knowledge that can provide parents with recommendations about self-care and information on how to care for and feed their infant. Although education for healthy pregnancy, labor, and birth is widely available, many informational sources do not extend to include the postpartum period.¹⁹ Some organizations offer a 24/7 nurse line for patients; however, most women who do not have access to such services turn to the Internet or other online chat groups to get information.²⁰ The Internet is a major source of health information for many women. As consumers, mothers may not have the knowledge to gauge and critically appraise web content,²¹ and health information on websites is often-unreliable.²² Additionally, the more women use online sources, the more they are influenced by the information they find there.²³ Therefore, maternal-infant professionals can ensure the quality of information available online by developing content that is accurate, evidence-based, and appropriate for the general consumer. Organizations that collaborate with qualified health professionals to source content demonstrate rigor and objectivity in their approach and can achieve greater effectiveness in terms of health improvement.²²

The critical importance of healthy infant development requires thoughtful and ongoing practices that promote, support, and protect maternal-infant attachment. Effective bonding requires a

proximal closeness between mother and infant so that when the infant sends signals and communicates, the mother can respond. Other caregivers also need the knowledge base to foster supportive, interactive relationships with the infant in order to promote optimal infant development.²⁴ A renewed focus on FCC within an extended postpartum model of care can incorporate education for parents about the scientific foundations necessary for healthy infant growth and development.

The Role of the Health Care Professional

Maternity care providers are ranked as the most trustworthy source of information by mothers.²⁵ The antenatal and in-hospital postpartum periods are direct points of contact that enable nurses on the frontline of patient care, physicians, lactation consultants, and other members of the team to promote healthy transitions. Through ongoing comprehensive assessments, providers can begin to address not only the "common" postpartum aspects of care but also detect and address the unique needs of each mother-infant dyad. In the weeks and months after birth, the ACOG explicates important members of a woman's postpartum care team, acknowledging that the team may vary depending on the mother's needs and available resources.¹ Recommendations include family and friends, primary maternal care provider, the infant's health care provider, primary care provider, lactation support, care coordinator or case manager, home visitor, and specialty consultants.

Core Principles of Family-Centered Care in the First Postpartum Year

Women and their chosen family members will:

- Experience respect when voicing health concerns about themselves and their infant
- Participate in individualized and woman centered care
- Engage in shared decision-making processes
- Access coordinated health care services that comprehensively address postpartum concerns for themselves and their infant
- Receive evidence-based information on self care and infant care that is understandable, accessible, and user-friendly
- Obtain support from health care professionals and community partners to establish and maintain breastfeeding
- Recognize communication signals sent by their infant to effectively respond to their needs and build trust
- Acquire knowledge of current recommendations for safe infant care in the first year
- Take an active role in creating plans of care for themselves and their infant

Recommendations

Many opportunities exist to close gaps between actual and more optimal postpartum experiences through policy, practice, education, and research.

Policy

- Advocate for public health initiatives
- Contribute to policy development
- Align insurance coverage and reimbursement models
- Minimize financial barriers to care, such as insurance co-payments
- Establish paid maternity leave for all mothers²⁶

Practice

- Explore new approaches to extend postpartum care for the maternal-infant dyad, such as:
 - Group postnatal follow up²⁷
 - eHealth²⁸
 - Nurse-led home visitation²⁹
 - Telephone hotlines³⁰ or warmlines
- Extend opportunities for women to access maternal-infant providers
- Support quality collaboratives and quality improvement initiatives
- Establish and implement curricula for maternity care providers
- Increase supply of nurse practitioners and midwives trained to provide FCC

Education

- Incorporate principles of adult-centered education through evidence-based, high-quality content written and overseen by maternal-infant experts for user-friendly web portals,²⁵ apps,³¹ and other eTechnology³²
- Develop a mother-focused engaging postpartum curriculum^{12,4} for face-to-face and online delivery written and administered by maternal-infant experts²²
- Provide ongoing infant-focused postnatal education that supports the infant's healthy growth and development²⁴
- Improve educational materials to foster health literacy
- Invest in public health campaigns

Research

- Identify knowledge gaps and design and fund pilot studies to address the gaps
- Support research that furthers our understanding of optimal postpartum care

The time has come to restructure postpartum care to be more inclusive of women's health priorities.⁴ This document identifies some of the challenges women and their families experience in the postpartum period. Childbirth advocates have called for a new postpartum care paradigm that provides comprehensive assessment, planning, and interventions that are family-centered and tailored to the needs of each woman and her infant. A multidimensional framework to address the complex and unique needs of today's families will enable maternity care providers to begin to meet the health care needs and preferences of women and lay a foundation for the lifelong healthy development of their children.

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