



When a newborn baby needs intensive care, many parents can worry that they are missing out on early bonding experiences. The birth experience and/or condition of the baby at birth may mean that you haven't been able to have skin-to-skin contact or to share the first feed you had been hoping for.

This toolkit is designed to give you some information about bonding and help you to develop your confidence in bonding with your baby while they are in intensive care. We hope it will reassure you that, although it might look a bit different to how you imagined, bonding continues throughout your baby's stay in intensive care.

By using this toolkit to develop your confidence, we hope you will feel less worried about bonding and will be able to enjoy the interactions that you can have with your baby.

# THINGS TO REMEMBER

Human bonding is an ongoing, powerful process which enables us to cope with difficulties, such as separation and illness. Bonding begins during pregnancy and continues into infancy; there is no specific window of time within which bonding happens. There is no 'right' way to bond either and every family is unique.

Some parents may experience very strong emotions straight after birth and others may feel the relationship with their baby developing as more of a gradual process. Both of these experiences are normal and it is important to remember that bonding is a flexible process that happens over time.

'Bonding' is sometimes used interchangeably with 'attachment' although, in reality, they are slightly different things. For the purposes of this toolkit, when we talk about 'bonding' we mean the relationship that you have with your baby. 'Attachment' is a more technical term that describes the relationship between you and your baby and how your baby learns about the world around them. If you would like to learn more about attachment then please do speak to the psychologist on your unit.



## Top tips and strategies

#### Time

Allow yourself time to adjust to your new situation, your mind will have a lot of new information to absorb and a new reality to come to terms with. You may experience brief feelings of detachment or numbness; these should pass and are a normal part of adjusting to a new situation.

Some parents worry that they may forget important things that have happened in their baby's early days or weeks. This is very common and it isn't possible to remember everything. Some parents like to keep a diary of milestones or just record notes and photos on their phone. Some units give parents materials to help with doing this so ask the nurse looking after your baby if there is anything available to you.

#### **Emotions**

Strong, sometimes conflicting, emotions are a core part of parenthood. You may alternate between feeling hope and sadness, joy and worry while your baby is in intensive care. You might feel regret, anger, and guilt or feel overwhelmed by the demands placed on you. The intensive care environment can make all these emotions stronger and more intense. Making the most of support that is available; either through your family/friends or from professionals will help you to continue bonding with your baby while you cope with these ups and downs.

### **Flexibility**

Bonding doesn't follow a strict pattern or guideline. Everyone manages pregnancy slightly differently and the same applies after a baby is born. Bonding after birth does not only happen through cuddles, feeds and interaction with your baby. These can all support bonding but are not the only ways to do it.

Simply wanting what is best for you baby shows that you have already developed a strong bond. For some people this may involve wanting to understand all the medical terms and checking the monitors, for others this may be focusing on cares and cuddles (if you can) and for others just wanting to take your baby home as soon as possible.

### Activities

Your baby's sense of smell will help them recognise you. Place a soft piece of cloth inside your clothing before giving it to your baby. This will then smell of you and will help your baby recognise you. This can also soothe your baby when you are not there.

Hearing can develop as early as 16 weeks of pregnancy so your baby will already be able to recognise his/her parents' voices as different from other people's. If you are unable to hold your baby then you can talk to them and use your voice to soothe them. All parents in neonatal intensive care are given books to read to their baby, this can help if you feel a bit self conscious about simply chatting.

Both PICU and NICU have access to a music therapist who visits the unit. Humming while you hold your baby can let them feel the vibrations of your voice. Gently singing your baby's name helps them to hear your voice and promote bonding.

If you are unable to cuddle your baby then you might be able to do some comfort holding with them in the incubator or some other gentle touching. Talk to the nurse looking after your baby to find out what is appropriate for your baby's age and physical health.

# WHAT SUPPORT IS AVAILABLE?

Both Neonatal and Paediatric Intensive Care Units (NICU & PICU) have access to specialist clinical psychologists who can offer advice and support around bonding with your baby.

Music therapy is available for babies who have to stay in hospital for long periods of time. This can support the bonding process and their early development. Ask your nurse if you would like to be referred for music therapy.

Nursing and medical staff in both units are very experienced in supporting parents while their baby is in intensive care so do talk to the team looking after your baby and let them know if you have questions or are struggling.

www.bliss.org.uk

http://www.cuh.org.uk/rosie/services/neonatal/nicu/developmental\_care/support\_comforting\_baby.html



These toolkits have been written by NHS clinical psychologists and neuropsychologists working for University Hospitals Bristol. They have been codesigned with service users and healthcare staff. These toolkits are only intended to provide general advice and information. Please discuss your individual needs with your doctor or specialist nurse. If you would like more information about psychology services please go to:

http://www.uhbristol.nhs.uk/patients-and-visitors/support-for-patients/psychological-health-services/

We would like to thank patients and other healthcare staff for their contributions to this toolkit.

For access to other patient toolkits please go to the following address:

http://www.uhbristol.nhs.uk/patients-and-visitors/ support-for-patients/psychological-health-services/ resources/

For this leaflet in large print, audio or PDF format, please email **patientleaflets@uhbristol.nhs.uk** 

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