

Insights

Rooming-in: An Essential Evolution in American Maternity Care



Jennifer Usianov MS, BSN, RN, IBCLC: Senior director and Perinatal Lead, NICHQ

Rooming-in is an evidence-based practice that promotes keeping healthy newborn babies and their mothers together in post-labor recovery rooms. It reflects a recent change in practice and policy for many hospitals, and is partially based on recommendations in the World Health Organization's (WHO) <u>Ten Steps to Successful Breastfeeding</u> and the increased movement toward earning Baby-Friendly designation in the U.S.

The transition from the automatic use of the nursery to rooming-in has <u>raised some concerns</u> <u>among parents</u>. Over the past few generations, it has become standard for new mothers, during their hospital stay, to have their infants cared for by nursing staff in the nursery. This included the expectation that their baby might stay in the nursery for long periods of time beginning after birth, especially at night.

Now with mounting evidence and changing practices, many families worry that having babies in mothers' rooms will only compound the anticipated exhaustion most new mothers and parents experience. The systematic use of nurseries remains an expectation for many families, and now the move to rooming-in is challenging for the hospital staff and parents because many families

do not understand the value of rooming-in.

However, rooming-in is about improving the health of both moms and their babies. <u>Evidence</u> <u>shows</u> that mothers and newborns benefit from staying together, and understanding this would ease some of the concerns around rooming-in.

One of the rationales for rooming-in procedures is to promote breastfeeding and ultimately increase exclusive breastfeeding. The American Academy of Pediatrics recommends <u>6 months of exclusive breastfeeding</u>, but the national average was <u>only 18.8 percent as of 2014</u>. When combined with other postpartum practices, rooming-in is considered one of the most effective methods for <u>increasing the duration of breastfeeding</u>. By having their babies in the same room, moms can learn feeding cues and establish feeding patterns before they're discharged. The hope is that breastfeeding will become routine during the hospital stay so that mothers won't start using formula supplementation during their children's first 6 months.

But the benefits of rooming-in go beyond breastfeeding. For example, sharing a room leads to better sleep for moms and newborns. Instead of learning about their newborns' unique behaviors at home, new mothers who are not separated from their infants have an opportunity to ask providers about normal behavior and proper care techniques. Having concerns alleviated during their hospital stay can help ease the transition at home.

Although research is mounting in favor of rooming-in, it has not become the expected practice for the majority of families, nor is it a consistent practice in U.S. hospitals. It is becoming more widely accepted, but there needs to be an ongoing conversation about rooming-in for it to become a standard part of the birthing experience. This conversation should take place during prenatal appointments, as mothers enter care in our birthing centers and within our communities. Discussions about changes in maternity practices help promote understanding between medical professionals and the communities they serve. This discussion should also include options for cases when rooming-in is not the best option for the mother and/or her baby. Nurses and providers should be aware of the criteria for separation and feel confident that they are maintaining safe and equitable rooming-in practices. Individualized care options should be provided, whenever possible, with high quality, evidence-based care and patient safety as balanced priorities.

Healthcare professionals should be provided the evidence, support and tools needed to implement and sustain changes in practice. These in turn will enable health professionals to provide parents information about rooming-in, its benefits and the circumstances when nursery care will be provided. Most moms and babies can benefit from spending their hospital stays together, and simple explanations of the evidence will help patients understand that.

Addressing concerns and questions is a large part of making rooming-in the norm, and with safety in mind we can gradually move away from the nursery-first system.

Jennifer Ustianov, MS, BSN, RN, IBCLC, is a senior director and the Perinatal Lead at NICHQ.