



## **Caring For Multiples and Special Needs Babies**

As a postpartum doula, it is important to understand how to assist families with multiple babies. Parents with multiples often need extra assistance. In addition to providing an extra hand, it is important that we teach families how to care for their babies in our absence. Each baby in multiple birth is unique with his/her own personality. Therefore, different techniques will work for each one. Here are a few tips to assist families with newborns:

- While feeding on demand is great for newborns, some structure and routine is beneficial for parents of multiples. Many families choose to wake the second baby if only one wakes to feed. Feeding together, tandem, or feeding the second immediately after the first optimizes the time between feeds for rest for the mother.
- Breastfeeding multiples can be challenging but it is doable. It is the same as a singleton when it comes to supply and demand. However, many multiples come early, so preterm feeding issues might be involved. Aside from medical issues such as untreated thyroid and insufficient glandular tissue, with feeding on demand and pumping any missed feeds a woman can produce enough milk for her babies
- If babies are formula fed, per-measuring water in bottles and setting aside per-measured powder, can make feedings easier. Some families premix formula in a pitcher. Be sure it is always refrigerated and used within 24 hours. If babies were preterm, they should confirm if this is safe as there may be special instructions for preterm infants.
- Create a routine. After each feed, change both babies.

- Encourage skin-to-skin with the mother, as well as with each other. They spent nine months together and will often calm down when they find their sibling(s) next to them.
- Never prop bottles as this poses a choking hazard. Gather both bottles if bottle feeding before sitting to feed. Utilizing a feeding pillow may allow for holding and feeding both babies at one time.
- Encourage the family to ask for help as needed. It is a lot of work for the mother to care for multiple infants.
- Encourage the parents to seek peer support through local and online parents of multiples groups.
- Encourage baby-wearing if parents find it helpful for getting tasks done and soothing the babies. Remind the mother that this is helpful for her milk supply.
- Assist with meal prep. Help families have easy-to-grab meals and snacks for the mother. If she is breastfeeding, it is important that she consumes plenty of calories.

## Resources

Kidshealth.org/parent/pregnancy\_center/pregnancy\_parenthood/multiple\_births.html#  
[www.mostonline.org/faq\\_home.html](http://www.mostonline.org/faq_home.html)  
[www.mostonline.org/faq\\_nicu.html](http://www.mostonline.org/faq_nicu.html)

## Special Needs Babies

Aside from premature babies, there are many other special needs babies that are born each year. These include babies with genetic defects, heart conditions, cerebral palsy, Down's syndrome, hypotonicity, and other abnormalities. Many of them have neurological deficits. For all of these conditions, current evidence-based research continues to show that the safest and most healthy place for special needs babies as well as normal gestation and healthy babies is skin-to-skin with the mother, father, or other family member. Even the smallest babies born at 25-26 weeks will have pinker skin and even begin trying to open their eyes when they are on their mother's skin. The research by Nils and Jill Bergman describes the science of this with three points (Hold Your Premie p 9):

1. The mother provides all the sensory stimulation needed for the brain of the baby to grow.
2. Skin –to-skin contact is the best way to provide ideal care; it provides all the body's needs.
3. Technology should be added as required; it is not a substitute for the mother.

The senses of a premature and/or special needs baby are easily hyperstimulated as they are still immature at such a young age. For example we know that sleep/wake cycles are essential for the baby to develop brain maturity. If a premature baby receives more than 240 lux of light, he cannot establish sleep/wake cycles and therefore brain maturity. Most babies in an incubator, with blindfolds on eyes and in a dark room with shades drawn measure upwards of 1,000 lux of light.

Therefore being in the incubator is more harmful than if he were on his mother's chest wrapped in a kangaroo care wrap. In addition, in the incubator, the sound of the motor is huge in the baby's ears. The smell of antiseptic on the gloves is very strong to the baby. The baby's sense of taste is highly developed so he can find his mother's breast to survive. On his mother's skin, temperature is regulated naturally and hormones in both mother and baby are secreted as a response. In fact, any separation of the baby from his mother is stressful to the baby.

Birth and growth is very much an experience of sensory integration. Sensations that wire the baby's brain include seeing his mother's eyes, smelling and tasting her colostrum and breastmilk, touching her skin, and hearing her voice. A postpartum doula can explain this process to a new mother, helping her to realize how essential this mother-baby skin-to-skin contact is. If she has a premature and/or special needs child, the impact of skin-to-skin contact becomes even more important.

Parents of premature and special needs babies often perceive them as being fragile. The postpartum doula may be helping to care for a baby that has been in the NICU for a number of weeks or even months. She can help instill confidence in the mother, encouraging her to touch and move her baby to stimulate sensations and muscle strength.

### **Application and Understanding**

1. When is a baby considered to be premature?
2. List five main concerns a new mother with multiples might have in the first few months at home and how you would address them.
3. Name three things you can do to support a family with multiples.
4. Where is the safest place for a multiple and special needs baby?
5. How would you respond to the following scenario?
  - a. Mary has given birth to twins four weeks ago. Her twins were in the NICU for four weeks and have just come home. She has hired you as her postpartum doula to help. She confides to you, "I am so tired and overwhelmed by it all and don't think I can handle the babies plus their older brother who is three years old. I feel like crying all the time and am scared that I'm "losing it."