

## KC IMPACT ON PARENTING STRESS AND MATERNA L BONDING. LONGITUDINAL DATA.

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**Background:** Preterm birth and the NICU environment, which entail separation between parents and their new born infant, affect the attachment processes and induce high level of parental stress. Negative long-term effects have been reported across the first year of the preterm infant's life on maternal psychological status and mother-child interaction. Intermittent KC intervention has been shown to be efficacious to lessen the degree of parental stress at the time of hospital discharge (Tallandini & Scalembra 2006). However, Miles et al., (2006) have shown neither beneficial nor adverse effects of KC when KC was carried out for less than the recommended minimal amount of 1 hour per session (Nivisq et al., 2010).

**Aim:** The objective of the present study is to verify whether intermittent KC reduces the mothers' parenting distress caused by preterm birth, and whether it fosters the mother-child bonding, when carried out with a program of at least 1 hour a day for at least 14 consecutive days. Maternal parenting stress, anxiety and depression, maternal bonding to the child, and parental couple relationship were investigated.

**Method:** 56 mother-preterm infant dyads, in KC, were compared to a control group of 34 dyads in traditional care. The requested KC program was of at least 1 hour a day for 14 consecutive days. Data was collected at five time points: before the initiation of KC, after discharge from hospital, at 3, 6, and 12 months corrected age (CA).

**Results:** A long-term effect of KC on lowering the maternal parenting stress was found: at the infant's discharge from hospital, at the infant 6, and 12 months (CA). KC mothers also presented a better quality of bonding to the child at 6 and 12 months (CA). Regression analyses demonstrated that the level of parenting stress the mothers presented at discharge from hospital was the major contributor on the quality of maternal bonding to the preterm infant at 6 months (CA). This was achieved only when KC was applied for at least 1 hour a day for 14 consecutive days. No effects, related to KC, were found on anxiety, depression and couple relationship.

**Conclusion:** During the first year of live KC was a key element in resolving psychological problems linked to the mothers' parenting stress and to the bonding processes. It is generally recognized that parenting stress has a central role in mother-infant early relationship (Forcada-Guex et al., 2011). KC reduces the influence of preterm birth on mothers parenting stress favoring a better mother-infant bonding.