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Björn Westrup

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Biography

Dr Björn Westrup is a senior consultant in neonatology and founder of the Karolinska NIDCAP Training & Research Center at Astrid Lindgren Children's Hospital, Karolinska University Hospital and lecturer at Karolinska Institute.

Dr Westrup is one of the pioneers in field of infant- and family-centred developmentally supportive neonatal care both from scientific and practical aspects. Since the beginning of 1990s he has research experience in clinical randomized controlled trials of the newborn with major focus on effects of parental involvement in the care as well as effects of family centred supportive organisation and architected design of nurseries. Consequently, the Karolinska neonatal programme is one of few with long experience of parental involvement in the care of the newborn 24/7 from admission to discharge with an

exceptional daily skin-to-skin contact implementation beginning at birth of the infant. Dr Westrup is currently one of the principle investigators in a large WHO coordinated global multicentre study of the effect on survival by immediate skin-to-skin contact for very low birth weight infants.

Dr Westrup has a long and close collaboration with parental organisations and serves in the Scientific Advisory Board of European Foundation for Care of Newborn Infants (EFCNI). He is Chair of the Topic Expert Group on Infant and Family Centred Developmental Care.

Infant- and Family- Centred Developmental Care (IFCDC) in a global systems perspective

Worldwide – including also high income societies – the prematurely born infant is the most vulnerable human being due to its immaturity of all organs systems including the brain and over recent years the importance of Infant- & Family-Centred Developmental Care (IFCDC) has become more obvious. In addition, to provide the best possible treatment, nutrition and environmental conditions for the vital functions of the infant to properly develop, we also have to support the psychological processes of bonding and attachment between parents and infant, which is so crucial for the long-term health and development.

By integrating scientific findings from natural and behavioral science in multidisciplinary developmentally supportive interventions programs, recommendations for redesigning nurseries and integrating families have

developed to meet these challenges. It not only is “baby and family friendly” but also has economic benefits and improves the long-term development of the child.

The basis of IFCDC is the recognition that the newborn infant is a human being in his or her own right, and letting the caregivers be guided by the current needs of the individual infant and family. In this context, the Newborn Individualized Care and Assessment Program (NIDCAP) is unique since it is the only program designed to be implemented from the moment of birth of the infant.

Different strategies can be used to support the nursing and medical teams to help the family becoming the primary caregivers of their own infants. Sweden has a long tradition of engaging parents in the actual care and of around the clock visiting hours.

Nurseries have, or are remodeling to have, the facilities enabling parents to live in the units throughout the entire hospital stay. Breastfeeding support and skin-to-skin contact is widely implemented. Also in low income countries, where the infants are at high risks of death and developmental impairments, the awareness the importance of IFCDC strategies Care in a global perspective is increasing.