

Creating the Pilot Survey: The Physical and Mental Health Effects of Babywearing for Caregivers

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Abstract

Babywearing is the practice of using a baby carrier to carry and hold a child. Babywearing is a practical way for caregivers to keep infants close while still maintaining full mobility of both hands. This study aimed to develop a pilot survey examining the caregiver benefits of babywearing. Research specifically examining baby carriers is currently lacking, however the current research supports our hypothesis that babywearing is beneficial, both mentally and physically for the caregiver. Researchers have found that skin to skin contact increases parental sense of competence, sensitivity and infant responsiveness while also decreasing feelings of stress or worry (Charpak et al., 1997). This poster serves to summarize the development of a pilot survey of caregiver benefits in practicing babywearing. The next step is to deploy and validate the study.

Background

- Research on Babywearing is lacking. The majority of research is invested in Kangaroo Care, which care emphasis skin to skin contact.
- Babywearing has been found to provide a plethora of benefits such as
- Regulate infant's sleep patterns
- Decrease crying
- Decrease child abuse
- Increase breastfeeding length
- Skin to skin contact has been found to increase bonding and attachment while also decreasing physiological symptoms of stress such as blood pressure (Jones & Santamaria, 2017).
- Oxytocin, a hormone that is released during skin to skin contact, sex, childbirth, and breastfeeding, has been found to play a key role in parental behavior across mammalian species (Feldman et al., 2010).
- Increases trust and prosocial behavior; decreases stress and anxiety.
- Oxytocin is associated with affectionate touch and gaze in mothers and arousal and stimulation in fathers.
- Works by downregulating the pathways that cause behavior of newborn directed aggression and feelings of avoidance, while also upregulating pathways that attract to infant stimuli.
- Constant feedback loop: exposure to infant touch increases oxytocin production, which in turn increases parental behavior.
- Significant rise in oxytocin in the first 6 months of infants life.
- Postpartum depression has been found to hinder a mother's ability to detect and satisfy her child's cues. Skin to skin contact has been found to decrease depressive symptoms (Bigelow et al., 2012).
- Caretaker stress might influence wheeze in infants with Cerebral Palsy through stress-induced behavioral changes in caregivers (e.g., smoking, breast-feeding) or biologic processes impacting infant development (e.g., immune response, susceptibility to lower respiratory infections) (Wright et al., 2001).
- Less caregiving demands were associated with better physical and psychological well-being of caregivers, respectively. Similarly, higher reported family functioning was associated with better psychological health and physical health (Rauba, O'Donnell, et al., 2005).

Measures

- Center for Epidemiologic Studies Depression Scale Revised (CESD-R- 10)
- Generalized Anxiety Disorder 7-item (GAD-7) scale
- Percieved Stress Scale 4 (PSS-4)

Participants

In order to develop better questions for our survey, we conducted qualitative interviews. A total of 10 participants, 2 men, 8 women, participated in this study. They were volunteer participants recruited from one of three monthly meetings of Babywearing International. Each participant verified their caregiving role to a child under the age of 5. The Majority of the caregivers were biological parents, with one biological grandparent.

Procedure

A survey developed included:

questions about the

• demographic

demographic

questions about

children in the

babywearing

motivation

caregiver's care

experience and

perceived benefits

• perceived effects on

mental and physical

and challenges

the caregiver's

caregiver

selected

interviews conducted at three BWI meetings by student

• improve survey

offered answer

• to determine

questions, improve

whether questions

needed to be added

or removed from the

Iteratively, responses from each were used to improve the survey.

Adapted survey for deployment through Qualtrics.

survey questions and pilot survey in the Middle Tennessee

survey to begin

larger survey

provide a bette

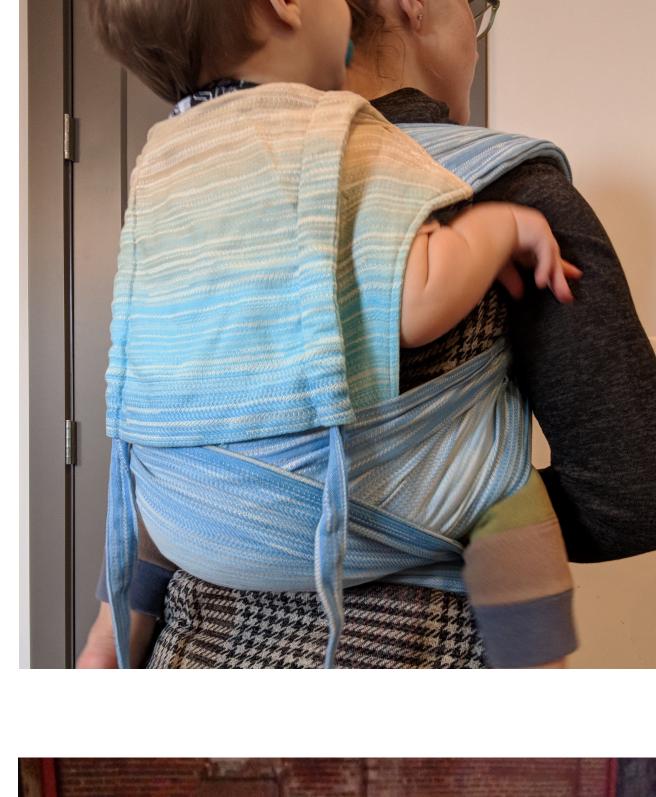
base to begin

more specific

hypotheses.

 added validates scales for Depression, Anxiety, and Stress







Sample Questions

Demographics:

- 1. Marital status
- 2. Number of children in household

Babywearing experience:

- 1. How frequently do your currently babywear?
- 2. Why do you use a baby carrier?

Mental and Physical Health

- 1. Please rate your confidence in your ability to detect and satisfy your child's needs.
- 2. Please rate your physical health in relation to your desired quality of life.

Overall Benefits and Challenges

- 1. What do you perceive as the overall advantages of babywearing?
- 2. What do you perceive as the overall disadvantages of babywearing?

Future Direction

Our next steps are to refine all the questions and answer choices, validate our survey, and deploy the survey on a larger scale.

- Survey finalization
- Pilot survey in middle Tennessee
- Survey validation
- Deploy survey on a larger scale
- Begin larger survey project to provide a better base understanding of the effects of babywearing on caregivers and to develop more specific hypotheses on the effects of babywearing on caregivers

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