It's All About Hormones!

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ABSTRACT

In this column, the editor of *The Journal of Perinatal Education* introduces the *Hormonal Physiology of Childbearing: Evidence and Implications for Women, Babies, and Maternity Care* published by the National Partnership for Women & Families and reprinted with their permission. The editor also describes the contents of this issue, which offer a broad range of resources, research, and inspiration for childbirth educators in their efforts to promote, support, and protect natural, safe, and healthy birth.

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Editor

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In this issue of *The Journal of Perinatal Education*, we are indeed fortunate to have permission from the National Partnership for Women & Families to reproduce the executive summary of Dr. Sarah J. Buckley's 2015 groundbreaking report, *Hormonal Physiology of Childbearing: Evidence and Implications for Women, Babies, and Maternity Care*. This report critically examines and translates current understandings of the hormonal physiology of childbearing, in relation to the physiological onset of labor at term and scheduled birth, along with discussion of the hormonal systems: oxytocin, beta-endorphins, epinephrine-norepinephrine (adrenaline-noradrenaline) and related stress hormone systems, and prolactin. Dr. Buckley eloquently describes how many aspects of maternity care, and maternity care interventions, can interfere with this hormonal flow. By understanding the intricate working of hormones and how they impact childbearing, childbirth educators and other health-care professionals can help

mothers and babies optimize the normal hormonal physiology.

In a follow-up article, veteran childbirth educator, Debby Amis provides excellent commentary on the evidence from the Buckley report for supporting, promoting, and protecting the normal physiology of childbirth. She recommends key points from the report that should be included in Lamaze International childbirth education classes.

IN THIS ISSUE

In this issue's "Celebrate Birth!" column, Tanya Strusberg, a childbirth educator, shares her unique story of being drawn to the real-time labor of a woman in New Mexico who was desperately trying for a successful vaginal birth after cesarean. The woman was using the virtual Facebook group as her literal emotional support, and the reaction was unlike anything Strusberg had seen online before. Literally hundreds of women around the world

We invite readers to respond to the contents of this journal issue or share comments on other topics related to natural, safe, and healthy birth. Responses will be published as a letter to the editor. Please send comments to Wendy Budin, editor-in-chief (wendy.budin@nyu.edu).

The content of all JPE issues published since October 1998 is available on the journal's website (<http://www.ingentaconnect.com/content/springer/jpe>). Lamaze International members can access the site and download free copies of JPE articles by logging on at the "Members Only" link on the Lamaze website (<http://www.lamaze.org>).

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were following her story and rallying behind her—a woman they had never met. With permission, Strusberg shares the amazing story of Kayla's birth.

In their article "Pump Early, Pump Often: A Continuous Quality Improvement Project," Spatz and colleagues describe an innovative continuous quality improvement project that ensured that mothers pumped early and often. The authors describe research demonstrating that although many mothers initiate pumping for their critically ill children, few women are successful at maintaining milk supply throughout their infants' entire hospital stay. Their successful project describes best practice in terms of pumping initiation that can be translated into practice at other settings. Childbirth educators can play a key role in preparing mothers who are anticipating an infant who will require hospitalization immediately post-birth.

Lucas and Cutler discuss dysregulated breastfeeding behaviors in children later diagnosed with autism spectrum disorder (ASD). In a qualitative interview, 16 mothers of children with ASD described their full-term infants' breastfeeding behaviors. Several mothers described their infants as demonstrating a dysregulated breastfeeding pattern of sucking without stopping of their own volition. If this is supported by future research, the authors suggest the pattern of a dysregulated feeding pattern in newborns could be evaluated by clinicians in the general pediatric population and/or at-risk infant siblings of children with ASD.

Jeffery, Luo, Kueh, Petersen, and Quinlivan present findings from a mixed-methods study that explored factors associated with and levels of engagement of 100 Australian expectant fathers in antenatal care. Most expectant fathers reported a lack of engagement with antenatal care. Factors

significantly associated with lack of engagement were working more than 40 hr a week and lack of adequate consultation by antenatal care staff. In qualitative analysis, six themes emerged in association with a lack of engagement. They were role in decision making, time pressures, the observer effect, lack of knowledge, barriers to attendance, and feeling unprepared or anxious. Jeffery et al. suggested that care providers involve fathers in consultations to improve paternal engagement.

Recognizing the importance of parents receiving accurate information about the benefits and risks of routine infant circumcision (RIC), as well as the benefits and risks of having an intact foreskin when making a decision about infant circumcision, Mitchel and Beal describe the results of a pilot study conducted using the shared decision making (SDM) conceptual model to guide expectant parents through a three-phase decision-making program about RIC as part of their childbirth education class. The participants showed a high level of preparedness following each of the three phases. Preparedness score were highest for those who decided to keep their expected sons' penises natural. This SDM program was an effective way of guiding expectant parents through the decision-making process for RIC.

Lastly, Mithani, Premani, Kurji, and Rashid describe fathers' role in breastfeeding practices in the urban and semiurban settings of Karachi, Pakistan. Using a qualitative exploratory study design, in-depth interviews were conducted with 12 fathers in urban and semiurban areas of Karachi, Pakistan. Fathers felt that adequate support from their family members and employers could enable them to encourage their partners to initiate and maintain exclusive and optimum breastfeeding practices. Exploring fathers' perception regarding breastfeeding, in the context of Pakistan, is still a new field of study.

WENDY C. BUDIN is the editor-in-chief of *The Journal of Perinatal Education*. She is also the director of nursing research at NYU Langone Medical Center and adjunct professor at New York University, College of Nursing. She is a fellow in the American College of Childbirth Educators and is a member of the Lamaze International Certification Council.