



Perinatal Psychology: What Role in the Maternity Care and Birth Experience?

Migliorini L1* and Cardinali P2

¹Department of Education Sciences, University of Genoa, Italy

²Department of Economics, Universitas Mercatorum, Italy

Opinion

Dear colleagues, the psychological accompaniment of mothers and family during the pre and postnatal period, within the hospital context, represents for the psychologist an ambitious project, which requires a good communication between all the figures working with and for the well-being of the child and his parents. Perinatal mental health has increasingly become a significant public health concern. The potential contribution of perinatal psychology approach has been recognised in literature as enhancing women's perinatal experience and contributing to the long-term wellbeing of women and their babies [1].

Being pregnant and becoming a mother is a challenging transition for women that may be stressful, as well as generating an experience of personal growth. From the point of view of the perinatal psychologist, accompanying mother, during this transition, involves a precise understanding of women needs, which strongly correlate to relational and maternity care context. According to literature maternity care has spent much time on promoting a good physical transition and very little on supporting a good psychological transition [2,3].

Becoming a mother can contribute to the process of maturation, but it also represents a moment of psychic vulnerability, which may require support and accompaniment that encourages a "good encounter" between mother and baby. In this sense, we think that the words of the clinicians have a fundamental importance, an extraordinary weight because they remain etched in the parents' minds. Prenatal and perinatal psychology is commonly defined as the study and clinical practice relating to our earliest development; it comprises pre-conception, conception, gestation, birth, post-natal experience and the infant's first post-natal year. Researchers have been focused primarily to understand the negative aspects and consequences of the transition to motherhood, investigating the mothers' intra-psychic dynamics and mental disorders, and their role as risk factors for the cognitive, affective and relational development of the child. For instance, the importance of clinical psychologist in Neonatology to attend a highly specialized clinic has been recognized in condition of prematurity, that represents a situation of great vulnerability. However, literature underlines the need of more research that explores the impact of maternity care on the psychological wellbeing of a woman and her family also in not pathological condition. Psychological research on childbirth is not so widely, however research from obstetrics or midwifery fields highlights the importance of psychological factors as mothers' self-determination in childbirth. This interdisciplinary study of prenatal and perinatal psychology provides an understanding of how experiences during this critical period impact lifelong patterns of physical, emotional, cognitive and social development [4,5].

According to the WHO definition, birth is an important personal and social event in people life, and during the first meeting of the Perinatal Task Force of the WHO-EURO office it has been proposed that assistance to women giving birth should be multidisciplinary,

ISSN: 2576-9200



*Corresponding author: L Migliorini, Department of Education Sciences, University of Genoa, Genoa, Italy

Submission:
☐ April 04, 2022

Published: ☐ May 30, 2022

Volume 6 - Issue 4

How to cite this article: Migliorini L, Cardinali P. Perinatal Psychology: What Role in the Maternity Care and Birth Experience?. Res Pediatr Neonatol. 6(4). RPN. 000642. 2022. DOI: 10.31031/RPN.2022.06.000642

Copyright Migliorini L. This article is distributed under the terms of the Creative Commons Attribution 4.0 International License, which permits unrestricted use and redistribution provided that the original author and source are credited.

RPN.000642. 6(4).2022 558

holistic, family-centred, and culturally appropriate. Also, the Society for Reproductive and Infant Psychology (SRIP) promotes multidisciplinary research and practice. However, we think that the organization of hospital services does not always favour this holistic and multidisciplinary vision but is often characterized by the fragmentation and specialization of interventions. To promote a global perinatal accompaniment of mothers and family it's necessary to overcome the discontinuity between pre and postnatal, between psyche and soma, between normal and pathological, between gynecological-obstetrical and paediatric.

According to literature, the specific role of the psychologist in hospital service may be to serve as a connection between operators. We think that the dialogue within the team is an important opportunity to integrate the different looks at the person, promoting the development of empathic modalities towards the woman, which considers her needs and emotions. To promote the well-being of women and the family we think that it's important to share within the team the idea that every meeting between clinicians and parents during the perinatal period could be a place of listening and care. Any medical examination during pregnancy offers a potentially favourable context for the establishment of a bond of trust between midwives, gynaecologists, and parents. Similarly, the observation and accompaniment of the early stages of the afterbirth is an opportunity to consolidate this bond with neonatologists [6,7].

Our practice confronts us every day with mothers who suffer in the greatest loneliness. And this is not because they are alone, but because today, in a society that promotes values of progress and performance, their suffering cannot be expressed. The integration between perinatal psychology and medical practice might represent an important response to women' needs and a social responsibility.

References

- Alderdice F (2018) Enduring questions in perinatal psychology. J Reprod Infant Psychol 36(5): 461-462.
- Martin CR, Redshaw M (2013) Diagnosis and classification: Challenges and opportunities for perinatal psychology. Journal of Reproductive and Infant Psychology 31(4): 325-327.
- Migliorini L, Cardinali P, Rania N (2019) How could self-determination theory be useful for facing health innovation challenges? Front Psychol 10: 1870.
- Morano S, Migliorini L, Rania N, Piano L, Tassara T, et al. (2018) Emotions in labour: Italian obstetricians experiences of presence during childbirth. J Reprod Infant Psychol 36(1): 34-41.
- Saxton SN, Dempsey AG, Willis T, Baughcum AE, Chavis E, et al. (2020) Essential knowledge and competencies for psychologists working in neonatal intensive care units. J Clin Psychol Med Settings 27(4): 830-841.
- Segura ALA, Moñux RMF, de la Hoz Martínez A, Farras NP, Gómez RC (2020) Opinion of premature newborns parents on the need for a psychologist in neonatology units. Acta Pediatrica Espanola 78(3-4): E54-E61.
- Shabalov NP (2021) Perinatal psychology: Not visible, but exists. Pediatriya-Zhurnal im GN Speranskogo 100(1): 297-301.

Res Pediatr Neonatol Copyright © Migliorini L