



“Just ten minutes of guidance can build parental confidence that lasts for years.

—Oleksandra Balyasna

## INSIDE

|   |    |
|---|----|
| Family Voices .....                       | 1  |
| Editorial .....                           | 2  |
| The INFA-Neo Program .....                | 6  |
| Welcome Livia Nagy-Bonnard ....           | 8  |
| Meet the NFI Members: .....               | 9  |
| Julia Giesen                              |    |
| The Transformative Power of.....          | 10 |
| NIDCAP: An Australian Medical Perspective |    |
| The Advanced Practicum in .....           | 12 |
| NIDCAP Training                           |    |
| Práctica Avanzada de la .....             | 16 |
| Formación NIDCAP                          |    |
| From the Science Desk .....               | 20 |
| NIDCAP Care in the Moment ....            | 24 |
| NIDCAP Training Centers .....             | 26 |

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## FAMILY VOICES

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# When Every Gram Counts: Reflections on My Daughter’s Early Arrival

By Oleksandra Balyasna, Ukraine

I had never heard of preterm birth during any of the pregnancy preparation courses I took with my partner. A few days before giving birth to Diana, our daughter, I shared with my gynecologist that I was feeling inexplicably anxious. I didn’t understand where that feeling was coming from. The doctors never mentioned the risk of premature delivery, so I was utterly unprepared, mentally and emotionally. After all, who expects to deliver a baby at 28 weeks?

My daughter was just over one kilogram when she was born. It was a cocktail of stress, shock, and uncertainty. I felt completely out of control, like I was the first person on the planet to deliver a baby so early, so tiny, so vulnerable, and so fragile. I had no idea how to reduce my

daughter’s pain or bring her comfort. It was not the kind of maternity experience I had ever dreamt of.

After delivering prematurely, I couldn’t stop crying. Every time I tried to speak, my words dissolved into tears. What helped me was seeing a psychologist I had known before. On the third day after my baby’s birth, I shared my biggest fears out loud and expressed everything I was feeling. That conversation was deeply comforting and brought me much relief. I didn’t experience the “uncontrolled crying mode” again and felt much more emotionally balanced.

### Visiting the NICU

At the time of Diana’s birth, she spent time in the neonatal intensive care unit, the

(continued on p.2)

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perinatal center was still closed, and only an hour a day was allowed for us to visit her at lunchtime. During this hour, I also had to talk to the doctor about her medical treatment, get a new list of medical items I had to purchase for my baby, and bring in the pumped milk I was expressing. The time that was left was focused on connecting with my baby.

During my first visit, I could only watch my daughter from a distance through the glass of the incubator. On the third day, a nurse encouraged me to touch her skin, hold her tiny arm, and gently place my palm on her. Without guidance, I was terrified I might hurt her with all the tubes and catheters keeping her alive.

A particularly traumatic experience for me was being placed in a room with an empty bed, right next to rooms full of mothers who had delivered healthy, full-term babies. I could hear crying babies all around, while mine was in the intensive care unit. I felt utterly useless. *What can I do? Am I even a mother yet?*

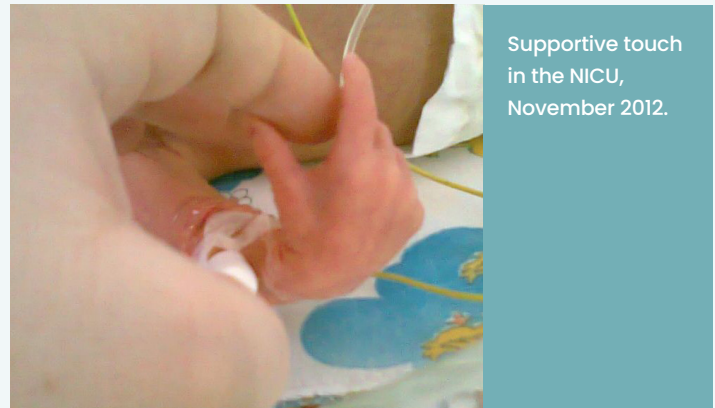
Learning how to gently touch Diana, respond to her behaviors, and build trust in our interactions became *one of the most emotionally meaningful experiences*. It also laid the foundation for her emotional resilience and future development. These small, sensitive interactions help babies born prematurely begin to regulate their senses and bond securely, essential for their neurodevelopment.

**Learning how to gently touch Diana, respond to her behaviors, and build trust in our interactions became one of the most emotionally meaningful experiences.**

### My most memorable experience in the NICU

One of my strongest memories is hearing the words, “*You can kangaroo her now—hold her.*” That half-hour of holding my daughter skin to skin was pure magic. While the NICU was busy all around me, I was in another world while I held my daughter, feeling her heartbeat, breathing in her scent, and bonding with her deeply for the first time.

At the time, I didn’t fully understand the power of skin-to-skin care, but I instinctively understood how important it was. Later, I learned that kangaroo care supports the baby’s ability to regulate heart rate and body temperature and even supports healthy brain development. If I had known more then, I would



Supportive touch in the NICU, November 2012.

have done it more often, during the dedicated hour and as often as possible.

### Navigating my fears in the NICU

My biggest challenge was to gain the confidence to touch my daughter. I was unsure if this was hurting her, and it took me some time to get comfortable with how to lift her, place her back into the incubator, or change her. She seemed so fragile.

As Diana grew, breastfeeding seemed intuitive for her. However, it was challenging to learn how to balance tube feeding, bottle feeding, and breastfeeding while she was not gaining weight rapidly. Bottle feedings were frustrating when it seemed the focus was on getting her to eat more, and then she would lose almost half of the feed by spitting up. We learned we had to be more patient and let Diana learn how to suck, swallow, and to increase the volume while breastfeed at the same time. By the time Diana was discharged home, she was only breastfeeding without tube feedings or bottle, which felt like a tremendous victory and an important milestone.

My family was my biggest support and was always next to me. My father, even though being scared of the small size of our daughter, was happy to support me with other tasks. For example, he washed, ironed, and disinfected all the clothes for our little fighter. My mom was cooking, and my sister was searching for tiny socks, clothes, and special pacifiers of a tiny size. Each day, Diana’s father came to the hospital after his job to check on us. One of my fondest memories is when he came during the Christmas holiday wearing a Christmas hat and spent New Year’s Eve with me and his daughter.

### New challenges with the transition to home

After Diana’s discharge home, our next challenge was finding the right family doctor who understood the specific needs of a premature baby. We had to organize the follow-up care ourselves: monitor her vision (retinopathy of prematurity), heart development, orthopedic assessments, and her neurological development. There was no follow-up center at the time, and it felt like a huge responsibility to build our own care system. Our biggest fear was: *Did we miss anything important?*

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Building that follow-up network, finding a neurologist, orthopedist, or ophthalmologist, was overwhelming but essential. The earlier developmental concerns are identified, the better the outcomes with timely interventions. Regular checkups became a part of our new routine.

## Support

The following were helpful to me during Diana's hospitalization in the NICU:

**Peer-to-peer stories.** Hearing other positive preemie stories gave me hope. I still remember the moment I saw a child return to the NICU with her parents. I couldn't believe that my tiny one-kilo baby could one day be like that.

A close friend of mine once told me she had been born prematurely. She's now a smart, beautiful lawyer with a kind heart. I called her and said: "Tell me everything. How was it for you?" Just hearing her story was deeply therapeutic. She reminded me that premature babies can survive, thrive, and shine, leaving no visible trace of being born too soon.

## My recommendation to parents going through the NICU journey:

- While positive preemie stories can be supportive, peer groups are also very helpful. Check preemie parent organizations that operate locally next to you.
- It is important to prioritize getting mental health support. Ask for psychological support for you and your partner together. This is not something you go through daily, and any preterm labor is stressful.
- Involve your family and friends, whether this means having them babysit your older kids, cook, or perform other helpful tasks.
- Maybe your journey is not going as planned, but you are definitely not alone in it. Please feel the support of our huge community, which is behind parents who are going through or have similar experiences. Having other parents to talk to and share stories with is inspiring.

## What could be helpful in the NICU:

- Invite parents to walk this journey together with the care team. Show them how to talk to and touch their baby, and how they can contribute to their baby's care.



Oleksandra with her daughter Diana, aged seven.

**"Our biggest fear was: Did we miss anything important?"**

Just 10 minutes of guidance can build parental confidence that lasts for years.

- Provide access to peer support groups and display information in the unit so parents can view it.
- Offer psychological support and printed materials for families. This is a new, unfamiliar world for them, and knowing what they can do helps restore a sense of control and hope.

While in the incubator, our daughter moved a lot and showed her character. She speaks four languages fluently, likes to read books and history, write stories, draw, and collect stones.

Column Editors: Livia Nagy-Bonnard and Debra Paul

*Diana fought bravely for her life as a fragile newborn—and today, she continues to show that same strength as they begin a new life in another country, far from home. Diana and her mom are now living as refugees after fleeing the war in Ukraine. Starting over in unfamiliar surroundings is never easy, but Diana's resilience reminds her mom every day of the power of survival, hope, and love. Her journey began in an incubator, surrounded by uncertainty, and now she walks forward with confidence and creativity, shaping a future full of promise.*