



NEWSLETTER



Dear friends and supporters of GFCNI,

In this edition, we highlight three developments that reflect what drives our work at GFCNI: making knowledge more accessible, strengthening evidence, and connecting people across borders. With the launch of Neopedia in Portuguese, more families and communities can now access trusted neonatal information in their own language. We are deeply grateful to our partners in Brazil and Portugal for helping make this step possible.

We also share the newly published BronQ Family study protocol, an important milestone in understanding how bronchopulmonary dysplasia affects not only children, but entire families across countries.

Finally, we look at how parent advocates are strengthening Kangaroo Mother Care and peer support through international exchange. Their journey reminds us that progress in newborn care depends not only on research and policy, but also on relationships, shared learning, and the commitment to keep families at the center.

As always: Thank you for reading and engaging!

Warm regards,

Silke Mader and the GFCNI team



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MORE LANGUAGES, MORE SUPPORT

Neopedia Expands with Portuguese Version

Neopedia is growing and is now available in Portuguese, almost exactly one year after its initial launch. This marks an exciting step forward in bringing trusted, accessible information on neonatal care to even more families and communities worldwide. It also means more parents will be able to find support and guidance in their own language. The Portuguese pages have been created with the valued support of the Brazilian Parents of Premies' Association and XXS in Portugal. With Turkish and Greek also coming soon, Neopedia continues to grow its reach and support families around the world.

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NEW PUBLICATION IN BMJ PAEDIATRICS OPEN

BronQ Family Study Protocol Published

Another milestone is reached in the BronQ Family research project. The study protocol has now been published in BMJ Paediatrics Open. BronQ Family assesses the long-term impact of Bronchopulmonary Dysplasia (BPD) on the health-related quality of life of affected families across seven countries. The publication outlines the study objectives, methodology, and stakeholder involvement, including parents, healthcare professionals, and researchers, and provides the scientific foundation for the project.

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Network



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ADVANCING CARE TOGETHER

Zero Separation Conference in Belgium

More than 200 participants joined Noah's Ark Belgium's 3rd Zero Separation Conference for a day of inspiring exchange, practical learning, and shared commitment to better newborn care. Bringing together caregivers and 11 internationally renowned experts, the conference highlighted the importance of breast milk, parental involvement, and developmental care. Held in Leuven's

historic university halls, the event created a unique space where science and compassion came together. It also marked another important step in growing the Zero Separation movement in Belgium.

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PARENT PARTNERSHIPS

Across Borders, Parent Advocates Strengthen Kangaroo Mother Care and Peer Support

Following the GFCNI Parent and Patient Organization Summit in March 2026, Kylie Pussell of our Australian partner parent organization Miracle Babies Foundation, Yamile Jackson, founder of International Kangaroo Care Day, and Lucie Žáčková of our Czech partner parent organization Nedoklubko continued the exchange of knowledge across Europe. Their journey included NICU visits in Germany, the Czech Republic, Bulgaria, and Hungary, as well as a seminar in Prague focused on skin-to-skin contact, zero separation, and structured parent support. The experience highlighted encouraging examples of rooming-in, calm and family-centered unit design, visible parent presence, and dedicated neonatal teams. At the same time, it reinforced the need for more consistent parent inclusion, adequate space for Kangaroo Mother Care, peer support, and staff resources across neonatal care systems.

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POSITION STATEMENT

Equal Access to Skin-to-Skin Contact for Twins, Triplets, and Higher-Order Multiples

A new joint position statement from parents and healthcare professionals calls for equal access to skin-to-skin contact for infants from multiple births, including twins, triplets, and higher-order multiples. The statement emphasizes that multiplicity should never serve as a reason to delay or limit this essential component of newborn care. Instead, healthcare services should organize care environments, staffing, training, and practical resources so that each infant receives safe, consistent, and individualized access whenever medically feasible. The statement was authored by Stephanie Ernst, founder of our Dutch partner parent organization “TAPS Support”, neonatologist and NIDCAP trainer Dr. Stina Klemming, Chair and Research Director of the International Council

of Multiple Birth Organisations Dr. Carolyn Lister, as well as Senior DICAP Trainer Monique Oude Reimer, GFCNI Chairwoman Silke Mader, and Dr. Yamile Jackson, founder of Kangaroo Care Day.

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Recognizing parents as essential partners in care, strengthening their role at the bedside, and prioritizing both infant outcomes and family well-being

Presence Study Toolkit

Support for adapting to a family-centered approach

NICU teams • Healthcare organizations • Educators • Family support networks

Toolkit development collaboration by family and healthcare partners from the Family-Centered Care Taskforce and the

OHIP Family-PRESENCE Study team, in partnership with the NICU Unit and the Canadian Pediatric Public Health Association (CPPHA)

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OHIP Family-PRESENCE Study team: [www.presencestudy.org](#)

Family-Centered Care Taskforce: [www.familycenteredcare.org](#)

OHIP NICU Unit: [www.ohip.ca/nicu](#)

Canadian Pediatric Public Health Association (CPPHA): [www.cppha.ca](#)

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NEW PRESENCE STUDY TOOLKIT

Strengthening Parental Presence in NICU Care

A new Presence Study Toolkit is helping NICUs strengthen family-centered care by recognizing parents as essential partners in their infant's care journey. Developed collaboratively by healthcare and family partners from the Family-Centered Care Taskforce, the toolkit translates evidence and lived experiences from the Presence Study into practical guidance for hospitals, NICU teams, educators, and family advocates. Organized around 13 consensus recommendations, it provides actionable strategies to strengthen policies, improve consistency and support parental presence at the bedside. By promoting more inclusive and collaborative care practices, the toolkit aims to improve both infant outcomes and family well-being while helping NICUs build more confident, resilient families.

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Science



Meet the UPRISE Consortium

#UPRISE4Health

UPRISE

Funded by the European Union

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RESEARCH FOR EARLY-LIFE HEALTH

UPRISE Partners Meet in Thessaloniki

The UPRISE team met this month for its in-person General Assembly, bringing together researchers from across Europe. Their shared goal is to shine a light on the invisible threat of air pollution and its effects on pregnancy and early-life health. Funded by the EU, UPRISE explores how pollutants from sources such as traffic emissions, industrial activity, and plastic degradation may affect fetal development and neonatal outcomes. The meeting marked an important moment as the project moves into its next phase, with monitoring devices deployed and participant recruitment now underway. Partners reviewed progress, aligned on upcoming priorities, and strengthened collaboration across disciplines ranging from environmental science to public health.

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KEEPING FAMILIES AT THE CENTER OF NEONATAL INNOVATION

Artificial Placenta Technologies at EuroELSO

At the EuroELSO Congress in Dublin, international experts came together to share the latest advances, research, and collaborations in the field of extracorporeal life support. During a dedicated session, emerging Artificial Placenta and Artificial Womb technologies and their future role in neonatal intensive care were discussed. Drawing on experiences from the EU-funded project ArtPlac, GFCNI highlighted the importance of ensuring that Infant- and Family-Centered Developmental Care (IFCDC) remains a central focus throughout the development and future clinical application of neonatal technologies.

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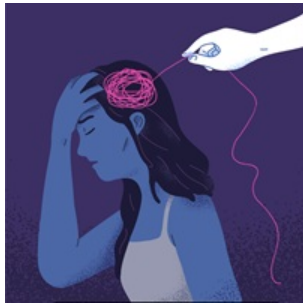
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INFECTION PREVENTION

Kangaroo Mother Care Strengthens Infection Prevention in Preterm Infant Care

A recent systematic review and meta-analysis of 29 randomized controlled trials, including more than 17,000 low-birthweight infants, adds further evidence for Kangaroo Mother Care as an essential component of neonatal care. The study found that hospital-initiated Kangaroo Mother Care – including prolonged skin-to-skin contact, breastmilk feeding, and timely discharge with appropriate follow-up – reduced mortality, sepsis, and invasive infections in low-birthweight infants. These findings suggest that Kangaroo Mother Care not only supports physiologic stability and bonding but also strengthens infection prevention by reducing exposure to hospital pathogens and supporting immune protection. For neonatal teams, the evidence reinforces the value of embedding Kangaroo Mother Care into routine hospital practice.

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MENTAL HEALTH

Preterm Birth Linked to Long-Term Psychiatric Risk

A large register-linkage cohort study from Quebec, Canada, followed more than 303,000 individuals from age 11 into adulthood to examine whether preterm birth was associated with later psychiatric diagnoses. Compared with term-born individuals, those born before 37 weeks' gestation had a higher risk of all outcomes studied, including ADHD, psychosis, bipolar disorder, anxiety, and depression. The strongest association was seen for ADHD, while risk patterns generally increased with lower gestational age. Each additional week of gestation was linked to lower psychiatric risk across outcomes. Although the study cannot explain causality, it reinforces the need to include emotional, behavioral, and psychiatric health in long-term follow-up after preterm birth.

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European Standards of Care for Newborn Health



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NICU ENVIRONMENT

Sound Exposure in the NICU May Shape Neurobehavioral Outcomes

A prospective observational study in a Level IV NICU examined how different types of sound exposure may relate to neurobehavioral outcomes in extremely preterm infants. Researchers followed 64 infants born at or before 28 weeks' gestation and used repeated 16-hour recordings to measure adult words, silence, electronic sounds, and overall sound levels during hospitalization. Near term age, higher adult word exposure was associated with lower infant stress, while higher average and peak decibel levels were linked with less favorable neurobehavior, including lower orientation scores and greater hypertonia. The findings underscore the need for standardized newborn care that reduces harsh noise while preserving meaningful, developmentally appropriate human speech in the NICU.

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