

## CO-SLEEPING AND BABY CARRYING

Co-sleeping evolved over 5 million years and infants are hard-wired for it. Solitary sleep is a novel development of the industrial revolution. Ideally, babies should co-sleep in close-body proximity and be carried as much as possible. Why? The human infant is born with only 25% of its adult brain size - neurologically immature, physiologically helpless and dependant, like kangaroos. This immature state means that gestation does not end at birth but is followed by an “external gestation”, only to be complete by 9 months, when the infant starts to crawl. **Hence, the idea of “9 months in and 9 months out.”**

**Co-sleeping/bed-sharing mothers breastfeed twice as much (exclusive breastfeeding reduces SIDS by 50 - 75%).** Moreover, research has found that maternal breathing produces optimal level of carbon dioxide (CO2) that arouses babies during incidents of sleep apnea, and by extension, prevents SIDS. The majority of SIDS occurs in cribs in solitary sleep.

In addition, infants thrive better if they are carried, co-slept/bed-shared in close-body proximity; they demonstrate: stable heart and respiratory rates, increased weight gain, decreased stress hormones, fewer infections, improved cognitive development. co-sleeping/bed-sharing is associated with less anxiety, less behavioral problems, higher self-esteem, more comfort with intimacy later in life, and more independence.

Conversely, children who are “trained” to sleep by the intensive cry-it-out method display elevated cortisol stress hormones, nerve degeneration, permanent neurological damage, suppressed immune system, heart arrhythmia, growth retardation, panic and anxiety, violent behavior, and IQ averaging 9 points lower.

“Infants may safely share a bed for sleeping if this occurs with a nonsmoking, unimpaired caregiver on a standard, adult, non-water mattress.” Alaskan Division of Public Health.

## OUR MISSION

haikProject is a community non-profit organization dedicated to improving the lives of children and their families.

Founded in 2004 by Medical Anthropologist Astrik Vardanyan and Child Psychiatrist Arthur Pogosyan, haikProject advocates natural childbirth and natural parenting, free of birth and childhood traumas.

**“5 Crucial Aspects of Childbirth and Childcare”** is an ultimate guide for future parents from conception to childhood.

The mission of haikProject touches upon each and every family. In fact, it touches the society at large.

haikProject aims to prevent rather than spend millions of dollars on treatments.

With the high U.S. rates of infant mortality, exponential growth in autism spectrum disorders and mental retardation, every possible risk should be eliminated.

haikProject has done extensive research to identify those risks. With simple steps much harm can be avoided. All it takes is knowledge and support.

**haikProject invites all parents and parents-to-be to get engaged, learn and share. Please become a member of haikProject and have free access to a wealth of information through our E-newsletter, group and individual counseling and ongoing seminars, which are held on the last Wednesday of each month at:**

Artek Child Daycare,  
546 West Broadway,  
Glendale, CA 91204  
from 7:00 pm to 9:00 pm

**No parent should ever have to say,  
I wish I had known...**

\* For detailed information about membership benefits please visit [www.haikProject.org](http://www.haikProject.org)



haikproject

P. O. Box 4753  
Glendale, CA 91222

For more information please, visit at  
[www.haikProject.org](http://www.haikProject.org)  
Or call 818-392-HAIK (4245)



haikproject

[www.haikProject.org](http://www.haikProject.org)  
Or call 818-392-HAIK (4245)

## CHILDBIRTH

While birth is a natural event, today's hospital environment is saturated with high-technology interventions; such as excessive ultrasounds, electronic fetal heart monitoring, restriction of autonomy and mobility of laboring and birthing woman, supine position (lying on the back in stage I and II of labor), unwarranted use of synthetic drugs to induce/augment birth, and use of epidural anesthesia, to name a few. All are routine hospital interventions, recognized by World Health Organization (WHO 1999, 2005) as unnecessary and/or harmful.

The cascade of interventions with the overuse of technology creates a domino effect – one intervention leads to another. Most importantly, these interventions, far too often, result in fetal distress due to oxygen depletion, which in turn, end in unnecessary and preventable Cesarean Sections.

According to the World Health Organization (WHO) and Centers for Disease Control and Prevention (CDC), the U.S. maternal and infant mortality rates rank as one of the highest in the industrialized world; 49 other countries have lower birth-related death rates; and about 30 other countries have lower infant mortality rates. This is despite the highest per capita spending on health care in the U.S.

While medical interventions can save lives during childbirth, the overuse and abuse of technology, in fact, increases mother and child mortality and morbidity.

**Women's bodies are perfectly designed for natural childbirth. 85% of pregnancies are normal; Births could be too; devoid of excessive medical interventions – as nature intended.**

A healthy, low-risk woman enters the hospital and faces cascade of interventions that eventually causes fetal distress. She ends up in operating room...

## IMMEDIATE CORD CLAMPING (ICC)

**ICC is an intervention that robs the newborn of approximately 25 to 50% of its own blood volume.**

How? When the infant is born, the umbilical cord pulsates to transfuse the placental oxygen and nutrient rich blood into the baby, before the baby's lungs start to fully function. After about 5-20 minutes, depending on the individual circumstances pulsation in the cord stops naturally, due to physiological vasoconstriction.

In modern hospitals, the still pulsating umbilical cord is clamped and cut seconds after the baby is born and often, before the first breath is initiated. The rationale for this is that if the cord is not clamped, the mother will have more postpartum bleeding, and the baby will have "too much" blood and develop hypervolaemia, polycythemia, hyperviscosity, hyperbilirubinaemia. However, WHO and Cochrane Review have stated that the above neonatal conditions are physiological and benign for the newborn. As for the mother, no correlation or even increased maternal bleeding and placental retention are found due to ICC.

While, there are no proven benefits for the mother or the newborn, there are proven harms from ICC to the neonate's fragile brain, heart and lungs. This damage can range from subtle to serious. ICC may cause oxygen depletion, low blood pressure, low blood volume and infant anemia, resulting in increased infant mortality and morbidity, brain damage and cognitive deficits. Premature babies are particularly vulnerable, and could benefit from full volume of placental blood, rich in oxygen, iron, stem cells and myriad other nutrients.

**The full quota of blood is every newborn's prerogative for optimal health and brain development.**

It is biologically impossible to "overly transfuse" blood to the child. If it were so, human species would become extinct in one generation.

## CIRCUMCISION

Circumcision cuts off the double layered fold of skin that normally covers the glans (head) of the penis. Circumcision disrupts the protective, immunological and sexual functions of foreskin.

**Protective function** - Circumcision creates an open wound in a septic bacterial and ammoniacal environment of urine and feces, (not to mention the hospital endemic of staphylococcus-borne infections resistant to antibiotic treatments, such as MRSA, VRSA) skewing any claims of "hygiene" and health benefit.

Throughout life, the foreskin keeps the glans moist and protects it from injury. Without foreskin, the glans becomes dry, calloused, and desensitized from exposure and chafing. Moreover, foreskin has myriad **immunological functions** – all disrupted by circumcision.

**Sexual Function – 10-20 thousand nerve endings and sensory receptors are removed by circumcision, comprising as much as 50% of the penile skin system, including the most erogenous areas - inner foreskin, ridged band and frenulum.**

Circumcision leaves the penis with a single-layered immovable skin system, disrupting the "gliding mechanism" during sex and making penetration and intercourse painful for the female partner.

**Harms and Risks of Circumcision – The majority of circumcisions are performed without anesthesia; babies scream frantically when their foreskin is cut off. Some defecate. Some lapse into a state of neurogenic shock. Circumcision may cause excessive bleeding, infection, complications from anesthesia, surgical mistakes, including loss of the glans and the loss of entire penis, and in rare cases – death, nullifying any potential benefit.**

No medical association endorses infant male circumcision for disease prevention. Circumcision advocacy is due to lack of knowledge or religious, cultural and financial bias.

## BREASTFEEDING

For 150 years formula companies "successfully" spread the propaganda that formula is a safe and viable substitute for breast milk. Today, huge international efforts are directed to re-introduce breast-feeding as a cultural norm and fight the unethical promotion of formula moguls.

WHO recommends that infants be breastfed for the first 6 months exclusively, and up to 2 years and beyond, with complementary foods. Despite all efforts, only 35% of infants globally nurse until four months.

**WHO estimated that 1.5 million babies die annually throughout the world because they are not breastfed.** Infants who are not breastfed have higher risk of allergies, diarrhea, Crohn's Disease, ear infections, tooth decay, pneumonia, strep and e coli infections, and meningitis, to name a few. They are also 50 - 75% more likely to die of Sudden Infant Death Syndrome (SIDS), 50% more likely to develop insulin dependent diabetes, 30% more prone to leukemia than exclusively breastfed infants. **Soy formulas are particularly hazardous containing estrogen-like compounds that cause reproductive dysfunctions and hormonal imbalance; a soy-fed baby receives the equivalent of 5 or more birth control pills' worth of estrogen daily.**

Failure to breastfeed puts the mother at an increased risk of reproductive and breast cancers; researchers estimated that **if every mother in the U.S. breastfed only 6 months longer than originally planned, there would be 250,000 fewer cases of breast cancer each year.**

Unfortunately, lack of education, unfounded fears of inadequate milk supply, lack of supportive attitude of society, employer and family, combined with the perception of breasts as merely "sexual accessories," all cumulatively deprive the vulnerable infants of their mother's milk either entirely, or far too soon.

While breastmilk is "liquid gold" containing 10,000 living cells in every teaspoon, formula is a "dead" substance devoid of antibodies and containing harmful substances.