

Baby Steps-An Overview Tori Joel

Midwife, Implementation manager, Baby Steps

A unique transition

- What happens in the womb can last a lifetime
- Rapid neurological and physiological development
- Relationship challenges in transition to parenthood
- Development of parental bonds and infant attachment
- Loving, caring and sensitive parenting are essential



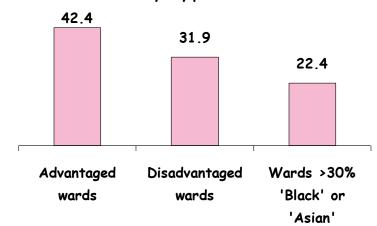
What's the gap?

A 2009 Department of Health review of antenatal education found:

- it is highly medicalised
- there is limited focus on parenting
- availability is patchy
- vulnerable families do not attend



% of mothers who attended antenatal classes by type of area²



- Unfortunately, parents who most need support are STILL the most unlikely to receive it.
- In 2018, research by the Maternal Mental Health Alliance revealed that 24% of areas in the UK still have no access to specialist perinatal mental health services (Maternal Mental Health Alliance, 2018).
- A survey by The Royal College of Midwives and Netmums found that 75% of expectant mothers in low-income households do not attend antenatal classes (Royal College of Midwives, 2011).
- There are currently few evidence-based programmes designed to improve the wellbeing of vulnerable families as they prepare for a new baby.

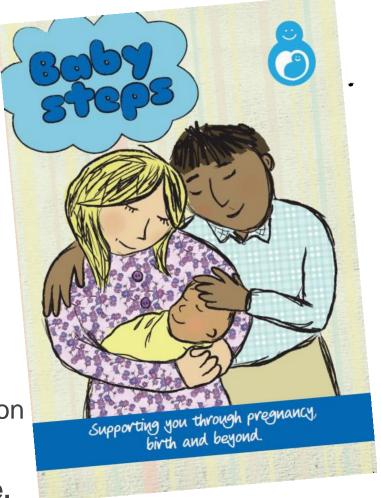
Aims and objectives

The overall aim is to:

to optimise health and wellbeing and promote protective factors

The objectives are to:

- support parents with the emotional and physical transition to parenthood;
- nurture healthy relationships by encouraging listening and conflict resolution skills;
- encourage the development of sensitive, reflective parent-infant relationships from pregnancy;
- promote healthy child development within a network of supportive relationships.



How does Baby Steps work?

- 2 dedicated co-workers health and Family Engagement worker
- 2 home visits, 9 group session (6 antenatal, 3 postnatal) Plus extra Midwifery session in some areas.
- Engaging holistic approach
- Part of integrated care pathway
- Evidence-based themes:
 - Reflective functioning
 - Couple relationships
 - Parent-infant relationship
 - Knowledge of child development
 - Emotional and physical health
 - Social support and confidence



Baby Steps Key themes

- Relationships, Respect and Support
- Parent-infant interactions
- Healthy bodies and healthy minds
- Understanding pregnancy and baby development
- Practicalities of parenthood

Reflective function in pregnancy...

Capacity to reflect and imagine what the baby may be like

Prenatal maternal representations related to observed parenting behaviours and security of child attachment at age 1

(Levendosky et al 2011; Fonagy 2005; Grienenberger 2005)



Developing relationships

Creating a listening culture

Developing active listening

Reflecting on causes of conflict and how partners deal with it

Trying out ways of resolving conflicts effectively



Understanding baby cues

Infant care with a focus on observing and responding to cues;

Understanding baby sleep/wake states:

Reflecting with parents videoed interactions

Singing for soothing and for fun.

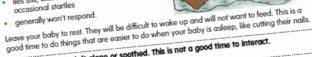


Do you feel different at different times of the day? Well, so does your baby. You'll notice that throughout the day your boby will be in different moods or 'states'. Just like with adults, understanding the state your baby is in can help you work out the best way to be with them.

Deep sleep

Your baby:

- breathes deeply and regularly
- has their eyes closed
- lies still, with bursts of sucking and occasional startles



Your baby needs to be left alone or soothed. This is not a good time to interact.

Light sleer

- breathes more irregularly
- has their eyes closed, but their eyelids will flutter
- moves their body and face they may smile
- briefly fusses or cries.

Your baby is more easily responsive, but should be left alone to rest. Your baby will not want to feed.

your baby needs to be left alone or soothed. This is not a good time to interact

- breathes regularly
- has their eyes open, but glazed and heavy-lidded
- makes smooth movements.

Your baby is awake, but will not be very responsive and may fall back to sleep. They may want to interact



Session 7

Your baby may need a break or a change.

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Learning



Qualitative learning

- a feedback and satisfaction survey was completed by 148 parents
- 51 interviews took place
- Included certain groups, such as parents in prison and those from BME families.

Satisfaction

- Parent satisfaction was high
- 98% reported finding the programme helpful.

"It has been an amazing experience and I'm thankful I had the opportunity to be a part of the group, was great for me but even greater for my baby" (Mum – young parent)

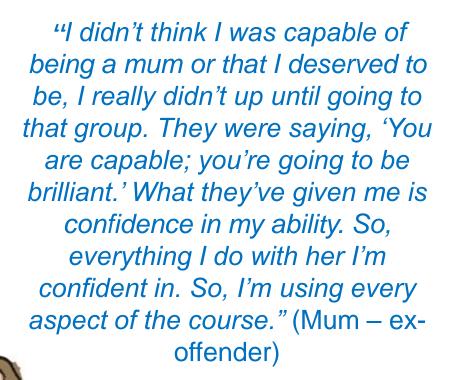


Confidence

99% parents agreed that Baby
 Steps helped them feel good about being a parent

• 96% parents felt more confident

as a parent.



New knowledge and understanding

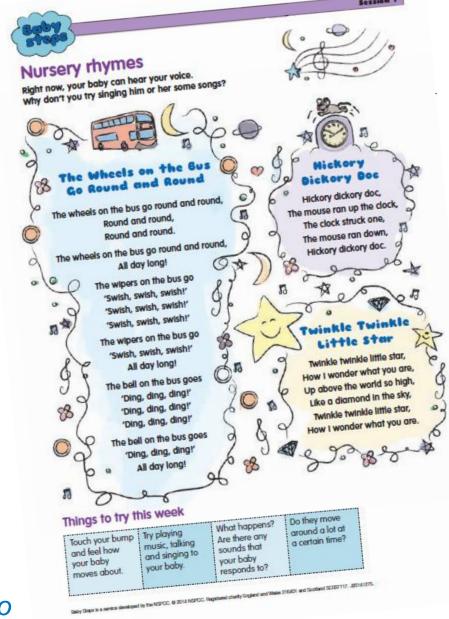
- 93% of parents agreed that the programme had helped prepare them for birth
- 98% of parents felt the programme helped them look after their baby and they were prepared for going home with them.

"When I was in labour and I was feeling these pains and stuff. I suppose it helped me deal with it. If you don't know what is happening to your body, I think I would have felt out of control, but it helped me be in control of my labour more and keep calm because I knew what was happening to my body and why it was happening." (Mum - exoffender)

Understanding baby

- 93% agreed attending Baby Steps helped to better understand their baby.
- Learnt the importance of interacting with babies
 - different stages of development
 - singing to them
 - playing with them, and
 - holding them up to talk to them.

"I didn't realise how close the baby had to be at first to be able to see you....when I did have my baby I realised I had to hold him up for him to see me." (Mum – experiencing social isolation)



Parents reported changes

- 82% agreed that their relationship had improved.
- Parents learnt new ways to communicate.

"You don't realise even, you don't have to be fighting, but just shouting, how much shouting can affect the baby." (Dad – involvement with children's services)

"The course taught me how to talk to my partner....since the course we sit down now when he gets home for an hour and we talk about our days and how the baby has been and about any worries and listen to each other. It's a new way of discussing. Before he used to just come home and spend the evening on the laptop. It has improved our relationship." (Mum experiencing social isolation)

Social support

- 98% of parents made new friends in the group.
- Six months after the course
 61% of parents were still in touch with someone from the course.
- 98% of parents were more aware of wider support opportunities

"I'm always so very excited to come every Tuesday and see the other mums. It's like we're family, I'm so grateful to have met them, we've become so close, if I'm feeling anxious I call them and they calm me down".



Pre-post measures study

- With over 200 parents
- Using standardised measures of:
 - self esteem (Rosenberg)
 - anxiety and depression (HADS)
 - relationship with infant (PAI, MORS)
 - relationship with partner (RQI)
 - birth outcomes

Self esteem

- Increase in self-esteem was found for mothers across the programme.
- The programme was found to be most effective in improving self-esteem for the 33 parents who started Baby Steps with 'clinically' low selfesteem.



Anxiety and depression



Anxiety

- Improvement in anxiety was found for mothers across the programme.
- Anxiety improvements were most marked for those that started the group with anxiety symptoms in the 'borderline' or the 'high range'.

Depression

- Baby Steps protected against the development of postnatal depression
- For the small number of parents who started Baby Steps with clinical depression, significant improvements were found.

Relationship satisfaction

- Partner relationship satisfaction improved in pregnancy and remained stable across postnatal period.
- Baby Steps protected against relationship breakdown.
 - 18 parents came to the group with severe relationship difficulties – for these parents an increase in relationship satisfaction was found



Relationship with baby

Mothers and fathers both showed improvements in:

- attachment to their unborn baby from before the programme to just before the baby was born.
- in their relationship with their baby after they were born.



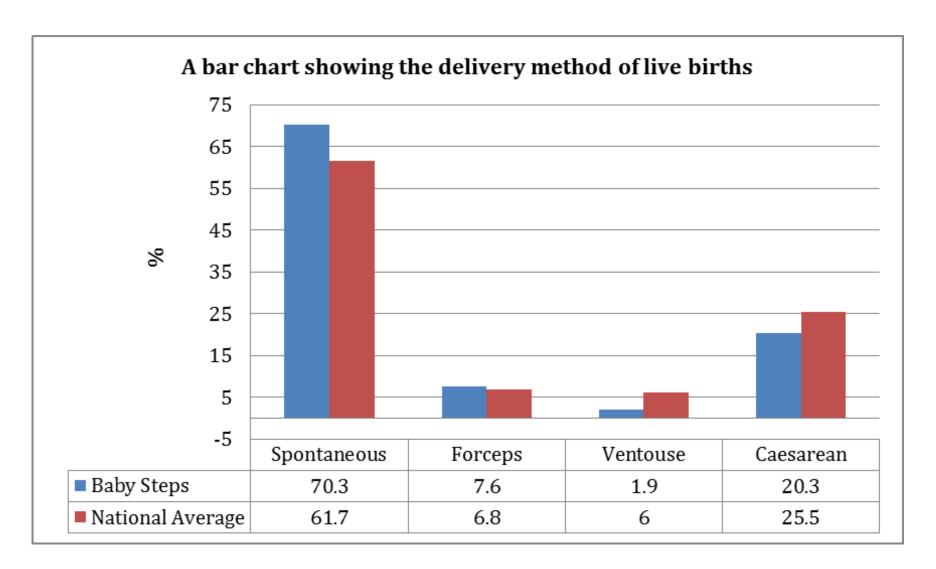
Birth outcomes

Compared to the general population Baby Steps mums had lower rates of:

- caesarean sections,
- prematurity
- low birth weight



Birth Outcomes





What's worked well?

Stronger links between services, e.g. health, children centres, midwifery

Safeguarding issues have been identified by Baby Steps practitioners and communicated back to the relevant agencies

Individuals have continued to attend the children centres once the programme finishes

Parents-to-be have reported that they feel more prepared for parenthood

Fathers reported they feel more involved with their baby

EVALUATION REPORTS



EVERY CHILDHOOD IS WORTH FIGHTING FOR



EVALUATION OF THE FIRST YEAR OF BABY STEPS

PARENTS PERSPECTIVES

Helen Brookes and Denise Coster C Evaluation department



BABY STEPS: EVIDENCE FROM A RELATIONSHIPS-BASED PERINATAL EDUCATION PROGRAMME

SUMMARY DOCUMENT Sally Hogg, Denise Coster and Helen Brookes

Conclusions

Findings are very encouraging

Suggest Baby Steps enables parents to be better equipped to provide sensitive, responsive care to their babies

You can find out more about Baby Steps on the NSPCC website

http://www.nspcc.org.uk/fighting-for-childhood/our-services/services-for-children-and-families/baby-steps/



Where are we now?



What does the Baby Steps national picture look like?

Early Adopters

- Wiltshire
- Swindon
- Leeds
- Warwickshire

Better Start

- Bradford
- Blackpool
- Lambeth

Universal Areas

- Jersey
- Blackpool
- Lambeth

Developments?....

Our Train the trainer model has been developed and is being rolled out supporting site sustainability

Any questions?

