

Preparation for Birth and Beyond



A resource pack for leaders of community groups and activities



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About this pack

Introduction

Antenatal education is an important and valued element of our maternity and child health services, especially (though not exclusively) for first-time mothers and fathers; but it needs to adapt to the many changes that are taking place in society and to new evidence on early childhood development.

Social, technological, scientific and policy developments mean that it is time to review antenatal education and to look at how we can best support new mothers and fathers. Some of the most important changes have been in our understanding of how children develop in the womb and in early life, and of how their early experiences affect their future health and well-being.

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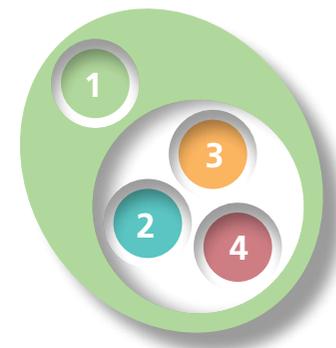
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Developing the resource pack

In recognition of this important time for children and families, the Department of Health brought together an expert group of parenting organisations, antenatal educationalists, researchers, practitioners and service leaders to review preparation for parenthood and to develop an approach that reflects today's context.

This resource pack is one of the products of their work. It draws on a review of the evidence on antenatal education carried out by the University of Warwick (Schrader McMillan et al. 2009), surveys of parents and professionals, and lessons from existing good practice. There are some promising evidence-based programmes that focus on specific aspects of antenatal education. However, further research is required to produce programmes that can be universally replicated.

Authorship and acknowledgements

This resource pack has benefited immensely from being co-written by specialists from the fields of midwifery, health visiting and clinical psychology, and by representatives of NCT, One Plus One and the Fatherhood Institute.

The writing team acknowledges additional specialist input from experts in a number of fields who have helped to create a resource for practitioners based on the best available evidence and advice.



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This pack is for the many different professionals and practitioners in the NHS, local authorities, and the voluntary and community sectors who lead and provide preparation for parenthood programmes and activities in their communities. For experienced antenatal group facilitators, some of the information in the pack may seem obvious; for other people it will be new.

Our aim is to help a wide range of practitioners to get involved in and run local groups, while at the same time recognising that there is an essential level of knowledge and skills required for the work that this pack can build on. The pack encourages people to think about antenatal education in its broadest sense and to develop their own solutions and ideas for running a successful group for local families, based on the knowledge, evidence and practice it contains. The overarching goal of this pack is to reduce inequalities by supporting disadvantaged parents to give their children the best start in life. It supports the Government's commitment to strengthening families in the foundation years.

The focus of the pack is on preparation for parenthood – called here 'Preparation for Birth and Beyond' – through community groups and activities, though this is only one source of support for expectant parents. Community Preparation for Birth and Beyond groups make an important contribution, alongside family and friends, web-based resources, social networking sites and the guidance that parents receive in the course of routine antenatal and postnatal care and through parent support groups.

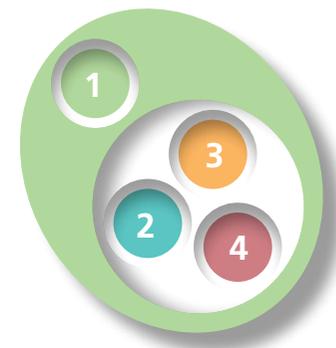
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The resource pack provides:

- a summary of the evidence relating to antenatal education, including the views of parents and professionals
- a brief overview of existing knowledge and theory
- a framework for defining and mapping support for parents and for designing programmes and leading groups and activities
- suggested content for group sessions and activities across six themes, each with its own menu of topics
- ideas on how the topics might be used to plan and deliver successful community programmes and activities.

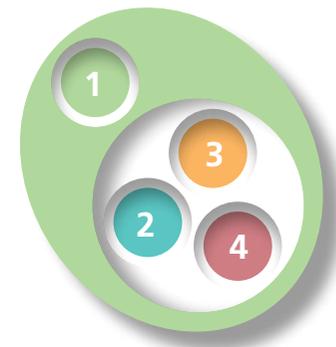
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- Preparation for Birth and Beyond covers the period of pregnancy, birth and the early weeks of infancy.
- Preparing for parenthood may also be called 'antenatal education' or 'parent-craft' (delivered in groups or classes).
- 'Baby' is used to refer both to singletons and to the babies of a multiple birth.
- The terms 'parent' and 'parents' cover both expectant and new parents, and may mean either biological or non-biological parents.

The resource pack is intended for anyone who has a role in planning, leading or facilitating a group that supports new and expectant parents to prepare for pregnancy, birth and parenthood, whether they are health professionals or practitioners in children's centres or parenting organisations.

'Preparation for Birth and Beyond' is the working title we have used, but local groups will have their own names. There is no intention of developing a common brand for this work; rather, we seek to support the wide range of locally run groups – each with its own name and 'branding'.

**Many thanks to those people
from the Expert Reference Group
who contributed to this pack.**

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What you need to know

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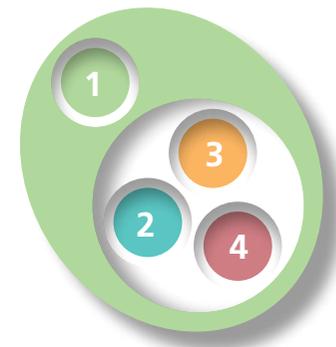
In planning Preparation for Birth and Beyond groups and activities, it helps to know the evidence for what works for whom and in what circumstances, and to understand how preparation for parenthood groups fit into the wider context of how men and women make the transition to being parents. This section has two parts:

- > **Part 1: The evidence for antenatal education** provides a summary of the evidence from academic research, the views of parents and professionals, and the lessons gleaned from practice and from experts.
- > **Part 2: The Preparation for Birth and Beyond approach** describes the framework and the themes and topics that structure the groups and their activities. It also includes some notes on essential knowledge, concepts and theories.

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The evidence for antenatal education

The Preparation for Birth and Beyond approach



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The evidence for antenatal education

Key points

- Pregnancy and early childhood are the times when the foundations for future life are laid down.
- A baby's brain develops in response to his or her early relationships, care and experiences.
- There is some evidence that antenatal education improves outcomes and mothers' experiences of birth and parenthood.
- Expectant and new mothers and fathers value antenatal education but do not want information 'dumped' on them.
- Groups that encourage participation and active learning are more effective and popular.
- There is no one-size-fits-all approach – there are differences between and among mothers and fathers, ethnic, faith and other groups that need to be understood and accommodated.
- Health professionals often say they want more training and support to do this work.

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Why this time of life matters for children

A child's experience and environment – both in the womb and in early life – lay the foundation for life. Mothers and fathers are the most important influences on a child's well-being and development. Loving, caring and secure parenting, as well as good nutrition and protection from toxic substances such as tobacco, are essential for a child's growth, well-being and development. These factors have a direct and lasting impact on a child's physical development (particularly neurological development) and on his or her future health, learning and behaviour (see [Part 2](#)).

In recent years, advances in neuroscience have increased our understanding of the links between early brain development and later life outcomes, and have shown the importance of providing very young children with consistent, positive and loving care. From pregnancy onwards, the relationship between a baby and his or her primary caregiver has a lasting impact on that child's future, including on his or her health as an adult.

Effective prevention and early intervention can improve children's immediate and future well-being and outcomes, as well as their health, relationships, emotional development, educational achievement and life chances. They can also reduce the personal, social and economic burden of illness, mental ill-health and social disadvantage.

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Why this time of life matters for parents

Pregnancy, birth and the weeks and months beyond are a key time of change and development for parents, as well as for their baby. Each mother and father begins to learn about the new baby and gets to know his or her needs, as well as how to love and care for their child.

Above all, parents want the best for their baby and are instinctively motivated to protect their child, especially in pregnancy. As mothers and fathers adjust to the changes in family life and relationships, and make changes to their lifestyle and behaviours, they gain in confidence and self-belief.

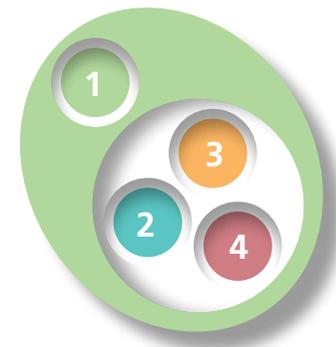
This is an extraordinary and life-defining time. It is also a demanding time, and while most parents do well, some may struggle to cope with the changes, to adjust to their new roles and to provide their child with the care he or she needs.

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Many parents want help with the transition to parenthood, and, though there are variations between mothers and fathers and between different groups (including parents in some minority ethnic communities – see below), there are common messages:

- The arrival of a first baby is a unique time that differs from the birth of subsequent children.
- New mothers and fathers are information hungry, but they want to feel able to access information when needed, rather than having it ‘dumped’ on them.
- Parents want information that is relevant to each stage of the journey, and to have the opportunity to reflect on what it means for them and their lives.
- Mothers and fathers want to receive consistent messages and information.
- Professionals in universal services have an important role to play in helping parents to learn and prepare.
- Mothers can feel pressurised to be ‘natural’ parents, loving their infants on sight and knowing ‘what to do’.
- Fathers have important roles to play – as fathers, providers, supporters and carers; the involvement they want in pregnancy may vary.
- In some cultural groups, it is not the norm for men to be closely involved in pregnancy, but there is considerable variation – for instance, by age, time in the UK, education and degree of cultural integration.
- Word-of-mouth recommendation strongly informs what parents choose.
- NHS branding is recognised and respected.



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What about fathers?

Expectant and new mothers are affected by the attitudes and behaviour of their baby's father. His support is important for the mental health and well-being of the mother, the baby's health and development and the couple relationship. In becoming a parent, a father also goes through an important life change that is separate from the mother's experience. He needs information and support that specifically address his needs and that help him to adjust to his new role. Many fathers feel that antenatal education does not help them to adjust, and they are sometimes made to feel excluded.

Fathers want and need Preparation for Birth and Beyond groups and activities that:

- are responsive to their needs, interests and concerns
- facilitate their active participation in discussion and learning
- address them as individuals who are becoming fathers, as well as 'support people'
- include learning about early parenting
- include opportunities to reflect on gender roles
- include opportunities to reflect on and understand a baby's impact on the couple relationship
- provide opportunities to meet new male friends and to hear from experienced fathers
- offer one or two 'men-only' sessions (but not a whole separate antenatal course).

Some fathers want to be very involved, while others may see having a baby as 'women's business'.

'Guys go through pregnancy, too, but no one asks us how we feel about the situation.'

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What about specific groups of parents?

Different groups of parents may have particular concerns to be addressed – for instance multiple-birth parents, young parents, older parents, mums and dads of different ethnicities and same-sex parents. It is important to recognise cultural and other differences without stereotyping parents, since there are considerable differences within groups:

- Many younger mothers like to learn with their peers and they may feel inhibited if a majority of the other women attending are older.
- Parents who have a disability or who have been told that their child will be born with a disability may need specialised support.
- Parents from black and minority ethnic communities value culturally and linguistically appropriate courses. The potential inconsistencies between cultural norms and the standard messages communicated in antenatal education need to be recognised and understood by practitioners. Some parents from minority ethnic communities may prefer courses based in their local community.
- Women in prison want the same things as other new parents, but are often profoundly isolated; they want to receive mutual support from other pregnant women and to be treated with respect. They value participative learning opportunities where they can learn about childbirth and early childcare.

'My friend went to a group where she felt she didn't fit in, so she didn't go back.'

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What professionals say about antenatal education

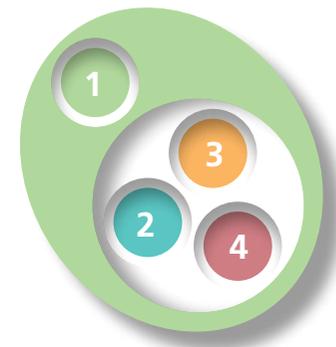
- There is often a narrow focus on the process of giving birth, and many NHS services struggle to offer broad-based curricula.
- Enthusiasm and commitment on the part of practitioners is key to better provision.
- Some healthcare practitioners can feel underprepared to help expectant mothers and fathers focus on aspects of becoming parents, including the infant's social and emotional development.
- Practitioners may lack confidence and skills in using participative and interactive learning methods.
- Local champions can really help the implementation of well-developed programmes.

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What research says about antenatal education [1 of 2]

The University of Warwick (Schrader McMillan et al. 2009) undertook a review of the research that has so far been carried out into the effectiveness of antenatal education. While this remains an under-researched area, and while the evidence on what works is limited, the review highlighted the following:

- Antenatal education has a role to play in improving knowledge of and preparation for parenthood.
- Participation in antenatal preparation courses is associated with higher satisfaction with the birth experience.
- Antenatal preparation courses can lead mothers and fathers to adopt a range of healthy behaviours that affect pregnancy, birth and early parenthood (as well as their own health), such as eating more healthily, cutting down or stopping smoking and taking more exercise.
- Group-based antenatal programmes that include topics on couple relationships, co-parenting, gender issues and father involvement, parenting skills, bonding and attachment, and problem-solving skills are associated with improved maternal well-being and with an increase in the confidence and satisfaction of both parents with the couple and the mother–infant/ father–infant relationships.
- Group-based programmes have high levels of consumer satisfaction, partly because they offer parents the opportunity to develop supportive social networks with their peers.
- As part of antenatal preparation for parenthood courses, group-based social support can be effective in supporting women with low-level symptoms of depression and anxiety.

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What research says about antenatal education [2 of 2]

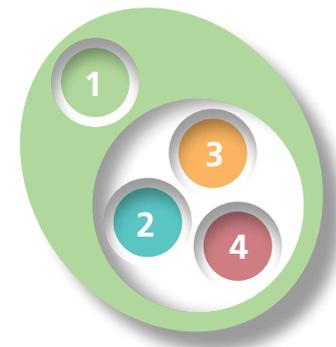
- There is also some good evidence that focused and participative antenatal education can help to manage and reduce maternal anxiety and depression during pregnancy and early childhood, leading to improved coping, greater partner support and a better birth experience.
- Interactive antenatal group work on breastfeeding – covering such issues as positioning, attachment and the prevention of nipple trauma, and involving breastfeeding peer supporters as volunteers – is effective in supporting the initiation and continuation of breastfeeding.

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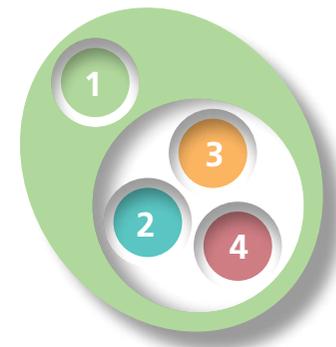
- Group work is effective (and can also be cost effective).
- Groups and activities should be led by knowledgeable, skilful and committed practitioners.
- Groups need to be responsive to both parents and should involve fathers appropriately.
- There needs to be an emphasis on participative, rather than didactic, learning methods that cover:
 - practical skills and knowledge for early childcare and parenting
 - the transition to parenthood, preparation for family life, co-parenting, changing roles and expectations
 - the emotional dimensions of parenthood, changing parent–parent (couple) relationships, mother–infant and father–infant relationships
 - parent bonding, care and nurture
 - understanding a baby’s cues
 - encouraging social support – making friends in the group.
- Parents should be helped to turn knowledge into plans and behaviour change.
- The activities should continue after birth.
- Information and skills should be provided that are sensitive to different groups and cultures.
- For high-risk groups, more intensive, multifaceted approaches are needed that include:
 - home visiting (such as the Family Nurse Partnership programme)
 - group support
 - specialist support (e.g. for drug misuse, housing, etc).

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Barlow J, C Coe, M Redshaw and A Underdown (2009) *Birth and Beyond: Stakeholder perceptions of current antenatal education provision in England*, University of Warwick/University of Oxford, available at: www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_109831.pdf

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The Preparation for Birth and Beyond approach

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Part 1 summarised the evidence that has informed this pack. The evidence shows that people value information and support during the transition to parenthood. Their needs are likely to vary according to factors such as role/gender, age and individual life experiences (especially parenting and culture). Practitioners need to have an understanding of early childhood development, adult learning, behaviour change and social support, so that they can cater for this range of needs in effective ways that provide value for money.

Part 2 now looks at the theories and concepts that underpin the methods and content of Preparation for Birth and Beyond groups and activities, so that evidence is translated into practice. This is important if commissioners, managers, practitioners and parents are to be confident about the quality and outcomes of what is being offered.

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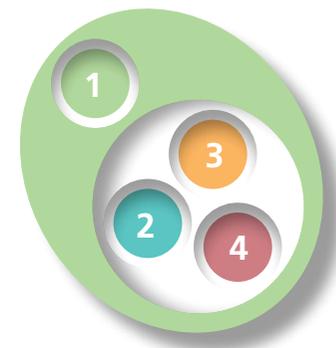
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- Practitioners who plan and lead groups and activities need to be familiar with a core set of important theories and concepts, and be guided by a clear set of principles.
- New parents are most likely to turn to their family and friends for information and support.
- Community groups or antenatal courses help expectant parents to build social support networks and to learn from each other, as well as from the group leader.
- Most adults acquire new skills and knowledge through practical and active learning, rather than by passively listening to a teacher.
- The content of Preparation for Birth and Beyond covers six themes, each with a range of topics.

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- New mothers and fathers will be able to give their baby the best start in life if they understand and prepare for labour, birth, the transition to parenthood, infant development and early parenthood.
- Practitioners are at their most effective when they respect and draw on the knowledge, strengths and expertise of mothers and fathers.
- Rather than provide an opportunity for practitioners to give out information, Preparation for Birth and Beyond courses and activities should help and inspire parents to learn, acquire skills and make changes.
- There needs to be a shift in emphasis from 'teaching' to adult-learning and group methods, in which new mothers and fathers are active participants rather than passive recipients.
- Preparation for birth and early parenthood should reflect the needs of mothers, fathers and babies, as well as priorities for public health outcomes.

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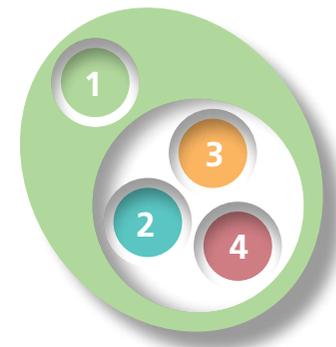
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The theories and concepts [1 of 7]

The theories and concepts summarised below are not exhaustive, and each practitioner will bring along his or her own expertise and body of knowledge. Nor are these theories and concepts static: they continue to change and develop as new insights emerge into pregnancy and birth, early childhood development, human behaviour and family relationships.

Development of the human brain

- The brain grows steadily during pregnancy and is about a quarter developed at birth.
- Amazing growth takes place in infancy – it takes just seven minutes for the synapses of each neuron to form. By three years of age there are trillions of connections – twice as many as an adult has. But only those that are used regularly will remain.
- A young child's emotional, social and intellectual development is very rapid. Experiences shape the brain's architecture, as the underused neural pathways are pruned away.
- The root of many adult conditions can be traced to early childhood experiences and affect the future programming of physiological functions.
- The development of neural pathways is influenced by genes, blood supply, hormone levels, and the physical and socio-emotional environments.

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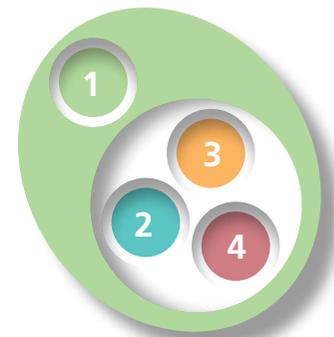
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Fetal and early infant development

- This concerns the speed and pattern of change in physical, motor, cognitive and intellectual, social, emotional and communication functioning.
- The ways in which humans grow and change in the womb and in the days, weeks and months after they are born are influenced by genetic and environmental factors.
- Genes can be 'turned off' and 'turned on', so that an individual's initial genotype may change in function over time, leading to further developmental change.
- Environmental factors affecting development may include both diet and disease exposure, as well as social, emotional and cognitive experiences.
- There are critical periods for the various aspects of development, when events can lead to enhanced (or indeed reduced) functioning. These critical or sensitive periods peak at between 12 and 36 months.



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Attachment

- Attachment theory describes the dynamics of long-term relationships between humans, especially in families.
- It assumes that infants' social and emotional development is strongly influenced by their attachment to their main caregiver.
- The pattern of these attachment relationships influences development and subsequent relationships in childhood and adult life.
- Mothers, fathers and other carers develop affectional bonds with babies during pregnancy, from birth and in the subsequent weeks – known as 'bonding'.
- Bonding helps parents and others to offer their baby the love, care and nurture they need for protection, development and survival.
- From the age of about six months to two years, infants develop attachment relationships with familiar carers, and these help them feel safe, secure and protected.



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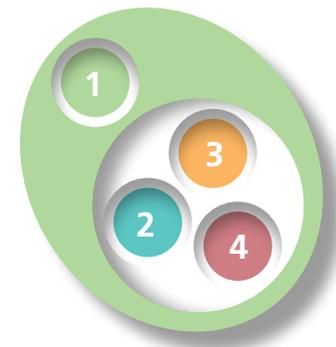
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Self-efficacy

- Self-efficacy is a person's belief that he or she can actually achieve a desired goal; this is crucial to whether an attempt is made.
- Self-efficacy influences how easily a person is able to change and adapt his or her behaviour.
- Success with small steps builds self-efficacy and creates a context for bigger changes.
- The belief that 'I' have the personal capabilities to succeed in specific situations can play a major role in how a father or mother approaches the goals, tasks and challenges of parenting.
- The self-efficacy of a mother and a father can affect the extent to which they feel able to take on and succeed in the tasks of early parenting.
- Self-efficacy is affected by people's previous experience, the attitudes of others, learning opportunities and the challenges they face.
- Practitioners can help build self-efficacy by focusing on strengths and on what is working, by helping parents to look for solutions, by celebrating small achievements, by creating a safe, supportive learning environment and by respecting parents as experts in their own lives.



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The theories and concepts [5 of 7]

Behaviour change

- Nobody finds change easy. Behaviour change theories and approaches look at reasons that may influence the way in which people alter their behaviour, as well as why some people find it difficult to change.
- People are more likely to make changes when they feel that it is possible for them to do so and when they feel committed to the change (see '[Self-efficacy](#)').
- Change is also more likely when the person finds the changes rewarding and better for them.
- Change also often involves a sense of loss of the comfort of old patterns of behaviour, or the learned responses to particular situations.
- People's ability to change may depend on their readiness and preparedness to act. For example, mothers who are thinking about breastfeeding may be more likely to hold their baby skin-to-skin, or to have a try to see what breastfeeding feels like. Being open to trying new things and readiness for change is not a fixed state and can be influenced by a number of factors.
- Non-judgemental, non-confrontational and non-adversarial approaches (such as motivational interviewing)* may be more effective than more prescriptive and confrontational approaches. Such non-threatening approaches encourage adults to think for themselves about their current situation, the changes they could make and the risks and advantages involved.

* Motivational interviewing is a collaborative, person-centred form of guidance to elicit and strengthen motivation for change (see Rollnick et al. 2008).

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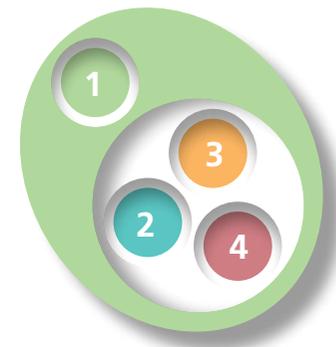
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Social support and social capital

- Social support refers to the function and quality of the social relationships of a child, an adult or a family. It includes both the support that is available if people need it and the support they actually receive when they are in difficulties.
- Social support includes, for example, the availability of practical assistance, tangible resources such as money, knowledge, experience and information, and emotional help.
- Children's lives are enhanced through good social support – whether they themselves receive this or through the support their parents and family receive.
- Social support can protect against stress and can directly inhibit the development of psychological and physical difficulties.
- There can be costs related to social support, when friends or family in need of it deplete the support-giver's resources.
- Social capital refers to the links and resources that exist for individuals and families within their local communities and other social networks, such as online communities.
- Parents who belong to a network or community that is rich in support, social trust and information have access to greater resources and are also better able to contribute to the pool of resources.



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Adult learning

- This is concerned with the art and science of helping adults learn, rather than with the skills of teaching.
- Adult-learning approaches make use of the life experiences that adults possess anyway – a rich source of prior knowledge, exploration and learning.
- Previous life experience influences what parents may want and need to learn, as well as how they do this most effectively.
- Most adults like to know the reasons behind what they are learning, rather than just to accept what is being taught.
- Adults often learn most effectively through ‘learning by doing’ rather than passive listening.
- Most adults are problem solvers and learn best when the topics are of immediate relevance and when they are not simply provided with the answers and opinions of others.
- Learning may move through a cycle, in which parents first build on their practical, concrete experience, then engage in reflection and discussion, before finally formulating underlying ideas and testing them in new situations.
- Adults may adapt and change their own behaviour as a result of seeing how others act and behave, especially people they admire.



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This resource pack focuses on planning Preparation for Birth and Beyond community groups and activities, while taking account of the wider dimensions of becoming a parent today. These groups and activities need to recognise and support the myriad ways in which mothers and fathers learn, prepare and are supported during this time and, in doing so, to reflect the concerns of the wider family and specific communities, as well as service outcomes and priorities.

There are four levels to this learning and support:

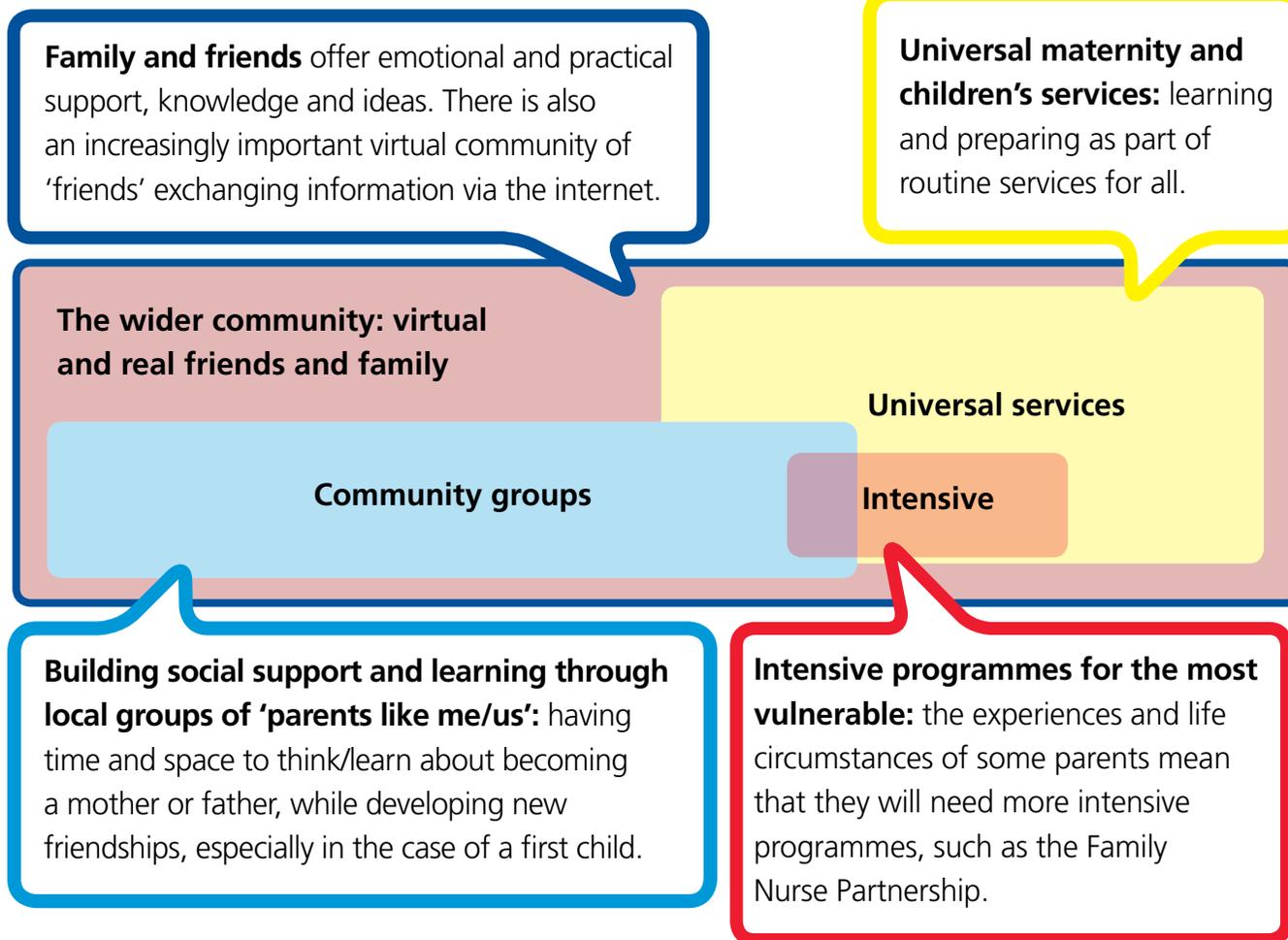
1. New parents are most likely to turn to their family and friends for information and support, and to supplement this with magazines, books, web-based information and interaction with other parents through online social networks (see figure on next page). Mothers are more likely to do all these things, while fathers tend to rely on their partner for information and support – possibly because the available sources of information/support address women, and can make light of men's experiences.
2. Community groups or antenatal courses help expectant parents to build social support networks and to learn from each other, as well as from the group leader or expert. These may be based in a Sure Start Children's Centre and be provided by parenting organisations and charities, the NHS or other voluntary groups.
3. Universal and routine maternity and child health services provide a rich opportunity to learn from a trusted professional, such as the midwife, health visitor or GP.
4. For those families that are most vulnerable, there are specialist, intensive programmes, such as the Family Nurse Partnership programme, which is available in some areas.



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The Preparation for Birth and Beyond approach Becoming a parent today [2 of 3]

This figure illustrates the wider context – the four levels mentioned on the previous page – of Preparation for Birth and Beyond.



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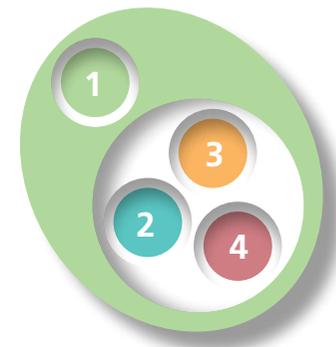
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Online resources and sites

- There is a wide range of social networks and forums that allow parent-to-parent support.
- NHS sites make good use of case studies, blogs and video.
- Discussions on forums often focus on the provision of support in making decisions and in changing behaviour, and on sharing experiences and learning.
- Blogs, journals and real-life stories can help parents to reflect on and share their experiences.
- Mobile phone applications allow parents-to-be to receive information related to their stage of pregnancy.
- Although parents from minority groups are likely to be searching for topics similar to those searched by other parents, there is very limited content specifically designed for them.
- Content specifically for fathers is usually to be found in dedicated sections of more general parenting sites.



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The Preparation for Birth and Beyond approach

How adults learn

Models of adult learning, self-efficacy and behaviour change emphasise that most adults tend to acquire new skills and knowledge through practical and active learning, and that their learning will be affected by their existing knowledge and experience, their commitment and motivation, and by the attitudes of friends, family and people who are important to them.

Few mothers and fathers prefer to be passive learners, merely receiving information through talks or printed material. Active and participative learning methods give adults the chance to share and to reflect on what they know, think and feel, building on the skills and knowledge that they already have.

The role of a Preparation for Birth and Beyond group leader is to facilitate and help adults to learn, rather than to shoulder the responsibility of teaching them. This is most easily achieved by using a variety of activities for small and large groups, where parents can think, share and learn, and where there are opportunities for practical 'learning by doing', as well as by asking parents to read about, prepare and try out skills in their own time.

There is some evidence that younger parents may feel more comfortable learning alongside people of their own age. Fathers may prefer at least some time in a group with fathers who already have some experience of parenthood themselves. [Section 4](#) offers more detailed ideas, advice and examples of how to develop groups and activities based on these principles.

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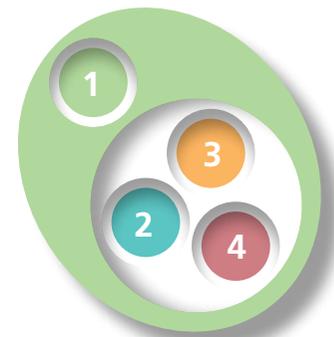
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Groups and activities

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This pack provides six themes that form the content of Preparation for Birth and Beyond groups and activities. These themes have been developed using advice from experts and feedback from different groups of mothers and fathers at various stages of pregnancy and parenthood. They also incorporate learning from the Family Nurse Partnership programme. The themes cover the core aspects of pregnancy, birth, early child development and parenthood, and each contains a menu of topics. These themes are covered in detail in [Section 4](#), but each is briefly outlined here:

- **Our developing baby** is concerned with the physical, cognitive, social and emotional development of babies during pregnancy and in the first days and weeks after birth, as well as with the factors affecting this development.
- **Changes for me and us** covers topics concerned with the practical and emotional changes that mothers and fathers face as individual parents, as a couple and as a family.
- **Giving birth and meeting our baby** focuses on the psychological, social and physical aspects of labour and birth, as well as on the experiences of the first few hours after birth.
- **Caring for our baby** is concerned with the emotional aspects, practical skills and tasks facing mothers and fathers in nurturing, caring for and getting to know their new baby.
- **Our health and well-being** covers personal health choices – the way that the personal resilience, health and well-being of mothers and fathers affect the development of their baby, their adaptation to parenthood and their ability to cope with the stresses and strains.
- **People who are there for us** concentrates on the way in which parents draw on their existing friends and family over the course of pregnancy to early parenthood, and on how they create relationships with other new mothers and fathers. It deals with how parents can best make use of the services and resources available to them in their local area and further afield.



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Useful resources

Bandura A (1997) *Self-efficacy: The exercise of control*, New York: WH Freeman and Co.

Blair, M, S Stewart-Brown, T Waterston and R Crowther (2010) *Child Public Health* (2nd edition), Oxford: Oxford University Press.

Davis H and C Day (2010) *Working Partnership with Parents* (2nd edition), London: Pearson Assessment.

Rollnick S, W Miller and C Butler (2008) *Motivational Interviewing in Health Care*, New York: Guilford Press.

Sunderland M (2006) *The Science of Parenting*, London: Dorling Kindersley.

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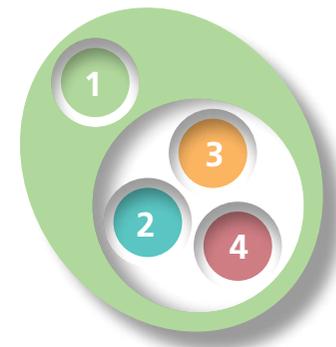
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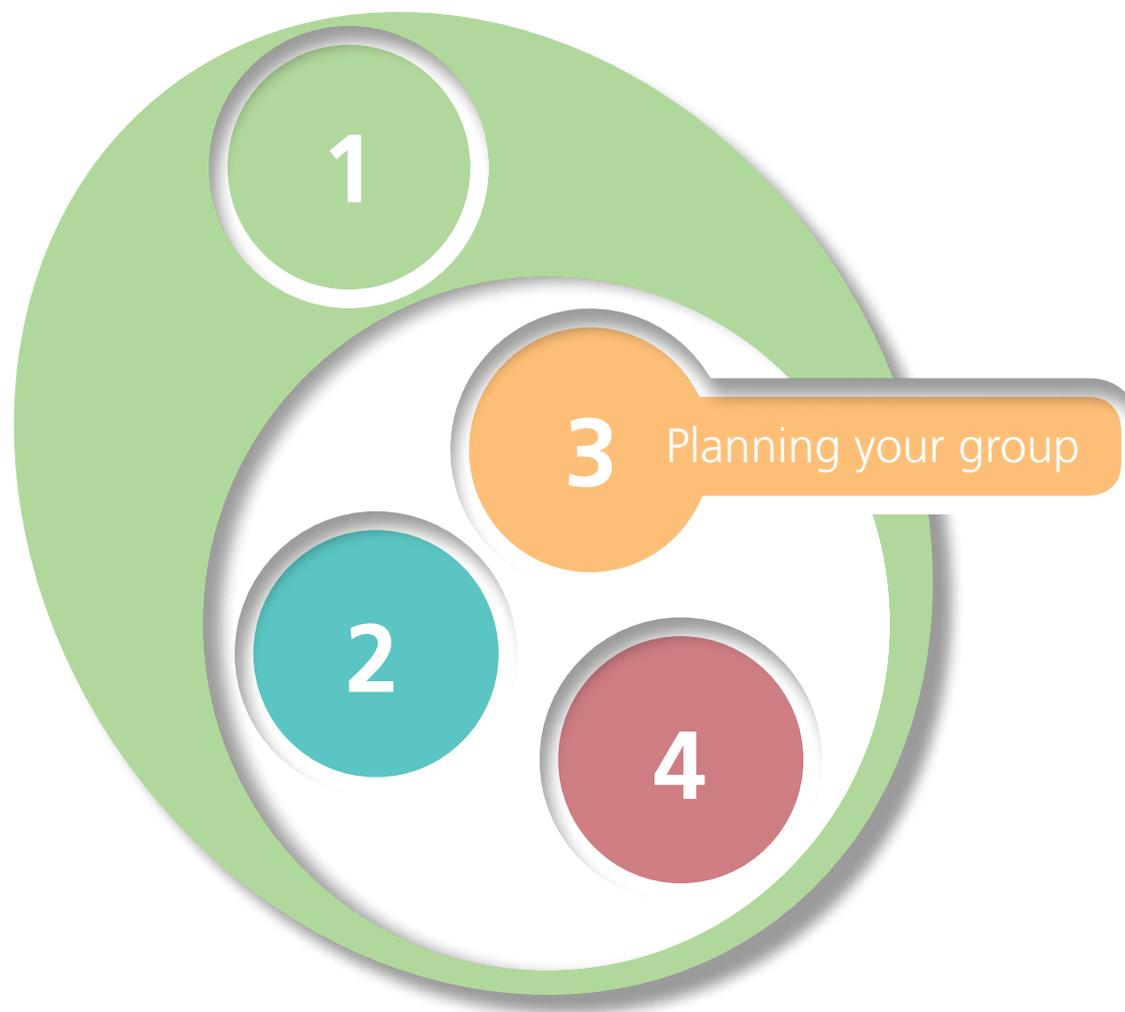
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Preparation for Birth and Beyond



A resource pack for leaders of community groups and activities



3

Planning your group

Introduction

Section 3 covers the planning of community groups and activities and contains three parts:

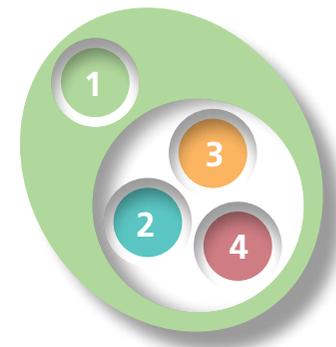
- > **Part 1: The local context for your group** looks at how you can review local needs and existing provision, plan Preparation for Birth and Beyond groups across your area, clarify what you are trying to achieve and for whom, and actively engage mothers and fathers. Attracting resources and support from others will depend on demonstrating the extent to which your group addresses local needs, fits in with existing provision and meets expected outcomes.
- > **Part 2: Getting organised** takes you into the more detailed planning for your group. Well thought-through plans will make the organisation of your programme easier, maximising your chances of success and helping you to feel confident and positive in your leadership role.
- > **Part 3: Skilful facilitation** concentrates on what it takes to lead and facilitate groups skilfully and confidently, so that fathers and mothers enjoy the experience, increase their knowledge and their own confidence, and have opportunities to develop new supportive networks with other parents in their community.

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The local context for your group

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Skilful facilitation



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The local context for your group

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- There are many sources of information to help you find out what local parents and babies need from Preparation for Birth and Beyond activities.
- Finding out what local parents think of what is on offer and inviting their help in planning is likely to enhance the value of your programme.
- Being clear about how your plans fit in with strategic outcomes and contribute to public health goals can help in identifying support and resources for this work.

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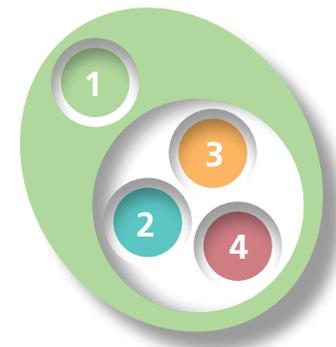
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The local context for your group

What is needed locally? [1 of 4]

The need for learning and support during the transition to parenthood is universal, but is especially important for first-time mothers and fathers. The evidence and the demand from parents summarised in [Section 2](#) provide a strong case for universal provision.

However, as well as assessing need for all expectant parents, you have to pay special attention to those whose requirements are greater or who are from the most disadvantaged communities. Some parents-to-be require more intensive help and support to overcome difficult life experiences or adverse personal circumstances and to give their own children a good start in life. Community groups can be a beneficial and cost-effective way of supporting these mothers and fathers, and the return on investment – in terms of reducing inequalities and improving outcomes for these mothers, fathers and their babies – can be substantial.

It is the responsibility of commissioners to decide where to allocate resources appropriately. You can help them by having the right information, and a good understanding of the key factors can assist you in gaining their support – and possibly additional resources, too.

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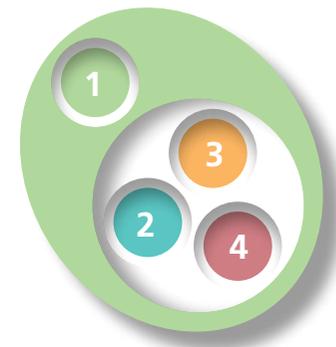
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The local context for your group

What is needed locally? [2 of 4]

What may be useful

The following documents and resources may be useful:

- the area's public health priorities, e.g. joint strategic needs assessments, reports of the local director of public health, primary care trust annual reports, etc.
- local strategic plans and targets, e.g. strategic children's plans
- national policy, e.g. *Healthy Lives, Healthy People* or *Supporting Families in the Foundation Years*
- evidence of what is important and what works (see [Section 2](#))
- the issues that local people have said are important to them – many local organisations (e.g. maternity services, maternity service liaison committees, primary care trusts, local authorities) will have researched the views of local parents, and this can help you understand the needs and views of these parents
- PREview – a pack of information and resources for commissioners and professionals on the factors in pregnancy and early life that are associated with children's outcomes at age five years. These may help you with thinking about how to target your work.

See www.chimat.org.uk/preview/evidence

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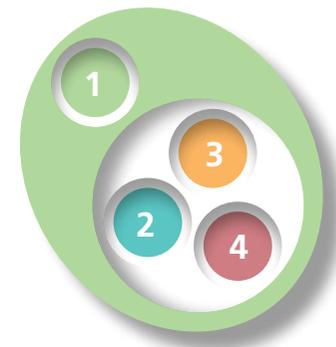
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What is needed locally? [3 of 4]

Your community

What are the relevant issues for your community that you need to explore? What information sources will you tap into to help you work out the priorities for your Preparation for Birth and Beyond courses? Filling in the boxes in the following table might help you get started.

What seems important? For example:	Where could you find out more?	What does this mean for your group?
<i>High number of births to teenage parents</i>	<i>Public health reports and data. Look at evaluations to see whether young parents have participated in groups already up and running</i>	<i>Specific group just for young mums and dads?</i>
<i>Communities with identified cultural and faith diversity</i>		<i>Are there specific minority communities that need tailored groups or sessions?</i>
<i>Children seem to have more behaviour issues</i>	<i>Referrals for specialist services from this community. Ask local services and professionals</i>	
<i>Employment patterns of mothers and fathers</i>		
<i>High rates of postnatal depression</i>		

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What seems important? For example:	Where could you find out more?	What does this mean for your group?
<i>High rates of smoking in pregnancy</i>		
<i>Low birth weight babies</i>		

ChiMat (the Child and Maternal Health Observatory) has online resources that can assist you in finding out about your area. See: www.chimat.org.uk

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The local context for your group

What is happening already? [1 of 3]

Depending on your role, you may already know (or want to find out) what Preparation for Birth and Beyond groups and activities are already being provided for new mothers and fathers in your area. Universal providers (such as maternity services and children's centres, nationally recognised organisations like the NCT, and local community organisations) may already play a valuable role in this work in your area.

New parents are particularly motivated to seek out help and support at this time. As a consequence, the demand for antenatal education can outstrip supply.

What is going on locally

Questions you might consider include:

- What groups are already available in your area?
- Who offers these and to whom?
- Who funds them?
- Who uses them?
- What resources are routinely available for parents to use at home to plan and prepare?
- How easily available and parent friendly are they?
- What are the strengths and gaps in what you and others currently offer? Is there any duplication?
- How do the groups and resources you offer fit in with the other services available to new parents?
- What feedback have you received from local parents? What do they like and what do they want changed?
- What outcomes are being achieved? What is the quality and impact?

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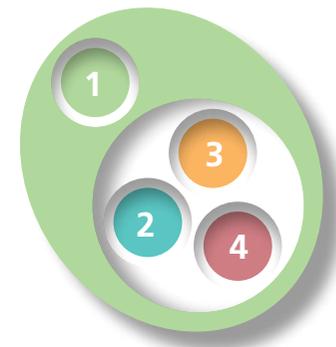
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What is happening already? [2 of 3]

What mothers and fathers think

Around the country, there is wide variation in the type of preparation for birth and parenthood courses and activities, the organisations that provide them and the support and resources available to practitioners. But what is right for your community?

How could you find out what mothers and fathers think about what is on offer for parents-to-be and new parents in your community?

'My partner wanted to come, but he couldn't get time off work.'

'I'm expecting twins and there's so much I want to find out, but the group was so large, it was hard to ask questions.'

'It was good having it at the children's centre. I was amazed at how much they can offer, and it's easy to get to. And they really welcomed dads, too.'

'I felt bombarded with stuff and there was no time to get to know other mums.'

'She really seemed to understand about our customs and beliefs.'

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What is happening already? [3 of 3]

Seeking out parents' views

Finding out what local parents think and what they want could be a useful stepping stone to involving them in planning your Preparation for Birth and Beyond activities, so that these reflect what the parents in your community want.

'I learned a lot from going along to a family fun day at the Asian Women's Group and asking the mums and dads about antenatal groups and support in pregnancy.'

'We asked parents at our baby clinic what they thought about parent-craft – they had loads to say and a couple offered to help us with plans for a local group.'

'We made a determined effort to speak to parents who never showed up.'

'Our children's centre got the dads to talk about what becoming a dad was like for them. We didn't realise they felt so sidelined.'

In what other ways could you seek out and use the views and ideas of parents – especially those from disadvantaged backgrounds?

What are some of the benefits and drawbacks of doing this?

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What do you want to achieve? [1 of 4]

Priorities for the health and well-being of mothers, fathers and children may already be set out in local strategic plans, alongside the outcomes to be achieved. In order to help with thinking and to demonstrate how this work will contribute to local strategic plans and priorities, the following labels of 'outcomes', 'objectives' and 'outputs' are suggested.

Outcomes: These are the intended impacts of your Preparation for Birth and Beyond groups and activities on babies, parents, families and communities. Outcomes will usually relate to the issues covered in the six themes described in [Section 4](#) (and briefly above) and may be measured in terms of impact, quality and contribution to greater social equity. It is helpful to have a range of outcomes that are short, medium and longer term. Being clear about your desired outcomes will help you formulate SMART objectives and outputs ([on the next page](#)). Funding is more likely to follow when your approach is evidence based and outcomes focused.

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Objectives: These are the milestones that mark your progress towards realising your outcomes; they will be helpful when you think through the detailed plans for your course, session or activity.

Being SMART!

This well-known mnemonic is helpful in framing objectives meaningfully.

Specific, **M**easurable, **A**chievable, **R**ealistic and **T**imely:

- **Specific:** You are clear about who will benefit and how.
- **Measurable:** The impact of the outcome can be measured and attributed to the intervention.
- **Achievable:** You can deliver it.
- **Realistic:** The resources and know-how are available to make it happen.
- **Timely:** The work can be carried out in a given time.

Framing objectives that are SMART is harder when benefits are more diffuse and relate to a variety of factors; but it is a useful exercise, especially when consulting with other people.

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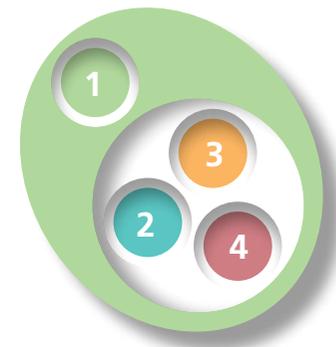
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Outputs: These are the measurable processes that will demonstrate the extent to which you are delivering your objectives and thus contributing to the overall outcomes. Outputs might be the number of sessions held, the number of mothers and fathers (and people from your intended target groups) who attend your groups, their satisfaction with the course, or perhaps coverage of the curriculum. Gathering information on mothers' and fathers' participation, experiences and responses by (for instance) age, gender and ethnicity can help you identify who is benefiting – and where you need to adjust your practice.

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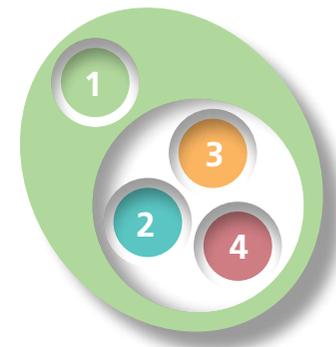
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SMART objectives and measurable outputs

Outcome

Mothers and fathers are able to give their baby the best start in life

Objective

Mothers and fathers know how to seek support from local services if they need to

Output

The number of mothers who want to breastfeed and who know how to contact a local peer support group

What SMART objectives and measurable outputs would you suggest?

Outcome

Mothers and fathers have a positive birth experience

Objective

Output

What will be the outcomes, objectives and outputs for your groups and activities?



3

Getting organised

Key points

- Spending time on planning the best way to engage the parents you are targeting contributes to the uptake and success of your group.
- It is important to address the specific needs of fathers (or partners), while at the same time balancing those against the needs of unaccompanied mothers.
- Linking parents into sources of information and support beyond the group increases its value, especially when resources are tight.

Part 2 takes you to the next stage of planning your Preparation for Birth and Beyond group – focusing on organising a group learning session.

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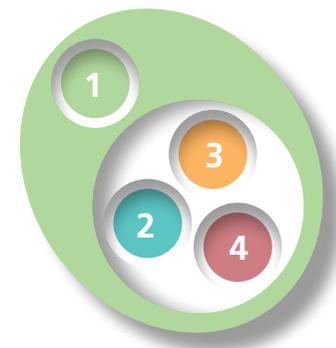
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Engaging expectant parents

Overall course structure

Planning individual sessions

Interactive activities and take-home resources



3

Getting organised

Engaging expectant parents [1 of 6]

Starting with an invitation

It can be a real challenge to run groups that all parents want to use, and especially those who may be reluctant to engage with services. This can be made easier if mothers and fathers sense a genuine warmth, consideration of their needs and respect for what they want and already know. Your invitation will give them a feeling for whether the group is 'for them'.

There are three steps involved in issuing an invitation:

- > Thinking through the context
- > Thinking through how to issue the invitation
- > Designing the invitation

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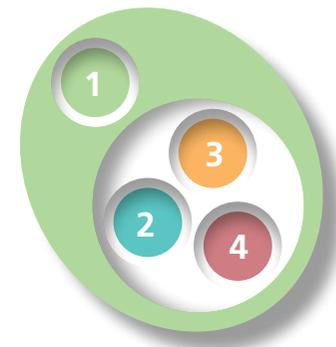
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Engaging expectant parents

Overall course structure

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Interactive activities and take-home resources



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Getting organised

Engaging expectant parents [2 of 6]

Thinking through the context

- Who is it that you most want to attend and what will assist in this?
- Is a group the most effective way of helping this cohort of parents?
- What is the best time of day and the best day of the week?
- Are there any cultural or religious observances and considerations?
- What is the suitability and accessibility of the venue?
- Will you invite parents at approximately the same stage of pregnancy, and what will be the process for finding out whom to invite?
- How can you best engage particular groups, e.g. young mothers and fathers?

Thinking through how to issue the invitation

- Can the local midwifery service help you target women for you to invite?
- Can the local children's centre, health centre, community group or place of worship help?
- Can you encourage word-of-mouth recommendation (this is a very powerful way of enrolling people)?
- Can you build relationships with key people in the community who could be champions?

Designing the invitation

- Translate your thoughts into an invitation format that:
 - is warm and engaging
 - provides information simply
 - contains images that support the message and that help people feel it is 'for them'.
- Consider using different languages, but be aware that this is not always the best solution – seek local advice.

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Getting organised

Engaging expectant parents [3 of 6]

Lessons from research: engaging fathers, young parents and other specific groups

While many of the needs of parents-to-be are similar, what works with some populations and communities will not work with others.

Fathers

Much antenatal education is perceived to be 'women's space' – that is, focused on the needs of mothers. The result is that fathers can feel excluded. However, research shows that when group content and activities are tailored to include and meet their needs, fathers engage well, and this is something that benefits both them and their partners.

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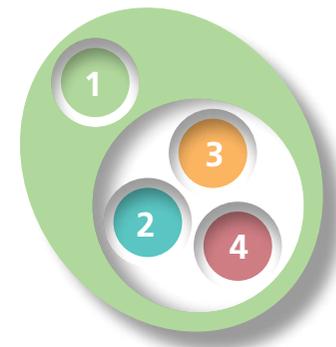
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Top tips: Involving fathers and partners

- Offer information and resources that directly address men.
- Use the term 'mothers and fathers' rather than 'parents', since 'parent' often tends to be perceived as meaning 'mother'.
- Help mothers and fathers understand that becoming a skilled parent is a matter of practice for both sexes.
- Address men in their role as both a support-person for mothers and as an individual who is becoming a parent.
- Make sure that fathers understand about and are addressed on such issues as breastfeeding, nutrition, diet, alcohol use and smoking, since their attitudes and behaviour directly affect mothers and the developing baby.
- Seek feedback and suggestions from men about what they find useful.
- Give fathers (as well as mothers) the chance to think about and value their own knowledge, experience and hopes as preparation for the birth and for welcoming their baby.
- Make sure that fathers have a detailed understanding of the birth process and of their role as labour partners.
- Help fathers to think about the impact they have on the type of feeding their babies receive, as well as on other aspects of family care and health.
- Help fathers understand how they and their partner can cope with the physical and emotional demands of birth and early parenthood.

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Young parents

Teenage mothers and young fathers may engage best in antenatal education if it is designed for young people and if the learning is more interactive.

Why young people say they don't attend groups:

'I've got my mother-in-law – why do I need to come to classes?'

'The group sounded good but I just wouldn't have been able to get there.'

'My foster carer can't bring me and there isn't a bus to that part of town.'

'We just stopped going when we got chucked out of our flat and nobody phoned to check.'

'All the other parents there will be so much older than us.'

'I needed someone to help just me – I couldn't cope with a whole group.'

'It's not for people like me. I don't know anyone else who goes.'

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Minority ethnic mothers and fathers

Parents from minority ethnic groups find value in preparation for parenthood groups that not only provide them with general information, but also give them the chance to explore how the widely held views about having a baby and being a parent relate to their own cultural and faith attitudes and beliefs.

**Don't assume! Ask!
Everyone is different!**

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There are four steps involved in designing an appropriate course structure:

- > Thinking about group size
- > Working with a co-facilitator
- > Planning the programme content
- > Planning the group

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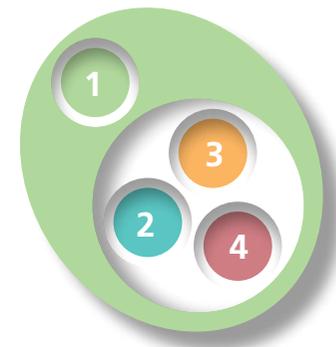
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Thinking about group size

Consider how many people you want in your group, balancing the pros and cons set out below against such issues as venue size and resources.

Small group – up to 20 people

- It is easier for new parents to get to know each other.
- New parents get a chance to speak, if they want to.
- There is more individual time for each mother and father – and for each couple.
- There is greater opportunity to encourage full participation.
- It is easier to find out what people know and to build on that.
- It may feel less challenging for facilitators to lead.
- Courses have to be run more often to cover the same population.

Large group – more than 20 people

- It accommodates more mothers and fathers.
- It is less personal.
- There is less time for individual new parents.
- Parents have more chance to work with each other.
- It is less easy to facilitate activities and learning.
- There may be a tendency to focus on teaching and information giving.

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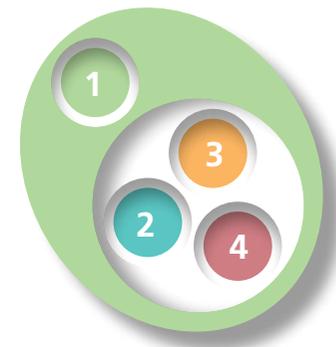
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Working with a co-facilitator

You may want to ask other people to help you plan and lead your groups. Deciding who this should be depends on your role, how you assess your own skills and knowledge, and how these could be complemented by other people.

For example, a co-facilitator could be:

- someone who has skills and experience in facilitating groups
- a clinical expert, such as a midwife or a health visitor
- someone experienced in working with families, e.g. family support worker
- someone who has specialist knowledge about topics that are relevant to parents, but about which you do not feel confident, e.g. breastfeeding and fathers
- someone with administrative skills to help with planning and organisation.

There may be knowledgeable and motivated community volunteers who could assist you well and also bring a fresh dimension to your group.

There are certain things to consider in deciding whether to facilitate your group alone or with another person.

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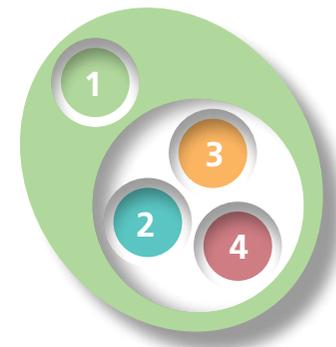
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If you are a lone facilitator, how will you:

- make sure that all participants get your time and attention?
- lead activities at the same time as following how things are going with individual mothers and fathers and helping them where necessary?
- celebrate your achievements?
- get constructive feedback and feel supported?
- learn from a more experienced facilitator?

Add some more ideas from your own experience.

If you are a co-facilitator, how will you:

- get to know your co-facilitator?
- agree and review your roles within the group, e.g. facilitating, reflecting back, summarising, providing information?
- make sure you follow the lead facilitator and not jump in without their agreement?
- review sessions together, discussing what went well or could have been done differently?

Add some more ideas from your own experience.

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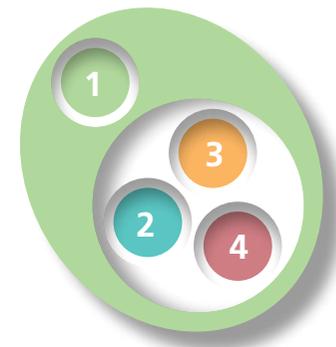
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Overall course structure [5 of 7]

Planning the programme content

The six themes and menus of topics in **Section 4** offer a comprehensive and rich seam of ideas and inspiration for your groups. A key task for you will be to develop a flexible curriculum that matches parents' agendas with your own and with that of the funding body. This may not always be straightforward – for example, mothers and fathers in a group may choose not to discuss breastfeeding, yet increasing the incidence of breastfeeding is a public health priority and needs to be discussed, and so it could be introduced as part of a general discussion on 'feeding my baby'.

'I wonder what our baby will be like and what he or she will need to be happy and healthy...'

'I'm worried that having our baby will make a big difference to our relationship and how I'll cope...'

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Overall course structure [6 of 7]

Programmes should aim to reflect all the themes in **Section 4** and to have a menu of topics from which parents can choose. Do not be tempted to leave out topics that you find more challenging or feel less confident about, such as relationship issues or the emotional aspects of having a baby. The themes and topics in **Section 4** have been selected because of their relevance to giving babies a good start and for their importance to parents, as well as because they are public health priorities. The aim is for your groups to provide a safe space for mothers and fathers to think through these issues, to plan and make changes. Although the course will never be able to cover everything for every parent, it can provide a springboard to explore further what is important. Creating resources and activities for parents to use outside the group adds significant value to the time spent in the group.

'There seem to be so many things to think about and decisions to make...'

'We don't know anyone with a baby round here, so it would be good to make new friends, yeah people like us: new mums and dads...'

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Overall course structure [7 of 7]

Planning the group

- What are the outcomes, objectives and outputs for your group?
- How many sessions will you have and how long will they last?
- When in pregnancy will you start? An early session at between three and six months can be useful, as this is a time when expectant parents are keen to learn and are beginning to think about their baby as a real person.
- Can you extend into the postnatal period, as this is greatly valued by parents?
- What are the objectives for each session?
- How will you find out what mothers and fathers want and link this into the session plan?
- How much will you expect parents to cover outside the sessions?

One way of finding out what the group members want is to make the themes and menus of topics in **Section 4** into cards for them to choose from and rank in their order of priority (see '**Interactive activities and take-home resources**', below).

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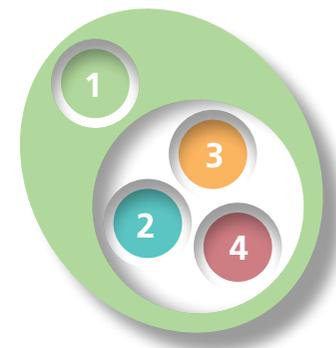
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Planning individual sessions [1 of 7]

Having planned the overall structure of your group, think about the content for each of your sessions in a way that actively involves the group, best matches their learning needs (style and pace), and also meets the objectives you have set.

There are three steps that might help:

- > Prioritising the content of your group sessions
- > Planning each session
- > Planning your activities

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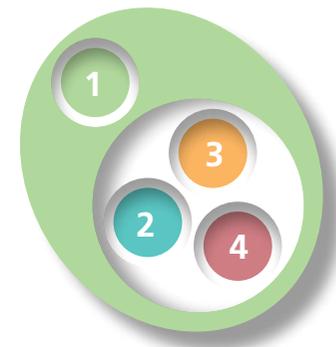
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Planning individual sessions [2 of 7]

Prioritising the content of your group sessions

In working through the menu of topics that each of the six themes contains, you need to decide:

- which of the themes and topics you can cover in each session for each group of parents
- how to combine topics across the themes, to create variety within each session.

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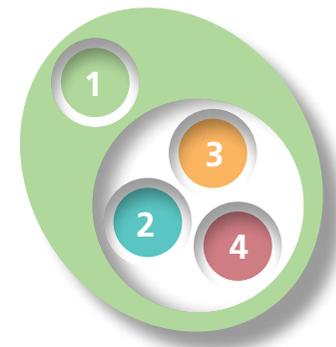
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Planning individual sessions [3 of 7]

Here is an example of a plan for a four-session course (see [Section 4](#)). [Click here to download a blank course planner.](#)

Preparation for Birth and Beyond theme	Course session topic	What might parents want to think about or learn? For example:	Take-home parent resource	Session number
Our developing baby	<i>Baby's growth and development - what helps?</i>	<i>What can my baby do by now?</i>	<i>What do we want most for our baby?</i>	1
Changes for me and us	<i>Becoming a parent</i>	<i>How will we find time for each other?</i>	<i>Our changing relationship</i>	2
Giving birth and meeting our baby	<i>Labour and birth</i>	<i>Pain relief, caesarean section, birth partner's role</i>	<i>Who will help me through labour?</i>	3
Caring for our baby	<i>How will we feed our baby?</i>	<i>Who will help me with breastfeeding?</i>	<i>Making a plan to support my choice of feeding</i>	3
	<i>Getting to know our baby</i>	<i>How will I know what my baby wants?</i>	<i>Info about NHS Choices</i>	4
Our health and well-being	<i>Maximising emotional well-being for mum, dad and baby</i>	<i>Coping with anxiety or depression</i>	<i>Making an emotional support plan</i>	1
	<i>Becoming a parent and what it means for being a couple</i>	<i>Parental rights and responsibilities</i>	<i>What kind of parent do I want to be?</i>	2
People who are there for us	<i>Who is there in the community to help?</i>	<i>Help with benefits</i>	<i>Making an early weeks support plan</i>	4

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Getting organised

Planning individual sessions [4 of 7]

Planning each session

This should include social and interactive aspects, as well as the content and activities.

Here is an example session outline, with some pointers to help you think through each element.

Section 4 provides more information.

[Click here](#) to download a blank session planner.

Example session plan (2 hours)

- Informal welcome (5 mins)

Putting people at ease will help us all get off to a good start! A simple 'working together agreement' might help.

- Introduction (10 mins)

Discovering what mothers and fathers want from the group and making sure it is covered will help us all meet our objectives!

- Catch-up (10 mins)

Time to connect with what's happening for the mothers and fathers will help pregnancy feel real!

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Getting organised

Planning individual sessions [5 of 7]

- Item from one of the themes/topics (1), see Section 4 (40 mins)
 - Session activity 1
 - Topic summary 1
- Break (10 mins)
- Item from one of the themes/topics (2), see Section 4 (40 mins)
 - Session activity 2
 - Topic summary 2

Summarising as we go helps us check what we've learned together, find any gaps and answer any queries.

Time for an informal chat – so important for the mothers and fathers; but who's on their own and are there same-sex parents? And how will we organise the refreshments?

Including topics from different themes creates variety and keeps things interesting.

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Planning individual sessions [6 of 7]

- Session summary (10 mins)
- Session feedback/evaluation (5 mins)

Have the objectives been met? Do people have any unmet needs – how do I make space for a private conversation?

This will help me know if we're meeting parents' needs – a simple thumbs up or down can help me get a sense of what the parents are thinking, and how we can do even better next time.

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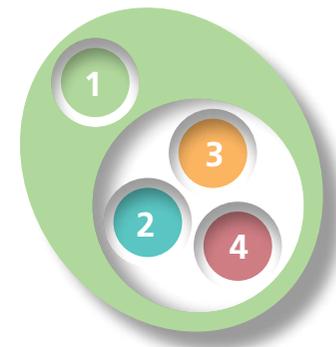
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Planning individual sessions [7 of 7]

Planning your activities

The planning in this section and the background theory and information in **Section 2** will have given you a solid basis on which to run a successful group. If you are an experienced leader, you probably have favourite resources to draw on and plenty of ideas at your fingertips. If not, **Section 4** takes you through each of the themes and gives you some ideas to start you off. Practice, self-reflection and feedback will help build your skills and confidence.

'It was good hearing from the parents who came in with their babies.'

'The quizzes were fun. Everyone joined in.'

'I realised I wasn't alone once I heard what other fathers were saying.'

'I got bored when she just talked at us, I couldn't remember anything she said.'

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Interactive activities and take-home resources [1 of 2]

Developing activities and resources that mothers and fathers can use in their own time can add to the learning in the group. Rather than handing out information, parent resources need to be thought through in the same way as session activities. Each of the themes in [Section 4](#) has examples of resources that could be developed for use with parents.

Top tips: Activities (use in or take out)*

- Design tasks that prompt parents to think, talk and share ideas with each other, friends and family.
- Try and appeal to different learning styles by using DVDs, reading, practical tasks, talking and listening. Check parents' reading age and don't make material too complicated.
- The take-home resources might include quizzes, prompt sheets, websites to explore, information to be gleaned from friends and family, and planning and tip sheets.
- The resources can cover parents' thoughts, ideas, beliefs, feelings, emotions, hopes, expectations, knowledge, skills, plans, etc.
- The aim is for the resources to be experiential, interactive and fun for mothers and fathers alike.
- Try to make sure that the activities are easy enough for parents to fit into busy lives.

* For more information, see the [introduction to Section 4](#).

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Interactive activities and take-home resources [2 of 2]

On the day don't forget...

- Name badges for everyone (people could make their own) and your contact details
- Flip-chart paper, pens, laptop, projector, sound speakers
- All course materials and handouts, checked for reading level and clarity
- Refreshments – a task for sharing with parents
- Comfortable seating that can be moved around.

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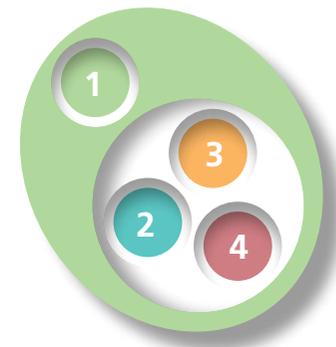
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Skilful facilitation

Key points

- Facilitators need knowledge of the Preparation for Birth and Beyond themes and topics, and should know about the skills and procedures required to lead a group.
- The personal qualities and attitudes of facilitators are as important as their skills and knowledge.
- Effective communication skills are key to enabling all parents to engage in and get the most out of Preparation for Birth and Beyond groups and activities.
- There are always going to be challenges in leading groups for mothers and fathers; facilitators need the skills, confidence and resourcefulness to manage these situations effectively.

Facilitating preparation for parenthood groups can be fun, interesting and rewarding. It can also be challenging and tiring. Above all, helping new mothers and fathers to manage their transition to parenthood and to look forward to caring for and nurturing their new baby is skilled and sensitive work.

There are four aspects to being a skilful facilitator.

- Being knowledgeable
- Being empathic, respectful and strengths based
- Being an effective communicator
- Being resourceful

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Skilful facilitation Being knowledgeable

In order to lead a group that uses the Preparation for Birth and Beyond framework set out in this pack, practitioners themselves require a wide and diverse range of knowledge and need to be able to call on the expertise of others, when necessary.

Key areas include:

- up-to-date knowledge across all areas of the themes (or having someone available who knows)
- knowledge of other resources and people that can support groups
- knowing how to facilitate parent groups effectively
- knowing how to use interactive course methods to bring the content to life
- knowing how to develop interactive take-home parent resources, not just information giving
- awareness of gender, cultural and social issues (e.g. that mothers may 'take over'/be made responsible, while fathers may 'hold back') and how to handle negativity between partners.

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Skilful facilitation

Being empathic, respectful and strengths based*

The personal qualities and attitudes of facilitators have a direct effect on the way that the programme is organised and led, and on how parents respond and learn.

Here are some of the things that new mothers and fathers say about practitioners who lead preparation for birth and parenthood courses.

'I said most when I felt my ideas were listened to and taken seriously.'

'She had the confidence to talk about any issues that could place a baby or family at risk.'

'She had her own opinions and didn't seem interested in listening to us.'

'It was good to hear what other people thought, but one or two went on and on.'

What do these quotes tell you about the way the facilitator has been interacting with parents in the group? What can make it hard to be respectful and strengths based?

* In a strengths-based approach, the practitioner recognises that the assets of an individual (i.e. personal strengths and resources, knowledge and experience) are the starting point for further learning and enhanced confidence, and that they build greater self-efficacy.

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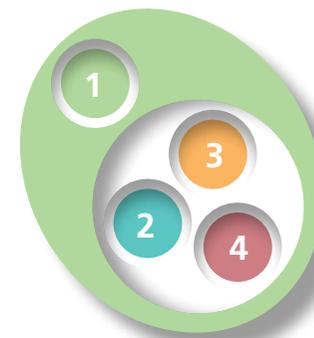
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Skilful facilitation

Being an effective communicator [1 of 3]

As a professional or practitioner, you will need to use all the communication skills at your disposal to engage and work with mothers and fathers, and enable them to become involved, to learn, plan and change, so that they are as well prepared as possible for the birth of their baby and for parenthood. This will include enjoyable and comfortable sessions and conversations with parents, but it could also mean more challenging situations for you and parents.

Communication involves:

- listening closely and attentively to a large group of parents, so that everyone's needs and concerns are understood
- hearing what is important for individuals in the group
- reading individuals' body language to see whether the pace, materials and content are appropriate
- sensing where there is difficulty or unease and finding an opportunity to explore the issue sensitively
- suggesting different ideas and options without being too challenging
- informing authoritatively, without being dogmatic or biased, so that fathers and mothers feel they can trust your expertise
- modelling being a 'sensitive parent' facilitator who is consistent, attuned, warm, positive and safe
- creating a safe environment in which people can explore personal matters.

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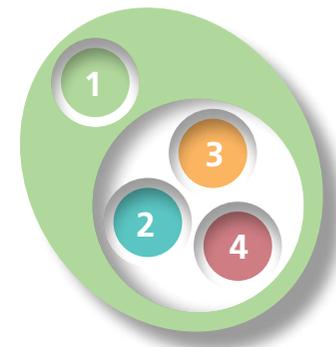
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Skilful facilitation

Being an effective communicator [2 of 3]

What do these quotes say to you about the style of communication, and whether it helped parents to feel involved, respected and able to learn, plan and change?

'Can you help me understand what you mean by...?'

'When you openly disagreed with me in such a direct way... I felt criticised, stupid and defensive.'

'Being too fixed and firm in your ideas... means I don't get to make up my own mind.'

'Just for you to be reassuring and sympathetic... felt patronising and meant that I never got to talk about my real worries.'

'Being asked open questions and having you listen to us... encouraged me to share my own ideas and feelings.'

'Is this a useful time to look at...?'

'I felt you really appreciated that... becoming parents was going to be hard for us.'

'What worked for you personally... may not work for us and our baby.'

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Skilful facilitation

Being an effective communicator [3 of 3]

Top tips: Communicating well in groups

- Listen carefully to each new mother and father – allow time for ‘one thing I’ve found out about my baby this week...’.
- Get to know each and every new parent – use sticky labels for first-name badges.
- Include parents’ ideas and suggestions – use sticky notes or a flip chart to note them down.
- Give everyone the chance to take part comfortably – think of some easy, non-threatening ice-breakers to engage everyone at the outset.
- Show how you have understood parents’ main issues – reflect these back during discussion (make a note of them to help you remember).
- Help parents to clarify their ideas and feelings – a really important way of supporting learning, drawing in the ideas and thoughts of others, if appropriate.
- Accurately summarise what parents say during discussions, and keep a note of the main points so that you can summarise key learning at the end of the session.
- Work at parents’ pace – remember, everyone is different and some adjustment to your planning and activities may be necessary.

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Skilful facilitation

Being resourceful [1 of 3]

It is great when sessions go well and everyone enjoys themselves. But in leading a group there are always going to be sticky situations to manage. Some relate to group dynamics; others are more practical. Thinking through potential issues – how you might feel and what you would do – will help you feel more in control if difficulties arise. Here are some examples to start you off. Click here to download a copy to complete for yourself.

Situation	How I might feel...	What I might do...
One parent aggressively disagrees with another	<i>Concerned and worried, hope that the situation will calm down</i>	<i>Appreciate the strength of feeling and calm the situation without taking sides. In the break, quietly but firmly remind the parents involved about the group ground rules</i>
A parent jokes around excessively	<i>Irritated by the distraction and struggle to keep focused</i>	
Someone gets upset during an activity	<i>Get flustered, worry about what I had said. Be unsure whether to keep going or deal with the situation there and then</i>	<i>Take a moment out and ask if they need somewhere quiet, then follow up later, or ideally the co-facilitator can give support</i>
A parent strongly disagrees with me	<i>Feel uncertain and taken aback, especially in front of a large group</i>	<i>Show appreciation of what the parent was saying and ask why they feel that way</i>
Someone just sits and doesn't contribute to any activities		<i>Ask the parent quietly how things are going</i>

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Skilful facilitation

Being resourceful [2 of 3]

Here are some more examples for you to think about...

Situation	How I might feel...	What I might do...
One person frequently dominates the discussion		<i>Show appreciation of the parent's contributions, but clearly invite other parents to contribute, sometimes gently interrupting if necessary</i>
The content I have prepared doesn't seem to be meeting what people want		
One of the parents is taken ill during the session		
Someone makes a disclosure that I will need to act on, concerning someone they know	<i>My heart sinks, but I must act in the best interests of all concerned</i>	
The centre is suddenly unavailable just a few hours before my group is due to start		<i>Make sure I have a list of contact phone numbers</i>
Someone tells the group something that I know to be wrong	<i>I must step in and correct them</i>	<i>Ask the rest of the group what they think or have downloads from the NHS Choices Pregnancy Care Planner* to refer to</i>

*www.nhs.uk/Planners/pregnancycaresplanner

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- Being knowledgeable
- Being empathic, respectful and strengths based
- Being an effective communicator
- Being resourceful
- Useful resources



3

Skilful facilitation

Being resourceful [3 of 3]

Remember!

- Avoid making assumptions about the knowledge and experience of mothers or fathers.
- Parents will come up with great ideas if given the chance: trust and respect their judgement.
- Keep up to date, so that parents are up to date.
- Always have someone to turn to.
- Be open to the idea of having other practitioners sit in and take part in your sessions.
- Know your course content and work with colleagues who know theirs.
- Practise with a trusted colleague to get the words right, and have them give you feedback.

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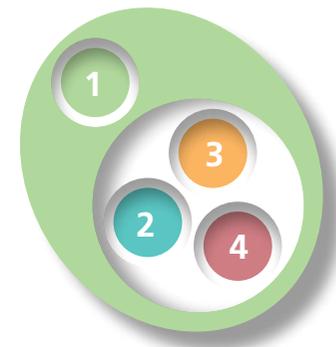
Being knowledgeable

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Planning your group Useful resources

C4EO (undated) 'Outcomes not outputs', available at: www.c4eo.org.uk/themes/earlyyears/eresource/information-professionals/how-we-can-help/OBA-framework/outcomes-not-outputs/

Cowan CP and PA Cowan (1999) *When Partners Become Parents* (revised edition, 2000), Mahwah, NJ: Lawrence Erlbaum Associates.

Department for Education (2011) *Supporting Families in the Foundation Years*, available at: www.education.gov.uk/familiesinthefoundationyears

Department of Health (2010) *Healthy Lives, Healthy People: Our strategy for public health in England*, available at: www.dh.gov.uk/en/Aboutus/Features/DH_122253

Department of Health (2010) *Maternity and Early Years: Making a good start to family life*, available at: www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_115021.pdf

Department of Health (2011) *Parents' Views on the Maternity Journey and Early Parenthood*, available at: www.dh.gov.uk/en/Aboutus/Features/DH_126220

NHS Modernisation Agency, National Primary and Care Trust Development Programme (2004) 'Ten steps to SMART objectives', available at: www.natpact.info/uploads/Ten%20Steps%20to%20SMART%20objectives.pdf

The NCT also has a variety of articles and resources on its website about running groups for different sections of the population, e.g. people with a learning disability, lesbian mothers, etc. See www.nct.org.uk/professional/diversity-and-access

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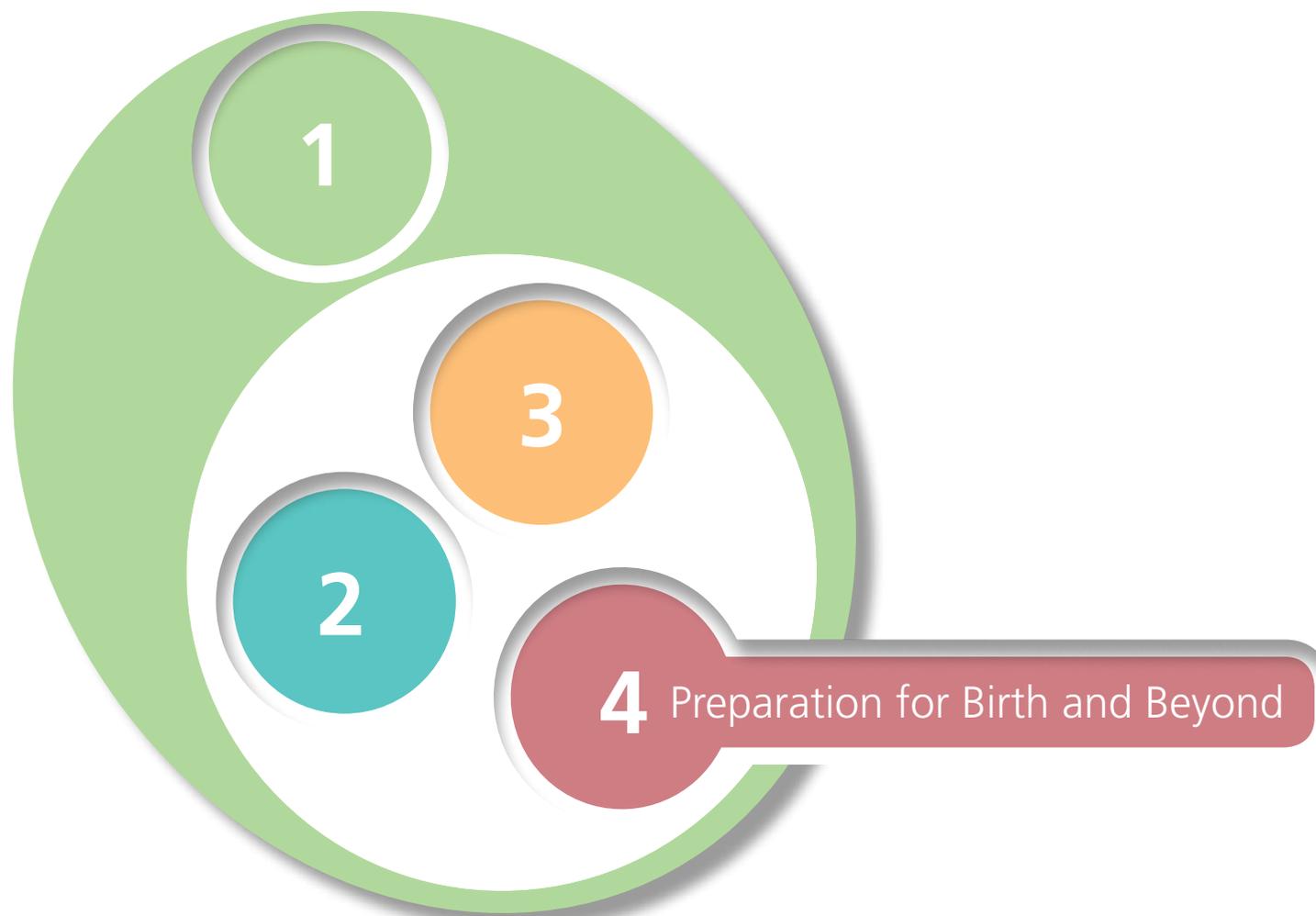
Useful resources



Preparation for Birth and Beyond



A resource pack for leaders of community groups and activities



4

Introduction

Themes and menus

This section focuses on the themes and menus, i.e. the content of Preparation for Birth and Beyond, as set out in [Section 2](#). The six themes are:

- > Theme 1: Our developing baby
- > Theme 2: Changes for me and us
- > Theme 3: Giving birth and meeting our baby
- > Theme 4: Caring for our baby
- > Theme 5: Our health and well-being
- > Theme 6: People who are there for us

Each theme is set out as follows:

- brief introduction to the theme and its content
- what it offers parents
- what it covers
- top tips
- a sample of topics, which typically include:
 - an explanation
 - questions for you to reflect on
 - background research
 - ideas for activities (full set of activities available here)
 - useful resources.

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- How to use this section
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How to use this section

1. Each theme and its menu of topics and associated activities is set out more fully here. It is not designed to be a ready-made curriculum to follow, but rather it offers a sample of topics and examples of activities to use in your groups.
2. Which activities you use will depend on the choices of your group, the number of sessions and the time you have available.
3. The examples chosen focus mainly on topics that may be new to traditional antenatal education programmes. There is less on topics such as giving birth and pain relief, as these are often well covered in existing materials.
4. Some themes contain overlapping content; we have tried to minimise this here, but covering topics from different perspectives can be useful for your group.
5. You might consider running some topics throughout the duration of a course, especially if the subject is one that people find difficult or if they need time to work things through.
6. People change during pregnancy, and there are key times when some topics matter more or connect more readily than others, such as smoking in pregnancy, breastfeeding, relationships and the birth.
7. The idea is that you develop your own activities using the methods detailed below.
8. There are plenty of references to useful resources, but the lists are by no means exhaustive. Also, many of the resources are relevant to more than one topic and facilitators need to be familiar with key resources, e.g. NICE guidelines.

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Some group methods to use for the topics

The different types of activities listed below help group members to engage with the subject and with one another.

- Small group work
- Whole group brainstorming and discussion
- Flip charts
- Sticky notes
- Quizzes (such as 'true or false')
- Timelines and cards
- DVD clips
- Conversation aids
- Questions
- Practical activities
- Demonstration
- Storytelling
- Case studies
- Visits
- Post boxes
- Panel of 'experts'
- Personal plans
- Websites
- Reading
- Role play and practising

[Click here to download a copy of the list with more information.](#)

These are just some examples of activities to use in Preparation for Birth and Beyond groups. If you are not sure about using them, it is worth planning well and being clear about what you want to achieve. Always explain clearly and write down the words you will use to explain the activity to your group. If you are doing something for the first time, practise first by trying it out on your colleagues.

Bringing humour to your groups will make things more enjoyable for everyone, and can help when you discuss some of the more sensitive topics in this pack. Introducing activities that are fun will bring freshness and energy to the group. There are many useful books and digital resources available with ideas for ice-breakers and for activities that will help make your groups interesting.

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Brandes D and H Phillips (1979) *The New Gamesters' Handbook: 140 games for teachers and group leaders, No. 1*, London: Nelson Thornes.

Brandes D (1984) *Gamesters' Handbook: No. 2*, London: Hutchinson.

Mosley J, H Sonnet and R Barnes (2003) *101 Games for Social Skills*, Hyde: LDA.

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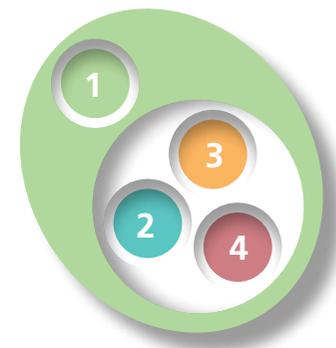
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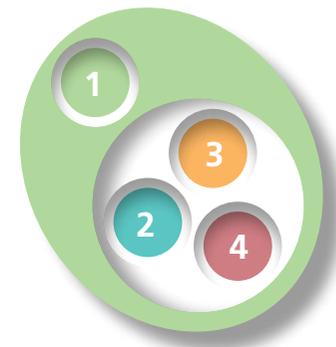
Our developing baby

Introduction

Remarkable changes happen during pregnancy and from birth that create the foundations for babies' growth and development. Mothers and fathers who understand the developmental journey of their growing baby and what this means for their baby's needs are better able to make healthy choices and provide empathic and responsive care.

What this theme offers parents

- A greater understanding of their baby's development.
- Help with making decisions that may affect their baby's health and development.
- The opportunity to reflect on expectations and to address their worries.
- Information on where to go to find out more.
- The opportunity to think about their baby as a real person.



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Our developing baby

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This theme covers

- Our growing baby:
 - what can our baby do at this stage?
 - learning about our baby before it is born
 - getting to know our baby
 - our baby's health and well-being. What can we do to help our baby's health and development? How can a parent's behaviour affect a baby?
 - what does my baby look like at this stage?
- Our hopes, wishes and concerns for our child
- Tests – what are they for and what are the choices?
- Is our baby all right?
- If things go wrong
- What about twins, in vitro fertilisation (IVF), premature babies?

Sample topics for this theme

- **Our growing baby**
- **Our baby's health and well-being**
- **Parents' hopes and worries**



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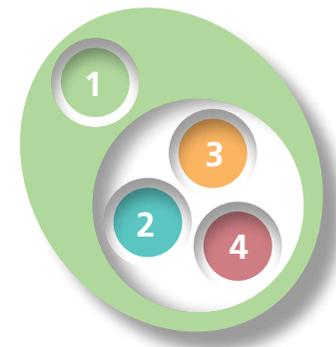
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Our developing baby

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- Try to include fetal and infant development in every group session, so that parents build up their understanding over time.
- If you don't know the answer, suggest that someone finds out for next time.
- Create an atmosphere in which mothers and fathers feel comfortable with sharing their hopes and worries with the group and with each other.
- Be able to offer an opportunity for individual conversations with those who have concerns but have less confidence.
- Some of these topics could be used as an 'early bird' session (i.e. at 3–6 months of pregnancy) to discuss a baby's development in the womb, as well as healthy parental behaviours early in pregnancy.



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Our developing baby

Topic: Our growing baby [1 of 3]

'What sorts of things can my baby inherit from me?'

'What can my baby do?'

Parents are excited, interested and keen to know what their baby looks like, what he or she can do at different stages and how their baby is developing in the womb. Early on in pregnancy, mothers and fathers need to know about the types of tests available through maternity care, their purpose and the choices that they, as parents, need to make.

Antenatal groups and activities offer parents a chance to learn more about the extraordinary growth and development undertaken by a baby from conception to birth, as well as how that development may be affected by positive and negative circumstances.



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Our developing baby

Topic: Our growing baby [2 of 3]

Some features of a child's development in the womb are shown in the following table.

Fetal development	Up to 13 weeks	14–27 weeks	28 weeks to term
Physical	The baby's heart begins to beat at 6–7 weeks	By 14 weeks, the baby is fully formed; now comes the time when a baby grows faster than at any other time in his/her life	The baby's lungs mature, ready for independent breathing after birth
Cognitive	The brain stem develops at around week 7	The baby can distinguish light/dark	The baby's brain also grows rapidly and increases in size
Motor	As the baby's brain develops, the first movements occur at week 9	The baby starts to move more actively	Periods of active movement are interspersed with 'sleep' times
Sensory	At the same time – around week 9 – the baby's eyes become more obvious	The baby can hear sounds, and from about 24 weeks loud noises may make your baby jump and kick	The baby may recognise and respond to music that he or she hears regularly

[Click here to download a sample activity sheet on naming babies.](#)



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Topic: Our growing baby [3 of 3]

Parents may like to know how their baby will begin to change in the days and weeks after birth. The changes are marked and can be affected by pre-term experiences or complications. The table below lists some things that new parents may find interesting about very young babies.

Physical growth and motor skills	In the first few days, newborn babies turn to follow their mother's and father's voices in preference to those of strangers; they also develop the 'rooting reflex', which helps them feed.
Sensory abilities	Their sensory abilities at birth mean that babies can hear well but have fixed focal length; their temperature control is not good, and so it needs to be regulated by parents.
Social abilities	When calm and alert, babies readily copy simple facial expressions and smiling.
Emotional feelings	Newborn babies show core emotions, such as pleasure, fear or distress, and are calmed and soothed by close cuddling and skin-to-skin contact with both parents.
Communication	In the first few days, the appetite centre in the brain comes into play and babies begin to cry because they feel hungry.
Learning	Over the first few weeks, babies begin to co-ordinate their movements and learn to get better at feeding.

[Click here to download a sample activity sheet on learning about baby's development.](#)



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Topic: Our baby's health and well-being [1 of 2]

'How can I help my baby to be healthy and strong?'

'My partner gets really stressed. I'm worried how this might affect our baby.'

We are learning more and more about how babies' health and development are influenced by genes and their environment. Babies inherit physical, psychological and social characteristics from their parents: from physical size, eye colour and temperament to longer-term risks to physical and mental health. A baby's growth and development are also affected by the mother's diet and by toxins such as tobacco, alcohol and drugs consumed during pregnancy. There is now greater understanding of how psychological factors can impact on a baby's development in the womb.

Pregnancy is a window of opportunity, as parents are receptive to learning and making changes. Parents, especially mothers, are instinctively motivated to protect their child, and throughout pregnancy and the early weeks they often show great interest in, and concern for, how they might do the best for the health and well-being of their baby, e.g. by stopping smoking and reducing their consumption of alcohol and other toxic substances.



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Our developing baby

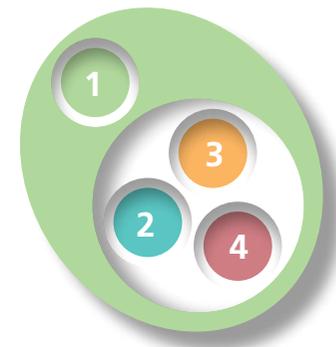
Topic: Our baby's health and well-being [2 of 2]

How do you help parents to look after themselves, so that they can look after their baby's health and well-being?

Changing other people's behaviours is difficult. Think of a time when you have tried to make changes to your lifestyle. What made it difficult and what helped?

Research suggests that acute anxiety and stress can affect the developmental progress of the child, and chronic maternal stress and depression may affect fetal growth and increase the risk of a low birth weight baby.

[Click here to download a sample activity sheet on what affects the baby's development.](#)



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Topic: Parents' hopes and worries [1 of 2]

All new mothers and fathers have hopes for and worries about their baby, about themselves as parents and about each other. These hopes and fears influence the choices and decisions they make about their pregnancy, the birth and early parenthood.

Hopes**'I hope I love my baby.'****'I hope I'm a good dad.'****'I hope my baby is healthy and OK.'****'I hope the birth goes OK.'****'I hope my baby has a better start in life than I had.'****Worries****'I worry that I won't be a good enough mum/dad.'****'I worry I'll lose my baby.'****'I worry that sex harms my baby.'****'I worry that my baby will have my problems.'****'I worry that we won't have enough money.'****'I worry that I won't love my baby.'**

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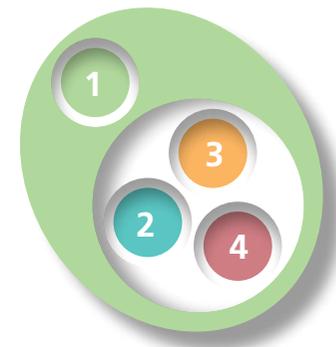
Our developing baby

Topic: Parents' hopes and worries [2 of 2]

Points that you may like to reflect on:

- What other hopes and worries would you add?
- Parents are not the only ones: what about the hopes and worries of grandparents, family and friends?
- How will you create a safe place for everyone to share their hopes and worries?
- If the session becomes subdued, how will you revitalise the group?
- Do you know about female genital mutilation and how to ensure that any mother affected by it gets help to address any concerns she may have?
- How will you address the needs of mothers and fathers with more individualised issues, such as those who are expecting twins or who have had a diagnosis of a baby with a health problem or disability?

[Click here to download a sample activity sheet on encouraging parents to share their concerns.](#)



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Topic: Our growing baby

Department of Health (2010) *The Pregnancy Book*, Chapters 1 and 2, available at:

www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_107302

Topic: Our baby's health and well-being

NHS Choices, 'How your baby develops', available at: www.nhs.uk/Planners/pregnancycareplanner/pages/gestationhome.aspx

[pregnancycareplanner/pages/gestationhome.aspx](http://www.nhs.uk/Planners/pregnancycareplanner/pages/gestationhome.aspx)

The National Scientific Council on the Developing Child has useful scientific information on the development of babies and children. See: <http://developingchild.harvard.edu/index.php/activities/council/>

Zero to Three: National Center for Infants, Toddlers, and Families promotes the health and development of infants and toddlers and has a number of useful resources.

See: www.zerotothree.org/

Several conversation starters are available on the ChiMat website, on the PREview planning resources for professionals page: www.chimat.org.uk/PREview



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Changes for me and us

Introduction

This theme looks at the practical and personal changes that women and men face when they become mothers and fathers. The ways in which parents spend their time, their commitments, goals and priorities as individuals and as a family are likely to alter, as will the quality and closeness of their relationship. Becoming a family is one of the most significant and demanding changes in adult life. It brings with it substantial emotional change, and dissatisfaction with new family life is common. Helping mothers and fathers to think about how they can build on their strengths and existing resources, and how they can manage their differences and conflicts in the early days of parenthood, will help their successful transition to becoming a family.

What this theme offers parents

- More knowledge about how they may change alongside their babies.
- Greater clarity about what they can expect of themselves and each other.
- How to use their personal strengths and resources to care for their baby and cope with the changes.
- How to find effective ways of managing their differences and dissatisfaction as new parents.
- Fuller understanding of their rights and responsibilities as new mothers and fathers.

Sample topics for this theme

- **Becoming a mother/father**
- **Becoming a family**
- **Looking after our relationship**
- **Rights and responsibilities**



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Changes for me and us

Overview

This theme covers

- My life and becoming a parent:
 - what will it mean?
 - what do I want for myself, for our relationship and for us as a family?
 - what does each of us bring to being a parent?
 - what was it like for each of us as a child?
 - our coping strategies
 - what will it be like and what kind of parent do I (and we) want to be?
 - how will we raise our baby?
 - who does what in families?
 - parental rights and responsibilities
- Managing work, learning, training, benefits, maternity and paternity leave and rights, and choosing childcare:
 - earnings and work
- Our relationship:
 - love, communication and conflict, life stresses and how to manage them
 - relationships: what's good for me and my baby?
- Changes for us all – grandparents, step-families, other children and family members:
 - how do I/we feel about pregnancy and having a baby?



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Changes for me and us

Top tips

- Find ways for mothers and fathers to imagine themselves as a family, with all its possibilities: this can help to create the resilience to meet the challenges, as well as the pleasures, of family life.
- Plan how you will meet the needs of parents with more individualised issues, such as serious couple conflict.
- Positively incorporate the faith and cultural similarities and differences of participants.
- Try to pick up the signals from parents who may be struggling, so that you can give them some personal time and help them to think about how they might sort out their difficulties.

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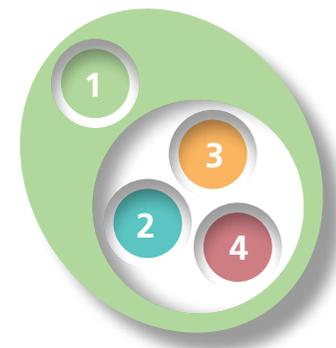
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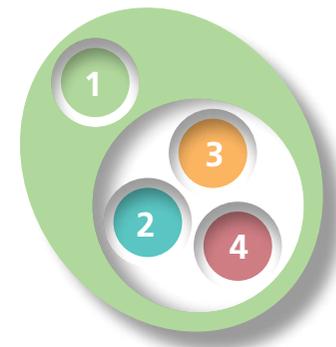
Changes for me and us

Topic: Becoming a mother/father [1 of 5]

'What does becoming a parent mean for me?'

'What kind of parent do I want to be?'

Most women and men face major changes in their lives when they become parents. These might include practical changes to their daily routine and the way they spend time with each other and with their baby. Parents take on the new roles of being a mother or a father, but they retain their existing personal, social, family and other identities. They face changes in their working lives, finances and routines, including maternity and paternity leave. As a consequence, mothers' and fathers' ideas and their feelings about themselves and each other may evolve and be transformed. There is the thrill, excitement and love of having a new baby, as well as the stress and demand of learning new skills and being responsible for a new life.



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Topic: Becoming a mother/father [2 of 5]

Here are some of the things that new mothers and fathers may say about themselves and their lives, as they prepare to become parents:

'I'm a complete shopaholic.'

'I love my football.'

'I love chatting with my friends
and family on Facebook.'

'I'm a dad for the
second time round.'

'I love to curl up and read.'

'I'm a real film nut.'

'I help my mum out
because she's not well.'

'My faith and
culture are very
important parts
of my life.'

'I'm really committed to my job,
I spend a lot of time there.'

How might these roles, commitments and expectations change with the birth of a baby?
What will mothers and fathers have to do to adjust to becoming parents?



4

Changes for me and us

Topic: Becoming a mother/father [3 of 5]

Research suggests that:

- Fewer fathers than mothers feel that they have made a positive decision to become a parent.
- For the most part, in the year after birth, mothers are more likely to go through more extensive life changes than are fathers.
- These changes are more profound for first-time mothers and fathers than for more experienced parents.
- The transition from being a partner to becoming a father impels most men to adapt and reorganise their lifestyles in order to reflect their new role as a parent.
- Many men value opportunities to talk to other men and to take part in groups that give them time and space to prepare for fatherhood.

New mothers and fathers have to adapt quickly, learn what their baby needs and how to look after and care for him or her. Pregnancy gives mothers and fathers the chance to learn about, plan and prepare for these changes and more. However, it is important to remember that mothers and fathers bring knowledge, experience and life skills to their roles in raising their child. The tasks that lie ahead will be less daunting if parents value and build on the strengths and continuities in their lives.



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Topic: Becoming a mother/father [4 of 5]

How might the following strengths help parents to adapt and cope with the demands of parenthood?

'I'm a good manager – I do know how to get the best from people.'

'He's easy going with a great sense of fun.'

'He's the eldest of four children.'

'He's got lots of energy.'

'She never lets things get her down.'

'She's lovely, she's such a softy.'

'We've always talked problems through together.'

'I've always been a bit of an organiser.'

What do you think are particular strengths that help individual parents and couples to cope with the demands of birth and early parenthood?



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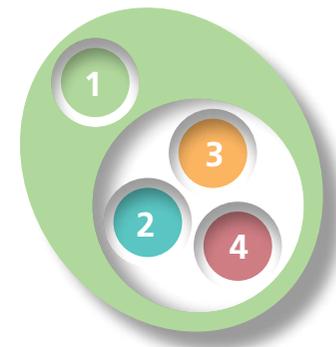
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Changes for me and us

Topic: Becoming a mother/father [5 of 5]

Changes in roles and relationships involve not just new mothers and fathers: there are adaptations and transitions to be made for grandparents, siblings, step-families, other relatives, friends, colleagues and workmates. Whenever possible, mothers and fathers usually want help from their family and friends. Family relationships, though, may be changing at the same time, as new mothers and fathers seek to learn from (or to challenge and reject) the values, skills and ideas of their own parents and other members of their families. Friendships may also change as parents seek out other new parents, and friends without children may struggle to fully understand the impact of what becoming a parent means. These issues are discussed further in **Theme 6, 'People who are there for us'**.

[Click here to download a sample activity sheet on how people change when they become parents.](#)



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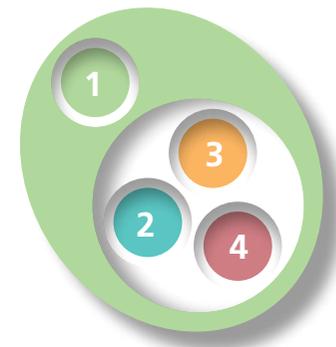
Changes for me and us

Topic: Becoming a family [1 of 3]

**'How will we raise
our baby?'**

**'Who will do what in
our family?'**

The journey to becoming a new family is characterised by significant emotional and practical changes for both the mother and her partner; these have an impact on their relationship and other areas of their lives. Practical changes for couples are common and often cause stress. For example, new parents may move accommodation, get married, start living together or change jobs.



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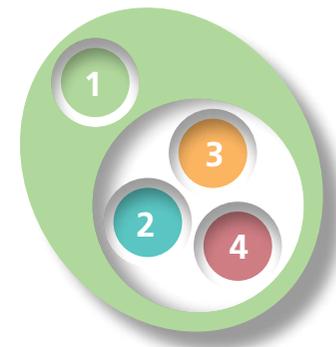
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Changes for me and us

Topic: Becoming a family [2 of 3]

How can you help mothers and fathers to consider some of the following issues for them and for their relationship?

- The differences and similarities between their life as a couple and when they become a family.
- The joys and concerns of partners responsible for a new life.
- The changes in daily tasks and the routines of family life.
- Putting their baby's needs before their own as individuals and as a couple.
- The meaning for them as a couple of 'being a family'.
- Social, cultural and personal expectations of mothers and fathers.
- Having a baby in challenging circumstances – e.g. being a young parent, being in care, living in insecure accommodation or with relatives/friends.
- Managing the balance between work, learning, training and earning – and family life.
- Maternity and paternity leave, benefits and rights.

What other aspects of the transition to family life can you help couples to think about and plan for?

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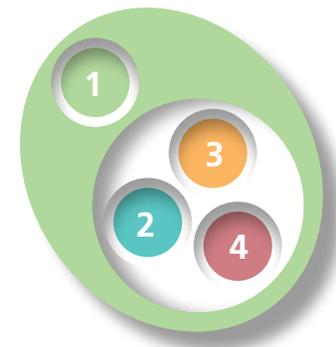
Changes for me and us

Topic: Becoming a family [3 of 3]

Research suggests that:

- In new families, there may be less time for a couple to be together, listening to each other, feeling close and being intimate. Positive communication often decreases and there may be more disagreements.
- The gender roles and attitudes of mothers and fathers tend to become more traditional over the course of pregnancy and early parenthood; while some accept and enjoy this, others do not.

[Click here to download a sample activity sheet on parents' changing relationship.](#)



4

Changes for me and us

Topic: Looking after our relationship [1 of 4]

The strength of a couple's relationship – the degree to which they feel connected to and supported by one another – will help them to manage the demands, stresses and conflicts of becoming parents, as will their ability to communicate. Not all women are in a relationship with their baby's father, and some are in a same-sex relationship. Whatever the situation, it is important not to underestimate the impact that having a baby has on relationships. Differences in hopes, expectations and values can become magnified and exaggerated, particularly when new parents are worried and exhausted. It is easy then for couples to become tense, resentful and argumentative, without having the time together to sort out their differences. Sometimes parents can be faced with deciding whether their relationship is good for them and safe for their baby.

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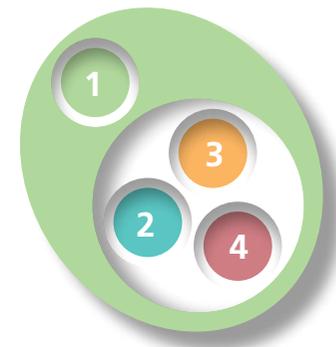
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Changes for me and us

Topic: Looking after our relationship [2 of 4]

What things can lead to tension and disagreement between new mothers and fathers in the early days of parenthood? What can help parents to look after their relationship?

'I know he was worried, too, when she was in special care, but he wouldn't talk to me about it.'

'We are closer than ever – she has brought joy to our lives.'

'I thought we were very similar, but what he wants is so different from me.'

'It was great doing all these new things, learning to feed and change her.'

'We were so tired and never went out.'

'Having Jack and Molly brought us closer together – they were ours.'



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Topic: Looking after our relationship [3 of 4]

'He's been a great support, I couldn't have managed without him.'

'I suppose I feel left out... hardly even a cuddle for me.'

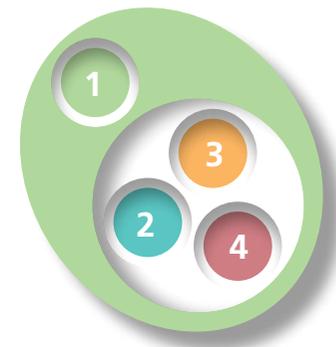
'We'd just spend hours looking at him, just nothing else.'

'Whatever I did with the baby, she'd re-do. All we seemed to do was argue.'

'Time off work really helped me get to know her, but I could see how tiring it was for Beth.'

'Sex hardly happened. I felt so tired and fat.'

How can you help parents learn how to manage the changes in their relationship following the birth of their child?



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Changes for me and us

Topic: Looking after our relationship [4 of 4]

Research suggests that:

- Preparation for birth and parenthood groups that include topics on relationships and problem-solving skills are welcomed by parents and can have a positive effect on the well-being, parental confidence and satisfaction with the couple relationship felt by both parents.
- Giving parents time for reflection and practice encourages them to think more deeply about how they will share the care of their child.
- While, for some couples, the arrival of a baby can increase satisfaction, for many others some of the consequences of having a baby can lead to a decline in satisfaction with their relationship. The more a mother feels supported by her partner, the greater her satisfaction with the relationship.
- A decline in relationship satisfaction has a greater impact on father–child than on mother–child relationships.
- New parents tend to have more arguments than they did before their baby was born.

[Click here to download a sample activity sheet on how parents can manage their changing relationship.](#)



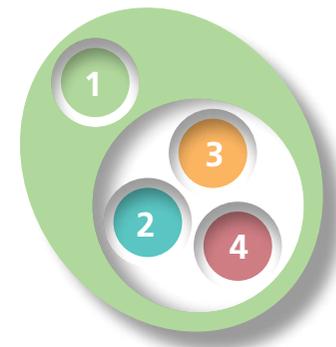
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Changes for me and us

Topic: Rights and responsibilities [1 of 2]

With almost half of babies born outside marriage, some parents may be unclear about who has legal parental responsibility for their children. All mothers, as well as married fathers, acquire parental responsibility for their children automatically. The rules by which unmarried fathers gain parental responsibility vary across the UK, and such fathers do not always have parental responsibility for their own children. While the law does not define in detail what parental responsibility is, some of the key roles are:

- protecting and maintaining the child
- naming the child and agreeing to any change of the child's name
- determining the religion of the child
- having contact with and living with the child
- agreeing to the child's medical treatment
- disciplining the child
- allowing confidential information about the child to be disclosed.



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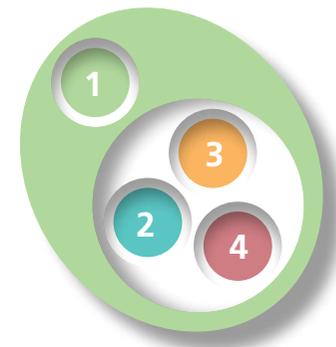
Topic: Rights and responsibilities [2 of 2]

What roles would you add? How can you help new mothers and fathers understand these roles and how fathers gain parental responsibility? What are the issues for same-sex couples?

Thoughts of returning to work can put various pressures on new parents – mothers and fathers alike. The pressures relate to family finances, the cost of childcare, worries about job security and societal and cultural expectations. And all of these can place a strain on relationships. The need for shared parenting is increasingly recognised (e.g. through extending the right to request flexible working and to take parental leave). Shared parenting improves child outcomes and provides a better balance of work and family life. Sooner or later, finding suitable, affordable childcare is likely to be a significant issue for mothers, fathers and families.

[Click here to download a sample activity sheet on encouraging parents to think about their parental rights and responsibilities.](#)

[Click here to download a sample activity sheet on balancing family life with work and other commitments.](#)



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Useful resources [1 of 2]

Topic: Becoming a mother/father

Fisher D (2010) *Baby's Here! Who does what? How to split the work without splitting up*, Llandoverly: Grandma's Stories Ltd, available for purchase at: <http://whodoeswhatbook.com/>

Topic: Becoming a family

Relationship advice at the Couple Connection website: <http://thecoupleconnection.net>

Topic: Looking after our relationship

Couple Connection (2009) 'Arguments and the recession – a better way to argue', available at: <http://thecoupleconnection.net/articles/arguments-and-the-recession-a-better-way-to-argue>

Fatherhood Institute (2010) *Guide for New Dads: Get ready for the most exciting journey of your life*, available at: www.fatherhoodinstitute.org/wp-content/uploads/2010/10/Guide-for-New-Dads.pdf

Fisher D (2010) *Baby's Here! Who does what? How to split the work without splitting up*, Llandoverly: Grandma's Stories Ltd, available for purchase at: <http://whodoeswhatbook.com/>

Help for parents with coping with change and working out differences is available on the One Plus One website at: www.oneplusone.org.uk/ICOR/



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Changes for me and us

Useful resources [2 of 2]

Topic: Rights and responsibilities

The legal rights and responsibilities of being a mother or father can be found at:

www.direct.gov.uk/en/Parents/ParentsRights/DG_4002954

More about parental leave can be found at:

www.direct.gov.uk/en/Parents/Moneyandworkentitlements/WorkAndFamilies/Parentalleaveandflexibleworking/DG_10029416

More about money, tax and benefits:

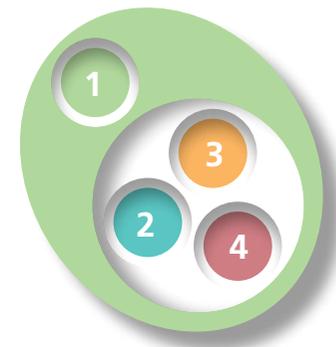
www.direct.gov.uk/en/MoneyTaxAndBenefits/BenefitsTaxCreditsAndOtherSupport/Expectingorbringingupchildren/index.htm

Getting online personalised advice about benefits:

www.direct.gov.uk/en/Diol1/DoltOnline/DoltOnlineByCategory/DG_172666

Information on finding childcare:

www.direct.gov.uk/en/Parents/Childcare/DG_180946



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Giving birth and meeting our baby

Introduction

Giving birth is probably the most profound event in human life. The early signs of labour signify that a woman's pregnancy is coming to an end and that her baby is preparing to enter the world. During pregnancy, mothers and fathers begin to get physically, emotionally and practically prepared for the arrival of their baby. They make plans about the help and support they want from birth partners, as well as about the involvement of professionals, friends and family.

Understanding what the birth may be like helps mothers and fathers to make their own plans and preparations for coping with and managing what may happen. This includes knowing about their choices and options when nature needs a hand, and what this may mean for them and their baby. On meeting their baby, mothers and fathers will see and touch their child for the first time, with all the consequent strong feelings and emotions.

What this theme offers parents

- The chance to feel prepared for labour and birth – including a good understanding of how to be an effective birth partner.
- Understanding of the physical and psychological processes that occur in the mother during labour and birth.
- The feeling of being prepared for the role of birth partner.
- Information about pain relief and common interventions used during labour and birth, and when they are offered.
- A sense of being ready to meet their baby and of what to expect in the hours immediately after the birth.



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Giving birth and meeting our baby

Overview [1 of 2]

This theme covers

- Planning and getting ready for labour:
 - where to have my/our baby
 - practical arrangements
 - visit to the hospital or birth centre, or preparing for home birth
 - getting to know the professionals
 - choices around birth
 - making flexible plans
- Birth partner/s:
 - what for and who?
 - what do I need to do?
 - how can I help?
- Labour and giving birth:
 - how will I/we know it's time?
 - whom do we need to contact and when? When do we need to go to the hospital?
 - what happens in labour?
 - how can I work with my body to help my baby be born?
 - coping with labour and pain relief – what is available and what can I use?
 - choices for fathers and partners – should I be at the birth and what do I need to do?



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Giving birth and meeting our baby

Overview [2 of 2]

- When nature needs a hand:
 - induction
 - electronic monitoring
 - ventouse and forceps
 - caesarean birth
- Changes in my body after the birth:
 - baby blues, stitches, bleeding, breast changes (mother)
 - tiredness, happiness, sadness, stress, anxiety and other feelings (mother and father)
 - how can we support each other?
- How did the birth go for me/us?
- A newborn baby – what will he or she be like?

Sample topics for this theme

- **Planning and getting ready**
- **Birth partners**
- **Labour and giving birth**
- **When nature needs a hand**
- **Meeting our baby**



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- You are a great resource – help mothers and fathers learn how to use different positions, birth balls, bean bags, comfort strategies, looking at the ways in which these can affect how they feel and cope during labour.
- Keep a balance – accept parents' worries about labour and birth, but also encourage them to be resourceful.
- Think about using images, storytelling, written birth reports, factual information and other methods to help new mothers and fathers share their ideas about labour and their plans for the birth of their baby.
- Help mothers and fathers appreciate and understand their ideas about labour and birth, and the extent to which they are realistic and helpful.
- Remember that some parents will have a more complex pregnancy, for health and social reasons (such as having a disability or long-term condition, housing problems, multiple birth or because the baby is small for its gestational age).
- Prepare parents briefly for the possibility of premature birth and the need for their baby to go to a special care baby unit.



4

Giving birth and meeting our baby

Topic: Planning and getting ready [1 of 4]

The ideas and beliefs that mothers and fathers have about the process of labour and birth affect the choices that they make and how they prepare. These include:

- where to have their baby
- their planning and preparation for the birth
- relationships with the professionals
- choices around the birth and what to put in their birth plan.



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Giving birth and meeting our baby

Topic: Planning and getting ready [2 of 4]

Here are some of the things parents say about labour and the birth. What other things have you heard people say?

'From what my mum said, you can never be sure how things will work out.'

'If my sister can do it so can I!'

'I read all about it in a book and knew what it would be like.'

'I saw it on the telly, she was in real pain and they had to call an ambulance.'

'As an older woman, I know the risks are greater than for younger women, but I've had great support from my midwife.'

'They kept telling her to go home even though she had painful contractions.'

'There are some horror stories on the web, but I know not to think it will be the same for me.'

How might these beliefs and ideas affect how parents think about labour and the birth, and the plans that they then make?



4

Giving birth and meeting our baby

Topic: Planning and getting ready [3 of 4]

Research suggests that:

- Participation in antenatal preparation courses can be associated with higher satisfaction with the birth experience.
- Although maternal exercise is encouraged, participation in physical activity during pregnancy is often low.
- Knowing what actually happens to the mother's body in readiness for the birth and the physical and psychological demands of labour can help women and men to plan and prepare for what may lie ahead.
- When birth partners are well prepared for their role, a woman's experience of birth is likely to be more positive.



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Giving birth and meeting our baby

Topic: Planning and getting ready [4 of 4]

Which of the following topics do you plan to cover in your groups and activities?

- Physical exercise for getting ready for labour
- The changes in women's bodies as labour approaches
- The baby's preparation for birth
- Signs that labour has started
- Stages and processes of labour
- When to seek medical advice or care
- When to call the midwife or go to the birth centre or hospital
- Delivery of the placenta and normal bleeding
- The birth partner's role during delivery and how he or she can help at each stage of labour
- The management of pain through positioning, comfort relaxation, medication and other methods.

How will you find out and meet the needs of mothers and fathers with individualised issues?**How can you find out what else expectant mothers and fathers in your group want to know about?**

[Click here to download a sample activity sheet on expectations about labour and the birth.](#)



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Giving birth and meeting our baby

Topic: Birth partners [1 of 3]

Most women cannot imagine giving birth without their partner, and for most couples the father's presence and support during the birth is an important element in becoming a family. A father's presence tends to help women have a better experience during labour and birth.



4

Giving birth and meeting our baby

Topic: Birth partners [2 of 3]

To what extent do you set aside time with fathers and other birth partners to explore the following?

- How they can help the mother manage a long 'latent' phase as the first stage of labour establishes.
- Where they, as birth partners, can turn for help.
- How they can ensure that healthcare professionals involve them in the birth.

What resources have you developed to help birth partners in your groups think about and plan their role?

[Click here to download a sample activity sheet on job descriptions for a birth partner.](#)



4

Giving birth and meeting our baby

Topic: Birth partners [3 of 3]

Research suggests that:

- Support from a chosen family member or friend, a professional or trained birth companion (sometimes called a 'doula') may increase women's satisfaction with their childbearing experience.
- Fathers often feel unsure about what to do and how to help their partners during the process of labour. They can often feel out of place, unprepared and in need of emotional support themselves.



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Topic: Labour and giving birth [1 of 3]

The process of labour and the journey of giving birth are physically and emotionally demanding, particularly for first-time mothers and their birth partners. Mothers and their birth partners need to know about and to prepare for:

- working with the phases of labour
- pain relief choices
- coping and communicating with each other and the professionals during labour.

They also need to have some awareness of the circumstances in which mothers and babies will need a helping hand. For example, the reasons for induction of labour, for electronic fetal monitoring and a caesarean birth (either planned in pregnancy or decided during labour).

There is a complex interaction between physical, biological and emotional processes around the time of birth. For example, the release of oxytocin and endorphins can have a positive effect by assisting labour. On the other hand, increased feelings of anxiety and fear can cause the release of adrenaline, which heightens tension and the experience of pain. The hormones of labour and lactation can be affected by physical touch, maternal well-being, and the coping strategies of the mother, the birth partner and the professionals involved, as well as by the atmosphere of the birth environment. Some of these effects are described in the following table.



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Topic: Labour and giving birth [2 of 3]

Trigger	Hormone	Effects	Understanding your mind/body system
Fear, anxiety, stress, fear of losing control	Adrenaline	Tension, increased pain, alertness	To reduce adrenaline try: <ul style="list-style-type: none"> • calming and relaxation techniques • positive self-talk • feeling confident about what is happening
Comfort, care	Oxytocin	Muscle contractions, pleasure	To increase oxytocin try soothing strategies, such as using: <ul style="list-style-type: none"> • water, birth pool • Entonox (gas and air) • TENS • touch and massage
Pain, exercise, arousal	Endorphins	Natural pain relief, feeling high, focusing inward, well-being	To increase endorphins try: <ul style="list-style-type: none"> • comfortable furnishings, dim lights • music • touch, massage, relaxation and breathing techniques

How could you give parents the opportunity to learn about the triggers, effects and ways of managing these hormonal responses during labour and birth?

[Click here to download a sample activity sheet on knowing when labour has started.](#)



4

Giving birth and meeting our baby

Topic: Labour and giving birth [3 of 3]

Research suggests that:

- Women who receive continuous support during labour are more likely to give birth without additional clinical intervention. They may be less likely to use pain medications, and more likely to be satisfied with their birth experience. They may have shorter labours and their babies may be less likely to have low five-minute Apgar scores.
- Socially disadvantaged women who receive additional practical and emotional support during pregnancy are less likely to be admitted to hospital for pregnancy complications and/or to have a caesarean birth.



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Topic: When nature needs a hand [1 of 2]

New mothers and fathers also need to understand the interventions that might be suggested or recommended, if necessary, to assist in the delivery of their baby, and their implications.

These include:

- induction of labour
- use of pethidine and other opioids
- epidural
- assisted birth with forceps or ventouse
- caesarean birth.



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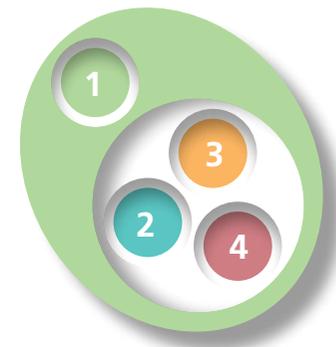
Topic: When nature needs a hand [2 of 2]

What terms can you use to explain these to mothers and fathers so that they are well informed without being overloaded with information?

If this is not your area of expertise, whom will you ask to run this session with you?

What materials and websites can you recommend to parents?

Click here to download a sample activity sheet on the methods and benefits of pain relief during labour.



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Giving birth and meeting our baby

Topic: Meeting our baby [1 of 2]

The first moments of a baby's life are precious, and the needs and feelings of mothers, fathers and new babies are often intense.

Depending on how things have gone, mothers and fathers often feel a mixture of:

- elation, joy and relief
- closeness
- exhaustion
- anxiety, fear or disappointment
- uncertainty and confusion
- soreness and discomfort.

For mothers and fathers, the period after the birth, when they meet their baby for the first time, is an intensely personal moment to be savoured and enjoyed. It is a time of wonder, amazement and physical closeness with their newborn – an experience that can be enhanced through skin-to-skin contact. However, the circumstances of the birth may mean that it is not possible for a mother or father to experience this time immediately after birth: everyone will need to recover from the birth, and a baby may not be ready to feed straight away. Anticipating what to expect can help parents, so hearing a range of other parents' birth stories can help them plan and prepare for what may happen when they meet their own baby.



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Giving birth and meeting our baby

Topic: Meeting our baby [2 of 2]

Here are some things that new mothers and fathers say about meeting their baby for the first time. What else have you heard parents say?

'It was lovely cuddling him – just me and my baby.'

'He was so bright and alert after he was born.'

'We were both exhausted. We just couldn't think straight.'

'They suggested we do skin-to-skin so that she calmed down after the birth.'

'I felt numb after what had happened, I didn't know how to feel.'

'Chatting to other women, I realised my birth experience wasn't that different.'

'I felt a bit funny about holding him at first.'

'It took me a couple of weeks before I really fell in love with her.'

How could you help new mothers and fathers prepare for how things may be for them after the birth and how they may want to spend the time with their new baby?

Click here to download a sample activity sheet on what parents can expect in the early days following the birth of their baby.

Click here to download a sample activity sheet on how parents can plan for the first few hours with their baby.



4

Giving birth and meeting our baby

Useful resources [1 of 2]

Topic: Planning and getting ready

Internet resources on options for giving birth include:

www.choicesforbirth.org/www.nhs.uk/livewell/pregnancy/pages/wheretogivebirth.aspxwww.birthchoiceuk.com/

Preparation for labour

Simple Yoga for Labour and Birth (DVD) (item number 4530), *Pregnancy Relaxation* (CD) (1942) and *Miracle Box for Women – Pelvic floor control* (DVD) (3300), all available from the NCT at:

www.nctshop.co.uk/professional

Training resources for birth and labour

Childbirth charts (3253), teaching dolls (3291), pelvis (3290), *Positions for Labour and Birth A2 poster* (3254POS). The tear-off information sheets series includes *Straightforward Birth* (1712PAD), all available from the NCT at: www.nctshop.co.uk/professional/

NHS Choices, Pregnancy Care Planner, available at:

www.nhs.uk/planners/pregnancycareplanner/pages/birthplan.aspx?WT.mc_id=070906

NICE guideline on 'Intrapartum care: management and delivery of care to women in labour', available at: <http://guidance.nice.org.uk/CG55>

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Giving birth and meeting our baby

Useful resources [2 of 2]

Topic: When nature needs a hand

NICE guideline on 'Intrapartum care: management and delivery of care to women in labour', available at: www.nice.org.uk/CG55

Skin-to-skin leaflet entitled 'Your baby knows your loving touch' (in various community languages), available at: www.poppy-project.org.uk/3.html

Advice on the various options for giving birth is available at:

www.birthchoiceuk.com/

www.choicesforbirth.org

Topic: Meeting our baby

Brazelton Centre (undated) *More Than Words Can Say: Understanding a baby's language through the Neonatal Behavioral Assessment Scale* (DVD), available at: www.brazelton.co.uk/dvd.html

NSPCC/Children's Project (2004) *The Social Baby: Understanding babies' communication from birth* (DVD), available at: www.nspcc.org.uk/inform/trainingandconsultancy/learningresources/socialbaby_wda47886.html

Tameside and Glossop Community Healthcare (undated) *Getting it right from the start* (booklet and DVD), available to purchase at:

www.tamesideandglossop.nhs.uk/templates/Page_4628.aspx

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Caring for our baby

Introduction

To have the best start in life, babies need their mothers and fathers to get to know them, care for their needs and keep them safe from harm. This theme is about helping parents understand and learn the skills involved in caring for their baby. It looks at the ways in which new parents get to know their baby, seeing the world through their babies' eyes, understanding their needs, their temperament and how they communicate. It covers the ways in which mothers and fathers love and bond with their babies. The theme also looks at the day-to-day routines and skills that new mothers and fathers learn in order to look after their baby: bathing, holding, feeding, playing with and settling their baby – and ultimately keeping him or her safe, both physically and emotionally.

What this theme offers parents

- The chance to learn about young babies' social communication and how to respond to their baby's cues.
- Understanding of how emotional bonds grow between a mother and her baby, and a father and his baby.
- The opportunity to learn about the practical day-to-day tasks of looking after a baby.
- Knowledge about how to keep their baby safe.



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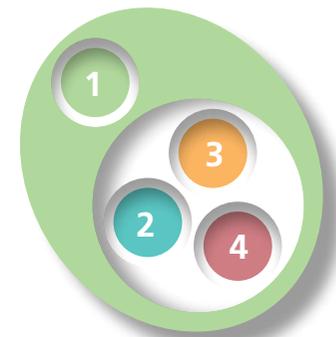
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This theme covers

- Is our baby all right?
- Keeping our baby safe:
 - reducing the risk of 'sudden infant death', car safety, smoking, alcohol use, etc.
 - equipment: carriers, car seats, etc.
 - what do we need to get for our baby?
 - is our home safe for our baby?
- Bathing and changing our baby: nappies, etc.
- Minor illnesses and first aid: when to see a doctor, advice about allergies
- Getting to know our baby:
 - crying babies, what is our baby telling us?
 - responding to our baby
 - coping in the early weeks
- Bonding with our baby
- Looking after our baby, making decisions:
 - feeding – where can we find out more?
 - how can fathers be involved?
 - immunisations
 - cots, baby carriers and sleep
 - circumcision
- How our child develops and learns: how can we support him or her?
- What do we need to do or to get for our home as our baby grows?

Sample topics for this theme

- **Getting to know our baby**
- **Bonding with our baby**
- **Looking after our baby**
- **Feeding our baby**
- **Keeping our baby safe**



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Top tips

- Make sure you understand the faith and cultural differences in caring for and looking after babies within the communities that you serve.
- Appreciate how your own personal beliefs and experiences affect what you recommend to parents.
- Try to keep your language clear and straightforward. Not all concepts in English are easily translated into other languages, so you may need to explain things in detail rather than through one word or a single sentence.



4

Caring for our baby

Topic: Getting to know our baby [1 of 2]

Each baby is unique. Babies differ in physical shape and muscle tone, in temperament and nature, in ease and sociability, in alertness and watchfulness, in their sleeping and feeding habits. These differences stem from their genes and their experiences in the womb, their birth and the care and attention they receive once they are born. Mothers and fathers will usually begin to develop ideas about their baby's individual character before they are born.

In the days and weeks after birth, parents begin to get to know and understand their baby, and his or her needs and preferences. Parents get better at reading their baby's needs and at interpreting the cries, smiles and body language. At the same time, babies gradually change, too, learning and developing in response to the world and the people around them. Providing consistent and sensitive care at this time is important, in order to help babies to communicate and to feel secure that their needs are being met.

Preparation for Birth and Beyond groups and activities offer mothers and fathers the opportunity to learn how they can use all their senses to get to know their baby.



4

Caring for our baby

Topic: Getting to know our baby [2 of 2]

Here are some things that parents have learned about their own very young babies:

'She makes little pleasure sounds but is totally different when she is unhappy.'

'I've had to learn how she likes to be held.'

'I just used to imagine what it was like for him in my tummy.'

'He just seems to sleep more than the others.'

'Although I want to hold him close, I can see him turning away and arching his back like he's had enough.'

'She finds it really hard to be passed around.'

'I can feel him get tense and then relax when we feed.'

'She was on the go all the time in my tummy.'

How will these discoveries help parents to understand and care for their baby?

Click here to download a sample activity sheet to encourage parents to think about how babies communicate.



4

Caring for our baby

Topic: Bonding with our baby [1 of 3]

Bonding is the process by which new mothers and fathers develop a deep affection and protective love for their baby. It can begin during pregnancy, at birth, or it may evolve more slowly over subsequent days and weeks. Some parents may struggle to develop such a bond. Over time, the nature of the bond usually grows and changes in intensity and meaning for mothers and fathers. It enables parents to become sensitive, attuned and responsive to their baby's needs. The bond is protective and allows parents to put the care of their baby before everything and everybody else.



4

Caring for our baby

Topic: Bonding with our baby [2 of 3]

Here are some of the things that new mothers and fathers say about the nature of their love and affection for their baby:

'It's what helps you get up in the middle of the night, no matter how you feel.'

'I'm scared I won't feel any love for my baby.'

'I'm having twins – what if I love one more than the other?'

'You don't have to think about it because it just happens.'

'It's what you feel when you watch them asleep.'

'Bonding is something that happens when you see your baby for the first time.'

'How will I know if I have bonded with my baby?'

'Mothers find bonding easier than fathers do.'

'My friend's baby was in special care and she said she felt he wasn't hers.'

'I didn't really bond with my baby until after she was born.'

How can you help each mother and father learn about the different ways in which bonding with their baby can develop?

Click here to download a sample activity sheet on how to help parents understand ways to bond with their baby.



4

Caring for our baby

Topic: Bonding with our baby [3 of 3]

Research suggests that:

- Sensitive, responsive parenting by both mother and father from the time of the birth promotes early cognitive and language development and babies' self-regulation of their emotions, and enhances father–infant and mother–infant attachment.
- Each parent's adjustment to motherhood or fatherhood is strongly affected by how the other parent adjusts.
- Having some special time with their baby, including shortly after birth, can help fathers bond with their babies.
- When combined with adequate stimulation, sensitive and responsive parenting influences brain development.
- Having appropriate, accurate knowledge helps mothers and fathers to feel more competent, satisfied and committed to being a parent.
- Mothers and fathers who feel skilled at handling babies are likely to do more of it.
- Group-based antenatal programmes that include parenting skills, bonding and attachment, and problem-solving skills are popular with parents, may improve maternal well-being, parental confidence and satisfaction with the couple and the parent–infant relationships.



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Topic: Looking after our baby [1 of 3]

There is a lot for parents to think about and take in as they learn to look after their baby. Each aspect of care listed on the next page requires parents to develop skills and knowledge, as well as to increase their confidence and emotional sensitivity. Mothers and fathers will already have skills and experience to draw on – including their own experience of being cared for – though they are often not conscious of the fact.



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Caring for our baby

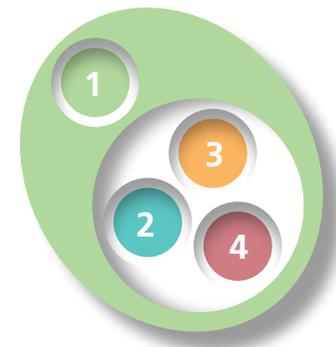
Topic: Looking after our baby [2 of 3]

Which of the following aspects of looking after babies could you cover in your groups and activities?

- Feeding
- Picking up and holding
- Dressing and handling
- Nappy changing and bathing
- Comforting and nurturing
- Being with the baby and playing, stimulation and learning
- Settling to sleep and sleep routines.

How could you help parents to make decisions about care and think about the practical and emotional skills involved?

Click here to download a sample activity sheet on the practical skills parents need to look after their baby.



4

Caring for our baby

Topic: Looking after our baby [3 of 3]

Research suggests that:

- For many parents, crying is the most distressing aspect of baby care. On average, up until the age of three months babies cry for two hours a day (more in the case of the 20% of infants who are diagnosed with colic).
- Feeding can be a challenge: short-term feeding problems are common, and chronic feeding problems affect between a quarter and a third of all babies.
- The tasks of caring for a baby add up to approximately 35–40 hours of work per week for the average couple household.
- In the early months, most of the work is done by mothers; since few fathers take care of newborns on their own, the 'skills gap' between mothers and fathers often increases rapidly.



4

Caring for our baby

Topic: Feeding our baby [1 of 5]

Each of the tasks involved in looking after a baby has a deeply personal aspect, as mothers and fathers work out what is right for them, their baby and their family. These care tasks are not just practical activities but are sensitive, shared experiences that require both parents to be attuned and responsive to the moment-to-moment needs of their baby. This is particularly true of feeding a baby.

Breastfeeding is the physiological norm for humans, and there is much public health evidence to support its health, social, emotional and financial benefits, both in the short and the long term. Nevertheless, for many new mothers and fathers, decisions about feeding their baby can be complex and emotional.



4

Caring for our baby

Topic: Feeding our baby [2 of 5]

They may be influenced by how confident they – individually and as a couple – are in their understanding of:

- the physiology of breastfeeding, its benefits and perceived drawbacks; this includes an understanding of quantities, and especially of how small a baby's stomach is (e.g. comparing the size of a baby's stomach to a marble/walnut/ball can give mothers confidence in their own breastmilk supply and also reduce overfeeding in the event that parents choose to use formula)
- the risks of formula feeding and how to minimise these in the preparation of formula feeds and bottle sterilisation
- the skills involved in learning to feed, including positioning and attachment
- the judgement involved in knowing whether a baby's needs have been met
- the knowledge, attitudes and support of family, friends and practitioners
- the father's role.



4

Caring for our baby

Topic: Feeding our baby [3 of 5]

Here are some things that parents may say about their feeding choices:

'I want to do it for him and for me.'

'I like the fact breastmilk changes to suit your baby's needs.'

'I don't want to feel pressurised and then fail.'

'Going out for the day is much easier when you breastfeed, much less faff!'

'My friend found it a breeze – she's promised to help me.'

'My sister breastfed and she said she wasn't sure if her baby was getting enough.'



4

Caring for our baby

Topic: Feeding our baby [4 of 5]

'I want to bottle-feed so my partner and mum can help me.'

'My mum and my sister bottle-fed, so that's what I feel better doing.'

'I already feel like I am letting him down if I bottle-feed.'

'There is no way that I'd be any good at the sterilising and stuff.'

'Bottle-feeding is less embarrassing when you're out with other people.'

'I've heard that it is not as healthy as breastfeeding.'

How can you encourage mothers and fathers to think about the practical and emotional aspects of feeding their baby, so that they can make well-informed decisions? Are you familiar with UNICEF's Baby Friendly Initiative?

[Click here to download a sample activity sheet on feeding.](#)



4

Caring for our baby

Topic: Feeding our baby [5 of 5]

Research suggests that:

- Breastmilk provides the best nutrition for babies. It has the right amount of nutrients and antibodies and it alters to meet the changing needs of growing babies, protecting against gastro-intestinal disease, respiratory tract infections, urinary tract infections, otitis media (ear infection), diabetes, heart disease, sudden infant death syndrome, dental caries, obesity, allergies, etc. It also provides protection for the mother against breast and ovarian cancers, and late onset diabetes.
- Interactive antenatal group work that involves local, experienced breastfeeding women as volunteers and that covers positioning and attachment, as well as the prevention of nipple trauma, is effective in supporting the initiation and continuation of breastfeeding.
- Involving fathers in understanding the benefits of breastfeeding and the importance both of communicating their approval of breastfeeding to their partner and of helping with the practicalities have been shown to increase breastfeeding rates.



4

Caring for our baby

Topic: Keeping our baby safe [1 of 2]

New mothers and fathers want to do everything they can to protect their baby from illness, injury and harm.

These are some of the things that have a positive effect on babies' safety:

- Using car seats, carriers and prams
- Not exposing babies to tobacco smoke
- Using protection and clothing that regulate a baby's body temperature in sun and cold
- Ensuring safety in the home – e.g. protecting a baby from hot drinks, unguarded fires
- Ensuring safe sleeping arrangements: policies vary from area to area, but most have a safe sleeping policy to refer to. However, it is important to allow parents to discuss bed-sharing and its risks – and potential advantages for breastfeeders. Providing information on safer bed-sharing makes sense, since research shows that the majority of parents will share a bed with their baby at some point
- Using carers who are old enough and experienced enough to know the baby's needs
- Mothers and fathers reducing their use of alcohol and drugs
- Immunising the baby
- Noting signs of illness, being familiar with first aid and knowing whom to contact for advice and in an emergency
- Breastfeeding: this has been shown to help in reducing infant mortality.

Through your group and take-home activities, how can you help mothers and fathers plan for how they can protect their baby?



4

Caring for our baby

Topic: Keeping our baby safe [2 of 2]

Research suggests that:

- Accidents to children under the age of five years occur most frequently in the home, and affect twice as many boys as girls. There is also a social class factor: children in disadvantaged circumstances are five times more likely to die as the result of an accident.
- Since parents have followed the advice on reducing the risk of cot death, incidence of sudden infant death has fallen by 70%; nevertheless, over 300 babies and their families still experience this tragedy every year.
- Since 1980, there has been a steady decline in neonatal mortality rates (deaths before age 28 days) and post-neonatal mortality rates (deaths between 28 days and one year) in England and Wales.
- Infant mortality rates are lowest among the babies of mothers aged 30–34 and highest among mothers aged under 20, but there are significant ethnic differences – for example, Pakistani and Caribbean babies are over-represented in the mortality rate.

[Click here to download a sample activity sheet on immunisation.](#)



4

Caring for our baby Useful resources [1 of 3]

Topic: Getting to know our baby

Department of Health (2009) *Birth to Five*, Chapter 2, 'Getting to know your baby'; Chapter 5, 'Learning and playing', available at: www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_107303

Murray L and L Andrews (2005) *The Social Baby: Understanding babies' communication from birth*, Richmond: CP Publishing.

NSPCC/Children's Project (2004) *The Social Baby: Understanding babies' communication from birth* (DVD), available at: www.nspcc.org.uk/inform/trainingandconsultancy/learningresources/socialbaby_wda47886.html

Topic: Bonding with our baby

Gerhardt S (2004) *Why Love Matters: How affection shapes a baby's brain*, Hove: Routledge.

Sunderland M (2007) *What Every Parent Needs to Know: The incredible effects of love, nurture and play on your child's development*, London: Dorling Kindersley.

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Caring for our baby Useful resources [2 of 3]

Topic: Feeding our baby

Best Beginnings (undated) *From Bump to Breastfeeding* (DVD, or available to watch online at: www.bestbeginnings.org.uk/watch-fbtb).

Department of Health (2009) *Birth to Five*, Chapter 1, 'Feeding your baby', available at: www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_107706.pdf

NHS Choices, 'Breastfeeding tips', available at: www.nhs.uk/Planners/breastfeeding/Pages/breastfeeding-tips.aspx

Righard L (undated) *Delivery Self-attachment* (DVD) (item number 4509), available from: www.nctshop.co.uk/professional/

UNICEF's Baby Friendly Initiative: www.babyfriendly.org.uk/

National Breastfeeding helpline telephone number: 0300 100 0212.

Topic: Keeping our baby safe

Health and immunisation

Department of Health (2009) *Birth to Five*, Chapter 7, 'Protecting your child' and Chapter 8, 'Treating illnesses, infections, injuries', available at: www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_107303

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Caring for our baby Useful resources [3 of 3]

NHS Choices (2011) *A Guide to Immunisations up to 13 Months of Age*, available at:

www.nhs.uk/Planners/vaccinations/Documents/A%20guide%20to%20immunisations%20up%20to%2013%20months%20of%20age.pdf

NHS Choices, 'Vaccinations', available at: www.nhs.uk/planners/vaccinations/Pages/Landing.aspx

Sudden infant death syndrome (cot death)

Foundation for the Study of Infant Death website at: <http://fsid.org.uk/page.aspx?pid=406>

Child safety

Royal Society for the Prevention of Accidents (RoSPA) website at:

www.rospa.com/childsafety/inthelife/default.aspx

Child Accident Prevention Trust – resources for practitioners and for parents, available at:

www.capt.org.uk

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Our health and well-being

Introduction

Bringing new life into the world is an extraordinary experience and can be deeply fulfilling; but it can also be difficult and demanding, particularly if families are exposed to personal, social or economic adversity. No one knows exactly how well each parent will cope, but it helps if mothers and fathers are resilient, physically healthy and positive in terms of their mental health and well-being. In short, new parents need to take care of their own health and well-being.

What this theme offers parents

- Understanding of how their physical health impacts on their baby and themselves.
- Understanding of the impact of their mental health and well-being on their baby and on themselves.
- The chance to plan how to cope with the daily demands of early parenthood.
- The opportunity to make changes in lifestyle and behaviour to protect and improve their own health and well-being.
- Understanding of the impact of pregnancy, birth and early parenthood on a couple's loving and sexual relationship.

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Our health and well-being

Overview

This theme covers

- Looking after myself and our growing baby
- Looking after my partner and helping her/him to make changes
- Feelings and moods – depression, stress and anxiety
- Rest, health, nutrition, physical activity
- Smoking, alcohol and drug use
- Being disabled or having a partner with a disability (including a learning disability)
- Love, sex and contraception
- Common problems in pregnancy – responses of mothers and fathers

Sample topics for this theme

- **Being resilient**
- **Being healthy**
- **Feeling good**
- **Coping well**
- **Making changes**
- **Love and sex**

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- During pregnancy and infancy, parents are more highly motivated to make changes that contribute to the health and development of their baby. This is something that your groups and activities can tap into and support.
- There are lots of aspects to this theme that relate to future well-being. Your activities can help parents think about what they want for themselves and their family, the things they can do themselves, and what can support them to reach their goals.
- This theme covers some sensitive and personal issues that may call on all your expertise and interpersonal skills. Remember that not everyone will have a partner.
- Talking about sex and relationships in a public arena is culturally taboo in some communities. Consider whether initial discussions may be better facilitated in single-gender groups.
- Offer a session on 'planning my family', to include discussion of:
 - good reasons for having children
 - the ideal number for me/us
 - the ideal spacing of children for me/us
 - what is best for children
 - how and when to decide to have children.
- An approach that is non-judgemental and respectful, and that encourages people to think through the issues for themselves, is probably the most effective way of supporting change.



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Our health and well-being

Topic: Being resilient [1 of 3]

Becoming a parent and being able to give your baby the best start in life draws heavily on the inner resources of every new mother and father.

There are particular features of parents' lives that are likely to make the transition to parenthood easier and more successful, and there are also features that are likely to make things more difficult. Some of these are set out in the list below.

Which features below do you think best promote a good start for parents and babies?

What are other factors that can affect infant development and early parenting?

- Looking forward to having a baby
- Having your own home
- Being a member of a faith community
- Having a circle of close friends and/or family
- Having a positive, optimistic nature
- Being a flexible problem solver
- Being physically fit and healthy
- Having a fulfilling, paid job
- Being in a coercive, abusive or volatile couple relationship
- Suffering past periods of depression/anxiety
- Having previously experienced stressful life events.



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Our health and well-being

Topic: Being resilient [2 of 3]

From your experience, which of these features seem key to building a resilient family?

Thinking about families you know, how might some of these features make it harder to be a nurturing parent?

It is helpful to think about the protective factors that are present in all new mothers and fathers, as these will build their resilience and help them to adjust successfully to parenthood. Resilience comes from previous life experience, as well as from current circumstances. One way in which parents can build personal resilience during pregnancy and after birth is to ensure that they have supportive people around them at these times.

[Click here to download a sample activity sheet on how parents can identify sources of support.](#)



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Our health and well-being

Topic: Being resilient [3 of 3]

Research suggests that:

- Social support can have a positive impact on birth outcomes and early parenting.
- The quality of the couple relationship and the effectiveness of partner support both independently affect maternal well-being.
- Chronic stress and depression in mothers may affect fetal growth and increase the risk of having a low birth weight baby.
- Parents' psychological distress and socioeconomic adversity in the family may both independently affect children's cognitive and social development.



4

Our health and well-being

Topic: Being healthy

A mother's health has a direct impact on the healthy development of her baby as he or she grows in the womb. Once the baby is born, the health of both parents is likely to affect their capacity to care for their baby.

These are some of the health issues after the birth that parents might like to know about:

- Recovering from a vaginal birth
- Recovering from a caesarean
- Resting and getting physically fit after the birth
- Understanding the changes in a new mother's body
- Coping with tiredness, sleep deprivation and new routines
- Fathers and mothers supporting each other's healthy behaviour.

What other aspects of health and well-being could you cover?

Research suggests that preparation for birth and parenthood groups can help mothers and fathers change their attitudes towards their health during pregnancy and help them to adopt healthy behaviour in terms of exercise and nutrition.

[Click here to download a sample activity sheet on the importance of maintaining parents' health.](#)

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Our health and well-being

Topic: Feeling good [1 of 3]

The psychological well-being of both parents matters for the child and for the family as a whole, and is as important as physical health. Pregnancy and the postnatal period will bring emotional highs and lows. Parents can feel excited, exhilarated and fulfilled; but this may also be a time when difficult past experiences can surface, when hormones cause mood swings, and when the transition to parenthood makes men and women re-examine their personal and social identities. Living up to society's expectations of mothers and fathers can be hard. Depression, anxiety and 'baby blues' are common experiences, and sometimes pregnancy and childbirth can trigger severe mental illness among women. Mothers and fathers with pre-existing mental health problems may need specific advice on how best to manage their condition during pregnancy and after the birth.

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Our health and well-being

Topic: Feeling good [2 of 3]

How confident do you feel about helping parents to learn about the following?

- The effects of stress and anxiety on the baby during pregnancy
- Changes in the moods and feelings of both parents during pregnancy
- The symptoms of depression/anxiety in men and women
- The impact of the birth and early parenthood on mental health
- The signs and symptoms of depression and anxiety
- The signs and symptoms of severe mental health problems
- The impact of mental health problems on parents' capacity to care for their baby
- When to talk to their partner and their family
- When to seek professional help and advice.

How will you help parents to explore these safely in your group?

Click here to download a sample activity sheet that encourages parents to think about their moods and feelings.

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Our health and well-being

Topic: Feeling good [3 of 3]

Research suggests that:

- Group-based social support, including antenatal preparation for parenthood courses, can be effective in helping women with mild symptoms of depression and anxiety.
- If either partner becomes depressed, the other is also at risk; having a satisfying and supportive couple relationship increases the chances of improvement.
- Men also suffer from elevated rates of depression/anxiety both before and after the birth (at approximately half the rate of women), and can benefit from assessment and support.

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Our health and well-being

Topic: Coping well [1 of 3]

Most parents cope very well, but sometimes the demands of looking after a young baby can quickly become stressful and upsetting, especially when babies are unwell or difficult to settle, and when new mothers and fathers feel tired and worried. Infant crying is the most frequent source of stress, and short-term feeding problems are common. Parents need to be able to look after themselves and each other as they try to manage these and other challenges and problems of early parenthood.

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Our health and well-being

Topic: Coping well [2 of 3]

What are the strengths that mothers and fathers can draw on to build their confidence as new parents?

- Realising how much they know already
- Acknowledging the strengths they bring to being a parent
- Trusting themselves as experts in their life and their baby.

How can you help mothers and fathers learn and practise new coping skills that will help ease the kind of stresses of having a baby and being a parent that are listed here?

- Managing common situations with the baby, such as prolonged crying or a baby who won't feed or who won't settle
- Feeling upset and overwhelmed with looking after their baby
- Feeling alone and unsupported
- Feeling they have no role in looking after their baby
- Losing confidence in being a new parent
- Finding it hard to manage day-to-day life alongside caring for their new baby
- Worrying about money and work
- Feeling anxious and not knowing what to do.

What effect could additional demands – such as being a carer, having a disability or having a baby with a serious illness – have on someone's ability to cope?

4

Our health and well-being

Topic: Coping well [3 of 3]

Research suggests that preparation for birth and parenthood groups and activities that cover couple relationships, co-parenting skills, child development and problem-solving skills can help mothers and fathers to cope more effectively.

[Click here to download a sample activity sheet on how parents can put together a 'coping pack'.](#)

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Our health and well-being

Topic: Making changes [1 of 4]

Humans are instinctively motivated to protect their baby and, especially during pregnancy, are receptive to learning and making changes if they will benefit their child. Preparation for Birth and Beyond groups can connect with these motivations and support mothers and fathers to make changes in their health choices and other behaviours. Women and men who smoke are much more likely to give up when expecting a baby, and to cut out alcohol and improve their diet.

At the same time, we all know that changing our behaviour is difficult and involves loss. Being given information or being told to change is unlikely to produce sustainable change. A skilled group facilitator in Preparation for Birth and Beyond groups needs to understand the principles of behaviour change set out in [Section 2](#).

Mothers and fathers are more likely to make changes if:

- they feel the change will result in better outcomes for their baby
- they are committed to the change
- they feel that they are likely to succeed
- they set a goal, with small, achievable steps for getting there
- they see other people like them behaving in the same way
- they trust the person who is supporting them and feel that that person cares about them and has their child's interests at heart
- the behaviour is reinforced through other routes
- the change meets their agenda, rather than that of professionals.



4

Our health and well-being

Topic: Making changes [2 of 4]

In your experience, what are the best ways of encouraging people to change?

No matter how much you may want other people to change, few parents are likely to make changes that they think are impossible to achieve or that will not bring them any benefits. Non-judgemental and respectful ways (like motivational interviewing) may be more effective than more prescriptive approaches. The emphasis is on encouraging adults to think for themselves about their current situation, the changes they could make and the risks and advantages involved.

Without exhorting or directing them, how could you help the people in your group to think positively about change?

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Our health and well-being

Topic: Making changes [3 of 4]

Here is how parents have spoken of the ways in which various practitioners have tried to help them make changes:

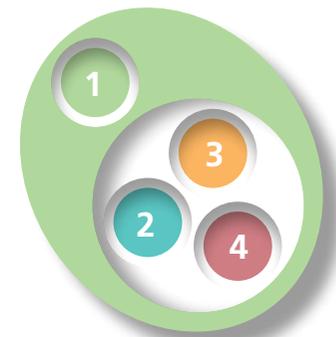
'She just went on and on about the risks to do with my weight... I stopped listening and agreed to things that I just wasn't going to do.'

'Things started to change for me when I felt she realised how hard I found it to get help for my depression.'

'She helped us to work out how we could support each other in quitting together.'

'It was like he knew all the answers, judging me. We just ended up arguing.'

'She didn't try and persuade... She listened to how I felt inside about exercise and my body.'



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Our health and well-being

Topic: Making changes [4 of 4]

'She always noticed the changes. No matter how little they were, they were tough for us.'

'She asked us if we wanted to talk about it... We felt in control.'

'It was as if she would threaten me with what would happen... Like I didn't know those things already.'

'He helped me to think about how my drinking was making it harder for my partner to stop.'

How do you listen to and empathise with mothers and fathers?

How do you help them to explore the pros and cons of making changes and to devise their own strategies for success in altering their behaviour and lifestyle?

[Click here to download a sample activity sheet to guide parents on setting goals and making plans.](#)



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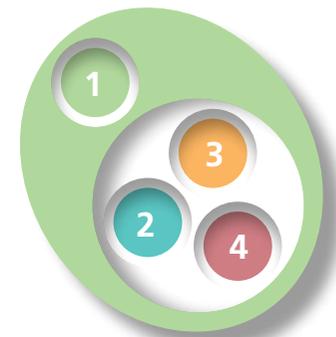
Topic: Love and sex [1 of 3]

Intimacy, commitment, desire and love may be expressed in lots of different ways at different times in the course of a relationship. Sex is an integral part of being a couple and has the potential to enrich and maintain relationships. New mothers and fathers may be concerned about how the birth and early parenthood will affect their love and sex life. Pregnancy and the birth of a baby may bring changes to what love means within a couple, as well as to their sexual relationship.

Individuals and couples may feel uncomfortable talking about love and sex for various personal, family, social and cultural reasons. Professionals need to recognise that talking about sex and relationships in a public arena is culturally taboo in some communities. They need to approach the topic by explicitly acknowledging this and by checking to see whether initial discussions may be better facilitated in single-sex groups – or perhaps even individually.

We also need to be aware that some adults may not be confident about using vocabulary to describe intimate parts of the body in their own language and then having to translate those terms into English. For women who have experienced female genital mutilation, discussion of sexual pleasure will need to be facilitated in a culturally and linguistically appropriate manner.

Contraception also needs to be included in this topic in a similarly sensitive way, recognising that parents value information that can assist with their family planning and maintenance of their sexual health.



4

Our health and well-being

Topic: Love and sex [2 of 3]

Which of the following topics do you feel more comfortable talking about with groups of parents, and which ones less so?

- The ways in which couples express their love for each other
- The ways in which love and affection change with the birth of a baby
- Love for your baby, for your partner and for your other children
- Changes in sexual routines and positions in pregnancy and early parenthood
- The potential effects of delivery methods, perineum tears, damage and sutures
- Changes in sexual relationships after the birth as a source of dissatisfaction
- Differences in sexual desire between partners
- The ways that couples can maintain love and romance
- Sex, contraception and another pregnancy.

How can you encourage couples to think about looking after their love for each other and sexual relationship once their baby is born?

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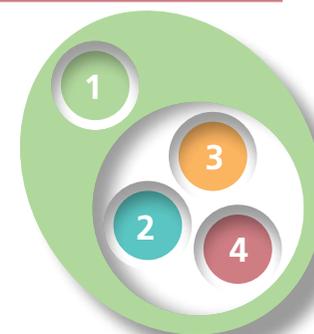
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Topic: Love and sex [3 of 3]

Research suggests that:

- Many new mothers may experience some discomfort or pain in their initial experiences of intercourse after childbirth. This, combined with the tiredness associated with looking after their baby, means that most couples report a decline in their sexual relationship.
- Up to half of all mothers and a fifth of all men may still feel less sexually responsive 6–12 months after the birth of their baby, and a third of couples report continuing sexual problems 3–4 years after the birth.
- Frequent and close spacing of children can affect the outcomes for children and for mothers and family relationships.

[Click here to download a sample activity sheet on how parents can prepare for the way having a baby will affect their feelings for each other and their sex life.](#)

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Useful resources [1 of 2]

Topic: Feeling good

Department of Health (2009) *The Pregnancy Book*, Chapter 7, 'Feelings and relationships', available at: www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/@sta/@perf/documents/digitalasset/dh_117109.pdf

Department of Health (2011) *No Health Without Mental Health*, available at: www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_124058.pdf

Fatherhood Institute (2010) 'Fathers and post-natal depression', available at: www.fatherhoodinstitute.org/2010/fatherhood-institute-research-summary-fathers-and-postnatal-depression/

NICE guideline on 'Antenatal and postnatal mental health: clinical management and service guidance', available at: <http://guidance.nice.org.uk/CG45>

Topic: Making changes

Rollnick S, W Miller and C Butler (2008) *Motivational Interviewing in Health Care: Helping patients change behavior*, New York: Guilford Press.

Decision balance tools

There is a range of these online. Some useful ones include:

www.practicalhappiness.co.uk/media/download_gallery/Decision%20Balance%20Sheet.pdf

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Our health and well-being

Useful resources [2 of 2]

www.markbrennaman.com/quitsmoking/decisional.pdf

http://knowledgex.camh.net/primary_care/toolkits/addiction_toolkit/alcohol/Documents/Toolkit-Tool_DecisionBalance.pdf

Topic: Love and sex

NHS Choices provides information on a range of topics, e.g. types of contraception, talking about sex, healthy sexual relationships, finding help:

www.nhs.uk/livewell/contraception/Pages/Contraception-hub.aspx

Brook has information on contraception, sex and relationships, sexually transmitted diseases, rights. It has a tool to help individuals choose the best contraceptive method for their circumstances: www.brook.org.uk/contraception/my-contraception-tool

The Family Planning Association (FPA) also has a contraception planning tool for individuals, as well as factual resources for professionals: www.fpa.org.uk/home

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People who are there for us

Introduction [1 of 2]

This theme focuses on how mothers and fathers look for and use various types of practical, emotional and social support from different people during their pregnancy and in their new lives as parents. They are likely to look for support from friends, family (including grandparents), work colleagues, local community organisations and online communities. Preparation for Birth and Beyond groups provide valuable opportunities to meet and make friends with other mothers and fathers going through the same life changes. Every session needs to include time for people to get to know and learn from each other, and activities to encourage this.

Having a baby also brings parents into contact – often for the first time – with services and practitioners such as midwives, health visitors, Sure Start Children’s Centres, local parents’ groups, the NCT and others.

Many parents need access to a wider range of support and services than those that focus just on pregnancy and children. Sure Start Children’s Centres provide valuable support with employment, childcare, financial advice, housing and social care. Health professionals can also help parents to access specialist help from mental health, child health, maternity care and social services. In order for parents to choose, they need to know what services are available, where they are, what they are for and how to use them.



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People who are there for us

Introduction [2 of 2]

What this theme offers parents

- The chance to meet other new mothers and fathers.
- Understanding of the practical, emotional and social support they may need during pregnancy and early parenthood.
- Help in identifying to whom they will turn – within their family, among their friends, in their community and peer group – for different types of support.
- Information about the professional support and services available during pregnancy and early parenthood, and how to use them.

Sample topics for this theme

- **Support for us**
- **Meeting other new mothers and fathers**
- **Services for new parents and young babies**



4

People who are there for us Overview

This theme covers

- Asking for help and advice:
 - when?
 - how?
 - communicating what I/we want
- Whom can I rely on?
 - my partner
 - my/our family, friends and community
- Who will listen and who will help me/us?
- Where to meet people like us and make new friends
- What services I/we can expect:
 - for whom they are intended
 - when they can be accessed
 - what they are designed for
- Where can we get advice on financial benefits, housing, paternity and maternity leave, and our rights?
- What help is there as our baby gets older?

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- Not everyone is in the same position: some parents have well-developed support networks, while others do not.
- Consider how you will address the needs of parents with more individual issues: those who are isolated, who have little practical or emotional support, or who are in an abusive relationship.
- Consider how you will meet the needs of parents who may be new to the country, who have little understanding of local services or who have difficulty in communicating with service providers.
- Consider how you will meet the needs of fathers, given that local services for babies and children tend to be focused on mothers.
- Take positive steps to organise your group and take-home activities so that mothers and fathers can meet and get to know other parents.
- Not all new parents know how and when to ask for help.
- Be familiar with the different types of services available to mothers and fathers in your local communities.
- You may need to take positive steps to help disadvantaged and marginalised parents, young parents and parents from black and minority ethnic communities feel welcome and to use local services and community activities.
- Some parents will be very comfortable using online resources, while others will not.



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People who are there for us

Topic: Support for us [1 of 2]

Family and friends are the most important sources of learning and support – both practical and emotional – for expectant and new mothers and fathers. Grandparents, in particular, often play a very important role in supporting their children and grandchildren. We learn from and imitate our peers, and, while most support is positive, it needs to be recognised that families can bring their own challenges and that some friends are not good role models for parents. Also, not all of us find it easy to make friends and relate to a group of people we don't know. Group facilitators act as role models for listening, turn taking and making everyone feel welcome.



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People who are there for us

Topic: Support for us [2 of 2]

Individual mothers and fathers are likely to need different types of practical, emotional and social support. Here are some examples:

Practical

Pregnancy: Knowing about maternity/paternity leave and pay

Birth: Making choices about pain relief in labour; understanding what is required of a birth partner

Early parenthood: Knowing how to change nappies and bath their baby; doing things for their partner so that they can rest and have a break; help with shopping or time for themselves

Emotional

Pregnancy: Sharing their hopes and fears about seeing their baby

Birth: Someone who is there for them

Early parenthood: Feeling tired and exhausted; joyous about the changes in their baby

Social

Pregnancy: Sharing the changes that are happening

Birth: Somebody to call to let them know what is going on

Early parenthood: Somebody to get out and about with; someone who helps but doesn't interfere

How do you help new mothers and fathers think about whom they can turn to within their family, among their friends or in the community for different types of support?

Click here to download a sample activity sheet on how parents can identify the support they need and how they can find it.



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People who are there for us

Topic: Meeting other new mothers and fathers [1 of 2]

Supportive friendships between parents, particularly mothers, often form during pregnancy and in the weeks and months after the birth. These friendships can endure for years, bringing rewards (and sometimes difficulties).

What new parents have said are some of the benefits and challenges of meeting other new parents:

'Feeling more confident because other parents feel the same.'

'Learning ways of doing things from other new mothers.'

'Knowing that I am not alone.'

'Being at work all the time and not meeting anyone.'

'Knowing people who are also balancing work and a new family life.'

'Having to look after another new parent who is going through a rough time.'

'Having someone to turn to when things aren't going well.'



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People who are there for us

Topic: Meeting other new mothers and fathers [2 of 2]

'I have different views to others in the group.'

'Meeting only one other dad, and not really hitting it off with him.'

'Feeling that I don't fit in with these other parents.'

'My partner sees the mothers but I don't get to see the dads.'

'Feeling judged or criticised for what I am doing.'

'Feeling my baby isn't doing as well as the others.'

'It takes lots of organisation.'

How do you help new mothers and fathers meet other new parents?

Parents can benefit from meeting and making friends with other new mothers and fathers through Preparation for Birth and Beyond groups. It may be worth maintaining smaller group sizes, in order to give parents time during sessions to talk and get to know each other, and to have groups that continue after the babies are born. Most local communities have opportunities for people to meet other parents, such as Sure Start Children's Centres, the sports centre or swimming pool, baby clinics, etc.

Click [here](#) to download a sample activity sheet on how parents can find out about the resources available to them.



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Topic: Services for new parents and young babies [1 of 2]

Having a baby can be the first experience that new mothers and fathers have of health services and professionals such as midwives, health visitors, Sure Start Children's Centre staff and other antenatal education practitioners. There will be much that is new, and parents report that services can be intimidating. Not everyone finds it easy to engage with professionals, especially if previous experiences have left someone feeling distrustful or judged.

How do you help parents to feel confident about using services? It may help to think about:

- a wide range of services, including financial benefits, housing, paternity and maternity leave, birth registration and rights
- knowing the services and the people who work in them
- whom to turn to for what
- the information and services available by telephone and on the internet
- what is available as the baby gets older
- not just giving information out, but signposting to what is available and where
- helping people to communicate their needs so that they are understood by professionals and services
- giving feedback to services about what parents say, and suggesting to practitioners how they might make it easier for parents.

Money concerns may be a particular issue for many parents.

[Click here to download a sample activity sheet about the professionals and services available to parents.](#)



4

People who are there for us

Topic: Services for new parents and young babies [2 of 2]

Research suggests that:

- Most couples report a decline in disposable income, often associated with increased costs and sometimes decreased income as (generally) mothers switch to working part time or not at all.
- Particularly for couples on modest incomes, the financial squeeze can substantially erode the opportunities they have for individual and shared leisure activities, which may explain why low income is associated with a marked deterioration in relationship satisfaction in the transition to parenthood.
- There is a range of financial and other support services available to mothers and fathers to help them with their family finances and budgeting.

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Topic: Meeting other new mothers and fathers

NCT assistance in meeting other parents: www.nct.org.uk/branches

Websites for new mothers and fathers, such as:

www.netmums.com/

<http://pregnancyforum.org.uk/>

www.mumsnet.com/Talk?nct=y

Topic: Services for new parents and young babies

Department of Health (2009) *Birth to Five*, Chapter 10, 'Useful services', available at:

www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_117117.pdf

Financial advice

Department of Health (2009) *Birth to Five*, Chapter 11, 'Benefits and your rights in the workplace', available at: [www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_117118.pdf)

[documents/digitalasset/dh_117118.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_117118.pdf)

Money Advice Service, 'Parent's guide to money', available at:

www.moneyadvice.service.org.uk/parents/

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Our developing baby



Topic: Our growing baby

Idea for a session activity: Naming our baby

Choosing a baby's name is one of the most important decisions we make for our children. Our name is the most personal thing we own.

Learning outcome: Parents feel encouraged to think about their baby as a person and to develop a relationship with him or her while the baby is still in the womb.

Task: In pairs or small groups:

- Do you know why you were given your name?
- How are you deciding what name to give your baby?
- What does the name you have chosen mean to you? What's special about it?

Note: You may need to adapt this, as sometimes parents don't want to share the name in pregnancy, and in some cultures people name a baby after the birth. Alternatively, in a group with mixed cultures, participants may enjoy telling others about the naming and other ceremonies that accompany the birth of a baby.

4

Our developing baby



Topic: Our growing baby

Idea for a take-home activity: Learning about baby's development

Learning outcome: Parents are more knowledgeable about the growth, development and abilities of their baby in the first few hours, days and weeks of life.

Task: Ask mothers and fathers to investigate websites that show the growth, development and abilities of their baby in the first few hours, days and weeks of life.

Materials: To do this you will need to check and recommend websites, such as: www.bbc.co.uk/health/physical_health/child_development/newborn_index.shtml

Note: Not all parents will be computer literate or have access to a computer at home, but they may be able to use computers in the local Children's Centre or library.

Idea for a session activity: What affects our baby's development?

Learning outcome: New mothers and fathers think about what affects their baby's development, about who and what can help them, and about how they can tap into the support they need.

Task: Ask parents to think about the following statements on their own, and then to talk to their neighbour or partner. Speak the examples if the group seem to be stuck.

What I want most for my child:

- When my child is born/3 years/5 years (delete as appropriate), I hope he or she will (e.g. be happy at school)

.....

- The things I can do now to help my child are (e.g. spend special time together)

.....

- The things in my life that can help are (e.g. wanting my baby to do well)

.....

- The things in my life that can make this difficult are (e.g. not knowing where to get help)

.....

- The kind of support that could help is (e.g. help for me to read)

.....

Ask the group members to share their ideas. The group leader can provide prompts, encourage discussion and supply additional information, if necessary, to ensure accuracy.

Materials: Printed sheets with the statements above. These conversation starters are downloadable from the Child and Maternal Health Observatory (ChiMat) PREview Planning Resources website: www.chimat.org.uk/PREview

Idea for a session activity: Post boxes

Learning outcome: Parents share their hopes and feel reassured about their worries.

Task: Make two post boxes, one with 'What I hope for is...' written on it, and the other with 'What I worry about is...'

Give out cards in two different colours and ask everyone to write down all their hopes on cards of one colour and all their worries on cards of the other. Add some that you have heard from parents before. Encourage the group to post as many cards as possible. If you think some people might not be used to writing, ask people to work in small groups and to come up with two or three ideas for both hopes and worries; then get them to feed into the subsequent group discussion.

Take out all the cards and ask people to pick one each and to read it out to the group. Stimulate discussion by asking questions such as:

- 'What would you say if your friend told you this worry?'
- 'This is a lovely hope, what could help make it happen?'
- 'How does this worry make us feel?'

4

Changes for me and us



Topic: Becoming a mother/father

Idea for a session activity: How we change as we become mothers and fathers

Learning outcome: Expectant parents understand how they may change and develop as individuals and as partners in a relationship when they become mothers and fathers.

Task: Ask each new mother and father to draw a circle and divide it into different-sized segments in proportion to their roles/priorities before pregnancy. You might suggest that they label the segments with simple drawings or colour them, rather than use words. In small groups, first encourage the participants to show the others how they have represented themselves. Then ask them to imagine their priorities and roles after their baby is born and to comment on the similarities and differences.

Materials: Paper, pens.

Idea for a take-home activity: Our changing relationship

Learning outcome: Mothers and fathers understand the personal changes they will make individually and in their relationship once they become parents.

Task: Ask each mother and father, if possible, to talk to someone of the same sex whom they know well and who has become a parent in the last couple of years. Suggest that they ask the following types of question to find out what kind of changes they have experienced and how becoming a parent has affected their relationship with their partner. (It may help to ask the group to imagine that they are being asked these questions and to think about what would make it easier for them to be open and honest):

- 'What is the best part of being a dad/mum?'
- 'What helped it to be like this?'
- 'What do you wish you'd known before you had a baby?'
- 'Has becoming a parent affected your relationship/how you get on with your partner/mum/sister, etc.? If so, how?'

Suggest that they come to the next session prepared to share what they have learned.

Materials: None – or you could give parents some prepared questions to get the conversation going.

Idea for a session activity: Managing differences

Learning outcome: Parents gain an understanding of the fact that relationship changes are normal and work out ways of managing their differences that can strengthen their relationship.

Task 1: Write a scenario about a fictitious couple (with a similar background to your group) that is managing the change really well, and ask the group to identify the things that tell them it is going well and to say how the mother and father (or others) are contributing to this.

Write a similar scenario where a couple is finding it hard to get on after their baby is born and ask the group to say why they think this is happening and what the couple (and others) could do to make the situation easier. You may like to ask a local parent to help you, especially if you want to reflect different cultural norms.

Task 2: You could ask the group to share their ideas about the best ways of sorting out arguments in relationships. List these on a flip chart. (Additionally, you may want to suggest, as a take-home activity, that each group member could talk to his or her partner about some of the things that currently cause disagreements between them and about how these (or similar things) may lead to arguments after their baby is born.) Finally, ask the parents to think about how they can use the ideas generated by the group to help them manage any disagreements that may arise after the baby is born.

Materials: Scenarios, flip chart, 'tips' sheet on managing conflict and sources of further information.

Note: The facilitator needs to be ready to handle difficult issues if they arise. See Section 3 'Skilful facilitation' and practise any activities and consider possible tensions beforehand.

Idea for a session activity: Parental rights and responsibilities

Learning outcome: Mothers and fathers learn and think about their parental rights and responsibilities.

Task: To facilitate discussion of some of the issues facing parents, provide cards on which you have written examples of common dilemmas or true/false statements. Ask a member of the group to take one and read it out. Then ask the whole group for their views. What is reasonable/unreasonable? Some examples could include:

- **We are married, so we will both have parental responsibility.**

TRUE: In England and Wales both parents have parental responsibility if they are married at the time of birth, and continue to have it should they divorce.

- **We're not married and I didn't go with my baby's mother to register the birth, so I can't have parental responsibility.**

FALSE: Fathers can set up a parental responsibility agreement with the baby's mother, or have a parental responsibility order made by a court.

- **I think being a supportive parent to my child is the important thing.**

TRUE: Children whose mothers and fathers are involved in their learning activities can help them to do better than children whose parents are less involved. See: www.learningmatters.co.uk/sampleChapters/pdfs/9781844452682-1.pdf

- **I am the female civil partner to the mother of our baby, so I can't be registered on his birth certificate.**

FALSE: It is possible for both partners' names to appear on the baby's birth certificate if the birth mother conceived using a fertility treatment. See: www.direct.gov.uk/en/N11/Newsroom/DG_180262

- **Parental responsibility is about having contact with the child, deciding about the child's education and agreeing to medical treatment.**

TRUE: Although there is not a detailed description of parental responsibility, it includes these roles and others

(see www.direct.gov.uk/en/Parents/ParentsRights/DG_4002954).

More information is available from:

www.direct.gov.uk/en/Parents/ParentsRights/DG_4002954

Materials: Cards with common dilemmas or true/false statements.

Idea for a take-home activity: Balancing family life with work and other commitments

Learning outcome: Mothers and fathers think about and learn how they can balance their needs as parents and the needs of the family with work and other commitments.

Task: Ask parents to think about the commitments they have to work, to training and education, to family, and to religious and other community activities. Ask them to talk through with their partner (or with someone else they trust) what these priorities are and what support will be needed to manage them positively. This could be about people, services or benefits.

The Directgov website has much useful information on parental rights, responsibilities, parental leave, benefits and entitlements and finding childcare.

Materials: Printed copies of the Directgov website address or similar. Mothers and fathers who do not have access to the internet could be given printed copies of the web page.

Note: If there is someone who is unsupported in your group, make sure you can help them access the support they need.

Idea for a session activity: Expectations about labour and the birth

Learning outcome: Parents understand where their ideas and expectations about labour and the birth come from.

Task: Ask parents to form small groups to share their ideas about what labour and giving birth are like and where they got their ideas from. Ask each to summarise the discussion and their main sources of information. Suggested statements (and examples – though wait and see what ideas your group come up with first!):

I expect birth to be (e.g. painful, scary, wonderful)

.....

The things I know about birth are (e.g. it takes a long time, you can give birth in water)

.....

I know this from (e.g. TV programmes, friends)

.....

The best way to find out is

.....

Materials: You could have a PowerPoint® slide or a sheet with some quotes from parents, newspapers, TV dramas, etc. to help start the discussion.

4

Giving birth and meeting our baby



Topic: Birth partners

Idea for a session activity: Job description for a birth partner

Learning outcome: Mothers think about what qualities and skills they want in their birth partner.

Task: Ask participants to form small groups, with the mothers separate from the fathers and any other group members who are to be birth partners. Give each small group a large piece of paper, plus pens and other art materials, and ask people to draw up a job description for a birth partner. The job description should include the necessary knowledge, skills, personal qualities and tasks required of a birth partner. Ask the groups to share their ideas, alternating between the mothers and the birth partners. Make this a fun activity. Encourage parents to talk more about their ideas once they get home, and about how they will prepare themselves.

Materials: Paper, pens, art materials.

Idea for a session activity: Knowing when labour has started

Learning outcome: Parents feel confident about knowing when labour has started and when to call the hospital or midwife.

Task: Prepare beforehand, during the previous session, by asking the group – both mothers and fathers – to find out from members of their family and friends how they knew they were in labour, what happened to them in the early stages of labour and what helped.

Introduce the topic by highlighting the fact that everyone is different, but that there are some signs that are more important than others.

Brainstorm as a whole group or in small groups:

- How do mothers and fathers know that they (or their partner) are in labour? List all the possible signs, adding any that the group does not mention but should know about – ‘Here are some you may not have heard about...’
- What does this mean is happening?
- When should you ring the hospital or midwife?
- What are good things to do during this early time?

You could make up a series of cards with pictures or words that cover each stage of labour and ask parents what they think is happening, what it will feel like and what they will be doing.

4

Giving birth and meeting our baby



Topic: When nature needs a hand

Idea for a session activity: Pain relief

Learning outcome: Mothers and fathers understand each method of pain relief and the benefits and risks involved.

Task: Prepare a mixture of video clips or other resources that illustrate some of the methods of pain relief. Ask parents to split up into small groups and discuss the methods, using the BRAIN approach (**B**= Benefits, **R**=Risks, **A**=Alternatives, **I**=‘what do your Instincts say?’ and **N**=is there a ‘do Nothing’ option?). Parents could then (a) practise communicating their needs clearly and assertively with their caregivers, (b) imagine themselves in different scenarios, and (c) think about how they set this out flexibly in their birth plans as ‘birth preferences’.

Materials: It would be helpful to look at a variety of websites and books and discuss how they present information differently. There are lots of good sources of information available.

With thanks to Lifeline for this activity suggestion.

Idea for a session activity: Early days – knowing what to expect, being prepared

Learning outcome: Parents understand some of the issues that may arise in the early days following the birth of their baby.

Task: Prior to the session, place or pin the following items in the pocket or on the inside of a dressing gown: calendar/diary page; picture of a midwife; sanitary towel; small plastic jug; packet of tissues; breast pads; small packet of cereal; nappy spread with savoury spread; nappy spread with grainy mustard; umbilical cord clip; condom.

Ask one of the group to put on the dressing gown and reveal the hidden items.

Ask the members of the group to say what they think these items might represent and what they know, and add any information to cover the points as follows:

- calendar/diary page: length of stay in hospital depends on mother and baby health
- picture of midwife: contacts with midwife and other professionals
- sanitary towel: bleeding and blood clots
- small plastic jug: bathing and looking after perineal stitches
- packet of tissues: feeling emotional, baby blues, getting help
- breast pads: colostrum, lactation
- small packet of cereal: need for energy, plenty of fluids
- nappy spread with savoury spread: meconium stool
- nappy spread with grainy mustard: baby's normal stool – breastfeeding creates little waste
- umbilical cord clip: cord care
- condom: recommencing sex, contraception.

Materials: Dressing gown with items listed above in place.

With thanks to Lifeline for this activity suggestion.

4

Giving birth and meeting our baby



Topic: Meeting our baby

Idea for a take-home activity: Planning for the first hours with a new baby

Learning outcome: Mothers and fathers have a flexible plan for how they would like to spend the first few hours after their baby has been born.

Task: Ask parents to talk through and make a plan for how they would like to spend the first few hours together with their new baby. To help them prepare, suggest that they:

- talk to their midwife about what may happen after delivery
- listen to other parents talking about what it was like
- watch some videos on the internet that show parents and babies, and notice what happens after the baby is born
- find out about the hospital's policy on allowing fathers to stay after the birth.

Bear in mind that not all fathers choose or are able to be present at the birth, and mothers may not have a birth partner, or else may have chosen their mother, sister or a friend and/or a doula.

Materials: A printed prompt sheet with ideas to help parents think about their plan. Recommendations for websites and videos.

Idea for a session activity: How babies communicate

Learning outcome: Parents will think about the ways in which babies communicate.

Task 1: Ask parents to think about how adults differ from each other. Then ask how these differences might reveal themselves in young babies.

Task 2: Invite mothers and fathers who have young babies to come and tell small groups what they have learned about their own babies.

Task 3: Show a DVD clip in which a young baby is seeking out and responding to interaction with his or her mother (or father). Ask parents to watch for the social cues of the baby. Then show a clip of a baby who is disengaging and avoiding social contact. Ask parents to talk about the social abilities of these babies and what they can learn from this about their own babies.

Materials: New mothers and fathers invited to attend the session; clips from *The Social Baby*.

4

Caring for our baby



Topic: Bonding with our baby

Idea for a session activity: How parents bond with their baby

Learning outcome: New parents come to understand how mothers and fathers may bond with their babies during pregnancy and in the first few weeks after birth.

Task: Prepare the group beforehand and explain that they will have the opportunity to talk to more experienced parents about bonding with their babies, what is involved and how it has gone.

Invite parents to split up into small groups, each with one of the invited mothers or fathers. The small groups should each contain no more than eight parents. Fathers may wish to be with fathers, and mothers with mothers. Move around the groups to see how things are going and to make sure that quiet or shy parents have the chance to participate if they wish. Bring the whole group back together to draw out the learning: 'What did you learn?' 'Did anything surprise you?'

Materials: Invite mothers and fathers who are able to talk comfortably about their experiences of bonding with their babies. Encourage the parents to have their babies with them and ensure that they feel comfortable talking about their feelings and their babies' cues. Ask parents who have had different experiences, including those for whom bonding has not been easy.

4

Caring for our baby



Topic: Looking after our baby

Idea for a session activity: Practical skills

Learning outcome: The expectant mothers and fathers will gain a range of practical skills to look after their baby.

Task: Set up three or more areas in the room, so that parents can have a go at bathing, nappy changing and dressing a demonstration doll. Ask the parents to split up into small groups and to spend time undertaking each activity. Identify mothers and fathers who have experience and who are happy to help other parents. Encourage everyone to have a go, and encourage mothers and fathers to think about the practical and emotional skills involved in each task, inviting them to practise talking to the 'baby' as they handle it, and stressing the importance of the opportunities that these activities present for social interaction. (Some people may feel embarrassed, so have a go yourself. Keep it light-hearted and be prepared to look silly!)

Wherever possible, ask parents to follow this up by finding an opportunity to handle a real baby.

Materials: Demonstration dolls, towels, baby bath, water, blanket, nappies, etc., depending on the skills to be practised.

Idea for a session activity: Feeding our baby

Learning outcome: Expectant mothers and fathers understand infant feeding issues and the importance of support.

Task: If the group has not chosen this as a topic, ask if the members would like to have a session on 'feeding my baby'. Introduce the topic by highlighting the fact that feeding is not just about nutrition, but is about communication, comfort and expressing love. Discuss a newborn's instinctive behaviour (rooting) and ability to focus on the mother's face when held in her arms. Respond positively to all parents' views and feelings, and provide accurate, non-judgemental information. Discuss the value of skin-to-skin contact for all babies. Avoid making anyone feel they have made a wrong decision.

Write on a flip chart, or hand out to each person, a table to fill in headed 'What do you need for feeding to go well?' Ensure that you cover all the information necessary about learning a new skill and getting support; about what helps to establish and maintain breastfeeding (including avoiding and responding to common problems); about the importance of making up feeds and sterilising bottles correctly; and about holding the baby while feeding him or her.

Materials: Flip chart or personal sheets to hand out, pens.

Note: Parents in the antenatal stage should not be asked about their intended method of feeding, or be shown how to make up bottles at this stage. Mothers and fathers will probably take the decision to use formula once their baby has been born, and so it is enough to show them how to make up feeds safely and to sterilise equipment after the birth.

4

Caring for our baby



Topic: Keeping our baby safe

Idea for a session activity: Immunisation

Learning outcome: Mothers and fathers will know about the immunisation schedule and will have discussed any concerns.

Tasks: Ask parents to list what they know about immunisations, what they are for and why they matter (or prepare a quiz for them). Some parents may have more knowledge than others, and some parents may hold strong views. It is important to enable all parents to share their knowledge and views, as well as to ensure that the discussion is accurate and useful.

Materials: Personal Child Health Record (Red Book), pens, individual information sheets that parents can take away with them.

Idea for a take-home activity: Identifying sources of support

Learning outcome: Parents will be able to identify positive sources of personal support.

Task: Write an imaginary scenario relevant to your group and its community. For example:

'S is seven months pregnant with her first baby. Her partner was recently made redundant and has tried to find a new job locally, but without success. He has just got a new job, but has to work away all week. S's sister lives nearby, but she doesn't have children, and her mum lives 50 miles away. S is still working, and most of her friends she knows through work. S has become very tearful recently and she and her partner are arguing a lot more than usual. S is worried about how she will cope with a new baby.'

Questions to ask the group:

- 'If S was a friend of yours, what would you suggest that might help?'
- 'If you were her partner, what could you do to help?'
- 'Thinking about yourselves, who could be a source of support for you in the early weeks?'

Idea for a session activity: Keeping healthy

Learning outcome: Mothers and fathers feel that their own health matters and think about what they can do to look after their own health and that of their partner and their baby.

Activity: Ask the whole group: 'Why is the health of the mother and father important to a child? How do you rate your health generally?'

Get the members of the group to think about this individually and to give themselves a score of between 0 and 4 (4 being good).

Ask the group: 'How well have you felt in pregnancy (or since, if a postnatal session)?' Again, score this question.

Ask individuals to tell the other group members whether their health has been better, the same or not so good. Ask if anything surprises or interests them.

Ask the group to list all the changes and health problems they know about or have experienced – prompt to include:

- managing weight
- nutrition and eating habits
- the impact of smoking
- alcohol and drugs
- tiredness, exercise and rest.

Now, split the group into smaller clusters and give each of these clusters a copy of the list you have created together. Discuss. 'What advice would you give someone who was experiencing this?'

Next, reassemble the whole group and work through each cluster's suggestions, giving positive feedback and opening up areas of uncertainty to the whole group, using resources such as *NHS Choices Pregnancy Care Planner*: www.nhs.uk/Planners/pregnancycareplanner to find solutions.

Materials: Sticky notes, pens.

Idea for a take-home activity: Moods and feelings

Learning outcome: Mothers and fathers will have thought about their moods and feelings and will feel understood and supported.

Activity: During the session, ask the group to brainstorm all the different feelings and moods that mothers and fathers might experience at different stages of pregnancy and early parenthood – aim to note down as many as possible by filling in a pre-prepared flip chart/poster with empty boxes or thought bubbles.

Provide a smaller version that parents can take home and complete for themselves. Ask them to think about what helps them to feel good and what helps with the negative feelings. Next time you meet, ask them how it went and get them to share their ideas on what helps and who is there for them – including services and how those can help.

Materials: Prepared flip chart or poster with empty boxes, speech or thought bubbles; prepared sheets, similarly formatted, for parents to complete themselves; pens.

Note: The words may need to be explained for the benefit of those parents not fluent in English. See if anyone is finding this difficult and be prepared to offer space for a one-to-one conversation.

Idea for a session activity: Preparing a 'coping pack'

Learning outcome: Mothers and fathers have helpful strategies for coping with the common stresses and strains of looking after their young baby.

Activity: Explain that you would like everyone to help put together a 'coping pack' as a gift for expectant and new parents. This will be a box of 'tips and ideas' for everyone to use when things become stressful. They may like to make their own personal 'coping pack' as well.

Begin by asking the group to think about all the things that can make people feel relaxed and confident – prompt them to think of things about themselves, the baby, other people, their community and workplace. Ask them to call these out and write them on a flip chart. Ask the group for their thoughts on which are the most helpful and which they think would work when someone has a new baby.

Then ask the group to think about and call out the things that can make people feel stressed and worried – again, prompt them to think of things about themselves, the baby, other people, the external world (money, work, etc.).

Ask the group for their thoughts on which are most common, what effect they might have on a baby and what could help.

Get as many ideas as possible from the group, then turn these ideas into practice tips: things to say and do, who can help and where to go.

Create a box with cards, messages, music, pictures, telephone numbers, etc.

Materials: A shoebox or similar (ask your group to bring one along). You may want to have some things already prepared, such as photographs of a bath, someone asleep, nature or a couple holding hands; a flower; relaxation tapes; helpline numbers; or 'shaken baby' leaflets.

Note: You need to give the group members permission to think and talk about feeling angry towards their baby, about conflict and abuse in relationships, and about financial worries, since these are real and by no means uncommon experiences.

Idea for a take-home activity: Setting goals and making plans

Learning outcome: Mothers and fathers work through the processes involved in making a change to their behaviour in preparation for the birth and parenthood.

Activity: Get parents to think about the different areas of their lives that are likely to affect their baby's development and their own new start as a parent. Encourage them to choose something that they have previously successfully changed and to consider what helped them. This may be something big or something small – e.g. smoking, taking exercise, losing weight, attending appointments, or something else.

Ask the members of the group to think about something they have found more difficult and what they can learn from those times when change has gone well.

Once they have completed this activity, ask the group members to identify 'what can help' and 'what can get in the way of change'.

Ask each person to return to the aspect of their behaviour that they wish to change and to complete a 'pros and cons form' (sometimes called a 'decision balance sheet'). Ask them to work in pairs, helping each other to talk through the pros and cons of change and to consider whether this has helped them to be clear about the change they are proposing.

Materials: Prepare a simple 'pros and cons form' on which parents can write the change that they are considering making, plus boxes for the pros and cons of making the change and boxes for the pros and cons of not changing. There should also be space at the bottom for mothers and fathers to write in the actions that they have decided they need to take. There are lots of examples of 'decision balance sheets' on the internet.

Idea for a take-home activity: Talking about intimacy

Learning outcome: New parents are better prepared for the way in which having a baby can affect their love for each other and their sex life.

Task: Ask mothers and fathers to look at the prompt sheet. Invite them to share their thoughts and feelings with their partner and to talk through how they can maintain their intimacy and love.

Materials: Put together a prompt sheet with common things that new mothers and fathers say about love and sex after a baby is born. These might include things like:

- 'We love each other more than ever.'
- 'I'd like to but it hurts.'
- 'I do love you but I'm knackered.'
- 'I don't feel like it.'
- 'We have found other ways of showing our love.'
- 'We never get time for us.'
- 'I feel angry and resentful.'
- 'I am not sure when we can start again.'

Note: Be aware of different cultural and faith customs and practices and be sensitive to your group and local community.

Idea for a session activity: Identifying types of support

Learning outcome: New mothers and fathers identify the different types of support they may need and where the sources of support might be.

Task: Introduce the topic and, in small or large groups, ask parents:

- what help they think new mothers and fathers may need at different stages in the journey from pregnancy to early parenthood – prompt them to think about practical, social and emotional aspects
- who provides this for new mothers and fathers – prompt them to include friends and family, as well as services
- what they think makes a 'good helper'.

Then ask them, working in pairs, to complete a simple table with three boxes headed:

- 'The things I need from those around me are...'
- 'The person/people who will help me is/are...'
- 'If I am finding it difficult I will turn to...'

In discussion, raise such issues as feeling alone, overly involved grandparents, not knowing other new parents, being young and inexperienced, living with a disability, not trusting services.

4

People who are there for us



Topic: Meeting other new mothers and fathers

Idea for a take-home activity: Getting to know what is available

Learning outcome: New mothers and fathers familiarise themselves with local resources and websites available to them.

Task: Hold a session on 'what's available where we live' and invite the group to find out more, to visit the Children's Centre, to ask their midwife and to look at some social networking sites. They should be ready to give feedback at the next group session on what they found out and their impressions of the centre, service, website, etc. Ask them to think about what they liked and what could have been better.

Note: Alternatively, you could set up a computer at the Children's Centre for parents to use if they don't have access at home, ask people to come to the group to meet them, or arrange a group visit.

4

People who are there for us



Topic: Services for new parents and young babies

Idea for a session activity: Learning about services

Learning outcome: Parents know more about the professionals and services available to them in their local area.

Task: Invite guests to the sessions to talk about their roles and experiences. These could include parents who already have young babies, staff from the Sure Start Children's Centre, Citizens Advice, other local organisations that support parents, and other professionals. The session could follow a question and answer format in small groups, rather than a presentation to the whole group. Think about a Question Time format.

Note: You need to get to know the people who would be on your panel first and prepare them for the session.