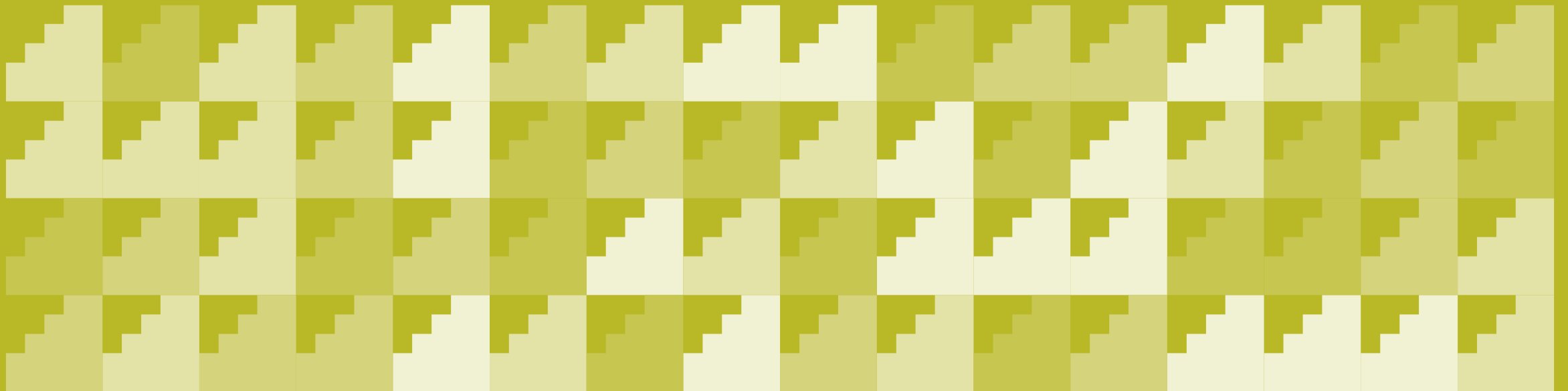


# GM Antenatal Education Standards

## Curricula Information for Training Providers



# Introduction

- This document has been structured to include key topics that should be covered during each of the 4 trimesters as well as pre conception care.
- Included at the beginning of the document are topics that are relevant from pre conception and throughout the perinatal period.
- Use the contents page to navigate around the different chapters by clicking on the content titles.



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# Perinatal and Parent Infant Mental Health (All trimesters)

# Identification

- Understand that perinatal mental health conditions are common with at least a 1:5 prevalence.
- Aware that mental health is integral to and equally as important as physical health.
- Increased awareness, early identification and timely access to specialist advice/ treatment is necessary to maintain wellbeing, for the avoidance of further deterioration and to aid recovery.
- Aware of how to recognise signs of different perinatal mental health conditions and how and where to get help (examples of these conditions include antenatal and postnatal depression, anxiety disorders, obsessive-compulsive disorder, post-traumatic stress disorder and postpartum psychosis).
- Understand that existing mental health conditions may worsen or require extra planning or support.
- Encouraged to complete a [Tommy's 'The pregnancy and post birth wellbeing plan'](#) and keep it somewhere accessible to those supporting them.

# Support

- Families are signposted to details for local support including peer to peer support for partners and families (Dad Matters, Proud2Be parents & Home-Start)
- Parents and pregnant people understand that their health visitor is a trained nurse who will also assist in the identification and management of perinatal mental health conditions.
- Supporting methods to consider include Targeted Antenatal Education sessions and following birth Neonatal Behavioural Observation (NBO).
- Signpost families to [Pregnancy, Family & Mental Health GMHCP website page](#).

# Specialist Support

- Understand that if required they may access Specialist Midwifery support/ enhanced team to support them. This can be arranged through their named midwife.
- Awareness of the [Specialist Perinatal Community Mental Health Team](#) – referral criteria, referral process and the service offer including accessing community psychiatric nurses, psychologists and psychiatrists.
- Understand that they can dip in and out of the many services at any time depending on their level of need. Illustrate by using the [GMMH infographic](#).

# Infant Parent Support

Specialist multidisciplinary teams (including Psychotherapists, Clinical Psychologists, Specialist Health Visitors) provide assessment, consultation, training, supervision and intervention to parents and parents supporting the development of healthy bonds and relationships from the beginning.

Referral process to Parent Infant teams and service offer.

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# Psychological Support and Care Planning

- Awareness of [how to self-refer to psychological therapy](#) (IAPT – talking therapy/ counselling) and how to access IAPT Perinatal Champions and associated interventions/ support groups.
- An individualised approach is necessary, taking into account the effects that any mental health conditions may have on day to day functioning.
- Parents understand that mental health conditions can happen to any parent and that it is okay to have support so that they can be the best parent they can be for their baby.
- Medication education
  - Including the importance of balancing possible risks from taking medication with the important treatment value of medication as per NICE guidance. -
  - Taking medication and caring for their infant, including safe sleeping information, support with feeding and discussing the management of potential neonatal adaptation syndrome (where necessary).
- Making a crisis management plan helps to keep the parent and their family safe during times of crisis and can help parents to access necessary care promptly in order to prevent deterioration and safely contain any risk.

# Physical, Mental and Emotional Development of babies

## Pregnancy

- Understand the importance of developing early relationships with their baby. How they respond to them, meet their needs, love and care for them, shapes how their brain develops and also helps them learn about their feelings and how to be with others. This is as true before they're born as when they arrive.

## Assisting Reflective Functioning:

- We can think of your pregnancy in three phases:
- **First phase:** You (and your partner) will be filled with thoughts about taking in that you are pregnant! You are adapting to new bodily sensations, changes, symptoms, and feeling your emotions are up and down.
- **Second phase:** The hallmark of this phase of pregnancy is acknowledging your baby inside. You feel your baby moving more and will find yourself thinking more about your baby and imagining what s/he is like. You can bond with your baby by talking, singing, stroking, responding (e.g. if baby kicks, you can respond by stroking or pushing in to let baby know you are there) and thinking about him or her.
- **Third phase:** In this last phase, you are thinking more about the birth and how baby will be separate and outside of you. You might feel excited and anxious at the same time. Closer to baby being born, you might feel eager to meet baby and also sad to lose that special togetherness you have shared over the last 9 months.
- *Your focus shifts from pregnancy, to your growing baby to getting ready to meet your baby.*
- **Growing a bond with baby:**
- **Talking or singing to your baby.** If you have a partner or close family member or friend that will be supporting you through pregnancy and afterwards then this is something that they can do too. [This video](#) gives you an idea of how to do this.
- **Giving your baby a name** while you are pregnant (whether you chose to find out your baby's gender or not). It may be a nickname. Choosing a name can encourage you to think about your baby as a person.
- Take time to [gently massage/stroke](#) your stomach during pregnancy.



# Bonding

- Understand that our earliest relationships build the foundations for lifelong communication, mental, emotional and physical health. We all bond with our babies in different ways, and to our own and our babies' timescales.
- While bonding can be highly enjoyable, it is also serious business – bonding has three broad functions:
  - Firstly, it improves the baby's chance of survival by making it more likely his/her carer will keep him/her close, fed and safe.
  - Secondly, bonding helps initiate the baby into the social world she/he is born into and sets a template for future relationships.
  - Thirdly, bonding provides a framework for the brain to grow and develop those vital connections and become 'wired'.
- All these functions together, help build the kinds of relationships we have throughout our life and grow from the very first bonds we have with our parents and care-givers.
- Bonding can feel like a magical process, some parents are struck all of a sudden and soon after birth, but bonding is much more than this. It will mostly come from the constant intimate moments from the routine of attending to your baby's needs – '*the hard work of daily loving*' (Tilden). For your baby, being held in your arms, coming to know the feel, smell, and sound of you is the major part of her life.
- As your baby tries to communicate her/his needs and you try to understand and meet those needs, he/she develops trust in you and becomes attached to you. You are both learning and getting to know each other.

# Emotional support for baby (refer to communication slides 28 & 39-43)

- Aware of the benefits of skin-skin contact and its importance in the promotion of early and prolonged contact with their new born infant in relationship building.
  - Aware of the importance of responding to their baby's needs, keeping them close, smiling, interacting, touch, stroking, communicating (in a sensitive and attuned way) – and the positive effect this has on mind, brain and emotional development of the baby.
  - Actively encouraged to comfort, touch and respond to their baby's behavioural cues. [Settling and Soothing](#) techniques are introduced.
  - Understand that their baby is able to move between different sleep and wake states, assisting parents to support their current stage of development and understand which interactions their baby may be ready for.
-

# Mindfulness and Relaxation

- Parents are signposted to resources e.g. Apps, podcasts and local yoga groups where they can find mindfulness and relaxation activities.
- The Compassionate mind approach and associated resources developed can help people manage difficult emotions, reduce levels of self criticism and help increase levels of compassion for self and others. Antenatal education activities can include problem-solving, using guided imagery, mindfulness, mind maps, vision boards, letter-writing, music, physical activity, drama and art

# Complementary Education

- Parents are signposted to hypnobirthing and aromatherapy
-

# Perinatal Mental Health Resources (press ctrl + click to access links)

- [\*\*Your Baby and You\*\*](#) – helping you find your way with your little one. Written and video resources to share with families including: building relationships, understanding your baby, soothing and settling, parental mental health and neonatal care.
  - [\*\*The Association for Infant Mental Health UK\*\*](#) believe that parents and infants deserve to be supported in developing bonding and attachment. The website has a range of videos and literature to show parents how to respond to a baby in a way that supports emotional wellbeing.
  - [\*\*Learning what your newborn is saying\*\*](#) – Right from birth and well before your baby speaks their first words, they are communicating with you through their behaviour. This communication can be as clear as a good loud cry or as subtle as a slight movement of their eyebrow. Think of all your baby's movements, expressions and responses as phrases they use to communicate with you – the unspoken words of their first language. Watch for, observe and interpret the meaning of your baby's signals and cues and you will soon become familiar with what they are saying and get to know them very well.
  - [\*\*UNICEF Building a Happy Baby leaflet\*\*](#) – We now know that building a strong relationship between parents and their new baby will give them the best possible start in life, and will help them to grow up happy and confident. This leaflet, which is free to download, helps parents to develop that strong relationship, starting in pregnancy and continuing into the early days, weeks and months of a baby's life.
  - [\*\*Newborns and social understanding\*\*](#) – It's amazing to watch our babies learn social skills, smile and interact. This webpage looks at the stages of social development and how parents can encourage their baby at each step.
  - [\*\*Tiny Happy People\*\*](#) is here to help you develop your child's communication skills from during pregnancy and onwards. Explore simple activities and find out about their amazing early development. There are lots of short video clips on activities to do with baby either while pregnant or once baby has arrived.
  - [\*\*NHS Resources\*\*](#) – As your baby gets older your play time together will involve more complex activity and may include toys.
  - [\*\*The Institute for Health Visiting\*\*](#) has a website with factsheets about a range of issues for the early years of your child's life.
  - [\*\*Out of the Blue videos\*\*](#) – The changes experienced during pregnancy and parenthood can be difficult – some people struggle with emotional issues as well as physical symptoms. These can vary from very mild to very serious. *Out of the Blue* is a series of videos that was designed to address and support parents who may be experiencing a wide range of mental health problems: from generalised low mood and anxiety to severe depression and postpartum psychosis.
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- [Letter to you from your baby](#) – A great letter written from the perspective of your baby which may help guide your journey together.
  - **Recommended books**
  - **Recommended books for parents to be:**
  - *Finding your way with your baby: the emotional life of parents and babies*, by Dilys Daws and Alexandra de Rementeria (2015).
  - *Understanding your baby* by Sophie Boswell, The Tavistock Clinic, (2004)
  - Books to read to your baby:
  - *On the night you were born* by Nancy Tillman
  - *Me*, by Emma Dodd. *Forever*, by Emma Dodd. *Wish*, by Emma Dodd
  - **For Dads and Partners:**
  - [Dad Matters](#) – Organisation to support dads with their mental health and parent infant relationships. Offer web based and 1:1 support. In conjunction with Homestart. Dad matters have created a range of videos about a father's experience of getting ready for and adjusting to parenthood – check out their [YouTube channel](#).
  - [Commando Dad](#) is a website full of information and advice created for new dads and is also available in a book form.
  - [Proud 2 be Parents](#) Support for LGBT parents and their children, and LGBT parents to be, across Greater Manchester.
  - Apps for parents:
  - [The Baby Buddy app](#) guides you through your pregnancy and the first 6 months following your baby's birth. It is designed to help you look after your baby's mental and physical health, as well as your own, and give your baby the best start in life.
  - [Easy Peasy App](#): Fun and games that are proven to help children's development – from birth to 5 years-old.
  - [Vroom App](#). During the first five years of life the brain develops most rapidly and the things that matter most for healthy brain development, like talking and playing, don't require more time, money, or stuff. Vroom provides science-based tips and tools to inspire families to turn shared, everyday moments into Brain Building Moments®.
  - [The Dad pad](#) is a useful app full of helpful practical tips for new dads. Further information can be found at
  - [Peppy App](#) If you are employed, you may want to view the Peppy App which allows employees to register (via a subscription) to connect with an expert practitioner through your smartphone. Any question, any time.
  - [Mush App](#) free to download app that helps you make and find friends who live nearby with kids the same age, arrange meetups, get advice from parenting experts and fellow mums on the topics keeping them awake at night and join chat groups based on everything from their due date to their love of reality TV.
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# Pre conception care

# Nutrition and Diet

- Those planning a pregnancy understand the importance of:
  - The Eatwell Guide, which shows how to achieve a healthy diet by balancing intake of different food groups.
  - Folic acid supplements should be taken before and during early pregnancy to reduce the risk of neural tube defects in the baby.
  - Vitamin D supplements should be taken daily (dosage can alter depending on individual –[see GMEC guidance](#))
  - Alcohol abstinence; the safest approach to keep risks to baby to a minimum – [see DoH Low risk drinking guidance](#)
  - Ensuring full immunisation status

# Health and Weight Management

- Achieving a healthy weight before pregnancy reduces the risk of complications for the pregnant person and baby.
- They understand to seek health related advice on existing medical conditions and prescriptions in particular:
  - Diabetes
  - Epilepsy
  - Mental Health Conditions including depression, anxiety, bipolar affective disorder, schizoaffective disorder, obsessive compulsive disorder, post traumatic stress disorder, tokophobia and eating disorder and for those who are taking psychotropic medication (e.g. antidepressants, antipsychotics and mood stabilisers)
  - Psychosocial stress
  - A medical review may be necessary for those who have experienced female genital mutilation (FGM)
  - The Maternal Mental Health Service (currently in pilot) is available for those experiencing trauma or loss directly related to the maternity experience.

# Alcohol

\*(Alcohol, Tobacco & Substance misuse advice must be repeated throughout each trimester)

- Alcohol use should be avoided in pregnancy or when trying to conceive as they can harm the health of pregnant people and babies.
- Drinking any alcohol can cause difficulties in pregnant and can result in Fetal Alcohol Spectrum Disorder (FASD) causing lifelong disabilities for children.
- There is no safe time or safe amount of alcohol to drink during pregnancy. - [see PHE Improving planning and preparation for pregnancy.](#)

## Tobacco

- Stopping smoking removes greatest modifiable risk for poorer pregnancy outcomes

## Substance misuse

- Non-medical drug use should be avoided in pregnancy or when trying to conceive as they can harm the health of pregnant people and babies.



# Positive Parent Infant Relationships

There is evidence to support that when high schools adapt their science curriculum to include baby brain development and positive parent infant relationships, it provides students with practical skills as future parents.

School curriculums include a focus on:

- Baby brain development – the connections made in the developing brain during the first years of life, as babies experience the world around them. Each new experience can lead to new neural circuits in the brain, while stress can negatively influence development.
  - How to engage with babies to encourage their speech and understanding of the world.
  - The idea of neuroplasticity, the capacity of the brain to go on changing throughout our lives.
-

# 1<sup>st</sup> Trimester (Conception - 12 weeks gestation)

# Nutrition and Diet

- The importance of healthy diet and maintaining a healthy weight for their own health and wellbeing and for the wellbeing of the foetus.
- The importance of healthy eating on maternal and foetal wellbeing, focusing on the Eatwell Plate, folic acid, vitamin D and iron supplementation and maintaining a healthy weight.
- The risk obesity can pose on their own health and that of their baby. Parents are offered specialised help and support where necessary to control weight and lower BMI.
- Food sources that contain folate.
- Food risks during pregnancy.
- The need to take folic acid supplements in the first 12 weeks of pregnancy and its importance in protecting the foetus from developing neural tube defects.
- The Healthy Start scheme entitlements and how and where to access these.

# Physical Activity

- **Moderate intensity physical activity** will not harm themselves or their unborn child and that at least 30 minutes per day is recommended.
- How to achieve and maintain a healthy weight during and after pregnancy.
- Appropriate local physical activity sessions during pregnancy such as aqua natal classes.
- The importance of pelvic floor exercises during pregnancy and after birth.
- Resumption of activity after birth is important for mental and physical health and wellbeing, but that return to pre-pregnancy exercise levels should be done gradually.

# Oral Health

- The impact of pregnancy on oral health and are aware of the importance of maintaining good oral care during pregnancy as this can be critical to their overall health and that of their babies.
- Aware that they are entitled to free dental treatment during pregnancy and for one year after birth.
- Registering with a dentist if they are not already registered and continue to attend during and after their pregnancy.

# Smoking cessation

- Harmful effects of smoke on their health and pregnancy
- Effects that second-hand smoke can have on their new born baby and family.
- Knowing how to access support to stop smoking.

# Alcohol

- That there is no 'safe' time for drinking alcohol during pregnancy and there is not safe amount. [See DoH Guidance](#)
- That drinking no alcohol is the safest choice when planning for a pregnant or as soon as they know they are pregnant. [See Nice Quality Standards statement 1.](#)
- That pregnant women are asked about their alcohol use throughout their pregnancy and this is recorded (See NiCE [Quality Standards statement 2\).](#)
- The effects that any alcohol intake can have on fetal development and breastfeeding.
- What constitutes one unit of alcohol and of their own drinking patterns.

# What antenatal care involves and why it is important

- Planned number of antenatal appointments
- Where antenatal appointments will take place
- Which healthcare professionals will be involved in antenatal appointments

## Contacting the midwifery team

- How to contact the midwifery team for non-urgent advice
- How to contact the maternity service about urgent concerns such as pain and bleeding.

## Screening programmes

- The pregnancy screening programme including which blood tests and ultrasound scans are offered and why
- That they can make an informed choice about participation in the screening programmes.

# What to expect at each stage of the pregnancy

- Understand the physical and emotional changes during pregnancy including:
  - How the baby develops during pregnancy
  - What to expect from every week of their pregnancy
  - Milestones for movement and hearing
  - Pregnancy week by week – [NHS website](#)

## Relationships

- There may be relationship changes during the pregnancy.
- Give information on how the pregnant person and their partner can support each other.
- Support is available through programmes such as [Me You and baby too \(one plus one\)](#)
- Information is shared surrounding the greater risk of domestic abuse in the perinatal period, where to access support.

## Financial Impact

- The financial impact of pregnancy
- Local money advice services and the support they offer
- Legal entitlement and rights in relation to pregnancy.

# Immunisations

- Importance of immunisations for flu, pertussis (whooping cough) and other infections (e.g. Covid-19) during pregnancy.

# Infections

- Infections that can impact on the baby in pregnancy or during birth such as group B streptococcus, herpes simplex, chicken pox, parvo virus and cytomegalovirus.
- How to reduce the risk of infections by hand washing.

# Medicines

- Educated on the safe use of medicines, health supplements and herbal remedies during pregnancy.
- Assisted to access free prescriptions.



# Complex social factors

- Issue of domestic violence and how this might escalate during pregnancy and after birth.
- How to access support services.
- Parents and pregnant people who are identified as having complex social factors have the access to early targeted antenatal education. Commencing education as early as possible is essential; utilizing time in the second trimester is paramount.
- Care providers and educators understand that regardless of the nature of any child protection proceedings (even those considering removal of the infant);the pregnant person receives a programme of preparation for parenthood. The support and guidance to develop a bond with their unborn baby is provided; with the understand that no harm can come developing feelings of love; this will only have positive effects on their developing baby.

# 2<sup>nd</sup> Trimester (13-25 weeks gestation)

# Making an informed feeding choice

- The practical and emotional aspects and realities of breastfeeding and formula feeding are addressed.

# Professional consensus

- Antenatal educators encourage breastfeeding. They should pay particular attention to the needs of the parents who are least likely to breastfeed (E.g. young parents, those who have low educational achievement and those from disadvantaged groups)
- Avoid promoting or advertising infant or follow-on formula. Do not display, distribute or use product samples, leaflets, posters, charts, educational or other materials and equipment produced or donated by infant formula, bottle and teat manufacturers.

# Understanding baby's feeding cues

- Parents are aware of how a baby communicates.
- Parents are able to use this increased understanding to effectively meet nutritional and nurturing needs.

# Essential Breastfeeding Information

- How milk is produced, how much is produced in the early stages and the supply and demand nature of breastfeeding.
- Normal breast changes during pregnancy and after birth.
- How often babies typically need to feed and for how long, taking into account individual variation.
- How breastfeeding can affect the parent's body image and identity.
- A healthy diet is important for everyone and that they do not need to modify their diet to breastfeed.
- The important information may change as the baby grows.
- Safe medicine use when breastfeeding.
- Chest feeding and support/ signposting for LGBTQi+ community.
- Pain when breastfeeding, breastfeeding complications (E.g. mastitis or breast abscess) and when to seek help.
- Strategies to manage fatigue when breastfeeding.
- Supplementary feeding with formula milk that is sometimes, clinically indicated.
- Risks of drinking alcohol during breastfeeding. Alcohol passes freely into the breastmilk, to reduce exposure avoid breastfeeding for 2-3 hours after drinking. Drinking more than 6 units at one time may make parents less aware of their babies needs. [See NHS Advice](#) and [Breastfeeding network advice](#).

# Keeping Babies Close

- All parents have unrestricted access to their baby unless individual restrictions can be justified in the baby's best interest.
- The facility makes being with their baby as comfortable as possible for parents (E.g. creating a welcoming atmosphere, putting comfortable chairs/ bed by each cot, giving privacy when needed, providing adequate facilities for parents to stay for long periods or overnights, including food and drink, bathroom facilities etc.)

## Responsive Feeding

- Parents are aware of the importance of keeping baby close and feeding baby when it shows signs of wanting to feed.
- Parents are aware of how to feed their baby.

## Positioning and Attachment

- Feeding positions and how to help the baby attach to the breast

## Signs of effective feeding

Parents feel confident in their abilities to meet their baby's nutritional needs.

Parents can recognise the signs of effective feeding and that their baby is having enough milk.

# What's in a nappy

Parents are aware of what normal nappies should look like.

# Expressing Breast Milk

Parents are aware of when and how to express breast milk.

Parents who express their breast milk are aware of how to safely store their milk.

# Safe formula feeding

- Parents who choose to formula feed are informed and supported with infant feeding.
- They are aware of the practicalities of formula feeding, including the safe preparation and storage of formula milk.
- Understand the benefits of paced bottle feeding and how to use this method.
- Parents understand that there are no nutritional benefits to follow-on milk.

# Sterilising Equipment

- All parents are aware of how to clean and sterilise feeding equipment

# Use of dummies

- All parents are aware of appropriate use of dummies

# Support for feeding

- All parents should be feel supported, regardless of their chosen method of feeding.
- Information for partners around breastfeeding and how best to support breastfeeding people, taking into account their birth parents preferences about the partner's involvement.
- Extended family, particularly grandparents are aware of the current information on feeding practices.
- Parents are aware of how to access professional and third sector support and information for feeding.

# Resource Delivery

- Parents can access breastfeeding care that is tailored to their individual needs and provides:
  - Face to face support
  - Written, digital or telephone information to supplement (but not replace) face to face support.
  - Continuity of carer
  - Information about what to do and who to contact if they need additional support
  - Information about opportunities for peer support

# Introduction of complementary food

- Parents are aware of current recommendations and how to access support and information for feeding.

# GM10 Tips for Talking

- Families have been signposted to the range of digital, printable, verbal and written resources to use with their little ones.
- <https://www.greatermanchester-ca.gov.uk/what-we-do/children-and-young-people/every-child-starts-school-ready-to-learn/greater-manchester-gm-10-tips-for-talking/>

## Reflective Functioning

- Encouraged to build on their reflective functioning in pregnancy; they are supported to think about their baby and the things they have learnt about them before they are born.
- Informed about baby brain development, healthy optimum environments are encouraged before and after birth.

## Early Communication

- Unborn child can hear at around 15 weeks gestation and differentiate and respond to familiar voices by 26 weeks gestation.
- Talking, singing, playing music, stroking and rocking helps the baby feel secure and thereby making links with the inside and outside world.
- Offer skin to skin contact with care givers immediately following birth or as soon as possible.
- The new born baby can see their parents face, recognise voices and their birth parents smell.
- These familiar sounds and smells will be soothing to a new born in an unfamiliar world.



# Foetal movements

Advice on foetal movements including:

- What to expect

- The circumstances which may require them to contact their maternity unit

- They understand that it is not true that a baby's movements 'slow down' at the end of pregnancy.

# Transition to Parenthood

Consider the range of feelings and thoughts which are part of the normal transition to parenthood.

- Emotional wellbeing

- Transition in the body e.g fetal development, protective function of hormones Oxytocin and Prolactin and effects of Cortisol

Shared and different experiences

Widely recognised experiences: Newness of it all, Fatigue, Elation/ anticipation/ frustration/ disappointment?, Adjustment to changes, Connecting, Bonding.

Less often shared and need more careful thought: Pregnancy complications (screening/ health, multiple births etc), Family and cultural diversity, Assisted conception, Fostering and adoption, Individual life experience (experience of previous loss..) or, members of a couple differ.

Recognise the complexity of feelings stirred up by the experience of having a baby

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Looking after parental and couple well being at a stressful time: Bringling baby home, Societal pressures, culture and socio economic stress.

Understanding the changes when baby arrives – Focus shifts, New feelings.

When the transition becomes difficult. There can be additional emotional struggles at an already tiring and unsettling time.

When to seek specialist support (slide 6 Infant Parent Services)

Group interventions for vulnerable groups - Solihull Approach: Antenatal Programme

- Mellow Parenting: Mellow Bumps Programme

## Relationships with partners/ co parents

- Parents have the opportunity to discuss their emotional needs and changing relationships in order to encourage development of safe, stable and secure environment for the baby/child.
- Both pregnant people and partners should have the opportunity to discuss the impact that having a baby will have on their life and lifestyle.
- Awareness should be raised on the importance of partners/ co parents bonding with the baby. This should be encouraged by bathing/ talking/ skin-skin.

# Safe Sleep

- Parents should be given information on possible causes and avoidable risk factors for sudden unexpected death in infancy (SUDI) including positions for sleep, risks of second-hand smoke, risks presented by alcohol, drugs and smoking of either partner when bed-sharing and the dangers of sleeping with a baby on a sofa or chair.
- Parents know to follow the advice from trusted sources to reduce the risks as much as possible.
- Place baby on their back to sleep.
- Do not let baby's head become covered.
- Do not let baby get too hot or too cold.
- If using a sling or carrier, make sure to use it safely.
- Feeding, dummies and SIDs.
- Get medical help quickly if baby is unwell.

# Home Safety Environment & Car Safety

- Potential risk factors for unintentional injury within the home and car and how to mitigate these.
- How and where to access local training in baby first aid/ resuscitation.

## Dogs

- Parents understand that there are steps they can take to reduce the risk of dogs harming babies and children.
- Parents are asked to be proactive in training their dog in preparation for their baby's arrival, they should let their midwife know that they have a dog to facilitate further discussion.
- Parents must be aware they must never leave any baby or child alone with any dog – no matter how trustworthy they think they are.

# 3<sup>rd</sup> Trimester (26 weeks gestation to term) & 4<sup>th</sup> Trimester (Birth to 3 months)

# Preparation for labour, birth and early parenthood

- Aware of the potential advantages of physical and emotional preparation for labour and birth.
- Aware that these coping strategies can help in the early days of coping with a new baby.
- Aware of how classes can be accessed in local areas.
- Women and their partners feel a sense of control which contributes to a sense of emotional wellbeing.

## Birth preferences

- All parents should have the opportunity to discuss their birth preferences either on an individual or group basis.
- at Home – Homebirth
- in a stand-alone Midwifery led Birth Centre
- in a midwifery led Birth Centre alongside an obstetric unit
- in a hospital Obstetric unit
- These options can be discussed in more detail with your community midwife at any antenatal appointment, and you can also find out more about [local maternity units in Greater Manchester & Eastern Cheshire](#).

# Vaginal birth after caesarean section (VBAC)

Women are aware of their options for birth and how to access support locally.

## Tokophobia

Pregnant people and partners are given the opportunity to address trauma related directly to their maternity experiences.

Support is offered via debriefing services and the development of a trauma informed birth plan.

## Onset of labour

Physiological preparation

Latent Phase

Emotional side of early labour

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# Labour

- Pregnant people and their partners understand labour and influences on labour and birth including hormonal, physical and emotional influences.
- Pregnant people and their partners understand physiologic processes and are able to make and implement decisions that will maximise their potential to achieve the birth experiences that they hope for.
- Parents are aware of how to engage both physically and emotionally with their baby prior to birth.

# Birth Environment

- Parents are enabled to have a positive experience regardless of mode of birth. Parents feel empowered to make informed choices during labour and birth and are active participants in their own birth experience.
- Relaxation and relaxed breathing
- Movement and mobility
- Eating and drinking
- The use of water for labour and birth
- Music
- TENS
- Massage
- Complementary Therapies
- Visualisation and awareness of baby



# Birth support

- Birth partners should be included in parent education and informed of how they can support labour and birth. This should increase the confidence of birth partners and support for the pregnant person in labour.

# Positions for labour

- Parents are able to make decisions about adopting different positions to optimise their labour.

# Decision Making

- Parents are enabled to have a positive birth experience regardless of mode of birth. Parents feel empowered to make informed choices during labour and birth and are active participants in their birth experience.

# Perineal massage and Perineal Trauma

- Parents are aware of the benefits of perineal massage and how to reduce the likelihood of perineal trauma.
- The use of upright and active positions during birth helps encourage progress in the second stage of labour and reduces the likelihood of perineal trauma.

## Third stage of labour

- Information giving a non-biased way will enable parent to make informed decisions regarding management of the third stage of labour.

## Skin to skin welcoming baby

- Parents are aware of the importance of early skin to skin and are able to initiate engagement both physically and emotionally with their new baby.
- Labour and birth preparation provides a vital opportunity to actively promote the importance of welcoming the baby through touch, smiling, use of a gentle soothing voice alongside unhurried and prolonged skin to skin to initiate the bonding process and emotional attachment.
- Empowering parents during birth and promoting an atmosphere after birth (that facilitate the natural processes by which parents have direct contact with, get to know and become committed to their infants) will help optimise the developing parent-infant relationship.

## Birthing rituals

- Parents feel confident and comfortable discussing their needs around birth.

## Relief of pain in labour (medical)

- Providing parents with balanced information on pain relief options and their effects as well as their respective benefits and disadvantages, will enable them to confider and make choices that best support their own needs.
- Parents are able to make informed decisions regarding relief of pain in labour.

## Induction and augmentation of labour; Complications of labour and birth; Assisted birth; Operative births

- Parents are able to understand complications that arise and are able to be fully involved and supported in decision-making processes with safety being paramount.
- Parents are enabled to have a positive birth experience regardless of mode of birth.
- The needs of parents should be met in addressing uncertainty in relationship to labour and complications in pregnancy and childbirth. However they must also have ready access to information to show how health outcomes vary with different kinds of care.
- Antenatal education should also ensure well-balanced information to ensure women do not feel they have failed if interventions are necessary.

# Care of ill baby and mother; Still birth; Neonatal death

- Parent education should aim to enable parents to comfortably explore their hopes and fears around labour and birth. This may include illness of mother or baby and stillbirth or neonatal death.
- If there is an awareness of a baby who will have a chronic illness or disability, either group or one to one discussion should allow parents to explore their emotional, physical and social needs and support.
- Parents are aware of available and appropriate support and how to access it.

## Birth debriefing

- Parents should have the opportunity to discuss their unique birth experience with a health professional to support their emotional health and wellbeing in the immediate postnatal period.
- They know how to recognise symptoms of PTSD and where to access further support if required.

# Bonding and Attachment

- Encourage sensitive, reliable care giving when baby's communicate e.g. cries, pain, fussing, smiles are responded to with love and reassurance.
- Support early relationships babies need to feel close to caregivers in order to feel safe and secure in the world (attachment).
- Emphasise that bonding is not always instant, the feelings of love and warmth can take time.

# Understanding baby's communication

- Support the understanding of Babies states.
- Advise on feeding signals and support infant feeding as a special time to be focused on each other.

# Play Time

- Support playing and talking with their baby with emphasis that parents are their baby's favourite toy.
- Encourage supervised tummy time each day to aid physical development.

# Holding Baby in Mind

- Reflective functioning – what does it look like?
- Parent can understand:

The child has it's *own* thoughts, desires, feelings and intentions

The child has *different* thoughts, desires, feelings and intentions to their own.

Parent can think about:

- The interplay between parent and baby feelings and how they can translate into behaviour.
- All the different feelings in their relationship with their child
- What it might be like for the child to be in a relationship with them

This is the basis for **Early Attachment**.

- Getting to know babies takes time – being curious about another's mind is part of developing a new relationship.
  - Support (slide 6)
  - [www.aimh.uk](http://www.aimh.uk)
  - Best Beginnings website and baby buddy app.
-

# Getting help with a crying baby

- Parents understand that there are several reasons that can cause a baby to cry excessively.
- Professionals acknowledge that it can be exhausting if they have tried everything and nothing seems to comfort their baby.
- Colic
- Crying and illness
- [ICON](#) is a programme that provides information about infant crying and how to cope that you or parents you know may find useful. There are lots of short video clips and written information too.
- Support for parents with crying and sleepless babies: [CRY-SIS HELPLINE](#) – 08451 228 669. Lines open 7 days a week 9am-10pm
- Online information on the 'Period of PURPLE crying' is useful. This explains the scientific reasons why babies cry more between 2 weeks and 3-4 months more than any other time.

# Shaken baby syndrome

- Parents are informed that no matter how frustrated they feel, they must never shake their baby,
- The neck muscles in a baby or young child are under developed and weak and are unable to support the baby's large and disproportionate head.
- Shaking moved their head violently and can cause brain damage and even death.

# Mindfulness and Relaxation

- Parents are signposted to resources e.g. apps, podcasts and local yoga groups where they can find mindfulness and relaxation activities.

# Complementary Education

- Signposting to hypnobirthing and aromatherapy.

# Skin to Skin; Touch; Massage

- Prolonged skin to skin is beneficial for all parents and babies. The importance of touch, smiling and use of gentle soothing voice should be promoted alongside skin to skin in an unhurried environment for all parents and babies. It also:
  - Regulates baby's blood sugar and oxygen levels
  - Helps maintain infant temperature
  - Can soothe infant crying
  - Can reduce infant stress and promote attachment and has a casual relationship to brain development
  - Promotes breastfeeding and stimulates breastfeeding hormones.
- Information should be given to parents on the importance of these activities and how to access local activity on baby massage, particularly for those who have pre-term infants.
- Parents know how to access local activity on baby massage particularly for those who have pre-term infants.



# Talking to baby; Instinctive skills and how babies learn

- Information should be given to parents on the ability of babies hearing in utero and the importance of talking to their baby to develop familiarity.
- Understanding and appreciation of the capacities of babies as they grow and change improves parent-child interaction, communication, and facilitates parent-child bonding and instinctive skills. This encourages healthy brain development and improves cognitive outcomes for babies.
- Parents have increased awareness of benefits of bonding and communication with the developing baby.
- Parents are aware of benefits of baby communication on brain development and parent-child bonding/attachment/ relationships.
- Parents have increased knowledge of how and when to communicate with their baby and the benefits of equipment to aid this, for example baby slings and backward facing buggies to aid communication while walking with the pram.

## Feeding cues

- [See infant feeding.](#)
- The importance of recognising feeding cues and responding to the baby's needs should be reinforced within early days and parenting agenda.

# Soothing baby; Crying baby; Non-verbal cues

- Tuning into their baby's movements in utero and the importance of talking/ singing/ rocking their baby to develop familiarity.
- Use of group work and problem solving can give parents opportunity to develop coping skills prior to baby being born e.g. coping with a crying baby.
- Discussions around parenting can enhance their awareness of their own attachment patterns.
- Parents are equipped with knowledge and skills required and are of how to access future knowledge as needed.
- Increased confidence in parent's ability to care for their baby.
- Consider NBO/ NBAS/ Brazelton Assessments
- Support reflective functioning through 'Head Heart Hands' (Baby Bonding Training).
- Support families with ways to soothe their crying baby (ICON).

## Practical Skills

- Introduction of practical skills as set by the needs of parents and the importance of responding to their baby's needs can increase the confidence of parents in their ability to care for their new baby.

## Top Ten Tips

- Top Ten Tips are introduced to enable parents to understand the importance of physical activity through play and the important links to areas of parent/ infant relationship that will be positively affected using these tips.
- Parents are aware of the importance of interaction, communication and play.

# Safety

- Reducing risks of cot death.
- Parents are aware of the risk posed to young children by second hand smoke and understand actions to mitigate these risks.
- Information should be given on practical actions on how to reduce exposure to second hand smoke.
- Most importantly to stop smoking in the house and car and how parents can negotiate with family members and peers to support their actions.
- Parents are aware that they must not bed share if they have drunk any alcohol. Drinking more than 6 units at one time may make parents less aware of their babies needs.
- Breastfeeding and alcohol consumption are explained. Excess levels of alcohol in breastmilk may lead to drowsiness, deep sleep, weakness and decreased growth in the infant. See [NHS advice Breastfeeding and drinking alcohol](#) and [Breastfeeding network advice Alcohol and breastfeeding](#).
- There are increased risks of harm if adults in the house are drinking alcohol.
- Smaller airways, faster breathing rates and immature immune systems make children more vulnerable than adults to second hand smoke. Exposure increases the risk of lower respiratory tract infections such as bronchitis and pneumonia and reduce lung function. It increases the risk of SUDI, severity of asthma (frequency and severity of attacks) and middle ear infections.
- For breastfeeding mothers who smoke, nicotine replacement therapy (NRT) may be recommended to support a quit attempt. This is because the risk to the baby from the mother's continued smoking and second hand smoke exposure is likely to outweigh any potential adverse effects from the small amount of nicotine in the breastmilk from the NRT.

## Home Safety; Environment; Car Safety

- Parents are aware of potential risk factors for unintentional injury within the home and car and how to mitigate these.
- Parents are aware of how and where to access local training in baby first aid/ resuscitation.

# Screening

- Parents are aware of the new born screening programme.
- Parents understand the reasons for new born blood spot screening and the possible outcomes if they choose not to have their baby screened.
- Parents are aware of the childhood immunisation programme and its importance in protecting their child from the diseases listed.

# Contraception Advice

- Parents are able to make informed decisions on contraception choices.
- Information should reflect the impact contraception methods may have on breastfeeding.

# Pelvic Floor Exercise; Postnatal Exercises

- Women understand the benefits of exercise including pelvic floor exercises.

# Physical Complications of Birth

- Post Forceps
- Ventouse
- Caesarean Section
- Post 3<sup>rd</sup> degree and 4<sup>th</sup> degree tears follow up.
- Information given in the postnatal period about expected recover from complications of birth should enable parents to understand the recovery process and when to seek advice.

# Body shape and Body image

- Parents should recognise and understand that pregnancy and birth are physically changing processes.
- Parents have realistic expectations about physical and emotional recovery from birth.

# Relationships with partners; Emotions and changing roles

- Parents have the opportunity to discuss their emotional needs and changing relationships in order to encourage development of safe, stable and secure environment for the baby/ child.
- Both pregnant people and partners should have the opportunity to discuss the impact that having a baby will have on their life and lifestyle.
- Awareness should be raised on the importance of partners bonding with the baby. This should be encouraged by bathing/ talking/ skin to skin.

# Babies and emotional development; Baby blues and postnatal depression; Mental Health and its impact on child development

- Parents should have the opportunity to explore their own support networks as part of an asset based approach and the importance of social support reducing risk of postnatal depression.
- The link between parenting and new parenthood and its impact on mental health and relationships for both mothers and fathers is crucial.
- Information should be given on recognising and how to get help for perinatal mental health conditions and the effect this can have on relationships and capacity to parent.

# Family and social support

- The use of an asset based approach should include awareness raising and discussion around family and social support available to parents.
- It may also include boundary setting with participants, in relation to how to negotiate boundaries with family and significant others to support mental and physical recovery and wellbeing.
- Providing consistent guidance/ information to members of the wider family will help reduce conflicting information and advice, particularly as grandparents are increasingly carers of infants of working parents.

# Role of midwife, health visitor, public health nurse and GP

- Parents should have information on statutory and local support available to them.

# Local support e.g. peer support, national support lines and groups

- Parents are aware of local, national and voluntary help and support that is available to them.
- The wider family members have evidence based information to help in the support of new parents.
- Parents are aware of support within their local community for health and wellbeing, early parenting and early support for breastfeeding.

# Birth Trauma

- Maternal Health Service. (See Slide 6)
- Bereavement Services.

# Building confidence

- Staff enable parents/ prime caregivers to be fully involved in their baby's care, including supporting joint decision making.
- Every effort is made to ensure effective communication between the family and the healthcare team (including listening to the wishes and observations of parents/ prime caregivers).

# Technique

- Ensure the breastfeeding parent can demonstrate how to position and attach the baby to the breast and can identify signs that the baby is feeding well.
- Show all breastfeeding mothers how to hand-express breast milk with instructions on storage and usage.

# Support

- Provide continuing and proactive breastfeeding support at home.
- Provide contact details for local voluntary organisations that can offer ongoing support to complement NHS breastfeeding services.
- Make face to face breastfeeding support integral to the standard postnatal contacts for women who breastfeed. Continue this until breastfeeding is established and any problems have been addressed.



# Formula Feeding

- Midwives should ensure parents who choose to use infant formula are shown how to make up a feed before leaving hospital or birth centre (or before they are left after a home birth).
- This advice should follow most recent guidance from the DH.

# Introducing complementary foods

- Parents are aware of current weaning recommendations and how to access support and information for feeding.