Introduction

Why Perinatal and Infant Mental health?

Marmot (2010)\(^1\) identified that in order to reduce future social and health inequalities we need to give every child the best start in life, and this reflects the view that the origins of much adult disease lie in the ‘developmental and biological disruptions occurring during the early years of life’\(^2\) and more specifically to ‘the biological embedding of adversities during sensitive developmental periods’.\(^2\)

Both perinatal and infant mental health are therefore major public health issues, and perinatal and infant mental health services are aimed at giving every the child the best start in life by promoting the wellbeing of parents and their babies across the perinatal period, in addition to the early identification and treatment of problems that complicate pregnancy and the post-partum year.

For many families, standard perinatal services will help steer them through the life-changing transition to parenthood, while for others the path maybe more complicated and require a greater intensity of specialised services and support. Whatever the level of need, the economic case for providing effective services throughout this period is compelling,\(^3\) and the commissioning of services to achieve these ends is supported by a range of policy documents (see below) emphasising the importance of early intervention, and highlighting the opportunities afforded by the perinatal period.

The perinatal and infant mental health pathway described is both evidence-based in that it underpinned by research about ‘what works’ during this period, and also includes a focus on primary prevention that goes beyond the traditional focus on the immediate perinatal period to include preconception services that are aimed at building early resilience and self-respect in young people, and developing the foundations for healthy and respectful relationships that form the basis for later perinatal wellbeing. It then continues through pregnancy and the postnatal period until the infant is one year.

The goals of promotion, prevention and treatment during this important period require the commissioning of a diverse range of services, alongside high standards of service delivery and care. This perinatal and infant mental health pathway has been developed to support the work of both practitioners working directly with infants and their parents, and managers and commissioners who have the remit of ensuring that the health, social care and public health services necessary to give every child the best start in life, are in place.
Policy context

The policy context for this perinatal and infant mental health pathway is the Healthy Child Programme (HCP),\textsuperscript{4} which was revised in 2009 to take account of recent changes in evidence about the importance of the perinatal period, and which sets the overall standard in terms of the delivery and commissioning of services from pregnancy to age 5. The Health Visitor Implementation Plan\textsuperscript{5} describes the government’s strategy for expanding health visiting services, to ensure that families have a positive start, through the delivery of the Healthy Child Programme.

A number of government reports\textsuperscript{3,6} have concluded that strategies to promote infant and child welfare should include a commitment to prevention, and a focus on promoting wellbeing that begins during pregnancy and continues throughout the early years. This has also been reflected in the review of child protection in England, which emphasises the importance and effectiveness of prevention and early intervention. A final endorsement is provided by the cross party government strategy for mental health, which employs ‘starting and developing well’ as one of its key objectives.

The need for early prevention and intervention was also highlighted by the Munro Review of child protection services in England, and the cross-party government strategy for mental health – No Health without Mental Health,\textsuperscript{7} which highlights ‘starting and developing well’ as one of its key objectives.

Another significant part of the policy context is the NICE guidance Ante and Postnatal Mental Health is currently being updated, and will hopefully include a greater focus on the infant.

Infrastructure Requirements

This perinatal and infant mental health pathway relies on the dedication and commitment of a large number of frontline practitioners such as midwives, health visitors and children’s centre workers. A number of infrastructure requirements are necessary including the following:

\begin{itemize}
  \item A fundamental aspect of the provision of good quality and efficient services are the knowledge and skills of the frontline staff involved in their delivery, alongside the adequate staffing of services. A range of innovative ways of working to support the wellbeing of parents and infants have been developed over the past decade, and staff need to be provided with opportunities for continuing professional development (CPD) in order to acquire the necessary skills to deliver these new ways of working.
\end{itemize}
The research points to the importance of practitioners having access to appropriate supervision and support, and evidence about the value of supervision has now been provided for practitioners such as health visitors in terms of increasing compassion and job satisfaction, as well as reducing burn-out and stress.\(^8\)

Other necessary infrastructure requirements include the type of integrated working practices between, for example, midwives and health visitors, and adult mental health practitioners and children’s social service workers, which have been identified as being necessary to both effective information sharing and patient care, in the perinatal period.\(^9\)

The full commissioning of the Healthy Child Programme is necessary to enable staff to work towards achieving the best start in life for every child.

*An Infant Mental Health Pathway*

The pathway is divided into three time periods:

1. Pre-conception
2. Antenatal
3. Postnatal (up to one year)

Within each of the three colour-coded sections, and in keeping with the Health Visitor Implementation Plan (DH 2011), Universal, Universal Plus and Universal Partnership plus services are identified. Each section starts with an overview of the aims and objectives for each of the time periods and then presents examples of evidence-based or promising initiatives that should be provided and references to the relevant evidence. Example programmes from Warwickshire have been utilised in this programme, but other similar programmes should where appropriate be used.
Context of service delivery:

The circle represents the local context - the community. The Universal; Universal Partnership and Universal Partnership Plus programmes and services that can be provided as part of this infant mental health pathway will be influenced by and should take account of, the wider community context.
### Overview of the Infant Mental Health Pathway: Pre-Conception

#### Aims

1. Promote respectful, safe and enjoyable relationships
2. Preparation for future parenthood
3. Reduce teenage conception
4. Promote the planning of pregnancies

#### Objectives

- **Promote safe and enjoyable relationships**
  - Build self-esteem and awareness of rights and responsibilities
  - Increase knowledge about the importance of respectful, safe, and enjoyable relationships
  - Develop skills for healthy relationships
  - Promote knowledge about healthy intimate relationships and sexual activity

- **Preparation for future parenthood**
  - Develop knowledge about parenting responsibilities and skills
  - Raise awareness about the importance of parenting
  - Develop parenting skills

- **Reduce teenage conception**
  - Improve knowledge about sexual intimacy and relationships
  - Provide access to appropriate support services inside education and other settings

- **Promote planned pregnancy in adults**
  - Raise awareness and understanding about the importance of planning pregnancy
  - Provide access to Long Acting Reversible Contraception to would-be parents who face additional challenges
Infant Mental Health Pathway: Pre-Conception

1. Promote respectful safe and enjoyable relationships
   ✓ Build self-esteem and awareness of rights and responsibilities
   ✓ Increase knowledge about the importance of respectful, safe, and enjoyable relationships
   ✓ Develop skills for healthy relationships
   ✓ Promote knowledge and skills to enable children to develop healthy, intimate relationships

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Who / when</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Personal Social Health and Economic Education (PHSE)</td>
<td>Trained primary and secondary school staff, school nurses</td>
</tr>
<tr>
<td>School-based planned programme of learning through which children and young people acquire the knowledge, understanding and skills they need to manage their lives now and in the future (<a href="http://www.pshe-association.org.uk">http://www.pshe-association.org.uk</a>) including:</td>
<td>Voluntary sector</td>
</tr>
<tr>
<td>✓ Bullying</td>
<td></td>
</tr>
<tr>
<td>✓ Drug and Alcohol</td>
<td></td>
</tr>
<tr>
<td>✓ Emotional health and Wellbeing</td>
<td></td>
</tr>
<tr>
<td>✓ Healthy Lifestyles</td>
<td></td>
</tr>
<tr>
<td>✓ Safety</td>
<td></td>
</tr>
<tr>
<td>Commissioning of PHSE training from other agencies (e.g. Warwickshire Respect Yourself Campaign (RYC), which launched the Spring Fever'\textsuperscript{10} programme in 2013; Warwickshire’s Safeline\textsuperscript{11} services deliver both anti-bullying workshops and counselling to schools and individuals)</td>
<td></td>
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</table>
- **Schools to achieve National ‘Healthy Schools’ Status**\(^1\)\(^2\)
  Work towards government target of all schools achieving National Healthy Schools Status

<table>
<thead>
<tr>
<th>2. Preparation for future parenthood</th>
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</thead>
<tbody>
<tr>
<td>✓ Develop knowledge about parenting responsibilities and skills</td>
</tr>
<tr>
<td>✓ Raise awareness about the importance of parenting</td>
</tr>
<tr>
<td>✓ Develop parenting skills</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Commissioning and coordination of countywide services</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Gather evidence, influence, introduce standards, and commission/deliver Relationship and Sexual Education (RSE) training for various agencies delivering RSE to ensure consistent, key messages countywide</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Schools based programmes(^3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ <strong>Accessible Relationship and Sexual Health Services (RSE)</strong></td>
</tr>
<tr>
<td>(Currently non – statutory) good-quality relationships education: teaching about respect, honesty, trust, self-esteem and sexual health, starting in primary school aged children (e.g. Warwickshire Respect Yourself Campaign (RYC) which launched the ‘Spring Fever’(^4) programme in 2013)</td>
</tr>
<tr>
<td>Classroom-based initiatives (e.g. Roots of Empathy programme(^5) - see examples)</td>
</tr>
<tr>
<td>✓ <strong>Drop-in clinics</strong>: Advice, support and signposting (e.g. emphasis on keeping safe and safeguarding)</td>
</tr>
<tr>
<td>✓ <strong>Anti-bullying policies and programmes</strong>: School-based programs to reduce bullying and victimization(^6)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>School staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>County council</td>
</tr>
<tr>
<td>Trained primary and secondary school staff, school nurses and voluntary sector provision</td>
</tr>
<tr>
<td>School nurses in secondary schools</td>
</tr>
</tbody>
</table>
Warwickshire’s Safeline services deliver both anti-bullying workshops and counselling to schools and individuals.

**Counselling services**

- **Conflict resolution**
  - Training for practitioners and participants, on line and face-to-face (e.g. One Plus One)

**Web-based resources**

- Preparing Tomorrows Parents - http://www.preporetomorrowsparents.org

### 3. Reduce teenage conception

- Improve knowledge of sexual intimacy and relationships
- Provide access to appropriate support services within education and other settings

**Accessible Relationship and Sexual Health Education (RSE) Services**

- School-based counselling services
- Primary health care services
- Local drop-in clinics
- Online resources (e.g. RYC on line website, a guide to services and Q & A forum; Kooth’ on-line support for young people age 11 - 18)
- Other national resources (e.g. National Children’s Bureau: Sex Education Forum)

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National and local policies. Programmes delivered by both statutory and voluntary sector.

School nurses skilled in counselling.

Voluntary sector.

Primary and secondary school years.
<table>
<thead>
<tr>
<th><strong>Provision of contraceptive advice and services</strong></th>
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<tbody>
<tr>
<td><strong>Local services</strong></td>
</tr>
<tr>
<td>✓ Community Contraception Service (CCS) provides a specialist contraceptive and sexual health service which responds to individuals of all age groups, and is delivered in a timely and appropriate manner; including dedicated services for young people</td>
</tr>
<tr>
<td>✓ Sexual Health Clinics</td>
</tr>
<tr>
<td><strong>Counselling services</strong></td>
</tr>
<tr>
<td><strong>Local services</strong></td>
</tr>
<tr>
<td>✓ Time For You Warwickshire</td>
</tr>
<tr>
<td><strong>Online counselling resources</strong></td>
</tr>
<tr>
<td>✓ RYC online website, a guide to services and Q &amp; A forum; ‘Kooth’ on-line support for young people age 11-18</td>
</tr>
<tr>
<td><strong>School-based counselling services</strong></td>
</tr>
<tr>
<td><strong>Primary health care services</strong></td>
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</tbody>
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<thead>
<tr>
<th><strong>Support for Care Leavers</strong></th>
<th><strong>Support for Parents of adolescents</strong></th>
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</thead>
</table>
| **Factors promoting care leavers transition to independent living** | ✓ On-line resources (e.g. NSPCC ‘Parent line’)

20

21
1. Parenting programmes for parents of adolescents (e.g. Teen seminars offered by Warwickshire family and parenting team)
2. Other national/local support (e.g. Online resources from the NSPCC, Barnardo's or Action for Children)

- **Commissioning and coordination of countywide services**
  - Commissioning and introduction of standards for delivery of Relationship and Sexual Education (RSE) training for various agencies delivering RSE to ensure consistent, key messages countywide

4. **Promote planned pregnancies in adults**
   - Raise awareness and understanding about the importance of planning pregnancy
   - Provide access to Long Acting Reversible Contraception to would-be parents who face additional challenges

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Who / when</th>
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</thead>
<tbody>
<tr>
<td><strong>Pre-conception counselling</strong></td>
<td>Community perinatal mental health services and voluntary sector</td>
</tr>
<tr>
<td>✓ On-line pre-conception services (e.g. <em>Foresight</em> 22 - see example below)</td>
<td></td>
</tr>
<tr>
<td>✓ National and local pre-conception counselling services (NHS Family planning Clinics)</td>
<td></td>
</tr>
<tr>
<td>✓ Conflict resolution skills training for practitioners and participants; online and face-to-face (e.g. One Plus One 23)</td>
<td></td>
</tr>
<tr>
<td>✓ Young counselling services (e.g. Time For You - Warwickshire)</td>
<td></td>
</tr>
</tbody>
</table>
- **Provision of contraceptive advice and services**
  - Community Contraception Service (CCS) provides a specialist contraceptive and sexual health service which responds to individuals of all age groups, including dedicated services for young people
  - Sexual Health Clinics
  - Promote use of Long Acting Reversible Contraception (LARC) where appropriate to increase planned pregnancy

- **Services for drug and alcohol dependency**
  - Access to advice about Long Acting and Reversible Contraception (LARC), and specialist treatment (e.g. Compass Warwickshire - specifically for under 18's; Supporting Drug and Alcohol Recovery Service provided in Warwickshire by The Recovery Partnership)

- **Support for Care Leavers (e.g. Factors enabling care leavers transition to independent living)**
  - Stable placements while in care
  - Access to and continuity of professional and informal support for young people as they prepare for transition out of care (e.g. Care leavers be supported by a ‘leaving care worker’ and also a Personal Adviser (PA) from the charity Barnardo’s)
  - Easy and confidential access to sexual health information (e.g. Respect yourself campaign on-line website [www.respectyourself.info](http://www.respectyourself.info))
### Services for refugees and asylum seekers

- English as a second language (ESL) classes available (n.b. MIND\textsuperscript{26} identified language skills as a key factor in preserving mental health)

  Classes provided by various providers. Some arranged through Children's centres.

### Services for individuals with learning disabilities

- Specialist pregnancy services (e.g. The Charity FPA offer Specialist sexual health services for people with learning disabilities - http://www.fpa.org.uk)

  Staff involved in the care of vulnerable, young people

### Medication planning in pregnancy (e.g. Severe Mental Illness)

- Medication planning prior to pregnancy and commenced as soon as pregnancy confirmed\textsuperscript{27}

  Primary care statutory and voluntary sector providers in conjunction with specialist services such as perinatal psychiatry

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Examples
Roots of Empathy

- Canadian developed, school-based programme where a mother and baby visit a class weekly, outcomes include an increasing social and emotional knowledge, decreasing aggression and increasing prosocial behaviour e.g. sharing, helping and including. Current RCT by Queens University Belfast (Sept11-Dec15)

Kooth.com

- Warwickshire website: offers online counselling, support and advice to children and young people on a variety of issues

Childline

- Free 24hr counselling service, support with issues which cause distress or concern to children and young people including child abuse, bullying, depression, substance misuse, parental separation and pregnancy

Spring Fever

- Lessons on relationships and sexuality in primary schools has been found to promote knowledge and enhance pupil assertiveness
Overview of the Infant Mental Health Pathway: Antenatal

Aims

1. Promote and prepare men and women for a healthy emotional transition to parenthood
2. Promote parental mental health
3. Support parents to understand the emotional and developing needs of their infant
4. Identify and support parents with additional needs (*Universal Plus and Universal Partnership Plus services*)

Objectives

- **Promote and prepare men and women for a healthy emotional transition to parenthood**
  - Support emotional preparation for parenthood
  - Support development of new roles
  - Increase knowledge about the parent-infant relationship and early development of foetus and baby
  - Develop communication and conflict resolution skills

- **Support parents developing relationship with baby**
  - Promote bonding by increasing reflective function

- **Promote parental mental health**
  - Prevent anxiety and depression
  - Support healthy couple relationships
  - Support development of social networks

- **Identify and support parents with additional needs**
  - Identify parents with Universal Plus level needs (e.g. anxiety/depression, unwanted pregnancy, learning or physical disability, lack of social support, care leavers etc.)
  - Identify parents with Partnership Plus needs (e.g. unresolved loss, substance dependence, severe mental illness, domestic abuse)
Infant Mental Health Pathway: Antenatal

Aims
1. Promote and prepare men and women for a healthy emotional transition to parenthood
2. Promote parental mental health
3. Support parents to understand the emotional and developing needs of their infant
4. Identify and support parents with additional needs (*Universal Plus* and *Universal Partnership Plus* services)

<table>
<thead>
<tr>
<th>Interventions</th>
<th>Who /When</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Routine Antenatal Care</strong> (e.g. Health and social care assessment of needs, risk and choices)</td>
<td>Midwives, health visitors medical staff, allied health professionals, children’s centre staff</td>
</tr>
<tr>
<td>✓ Support mothers (and fathers where possible) in the transition to parenthood and in the promotion of bonding and attachment. Encourage mothers and fathers to reflect on their developing baby and what their unborn baby may be like</td>
<td></td>
</tr>
<tr>
<td>✓ <strong>Promote parental wellbeing</strong> (e.g. Encourage ‘mindfulness’, promote relaxation, address anxiety and depression, support healthy couple relationships, support the development of social networks)</td>
<td></td>
</tr>
</tbody>
</table>
- **Support the role of fathers** - engage and promote the role of the father\(^{30,31}\)
  - Signposting to information and services as appropriate

**Resources:**
- Maternal Emotional Wellbeing and Infant Development: A Good Practice Guide for Midwives\(^{32}\)
- Healthy habits for baby and you\(^{33}\)
- Apps (e.g. Getting to Know your Baby\(^{36}\) Best Beginnings Bump to Breastfeeding NCT online information and resources\(^{34}\))

<table>
<thead>
<tr>
<th><strong>Antenatal Clinics</strong></th>
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<tbody>
<tr>
<td>✓ Midwifery clinics in children’s centre</td>
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<table>
<thead>
<tr>
<th><strong>Antenatal Promotional Guide(^{34})</strong> (28 weeks) to identify women with additional needs (e.g. anxiety/depression; domestic abuse; substance dependency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Midwives to inform health visitors of pregnancy (follow-up with information as necessary i.e. change of pregnancy status) and health visitor to conduct interview using the Promotional Guide and inform midwives of named health visitor team</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Antenatal Preparation for Parenthood Programmes</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Offered to all parents, but particularly first time parents.(^{35}) Programmes should include the ‘transition to parenthood’, getting to know your unborn baby and negotiating new roles in addition to physical aspects of pregnancy. For example:</td>
</tr>
</tbody>
</table>

**Universal programmes:**
- ✓ Pregnancy, Birth and Beyond: Resource pack for *all* providers of antenatal education\(^{36}\)
- ✓ Solihull Approach antenatal course\(^{37}\)
- ✓ National Childbirth Trust (NCT)\(^{38}\) |

| **Midwives, health visitors, children’s centre Staff** |
| **Health visitor** |
| **Midwives/health visitors, children’s centre Staff** |
- Mellow Bumps[^39]
  
  *Targeted programmes:*
  - Baby Steps (NSPCC)[^40]
  - Nurturing Parents Programme (PEEP)[^41]

<table>
<thead>
<tr>
<th>Voluntary sector</th>
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</table>

- Practitioner training in supporting couple relationships
  - One Plus One – Relationship Support (Brief Encounters)Training[^42]
  - Solihull Approach[^43]

<table>
<thead>
<tr>
<th>Health professionals and children’s centre practitioners</th>
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</thead>
</table>

- Infant Mental Health (IMH) Champions
  - Practitioner with ‘Perinatal and Infant Mental Health’ training to provide an advisory service to colleagues; liaise with specialist mental health services; cascade training to others and provide on-going support and motivation

<table>
<thead>
<tr>
<th>Midwives, health visitors, children’s centre staff</th>
</tr>
</thead>
</table>

- Unicef Baby Friendly Accreditation[^44] [^45]
  - Breast feeding coordinators in post, promotion of breastfeeding advice and support
  - Breastfeeding buddies[^46]

| Midwives, health visitors, medical staff, allied health professionals, children’s centre staff |

### 2. Support parents developing relationship with baby

- Promote bonding by increasing parental reflective function:
  - Getting to Know Your Baby app and website[^36]
  - Bookstart - reading to bump[^58]
  - Antenatal Promotional Guide[^34]

| Midwives, health visitors, children’s centre staff |

[^39]: Link to Mellow Bumps
[^40]: Link to Baby Steps (NSPCC)
[^41]: Link to Nurturing Parents Programme (PEEP)
[^42]: Link to One Plus One – Relationship Support (Brief Encounters)Training
[^43]: Link to Solihull Approach
[^44]: Link to Unicef Baby Friendly Accreditation
[^45]: Link to Unicef Baby Friendly Accreditation
[^46]: Link to Breastfeeding buddies
[^36]: Link to Getting to Know Your Baby app and website
[^58]: Link to Bookstart - reading to bump
### 3. Promote parental mental health

- Prevent anxiety and depression
- Support healthy couple relationships
- Support development of social networks

- **Practitioner training in supporting couple relationships** – see above

- **Antenatal Promotional Guide** - see above

- **Group-based Programmes**
  - Mindfulness-based Stress-Based Reduction Programmes in Pregnancy

- **Antenatal Preparation for Parenthood Programme** - see above

### 4. Identify and support parents with additional needs

- Identify parents with Universal Plus level needs (e.g. anxiety/depression, unwanted pregnancy, learning or physical disability, lack of social support, care leavers etc.)
- Identify parents with Partnership Plus needs (e.g. unresolved loss, substance dependence, severe mental illness, domestic abuse)

- **Identification of women in need of additional support**
  - Midwifery screening at booking-in
  - Health visitor Antenatal Promotional Guide - see above

#### Referral pathways for women with additional needs

**Universal Plus**
- Additional visits by health visitor/midwives

Health visitors

Trained midwife, health visitor, voluntary sector staff

Midwife, health visitor

As appropriate via midwives, health visitors, GP
✓ Group-based support (see above)  
✓ Family Nurse Partnership

**Universal Partnership Plus**
- Domestic abuse support worker
- Substance/alcohol misuse worker; Parents Under Pressure Programme
- Perinatal psychiatrist/psychologist/CPN/crisis team
- IAPT (Improving Access to Psychological Therapies)

Specialist practitioners in NHS and voluntary sector
Examples of good practice:

**Solihull Approach**
- Solihull Approach Antenatal course: antenatal parenting group consisting of five-session course for mothers, fathers, partners, birth partners and grandparents

**National Childbirth Trust (NCT)**
- Voluntary sector service providing comprehensive antenatal education and support. Available nationally

**PEEP (Parents Early Education Partnership)**
- Nurturing Parents programme. A targeted programme for first time parents based on the concept of Reflective Function. Pilot study currently underway

**Pregnancy, Birth and Beyond**
- On-line framework for the delivery of antenatal education. Consists of a resource pack for leaders of community groups and activities. It covers the physiological aspects of pregnancy and birth, but also addresses the emotional transition to parenthood in greater depth and recognises the need to include fathers and other partners in groups and activities
### Overview of the Infant Mental Health Pathway: Postnatal to 1 Year

#### Aims

1. **Support parents to provide an environment that fosters the infant’s emotional, behavioural, social and cognitive development**
2. **Promote continued healthy social and emotional transition to parenthood**
3. **Promote parental mental health**
4. **Identify parents in need of additional support (Universal Plus and Partnership Plus services)**

#### Objectives

- **Support parents to provide an environment that fosters the infant’s emotional, behavioural, social and cognitive development**
  - Promote parent-infant interaction that is sensitive/attuned and high in reflective function
  - Promote secure attachment

- **Promote continued healthy social and emotional transition to parenthood**
  - Support the development of new roles
  - Prepare men and women for the social changes and emotional challenges of the transition to parenthood
  - Development of communication and conflict resolution skills

- **Promote parental mental health**
  - Encourage mental wellbeing
  - Support healthy couple relationships
  - Support the development of social networks
  - Identify mental health problems early and create a culture where parents are confident to seek help

- **Identify parents in need of additional support**
  - Identify parents with Universal Plus level needs (e.g. anxiety/depression, unwanted pregnancy, learning or physical disability, lack of social support, care leavers etc)
  - Identify parents with Partnership Plus needs (e.g. unresolved loss, substance dependence, severe mental illness, domestic abuse)
Infant Mental Health Pathway: Postnatal to 1 year

Aims

1. Support parents to provide an environment that fosters the infant’s emotional, behavioural, social and cognitive development
2. Promote continued healthy social and emotional transition to parenthood
3. Promote parental mental health
4. Identify parents in need of additional support (Universal Plus and Partnership Plus services)

1. Support parents to provide an environment which fosters the infant’s emotional, behavioural, social and cognitive development

- Promote parent-infant interaction that is sensitive/attuned and high in reflective function
- Promote secure attachment

<table>
<thead>
<tr>
<th>Interventions</th>
<th>Who</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unicef Baby-Friendly hospital</strong></td>
<td></td>
</tr>
<tr>
<td>✓ Baby to breast following delivery</td>
<td>Midwives in delivery suite</td>
</tr>
<tr>
<td>✓ Skin-to-skin care post delivery</td>
<td></td>
</tr>
<tr>
<td><strong>Promotion of parent-infant interaction</strong></td>
<td></td>
</tr>
<tr>
<td>✓ Skin-to-skin contact</td>
<td>Midwives, health visitors, children’s</td>
</tr>
<tr>
<td>✓ Infant carriers</td>
<td>centre practitioners, GP’s</td>
</tr>
<tr>
<td>✓ Breastfeeding support</td>
<td></td>
</tr>
<tr>
<td>✓ Cues-based infant massage programmes</td>
<td></td>
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</tbody>
</table>

51, 52

53

54, 55
## References

- **Introduce the social baby using media-based resources**
  - Getting to know your Baby app[^36] for parents and website for professionals.
  - Social baby book and DVD[^56]
  - Zero to Three ‘Healthy Minds’ resources[^57]
  - Baby Express newsletter[^57]
  - Standardized tools to teach parents about the social baby (e.g. Brazleton Neonatal Behavioural Assessment Scale)[^58]
  - Midwives, health visitors, children’s centre practitioners, GP’s

- **Promoting early learning and home learning environment**
  - PEEP[^59]
  - Baby express[^60]
  - Bookstart[^61]
  - Health visitors, children’s centre practitioners, early years librarians

- **Temperament-based anticipatory guidance[^62]**
  - Bath and bedtime routines
  - Midwives and health visitors, at every postnatal contact

- **Inform parents about available resources**
  - NHS Information Service for Parents[^63]
  - Netmums[^64] online support group for parents
  - Family Information Service, Local services (i.e. Warwickshire County Council)[^65]
  - Provided jointly by NHS, Department of Health and Department for Education Voluntary sector

- **Promote secure infant attachment**
  - *Promote parental reflective function*
  - Train practitioners to ‘model’ reflective parenting (Universal)
  - Minding the Baby Programme (e.g. NSPCC)[^66] (Targeted)
  - Primary care, children’s centre and voluntary sector staff who have been trained to deliver these methods of
<table>
<thead>
<tr>
<th>References</th>
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</thead>
<tbody>
<tr>
<td>✓ Nurturing Parents Programme (e.g. PEEP)(^{43}) (Targeted)</td>
</tr>
<tr>
<td></td>
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<tr>
<td>Promote ‘Secure Base’ parenting</td>
</tr>
<tr>
<td>✓ Train practitioners to ‘model’ secure base behaviour (Universal)</td>
</tr>
<tr>
<td>✓ Circle of Security programme(^{67}) (Targeted)</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Specialist intervention for parent-infant relationship difficulties</td>
</tr>
<tr>
<td>✓ Video-interaction guidance(^{68}) (^{69}) (Targeted)</td>
</tr>
<tr>
<td>✓ Parent-infant psychotherapy (i.e. Watch, Wait and Wonder(^{70}))</td>
</tr>
<tr>
<td>working</td>
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### 2. Promote continued healthy social and emotional transition to parenthood

- Support the development of new roles
- Prepare men and women for the social changes and emotional challenges of the transition to parenthood
- Development of communication and conflict resolution skills

- Promote continued attendance of antenatal/ postnatal transition to parenthood classes (see above)
  - Support fathers
    - Dads groups
    - Infant massage groups for dads
  - Support for couple relationships
    - One Plus One – Brief Encounters\(^{45}\)
  - Support development of social networks
    - Invitation to attend infant massage group
    - Children’s centre activities

Midwives, health visitors, children’s centre practitioners, GP’s
3. Promote parental mental health

- Support mental wellbeing
  - Teach ‘mindfulness’ skills or invite to stress reduction groups
  - Encourage parent ‘special time’ for self
  - Encourage the use of relaxation techniques

- Support healthy couple relationships
  - One Plus One - Brief Encounters

- Support the development of social networks
  - Invite to attend infant massage group
  - Encourage to attend children’s centre activities

- Identify mental health problems early and create a culture where parents are confident to seek help

4. Identify parents in need of additional support (*Universal Plus and Partnership Plus services*)

- Identify parents with Universal Plus level needs (e.g. anxiety/depression, unwanted pregnancy, learning or physical disability, lack of social support, care leavers etc.)
- Identify parents with Partnership Plus needs (e.g. unresolved loss; substance dependence; severe mental illness; domestic abuse)

- Postnatal Interview using the Promotional Guide (includes Whooley questions)
- Screen parent-infant interaction

Midwives, health visitors, children’s centre practitioners, GP’s

Voluntary sector

Midwives, health visitors, children’s centre practitioners, GP’s

Health visitor at 8 weeks
### References

- Parent-Infant Interaction Observation Scale (PIIOS)\(^{71}\)
- Ages and Stages Questionnaire\(^{72}\)

<table>
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| Health visitors, children’s centre practitioners, GP’s |

<table>
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<tr>
<th><strong>Support for healthy couple relationships</strong></th>
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<tbody>
<tr>
<td>✓ One Plus One(^{45})</td>
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</table>

| Voluntary sector |

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<th><strong>Support development of social networks</strong></th>
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| Health visitors, children’s centre practitioners |

### 4. Identify parents in need of additional support

- Identify parents with Universal Plus level needs (e.g. anxiety/depression; unwanted pregnancy; learning or physical disability, lack of social support, Care leavers, etc.)
- Identify parents with Partnership Plus needs (e.g. unresolved loss; substance dependence; severe mental illness; domestic abuse)

| **Identification of strategies as above** |

<table>
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<tr>
<th><strong>Referral pathways for women with additional needs</strong></th>
</tr>
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<tbody>
<tr>
<td>Universal Plus</td>
</tr>
<tr>
<td>✓ Additional visits by health visitor/midwives</td>
</tr>
<tr>
<td>✓ Group-based support (see above)</td>
</tr>
</tbody>
</table>

| Health visitors and midwives refer through GP’s to specialist perinatal mental health services |
## References

- Family Nurse Partnership\(^{49,50}\)

**Universal Partnership Plus**
- Domestic abuse support worker
- Substance/alcohol dependency worker; Parents Under Pressure
- IAPT (Improving Access to Psychological Therapies) National counselling service for parents with Anxiety and Depression
- Access to a specialist perinatal and infant mental health services (e.g. Mother and Baby In-Patient and Day Units; parent-infant psychotherapy; Perinatal psychologist.

| Referrals may be made directly to IAPT services. Women may also self-refer to IAPT services |
| Specialist mental health practitioners (e.g. psychologist; psychiatrists etc.) |
Examples:

- **The Neonatal Behavioural Assessment Scale (NBAS)**
  - The NBAS is a neuro-behavioural assessment of the newborn, designed to document the newborn’s contribution to the parent-infant system, the competencies and individual differences of the newborn, as well as any difficulties. The main feature of the NBAS is that it is an interactive assessment, which gives a clear profile of the baby’s behaviour, and how it must feel to parent the infant.

- **Newborn Behavioural Observations Systems Training (NBO)**
  - Use of the Newborn Behavioural Observations Systems Training (NBO) The NBO is a relationship-building tool between practitioner and parent, that supports the developing parent-infant relationship, and provides an introduction to their infant’s behaviour.

- **'Getting to know your baby' app and website**
  - APP/website for Health visitors/other practitioners to use with parents who are pregnant or with babies under 6 months to enhance appropriate parent infant interaction.

- **Video Interaction Guidance (VIG)**
  - A Relationship-Based Intervention to help improve communication and interaction, promote empathy and wellbeing. Video interaction guidance is an intervention through which a “guider” aims to enhance communication within relationships. It works by engaging clients actively in a process of change towards realizing their own hopes for a better future in their relationships with others who are important to them. Guiders are themselves guided by the values and beliefs around respect and empowerment.
Examples continued:

<table>
<thead>
<tr>
<th>Mellow Babies</th>
<th>Parents Under Pressure</th>
<th>Minding the Baby</th>
<th>Video Interactive Guidance (VIG)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Mellow Babies programme has undergone a randomized waiting list controlled trial. Clinically and statistically significant positive effects on maternal depression and Mother child interaction</td>
<td>• Parents with drug or alcohol misuse, who have a child under 2 in their care receive a 20 week programme which aims to support family functioning, develop parenting skills and caring relationships with infants</td>
<td>• NSPCC delivered intensive home visiting programme for vulnerable and at risk first time mothers under 25 and their babies. Delivered by social workers and health staff. Currently being evaluated.</td>
<td>• Fukkink, R. G. (2008). Video feedback in widescreen: A meta-analysis of family programs Clinical Psychology Review 28(6): 904-916.</td>
</tr>
</tbody>
</table>
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Sciences, Banff, March 2008.


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41 Nurturing Parents Programme. Peers Early Education Programme (PEEP) www.peep.org.uk

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43 Solihull Approach www.solihullapproachparenting.com

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60 Baby Express. www.thechildrensfoundation.co.uk/baby-express.php
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61 Bookstart. www.bookstart.org.uk


64 Netmums www.netmums.com

65 Warwickshire Family Information Service. www.warwickshire.gov.uk/fis

66 Minding the Baby. NSPCC. www.nspcc.org.uk/Inform/resourcesforprofessionals/underones/minding_the_baby_wda85606.html


