



Using



parent

voice



**to inform services
for children and families
(pregnancy - 4yrs)**

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services for children and families**

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Background

In early 2020, SSBC carried out a consultation with parents who had babies and children under 4 years old to ask them about some specific aspects of child development. The views given by parents will be used to both further develop existing services and develop new provision. This report summarises the process and the findings of the consultation.

Gratitude

SSBC would like to give thanks to partners who worked with parents to complete the questionnaires and returned them for analysis. SSBC would also like to thank parents and carers for taking time to complete the questionnaires.

Questionnaires

Two questionnaires were developed for the consultation:

1 General Projects

This questionnaire was split into sections covering:

- Breastfeeding
- Healthy weight
- Healthy teeth
- Smoking in pregnancy
- Support for parents
- Communication & language development

2 Social & Emotional Development

The aim of this questionnaire was to explore areas that may impact a child's emotional wellbeing. It included sensitive questions about relationships, attachment, bonding, mental health and support needs.

Consultation process

Questionnaires written

(See appendices for the final versions)



Distribution of questionnaires - 27th January – 5th March 2020

General Projects questionnaire distributed via:

- SSBC Engagement Team
- Literacy Volunteers
- Family Mentor Hubs
- Parent Champions & Ambassadors
- Tots Time sessions at libraries
- FRED* co-production session
- Frosty Fun Day at Bulwell Academy - 19th February
- Big Stories for Little Explorers at Hyson Green Youth Club - 5th March

Social & Emotional questionnaire distributed via:

- Nurses from the Family Nurse Partnership
- Family Mentor Hubs
- Early Help's Peep Watch Me Grow sessions

**Fathers Reading Every Day*



Collation of Questionnaires

Responses entered into Survey Monkey and then exported into MS Excel



Data analysis

Responses were analysed



Recommendations

Analysis of the questionnaire data informs future service and activity recommendations

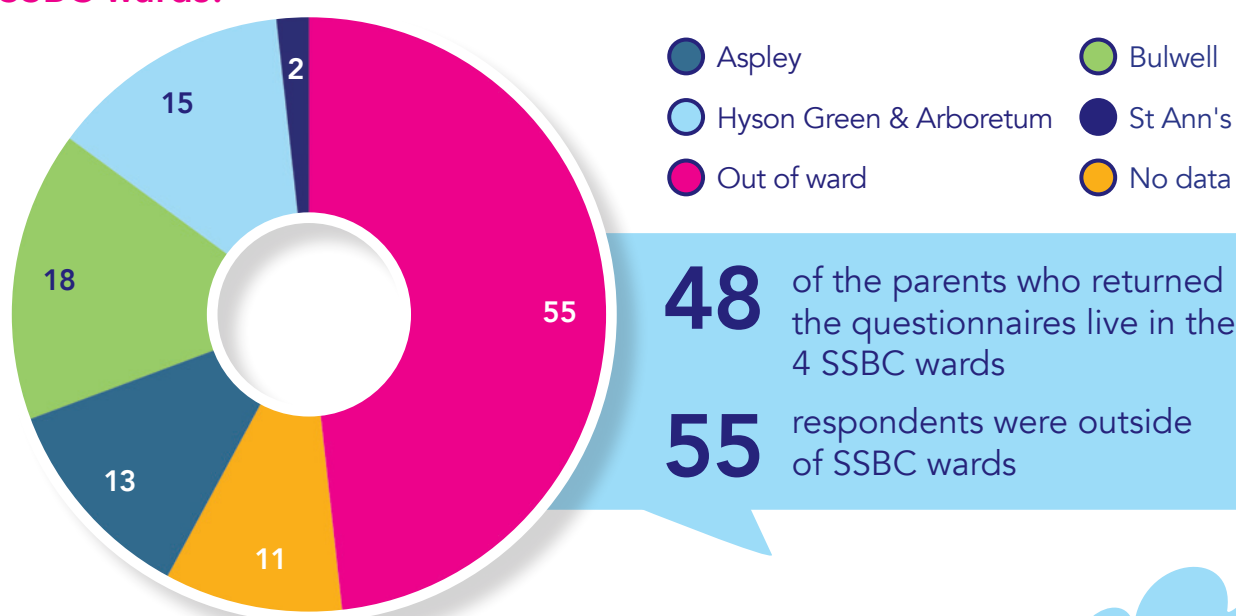
→ Data analysis & results

114 questionnaires were returned in total

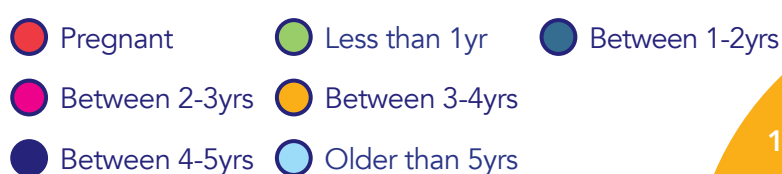
77 General Projects questionnaires 37 Social & Emotional questionnaires

92% of questionnaires were completed by mothers 8% were completed by fathers

How many parents who responded to the questionnaires live in the SSBC wards?

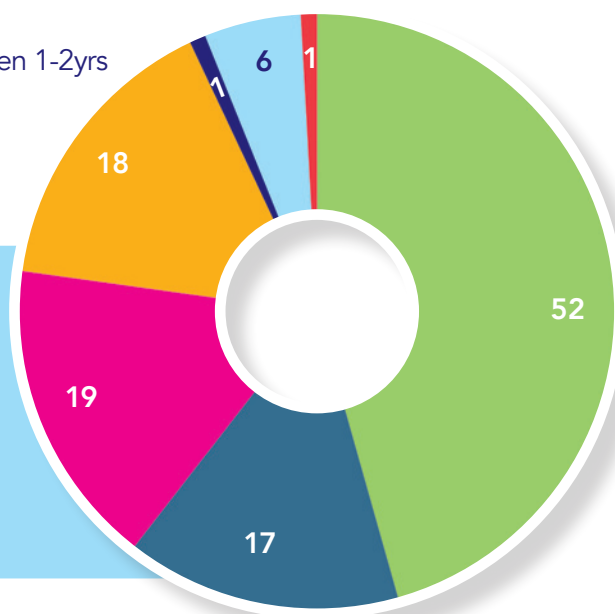


Age of youngest child



7 parents who completed the questionnaires had children outside of the SSBC age range (pregnancy up to 4 yrs)

52 respondents had a child less than 1yr old



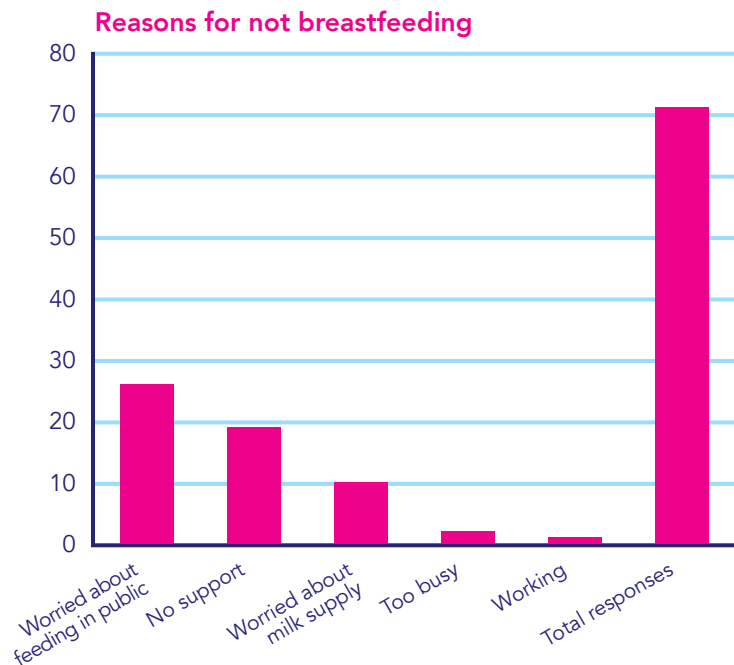
The data from the individual questions was analysed and the main conclusions are summarised in this report. We have also drawn out additional feedback of interest; these points are presented next to the relevant graphs. Please note that they were suggested by a minority of parents and therefore not intended to be consensus headlines.

Breastfeeding

When asked for reasons to explain low breastfeeding rates, the main response was feeling 'worried' (i.e. not feeling confident or comfortable enough) about breastfeeding in public.

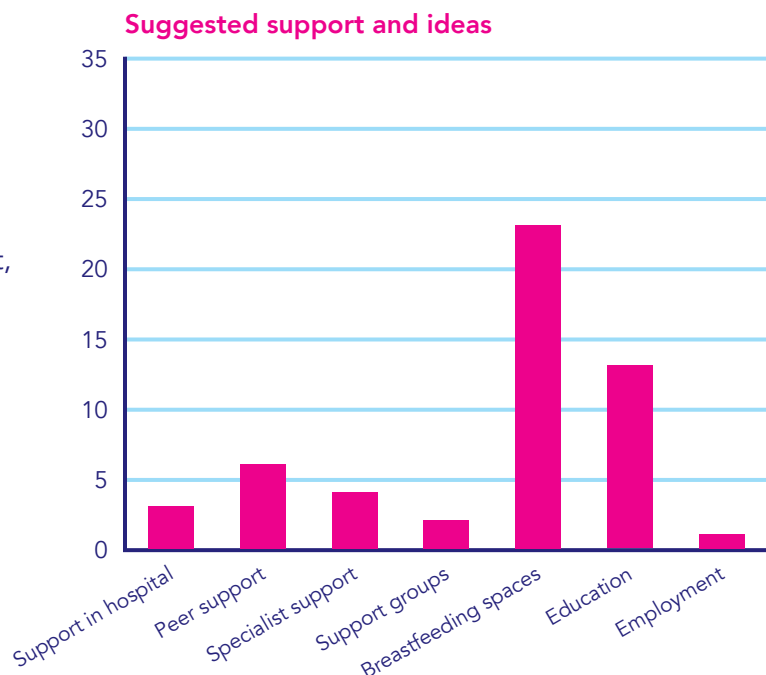
Some respondents suggested that lack of understanding could be an underlying issue, compounded by lack of specialist breastfeeding support. Some mothers were concerned they may not have enough milk or know when their baby is full. Some mothers noted that they preferred bottle feeding as their partners could share the feeding responsibilities. Additional reasons for not breastfeeding included:

- Feeling a pressure to bottle feed following the birth of their babies
- Struggling to keep up with the demand of expressing milk when their baby was in the neonatal unit
- Feeling unsupported during the early weeks of bringing their babies home
- Returning to work and a lack of support to express within working hours



There were two main suggestions to support breastfeeding:

- 1 More provision of private spaces for breastfeeding when out and about
- 2 Increased educational provision, including: information on attachment, how often to feed, signs baby is full, support around common problems like positioning, sore nipples and challenges with expressing milk



Additional ideas included more specialist support from Breastfeeding Support Workers, particularly in hospital. One person suggested mothers should not be discharged from hospital until they are comfortable and confident to continue breastfeeding at home. Peer support and Doula services were also suggested to provide on-going support in the early days.

Healthy weight

When asked for reasons for the high rates of obesity in children, there were two common answers:

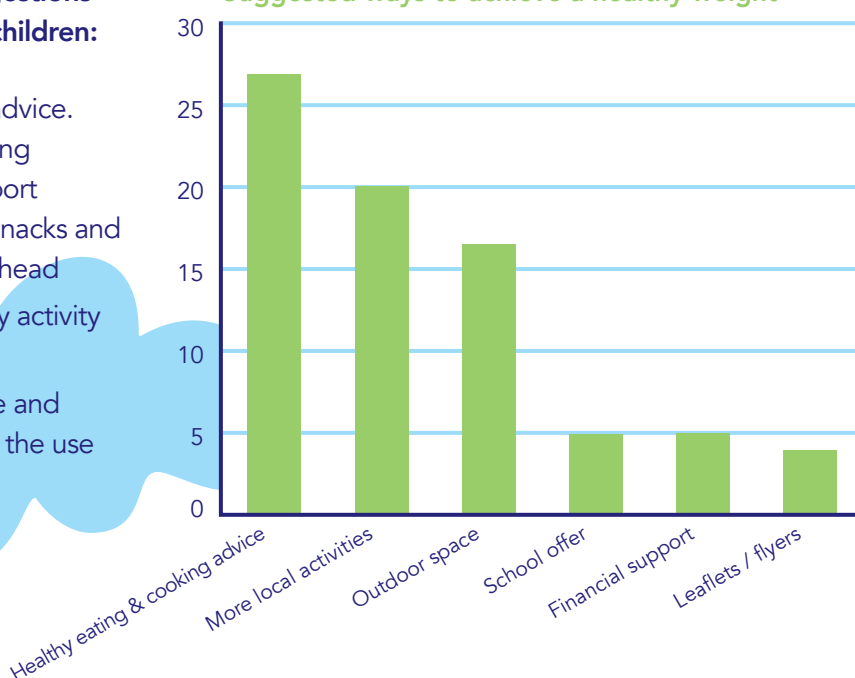
- 1 Unhealthy food is cheap and easily available
- 2 Children have limited access to play areas

A popular consensus was that lifestyle impacts upon food choice. This view encompassed parents' experiences as children and the food that they consumed as well as poverty, and the availability of cheap convenience foods. Some felt that the reason parents gave their children unhealthy meals was because they were busy and had limited time for meal planning and preparation.

There were three common suggestions to promote healthy weight for children:

- 1 Healthy eating and cooking advice.
One person suggested cooking sessions on Mondays to support families with meal planning, snacks and batch cooking for the week ahead
- 2 Provide affordable local family activity sessions e.g. free swimming
- 3 Ensure outdoor parks are safe and maintained, perhaps through the use of Park Rangers

Suggested ways to achieve a healthy weight



Some parents proposed cooking and nutritional information sessions to increase awareness of the importance of a balanced diet and improve cooking skills. Some suggested that the sessions could be held as a class or within the parents' homes.

A number of parents and carers proposed increasing the offer of free or more affordable family activity sessions, such as swimming, family walking routes, allotments, sports groups, and more activities for over 5's.

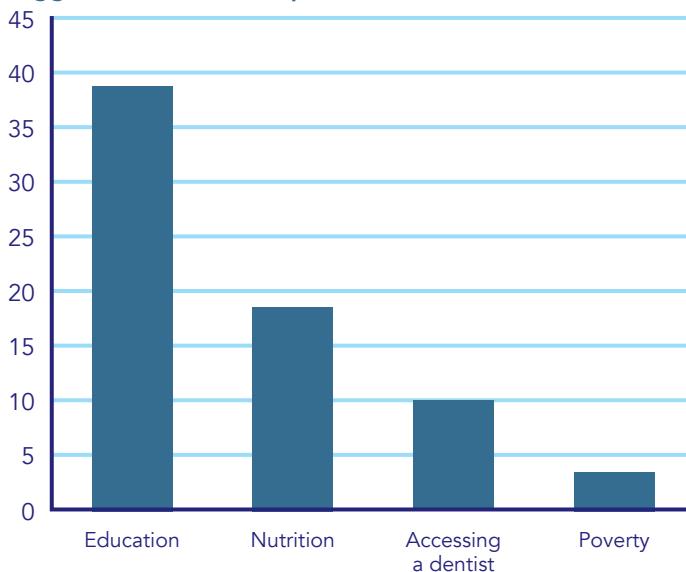
A small number of people would like to see schools contribute through increasing healthier options at meal times, health checks in school as well as increasing the number and range of after school clubs.

For families facing financial difficulty, respondents suggested offering healthy food vouchers.

Some parents would welcome information flyers and leaflets delivered to their homes advertising local activities and information on healthy meal ideas.

Healthy teeth

Suggested reasons for poor oral health



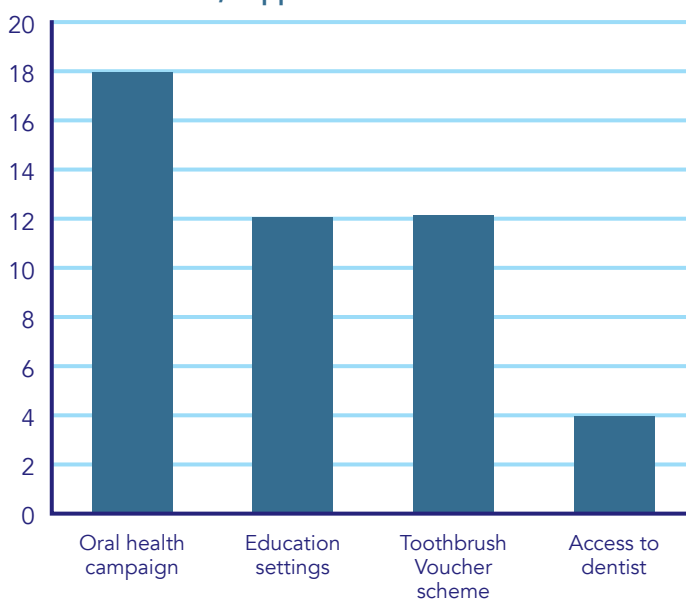
When asked why children's oral health was poor in Nottingham, parents answered that it was due to:

- 1 Information on the importance of brushing and caring for teeth is not readily available, especially about baby teeth. Lack of clear guidance on when and why children should be taken to the dentist
- 2 Poor nutrition; children's diets are high in sugars from sweets and fizzy drinks
- 3 Difficulty accessing a dentist

Some responses suggested that parents may not know that baby teeth are important. In addition, some children refused brushing or parents found it difficult to fit tooth brushing into their daily routines.

Poor nutrition was thought to be closely linked to oral health, with many children eating and drinking foods with high sugar content. Some respondents suggested that children may not have a toothbrush and toothpaste at home or parents may not be accessing a dentist because they do not know enough about the importance of good oral health. Two people said there were not enough dentist appointments available.

Ideas for services, support and information



87%

of respondents agreed that a public oral health campaign could increase awareness and therefore improve oral health in children.

Parents suggested that an oral health campaign should cover:

- The benefits of tooth brushing
- Hints and tips on brushing children's teeth
- Healthy eating, snacks and nutritional advice
- Posters to promote taking babies to the dentist
- Fun educational resources for children

12

respondents felt support from nurseries and schools would help too, including:

- Check-ups for all children and follow up visits
- Tooth brushing as part of the daily school routine

Another 12 parents called for a voucher scheme to support families struggling to pay for toothbrushes and toothpaste.

A final suggestion was for the Health Visiting one year check to include oral health guidance and advice on the benefits of visiting the dentist early.

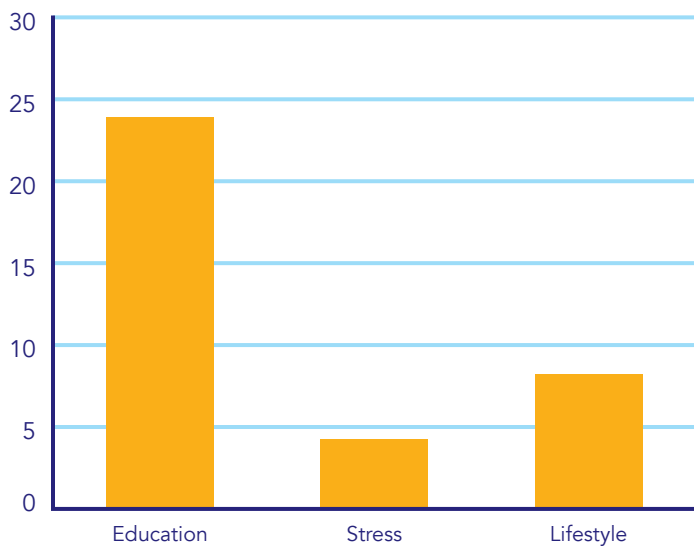


Smoking in pregnancy

Parents thought there were three main reasons why mothers continued to smoke during pregnancy:

- 1 There is a lack of knowledge about the impact of smoking on the unborn baby
- 2 Lifestyle and culture - mothers continue smoking because their peers are smoking, including family, friends and partners. This normalises smoking and makes it harder to stop or reduce smoking
- 3 To cope with stress and anxiety including domestic abuse

Why mothers smoke in pregnancy

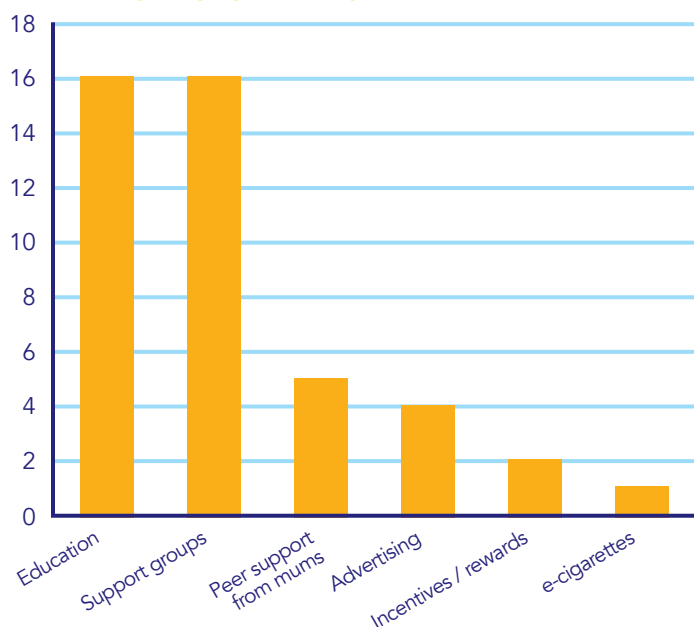


Some parents suggested that within communities where smoking is prevalent (and has been throughout several generations), smoking is normalised with no stigma attached to it. One person shared that their own mother had smoked through all three of her pregnancies and the children were unaffected.

There were three main ideas to support mothers to give up smoking during pregnancy:

- 1 Increased education and information on the dangers of smoking in pregnancy with clear details of the impact on the unborn baby
- 2 Offer regular support groups for both the mum and dad-to-be
- 3 A peer service led by mothers who are ex-smokers providing support and advice

Ideas for giving up smoking



Some respondents said that regular support groups should be offered at health clinics with reminders to attend. Incentives and rewards may provide an added motivation to stop or reduce smoking.

One respondent proposed that support for mothers who are experiencing stress and anxiety should be offered before addressing smoking. It was suggested that alternative coping tools would increase the success of smoking cessation.

A small number of people suggested a public health campaign. A further suggestion was to provide e-cigarettes as a safer alternative.

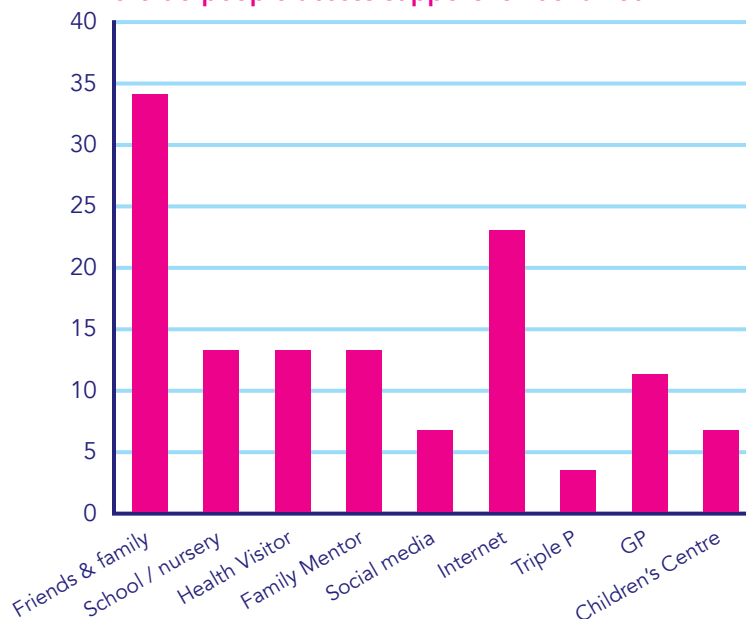
Support for parents

Parents and carers were asked where they went for advice or support with their children's behaviour, such as bedtimes, tantrums, fighting, and listening. The majority of respondents said they would seek support within their circle of friends and family or via the internet.

27% of respondents said they would not attend parenting groups. Reasons included: finding it daunting, not wanting to be seen as not coping, thinking the courses are for 'problem families'. Some respondents pointed out that parenting groups did not fit easily around full-time work or shift patterns.

37% of respondents said they would attend parenting groups, or have in the past. They found the groups helpful and welcomed the opportunity to support each other and share tips.

Where do people access support for behaviour?



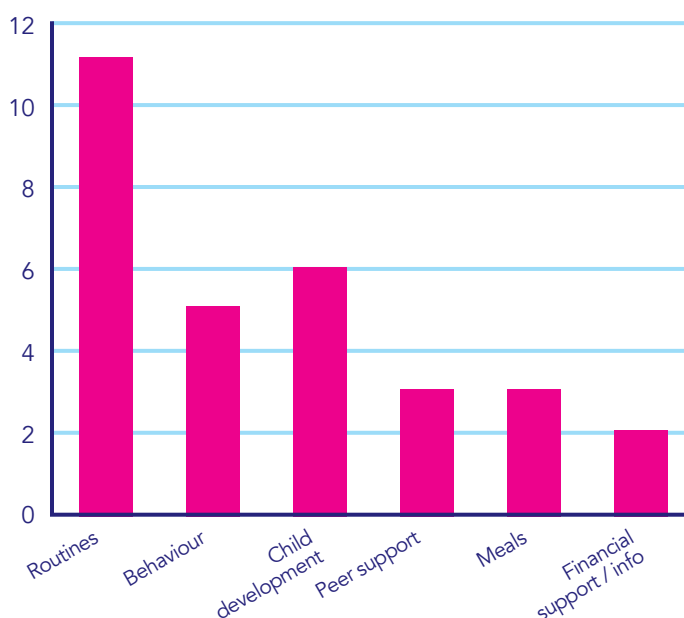
When asked what support they would like, the main areas were:

- 1 Routines and child development
- 2 Activities they could do at home to support learning

Other suggestions for parenting group topics included; information about financial support and parenting styles in other cultures.



Suggested parenting group topics



Suggestions to improve attendance at parenting groups included:

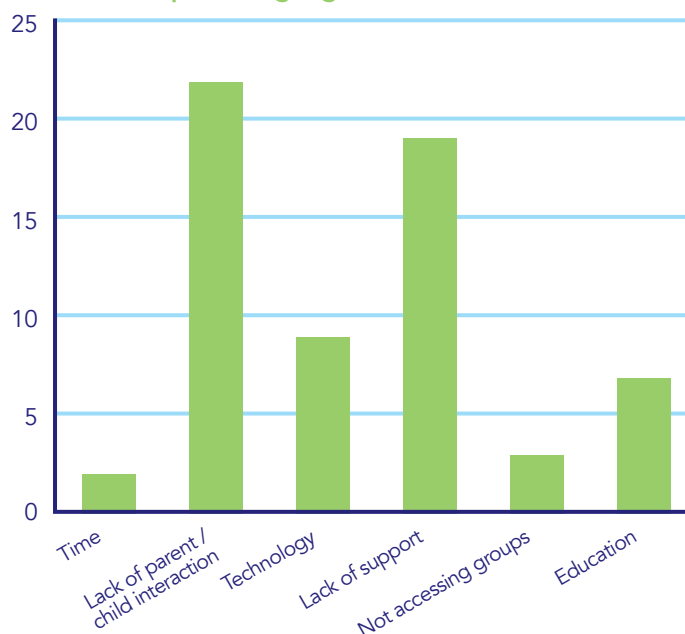
- 1 Better advertising including via social media and in venues such as libraries and newsagents, community and educational settings
- 2 Being offered to all families
- 3 Avoiding use of the phrase 'parenting group'
- 4 Running on more than one day per week and scheduled after popular children's groups
- 5 Sessions held in venues easily accessible by public transport
- 6 Sessions run by parents and supported by professionals

Communication & language development

When asked why a third of children in Nottingham start school with poor speaking and listening skills, the parents' responses were:

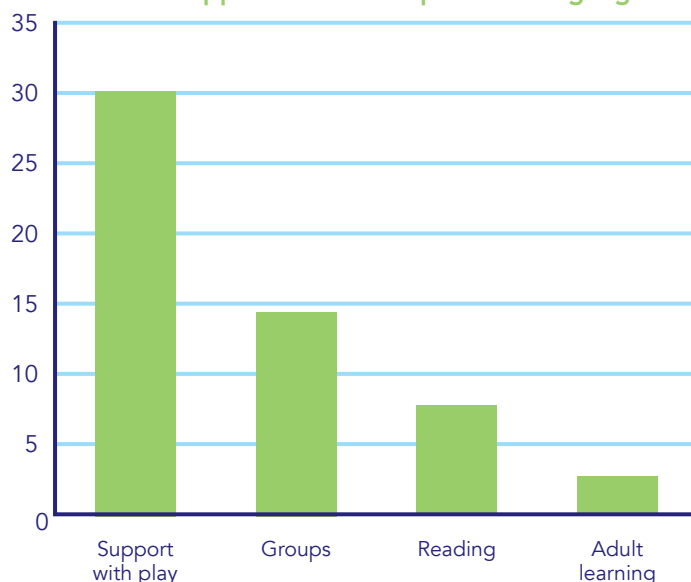
- 1 Not enough parent-child interaction at home, including having conversations or reading
- 2 A lack of support and education on how parents can help develop language and communication at home
- 3 Parents' reliance on technology to entertain their children

Reasons for poor language & communication



Some parents also suggested that technology may have an impact on parents' attention to their children with many spending time on social media rather than spending quality time with their children. Other suggestions highlighted a lack of knowledge about how to support language and communication.

What would support children's speech & language?



Parents and carers suggested two ways to support children's speech and language development:

- 1 Examples of play activities to support children's speech and language
- 2 Groups offering information on child development and school readiness

Respondents suggested that parents needed guidance on play, including: The benefits of play, how to play and what games and activities can promote speech and language. It was proposed that this information could be offered as an adult learning course, run during existing groups, during home visits or within a hand-out.

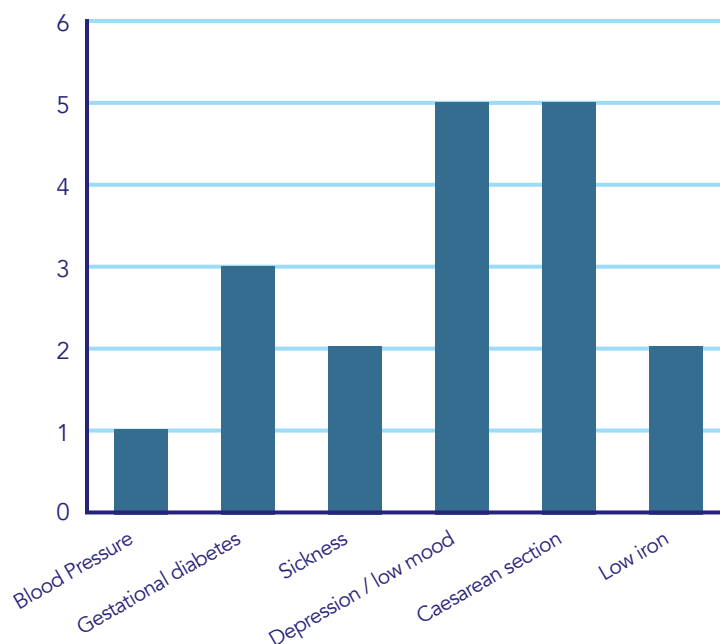
Some suggested more groups to support reading and more baby groups. Others thought support for parents with low literacy would lead to increased parent confidence to support children's learning within the home.

Social and emotional questionnaire

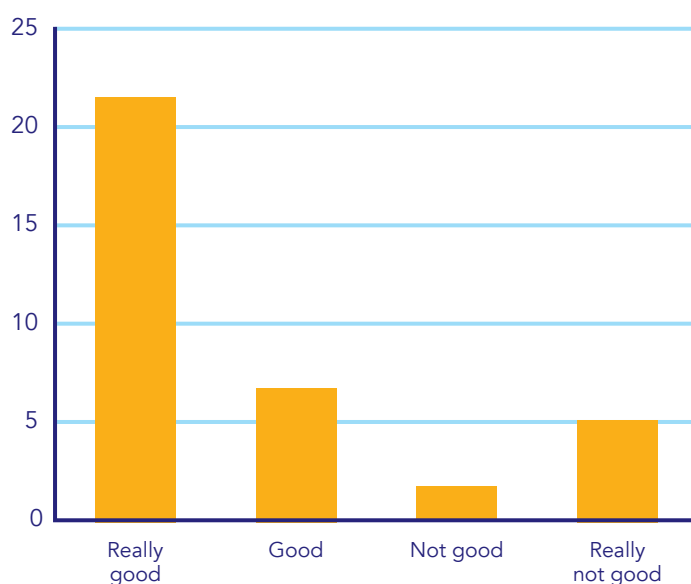
Difficulties in pregnancy / birth

The most prevalent difficulties identified during pregnancy and labour were:

- 1 Depression / low mood
- 2 Having delivery by caesarean section



Relationship with baby



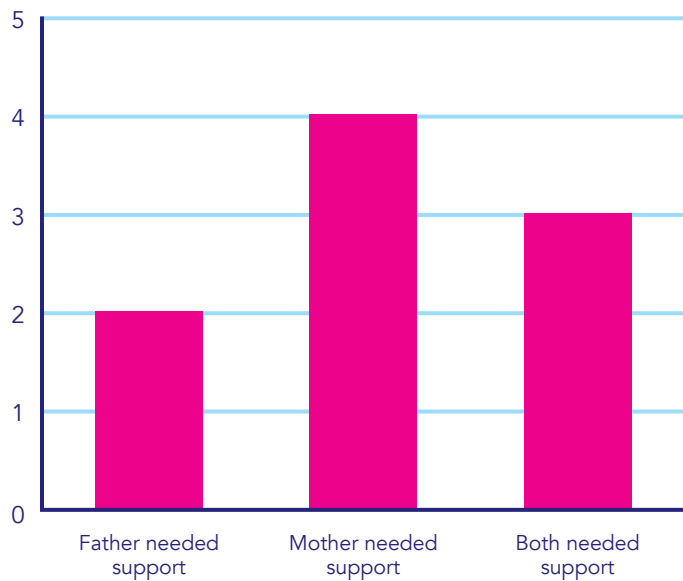
While the majority of parents felt they had a really good relationship with their baby, 19% gave responses which demonstrated difficulties, such as not knowing how to read their baby's cues. Comments included; 'he just looks at me', 'difficult to understand her', 'for the first 14 days could not look at or enjoy him', '(baby) did not love me'.



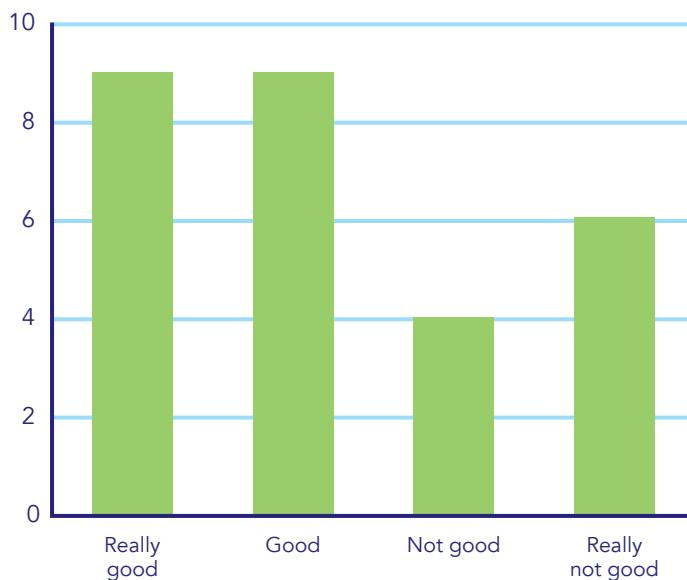
Difficulty bonding

When asked specifically about bonding, **25%** of parents who were struggling to build relationships with their baby reported that the mother, the father or both needed support with bonding.

Information on the importance of skin to skin contact was provided in a handful of cases, but **70%** of the parents said they did not receive relationship or bonding support after their baby was born.

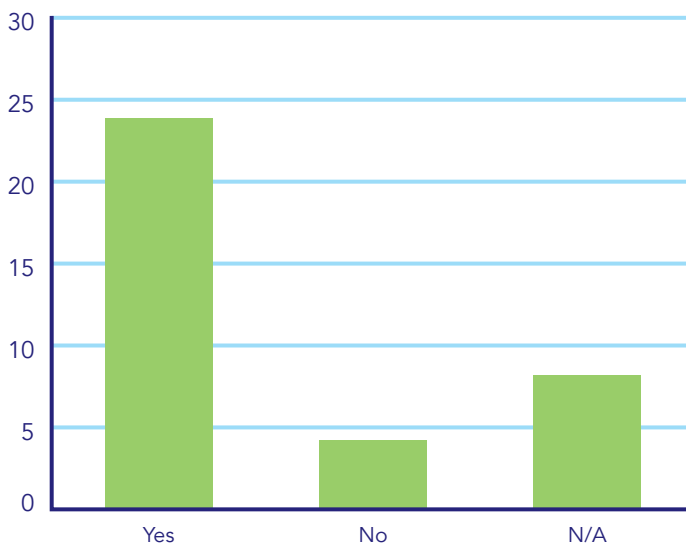


Relationship with partner



The majority of respondents reported really good or good relationships with their partner. However **29%** of the responses indicated a negative relationship with their partner and **11%** were no longer in the relationship. One parent felt that their eventual separation from their partner was as result of undiagnosed postnatal depression. Another respondent stated the father was reluctant to accept his child.

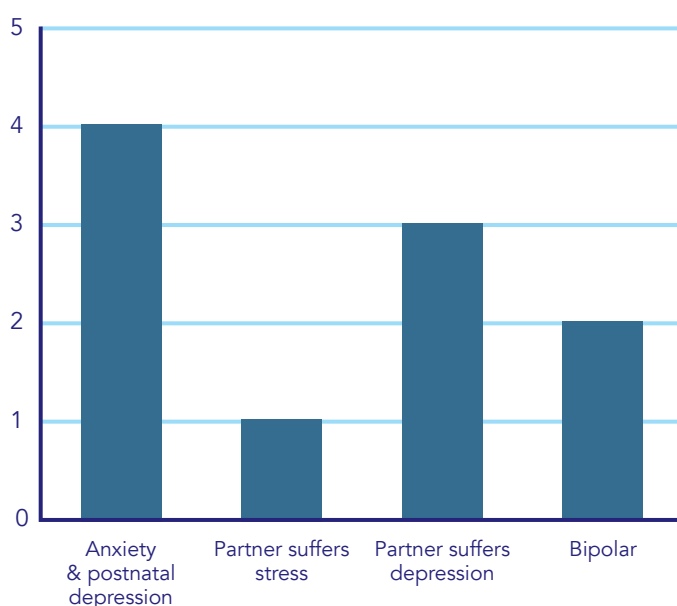
Relationship support



67%

of parents and carers said they had not been offered any relationship support during pregnancy or after the birth of their baby.

Mental health issues



29% of parents said that they or their partner had experienced mental health issues including depression and/or anxiety.

17% of the respondents received mental health support from their GP.

Other support

Additional support that parents would have welcomed during pregnancy or the birth of their baby included:

- 1** More emotional support and preparation for labour
- 2** Support for the family, including advice specific to new dads and drop-in sessions to ask questions about parenting
- 3** Wider topics in antenatal classes to include examples of how to interact with baby rather than the main focus being on labour
- 4** Peer groups with an opportunity for experienced parents to offer support



➔ Recommendations

Based on the conclusions from analysis of the questionnaires, the following recommendations are made for future services and activities to support outcomes for children in SSBC wards:

Breastfeeding

Parents said

- 1 Increase mothers' confidence and comfort to breastfeed in public
(More provision of private spaces to support breastfeeding outside the home)
- 2 Increased education including information on attachment, how often to feed, signs baby is full, support around common problems
- 3 It is challenging to return to work and continue expressing milk

We offer

- ✓ Baby Buddy app

We plan to

- Work with partners to achieve Nottingham City Breastfeeding Friendly Charter
- Run public health campaigns to normalise breastfeeding and provide key messages
- Offer guidance to partners and grandparents on how they can support breastfeeding mums

Healthy weight

Parents said

- 1 Healthy eating and cooking advice, such as cooking sessions on Mondays to support families with meal planning, snacks and batch cooking for the week ahead
- 2 Provide affordable local family activity sessions e.g. free swimming
- 3 Ensure outdoor parks are safe and maintained

We offer

- ✓ Weekly Cook and Play community group sessions in SSBC wards
- ✓ Ideas Fund Projects such as Pregnancy Yoga, Twigglets, Funky Tots

We plan to

- Work with partners on a whole system approach to healthy weight, so there is no duplication and service gaps are filled
- Work with nurseries to run projects to support healthy weight



Healthy teeth

Parents said

- 1 Provide education on the importance of brushing and caring for teeth (especially baby teeth), visiting the dentist, and healthy snacks
- 2 Public oral health campaign
- 3 Assess accessibility to dentists within SSBC wards



We offer

- ✓ Parent education workshops 'Brush, Book & Bed'
- ✓ Parent Obsession Group (POG) to cascade oral health messages and distribute resources at schools

We plan to

- Provide workforce training on oral health
- Work with an Oral Health Promotion Specialist to support linking with dentists
- Introduce supervised tooth brushing sessions for parents and children in nurseries and other early years settings
- Work with partners to create a local oral health campaign linked to the national campaign 'A Little Trip to the Dentist'

Smoking in pregnancy

Parents said

- 1 Provide increased education and information on the dangers of smoking in pregnancy with clear details of the impact on the unborn baby
- 2 Provide a peer support service run by mothers who are ex-smokers, for mothers who are looking to stop smoking
- 3 Offer regular support groups for both the mum and dad-to-be
- 4 Support family and friends to also stop or reduce smoking

We offer

- ✓ Baby Buddy app

We plan to

- Develop the 'Love Bump' campaign to reduce smoking in pregnancy
- Fund the Smoke Free App to support pregnant women, partners and family members to stop smoking

Support for children's behaviour

Parents said

- 1 Increase online support available
- 2 Offer weekend or evening parenting sessions
- 3 Improve advertising, including via social media
- 4 Avoid using the phrase 'parenting group'
- 5 Run sessions more than once per week and 'piggy back' onto popular children's groups
- 6 Offer sessions run by parents and supported by professionals in easy to access venues

We offer

- ✓ Triple P (Positive Parenting Programme) Discussion Groups run in all areas of the City – sessions are scheduled on different days, both in the morning and afternoon
- ✓ SSBC funded training for Early Help Family Support Workers on the Triple P 8 week Group course. Groups are scheduled on different days, both in the morning and afternoon
- ✓ Triple P Tip Sheets on a one-to-one basis
- ✓ Small Steps at Home provided by Family Mentors

We plan to

- Launch a Test and Learn project assessing the effectiveness of Triple P online
- Work with SSBC Marketing and Communications Team and a parent focus group to develop a promotional campaign for Triple P
- Support implementation of The Leuven Scales for emotional well-being in nurseries and early years settings



Communication & language development

Parents said

- 1 Provide support and information to increase parent-child interaction at home and reduce reliance on technology
- 2 Provide examples of play activities to support children's speech and language
- 3 Provide groups offering information on child development and school readiness
- 4 Provide literacy support for parents



We offer

- ✓ Dolly Parton's Imagination Library (DPIL)
- ✓ Story and Rhyme Time
- ✓ Fathers Reading Every Day (FRED)
- ✓ National Literacy Trust – Literacy Champions & Early Words Together at 2
- ✓ Ideas Fund – Learning to Love Books
- ✓ Big Little Moments campaign

We plan to

- Establish FRED as one-to-one sessions within the Family Mentor Offer and develop a new group offer of FRED in the community
- Develop resources to support the home learning environment for parents of 0 - 2 year olds
- Develop work to support aspirations for parents and their families working with Nottingham Trent University

Relationships

Parents said

- 1 They wanted advice about how to read their baby's cues
- 2 Support for expectant families is needed, including father education and drop in sessions
- 3 They wanted peer groups with an opportunity for experienced parents to offer support



We offer

- ✓ Baby Massage
- ✓ Change that Lasts
- ✓ Baby Buddy App

We plan to

- Work with partners to explore opportunities to provide more mental health support for parents in the early days of parenthood
- Develop a 'dads pack' containing information to support dads as new parents

Attachment and bonding

Parents said

- 1 Bonding and attachment support for the whole family is required
- 2 The topics in antenatal classes needed broadening to include examples of how to interact with baby rather than focusing primarily on labour



We offer

- ✓ Baby Massage
- ✓ Baby Buddy App
- ✓ Big Little Moments campaign

We plan to

- Support Early Help to introduce a Peep Antenatal programme
- Promote more father inclusive practice across the workforce and partnerships

Mental health

Parents said

- 1 Increase emotional support available to mothers and families on labour wards
- 2 Support fathers' mental health
- 3 Increase the offer / provision of counselling

We plan to

- Introduce a greater focus on mental health related topics in 'Think Dads' training; available to the early years workforce
- Work with hospital midwives to introduce recliner chairs so fathers can stay overnight with partners having a baby

→ Conclusion

SSBC is fully committed to working with parents. Our core principle is *".... children at the heart with parents leading the way, supported and guided by experts."*



This report provides a summary of the consultation responses of 114 parents and carers in early 2020. These responses detail both the difficulties experienced by parents along with their ideas and recommendations for how these difficulties could be addressed through future service development. This report provides an initial response to these findings - both in terms of stating what is already being delivered and plans for future developments.

This report is the start of an on-going process of service development. SSBC will use the report and the parent recommendations to track developments and ensure that we are continuously responding to the parent voice expressed during this consultation. We will publish regular updates on our progress on the SSBC website, through our social media channels and newsletter, and in community venues across the SSBC wards.

Once again, we would like to thank the partners, parents and carers who contributed to this report. We are looking forward to continuing our partnerships to further improve and develop support for parents from pregnancy and during the all-important early years of a child's development.

Appendix 1

General projects questionnaire

Small Steps Big Changes (SSBC) is a project funded by the National Lottery Community Fund. We work in Aspley, Bulwell, Hyson Green and Arboretum and St Ann's offering a range of groups and activities to parents and families with babies and children aged 0 -4. We are planning some exciting new projects and would really like your help to understand our local communities. Please could you support us by taking ten minutes to answer the questions below.

We do not need your name but we would like to have a few details about where you live and who you are. All your responses will be kept safe and won't be shared with anyone other than SSBC.

1. Some information about you

1. What are the ages of your children or are you pregnant?

2. What is your postcode?

3. Are you Mum? Dad?

2. Breastfeeding

1. Less mothers breastfeed their babies in Nottingham than other places. Why do you think this is?

(Ideas might include; medical reasons, no support, worried to feed in public, worried don't have enough milk to feed their baby)

2. What do you think would help more mothers to breastfeed their babies?

(Ideas might include; support and information available, breastfeeding friendly spaces, support from other parents, information on websites, YouTube "How To" clips)

3. Healthy teeth

1. Nottingham has more 5 year olds who do not have healthy teeth compared to other places. Why do you think this is?

(Ideas might include: Don't understand the importance of brushing teeth from being a baby with first teeth, don't have a local dentist etc.)

2. Do you and your children go to the dentist? Yes / No. If not, could you tell us why?

(Ideas might include; Don't know how to find the nearest dentist, no NHS dentist places, recently moved to area, wasn't able to book an appointment when I called).

3. What services, support and information do you think would help children's teeth to be healthier?

(Ideas might include; more local dentists, hints & tips on teeth brushing, vouchers to get toothpaste and brushes etc.)

4. Healthy weight

1. 1 in 4 children in Nottingham are overweight when they start primary school. Why do you think this is?

(Ideas might include; lack of outdoor/indoor safe play spaces, activities available and hints and tips about healthy eating).

2. What services, support and information would you like to see to help children to keep a healthy weight?

(Ideas might include; having safe local parks, information about healthy meals, having local activities to do as a family)

5. Smoking in pregnancy

1. More pregnant women smoke in Nottingham than pregnant women in other places. Why do you think this is?

(Ideas could include; mum smoked when she was pregnant, not understanding the health problems for the baby as they grow up).

2. What do you think would help women reduce or give up smoking when they are pregnant?

(Ideas might include; other mums who have given up smoking giving support, having clear advice on why to give up smoking etc.)

6. Communication & language

1. Almost 1 in 3 of all 5-year olds in Nottingham start school without the speaking or listening skills they need to be able to start learning. Why do you think this is?
(Ideas might include; parents needing support to help their children at home including tips and ideas on how to do fun games and playing in the home)

2. What do you think needs to happen to change this?
(Ideas may include; literacy support for parents, parents having activities to do with their children, and parents knowing what their child needs to do before starting school)

7. Support for parents

1. Where do you think parents go to for advice or support with their children's behaviour, such as bedtimes, tantrums, fighting, listening?
(Ideas might include; family or friends, Websites, Children's Centre Worker, Nursery or school teacher)

2. Do think parenting groups are popular with families? Yes / No. Please tell us why.

3. What support would you like to see from a local parenting group?

(Ideas might include; hints, tips and advice to parents about things parents would like help with, like routines, listening, fighting)

4. How should the group be set up?

(Ideas might include; who runs it, how its advertised, where it's held, times of day, what it's called)

Is there anything else you would like to tell us (including anything else you'd like to say about the questions we have asked)?

Thank you for taking the time to answer our questions. Your responses will help us plan some of our future projects. If you would like to know more about SSBC or would like more information on what we have planned then contact us at ncp.ss.bc@nhs.net or visit our website

Appendix 2

Social and Emotional development questionnaire

Small Steps Big Changes (SSBC) is a project funded by the National Lottery Community Fund. We work in Aspley, Bulwell, Hyson Green and Arboretum and St Ann's offering a range of groups and activities to parents and families with babies and children aged 0 -4. We are planning some exciting new projects and would really like your help to understand our local communities. Please could you support us by taking ten minutes to answer the questions below.

We do not need your name but we would like to have a few details about where you live and who you are. All your responses will be kept safe and won't be shared with anyone other than SSBC.

Please only answer questions you feel comfortable to answer

Some information about you

Are you Mum or Dad?

How old is your youngest child?

What is your postcode?

The next three questions are about your pregnancy

1. Were there any difficulties during the pregnancy or birth of your baby? These could be medical social or emotional. Please give as much detail as you feel comfortable.

2. Did you (or your partner) have support for any difficulties during the pregnancy or birth of your baby?

Not applicable ☐ **Yes** ☐ **No** ☐

If yes, who provided support and did it help? Please explain.

3. Is there any additional support that you would have liked to have been offered? Please explain.

The following questions are about after your baby was born

4. How would you describe your relationship with your baby? Please explain.

5. How was your relationship with your partner? Please explain.

6. Did you (or your partner) have any relationship support after your baby was born?

Not applicable ☐ **Yes** ☐ **No** ☐

If yes, who provided support and did it help? Please explain

7. What are your ideas for how services could help parents in their relationship with each other and with their baby?

8. Did you (or your partner) have any relationship support after your baby was born?

Yes ☐ No ☐ Prefer not to say ☐

If yes, who provided support and did it help? Please explain

9. Did you (or your partner) receive any support about bonding with your baby?

Not applicable ☐ Yes ☐ No ☐

If yes, who provided support and did it help? Please explain.

10. What are your ideas for how services could help parents to bond with their baby?

11. Did you (or your partner) have any mental health issues?

Yes ☐ No ☐ Prefer not to say ☐

If yes, please explain

12. Did you (or your partner) receive any support for mental health?

Not applicable ☐ Yes ☐ No ☐

If yes, who provided support and did it help? Please explain.

13. Is there any additional mental health support that you would have liked to have been offered? Please explain.

Thank you for taking the time to answer our questions. Your responses will help us plan some of our future projects. If you would like to know more about SSBC or would like more information on what we have planned then contact us at ncp.ss.bc@nhs.net or visit our website



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