

The Impact of Specialist Parent-Infant Relationship Teams

What the evidence tells us

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Plan for today

- What the evidence tells us Highlights from the summary of evidence report
- 2. What the evidence is not telling us (yet!) An example of wider impact in local practice
- 3. Discussion



Summary of evidence

- Large-scale research of interventions typically offered by Specialist Parent-Infant Relationship Teams
- Small-scale local service research and evaluations

Three domains

- 1. Strengthening relationships between babies and their caregivers
- 2. Improving the mental health of caregivers
- 3. Supporting babies' early development and wellbeing (including those most at risk)



1. Strengthening relationships between babies and their caregivers

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 The quality of the parent-infant relationship has a significant impact on babies' brain development, social and emotional development and on children's future outcomes.

1. Strengthening relationships between babies and their caregivers

 'The Evidence Base for Psychoanalytic and Psychodynamic Interventions with Children Under 5 Years of Age and Their Caregivers', The Anna Freud National Centre for Children and Families (2022).

1. Strengthening relationships between babies and their caregivers

• 74% of the studies showed an improvement in parentchild interactions following intervention.

1. Strengthening relationships between babies and their caregivers

 In a Cochrane review of 22 randomised studies (made up of 1889 parent-child pairs) video feedback interventions such as VIG and VIPP-SD were shown to be effective at improving parental sensitivity towards young children. O'Hara et al. (2019).

1. Strengthening relationships between babies and their caregivers

 A study of 54 families who had completed an intervention showed that parents experienced significantly increased feelings of warmth towards their baby and felt their baby to be less invasive. (Together with Baby Service Essex, 2021)

2. Improving the mental health of caregivers

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 The mental health of caregivers, both in pregnancy and postnatally, can impact their ability to understand and respond sensitively to their child's needs. Poor mental health in caregivers can put the child at risk of poor outcomes.

2. Improving the mental health of caregivers

• 73% of studies showed an improvement in levels of depression in caregivers following intervention.

The Anna Freud National Centre for Children and Families (2022)

2. Improving the mental health of caregivers

• Circle of Security-Parenting groups had a positive impact for caregivers in three areas: depression, stress and reflective functioning.

2. Improving the mental health of caregivers

 In a sample of 168 caregivers accessing 4 different Specialist Parent-Infant Teams in England, levels of anxiety and depression moved from 'clinical concern' into the 'non-clinical' range following an intervention. Parent Infant Partnership (PIP) UK internal report, 2017.



3. Supporting babies' early development and wellbeing (including those most at risk)

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 The healthy development of children is a long-term goal of Specialist Parent-Infant Relationship Teams. Helping babies and young children to meet developmental milestones places them on the right trajectory for their longer-term development.

3. Supporting babies' early development and wellbeing (including those most at risk)

 83% of studies led to improvements in a young child's social, emotional and behavioural wellbeing following intervention.

(The Anna Freud National Centre for Children and Families, 2022)

3. Supporting babies' early development and wellbeing (including those most at risk)

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- Norfolk Parent-Infant Mental Health Attachment Project (PRIMAP). Smith et al. (2017).
 A study that examined outcomes in a project which provided attachment therapy mental health support to families where babies were on the edge of care.

- 3. Supporting babies' early development and wellbeing (including those most at risk)
- Norfolk Parent-Infant Mental Health Attachment Project (PRIMAP). Smith et al. (2017).

Children taken into care reduced from a ratio of 1:4 to 1:10, meaning more babies stayed with their birth families.

Conclusions and Openings

- More interventions
- Future updates to the evidence summary
- Recommendations for future research

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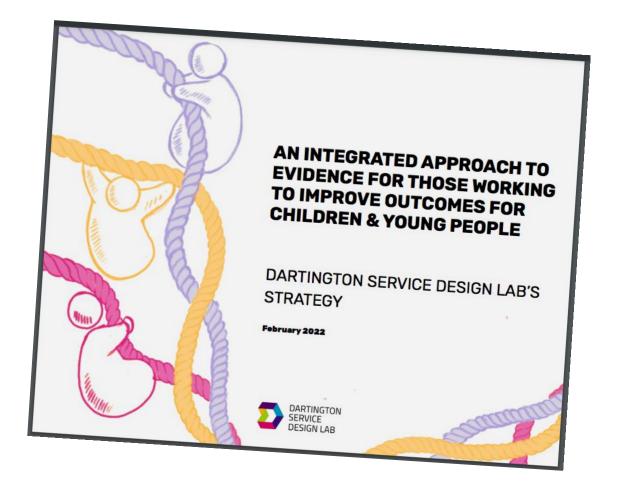
3. Discussion





An example of wider impact in local practice









'When different forms of evidence can 'speak' to each other, we can build stronger, more useful knowledge on which we can act'





Discussion



References

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