



Listening to Our Babies

Newcastle's Infant
Mental Health Strategy
2024-2029



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Newcastle’s Infant Mental Health Strategy, 2024-2029

Having a baby can be an amazing and exciting time, however it’s not without its challenges. There are many things that can make this time extremely stressful and this can have a negative impact on physical and mental wellbeing.

This strategy is here to help us understand and learn more about how we can all work together to provide support, to make things better for babies in Newcastle.

To do this we need to work with families, care givers and those that work with adults and children to enable us all to improve our physical and mental health.

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Foreword

Newcastle really values the babies who live within the city.

We appreciate they are our next generation and it’s imperative that we commit to enabling Newcastle to be a happy, safe, nurturing environment. In order to do this, we need to ensure Newcastle’s population have access to services and access to information and knowledge including understanding how our babies’ brains develop and that asking for support is a positive step. Being able to access this at the right time and in the right environment is important. This strategy aims to hold Newcastle to account so we can continue to improve outcomes for our babies.

We acknowledge that a long-term response is needed to ensure positive changes are sustainable, long-lasting and easily adaptable to the ever-changing needs of our population. We will continue to work on reducing health inequalities in Newcastle and acknowledge that whilst we are making positive changes as a city, we still have a lot of work to do.

**Cath McEvoy-Carr, Director of Children and Families,
Newcastle City Council**

Vision and Principles of the Strategy

We want every child in Newcastle to have the best start in life. To do this, we will ensure all families in the city are supported from pregnancy to establish secure emotional foundations. Parents, carers and practitioners will feel equipped and empowered to support babies to grow and develop into happy, safe and healthy infants who will thrive throughout their life course. To achieve this, we will work together to create a nurturing, sensitive, safe, well-informed and connected city where babies are everyone’s business.

Throughout the development and implementation of this strategy we want to ensure our guiding principles and aims are fully considered at every stage.

This includes:

- Everyone acknowledging that parents, carers and professionals are always trying their best.
- Being flexible to the needs of different family dynamics.
- Following a strengths-based approach.
- Easy access to services for all families.
- Promoting and improving understanding of infant mental health and the importance of relationships.
- Ensuring we hear the voice of the child.
- Following an integrated/multi-disciplinary approach.
- Aiming for prevention/early intervention.
- Parents, practitioners and society understanding the importance of attachments.
- Continuing to put a spotlight on the first 1001 critical days and focus on the need for support and services within this period whether universal, targeted or specialist.



Social support is really important to families particularly when feeling low or isolated. Connecting families to support services is easy - scan this QR code for information.

Throughout this document we sometimes use the word family/families. In Newcastle we acknowledge that what a ‘family’ looks like is individual to each person. We celebrate our widely diverse population and the unique make up of everyone’s support system and strive to ensure our services and this strategy reflect this.

What is Infant Mental Health?



Every one of us is impacted by issues relating to our mental health and wellbeing. It is important for us all to understand that babies experience a range of emotions in response to what happens in their lives and this is what we mean by infant mental health.

Just like us, if we feel lonely, tired, hungry, upset or scared, our emotional wellbeing will be affected, and this is the same for babies too. Although they cannot recognise and describe it to us, babies can feel happy and secure, or stressed and distressed. Their emotional wellbeing influences how they experience, manage and express emotions, and feel safe and secure to explore the world around them.

At birth, babies already have all of the neurones (brain cells) that they will have for the rest of their lives however, the synapses (connections) between these cells are not yet developed. During the first 1001 critical days, at least one million new

During the period from conception to age two, babies are uniquely susceptible to their environment. Babies are completely reliant on their caregivers and later development is heavily influenced by the loving attachment babies have to their parents.

HM Government, 2021

connections are made every second which is more than the baby will make at any other time in their life. They make these connections from experiences they encounter and by observing and copying their caregivers.

Early positive relationships are fundamental to infant mental health. Young babies need sensitive, responsive adults to help them to understand their emotions and bring difficult emotions under control. Parents'/carers' responses shape how babies experience their emotions and how they learn to regulate and express these emotions. Early relationships set a template for how babies begin to think about themselves and others.

Did you know a baby can hear it's parent's voice from around 16 weeks gestation?

Encouraging mothers, fathers and family members to talk to the baby in utero helps the baby to get to know voices of their carers.
nhsinform, 2023

A positive early bond supports babies to grow up to become happy, independent adults. These secure, loving, relationships help build resilience to be able to cope with everyday life. Bonding can begin really early in pregnancy, although some parents find this more challenging and not all parents feel instant love for a number of reasons.

Women's feelings about their childbirth experience can have a significant impact on their emotional wellbeing and their relationship with their baby (Bennington, 2012). According to PTSD (Post Traumatic Stress Disorder) UK, as many as 5% of

partners develop trauma symptoms after being present for their child's birth. Given there were 625,008 live births in England and Wales in 2021, that means more than 31,000 fathers/partners could have been impacted in this year alone.

If parents/carers are able to interact sensitively, consistently and with care, they can form positive attachments with their baby. Secure parent-infant relationship nurtures these secure attachments and supports the baby to respond. The three key aspects of attachment include:

Attunement

Enabling parents/caregivers and babies to share emotions allows the baby to be heard, accepted and understood. Examples of this could be looking into babies' eyes, to connect and respond with them, which is critical for the development of their brain.

Containment

Allowing parents and caregivers to respond to their baby by containing their emotions and tending to their needs. Examples of this could be when a baby cries, responding and containing their emotions by giving them a cuddle and talking to them in soothing tones to allow them to feel safe (this is physical and emotional containment). Containment is equally important for parents and caregivers by sharing any concerns or worries with a supportive person - this could be a partner, friend or health visitor for example. This helps the parent/carer to manage their own emotions and worries, which means they are able to handle their baby's emotions in a more relaxed way.

Reciprocity

A two-way interaction between parents/carers and their baby. Responding to a baby's smile by smiling back nurtures relationships and allows babies to reinforce the connection they have made. All relationships require reciprocal interactions between the participants. Reciprocity is the blueprint for all relationships throughout life.



"I can't thank you enough, your support was amazing, just being able to talk openly and honestly without judgment was so helpful. I felt like a complete failure as a parent but now I feel confident and I am finally enjoying my baby."

A Newcastle Mum

Why is Infant Mental Health Important?



Good infant mental health promotes positive outcomes throughout a person's life and influences how a person parents their own children.

Investing in infant mental health has a positive impact on future generations. It enables young children to feel safe and secure, be ready to play, explore and learn as they enter early education and school, and to develop secure and positive relationships. This increases the chances of babies achieving their potential as adults and this potential can have positive effects for everyone in Newcastle.

Good infant mental health lays the foundation for children's ongoing social and emotional development, including having the ability to manage situations that can be difficult - for example, managing significant points of transition such as starting school for the first time. These foundations stay with the baby and help them to grow and thrive throughout their life.

Children who can control their emotions and behaviours are better able to settle into the classroom and to learn. They have a template for positive relationships, which builds self-confidence and self-esteem.

Parent-Infant Foundation, 2024

This helps children to develop behavioural and physiological regulation which are linked to lifelong physical and mental health and wellbeing. It also gives babies the skills to form trusting relationships which are essential for living. (Parent-Infant Foundation, 2020)

The term Adverse Childhood Experiences (ACEs) describes a number of difficult events or experiences in childhood which can result in trauma. This includes parental separation, domestic violence, a parent suffering from mental illness, substance misuse and parental incarceration (NSC, 2015). International (Felitti et al., 1998) and UK (Bellis et al., 2014) studies have also established the relationship between ACEs and the subsequent development of risk factors for disease and adverse behavioural, health and social outcomes across the life (Aces Durham University).

Early relationships shape babies' social and emotional development and influence many key outcomes. A child's early relationships shape their perceptions of themselves and others. They also influence how children learn to regulate their emotions and control their impulses.

Parent-Infant Foundation, 2024

The greatest ACE-attributable costs in 2019 were for mental illness (anxiety, depression and other mental illness; England and Wales, £11.2 billion) and cancer (£7.9 billion). Across all outcomes, the total annual ACE-attributable cost to England and Wales was estimated at £42.8 billion.

The Maternal Mental Health Alliance commissioned the London School of Economics to complete a review of the cost of maternal mental health on society. The Bringing Home Baby review (2022) identified the cost of £8.1 billion per year of which 72% born by the child (LSE 2014). The Nuffield Foundation recognises and supports the need for inclusive policy and organisational change to improve their connection with services and the value of father's impact on the baby's development and long-term outcomes. The strategy recognises the interconnectedness strengths and needs of the whole family in order for each of them to meet their potential. There are many challenges a family can experience and this next section will consider parental mental health and inclusion.

The reality of becoming a parent can be both exciting and scary, and it can be different from how we might imagine it to be. A new baby is celebrated

in our society and as the proverb says, 'it takes a village to raise a child'. In reality, many families can have limited support from others or there can be conflicting ideas around how best to raise the child.

Becoming a parent can stir up memories from childhood. Parents may have experienced adverse childhood experiences as a child themselves and it is known that these can have a longstanding impact on the parents' sense of self-confidence, esteem, mental health and need for mental health services.

This strategy aspires parents who struggle with a range of mental health issues, including childhood trauma, to have easy access to the right services at the right time to help meet their needs. It is acknowledged that accessing services can be daunting, with fears of being judged as not good enough being a barrier to reaching out and connecting with services. The workforce needs to be curious and sensitively inquisitive when they meet parents. The Perinatal Frame of Mind supports this curiosity to think "family" and consider the needs of the whole family and their relationships with one another. In accessing services, a parallel approach should be used to support the parents' mental health needs and promoting confidence and competence in being sensitive and attuned to their children.

It's important to encourage parents to spend time working out what soothes their baby. This is best done when the baby is not crying when parents have a clear head. Parents could make a note of things that work for their baby as a toolkit for future use.



Supporting Parent-Infant Relationships

Below you will find a collection of services available to support the parent-infant relationship. This can range from informal relationships within a family network to more professional targeted support from specialist services.



Adapted from the Parent-Infant Foundation 2023

Did you know that when parents/carers cuddle their baby it releases a love hormone called oxytocin that can help the baby and parents to feel calm after a busy day?

If our Babies Could Talk



When I cry I'm just trying to tell you I need something, please don't think I don't like you. You're my favourite person ever!

I want to feel safe to learn and play.

I need you to help me learn to trust that you'll keep me safe.

I have feelings too.

I want you to know what I'm feeling I just don't have words yet.

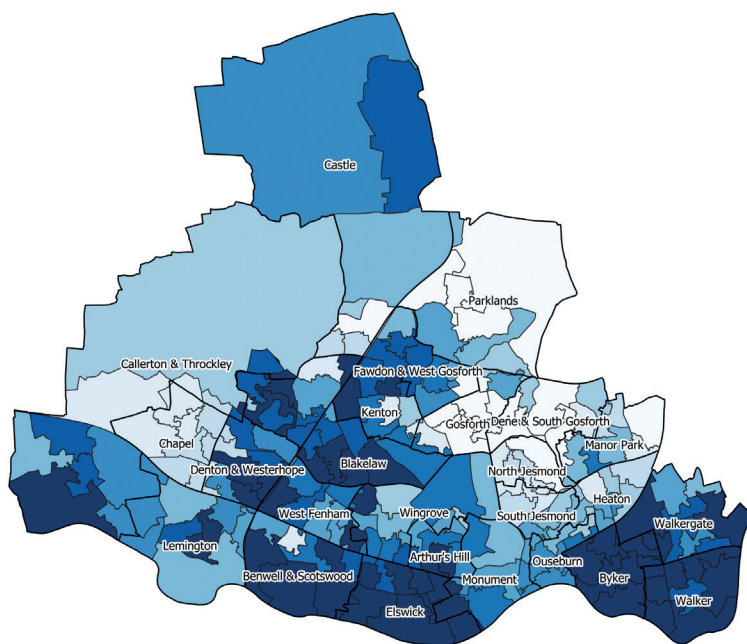
I'm scared because I've not been here before, it's cold and I feel hunger now, I just want to stay close to you.

Encourage parents to chat to their baby in utero as if the baby can see/hear everything that the parent can see or hear. Sometimes parents find it easier to narrate what they're doing or read a book or article out loud.

Newcastle's Data and Demographics



Ensuring that every baby has the best possible start in life and that parents and carers feel supported and are equipped with the necessary knowledge, skills and resources to support their children and themselves is vital. Interventions during these formative years (starting in the womb) are not only cost-effective but the rewards in terms of improved health and wellbeing outcomes (including physical, emotional and intellectual) can be reaped across the whole of the life course. (Fair Society, Healthy Lives, Marmot, 2010)

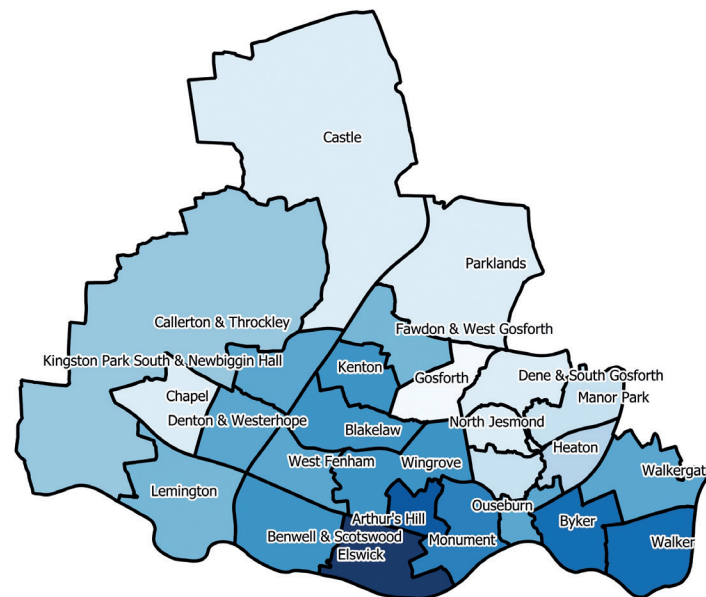


Indices of multiple deprivation by ward

Decile 1 - Most deprived

1-2	2-3	3-4	4-5	5-6
6-6	6-7	7-8	8-9	9-10

Decile 10 - Least deprived



% of households with deprived children in at least 1 dimension (ONS Census 2021)

24.4-25.0	25.0-30.0	30.0-35.0	35.0-40.0	40.0-45.0	45.0-50.0
50.0-55.0	55.0-60.0	60.0-65.0	65.0-70.0	70.0-75.0	75.0-75.5

The Marmot Review 2020 showed that issues in society that lead to poor physical and mental health are persisting or getting worse. Risk factors such as poverty, low quality employment, lower educational attainment and difficulties in securing good quality housing, can all be identified as significant drivers in mental health issues.

Health and wellbeing are not only closely linked to but are determined by poverty. It is well established that deprivation (a lack of money, resources and access to positive opportunities) or being in a position of relative disadvantage is associated with poorer health, including mental health. People living in poverty find it harder to live a healthy lifestyle, experience greater levels of illness, face barriers to accessing timely treatment, and experience lower life expectancy levels than the rest of the population. (Mental Health and Wellbeing JSNA toolkit, Public Health England, 2019)

1,127 Early Help Plans were started in 2023. Early Help means providing support as soon as a need emerges, at any point in a child's life, from the foundation years through to the teenage years.

Early Help can also prevent further problems arising (HM Government, 2018 - Working Together) - residents are babies, children and young people.

In 2023 the population of Newcastle was **307,199**. **63,048** were aged 0-18.

This means that **20%** of our residents are babies, children and young people.

It is estimated that **1.8%** of households in Newcastle were kinship care households.

This means that the child is in almost full-time care by a close friend or relative.

Nationally, **50%** of children in kinship care are in care of one or more of their grandparents. (Census 2021)

It is estimated that as of 2021/22, **22,801** children aged under 16 (37.9%) were living in poverty in Newcastle. This has increased by 9.5% since 2014/15.

Public Health Epidemiology and Intelligence team, Newcastle City Council

In Newcastle, **7.4%** of households are single-family households with a lone parent and dependent children. (Children aged under 16)

63.7% of babies born in Newcastle in 2020/21 had breastmilk as their first feed. Compared to **86.4%** of babies in England.

Newcastle's Priorities

1. Ensuring Everyone in Newcastle Has Access to Services and Information

- Establish easily-accessible, up-to-date and evidence-based information for parents, carers, practitioners and residents of Newcastle.
- Enabling the people who live in our city to understand the importance of our babies' early childhood experiences and brain development.
- Focus on prevention and early intervention meaning services can respond to the social and emotional needs of babies and their carers at the earliest opportunities.

How will we achieve it?

- We will ensure consistency in communication and collaboration between IMH steering group, 1001 critical days think tank and local policy makers. Ensuring the join up of Newcastle's strategies including the Anti-Poverty Strategy, Infant Feeding Strategy and Infant Mental Health Strategy to ensure clear and consistent messages.
- We will use language which is accessible and understandable for all.
- We will ensure all members of Collaborative Newcastle commit to highlighting the importance of IMH within their individual policies and strategies and acknowledge IMH as a priority for all services of Newcastle.
- We will increase our multi-media presence across different platforms to ensure key IMH messages and progress within Newcastle is shared to all.
- We acknowledge barriers people face in accessing services such as stigma and service navigation.

2. Workforce Development

- To build knowledge and awareness of infant mental health for all practitioners and strategic leads involved directly and indirectly with families. This will ensure that the workforce understand the impact of their service on the life course of Newcastle babies.
- To ensure all professionals working with families have the necessary knowledge about the importance of parent-infant relationships on child development so they have the confidence to share this knowledge with families.
- Professionals will be supported to feel confident in identifying potential problems when further support may be required, ensuring families receive the right support at the earliest opportunity.
- We want all practitioners to have access to a suite of training that spans from foundation knowledge around infant mental health through to more specialist knowledge appropriate to their role.

How will we achieve it?

- Our annual 1001 Critical Days conference will continue to bring professionals together and share key messages.
- We will maintain our commitment to Solihull training for practitioners and include those in adult-focused services.
- We will continue to increase training for practitioners in relational and restorative practice, ensuring trusted relationships form the foundation of all work with families and professionals.
- We will continue to acknowledge the importance of staff with specialist knowledge and ask partners to commit to developing champions to drive forward workforce development.
- We will ensure staff are offered specialist practitioner training in supporting infant mental health and parent-infant relationships.
- We will provide and develop further webinar training and briefings relating to our Better for Babies approach.
- We will continue to facilitate commitment at senior management level within Newcastle services to progress our vision for IMH and giving all babies the best start in life.

3. Service Development

- To build a clear and robust pathway to services ensuring universal, targeted and specialist interventions are easily accessible.
- Systems will work in collaboration with one another to improve outcomes for babies in Newcastle.
- Services to be culturally sensitive and responsive to the needs of our diverse populations.
- We will ensure the voices of babies, parents and carers are central in developing services.
- Information and messages about the importance of infant mental health will be delivered to those who may plan on having children in the future.
- Reduce the impact of health inequalities on infant mental health.

How will we achieve it?

- The IMH steering group will work in collaboration to develop a clear pathway of services that will support the 1001 critical days period.
- We will seek commitment for collaboration between statutory, health and voluntary sector services.
- We will work with partners within education provision to influence the teaching of 1001 critical days to young people.



Pathway of Support During the 1001 Critical Days

The road to having a baby can have many twists and turns. Newcastle is here to support whichever route is needed to give our babies the best start in life.

This pathway should help guide you to support services available to the families you're working with.

Early Pregnancy 0-18 Weeks

"Just found out about pregnancy... Now what?"

First Midwife Appointment 6 weeks +

Friends & Family

Local Authority Children's Services

Routine Antenatal Care Via Maternity Services

Community Family Hubs

Alternative & Specialist Antenatal Support Programmes

Solihull Parenting Courses

GP & Primary Care Services

NHS Newcastle Talking Therapies

Perinatal Mental Health Services

Parent-Infant Relationship Services

Dads' Services

Antenatal Education Classes

Community Family Offer

Antenatal Health Visitor Contact

Care of Next Infant (CONI) Programme

Health Visiting Healthy Child & Healthy Child+ Programme

"Preparing for birth and what to expect"

Late Pregnancy 18-40 Weeks

Newborn 0-3 Months

"How to look after a newborn"

Newborn Physical Examination & Vaccinations

Feeding Support

Baby/Parent Social Groups

Baby Massage

Well Baby Clinics

Breastfeeding Peer Support

Birth Reflections

Neonatal Intensive Care Unit

Free Funded Childcare Offer

"How to know if the baby is developing at the right pace"

Growing Baby 3-24 Months



Green circles indicate services that are available from a specific stage but then continue throughout following stages and onwards.

Scan the QR Code to find out more about specific services and providers in Newcastle.



WIDER SERVICES: Drug & Alcohol Services, Smoking Cessation, Housing Support,

Domestic Abuse Support, Citizens Advice Bureau, Welfare Rights and more...



3,070

Babies were born in
Newcastle in 2023



9,261

Children under 2 years
old in Newcastle



200+

Services and activities in
Newcastle supporting the
journey to parenthood for
families with 0-5 year olds



Scan the QR Code to find out
more about specific services and
providers in Newcastle

childrenandfamiliesnewcastle.org.uk



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