

## Summary of Key Findings

In mid 2003, the Board of Tweddle Child and Family Health Services, commissioned important research. The Board was very conscious of the fact that there was little existing evidence about the health needs and social circumstances of women and infants attending Tweddle. In addition, Board members saw the need to contribute to evidence about the effects and acceptability of early parenting interventions.

This Summary outlines the main findings from two studies:

- A detailed, systematic review of the international literature and
- A study following mothers and infants from admission to Tweddle until 6 months after discharge. Health and wellbeing of mother and infant were assessed.

### Literature Review:

- Women admitted to Australian early parenting centres have poor mental and physical health.
- Their infants sleep poorly, have feeding difficulties and can resist soothing.
- There is no reliable evidence of the benefits or risks associated with admission to residential early parenting programs, but follow up studies suggest benefits for both mother and infant.
- Poor maternal mental health after childbirth tends not to recover in the short-term without assistance, and may have adverse effects on infant development.
- Psychological and psycho-educational interventions usually lead to rapid improvements for women with mild to moderate depression, anxiety and fatigue.
- Strategies to promote regulated infant behaviour are effective in improving day and night sleep patterns and in reducing crying.

Building an  
evidence base for  
practice in early  
parenting centres

A systematic review of  
the literature and a report  
of an outcome study

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# Summary of Key Findings

- Group format psycho-educational parenting programs can have beneficial effects on child behaviour problems and on parental mental health, but the benefits have not yet been tested in randomised controlled trials.
- Specialist services, to which families can be referred for additional treatment, education and support, are an essential component of comprehensive health care.

## Outcome Study at Tweddle:

The Outcome Study assessed eligible mothers and infants during admission to the Tweddle Residential Program and at one month and six months after discharge.

Some of the main findings were:

- Mothers and infants admitted to the residential programs at Tweddle generally have very complex social circumstances and poor mental and physical health.
- Many mothers are inadequately supported by their families and have very little leisure time.
- Relationships with partners are often problematic, including inability to confide, little involvement of fathers in infant care or household chores. In extreme cases there can be fear of intimidation or actual violence.
- Some have a past personal or family history of psychiatric illness.
- Reproductive life had often been difficult, including previous pregnancy loss, assisted conception and obstetric complications.
- Many women have persistent health problems and most have severe fatigue.
- Infants brought to Tweddle are usually unsettled, with poor sleep patterns, frequent overnight waking, prolonged and inconsolable crying, resistance to soothing, and feeding difficulties.
- More than a third of mothers have depressive symptoms and are anxious.
- The mother's mood and infant behaviour improve significantly one month after completion of the program, and these improvements were sustained at six months.
- Overall, participants rated the Tweddle program as very helpful and they felt well supported and had learnt useful skills.

Overall, the Review and Outcome Study provides evidence that Australian early parenting services assist parents and infants effectively but could be improved. Continued program development should include:

- Assessment and treatment of women's physical and mental health
- Routine assessment of quality of relationship with partner and a specific program focus
- Structured approaches to strengthening mother–infant relationship.

## For further information about the study please contact:

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## For a copy of the full report please contact:

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