



# A Relationship-Focussed Group Intervention

*Supporting mothers and their babies through the first few months of parenthood*

This poster presents two research projects evaluating an innovative brief group intervention targeting vulnerable infants and their mothers within the first six-months postpartum.

**Program Description:** Mother-Baby Nurture (MBN) is a 10-week relationship-focussed group that aims to strengthen the mother's reflective capacity (mentalizing), and in doing so enhance the mother's sensitivity to her infant's cues.

Core components that foster mentalizing include:

- emotional containment,
- reflection on attachment relationships (past and present), and
- being curious about thoughts, feelings and behaviour (of baby, each other and self).

Through focussing on the mother-baby relationship we expect to improve maternal mental health and parenting confidence. The program has been informed by attachment theory, neurobiological science and the growing body of knowledge on the determinants of intergenerational transmission of relational trauma and attachment patterns.

**Level of Intervention:** Mother-Baby Nurture provides a targeted (secondary) service for vulnerable families whose needs exceed the scope of free-for-all universal community services, yet do not require tertiary mental health service provision.

**Mother-Infant Dyads:** The mother may present feeling overwhelmed or emotionally detached, she may express concerns about her baby, adequacy in her role as mother, and may have symptoms of anxiety and/or depression. The infant may have difficulty being soothed and regulating its state, and may be reported as having crying, feeding or sleeping concerns. The client is the infant-caregiver relationship.

**Facilitation:** each group has two perinatal and infant mental health practitioners from complimentary disciplines, who have participated in 3-day training in the model and ongoing monthly reflective supervision.

## Improving maternal mental health, confidence & attachment

The first preliminary pre and post group evaluation was undertaken with self-report assessments using the Edinburgh Postnatal Depression Scale, Perinatal Anxiety Screening Scale, Karitane Parenting Confidence Scale and Maternal Postnatal Attachment Scale (N = 76 mothers-infant dyads).

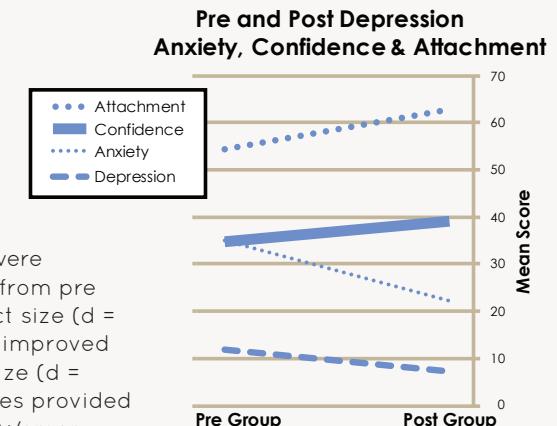
**Results:** A very high rate of attendance (median = 9/10 sessions), demonstrated an extraordinary level of engagement that has been difficult to achieve in other community interventions. The differences in mean scores for all outcomes were statistically significant. Depression and anxiety scores reduced from pre to post evaluations (both  $p < .001$ ) with a medium to large effect size ( $d = 0.79$  and  $0.72$  respectively). Confidence and attachment scores improved from pre to post evaluation (both  $p < .001$ ) with a large effect size ( $d = 0.99$  and  $1.06$  respectively). Content analysis of written responses provided by mothers revealed what they liked about the MBN program. Women expressed the value of sharing and listening to other mothers' experiences within an environment noted as being: safe, open, relaxing, healing, comfortable and supportive.

**Conclusions:** This is a highly valued community-based service as evidenced by strong attendance and positive anecdotal reports. It appears that this relationship-focussed intervention has decreased maternal distress and increased maternal confidence and attachment. Further research is warranted to more rigorously evaluate this promising intervention and its mechanisms of change.

*This group totally changed motherhood for me.  
I stopped worrying so much about what should be  
happening and connected with my baby.*

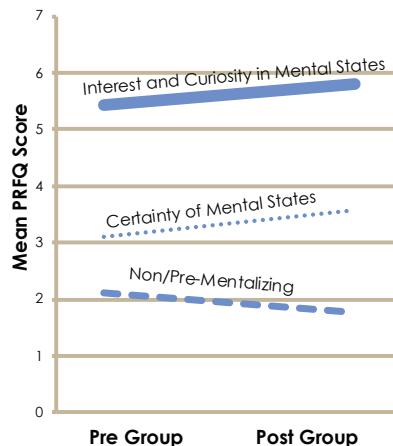
*I learnt to trust myself  
and enjoy the dance instead.*

*I couldnt be more grateful because I know it has  
changed [my babys] life now and in the future.  
I learnt so much and felt my confidence grow.  
I felt well supported ...nurtured,  
listened to and supported.*

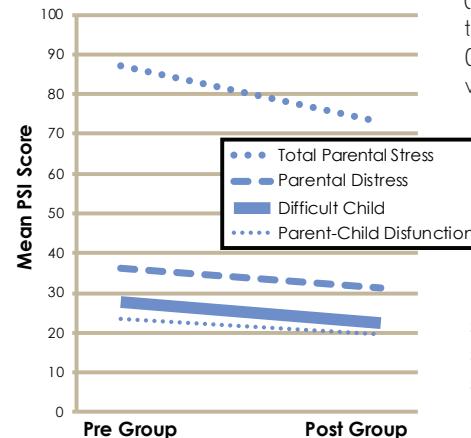


# Reducing parental stress and improving reflective functioning (mentalizing)

**Pre and Post Mentalizing (PRFQ)**



**Pre and Post Parenting Stress (PSI)**



A second pre and post intervention study ( $N = 33$ ) evaluated parenting stress with the Parenting Stress Index – Short Form (PSI-SF), and reflective functioning (RF) with the Parental Reflective Functioning Questionnaire (PRFQ) and RF independently coded on the Five-Minute Speech Sample (FMSS-RF).

Results indicated that the women who participated in MBN reported significant post-intervention reduction in parental stress across all three PSI-SF subscales. The total stress score was also significantly reduced, with a large effect size ( $d = 0.92$ ,  $p < .001$ ) with all scores lowered to within normative population levels.

Reflective functioning was found to improve, with increased mean PRFQ scores of Interest and Curiosity in Mental States ( $p = .007$ ) and a decrease in Non/Pre-Mentalizing ( $p = .024$ ) – both with medium effect size ( $d = 0.55, 0.45$ ). The FMSS-RF median score increased from 3 to 4, which appears to be a meaningful improvement in RF with a small to medium effect size ( $r = -0.19$ , though not statistically significant,  $p = .105$ ).

**Discussion:** Although the MBN exclusion criteria rules out participants considered high-risk, the pre-intervention Parental Distress scores indicated that over half of the cohort were in the high to clinically significant range, suggesting that many mothers

commenced the group in a distressed state with a high need for support. Likewise the pre-intervention FMSS-RF median score of 3 suggests that parental RF was limited, which is likely to have detrimental impact on the mother's capacity to provide sensitive responsive care for her child and therefore poses a risk for the infant's development.

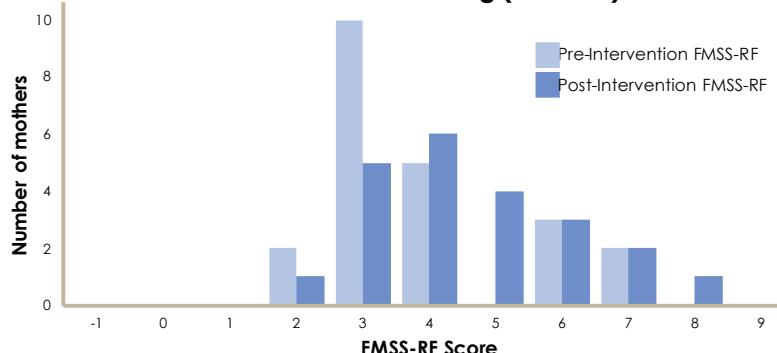
**Conclusions:** The findings suggest that the program is effective in alleviating parenting stress and fostering the mother's capacity for RF – both protective factors mitigating against child maltreatment and poor child outcomes. A growing body of evidence indicates that improved parental RF is important to interrupting the intergenerational transmission of insecure attachment patterns and relational trauma. The results particularly denote the potential for early brief relationship-focussed interventions to positively adjust the trajectory of vulnerable infants and their families, when early relational experiences matter most.

These findings support future investment in early community-based mentalizing interventions with mothers and infants. In addition, further research is required with larger sample sizes and control groups, which examine related variables such as mother-infant interaction observations and a follow-up assessment of child attachment security.

The Women and Newborn Health Service Human Research Ethics Committee approved the Study One (Approval Number 2016151QK).

Study Two was granted ethics approval by the Human Research Ethics Committee, Edith Cowan University (project number 20336).

**Pre and Post Mentalizing (FMSS-RF)**



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