ASSESSING THE IMPACT OF A FIRST-TIME PARENTING GROUP

This article investigates a health visitor-led first-time parenting group run by a pre-five family service. The group aims to ease the transition into parenthood by: giving parents information relating to pregnancy, birth, immunisations, weaning, accident prevention and cot death; developing parents’ knowledge and skills; and promoting the well-being of both parents and infants. It also provides social support with the aim of reducing isolation.

This study evaluated a health visitor-led first-time parenting group run by a pre-five family service. The group aims to ease the transition into parenthood by: giving parents information relating to pregnancy, birth, immunisations, weaning, accident prevention and cot death; developing parents’ knowledge and skills; and promoting the well-being of both parents and infants. It also provides social support with the aim of reducing isolation.

This study aimed to establish whether the group provides useful information that will benefit first-time parents and improves the well-being of the families attending, and to determine whether any improvements could be made to the group.

METHOD
The pre-five family service ran seven first-time parenting groups over the evaluation period (February–October 2006). Each was run over five sessions and a total of 56 parents took part.

Each parent was asked to complete the general health questionnaire-12 (GHQ-12) before and after attendance to assess their psychological well-being. The questionnaire was administered with the aim of assessing whether participation in the group resulted in improved psychological well-being. Parents were also given a pre-group questionnaire asking for information including how they heard about the group, transport and their expectations. All 56 parents who attended the first session of the group completed the pre-group questionnaire. At the end of the final session, they were asked to complete a post-group evaluation questionnaire.

RESULTS

Pre-group questionnaire
Seventy first-time parents were invited to take part in a total of seven groups and 56 did so. Of these, 55 were mothers and one was a father.

When asked what they would like to gain from the group, 50 parents said they would like to meet other parents. Thirty-eight wanted support from the group and 48 wanted to obtain advice.

Pre-group GHQ-12
At the beginning of the first session of each group, the parents completed the GHQ-12 to assess their psychological well-being. A score of 4 or above suggests an individual is experiencing a diagnosable mental health problem, while scores of 3 or below suggest the individual is not experiencing any significant mental health problems.

The mean score for the pre-group GHQ-12 was 1.4 but five parents had scores of 4 or over, showing they were experiencing diagnosable mental health problems.

IMPLICATIONS FOR PRACTICE

- The first-time parenting group improved the psychological and social well-being of the families who attended.
- Groups may be useful before the baby is four months old.
- Other groups may be useful for grandparents and other carers.
- Additional time should be allowed at the end of each session so parents can talk informally about their experiences.

This is a summary: the full paper can be accessed at nursingtimes.net
Post-group questionnaire
At the end of each group, parents were asked to complete a group evaluation questionnaire. In total, 38 of the 56 who had begun the group completed the evaluation.

**General satisfaction:** Of those who completed the evaluation, 25 parents rated the venue as ‘very suitable’ and 12 rated it as ‘suitable’. One felt it was unsuitable as it was difficult to carry her pram upstairs. The majority (25) found the group ‘very helpful’ and the remaining 13 rated it as ‘helpful’.

All 38 parents stated that the information and advice given was ‘about right’, and all found the group relaxing, enjoyable, informative, sociable and a good way to meet other parents. Most parents (32) found the health visitor ‘very approachable’ and the remaining six ‘approachable’. Thirty-five parents felt they had learnt about other local services by attending the group.

After the group, 37 parents said they felt more confident, while one was unsure. Thirty-five thought the group had been a good way to obtain extra advice/support from health visitors.

**Open-ended responses:** When asked to describe what they had enjoyed most about the group, the majority said they had enjoyed meeting new parents (22). Others (six) had enjoyed hearing the experiences of other parents and having time to ask questions (four). Three said they liked knowing that other parents were going through the same thing as they were, one enjoyed the weaning classes and information describing safety in the home, while another liked learning about other classes. Five parents suggested additional aspects for future groups, which are listed in the Implications for Practice box.

**Post-group GHQ-12**
At the end of the group, 38 parents completed the GHQ-12. The mean score had reduced to 0.7. A Wilcoxon signed ranks test indicates the scores were significantly reduced, suggesting that the psychological well-being of parents improved after attending the group.

Of the five parents found to have diagnosable mental health problems, three completed the post-group GHQ-12; all three scores had reduced to 3. However, this difference is not statistically significant, and the parents were still experiencing mental health difficulties after completing the group.

All GHQ-12 scores were fed back to the health visitors who had initially referred each family. They assessed whether further interventions were necessary for the two parents who were not assessed post-group and the three who may still have been experiencing mental health difficulties.

**DISCUSSION**
The pre-group questionnaire indicated that parents expected to gain social support and advice by attending the group. The results of the post-group questionnaire indicated that the group met parents’ needs and expectations by providing social support and enhancing their knowledge and skills.

The post-group GHQ-12 scores indicated that three parents were still experiencing diagnosable mental health difficulties after the group. Although their scores were not significantly reduced, they were clinically reduced, which may indicate that the group may be useful as part of a programme of psychological interventions to improve mental well-being for first-time parents.

Although the majority of parents were not experiencing diagnosable mental health difficulties before attending the group, their psychological well-being was significantly improved after attendance. This suggests the group may act as a protective factor against psychological deterioration of first-time parents. Further evidence for this comes from the post-group questionnaire. Parents said the group had been a useful and positive experience and most felt more confident about their parenting skills.

The results of this evaluation indicate that attending the first-time parenting group led to improvements in psychological well-being for those who completed the post-group questionnaire.

However, it is important to highlight the limitations of this evaluation. The post-group results are based on data from 38 parents who attended the last session, as 18 had dropped out by the last session. This may indicate that some may not have found the group useful, which may have been the result of an inappropriate referral or a lack of motivation. In contrast, some may have felt they had received sufficient support and information in the first few sessions and did not require further input. Since these parents were not given a post-group questionnaire, it is not possible to establish why they dropped out.

A further limitation is that socio-economic factors were not gathered in the pre-group questionnaire, so it is not possible to identify whether different social groups with varying psychological vulnerabilities are benefiting from the group.

**REFERENCES**


