Better Start BRADFORD 2015-2025

SHARING KNOWLEDGE, SHAPING FUTURES

Baby Steps

Project Impact Report: 2025

Baby steps

Contents

About Better Start Bradford

Better Start Bradford is part of the ten-year A Better Start programme set up and funded by The National Lottery Community Fund in 2015.

Since 2015, A Better Start partnerships in Blackpool, Bradford, Lambeth, Nottingham and Southend-On-Sea have supported families to give their babies and very young children the best possible start in life, specifically to:

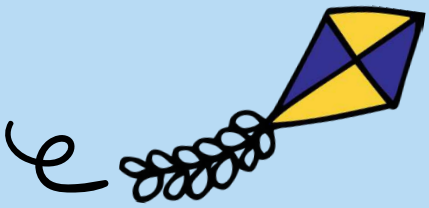
- Improve children's diet and nutrition to support healthy physical development and protect against illness in later life.
- Support children to develop social and emotional skills so they can develop positive relationships and cope with difficult situations.
- Help children develop their language and communication skills, so that they can engage with the world around them. Help children develop their language and communication skills, so that they can engage with the world around them.
- Bring about changes in systems, practice and behaviour that increased the focus on the first 1001 days of life and invest in preventative and early intervention approaches that have been demonstrated to have impact.

In Bradford, we created over 20 evidence-led projects and services for expectant families and families with children aged 0-3 in Bowling and Barkerend, Bradford Moor and Little Horton (the Better Start Bradford area).

Each one was designed with, and for, our specific communities, delivered by commissioned partner organisations, and evaluated throughout by the Better Start Bradford Innovation Hub (BSBIH).

Better Start Bradford set up the Innovation Hub with Born in Bradford at the Bradford Institute for Health Research (BIHR) to be our evaluation partner for the whole programme. We also commissioned the additional birth cohort, Born in Bradford Better Start (BiBBS), to allow a more extensive and longer-term evaluation The findings of the BSBIH evaluation of each of the projects are threaded through these Impact Reports and are credited to BSBIH.

This work has been supported by complementary strands of work, including community engagement, workforce development, campaigns and volunteering.



The Baby Steps Project

Baby Steps is a relationship-based antenatal parent education programme originally developed by the National Society for the Prevention of Cruelty to Children (NSPCC), which is designed to support parents during pregnancy and in the weeks after birth. Parents join mid-pregnancy and continue until around two months after their baby is born. The programme was delivered as in-person groups with online group settings from March 2020 onwards, with additional catch-up groups and one-to-ones for those who required it.

The five year project was commissioned in 2018, to be delivered by Action for Children, initially as a targeted intervention for families living in the Better Start Bradford area. Families could be referred by a range of professionals based on a specific set of criteria, including a range of vulnerabilities. In its fifth year, it became a universal service to families in the Better Start Bradford area.

Why Baby Steps was needed

We knew from workforce and parent journey mapping that women in the Better Start Bradford area were more likely to present late to antenatal services and did not attend classes. We also knew that levels of vulnerability and need were higher, and that maternal outcomes (infant mortality, poor perinatal mental health and low birth weight) were poorer.

Following completion of the consultations, we commissioned a set of parent education programmes that start in pregnancy but focus on life 'beyond birth' helping to set babies up for a healthy future. Built on research from health, psychology, and social sciences, these programmes are designed to be high-quality and truly make a difference for families. Programmes such as Baby Steps have been commissioned in Bradford to address the inequalities and vulnerabilities that exist.

Baby Steps was originally chosen because the content of the course was weighted towards improving babies' social and emotional wellbeing - core aims of the A Better Start programme. An additional benefit was that it linked well with other support, including maternity services, safeguarding and crisis funds. It had also been designed for families that might be living with long-term difficult circumstances and had worked well in Bradford and the multi-cultural context of our area.

Furthermore, the service connected effectively with statutory services, fostering collaboration between agencies and encouraging a more integrated approach. This not only strengthened support pathways for families but also helped embed learning into the district and among professionals, ensuring a more cohesive and informed response to community needs.

Baby Steps also had good quality internal evaluation reports by the NSPCC. Although this didn't yet prove that Baby Steps made a difference for babies, it did provide a good enough foundation to build on through the Better Start Bradford programme and demonstrated that the right parents could be reached, often stayed involved and completed a course.

Additionally, the NSPCC helped other organisations to set up Baby Steps services. This meant that a good level of information about how to set up a new service, in a way that reached parents with complicated lives, was available to learn from.

The NSPCC, in partnership with Warwick University, developed the Baby Steps approach to strengthen parent-infant relationships. While it builds on essential insights into early bonding and attachment, early research in this field has gaps - especially in studying fathers, same-sex co-parents, and extended families. Despite this, Baby Steps works hard to ensure its approach is inclusive, considering diverse cultures, non-birth parents, and the unique challenges faced by vulnerable families.

Key components of the Baby Steps Project

The Baby Steps rationale is centred around supporting parents in building strong and positive relationships with their babies from pregnancy onwards. The programme is designed to help parents understand the importance of attachment, bonding with your baby and responsive caregiving. Its core belief is that positive parent-infant interactions during the early years significantly impact a child's 1001 critical days, but also their future emotional, social, and cognitive development.

The approach is focussed on the idea that giving parents the knowledge, practical strategies, and emotional support will help them navigate the challenges of parenthood, particularly for vulnerable families. By focusing on the early stages of life, Baby Steps aims to create a strong foundation for children's development and their wellbeing, reducing the likelihood of future challenges related to mental health, behaviour, and relationships.

In addition, Baby Steps recognises the diverse needs of parents and the composition of families and makes a conscious effort to be inclusive and culturally sensitive. This ensures the programme's effectiveness across different family structures and backgrounds. There were additional languages within the staffing team allowing groups to be delivered in home languages.

The project also addressed barriers to participation for vulnerable, overloaded, and excluded families. Participating in Baby Steps was entirely voluntary, so babies could not benefit unless the project was attractive, welcoming, and suitable for parents. The Baby Steps manual and facilitator training set out what to consider when removing barriers to access.

Additional support offered to families attending the course was also addressing health inequalities in the district. Support funds like the baby banks, uniform banks, crisis funds and other charitable grant funds supported families with items such as washing machines and school resources for siblings. These items gifted by the Baby Steps team enabled parents to feel less overwhelmed and the burden lifted, allowing them to solely concentrate on the course content and building a strong connection with their baby and existing relationships.

Key project aims

The key project aims were that:

- Better Start Bradford Baby Steps aimed to support babies' early childhood development, particularly their social and emotional wellbeing, during pregnancy, after birth, and in later childhood.
- To help protect vulnerable babies from neglect and injury by early intervention and support.

The overall aim of the project was to increase 'protective factors' for babies whose parents are more vulnerable, overloaded, or socially excluded, through participation in relationship-based parent education groups that start before birth.

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Logic Model

We used a Logic Model approach to design our services. These are included in the impact reports because they offer a useful summary of the service design. They are accompanied by an evaluation plan which is delivered by Better Start Bradford Innovation Hub. The Logic Model shows the steps we needed to take to arrive at the desired outcomes. It identified the need, the target group(s), the inputs and activities which would impact on the outcomes and the changes we should expect to see in the short, medium and long term.

Logic Model: Better Start Bradford Baby Steps service for universal virtual offer from 02/22

Need	Inputs	Activities	Outputs	Outcomes	Impact (BSB)
To be delivered universally as: parents overloaded during transition to parenthood leaving them vulnerable* to an impaired ability to give their baby the best start with social and emotional development [via parental sensitivity and mind-mindedness]	Co-delivered by health & early years professionals in continuity of carer model. Core Team consists of the following roles: FT Team manager [1 x 37 hours) with 5 hour support from Children's services manager, 4 x FT (37 hours) midwives, 1 x PT Safeguarding midwife (22.2 hours), 4 x FT Family Support Workers (37 hours), 1 x PT (30 hours) Data Support Officer, 1 x PT Business Support Officer (35 hours) Science Based Curriculum -The contents of 9 x 2-hour physical group sessions (6 antenatal and 3 postnatal) plus 2 face-to-face home visits condensed as follows: • 4 x 1.5-hour virtual antenatal sessions minus activities • 2 x 1.5-hour virtual postnatal sessions minus activities • 2 x face to face home visits	Activities to promote mentalisation skills.	Baby Steps groups offered on rolling programme for up to 10 pairs of expectant parents (or single mother and supporter) per group. 24 groups per year [240 babies' benefit]	Improved parental confidence & self-esteem leads to safer parenting & greater emotional availability	PROGRAMME LEVEL OUTCOME 4: More children will benefit from quality play and early learning and have good opportunities within the home and have a safe and secure base with strong attachments to key family members
		Learning coping skills to improve emotional wellbeing, including mindfulness		Improved family relationship stability and reduced conflict	
		Psychoeducation about pregnancy, birth, babies' development and the practicalities of parenting.	BSB Baby Steps team fully integrated with BSB family of projects for mutual learning.	Improved co-parenting functioning reduces stress & increases emotional availability to the child	Fewer children suffer abuse or neglect in the home
		Exercises to enhance relationship, communication and support skills.	Care and support pathways further developed. Target parents identified and referred into Baby Steps and outward to complementary support.	Improved parental reflective functioning leads to improved self-regulation in the child	Fewer children attend A&E or are admitted to hospital with accidental injuries
If overload overwhelms resilience and social support raised risk of neglect and injury to baby	Skilled group facilitators with qualities of compassion, warmth and dependability.	Health promotion about healthy bodies and healthy minds.		Improved parental mental health leads to more sensitive parent-infant interactions & increased likelihood of secure attachment	Improved maternal sensitivity when baby is aged 3-4 months (Measured by Mothers Object Relations Scale MORS)
	Highly quality manualised, training and reflective supervision.	Development of positive parent-infant interactions including video feedback.	Evaluation plan and data collection function to increase EIF* equivalent rating for the model.	More positive parental health choices for self & child around feeding, eating, exercise, smoking and drinking leads to improved family health [adapted from NSPCC Baby Steps theory of change v5]	Improvements in parent mental health (PHQ9 and GAD7]
	Fidelity to model and quality assurance = Evaluation by Innovation Hub; Contract management by BSB; licencing support from NSPCC.	Detection of additional need and signposting to local support services.	High quality safeguarding for babies and vulnerable adults.		
	Strong local partnerships and care pathways – support from BSB perinatal co-ordinator [BTHFT] and specialists [BSB] Engaging suite of NSPCC marketing tools – support from BSB communications team.				

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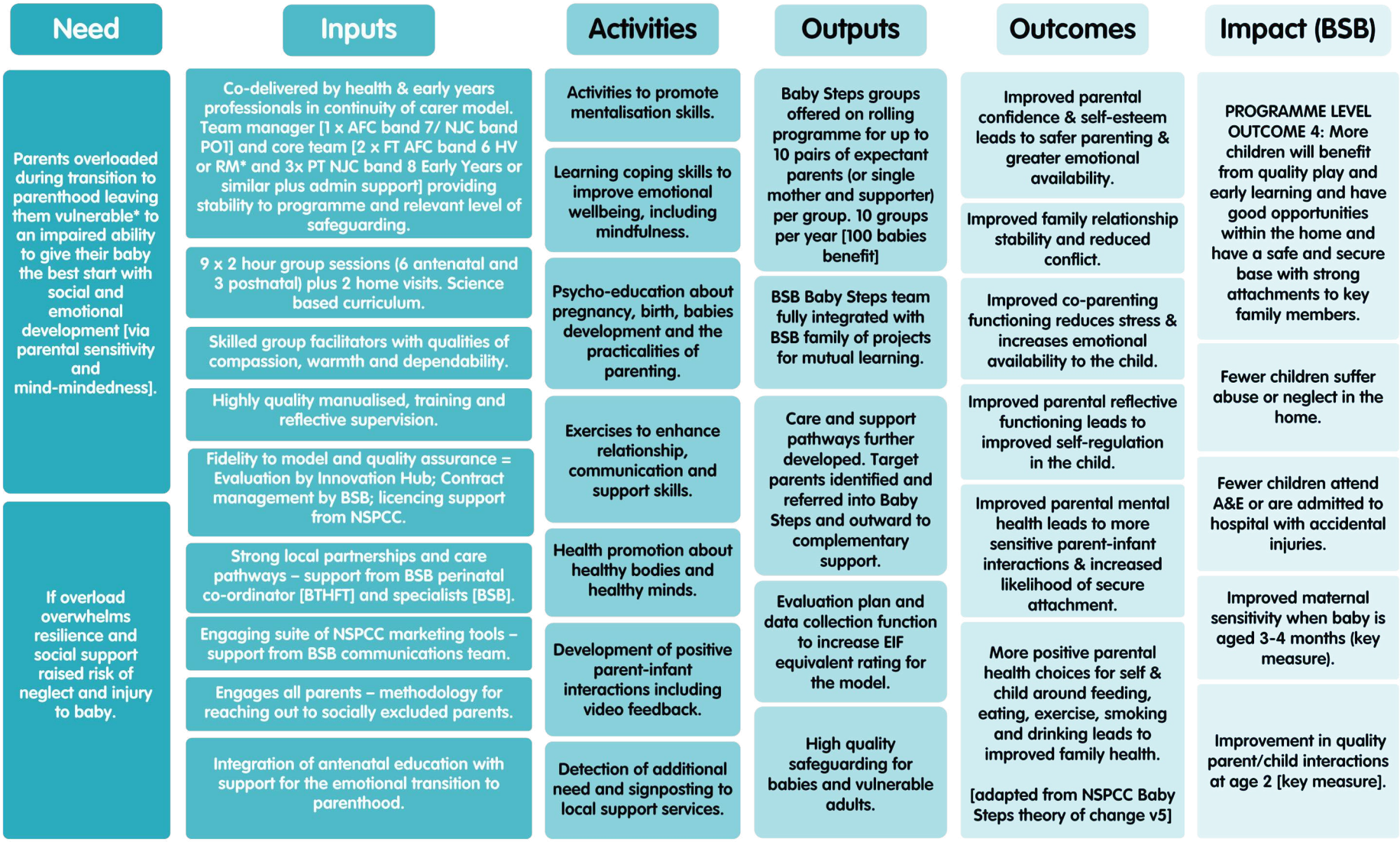
Logic Model: Better Start Bradford Baby Steps service



Data and evaluation

The project addressed a range of factors that were connected to babies' and parents' resilience and, consequently, to babies' later wellbeing as they grow up.

The key factor tracked through evaluation was parental sensitivity - how well caregivers responded to infants' needs. Baby Steps was designed with attention to 'mind-mindedness'- how attuned caregivers were to a baby, "where it gives a measure of the caregiver's proclivity to treat the young child as an individual with a mind, rather than merely an entity with needs that must be satisfied" (Meins, 2015). Mums' maternal sensitivity to their baby had a clear association with positive outcomes. Emerging research suggested that dads' and other co-parents' relationships with their babies were also foundational to their wellbeing.

Baby Steps was a science-based and evidence-informed programme, so it had the potential to improve parental sensitivity. As the Better Start Bradford Baby Steps project gathered evidence about the efficacy of the programme, this became clearer.

The evaluation, carried out by the Better Start Bradford Innovation Hub, aimed to determine the degree to which Baby Steps is effectively implemented as well as the impact that the project has for participating families. This includes measures of parental mental health and parent-child attachment.

The overall aim of the enhanced evaluation is to assess the impact of project participation on parent sensitivity and mental health by comparing outcomes for participating and non-participating families within Born in Bradford's Better Start (BiBBS) birth cohort using a quasi-experimental design.

The aims of the evaluation are highlighted in the following executive summary from the Better Start Bradford Innovation Hub:

Aims of the evaluation

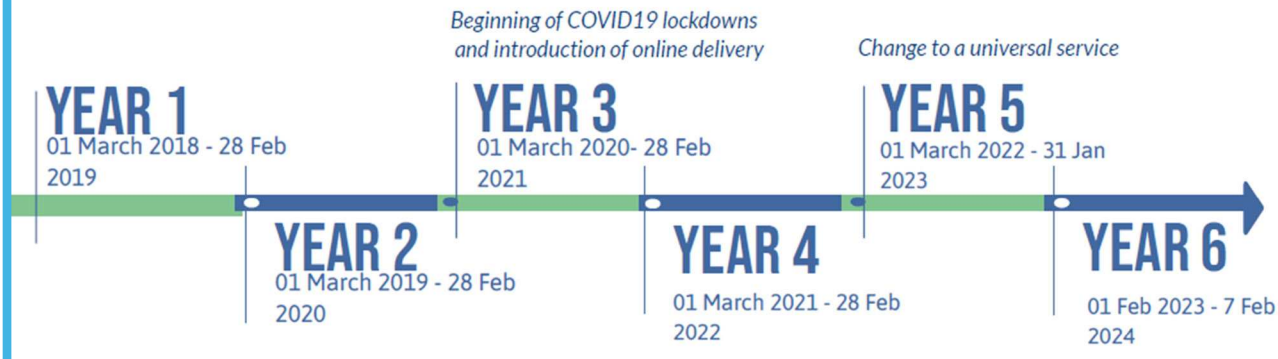
This report presents findings from:

- an implementation evaluation to establish whether the project could be delivered as planned and is acceptable to families and stakeholders
- a before and after evaluation exploring changes in key short term outcomes relating to parent sensitivity and parent mental health
- preliminary analysis of qualitative data from an enhanced evaluation of the project

The project have also worked with BSBIH to develop a plan for a further effectiveness evaluation that will test the causal effectiveness of Baby Steps for improving parent mental health and parent sensitivity. Findings from this evaluation are anticipated to be reported in early 2025.

This report provides an update to findings from the implementation and before and after evaluations delivered in September 2022, collating data from across the whole life of the project so far (1st March 2018 – 7th February 2024).

Overview of Baby Steps delivery timeline and evaluation period



Key findings of the evaluation

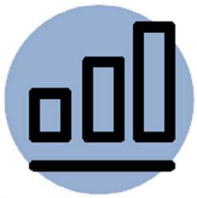
Implementation

Implementation refers to the number of courses delivered in full. 68 full courses were delivered, which is 94% of the total target (see p.6).

Completion

Completion refers to the number of women who completed the course (attending at least 6/9 programme sessions, including one postnatal). 426 women completed the course, 113% of the target (see p.8)

Outcomes



Parental mental health scores improved after partcipation in Baby Steps (see p.13), and a qualitative evaluation found many postive impacts of Baby Steps for parents and facilitators (see p.16)

- Baby Steps have delivered in line with or very close to anticipated targets throughout the majority of their contract period. This specifically relates to the number of courses delivered, and the number of women completing the programme (women who attend at least 6 programme sessions, including one postnatal).
- Retention in the programme remains high for the online version of the course, and a growing number of universal referrals via the Perinatal Project Administrators (PPA) are being received.
- Scores on parent mental health and prenatal attachment questionnaires appear to have improved after participation in the project. Whilst we cannot conclude that Baby Steps is effective from these scores, the findings are compatible with the hypothesis that Baby Steps is effective for parent mental health and sensitivity.
- The qualitative study found that parents benefited in many ways from the different forms of support. Home visits and ongoing assistance were valued by both staff and mothers. Facilitator's expertise and friendly approach created a supportive and safe environment helping mothers to build their knowledge and skills. Meeting face-to-face helped community-building and social support.

Recommendations

Recommendations for practice

- Baby Steps is delivered successfully and with fidelity. It engages vulnerable families, and appears to have positive impacts on parent mental health, which previous perinatal parenting programmes have struggled to do.
- Service delivery should be continued either as universal in areas of high need, or targeted across the district.
- The value of the PPA role in providing timely referrals to the project is clear. Difficulties in embedding this role post Better Start Bradford present a real risk to the project and developing other strong referral pathways will be important moving forward.

Recommendations for evaluation

- The upcoming effectiveness evaluation will reveal whether Baby Steps has a positive impact on maternal mental health and sensitivity in comparison to a control group.
- Further quantitative evaluation could consider the importance of the flexibility of the support offered by Baby Steps in bringing about improvements in maternal outcomes.
- A hybrid of online and and face to face delivery may be preferable for families, and piloting and evaluating such an approach could help to confirm this.

A cost effectiveness evaluation will be available in 2025 on the Born in Bradford website. https://borninbradford.nhs.uk/

Impact and findings

- The project was successfully delivered with a high completion rate (70%), demonstrating it was valued by the families.
- 68 courses were delivered to more than 600 families.
- A before and after evaluation from the Better Start Bradford Innovation Hub showed that parents had improved scores on mental health and prenatal attachment measures after taking part in the project.
- As part of enhanced evaluation, 96.9% of families questioned agreed with the statement “I feel that Baby Steps was helpful for me.”
- 761 unique families received at least one home visit from the team.
- Parents benefitted in many ways from the different forms of support. Home visits and ongoing assistance were valued by both staff and mothers because they allowed for personalised guidance before and after birth, with 1,920 home visits being delivered. Facilitators’ expertise and friendly approach created a supportive and safe environment, helping mothers to build their knowledge and skills.
- Over 7,800 support phone calls were made with participants, and over 20,000 support text messages sent.
- During lockdown, Baby Steps was able to identify safeguarding concerns in a timely manner, working in collaboration with midwifery, health visiting and social services to support families appropriately.
- Baby Steps continues to be one of the top five referrers to Bradford food banks, as well as providing emergency provision of baby items to families in need.
- A Start for Life contract has enabled the project to expand their service and become a targeted district-wide delivery until March 2026.

Local and national strategic influences

The Baby Steps Project aligns with both local and national strategies and policies that focus on early intervention, parent-infant relationships and parental engagement and education.

- **NHS 10-Year Health Plan for England (2025):** A new health plan is underway, with three shifts of significant change: 1) Looking at how people access their services, digitally and in person, 2) looking at boosting community care reducing hospital visits and stays and 3) shifting from treatment to prevention focussed care.
- **Family Hubs and Start for Life Programme (Local Council Plans, 2023 Onwards):** Aims to provide universal and targeted family support services, including early years mental health interventions.
- **Best Start in Life Strategy:** The Government's Best Start in Life Strategy highlights that the foundations of success are laid in early childhood. Ensuring every child has the best start in life - the chance to achieve and to thrive - are the foundation stones of the Government's Opportunity Mission. Better Start Bradford wholeheartedly agrees with the Government's statement that every child should have the opportunity to 'grow, play, learn and thrive'.
- **The Healthy Child Programme (0-5 years) (Updated 2021):** A national framework that sets out universal public health services for children and families, including antenatal education, parenting support, and early identification of risks, areas supported by Baby Steps.
- **The Early Years Foundation Stage (EYFS) Framework (2023):** Sets out standards for child development, early learning, and parental engagement. Baby Steps promotes positive early parenting, which supports children's cognitive and emotional development.
- **Tackling Health Inequalities - Core20PLUS5 (NHS England, 2021):** Targets health disparities in maternity care, focusing on disadvantaged groups. Baby Steps helps by engaging parents from marginalised backgrounds and providing additional support.
- **Working Together to Safeguard Children (Updated 2023):** National guidance on child protection and safeguarding, emphasising early intervention and multi-agency collaboration which aligns with Baby Steps' integration with health and social care services.
- **Local Maternity & Neonatal System (LMNS) Plans:** Supports the delivery of safer and more personalised maternity care, reducing disparities in birth outcomes.
- **National Family Hubs and Start for Life Programme (2023 Onwards):** focusing on early parenting support, perinatal mental health, and child development, where Baby Steps serves as a preventative and educational programme. Bradford is one of the 75 Local Authorities to pilot the programme. Through this workstream, Baby Steps is now embedded in the Early Years ecosystem with their delivery across the district.
- **Children's Wellbeing and Schools Bill (2025):** aimed at enhancing child safeguarding, regulating educational institutions, and promoting children's welfare across the UK. While the bill primarily focuses on school-aged children, its overarching goal of improving children's wellbeing aligns with the objectives of programs like Baby Steps who support parents during the critical early stages of a child's life. Baby Steps addresses the foundational aspects of child development, which are crucial for long-term wellbeing. Although the bill does not explicitly address antenatal programs, its emphasis on children's welfare resonates with the preventive and supportive measures offered by programmes like Baby Steps.
- **Bradford's Joint Health and Wellbeing Strategy:** The Better Start Bradford delivery model is in line with this strategy and is necessary to achieve all four outcomes for the district as well as long-term outcomes:
  - Our children have a great start in life
  - Bradford district is a healthy place to live, learn and work
  - People in Bradford district have good mental wellbeing
  - People in all parts of the district are living well and ageing well

SCAN ME
to view strategies

They were just always there, bless them. When I was on maternity leave, I decided I wasn't going back and my husband had just started a new job - they helped us to get a £250 grant. I managed to purchase a steriliser and a baby changing table. It wasn't just the sessions, they also helped financially as well through vouchers.

Baby steps was so valuable to my birth experience. It provided me with the knowledge and gave me confidence that contributed to a better birth experience. I am so grateful to have had the opportunity to do this course. It has definitely helped me in many ways.

They are telling me any time I'm not okay, I can talk to them, I call them [...] I feel someone is there, standing with me, helping me, because I'm pregnant, I'm not alone, I have someone who is caring for me, and for the baby.

We just reach out where we can and provide help. It really is holistic support in every way. We just try and change everything to make it easier for them and this new baby in their family life.

Case Studies

Case study 1

C, a young first-time mother, initially resisted support, fearing social services would take her baby away due to her father's manipulation. Living in poor conditions with a history of neglect, domestic abuse, and coercive control, she lacked the confidence and life skills needed for parenthood.

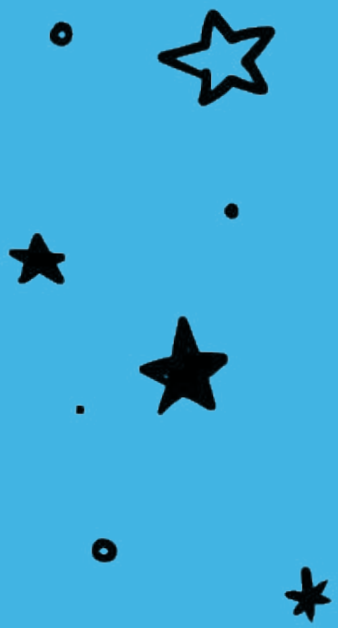
Baby Steps provided intensive one-on-one support, helping her understand baby development, healthy relationships, and coping strategies. Through advocacy, a safeguarding referral was finally accepted, ensuring a safer environment for her and her baby.

Practical support, including crisis grants, mobile top-ups, baby essentials, and emotional guidance, empowered C and her partner, E, to break free from their traumatic pasts and prepare for parenthood with confidence. Despite initial resistance, C fully engaged, expressing love and excitement for her unborn child, forming a strong bond even before birth.

Following their baby's arrival, C and E demonstrated a nurturing, attentive approach, embracing the tools they had learned. Professionals observed C breastfeeding, responding to baby cues, and working together with E in a loving, supportive environment. While S was born with a heart defect, ongoing medical support and a stable home life ensured she received the care she needed.

C said, "Baby Steps has really helped me understand how to be a good mum. I feel real love from the people around me."

Midwives and social workers praised the programme's impact, acknowledging that without Baby Steps, their baby may have ended up in care. With continued counselling, community support, and aspirations for work and independence, C and E are on a transformative journey, determined to give their baby the secure and loving upbringing that they never had.



Case study 2

OE, a mother expecting her fifth child, faced significant financial and social challenges after relocating from Nigeria to the UK. Living in an unfurnished home with no local support and struggling to meet basic needs, she initially doubted whether she could continue with her pregnancy.

Through the Baby Steps programme, OE received life-changing support, including essential baby supplies, food bank access, a washing machine, furniture, and financial relief through various grants. The project not only eased her financial burden but also provided emotional support through Bradford Doulas, (another Better Start Bradford project) and regular staff contact, ensuring she felt cared for and empowered. Her confidence grew, and she built connections within her community, transforming her home into a stable, nurturing space. Her three daughters, initially sleeping on mattresses, received proper beds, and OE gained vital knowledge on baby development, antenatal care, and emotional wellbeing.

By the end of the programme, OE expressed overwhelming gratitude, stating, "I did not know if I could have this baby because of my position, and you have changed everything for me."

With reduced financial stress, improved support networks, and a greater understanding of her baby's needs, OE embraced motherhood with renewed hope.

Observations postnatally confirmed the positive impact - her baby was well cared for, loved, and stimulated, benefitting from strong parental interactions. Professionals also praised OE's engagement, noting her remarkable progress and growing confidence.

Case study 3

This case study highlights the immense challenges faced by TN, a survivor of human trafficking and modern slavery, as she navigated pregnancy while being undocumented, homeless, and deeply traumatised. Through persistent advocacy and multi-agency collaboration, TN was successfully recognised as a victim of modern slavery, securing safe housing and access to essential services.

Despite language barriers and the risk of family separation, intensive support ensured TN remained connected to her husband and received specialised mental health care. The Baby Steps project played a crucial role in not only addressing logistical challenges but also fostering an environment where TN and her husband could focus on their unborn child, despite the adversity they faced.

The impact of the intervention was profound. Initially, TN's distress and instability raised concerns about bonding and attachment, but dedicated one-to-one sessions provided a vital space for her to emotionally connect with her baby. Over time, TN's mental health visibly improved, and by the time of her son's birth, she demonstrated secure attachment and responsive caregiving. Observing the transformation in TN and her husband, from a state of deep trauma to confident and loving parents, was a significant success. Despite ongoing difficulties, the couple worked hard to break cycles of hardship, integrating into their local community and taking steps toward stability.

The outcomes of this intervention were life changing. TN was granted access to some public funds, was securely housed, and had ongoing support for her mental health. She successfully initiated breastfeeding and established a secure bond with her baby, laying the foundation for a positive future. The case demonstrates the power of trauma-informed, holistic support in breaking down barriers for marginalised families. Without this intervention, TN may have remained in extreme vulnerability, but with targeted and compassionate support, she now has the stability and resources to build a safe and loving environment for her child.

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Sharing Knowledge, Shaping Futures at

www.betterstartbradford.org.uk

October 2025

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