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Handouts for

Making the Most of Services to Expectant Families

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Head Start Program Performance Standards
specific to Services to Expectant Families

§ 1304.40 Family partnerships

(c) Services to pregnant women who are enrolled in programs serving pregnant women, infants, and toddlers

1) Early Head Start grantee and delegate agencies must assist pregnant women to access comprehensive prenatal and postpartum care, through referrals, immediately after enrollment in the program. This care must include:

(i) Early and continuing risk assessments, which include an assessment of nutritional status as well as nutrition counseling and food assistance, if necessary;

(ii) Health promotion and treatment, including medical and dental examinations on a schedule deemed appropriate by the attending health care providers as early in the pregnancy as possible; and

(iii) Mental health interventions and follow-up, including substance abuse prevention and treatment services, as needed.

(2) Grantee and delegate agencies must provide pregnant women and other family members, as appropriate, with prenatal education on fetal development (including risks from smoking and alcohol), labor and delivery, and postpartum recovery (including maternal depression).

(3) Grantee and delegate agencies must provide information on the benefits of breast feeding to all pregnant and nursing mothers. For those who choose to breast feed in center-based programs, arrangements must be provided as necessary.

(d) Parent involvement in home visits.

(6) Grantee and delegate agencies serving infants and toddlers must arrange for health staff to visit each newborn within two weeks after the infant's birth to ensure the well-being of both the mother and the child.



Experiences for Promoting Prenatal Attachment

Many, even most, pregnant women are “in tune” with what is happening with their own bodies. However, few are aware of the many changes occurring inside the uterus. The following suggestions provide strategies that you can use to help share prenatal information with expectant families.

Sense of touch in early pregnancy.

To explore the fetus’s sense of touch early in the pregnancy, ask the mother if she swims or enjoys being in the water. If she does, have her think about the feeling of her body’s weight in the water – the tub, pool, or at the beach.

- What does it feel like to be in the water?
- Some people describe feeling weightless in the water. What does she think? How does the feeling of weightlessness change as she moves her body?
- Does she feel more graceful than when she is out of the water?
- How does it feel when surrounded by water? Describe the feeling.

As you talk with the family, introduce how the fetus experiences the sense of touch in the amniotic sac.

Sense of touch in later pregnancy.

When the fetus has grown so that the mother and family members are able to touch, pat, and rub the abdomen, perhaps feeling the limbs and body parts, ask the following:

- What do you think the fetus is experiencing when you touch, rub, or pat your belly?
- Have you ever felt any response from the fetus when you touch, rub, or pat?
- How does it make you feel when there is a response?
- What are you trying to say to the fetus with your touch, rub, or pat?

As they reflect, emphasize that the fetus feels those touches, rubs, and pats. Talk with the family about how important these touches are to the developing brain and the sense of touch.

Sense of taste and smell.

To begin discussions about the fetus’ developing sense of taste, you might ask the mother to tell you about some of the foods that she really enjoys eating during this pregnancy. During the conversation, ask the following:

- Are these foods that you want your baby to enjoy eating after birth?
- What are some of the foods that you have difficulty eating or can’t eat during this pregnancy? Do you miss eating these foods?

- Did you know that the fetus experiences the tastes of bitter, sweet, and sour, depending on the foods that you eat?
- Did you know that the fetus can smell scents from the foods you eat through the fluid in the amniotic sac?

Discussions about taste and smell also provide an excellent opportunity for you to talk about the benefits of healthy eating during the pregnancy. As the expectant mother approaches her due date, you can highlight the benefits of breast-feeding for both the newborn and the mother. Check out the Breastfeeding: Guide to On-Line Resources on the Early Head Start website at www.ehsnrc.org for additional resources.

Sense of hearing.

Most pregnant women know from their own experience that fetuses can **hear**. When they walk into a loud restaurant or a concert, they may feel the fetus respond. This is a great time to talk with families' about the rhythm of their language and the possibility of reading to the fetus during pregnancy. Encourage expectant mothers and close family members (e.g., fathers, grandparents, etc.) to talk to the fetus. Explain that research finds that babies do hear these voices in the womb and recognize these voices when they are born. Have them watch to see if the fetus moves – or quiets – in response to their talking or singing. You can encourage conversation by asking one or more of the following questions.

- Do you notice the fetus move when s/he hears certain sounds?
- What do you think the fetus can hear?
- What kinds of responses occur when you talk or sing to the fetus?

To help mother and family members understand what the fetus may be hearing have them try the following:

- Have each family member place their hands over their ears and listen to someone talk. This muted sound resembles what the fetus hears.

Sense of vision.

A conversation starter for the sense of vision might be a question about what parents think the fetus sees before birth. With permission, try shining a flashlight on the abdomen of a woman who is 7 or 8 months pregnant. Follow up the conversation with the activity below.

- Ask if the mother feels the fetus turn away from the bright light.
- Why does the parent think the fetus does or does not turn away?
- What might be some other times that the fetus might react to bright or direct light?

As the family shares information with you, talk about how the fetus can see light and shadow before birth. At times, they can even see parts of their own bodies in the womb.

Resources to help you
Make the Most of Services to Expectant Families
Birth To Three 2014
Washington, DC

General:

Best Start. *Reducing the Impact: Working with Pregnant Women Who Live in Difficult Life Situations*. Toronto, ON: Best Start, 2002.

http://www.beststart.org/resources/anti_poverty/pdf/REDUCE.pdf.

Cardone, Ida, Linda Gilkerson, and Nick Wechsler. *Teenagers and Their Babies*. (Washington, DC: ZERO TO THREE, 2008).

Powers, Stefanie, ed. "Supporting Pregnant Women, Newborns, and Their Families," *Zero To Three* 29 (2009).

Engaging families:

Attorney General of Texas. *The First Nine Months of Fatherhood: Paternal Contributions to Maternal and Child Health Outcomes (A report of the findings of the First National Conference of Emerging Research and Practice on Prenatal Father Involvement)*. (Texas: Office of the Attorney General of Texas, 2008).

https://www.oag.state.tx.us/AG_Publications/pdfs/first9months.pdf

Office of Adolescent Health. *Promising Strategies and Existing Gaps in Supporting Pregnant and Parenting Teens: Summary of Expert Workgroup Panel Meetings, January and July 2012*. (Washington, DC: Office of Adolescent Health, 2012).

http://www.hhs.gov/ash/oah/resources-and-publications/info/Assets/paf_expert_panel_rpt_2012.pdf

Fostering mental health:

Knitzer, Jane, Suzanne Theberge, and Kay Johnson. *Reducing Maternal Depression and Its Impact on Children: Toward a Responsive Early Childhood Policy Framework*. New York: National Center for Children in Poverty, January 2008. Accessed April 1, 2014. http://www.nccp.org/publications/pub_791.html.

National Center for Parent, Family, and Community Engagement. *Family Well-Being: A Focus on Parental Depression*. (Washington, DC: Administration for Children and Families, US Department of Health and Human Services, no date).

<https://eclkc.ohs.acf.hhs.gov/hslc/tta-system/family/docs/depression-pfcerp.pdf>

Fostering mental health (cont'd.):

National Research Council and Institute of Medicine. *Depression in Parents, Parenting, and Children: Opportunities to Improve Identification, Treatment and Prevention Efforts*. Washington, DC: The National Academies Press.
http://www.nap.edu/catalog.php?record_id=12565

Promoting attachment:

Rackett, Penelope, and Bjarne M. Holmes. "Enhancing the Attachment Relationship: A Prenatal Perspective." *Educational and Child Psychology* 27 (2010): 33-50.

National Center for Parent, Family, and Community Engagement. *Positive Parent-Child Relationships*. (Washington, DC: Administration for Children and Families, US Department of Health and Human Services, no date).
<https://eclkc.ohs.acf.hhs.gov/hslc/tta-system/family/docs/parent-child-relationships.pdf>.

O'Leary, Joann. "Grief and its impact on prenatal attachment in the subsequent pregnancy." *Archives of Women's Health* 00 (2004): 1-12.
http://jmbirthconsultants.com/images/Grief_and_its_impact_on_prenatal_attachment.PDF

Addressing substance use:

American College of Obstetricians and Gynecologists. *Smoking Cessation During Pregnancy: A Clinician's Guide to Helping Pregnant Women Quit Smoking*. Washington, DC: ACOG. Accessed April 1, 2014.
http://www.acog.org/Resources_And_Publications/Department_Publications/Smoking_Cessation_During_Pregnancy_Clinicians_Guide

Substance Abuse and Mental Health Services Administration. *Brief Interventions and Brief Therapies for Substance Abuse*. (Washington, DC: Substance Abuse and Mental Health Services Administration, US Department of Health and Human Services, 1999). <http://store.samhsa.gov/shin/content/SMA06-4136/SMA06-4136.pdf>

Zero Out Early Childhood Tooth Decay. *Tooth Talk Moments*. Posted June 10, 2013. Accessed April 1, 2014. <http://www.youtube.com/watch?v=HF3ugg3xZVI>.

Facilitating access to resources and services:

Fowles, Eileen R., and Fowles, Sarah L. "Healthy Eating During Pregnancy: Determinants and Supportive Strategies." *Journal of Community Health Nursing* 25 (2008): 138-152.

Tharaldson, Kristen, and Angie Sechler. "Women's Health: Reproductive Health Services in Rural Minnesota." *Rural Minnesota Journal* 3 (2008): 101-125.

Building social support:

Jones, Loretta, Michael C. Lu, Aziza Lucas-Wright, Neysa Dillon-Brown, Marsha Broussard, Kynna Wright, Molly Maidenberg, Keith Norris, and Cynthia Ferre. "One Hundred Intentional Acts of Kindness Toward a Pregnant Woman: Building Reproductive Social Capital in Los Angeles." *Ethnicity & Disease* 20 (2010): 36-40. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3787313/pdf/nihms-518005.pdf>

National Center for Parent, Family, and Community Engagement; *Family Connections to Peers and Community*. (Washington, DC: Administration for Children and Families, US Department of Health and Human Services, no date). <http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/family/docs/rtp-family-connections.pdf>.