

Used SBY formally with 3 mums. These were professional women, one had a young baby and the other two babies were a bit older. The thing that 'put out' the mums more than anything else was discouraging long daytime naps. At least 20% of her caseload are professional mums and the current three mums she is working with who have had babies in the last 3 months haven't taken any maternity leave, that are continuing to work at home so naptimes are very precious. One [redacted] works for an American firm so she gets up at 3am to answer emails and have skype meetings, another is a CEO of a [redacted] company. The three women who received SBY are all on maternity leave. On the other hand she does have mums who are the opposite and don't have any structure so the SBY suggestions might suit them better. Professional mums tend to be more structured around routines so changing some of those ideas might be harder.

Has introduced SBY at clinic and other mums have overheard us talking about it so it has created discussion among the other mums.

Feels that women she works with have been accepting of the SBY info as they tend to be open to new ideas and there isn't such a strong grandma influence. The areas where she works families don't tend to be living close by and so aren't giving the mums a lot of information. One problem she finds it that women who are open to new ideas tend to not stick to one idea for long enough to allow it to have an impact, they are sometimes looking for a miracle overnight fix. Some of these women are under a lot of pressure to keep working e.g. one mum she saw at her 11-14 day check and the mum was in tears because she had to review a report for work by the end of that week. These women have worked very hard professionally so they are very reluctant to let that go and often they continue to work from home after having their baby. Some also do this as they get bored because they are used to working in a fast paced pressured environment.

Currently using Solihull approach so already talk to mums about the importance of looking for their baby's cues and bonding etc. but has begun to incorporate SBY ideas, particularly highlighting to mums the importance of waking up at the same time every day rather than having a sleep in if baby sleeps a bit longer. Some mums are reluctant to allow their baby to stay up longer at night as they want to protect the time they have when their husband comes home, others are happy for baby to be up later as dad might want to spend some time with the baby when he gets home. Some mums have husbands who work away all weeks and so don't have much support so they want their babies to go to bed at 6pm because they want some time for themselves.

Suggested that SBY could be given out early to families in parent craft sessions because they already talk about the mums sleep patterns might change during those. It would be better to introduce these ideas early rather than trying to change routines once the baby arrives. Feels that mums are more open to ideas at the antenatal stage. Sometime mums have the idea that baby will wake up, feed, then go back to sleep and they will be able to get on with their own things until baby wakes up later for another feed. We try to tell mums that this isn't going to happen but it would be a good idea to introduce them at this stage to the ideas about sleep pressure and getting baby up at the same time alongside what we already say about feeding and bonding cues. This all helps with the emotional attachment, if a mum feels that her baby is happier and don't have the expectation that, for e.g. baby should be sleeping and waking for feeds at 10am, 2pm etc. This will help mums to learn a bit more about their babies.

Would like to keep on using SBY, it's an extra tool that we can use and it sits well with Solihull. The issue is that it takes a long time for new patient information to get embedded into practice. Often the biggest boost happens when mums go off and talk to other mums about the info then they come in and ask us about it. Wondered if some of the SBY could feed into the institute of HV training that

she is a cascade trainer for. Thinks that our plans to make videos is great and also suggested an app. The institute of HV have a maternal mental health app that was successful. We don't give out as many leaflets now so apps work well, also women can keep going back to the app and they never lose their phones whereas they might lose the leaflet. We now have a list of sites and apps that we can direct mums to. We have a coping with crying video which we use but I would say that sleep is the next biggest problem after that as it causes parent real distress and effect both parents' mental health. Researcher at [redacted] from Oxford University, does work around training for parents to improve mental health i.e. going out for a walk, get plenty of sleep, eat well, be mindful. Her work links well with the SBY ideas. This work hasn't yet been published. Sometimes it's a challenge to get some parents to go out to baby groups, maybe because groups can sometimes be a bit competitive.