

THE IMPOERTANCE OF CONVERSATION IN PRENATAL CARE

STEFANÍA B. ARNARDÓTTIR
FAMILY NURSE SPECIALIST, MSC
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• *THE IMPORTANCE OF CONVERSATION - RELATIONAL BASED INTERVENTION CAN HELP?*

► **WE HAVE GUIDELINES IN ANTENATAL CARE:**

- Physical
- Emotional (Whooley questions)
- Psycosocial (transitional period)
 - How to identify need for service?

- Solihull Approach (from UK) [Antenatal | Solihull Approach \(solihullapproachparenting.com\)](https://www.solihullapproachparenting.com)
- Newborn Behavioral Observation (NBO, from USA)

THE IMPORTANCE OF THE FIRST 1000 DAYS

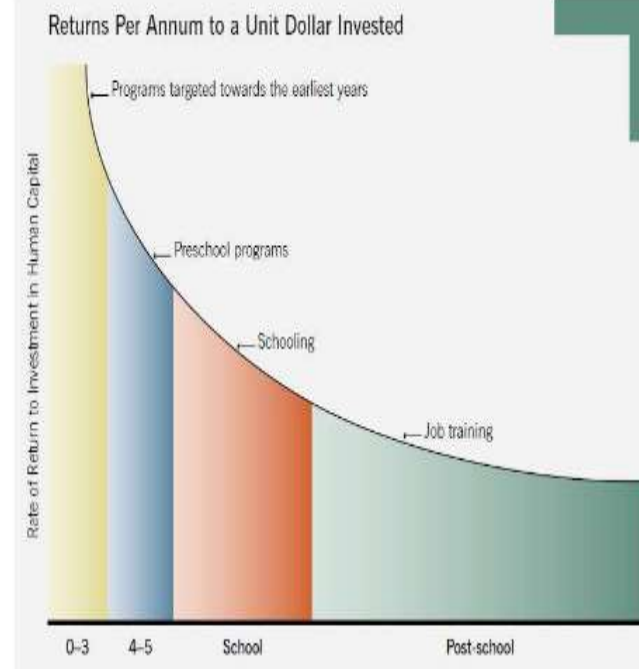
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- 2019-2022

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The Heckman Equation:

Investing in early childhood development builds the human capital we need for economic success.

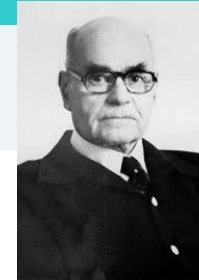


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WHAT IS THE SOLIHULL APPROACH

- ▶ *UNDERPINNED BY **ATTACHMENT THEORY AND NEUROSCIENCE***
- ▶ *IT BRINGS TOGETHER 3 THEORIES TO PROVIDE A WAY OF THINKING ABOUT RELATIONSHIPS*
 - **CONTAINMENT - PSYCHOANALYSIS**
 - **RECIPROCITY - CHILD DEVELOPMENT**
 - **BEHAVIOUR MANAGEMENT – BEHAVIOURISM**
- ▶ *IT SUPPORTS PROFESSIONALS IN THEIR WORK WITH PROSPECTING PARENTS, CHILDREN AND FAMILIES*

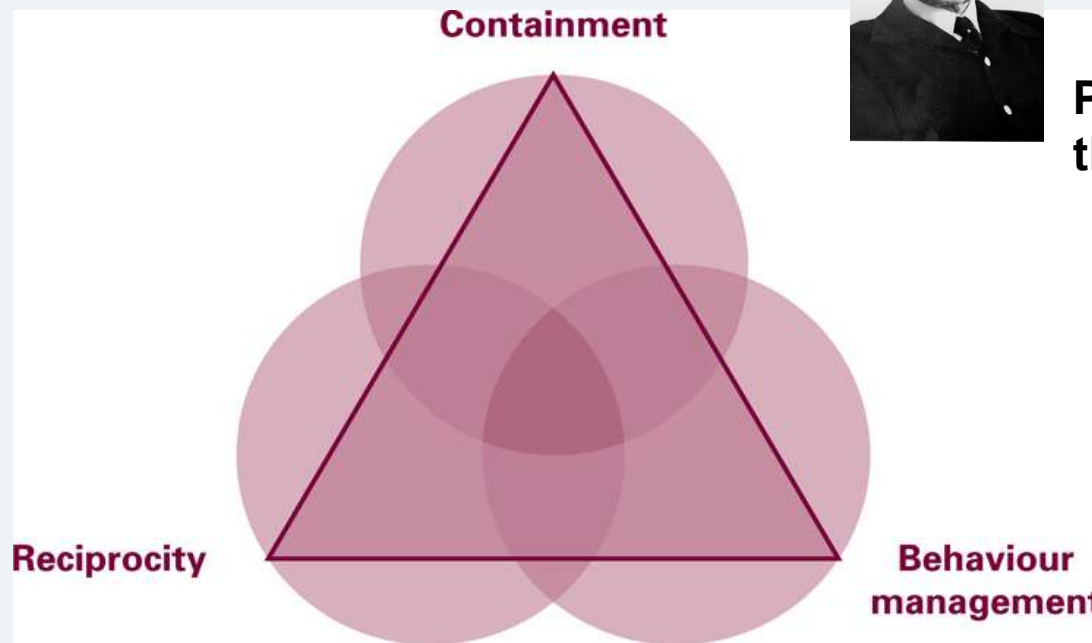
The Solihull Approach -



Psychoanalytic
theory (Bion)

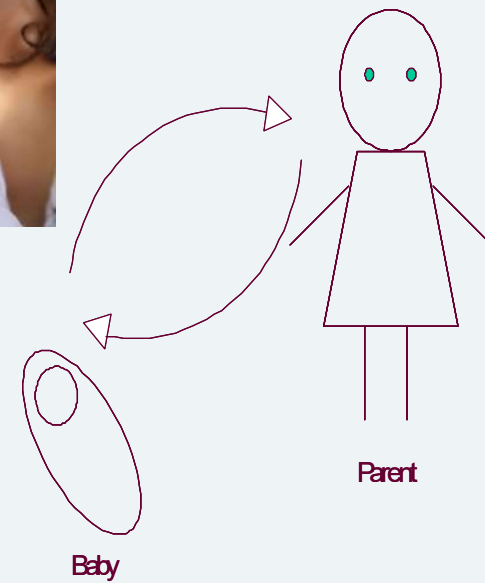
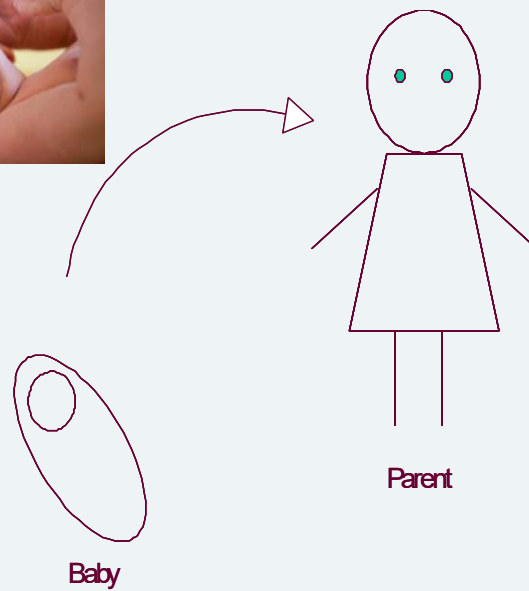


Child Development research
(Brazelton)

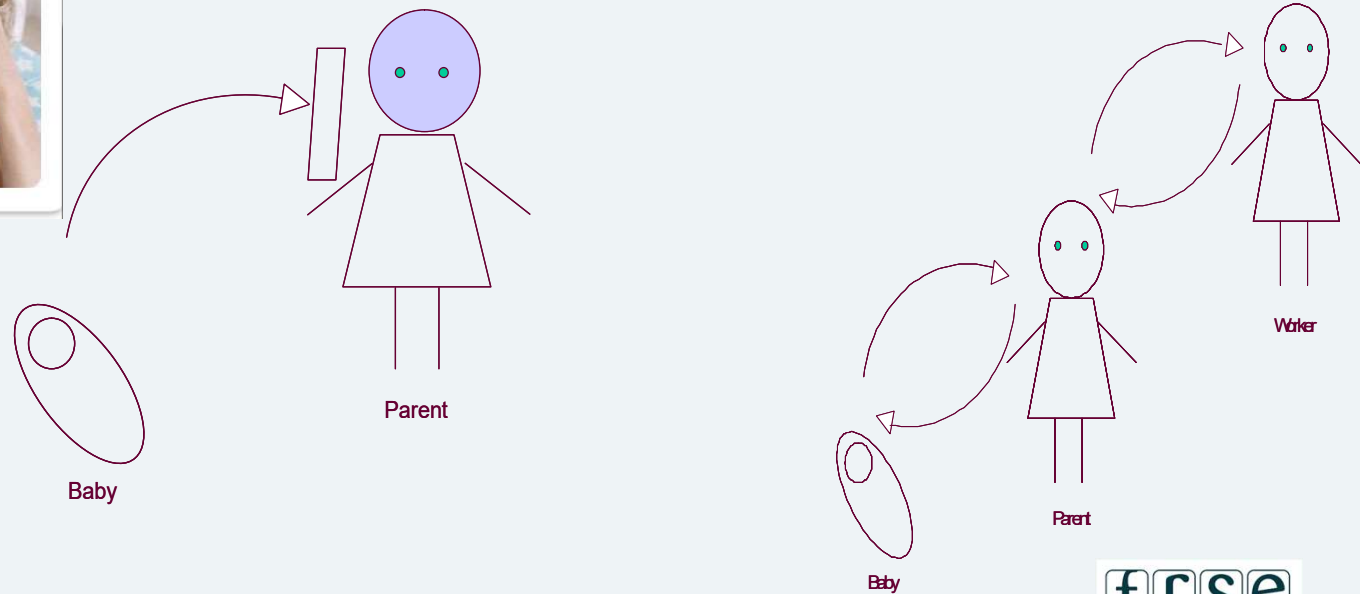


Behaviour
management
Behaviourism (Skinner)

CONTAINMENT AND THE BRAIN



CONTAINMENT: BRAIN OF A PARENT WITH OVERWHELMING WORRIES



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- *HELPS MIDWIFES/PROFESSIONALS TO HAVE THE SPACE TO THINK ABOUT THE PROSPECTING MOTHER / FAMILY*

- *What are they thinking, expecting or worried about*
- *How can the midwife help them to cope and adjust*
- *Put things in words*
- *Normalize*
- *Refer to specialist service if needed*

CONTAINMENT AND PRENATAL CARE

- ▶ *SUPPORTS MIDWIFES THROUGH CONTAINING*
 - ▶ *listening to the family “story”*
 - ▶ *intervene early*
 - ▶ *listening and reflect*
- ▶ *SUPPORTS MIDWIFES TO HELP THE PARENTS COPE WITH ANXIETY AND WORRIES SO THEY CAN BE FREE TO ADJUST TO PARENTHOOD*
- ▶ *MIDWIFES NEED CONTAINMENT REGARDING THE EMOTIONAL ASPECTS OF THEIR WORK FOR THEIR OWN WELLBEING!!*
- ▶ *LEADERS AND MANAGERS NEED CONTAINING TOO!*

NEWBORN BEHAVIORAL OBSERVATION (NBO)

- THE NBO SYSTEM IS A RELATIONSHIP-BASED TOOL THAT OFFERS INDIVIDUALIZED INFORMATION TO PARENTS ABOUT THEIR INFANT'S COMMUNICATION STRATEGIES AND OVERALL DEVELOPMENT, WITH A VIEW TO STRENGTHENING THE PARENT-INFANT RELATIONSHIP.

NBAS TIL NBO, NEWBORN BEHAVIORAL OBSERVATION

The screenshot shows a web browser window displaying the website of The Brazelton Institute. The page title is "The Newborn Behavioral Observations system: What Is It?". The header includes the logo of Boston Children's Hospital and Harvard Medical School, along with the tagline "promoting the healthy development of young children and their families through professional education and research".

The Newborn Behavioral Observations system: What Is It?

What is the NBO system?

The NBO is a structured set of observations designed to help the clinician and parent together, to observe the infant's behavioral capacities and identify the kind of support the infant needs for his successful growth and development. It is a relationship-based tool designed to foster the parent-infant relationship. The NBO system consists of a set of 18 neurobehavioral observations, which describe the newborn's capacities and behavioral adaptation from birth to the third month of life. While it describes the infant's capacities, the NBO provides parents with individualized information about their infant's behavior, so that they can appreciate their baby's unique competencies and vulnerabilities and thereby understand and respond to their baby, in a way that meets her/his developmental needs. The 18 NBO items include observations of the infant's

- capacity to habituate to external light and sound stimuli (sleep protection)
- the quality of motor tone and activity level
- capacity for self-regulation (including crying and consolability)
- response to stress (indices of the infant's threshold for stimulation)
- visual, auditory and social-interactive capacities (degree of alertness and response to both human and non-human stimuli)

While the NBO attempts to reveal the full richness of the newborn's behavioral repertoire, the clinical focus is on the infant's individuality, on the aspects of behavior that make the baby unique and different. In other words, the NBO provides the baby with a "voice", with a "signature". It gives the baby an opportunity to tell the caregiver who he or she is, if you will, what her preferences are and what her vulnerabilities might be and in what areas she may need support. By providing this behavioral profile of the infant's strengths and challenges, the NBO can provide clinicians with the kind of individualized guidance that can help parents meet their baby's needs. This, in turn, will help the parents develop the kind of confidence they need to support their baby's development and enjoy the experience of being a new parent.

While the NBO was developed to meet the needs of parents, it is designed in its ease of use to be a helpful tool for pediatric professionals who work with parents during the perinatal period. It is flexible and can easily be integrated into routine home visits. The NBO was also designed to meet the needs of pediatric professionals who want a more relationship- or family-centered model of care to replace the traditional pathology-seeking biomedical model of care (Brazelton and Cramer, 1990; Stewart et al., 1995). The NBO, therefore, was designed as a relationship-building method that can be flexibly administered and that offers individualized information to parents about their baby, with a view to promoting a positive bond between parent and child and between themselves and the parents and family. For that reason, the NBO is best understood as a relationship-building tool. It is inherently interactive and family-centered, because parents are involved as partners in the NBO session throughout. So, while the NBO aims at fostering positive parent-infant interaction, it also aims at promoting a positive relationship - a partnership - between clinician and parents.

For further information on NBO training, please see the [Newborn Behavioral Observations system Training Program](#).

To begin the NBO system training program, please complete the [NBO Training Registration Form](#).

Background

The development of the NBO is based on over 30 years of research and clinical practice



THE GOAL WITH NBO

- UNDERSTAND THE UNIQUENESS OF THE NEWBORN CHILD
- BE ABLE TO TRANSLATE YOUR KNOWLEDGE ABOUT THE CHILD TO THE PARENTS
- TO SUPPORT A POSITIVE RELATIONSHIP BETWEEN THE PARENTS AND THE CHILD
- TO ESTABLISH A GOOD ALLIANCE BETWEEN PARENTS AND HEALTH WORKERS

KNOWLEDGE NEEDED TO SEE THE INFANT

THE TWO CLINICAL WINDOWS:

- 6 STAGES OF CONSCIOUSNESS
- AMOR-SYSTEM
 - Autonomic reactions
 - Motor skills
 - Organization of states
 - Responsiveness to stimulation



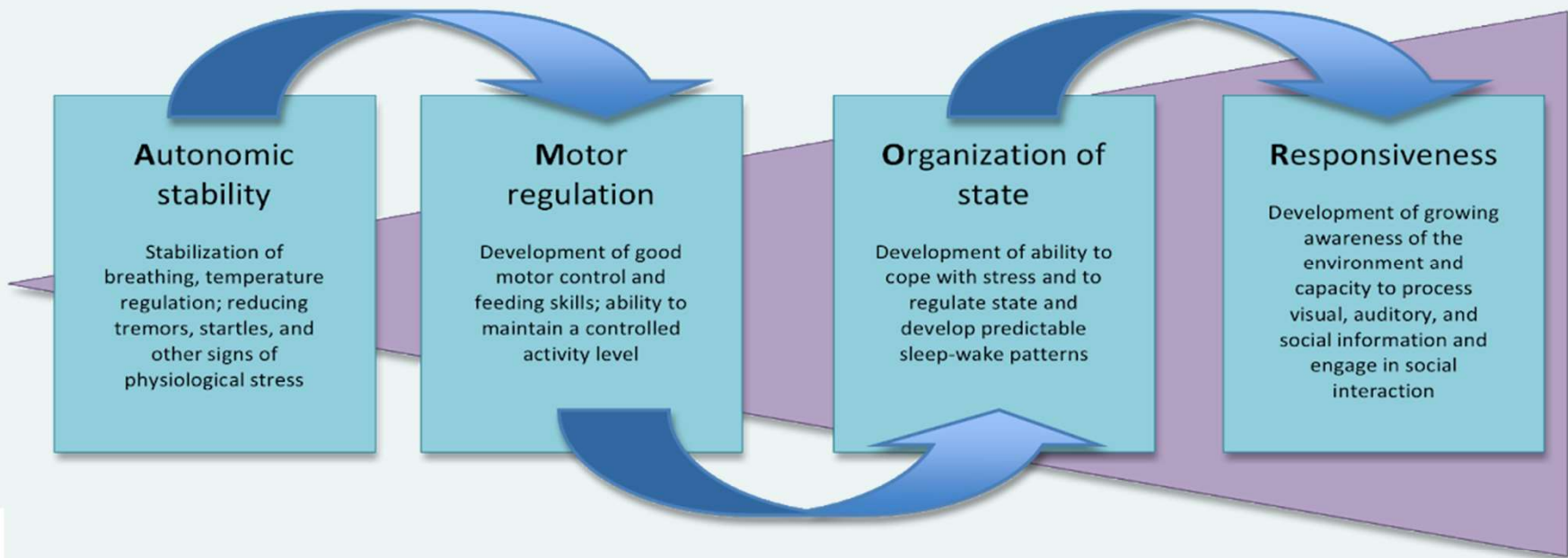
6 STAGES OF CONSCIOUSNESS

- DEEP SLEEP (NON-REM)
- LIGHT SLEEP (REM)
- DROWSY
- QUIET ALERT
- ACTIV ALERT (FUSSY)
- CRYING



Figure 4.9 Developmental Challenges Facing the Newborn: The AMOR Hierarchy of Newborn Behavioral Organization

Source: Based on Nugent et al, 2007.



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IN NBO
THE AMOR-
SYSTEM IS
USED FOR

**STRUCTURED OBSERVATION OF THE
CHILD TOGETHER WITH THE PARENTS
WHICH CONTRIBUTES TO:**

IDENTIFY THE CHILD'S STRENGTHS AND
DEVELOPMENTAL CHALLENGES

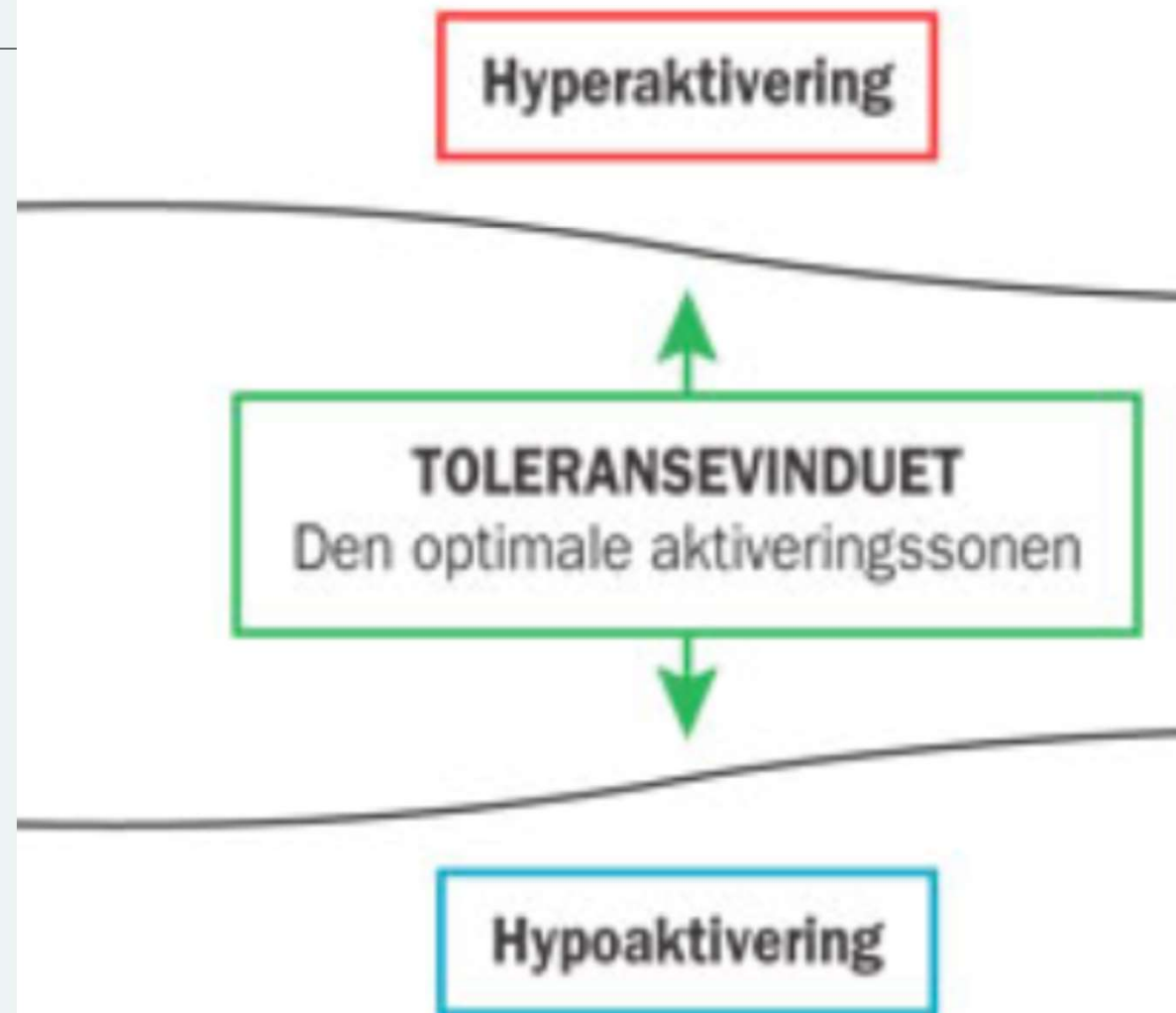
INTERPRETING THE CHILD'S BEHAVIOR
TOWARDS THE FAMILY AS WE HELP THEM
GET TO KNOW THEIR CHILD

THE OBSERVED BEHAVIOR GIVES US
IMPORTANT INFORMATION ABOUT THE
INFANT'S EFFORTS, -WHEN IT SUCCEEDS
AND WHEN IT FAILS IN ITS ATTEMPTS AT
SELF-REGULATION

THE DISORGANIZED CHILD

- ... WHEN THE INFANT IS EXPOSED TO TOO MUCH OR TOO LITTLE STIMULATION, THE CHILD WILL FALL OUTSIDE HIS TOLERANCE WINDOW
- WHEN THE THRESHOLD TO SELF-REGULATION IS EXCEEDED AND AVOIDANCE BEHAVIORS ARE OBSERVED

• D`Apolito, 1991



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Karolina Isio-Kurpińska and Bożena Cieślak-Osik

The screenshot shows a web browser window displaying the NBI Poland website. The browser's address bar shows the URL <https://www.newbornbehaviorinternational.org/poland>. The website header features the NBI logo (Newborn Behavior International) on the left, a navigation menu with links for Home, News and Events, Leaders in The Field, Our NBI Network, and NBAS/NBO From the Field Poetry and Practice in the center, and a red 'Subscribe' button on the right. The main content area is titled 'Poland' and contains a section titled 'Launch of NBO Training Site in Poland'. The text in this section reads: 'It is our great pride and pleasure to inform all of you that this weekend, June 19-20, marks the launch of the NBO Training Site in Poland! It will be launched with the first online training by Karolina Isio-Kurpińska and Bożena Cieślak-Osik, mentored by Kevin Nugent and Joanna Hawthorne. Poland has been an NBAS Training Site since 2012, but since learning about NBO and completing the NBO training in Brazelton Centre UK, we have dreamt of bringing NBO to Polish practitioners. In recent years, after we have established Fundacja Centrum NBAS w Polsce, we started our journey'. Below the text is a photograph of two women, Karolina Isio-Kurpińska and Bożena Cieślak-Osik, standing in front of a banner for 'Fundacja Centrum NBAS w Polsce'. The banner also lists activities like 'Kursy', 'Szkozenia', 'Warsztaty', 'Spotkania indywidualne', 'Obserwacja i rozumowanie', and 'Praca z noworodkami i niemowląt'. The browser's taskbar at the bottom shows several open applications, including Booking.com, Dell, Bing, Lausnin, fjoiskydu..., Mail - Stefania Birn..., Uniwersytet Medyc..., NBO plan for paper..., teams hh, and NICABM-StephenP... The browser's address bar also shows a 'Sign in' button and a search icon.

Poland — Newborn Behavior International

<https://www.newbornbehaviorinternational.org/poland>

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Poland

Launch of NBO Training Site in Poland

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Fundacja Centrum NBAS w Polsce

Kursy
Szkozenia
Warsztaty
Spotkania indywidualne
Obserwacja i rozumowanie
Praca z noworodkami i niemowląt

Nesteśmy dla
my Rodziców i
erwacji i rozum
rozporządzenia

Iceland
Liechtenstein
Norway grants

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THANK YOU


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