

LEAP's Parent and Infant Relationship Service (PAIRS):

An evaluation



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Aim/objective

To provide an overview of key findings and recommendations from the evaluation of LEAP's parent and infant relationship service (PAIRS) conducted by City, University of London.

Introduction

The quality of the parent-infant relationship, including during pregnancy, is a key factor influencing life outcomes for children.¹ Evidence shows that risk factors such as poverty and domestic abuse are associated with disorganised and insecure attachment patterns.² In the LEAP area, where 68% of children live in 'very deprived' neighbourhoods, the multiple disadvantages faced by many families can contribute to parent-infant relationship difficulties.

In response to this need, LEAP created a specialised parent and infant relationship service (PAIRS). The service

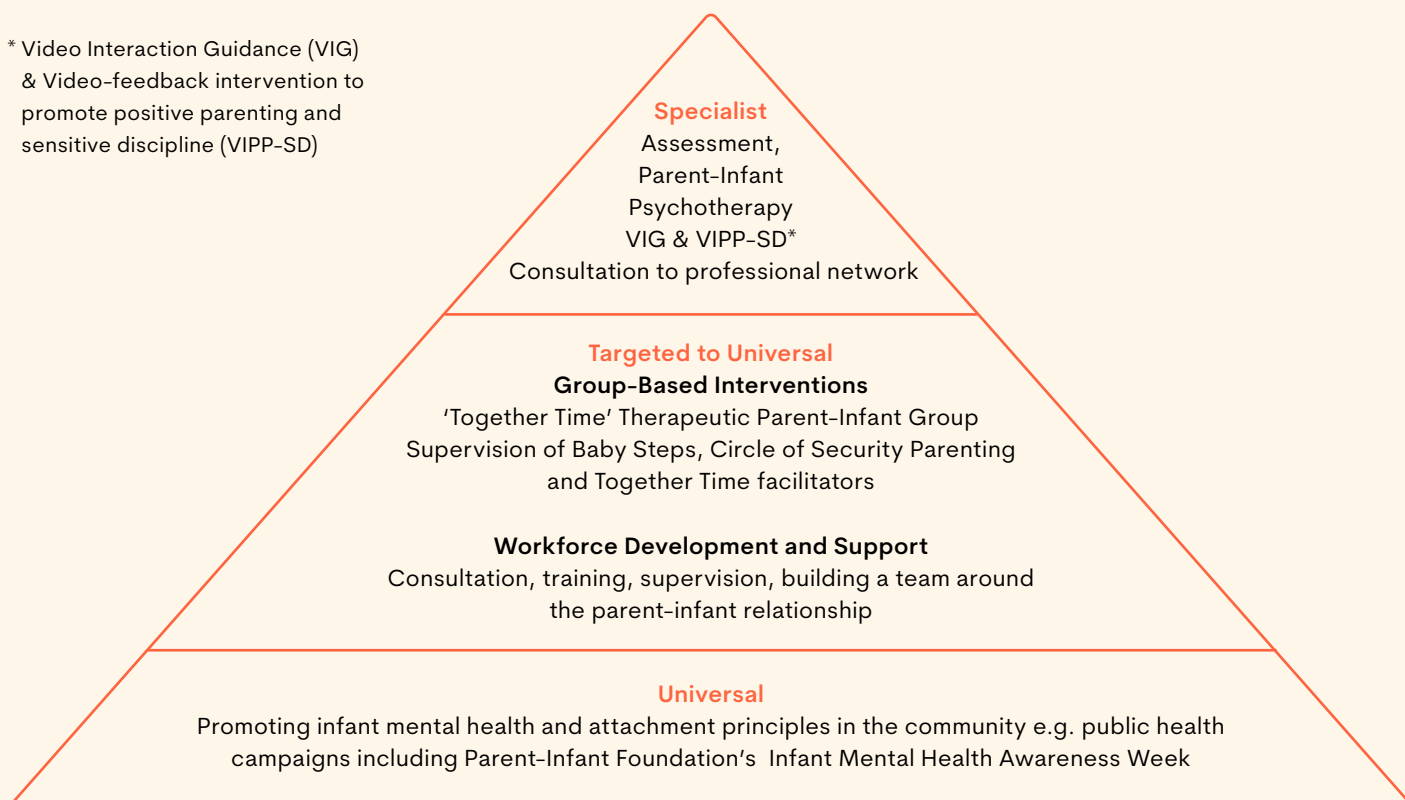
has been delivered by South London and Maudsley NHS Foundation Trust since 2015 and is based in Lambeth CAMHS. It is a multidisciplinary team and includes highly skilled professionals with specialist therapeutic expertise to support and strengthen parent-infant relationships. PAIRS is one of only 46 such teams in the UK³ addressing a 'baby blind spot' in mental health provision.⁴

PAIRS offers a range of support for families and the local early years workforce, as shown in Figure 1. Generally one adult accesses PAIRS with one child (if born), and infants are active participants in the interventions.

LEAP commissioned researchers at City St George's, University of London, to evaluate PAIRS between December 2023 and April 2024. Though policy at the time had started to reflect growing evidence around the value of parent-infant teams, there had been limited research into teams' local contexts and impacts.⁴

Figure 1: PAIRS model of interventions for families and workforce

* Video Interaction Guidance (VIG) & Video-feedback intervention to promote positive parenting and sensitive discipline (VIPP-SD)



Methods

Informed by PAIRS' theory of change, this mixed methods process and impact evaluation aimed to answer these questions:

- + To what extent and how does PAIRS build the capacity of Lambeth's Early Years ecosystem to support parent-infant relationships?
- + To what extent and how does PAIRS improve parent-infant relationships and medium-term attachment outcomes for families?
- + What is PAIRS' contribution to addressing social inequality in parent-infant relationship outcomes and experiences of support?
- + What impact do PAIRS interventions have on long-term child health outcomes?

Interviews or focus groups were undertaken with:

- + 15 parents who had accessed parent-infant psychotherapy and/or Together Time
- + 6 PAIRS staff
- + 10 stakeholders representing the wider local early years workforce.

The total sample size of adult PAIRS users was 285 for parent-infant psychotherapy and 114 for Together Time. Anonymised service user and engagement data were analysed for adults who had participated between June 2015 and December 2023, as well as data on 365 parent-infant psychotherapy referrals (counting adults only).

Clinical outcomes data were available for:

- + Parental Reflective Functioning Questionnaire
- + Caregiving dimensions of the DC:0-5 Levels of Adaptive Functioning
- + Parental perceptions of their babies' behaviours and feelings towards them (Mothers' Object Relations Scale).

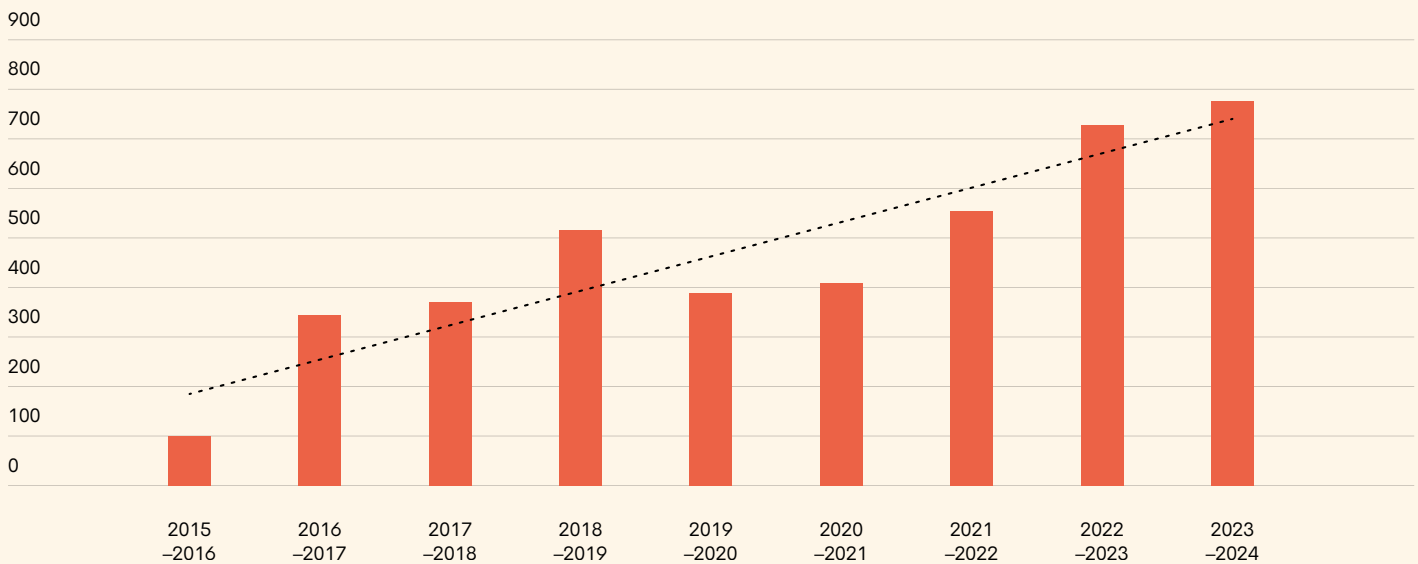
Frequency analysis is provided for all data, and paired samples t-tests were performed where suitable.

Findings

PAIRS has had a significant positive impact on both families and the local early years workforce.

- + PAIRS has improved the capacity of Lambeth's early years ecosystem to support parent infant relationships, driving the establishment of new services and helping a range of professionals to understand and support parent-infant relationships within their own caseload. Between 2015/16 and 2023/24 the yearly number of parent-infant psychotherapy appointments rose from 97 to 777 (see Figure 2).
 - + PAIRS has a unique focus on antenatal work. 74% of accepted referrals for parent-infant psychotherapy were made antenatally; most came from LEAP's continuity of care midwifery team.
 - + The quality and consistency of clinical outcome data varied, however there was some evidence of improvement. For Together Time, parents' ability to understand and respond empathetically to the child's emotional needs improved (PRFQ, N=76), parental warmth increased and parents found their babies less intrusive and controlling (MORS, N=59); however, there was little change in families' levels of adaptive functioning (LOAF, N=85).
 - + Qualitative data suggests that families have a positive experience of PAIRS, with parents reporting improvements in their bond with their baby and confidence in their parenting.
 - + PAIRS contributes to reducing inequality through working with families experiencing multiple disadvantages. Overall, 60% of service users lived in the most deprived 30% of areas in England. Two-thirds of parents accessing parent-infant psychotherapy were from Black, Asian or Multiple Ethnic groups. The team's sensitive and flexible support and collaboration with other services was key to meeting the needs of families who may face barriers to engaging with mental health services.
 - + Interviewees reported that by improving parents and infants' mental health and relationships, PAIRS could potentially improve children's long-term outcomes and avoid further intervention later.
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- Everyone is excited when they are pregnant, and I just felt so alone with not feeling the same way. So, having someone to speak to and just help me through those emotions and feelings, were very important and helpful to me, and it helped me kind of, erm, continue on with my pregnancy in a better mood and with a better mindset.**
— Parent

Figure 2: Parent-Infant Psychotherapy: number of appointments made by year 2015/16–2023/24



Recommendations

PAIRS is in transition, scaling up to become available to families across Lambeth with children under five. This depends on sustainable funding being identified as LEAP ends. This evaluation has shown that PAIRS is greater than the sum of its parts, so the success of the service depends on the interconnectedness of its parent-infant psychotherapy, group work and workforce development offers.

The PAIRS team should continue its current good practice. The following actions are recommended to further develop the service as it becomes available Lambeth wide:

- + Offer training for the early years workforce now that PAIRS is open to more families
- + Consider offering further consultation and reflective supervision sessions for different professional groups, and evaluate these
- + Review marketing and clarify pathways into PAIRS from relevant services such as NICU
- + Plan to manage an increase in referrals
- + Review quantitative measures used to ensure appropriateness

Visit story-of-leap.leaplambeth.org.uk to find the full evaluation report.

References: **1** Parent-Infant Foundation (2020) Infant Mental Health and Specialised Parent-Infant Relationship Teams: A briefing. **2** Dartington Service Design Lab (2018) Evidence review: Improving the early learning outcomes of children growing up in poverty: A rapid review of the evidence. **3** <https://parentinfantfoundation.org.uk/network/locations/>. **4** Parent-Infant Foundation (2023) The impact of parent-infant relationship teams: A summary of the evidence. **5** Written evidence submitted to the Health and Social Care Committee by the Parent-Infant Foundation (2021). <https://committees.parliament.uk/writtenevidence/23224/pdf/>.

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