



Evaluation of the LEAP Parent and Infant Relationship Service (PAIRS): Executive summary and case studies

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Executive Summary

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

Lambeth Early Action Partnership (LEAP) is one of five local partnerships which make up A Better Start, a national ten-year (2015-2025) test and learn programme funded by the National Lottery Community Fund. LEAP aims to:

1. Improve early child development outcomes for all children living in the LEAP area.
2. Reduce local inequalities by supporting those at greater risk of poor outcomes.

LEAP has funded South London and Maudsley NHS Foundation Trust to deliver a parent and infant relationship service (PAIRS) since 2015. This service is based in Lambeth CAMHS and offers

- Parent-infant psychotherapy and Together Time (a therapeutic parent-baby group)
- Specialist assessments and other parent-infant interventions
- Support and advice to the local early years workforce through consultation, reflective supervision and training
- Activities to promote infant mental health and a healthy parent-infant relationship

It is important to note the unique role that LEAP plays in supporting PAIRS, making PAIRS different from other parent and infant relationship services. Being a LEAP service comes with requirements regarding data collection and reporting, age- and postcode-based eligibility criteria for access to the service, facilitated connections to the wider LEAP-funded workforce and support through LEAP team, resources and opportunities to engage with parents, including to gather insights to inform service design and improvement.

In 2023, PAIRS was awarded the [AiMH Together Award](#). This is awarded annually to one infant mental health team in recognition of working collaboratively and creatively to improve infant mental health outcomes for babies in their community.

Evaluation

The aim of the evaluation was to evaluate both PAIRS' workforce and family-focused activities and took place between December 2023 and April 2024. This included elements of both process and impact evaluation within the four key evaluation questions:

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

This evaluation comes at an important time for parent-infant relationship services. The evidence of the impact of parent-infant relationship teams is growing ([Parent Infant Foundation, 2023](#)) and policy is starting to reflect the importance of babies' experiences in their environment and with their caregivers. This evaluation addresses the need for further work to understand and specify how parent-infant services work, for whom and in what context.

Evaluation methods

This evaluation used mixed methods including interviews with parents, the PAIRS team and local stakeholders, as well as analysis of data routinely collected by LEAP and PAIRS. Fifteen parents took part in an interview or focus group; six had participated in parent-infant psychotherapy, and eight

had participated in Together Time. One interviewee had participated in both. Parents were from a range of ethnic backgrounds. Most were first time parents and all but one was a mother. Six members of the PAIRS team and ten stakeholders representing the wider local early years workforce also took part in an interview or focus group. The stakeholders had experience of referring families to PAIRS, attending reflective supervision, consultations, supporting commissioning, and represented health visiting, midwifery and closely associated services.

Anonymised service engagement data were available for 282 parent-infant dyads who accessed parent-infant psychotherapy between June 2015 and December 2023, and outcomes data were available for 284 adults. A total of 122 parents and 121 children took part in Together Time groups between October 2018 and March 2024. Out of these individuals, data were available for 114 participants who took part in the programme between 11 October 2018 and 14th July 2023. Quantitative data included details about appointments/attendance and demographics of those entering the service (ethnicity, relationship status, gender and age). The time at which data are collected differs for each service. Clinical outcomes data included:

- Parental Reflective Functioning Questionnaire (PRFQ)
- DC:0-5 Levels of Adaptive Functioning (LOAF)
- Mothers' Object Relations Scale (MORS).
- Ages and Stages Questionnaire (0-2 years Social and Emotional subscale - ASQ2-SE)

Findings

The interconnectedness of PAIRS

A key finding from this evaluation is how **all PAIRS activities are interconnected**. PAIRS cannot be successful in supporting families living in Lambeth without also building capacity within the local early years' ecosystem. The local capacity building that PAIRS is involved with leads to more awareness of infant mental health and the service which increases the number of appropriate referrals to the service. This in turn means that more parents and carers are being supported and report benefits such as better parent-infant bond, improved confidence in their parenting skills and improved mental health.

Themes generated from the interviews and focus groups and findings from the quantitative data analysis are presented and discussed below. To maintain participant anonymity, participants are referred to as parent,¹ PAIRS team member or stakeholder.

Building capacity in the Early Years workforce

This section links to the evaluation question - *To what extent and how does PAIRS build the capacity of Lambeth's early years ecosystem to support parent-infant relationships?* The interviews with the PAIRS team and stakeholders showed how **awareness of infant mental health and parent-infant relationship within local early years services has improved through training, reflective supervision and consultation provided by PAIRS**. Reflective supervision for the early years workforce and consultation about potential referrals were highly valued as these sessions built expertise and offered support to practitioners.

...it's very helpful for us to have somebody that we can discuss cases with, as a reflective space, that can advise us, that can help us see a different perspective, that we know that we can refer to, if we need them. (Stakeholder)

¹ PAIRS supports both parents and carers, but no carers were interviewed for this evaluation.

Practitioners also appreciated the support they received in reflective supervision sessions, and that their experiences were seen and heard by the Child and Adolescent Psychoanalytic Psychotherapists. Finally, **more training was desired** and could aid additional relationship building with services and increase referrals.

It was also clear from the interviews that the child and parent-infant psychotherapy **expertise provided by PAIRS to other services supporting families in Lambeth would be absent if PAIRS did not exist** – this would leave a vacuum for babies in the area who need intervention. PAIRS has also contributed to the **redesign of the parenting offer in Lambeth**, for example through supporting the implementation of Circle of Security Parenting (COSP). The current commissioning arrangements reflect good practice as defined by the Parent-Infant Foundation. However, funding was discussed by several PAIRS team members and stakeholders as an ongoing issue impacting service scale up and sustainability.

Targeting social inequality

This section links to the evaluation question - *What is PAIRS' contribution to addressing social inequality in parent-infant relationship outcomes and experiences of support?*

PAIRS works with a highly diverse population based in areas of deprivation. In terms of ethnicity, the main population group parent-infant psychotherapy worked with was with parents and carers identifying as Black, Black British, Black Welsh, Caribbean or African at 24.5%. For Together Time, this number was 15.2%. The main population group for Together Time was those identifying as White (46.6%). Index of Multiple Deprivation data show that for both Together Time and parent-infant psychotherapy services, a **majority (60%) of service users live in the most deprived 30% of areas in England** and between 35-40% of service users in both services live in the most deprived 20% of areas in England. This means that PAIRS reaches the diverse population that lives in the LEAP area.

The multiple disadvantages faced by many families in the LEAP area can contribute to a poor parent-infant relationship. These disadvantages included poverty, poor housing, recent migration to the UK, mental health issues, social isolation, intimate personal violence, baby loss and current/previous trauma. It was common to have more than one of the above disadvantages represented within a parent/family, which resulted in being *'referred complex cases where there's various different strands and components and kind of simultaneous things going on, simultaneous needs happening for that family.'* (PAIRS team member).

Service referral

Babies, young children and parents were referred to PAIRS from several different services, with the most referrals coming from midwifery (22.1% of referrals) and health visiting services (17.3% of referrals). The PAIRS team reported having good working relationships with both services which facilitated referrals. Other referral sources included Better Start workers in Children's Centres (11.3%), likely due to the strong links that PAIRS has to the local Children's Centres, embedding themselves within their service. This again shows the interconnectedness of PAIRS activities to support local services and families.

Other referrer categories included self-referrals (6.7%), GPs (5.3%) and adult mental health (including perinatal mental health, Talking Therapies; 4.7%) and other LEAP services. This shows how PAIRS has benefitted from being part of LEAP, and **reached several key local early years services**, evidencing their influence on the local workforce. There were a few *'super referrers'* which leaves the service vulnerable if those staff leave. Consequently, it is important to keep marketing and explaining the service to practitioners and establish strong pathways for referral that rely less on individual practitioners.

Almost three quarters (73.6%) of referrals to parent-infant psychotherapy were during pregnancy. Most service users for parent-infant psychotherapy and Together Time were mothers.

Service engagement

The **number of families seen has increased** during the time the service has been running. For example, for parent-infant psychotherapy there has been a linear trend showing an increase in appointments yearly, see figure 1.

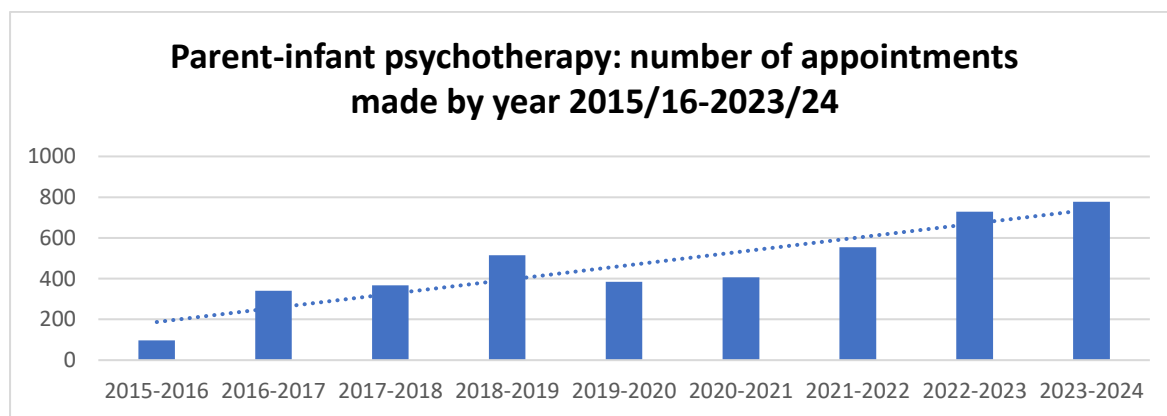


Figure 1. Number of parent-infant psychotherapy appointments made by year 2015/16 to 2023/24

For parent-infant psychotherapy, over 73% of appointments were attended; 14% were cancelled and 11% of appointments were not attended. The percentage of appointments not attended is favourable in comparison with [national CAMHS data](#) which shows non-attendance rates of 15-20% between 2019/20 and 2020/21.

Key mechanisms of impact on families

The PAIRS team recognised the importance of **working flexibly with families** in the parent-infant psychotherapy service. This included understanding individuals' context and needs and tailoring support to these, for example through being flexible and offering appointments face-to-face, online and via phone. This flexibility made it easier for parents who felt anxious about attending a mental health service. For parents who regularly stayed with different family members (such as mother or partner) in different parts of London, this flexibility was imperative and ensured they could keep in regular contact with their PAIRS practitioner.

Together Time is a therapeutic parent-baby group and its focus on both the parent and the baby was greatly appreciated by parents for whom it **provided a sense of community, support and learning about child development**. Parents also mentioned how discovering that other parents struggle too made them feel less alone and less like their struggles were failures.

It's been great to come and see the same people, the same familiar faces, and getting to know each other, erm, kind of a, a bit more deeply than you would in some of the other baby activities that we've been going to... (Parent, Together Time)

Close collaborative working between PAIRS and early years services was essential to the successful functioning of PAIRS including ensuring appropriate referrals, initial assessments, and in supporting families.

Impact on children and families

This section links to the evaluation questions; *To what extent and how does PAIRS improve parent-infant relationships and medium-term attachment outcomes for families? And What impact do PAIRS interventions have on long-term child health outcomes?*

In the interviews and focus group, parents consistently reported an **improved bond with their baby**. Other often mentioned benefits included **feeling listened to, gaining confidence as a parent, re-framing thoughts and developing coping strategies**. This confidence and strategies also positively influenced how parents related to other children and family members. One parent explained how after Together Time they

Think more about the feelings of my baby, so have that together time, that moment to observe her has been useful, just to be mindful of her feelings... (Parent, Together Time)

It was acknowledged by many of the PAIRS team and stakeholders that the **impact of PAIRS is likely to be long-term**, as psychotherapy is designed to have a long term impact due to helping parents have a different mindset. Benefits mentioned included a different more positive approach to parenting and better infant/child mental health reducing the need to access CAMHS later in life.

For Together Time, statistical analysis showed a significant increase in total warmth and significant decrease in total invasiveness, suggesting that parents perceived their baby as being warmer towards them and less intrusive and controlling at the end of the programme (assessed by MORS). Parents' reflective functioning scores increased suggesting that parents better understood their child as an independent being with their own thoughts and feelings. For LOAF, most Together Time families were functioning at level 1 (well-adapted, not in need of clinical attention) both before (54.11%) and after (53.57%) the programme. Although clinical outcome data for parent-infant psychotherapy were limited, meaning that an accurate picture of improvement over time cannot be provided, positive impact was clearly described by parents in interviews. For parent-infant psychotherapy, most families were in level 2 (strained to concerning relationships) as measured by LOAF.

Evaluation strengths and weaknesses

A considerable strength of this evaluation is the diversity in stakeholders (N=10) interviewed providing different perspectives to identify consistent and divergent experiences. Other service evaluations have interviewed parents only ([Burns, Brown & Rankin, 2021](#)) or a limited number of practitioners and stakeholders ([Woodrow et al, 2024](#)). It is also a strength to explore the impact on families using both qualitative and quantitative measures, to compare findings and identify positive experiences that the quantitative measures do not capture. A weakness is that we were unable to interview any pregnant women due to the short evaluation timescales. That said, we interviewed two women who had started parent-infant psychotherapy whilst pregnant and included those experiences within this report.

Recommendations

PAIRS has made a positive impact on the local early years workforce and families. A key finding is the interconnectedness of all of PAIRS activities, for example the reflective practice sessions enable the early years workforce to support the parent-infant relationship within their own workload but also refer to PAIRS when appropriate. Families in turn benefit from the collaborative working that PAIRS engages in, which also helps raise awareness of the support PAIRS has available to families. **This good practice must continue** whilst scaling up the service to be available to families Lambeth-wide. Whilst the service is well-embedded within LEAP and some other wider services, the continued efficacy of the service will depend on how well it becomes embedded in Lambeth.

In addition, we make the following recommendations:

PAIRS team

- To continue capacity building: **offer training Lambeth-wide for early years workforce staff** who are now able to refer to PAIRS. This should include its offer for families and referral process. Consider offering further regular and targeted consultation and reflective supervision sessions for different services.
- To engage service users: **review the marketing of PAIRS**, in particular Together Time. This could be done together with parents who have attended the group to help identify appropriate wording on advertising material.
- To improve the quantitative measurement of impact: **review PAIRS theory of change considering the evaluation findings and revisit the quantitative measures used to assess clinical outcomes**. Use the qualitative findings from this evaluation to guide what may be important to measure and consider who engages with the service (74% pregnant women) and how to implement measures within the therapeutic space. This includes revisiting how outcome measures are explained to parents, to make sure parents understand their use and importance.
- To aid further service evaluation: **use a consistent approach when capturing data on families and their engagement with PAIRS**. For example, 30% of ethnicity data is missing for PAIRS service users. Consider including quantitative measures to capture PAIRS capacity building activities. For example, routine quantitative measures regarding engagement and referral rates to PAIRS can be implemented to allow for continuous evaluation of reflective supervision and consultation.
- To stay sustainable and support scale up: **Start planning for an increase in referrals** after becoming a Lambeth-wide service and how to manage this. This includes relying less on *'super referrers'* and establishing strong pathways for referral between services.

SLaM and PAIRS team

- **Identify a clear and straightforward pathway** within CAMHS to make referral to PAIRS an easy process.

Service commissioners

- Work together with SLaM, other NHS and non-NHS services to **identify funding opportunities** to aid service sustainability. This could include using local and national networks and resources (such as [Parent-Infant Foundation self-audit tool](#)) to identify good practice and how other services fund their work.

Case studies

Below are three case studies showcasing PAIRS impact on the early years workforce and families they work with. Each case study is based on at least two interviews to maintain confidentiality. All names are pseudonyms.

Reflective practice

Susan attended regular reflective practice with one of the PAIRS Child and Adolescent Psychoanalytic Psychotherapists. This reflective practice was offered to her and her colleagues by PAIRS as their service worked with families in the LEAP area who had vulnerabilities that may influence the parent-infant relationship negatively. During the reflective practice group session, the discussions focused on families on Susan's case load, and particularly the parent-infant relationship, putting the needs of the baby in focus. Furthermore, the Child and Adolescent Psychoanalytic Psychotherapists provided another perspective on family situations and parent-infant interactions, which Susan found very helpful.

The reflective practice session provided opportunities to build Susan's expertise and capacity to support the parent-infant relationship within her own caseload. There was also time to discuss referral to PAIRS if appropriate and share information and updates about families both services were working with. This informal information sharing helped Susan understand the families she worked with better, helping her provide family-centred support.

Additional benefits from the reflective practice sessions included discussing referral to other services such as perinatal mental health, and how to work with families that face barriers to attend services. Susan also valued how the Child and Adolescent Psychoanalytic Psychotherapist provided support for her through always asking how she was doing and acknowledging that working with families living with vulnerabilities can be difficult and emotionally draining. Through this additional focus on her own wellbeing Susan felt listened to and it enabled her to reflect on her work and caseload. Overall, Susan's experience with the reflective practice sessions was very positive and an integral part of her work.

Parent-infant psychotherapy

Jocelyn's midwife noticed that she seemed distressed. Jocelyn admitted she was struggling with feeling low, so her midwife suggested a referral to PAIRS. With Jocelyn's agreement, PAIRS then contacted her and talked through what they could offer. She didn't feel comfortable with the idea of opening up in a group, so opted to take part in parent-infant psychotherapy. This was the first time she'd ever had psychotherapy and she was initially apprehensive.

She spoke to a PAIRS psychotherapist every couple of weeks, sometimes in person and sometimes by phone or Zoom for about four months. She described the sessions as feeling like a safe, non-judgmental space where she could open up about her worries. She was immediately reassured that she would not be seen as a bad parent for struggling, but that seeking and accepting help when it is needed was actually a sign of good parenting. She felt it made a huge difference having someone to talk to who validated her feelings. When she felt overwhelmed by negative thoughts, the therapist encouraged her to recognize what she was doing well and where things in her life were getting better, which she found extremely helpful. She felt the experience has made her more self-aware and better able to cope as she said she continues to use the strategies she learned in the therapy to reframe negative thoughts when they occur. She was confident that her relationship with her child will benefit from this.

Together Time Therapeutic Parent Baby Group

Maryam joined a Together Time group when her baby was four months old. She had attended an antenatal class while she was pregnant and a member of the PAIRS team had come to one of the sessions to tell the class about PAIRS and Together Time. She liked the sound of it and lived in the right area to be eligible to join, so she signed up. She attended all but one of the sessions which she missed because she was unwell.

She described the Together Time group sessions as both a place for reflection and discussion with other parents, and as a place where she was encouraged to bond with her baby by taking time to block everything else out and just be with and observe her baby. She particularly valued that it was the same group of parents at each session and that, even though they were mostly talking about parenthood, she felt like she was seen as a person in the group and not just as the parent of a baby. She found it extremely reassuring to hear from other parents that they were experiencing the same challenges, and it made her feel normal. It helped her relax and taught her that it's ok to put chores and responsibilities on hold to take moments to connect with her baby by just looking, observing and noticing.

Maryam described the staff running the sessions as very friendly and helpful. They created a relaxed environment and provided a structure to the sessions which Maryam liked.

