Helping to reduce parental anxiety in the perinatal period

Abstract

During the early months and years of a baby’s life, it is not unusual for parents to experience anxiety to some extent. Anxiety may inhibit parents’ ability to fully bond with their baby and respond appropriately to his or her needs. This article will explore the link between reducing parental anxiety and increasing sensitive, empathetic care giving. It will look at methods such as talking therapies, video interaction guidance and baby massage, which can help parents increase their sensitive responsiveness towards their baby.

Key words

- Parental anxiety
- Care giving
- Empathy
- Parent–infant psychotherapy
- Video interaction guidance
- Baby massage
- Sensitive responsiveness
- Mirroring
- Oxytocin
- Perinatal

Anxiety is defined as a state of tension and heightened alertness. It is neither necessarily good nor bad, but is a signal that informs us to pay attention and respond to potential danger, which could be either internal or external (Fromm-Reichman, 1955). The ‘fight-or-flight response’, in which adrenaline races through the body, is an old reflex (from an evolutionary perspective); blood is pumped to the arms, legs, lungs, heart and brain, in order either to run away or fight an enemy.

When anxiety becomes chronic it is usually referred to as stress, which will affect the internal chemical environment as well as the state of mind. This process applies to everyone and can affect all types of people, from babies right up to adults including professionals, in any given situation (Uvnas-Moberg, 2003). This article will explore how anxiety can affect new parents, what impact it can have on their relationship with the baby, and how health visitors and other professionals can help parents to reduce their anxiety and increase their empathetic care giving and sensitive responsiveness to the baby’s needs.

Anxiety in new parents

New parents can have many reasons to feel anxious, as they are faced with a new situation. This is particularly true of first-time parents, but even for parents who are caring for their second or third child: the baby is always new, and his or her signals need to be learned to be understood.

The home environment may be not conducive for a new baby, perhaps because parents have to share their accommodation, or live in a home with thin walls and are afraid that the baby might disturb the neighbours, in-laws or other children. They may have financial worries or concerns about their current relationships. Many new parents, especially mothers, feel anxious about being seen and judged as not good enough at caring for their child; this can also increase their anxiety. In addition, many parents carry emotional baggage—situations and experiences from the past which, if not reflected on, processed and understood, can interfere in their ability to hear or see their baby in his or her own right. Parents experiencing these kinds of feelings may project their unresolved problems onto the baby (Fraiburg et al, 1975).

What are the effects of anxiety on the parent–baby relationship?

In order to respond to their baby’s needs, parents must be able to pick up on the signals, or cues, that the baby gives. If the baby is feeling distressed, it is important that the parent can empathise and express sympathy in order to provide reassurance and regulation. Parents who are feeling anxious are likely to be tense and preoccupied, and will often find it difficult to read the baby’s cues correctly, therefore they may not be able to respond appropriately to their own baby. This is frustrating for the baby, and can exacerbate the baby’s own stress; this leads to further frustration for the parent, making it more difficult to offer an appropriate response and thus creating a negative feedback loop (Figure 1).

The potential result of this perpetual negative
feedback is that parents may dismiss their babies’ cries, thinking it is just the baby ‘being difficult’ rather than expressing a need, because they cannot understand the cues and help the baby. In this situation, the parents will find it more difficult to empathise.

When parents empathise and respond to their baby’s needs with sensitivity, the baby will learn that their expressions will elicit an appropriate response: if they are distressed someone will comfort them; if they are cold, they will be warmed; if they are hungry, they will be fed; if they are tired, they will be helped to sleep; if they are bored, they will be stimulated. These experiences, which are repeated many times in the first months and years of a baby’s life, help babies to grow the parts of the brain that are later responsible for their capacity to socialise and to be sympathetic and empathetic towards others. Babies who miss out on these experiences or do not have a consistent responsive and sensitive environment can develop primitive defences, which in extreme cases can lead to them cutting off emotionally, and physically not being able to thrive and grow (Barradon et al, 2005).

It is, therefore, crucial that parents establish a positive feedback loop with the baby. In order to do this, they must first be helped to manage their anxiety.

How can health visitors help parents to be less anxious?

In order to prevent a negative feedback loop from occurring, a twofold approach is required, addressing both the roots of the parental anxiety and the bonding between parent and baby. The most important way to resolve problems with parental anxiety is to help parents to calm down, relax and open themselves to their babies’ efforts to communicate with them. Uvnäs-Moberg has described the calm-and-connect system (as a way to counteract the fight-or-flight response), which is linked to the production of oxytocin (Box 1). Research has shown that animals that are given oxytocin injections show less anxiety and have reduced muscular tension, more curiosity and an increased ability to learn (Uvnäs-Moberg, 2003).

Health visitors can help to make parents feel

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**Figure 1. Negative feedback loop—the parent’s inappropriate response leads to an intensification of the baby’s crying, creating a vicious circle**
more at ease by being aware of their tension, empathising with them and acknowledging that parenting is challenging work. A nonjudgemental professional who offers guidance can help parents become more interested in and responsive to their baby, and therefore enable them to feel more competent in their role as parents—thus reducing some level of anxiety.

There is no one ‘correct’ way to help parents combat feelings of anxiety. Rather than be prescriptive, it is important to look for various ways to help and avoid preconceived ideas, focusing instead on what works for each particular parent and baby.

Environment
If environmental factors are having a negative impact on the parent–baby relationship, this is what will need to be addressed first. Practical steps should be taken to create an environment where the parent and baby can be undisturbed and get to know each other. Parents may need help to recognise the importance of establishing a private, protective space for themselves and their baby, which only allows a few trusted people in to support them; if the parents feel watched and criticised, it will be detrimental to the establishment of a strong bond with the baby. In addition, for families living in overcrowded conditions, it is often hard for the mother to relax and get to know her baby’s rhythms.

Talking about concerns
For some anxious parents, simply talking about their concerns can help. This is the case whether the root cause of the anxiety is practical or emotional. Sometimes a parent may need to work through a recent trauma, such as a disappointing birth experience, or even earlier events that may come to the surface during a time of high stress (such as the birth of a baby).

Emotional support for the parent can be helpful, whether it comes from family, friends or professionals. The health visitor is in a position to offer reassurance that this is indeed a worrying time, and babies do raise lots of concerns and questions. If concerns are deep-seated and the parent is keen to find out the reasons for their worries, parent–infant psychotherapy may be appropriate (Gerhardt, 2004; Baradon et al, 2005). Health visitors can signpost parents to get appropriate help and support.

Support groups
Depending on resources in the local area, there will be various support groups available for new parents, from breastfeeding groups to baby signing and singing groups. Regardless of the specific content, these groups can provide a useful way of engaging new parents and helping them find positive ways of interacting with their baby (Chen et al, 2000).

Video interaction guidance
Video interaction guidance is a method that involves filming parents with their baby, then showing them selected footage of successful interactions and allowing them to discuss it with a professional (the guider), who will encourage them to reflect on what they see (National Institute of Health and Care Excellence (NICE), 2013).

By showing parents the best moments of their interactions, the guider can help them to reduce their anxiety and increase their confidence. Seeing themselves at moments of attunement with their baby, parents are encouraged to notice their strengths and reflect on their concerns. The relationship the parents develop with the guider and the relationship to the best version of themselves is a combination, which furthers their ability to develop self-acceptance and calm. It is a form of benign mirroring, which is what happens between a mother and child under optimal conditions, when the mother is in love with her child, and responds with affection and concern to the baby’s communication of feeling and physical states of being. A mother who is responded to with genuine empathy and concern, by a guider who can see her strengths, will be helped to build a positive image of herself as a parent that she will be able to replicate in her future interactions with the baby. Being seen to be competent will help her to become more competent, and increase her pleasure in interacting with her baby. This is

Box 1. The calm and connect system
Swedish scientist Kerstin Uvnäs-Moberg identified the connection between oxytocin and love, and called the oxytocin response the ‘calm and connect system’ because of its dual action on the body and mind.

Uvnäs-Moberg describes how oxytocin calms the body while it helps us to connect with other people. The hypothalamus releases oxytocin directly into the parts of the brain that handle positive social interaction. It also sends some to the pituitary gland for release into the bloodstream, where it affects the internal organs. Nerve cells that release oxytocin tend to create a positive feedback loop. When we get a positive signal from another person, such as a smile, the hypothalamus releases oxytocin into the brain. This oxytocin stimulates other cells in the brain to release still more oxytocin. Oxytocin calms down the activity of the amygdala, reducing fear and anxiety, increases nurturing behaviour and curiosity and helps us to respond to the other person (Uvnäs-Moberg, 2003).
a social, emotional and physical experience for both the parent and the baby.

Babies learn about themselves and the world from the expressions on their parents’ faces. Expressions from parents that are happy, responsive, blank, concerned or dismissive will have differing impacts on the baby’s physical, emotional and social development. A parent’s doting look will release chemicals in the baby’s brain that help to grow the parts of the brain that research has shown to be linked to the development of empathy and socialisation (Fonagy, 2009).

Video interaction guidance allows parents to focus, together with the guider, on the good moments of their interactions with the baby; this is likely to help anxious parents by increasing their confidence. The process helps them to become more attuned and benign towards the baby. Creating a space where parents can enjoy their babies and feel good about them increases the potential for nurturing, healing and growth (Kennedy, 2011).

**Baby massage**

Baby massage is a hands-on, practical way for parents to engage with their babies. Massage is relaxing for both the giver and the receiver, and is therefore appropriate to reduce tension and anxiety in the parent while also allowing them to bond with the child (NICE, 2013).

Baby massage can help the bonding process and create a positive feedback loop (Figure 2), when parents can observe their babies’ desire to communicate and their ability to influence the interaction by initiating it, or by bringing it to and end (Underdown, 2012).
Inappropriate responses to a baby’s expression may result in a negative feedback loop, with both parent and baby growing increasingly frustrated and unable to communicate effectively.

Health visitors can help to reduce parental anxiety through a variety of methods, including talking therapies and directing parents to relevant support groups.

Video interaction guidance is a highly effective method of helping parents to understand and reflect on their interactions with their baby.

Baby massage can help to relieve tension and anxiety in both parties, and improves parent–infant bonding.

Research has shown that massaged babies are more likely to gain weight appropriately, and are more alert during the massage and easier to soothe afterwards (Field, 2006). It is also worth noting that massage can improve a baby’s sleep patterns, which may in turn lead to a reduction in parental anxiety as the parents themselves are likely to sleep better.

Ideally, baby massage is learned in a group; a supportive environment can reduce the isolation that many new parents experience. This creates a sense of belonging to a community and allows parents to share the experience. Baby massage can also be taught 1:2 (one teacher to one parent and one baby); a benefit of this more focused teaching is that the teacher will be able to relate specifically to the parent’s and the baby’s needs.

Conclusion
There are various reasons why new parents may feel anxious. Regardless of whether the baby is their first, they are dealing with something new and they want to do the best possible job as parents. Some parental anxiety may be caused by problems that seem to be located in the baby, such as difficulty feeding or sleeping; in other cases, it may be that the parent has not had time to reflect on and process a past experience that is making them feel anxious.

Whatever the cause of parental anxiety, it can have a negative effect on the parent’s ability to bond with and respond to their baby’s needs. The parent’s emotional responses can have a direct impact on the baby’s development, so ensuring a strong parent–infant connection is crucial.

There are numerous ways in which health visitors can support new parents—there is no one-size-fits-all solution as it depends on what suits the parent–infant dyad. Some parents may benefit from talking things through—either with the health visitor or another professional, or with family or friends—and some may benefit from joining local parenting groups. It is important to ensure that the parental anxiety is recognised and addressed to avoid having a negative impact on baby’s development and health. Methods of helping parents to bond with their baby include video interaction guidance and teaching baby massage. The crucial aspect of support is assisting parents to reduce their anxiety, as this will free them to relate to and fully nourish their baby.