



## **Local Evaluation Report**

# **Baby Massage**

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## Contents

**Exec Summary** Page 2

### Introduction

BM Page 3  
Keystone BM courses Page 4

**Methodology** Page 5

### Results

Observation Page 5  
Questionnaires Page 5  
Interviews Page 7  
Attendees – analysis Page 8  
Cost Page 8

### Conclusions

General Page 9  
Targets Page 9  
Cost benefit Page 10

**Recommendations** Page 10

### Tables

Table 1 - Targets Identified by Programme Manager for Baby Massage Page 4  
Table 2 - Targets Identified by Baby Massage Tutor Page 7  
Table 3 – Evaluators view of the targets currently met Page 9  
Table 4 - Indirect impact on targets and potential to meet additional targets Page 10

### Appendices

Appendix A – References for information on impact of baby massage  
Appendix B – Keystone’s targets  
Appendix C – Evaluation Questionnaires and schedules

### Notes

- Throughout this report “Keystone” has been used as a shortening for Keystone Sure Start Children’s Centre
- The term “mother” is used to refer to the carer of the baby attending the course and potentially covers other relationships (though in fact, all those attending to date have been mothers).

### Acknowledgements

Many thanks to Kay Beuzeval (Course leader) for her input and support with this evaluation and also to all those attending the November/December courses.

Thanks to Sam Magne & Angela McTiernan of Red Door Associates for advice on editing of the report.

## Exec Summary

This report provides an evaluation of the baby massage courses provided by Keystone, focused mainly on courses delivered during November/December 2003. Courses consist of five weeks of 2 hour sessions and are run by Kay Beuzeval a local massage tutor specialising in baby massage. Courses are run in local community centres/accessible venues and are attended by an average of 8 carers per course with their babies. Courses are run in an informal and practical way so that all attendees are able to practice the different massage techniques and movements. As well as baby massage, the courses teach about more general parenting skills and child development.

A number of research tools were used in evaluating the massage groups including: participant observation by the researcher; evaluation questionnaires to attendees (completed by seven carers); semi-structured interview with course leader; and desk research on benefits of baby massage and analysis of monitoring data. This evaluation did not look at the long term impact of baby massage for the baby (as this is already well documented) but focused on the benefits for the mothers attending courses and the impacts/benefits of the courses in terms of Keystone's targets.

The results show that the courses: are enjoyed by participants; are meeting their aims in teaching baby massage skills; are low cost; are providing wider parenting information/skills; and provide a good way for new mothers to network and get access to other support and groups. However, those who could perhaps gain most from the courses are not attending (eg those with special needs, bonding issues).

The following are the Keystone targets that the Baby Massage courses help to address:

- Parenting support & info available for parents
- Raised levels of confidence & self esteem & reduced stress experienced in relationships between children and parents.
- Information & guidance provided for mothers on breast feeding, nutrition, hygiene and safety.
- Promote up-take of learning opportunities for adults
- Cross referral between services, increasing access to support
- Creation of self-organised groups & support services

Recommendations based on the results, include the following:

- Continue to run the courses on a regular basis – and investigate ways of mainstreaming the courses
- Targeting & widening attendees – eg trying groups for teenage mothers, babies with special needs, and fathers. This would increase the targets the courses help to meet.
- Consider piloting one-to-one massage tutoring for families with particular needs
- Consider widening the scope of the courses to include more of the general parenting information – or link people directly into follow on courses on other practical techniques or parenting issues etc (eg learning to play courses).
- Formalise the links between the baby massage courses and the local parent & toddler groups (eg Babalicious) so that it is easier for people to move on to these support/social mechanisms.

Congratulations should go to the course leader for the positive impact these courses are making for many families.

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## Introduction

This report provides an evaluation of the baby massage courses provided by Keystone, focused on courses delivered during November/December 2003. The Evaluation has been undertaken by Sarah Taragon of Red Door Associates (Keystone's Local Evaluators).

### Background - Baby Massage

There is much research that has been done internationally to document the impact of baby massage – both for the baby and their carer. The following benefits are widely documented (in this case sourced from “Benefits of Baby Massage”, Saasha Pleka - [www.beyondfertility.com](http://www.beyondfertility.com)):

- Premature infants who are regularly massaged are hospitalized an average of six fewer days than non-massaged babies (*USA today*, May 28 1996)
- All infants, whether premature, underweight or healthy/full-term, thrive and benefit from massage
- One study showed massaged infants gained 47% more weight than unmassaged infants given the same number of calories (Tiffany Fields, Uni of Miami School of Medicine, “Tactile Kinesthetic Stimulation Effects on Preterm Neonates” *Pediatrics Journal* 777, 1986)
- Massaged babies are more alert when awake, more easy to soothe and readily able to sleep
- Massage teaches a baby how to relax
- Massaged babies showed better performance on the Brazelton Scale with habituation, orientation, motor activity and regulation of behaviour
- Massage promotes emotional security, respect and a healthy body image
- Infant massage stimulates digestion, passing of gas, and relieves symptoms of colic
- Massage increases circulation and can assist with normal growing pains
- When parents massage their babies, they promote quality time, create better bonding and increase confidence in their own parenting skills. They enhance intimacy, understanding and the ability to nurture
- Nurturing touch is a natural way to relieve stress for both care giver and baby
- A parent who massages his or her infant becomes more aware of the baby's cues and learns to understand the baby's special and unique needs

As Carla Steptoe (a nurse and massage practitioner) states ([www.infantmassage.com](http://www.infantmassage.com)):

#### Benefits for infants

- Improves immune system
- Helps baby learn to relax
- Promotes sounder and longer sleep
- Promotes positive body image
- Promotes bonding and communication
- Helps to regulate digestive, respiratory, and circulatory systems
- Helps relieve discomfort from gas and colic, congestion & teething
- Decreases production of stress hormones

#### Benefits for parents

- Provides a special focused time that helps deepen bonding
- Helps parents to understand and respond appropriately to baby's nonverbal cues
- Promotes feelings of competence and confidence in caring for baby
- Improves parent-infant communication
- Increases parents ability to help child relax in times of stress

- Eases stress of parent who must be separated from child during the day
- It is fun and relaxing for parents to massage their children

### Other benefits

- Cross cultural studies show that babies who are held, massaged, carried, rocked and breast fed grow into adults that are less aggressive and violent and are more compassionate and cooperative.
- Recent research shows benefits for premature infants, children with asthma, diabetes and certain skin disorders.
- Mothers with post natal depression have shown improvement after starting infant massage
- Teenage mothers have shown improved bonding behaviour and interactions with their infants.

Please see Appendix A for further references to research related to baby massage impacts.

### Keystone's Baby Massage Courses

The programme runs regular baby massage courses. Courses consist of five weeks of 2 hour sessions and are run by Kay Beuzeval a local massage tutor specialising in baby massage. Courses are run in local community centres/accessible venues and are attended by an average of 8 carers per course with their babies. Courses are run in an informal and practical way so that all attendees are able to practice the different massage techniques and movements. As well as baby massage, the courses teach about more general parenting skills and the importance of eg building in time for one-to-one space with your baby, and the importance of bonding/respect for your baby. The courses pass on an ethos of parent/child time and teaches about communicating with young babies and reading their needs. The courses give parents confidence in listening to their child which builds self esteem and permission to behave positively to their child. The courses also build in the opportunity for parents to learn from each other and discuss practical and emotional issues involved with being new parents.

The Sure Start Programme Manager identified the courses as hitting the following targets for the programme: ie the reasons for running the courses (please see Appendix B for more details of the objectives and targets of Keystone's programme):

**Table 1 - Targets Identified by Programme Manager for Baby Massage**

<b>Improve Social &amp; Emotional Development</b>
1.4N Parenting support and information available to parents
1.2N Agree & implement (in culturally sensitive way) care for mothers with Post Natal Depression
2.9L Provide support to parents in times of crisis
Raised levels of confidence and self esteem amongst parents and reduced stress experienced in relationships between children & parents.
<b>Improve Health</b>
2.2N Information & guidance provided for mothers on breast feeding, nutrition, hygiene and safety
2.8L Increased health promotion work
<b>Improve Ability to learn</b>
4.6L Promote take-up of learning opportunities for adults
<b>Strengthening Families &amp; Communities</b>
4.3N, 4.7L Families empowered to steer Sure Start programme, services & planning through positions on parent & exec boards, parent forums and working groups
Cross referral between Sure Start services, increasing access to support

## Consultation Methodology

This evaluation has not looked at the long term impact of baby massage for the baby – as this is already documented we are taking this as a given (see evidence in the Introduction to this report). We have focused on the particular benefits for the mothers attending courses and the additional impacts/benefits of the courses, particularly in terms of the Keystone targets.

A number of research tools were used in evaluating the November/December massage groups:

- Participant observation by the researcher (and her baby) in one course
- Evaluation questionnaires to attendees at both courses (see Appendix C) – nb at one course, one of the questionnaires was completed on large wall posters
- Semi-structured interview with course leader
- Informal feedback from other Keystone staff
- Desk research on benefits of baby massage

In addition, analysis of monitoring data of attendees of courses between November 2003 and May 2004 was undertaken.

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## Results

### Observation

Participant observation in the course gave the evaluator the best possible understanding of the way the courses are run and the experience of attending the courses. A summary of her main observations can be found below, and her experience in attending the course underlies the rest of this report.

- All those attending enjoyed the experience – babies and carers
- Courses provide an excellent bonding opportunity for mothers/carers through joint learning in a safe space
- The tutor was excellent at making the space feel comfortable and relaxed and understood that the babies all had individual needs and may not be fully partaking in massage at all times
- Mothers were made to feel very comfortable to let their babies cry, sleep, feed etc
- The course was an excellent way to pass on more general parenting advice and information – particularly on respect for your baby, non-verbal communication, physical and quality time with your baby etc – and the tutor made good use of this opportunity
- The course was practical and non academic (therefore accessible to all) and gave a large amount of information enabling attendees to take the skills away with them
- Good back up sheets & written information was provided along with references for additional books/resources for those who wanted them
- The course enabled sharing of much information between mothers on issues they were facing, on equipment and on solutions to problems/queries
- The course provided a good introduction to Sure Start activities and was well linked to the local parent & toddler group (Babalicious) and the toy and book libraries (which visited the venue during a couple of the sessions)

### Questionnaires

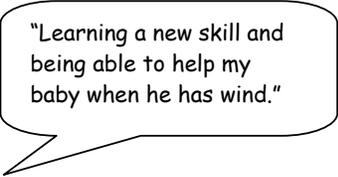
Feedback from the course participants is summarised below. For a copy of the questionnaires used and the post-it consultation process, please see Appendix C. Three people completed the two

"Gained information outside of massage from other mums and what they do with their babies."

questionnaires, and four gave comments on the post-it consultation (around 60% of those signed up for these two courses).

What people liked was:

- Gaining a new/improved skill (7)
- The atmosphere (5)
- Sharing experiences with other mothers (5)



"Learning a new skill and being able to help my baby when he has wind."

The only thing people said that they disliked about the course, was it starting so early in the day.

Three people gave ideas for future courses, and one stated that it didn't need improving:

"perhaps watching a video – perhaps a couple of weeks longer"

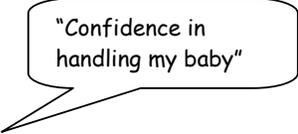
"me being there every week – but Kay very good at showing what we had missed"

"I don't think there was enough time allowed to feed, change, sleep & massage. Cushions for mums to sit on"

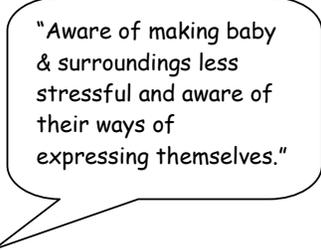
The majority of comments made about changes to their own behaviour, focused on spending more time with their baby (3), relaxing more with and around their baby (4) and being more aware of the things that stress their baby (2).



Learnt... "that babies pick up on your feelings and behaviour"



"Confidence in handling my baby"



"Aware of making baby & surroundings less stressful and aware of their ways of expressing themselves."

Seven comments were made relating to their baby's behaviour. Most simply stated that their baby enjoyed the massage. One person said that their baby slept better following a good massage and another that massage had calmed her baby down before her bedtime feed.

Seven mothers completed the second evaluation questionnaire (see Appendix C). Four attended the Stonehouse course and three the Keyham one. Two people had found out about the course from the midwife, two at antenatal classes, one through their health visitor, one from a friend and one from a leaflet in a shop. The reason most people attended the course was to learn baby massage, share an experience with their baby. All the respondents said the course had given them the information and skills they expected.

One person had used other Sure Start services – the others were all new to the programme's services. Two of the new users, have gone on to use other Keystone services. All the respondents said they might (5) or would definitely (2) use other Keystone services in future.

The following are suggestions for other support/activities respondents felt that Sure Start could provide:

- Family outings, holiday activities, parent groups, other courses on new skills
- Would like to attend Indian head massage course (for pampering)
- Baby signing
- More baby and parent groups

Attendees at all the courses fill out an evaluation form devised by the Tutor. Details from seventeen of these forms (from courses held April 2003 – March 2004) were available to the evaluator. These showed that those attending find the courses clear to understand and

comfortable to take and see some change in their relationship with their baby following the course. All the attendees said they would recommend the classes to others. The following are quotes taken from the forms:

I feel much happier with my baby now. Massage has given us something special to do together."

"I have really enjoyed the massage class. It's given me a chance to learn massage properly, bond more with my baby and meet other mums & babies."

"I thought baby massage was good as I thought I bonded with my baby a bit better - it also helped to relax and unwind."

### Interview with Tutor

Part of the interview with the course tutor (Kay Beuzaval) focused on the Keystone targets and part on what benefits she sees from the course and the informal feedback she had received (see Appendix C for a copy of the interview schedule).

The targets that the tutor felt that the baby massage courses helped to meet are shown below.

**Table 2 - Targets Identified by Baby Massage Tutor**

<b>Improve Social &amp; Emotional Development</b>	
1.4N	Parenting support and information available to parents
1.2N	Agree & implement (in culturally sensitive way) care for mothers with Post Natal Depression
1.5L	Reduce incidence of domestic abuse in families
local	Raised levels of confidence and self esteem amongst parents and reduced stress experienced in relationships between children & parents.
<b>Improve Health</b>	
2.2N	Information & guidance provided for mothers on breast feeding, nutrition, hygiene and safety
<b>Improve Ability to learn</b>	
3.5L	Provide services for children with special needs
<b>Strengthening Families &amp; Communities</b>	
4.3N, 4.7L	Families empowered to steer Sure Start programme, services & planning through positions on parent & exec boards, parent forums and working groups
4.6L	Promote up-take of learning opportunities for adults
Local	Creation of self-organised groups and support services
Local	Cross referral between Sure Start services, increasing access to support

Discussions with the tutor on the benefits of the course mainly focused on the additional benefits ie assuming the documented benefits of massage itself. Much of the discussion was focused on the group support that occurs within the courses – the courses are particularly effective in building strong links between attendees which are often developed after the courses finish. The best example of this was the setting up of Babalicious (a parent and toddler group) by attendees at one of the courses. However the tutor is aware of many informal networks that the course has enabled. Within the courses much support and learning takes place between attendees – the courses are run in such a way to enable this to occur.

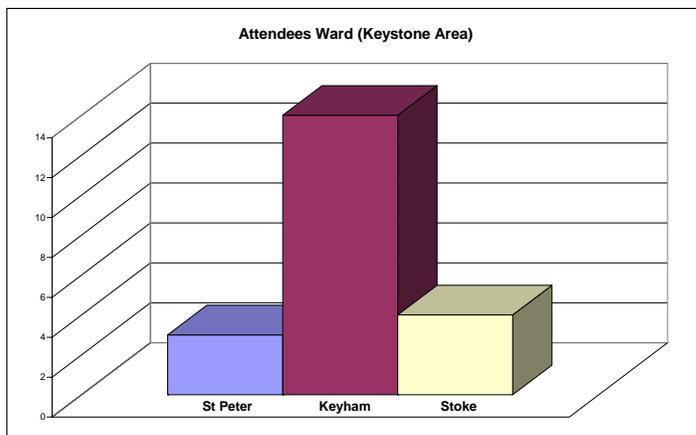
The tutor felt the link with Keystone was valuable – the programme provides the venues, materials (towels, mats, oil etc) and publicises the courses. The courses often provide a good introduction to

Sure Start which builds an involvement with the programme. The tutor works with the community development worker to try and involve attendees in other Sure Start services.

Because of the nature of the courses (ie practical), they are accessible to all and anyone attending can learn a lot from them. There are no barriers due to literacy, past experience or language. However, there may be some cultural issues for women from some ethnic backgrounds in massaging male children in public.

### Analysis of Attendees (November 03 – May 04)

During the six month period November 2003 – May 2004, a total of 41 mothers with their babies attended baby massage classes run by Keystone. 51% (ie 21) were from within Keystone's area. Three families (7%) attending had one parent whose ethnic background was other than white british (2 white – other, and one other mixed). One family attending spoke Spanish as their first language – all other families had English as their main language spoken in the home. Two of the attending mothers (5%) had disabilities/special needs.



Ten of those mothers attending, joined Keystone directly at the Baby Massage course – however, only 2 of these were actually with Sure Start's area. The courses are aimed at babies under 6 months, and the majority of babies (64% of those for which we have information) were 3 months or less when they started the courses.

### Cost

The overall costs of the classes are as follows: £250 for tutorial fees; £5 p/h venue rental (£75 per course). In addition, during the first 2 years of running courses, £600 has been spent on equipment (including massage mats, books, oils etc). The overall cost of each course is, therefore, £325 plus a proportion of equipment costs – in the case of the 6 month period for which we look at attendee statistics, this would work out to around £3.65 per person (£150 over 6 months to 41 attendees). The cost per person per course (based on an average of 8 mothers and their babies) is, therefore £44.28 for a five week course (including handouts and oil) ie £4.41 per hour. This would be generally comparable with the cost of an evening class if taken with a local college. It is considerably cheaper than the alternative of using a health visitor to show a mother how to massage - the average cost for hourly child contact being £34 (Source: NESS Cost Effectiveness Evaluation Methodological Report, Sep 2001).

Currently, attendees do not pay anything towards courses whether they are in the Keystone area or not, so all costs fall to Keystone.

## Conclusions

The results show that the courses are enjoyed by participants, are meeting their aims, are low cost and provide a good way for new mothers to network. The following bullet points summarise the conclusions made based on this Evaluation:

- The courses are providing a positive (often initial) introduction to Keystone to local mums
- The courses are enjoyed by attendees and provide a comfortable way to learn a new skill and more about babies and parenting
- The courses provide a good way to meet other mothers and to get plugged into informal support networks and other parent & toddler groups
- Attendees are learning more than just massage techniques – also about respecting their baby, learning their distress signals and how to listen to their needs, and how their own behaviours and stress impacts on their baby
- The courses have a low unit cost for something that gives new mothers support and techniques for coping now and in the longer term
- Massage is well documented as being beneficial to babies health and to the relationship between baby and carer
- 50% of attendees are not from within the Keystone area

Taking into consideration all the feedback, my own experience in attending the courses and the views of the course leader, the following tables show the keystone targets that the Baby Massage courses are currently helping to meet, and those which there is potential for them to meet or which are being met in an indirect way. Those marked with (a) were those targets originally identified by the Programme Manager and those marked (b) are those the course tutor identified.

**Table 3 – Evaluators view of the targets currently met**

Target Ref	Target	Comments
<b>Improving Social &amp; Emotional Development</b>		
1.4N (a) (b)	Parenting support & info available for parents	Through informal parenting information and sharing of experiences between attendees. There is scope to develop the impact the courses have on this target.
Local (a) (b)	Raised levels of confidence & self esteem & reduced stress experienced in relationships between children and parents.	The courses provide a means of mothers/carers gaining confidence in handling their baby and techniques to relax baby & mother. This target is probably the one the course has the most impact on.
<b>Improving Health</b>		
2.2N (a) (b)	Information & guidance provided for mothers on breast feeding, nutrition, hygiene and safety.	Through informal parenting information and sharing of experiences between attendees. There is scope to develop the impact the courses have on this target through extending the courses.
<b>Strengthening Families &amp; Communities</b>		
4.6L (a) (b)	Promote up-take of learning opportunities for adults	Attendees learn a new skill through attendance on the course (ie a learning opportunity in itself)
Local (a) (b)	Cross referral between services, increasing access to support	The courses are well linked to other Keystone services thru the venues and the community dev worker.
Local (b)	Creation of self-organised groups & support services	There is one good example where one of the courses led to the setting up of a parent & toddler group by those attending the massage course. The courses are excellent for bonding through the shared learning experience.

**Table 4 - Indirect impact on targets and potential to meet additional targets**

Target Ref	Target	Comments
<b>Improving Social &amp; Emotional Development</b>		
1.2N (a) (b)	Agree & implement care for mothers with PND	There is potential to target these courses at mothers with PND and this would need to be done to achieve any major impact on this target.
1.5L (b)	Reduce incidence of domestic abuse in families	Some potential through reducing stress for baby and potentially easing family situation through better sleep and a better relationship between the carer and baby. Tenuous.
<b>Improving Health</b>		
2.8L (a)	Increased health promotion work	Some informal health promotion is done through general parenting advice and discussions during sessions.
<b>Improving Ability to Learn</b>		
3.3N	Increased use of libraries	Due to the shared venue for one of the courses, attendees are also able to visit the book and toy libraries. This is a good way to introduce people to additional services.
3.5L (a) (b)	Provide services for children with special needs	There is potential to target these courses at special needs children – however, this has not been done to date – so no impact on this target can be seen.
<b>Strengthening Families &amp; Communities</b>		
4.3N & 4.7N (a) (b)	Families empowered to steer Sure Start Programme, services and planning, through positions on parent & Exec boards, parent forums and working groups.	The courses could be the first step in this – and have been for some of the mothers involved in setting up Babalicious. However, no direct link.
Local	Families enabled to take up benefits/find work	There is a potential link with this target in that the course is successful in building confidence and networking parents/carers to each other and other services. However, no direct impact.

We can see that the major outputs of these courses are on:

- improved networks
- information sharing
- confidence building
- reducing stress

At Target Level (see Appendix B) we would see evidence of likely impact from these courses on the following targets:

The Programme will have increased by ?% the amount of children under 4 years with normal levels of (i) personal, (ii) social and (iii) emotional development (1.1N)

Reduce by 10% the number of 0-3 yr olds admitted to A&E with i) gastroenteritis, ii) lower respiratory tract infection, iii) severe injury and iii) severe injury. (2.3N)

Increase by 6% the number of children with normal speech & language development at age 2 & increase by ?% the number of children with normal levels of communication, language & literacy by foundation stage (by 2005/6). (3.1N)

### Cost Benefit

At this stage we have not looked at the future savings for child support and care services in any detail, but we would expect to see some savings against the following areas, where mothers and their babies have attended baby massage courses:

- Improved bonding leading to less abuse and improved parent/child relationships leading to less need for health visitor/social services support
- Improved health of baby due to impact of physical touch on health (particularly in low weight and pre-term babies) and therefore less need for GP and hospital services
- Improved informal support structures for mothers from other mothers and therefore less need for health visitor and social services input
- Reduced stress for baby and mother (and techniques for coping with stress) leading to less need for support generally and healthier mothers & babies
- Referral and information during the course leading to better informed and supported parents (eg on nutrition and parenting) and early support where needed (reducing crisis costs at a later date)

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## Recommendations

- Targeting & widening attendees – particularly try groups for mothers with PND, teenage mothers, babies with special needs, and fathers. This would increase the targets the courses help to meet.
- Need to gain external feedback on impacts eg via feedback from health visitors (Red Door can advise on methods of doing this) and continue to use evaluation forms etc to monitor feedback on courses and to build up a long-term picture of feedback.
- Continue to run the courses on a regular basis – and investigate ways of mainstreaming the courses – for example, they could be organised by a health visitor, could have a minimal cost implication for attendees and could request people to bring their own oil and towels etc. Other ways of meeting the costs long-term should be investigated with EYDCP and health services, plus identifying free/low cost venues (eg church halls, existing childcare providers) could help with mainstreaming. Evidence of the impact of these courses and the benefits of baby massage should be highlighted when doing this, and links made to the priorities of these agencies and the longer term savings that are gained where carers and babies have a stronger bond and where babies are healthier. Perhaps courses could be run as part of existing parent & toddler groups or in nursery settings?
- Pilot one-to-one massage tutoring for families with particular needs (eg PND, history of violence, premature/low weight babies etc) – probably one or two visits and then move person into group course. Would need to evaluate the added benefits of this approach for hard-to-reach individuals.
- Continue to use a variety of promotional techniques – particularly making sure that health visitors and midwives are promoting the courses (and other Keystone activities).
- Consider widening the scope of the courses to include more of the general parenting information – or link people directly into follow on courses on other practical techniques or parenting issues etc (eg learning to play courses).
- Formalise the links between the baby massage courses and the local parent & toddler groups (eg Babalicious) so that it is easier for people to move on to these support/social mechanisms.

## Appendix A

References to research articles on the impact of baby massage. For further articles see [www.infantmassage.com](http://www.infantmassage.com):

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## Appendix B – Keystone’s Targets

As part of our work with Keystone, the local evaluators have broken down the programme’s targets into two levels – these are shown below. Therefore feedback on impact against the outputs should also have an impact on the targets and objectives. Evidence in this report is shown against the outputs level only.

The Sure Start **OBJECTIVES** (the overall goals that the programme is motivated by)

The Keystone **TARGETS** (the impact the local programme should have for beneficiaries)

**OUTPUTS & IMMEDIATE IMPACTS** (the purpose of the Keystone projects & activities)

All targets/outputs starting with a number followed by an N are national Sure Start targets – all those with an L are identified local targets. Those with no number, marked Local, are targets the evaluators have identified as inherent within the programme (from the business plan, annual programmes and liaison with staff).

### Objective 1

#### Improving Social & Emotional Development

##### Targets

1.1N	The Programme will have increased by ?% the amount of children under 4 years with normal levels of (i) personal, (ii) social and (iii) emotional development
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##### Outputs and immediate impacts

1.2N	Agree & implement care for mothers with PND
1.4N	Parenting support & info available for parents
1.5L	Reduce incidence of domestic abuse in families
2.9L	Provide support to parents in times of crisis
Local	Raised levels of confidence & self esteem & reduced stress etc.

### Objective 2

#### Improving Health

##### Targets

1.3N	100% of families of babies visited in first 2 months of child's life
2.1N	Reduce by 6% the number of mothers smoking during pregnancy
2.3N	Reduce by 10% the number of 0-3 yr olds admitted to A&E with i) gastroenteritis, ii) lower respiratory tract infection, iii) severe injury.
Local	Decrease in waiting list time for specialist services following GP referral.
Local	Healthier children incl: - birth weight avg increased - lower incidence of cot death
Local	Foetal alcohol syndrome decreased.
Local	Reduction of cases of the following, related to poor oral health by end of 2006: - Poor nutrition - Speech & language difficulties - Emotional health problems - Oral health problems

##### Outputs and immediate impacts

2.2N	information & guidance provided for mothers on breast feeding nutrition, hygiene & safety
2.4N	Ante-natal advice, support & information available to all pregnant women & their families.
2.5L	Increased flexibility & availability of local health checks
2.6L	Improved access to community dental services.
2.7L	Increased access to specialist services, especially drug & alcohol services
2.8L	Increased health promotion work
Local	Sure Start able to reach out to all families, enabling them to link in with Sure Start services

**Objective 3**  
**Improving Ability to Learn**  
**Targets**

3.1N	Increase by 6% the number of children with normal speech & language development at age 2 & increase by ?% the number of children with normal levels of communication, language & literacy by foundation stage (by 2005/6).
3.2N	All 0-3 year olds to have access to good quality play & learning opportunities, helping them progress to early learning goals at school.
Local	Increased referral to other specialist services in the city through Portage

**Outputs and immediate impacts**

3.3N	Increased use of libraries
3.4L	Increased provision of physical activity for parents & children.
3.5L	Provide services for children with special needs

**Objective 4**  
**Strengthening Families & Communities**  
**Targets**

4.1N	12% reduction in number of 0-3 yr olds living in families where no-one is working (by 2005/6).
4.2N	75% of families report personal evidence of increased quality of family support service.
Local	Reduce the proportion of benefits unclaimed
Local	Emergence from the Programme of a structure to enable parent influence across multi-agency services.
Local	Continuity of service ensured for children as they pass the age of 4 years.
Local	Parents able to address own needs on self-help basis
Local	New styles of service adopted by mainstream as a more inclusive way of working

**Outputs and immediate impacts**

4.3N & 4.7N	Families empowered to steer Sure Start Programme, services & planning, through positions on parent & Exec boards, parent forums & working groups
4.4N	Referral links established with Job Centre Plus, Local training providers & further ed institutions.
4.5N	Increased availability of accessible childcare through work with EYDCP
4.6L	Promote up-take of learning opportunities for adults
Local	Cross referral between services, increasing access to support
Local	Creation of self-organised groups & support services
Local	Families enabled to take up benefits/find work & reduce financial stress
Local	Overcome parents experience of fragmented/unco-ordinated delivery of service.
Local	Access to services improved for parents by: service linked childcare provision and/or adaptive work practice to meet local and community needs
Local	X adults supported with improving basic literacy & numeracy skills – improving both employability and parents ability to assist children's language development

## Appendix C – Research Tools

### Baby Massage Course - Evaluation Questionnaire

Sure Start Keystone are trying to find out more about who is using their services, what people think of their services, and what local families want them to provide. Please take a few minutes to complete the form below, which will help us in doing this.

1) Which baby massage course did you attend:

Venue: ..... Date (eg Nov/Dec 03): .....

2) How did you find out about the course? .....

3) Why did you attend the course? .....

4) Has the course given you the information & skills you expected (Please circle one option)?

Yes                      Some                      No

5) Had you used any other Sure Start services before starting this course (please circle)?

Yes                      No

If yes, which service(s)? .....

6) Have you used any other Sure Start Services, since starting the course (please circle)?

Yes                      No

If yes, which service(s)? .....

7) Do you plan to use other Sure Start services in future (please circle one option)?

Yes                      Maybe                      No

If yes, which service(s)? .....

8) What other support/activities would you like for you & your family (which Sure Start could provide)?

.....  
.....  
.....

9) Please give any other comments/ideas: .....

.....  
.....

**Baby Massage Course - Evaluation Questionnaire (b)**

Sure Start Keystone are trying to find out more about who is using their services, what people think of their services, and what local families want them to provide. Please take a few minutes to complete the form below, which will help us in doing this.

Which baby massage course did you attend:

Venue: ..... Date (eg Nov/Dec 03): .....

What did you like about the course?

What did you dislike about the course?

What ideas do you have, that would have improved the course for you?

What difference has the course made: To your behaviour	To your baby's behaviour
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Other comments

## **Semi-Structured Interview**

### **Kay – Baby Massage (Dec 03)**

#### **Introduction**

- Explain a bit more about the SS evaluation & my role and this particular evaluation.

#### **Impact of Classes**

- What benefits/changes she notices in the mothers & babies attending the classes.
- Get a couple of case studies that can be quoted.
- What does she think the longer term impacts of BM are?
- Who does she think would most benefit from the classes – are these women/families attending? Discuss potential for widening access – eg tasters, fathers courses etc.

#### **Sure Start**

- Does she have an understanding of what Sure Start is trying to achieve?
- What support does she get from Sure Start (eg management, resources, equipment)?
- How has she found working with/for Sure Start?
- Is there anything Sure Start could do that would improve the service she can offer?
- Go through Sure Start targets, and put into “yes”, “no” & “?”. Look quickly through “yes” & “no” for any queries. Look at “?” in more detail.
- From what she knows about Sure Start, what overall impact does she think they are having?
- Is there anything else she thinks Sure Start should offer for local families?