

Babies Cry, You Can Cope

Speak to someone if you need support such as your family, friends, Midwife, Health Visitor or GP.

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WHAT IS ABUSIVE HEAD TRAUMA?

- AKA Shaken Baby Syndrome
- Child Abuse
- Catastrophic injuries:
 - Brain injuries
 - Bleeding behind the eyes
 - Bony injuries
- Causal mechanism rarely confirmed
 - Acceleration/deceleration
 - Impact
- 1 in 14 cases fatal before hospital discharge
- Half of severely injured survivors die before aged 21.



Incidence

- 2011 20 24 per 100,000 in first year
- District General Hospital paediatrician can expect to see a case every 1 or 2 years
- 2.6% of American parents admitted to shaking a child under 2 years;
- 9% felt like shaking
- Cases seen by paediatricians only a proportion of cases of AHT
- It's the leading cause of death and longterm disability for babies who are abused



COST

- Survival with significant brain injury or death
- Emotional cost
- Inpatient hospitalisation (Paediatric Intensive Care)
- Long term medical services
 - Physiotherapy
 - Occupational Therapy
 - Speech and Language Therapy
- Educational needs
- Foster care
- Family and criminal proceedings
- Prison/probation
- Serious Case Review cost (circa £75,000)
- Loss of societal productivity and occupational revenue.



WHO SHAKES and why?

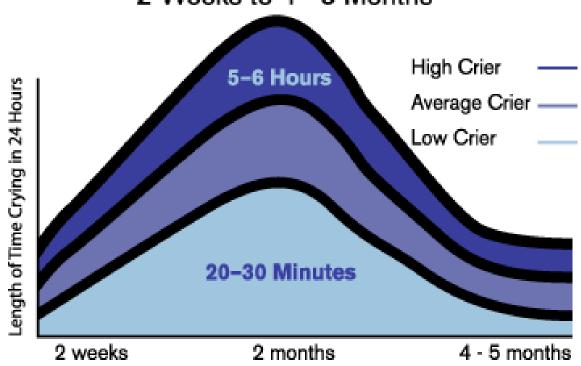
- 70% perpetrators are males fathers/male surrogates (Kesler et a 2008; Altman et al 2010)
- Can occur in every socio-economic group
- Coping with crying: Living on the edge
- Caregivers lose control and shake baby stops crying
- Some risk indicators include
 - financial hardship, low birth weight, prior referral to child protection services (strong risk factor) and young parents (Otterman and Palusci 2020).
- The link with Adverse Childhood Experiences
 (ACEs): with each additional ACE, study
 participants were more likely to accept potentially
 harmful parenting behaviour. (Clemens et al 2020)

Shaking and crying

- There is agreement that the typical trigger to a baby being shaken is the caregiver's inability to stop an infant crying (Dias et al 2005, Altman et al 2011; Barr 2014; Smith 2016).
- Demonstrable relationship between the normal peak of crying and babies subject to AHT. (Barr et al 2006)
- Increase in cases in the 1st month of life, a peak at 6 weeks during the 2nd month and a decrease during the 3rd to 5th months of life

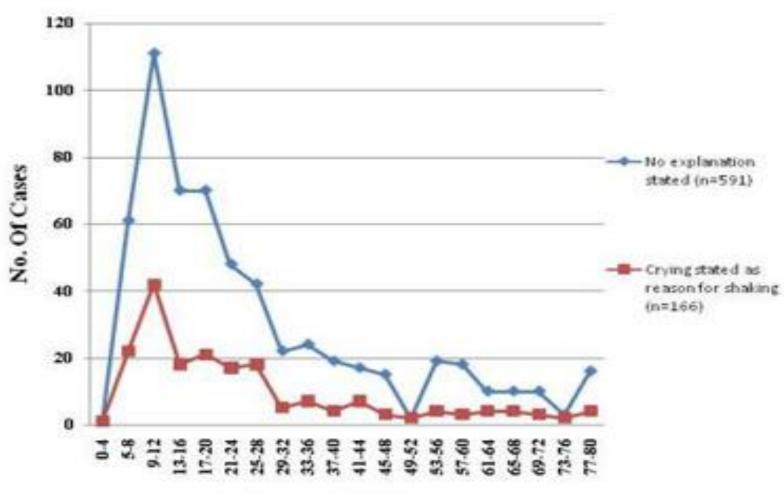
Normal Crying curve

Curves of Early Infant Crying 2 Weeks to 4 - 5 Months





Cases of AHT





Baby's Age in Weeks

 A co-ordinated, hospital based parent education programme targeting parents of all newborn infants can significantly reduce the incidence of abusive head trauma in children less that 36 months.

<u>Dias et al (2005) Preventing Abusive Head Trauma Infants and Young Children: a hospital based prevention program Pediatrics 115: 470 – 477</u>

• 16 infants who were born in the 8 year study period were treated at the children's hospital for shaking injuries sustained during their 1st year of life. Of those infants 14 were born during the 5 year control period and 2 during the 3 year post implementation period. The decrease from 2.8 injuries/year to 0.7 injuries/year represents a 75% reduction (P=03).

Altman et al (2010) Parent Education by Maternity Nurses and Prevention of AHT.



- Although the frequency of AHT cases decreased, it is not possible to be absolutely certain that the educational programme was the cause of the decrease. Uncertainty about the cause and effect relationship is an inherent limitation of before/after study design, but the absence of changes over time in 3 nearby states without similar prevention programmes lends support to a cause/effect interpretation
- Fathers and male surrogates are nearly 5 times as likely as mothers to shake an infant. From the parents surveyed only 40.4% of fathers watched the educational video. Finding better ways to reach male caretakers should be a priority

Altman et al (2010) Parent Education by Maternity Nurses and Prevention of AHT.



- The primary aim of this study was to determine whether there was any change in visits of 0 to 5 month old infants to the Medical Emergency Room (known as the Emergency Department in the UK). After program implementation, crying cases were reduced by 29.5% (p < .001). The most significant reductions were for crying visits in the first to third months of life.
- The authors concluded that the findings imply that improved parental knowledge of the characteristics of normal crying secondary to a public health program may reduce Medical Emergency Room use for crying complaints in the early months of life.

Barr R G, Rajabali F, Aragon M; Colbourne M., Brant R., Education About Crying in Normal Infants
Is Associated with a Reduction in Pediatric Emergency Room Visits for Crying Complaints J
Dev Behav Pediatr 36:252–257, 2015



 A New Haven AHT prevention programme that chose to teach parents how to recognise their feelings of frustration with their infants crying and to walk away from the baby found that those who received the programme were 79% less likely to have been diagnosed with AHT.

Bechtel et al (2020) Impact of the Take 5 Safety Plan for Crying on the Occurrence of Abusive Head Trauma in infants. Chlid Abuse Review vol 29: 282-290



Effective intervention and prevention

- AHT is not inevitable. Some of it can be prevented by taking a multisectoral, multifactorial public health approach and there is a compelling financial argument for investment in prevention programmes (Sethi et al 2013; Gray et al 2016; Smith 2016; Steinbeigle et al 2020).
- My WCMT report recommends a multi agency coordinated programme that touches on all the different levels of prevention.
- Each 'touch point' is brief & can combine 'safe sleep' whilst reinforcing the simple ICON message.





Babies Cry, You Can Cope!



nfant crying is normal and it will stop!

Babies start to cry more frequently from around 2 weeks of age.

The crying may get more frequent and last longer.

After about 8 weeks of age babies start to cry less each week.



Comfort methods can sometimes soothe the baby and the crying will stop.

Think about are they:

- hungry
- tired
- in need of a nappy change

Try simple calming techniques such as singing to the baby or going for a walk.



It's ke to walk away if you have checked the baby is safe and the crying is getting to you.

After a few minutes when you are feeling calm, go back and check on the baby.



Never, ever shake or hurt a baby.

It can cause lasting brain damage or death.

If you are worried that your baby is unwell contact your GP or call NHS 111.

Speak to someone if you need support such as your family, friends, Midwife, Health Visitor or GP.

ICON Touchpoints

Each area can deliver ICON through additional routes e.g. antenatally, via 0-19 teams. The touchpoints below represent the CORE ICON programme.

 In hospital/at home following delivery before the Mother and baby are discharged (this is the time when men are often present and the opportunity to engage with men at this point is crucial). The leaflet is provided and explained in detail using the ICON script as a guide if necessary.



ICON Touchpoints

- Within the first 10 days during Community Midwife visit (a light touch reminder)
- Between 10 and 14 days during Health Visitor contact (a light touch reminder and conversation about comforting techniques)
- Around 3 weeks via text/telephone/visit/clinic contact by Health Visiting service (a light touch reminder and conversation about a plan about how to cope)
- At the 6/8 week check with GP (a questionnaire included in RCGP national toolkit)



Social Media

- There is a growing engagement with men since the intensified campaign began in April 2020.
- https://iconcope.org/parentsadvice/
- Current focus on engaging specifically with men's groups.





NHS 111

- New care advice incorporating the ICON message was approved by the National Clinical Governance Group and included in infant pathways for disposition of 6 hours and longer.
- Also included in relevant adult mental health pathways where the interrogation of major life events now includes a new baby for male callers as well as female.

ICON: Premature Baby

- Special Considerations for premature babies being discharged from Neonatal Units
- Your baby may well behave differently once you are home and cry more from 2 weeks after the date they were due to be born.
- Premature babies are prone to crying more often and can prove difficult to soothe. This phase will improve over time.
- Following discharge some babies find it difficult to adjust to the quiet of home but this will get better
- You will soon learn how much crying is normal for your baby but if you think there is something wrong with your baby then you must seek medical help



Measuring impact -Hampshire

- Views of professionals
- 2018 10% of GPs routinely asked about coping with crying.
- 2019 95% of GPs routinely ask about coping with crying at 6 week check and 93% that ICON helps them do that.
- "There are posters everywhere and [parents] already have the leaflet by the time they reach the ward so easy to cover on postnatal ward"
- "It's second nature now if part of our discharge chat".
- "I have not had an bad responses, I find it ok".



- Views of parents/carers: 87% of families were aware of the ICON message and when asked 95% of parent/carers were able to confirm that they had received and remembered the messages.
- When asked 'Would you feel confident to share the advice on crying with other people who care for your baby?' 100% of the parents and carers responded with 'yes'.
- When asked 'After receiving the ICON information did you change your behaviour in relation to your babies crying?', the majority replied 'yes'.



- Impact: Within the timeframe of 1 January 2019 to 1 January 2020, there have been five cases of Abusive Head Trauma referred into the Hampshire Safeguarding Children Partnership's Learning and Enquiry Group and one Serious Case Review was commissioned.
- "In all five cases, the maternity care was not provided within Hampshire and in all cases the maternity care was provided in an area who were not (at the time) using the ICON Programme messages. ... the information would suggest that the maternity element of the ICON message is particularly important".



Parents and Professional (Manchester)

- Overall the pilot was successful from both parents and professionals perspectives.
 Parents understood and remembered the message and highlighted the importance for them of the conversation rather than the leaflet alone.
- 'I have used the mantra, 'babies cry, I can cope' myself when baby has cried. It has gone round my head and helped' (MUM)
- Professionals found the message flowed well alongside other health messages they were giving e.g. safe sleeping and that the programme fit easily into existing contacts and visits.
- '...very easy at new birth visit in particular but also antenatal visit as it flows well with other info given' (HV)
- '...easy fits nicely with bonding, attachment and handling of newborns' (HV)
- **16p /birth** = £1200 a year (2 leaflets).

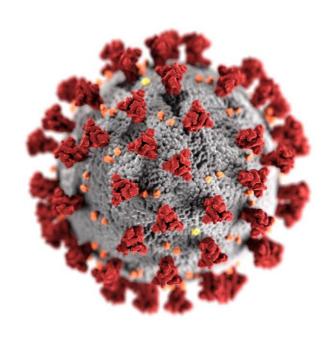


Sussex – one year on

- 74% of babies at the new birth visit families recorded as having received ICON info.
- Health Child Programme survey 93/5% of responses said they had received ICON message.
- Case study material: Young mum in foster care stuck her 'crying plan' on the wall. Dad suffering with stress and anxiety worried how he would cope, found info easy to follow and felt relieved at being able to talk about his fears.

Response to COVID-19

- Stressors known to increase risk
- Toxic stress in home, financial hardship, social isolation
- All likely to be worse with lockdown and after effects
- "ICON-lite" rolled out to maternity units by NHSE, March 2020





Uptake & delivery

- 87/134 (65%) units responded
- 75/87 (86%) implemented ICON
- Postnatal wards in 67%, community in 50%
- Leaflets in 67%, website in 40%
- Under 10 minutes to deliver in >85% of sites
- Mothers very/somewhat engaged in 90%
- 45% of men were somewhat/very engaged





Response of different areas

- Launches and media/social media coverage.
- BBC Look North (Yorkshire) x 2, BBC Points West, BBC Radio Leeds, BBC Radio Tees.
- Annual ICON day or week
- Spotlight on safeguarding webinars.
- Displays fire appliances, buses, refuse wagons....
- Use of banners, displays, videos in waiting areas
- Own posters, discharge info wallets.
- Stickers on notes/PHCR
- PCHR inserts





Infant Crying and How to Cope

Follow the ICON guidance for coping with crying

Information Leaflet

www.iconcope.org

Safe Sleep Advice

IC@N

Remember:

Never Ever

Hurt a Baby

Always follow



Infant crying is normal

Comforting Methods can help

O It's OK to walk away

Never ever shake a baby

Speak to someone if you need support such as your family, friends, midwife, GP or Health Visitor.

6 When should you worry about a baby's crying?

Medical professionals will always be prepared to see your baby if you have serious concerns. You should seek professional or medical help if you notice your baby has any of the following:

- · A fit (seizure or convulsion)
- Very high pitched cry (doesn't sound normal)
- · Breathing is a struggle or noisy or unusually fast · Skin is greyish, mottled, blue or unusually pale
- A rash that doesn't fade when you press a glass against it
- High temperature

5 Never Ever Shake or Hurt a Baby

Never ever shake or hurt a baby. It can cause lasting brain damage and death. Handling a baby roughly, shouting or getting angry with your baby will make things worse.

Sometimes parents/caregivers get so angry and frustrated with a baby's cry they lose control and act on impulse and shake the baby. Shaking or losing your temper with a baby is very dangerous and can cause:

- Blindness
- Learning Disabilities
- Seizures
- Physical Disabilities Death
- It is important to check that if you are leaving your baby in the care of

anyone else, they understand about how to cope with crying babies.

(LSCB) (October 2020) No 30 www.seftonlscb.org.uk

1 Introduction

This briefing is to provide professional support for ICON. ICON have recently launched a campaign to support parents/carers with ways of coping with crying babies.

This briefing contains clear messages that represents the ICON approach in managing crying babies.

This advice is not solely for health agencies. Similar to the Safe Sleep Campaign, ALL practitioners should take the opportunity, where they can, to be professionally curious about parental stresses and coping with a newborn baby.

It is important for parents

to understand

messages.....

these

Babies Cry

You Can

Cope!

4 It's OK to

walk away

If the baby's crying is

getting to you,

it's OK to walk away.

Don't get angry with your baby or

yourself. Instead, put your baby in

a safe place and walk away so that you can calm yourself down by doing

something that takes your mind off the

crying. After a few minutes, when you are

calm, go back and check on the baby.

Parents needs to find time for themselves to help

cope through what can be a really stressful time.

2 Infant **Crying is** Normal

Infant crying is normal

and it will stop! A baby's cry is designed to get attention and can be upsetting and frustrating. Babies start to cry more frequently from around 2 weeks of age. The crying may get more frequent and last longer hitting a peak at about 6-8 weeks.

> Every baby is different, but after about 8 weeks, babies start to cry less and less each week.

3 Comfort Methods

Comfort Methods can sometimes soothe the baby and the crying will stop. Babies can cry for different reasons like when they are hungry, wet/dirty or if they are unwell. Sometimes babies cry for no particular reason and a parent needs to learn how to cope with this and can try some simple calming techniques.

> These techniques may not always work but understand that not every baby is easy to calm and that doesn't mean you are doing anything wrong and this is a phase that will pass.

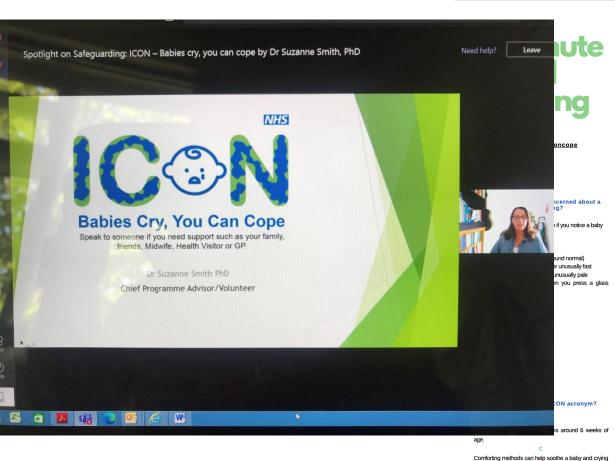




Sefton Local Safeguarding Children Board

Stay calm, this phase will pass. If you are worried that the crying won't stop, it's OK to check it out with a health professional (midwife, health visitor, GP, NHS 111).







ICON is a programme that provides information about infant crying and how to cope. It is being adopted by all partners in the South Yorkshire and Bassetlaw Integrated Care System. including Barnsley, Ultimately the ICON programme aims to reduce the incidence of Abusive Head Trauma. This briefing contains information about the programme and clear messages that represents the ICON approach in managing crying babies. This advice is not solely for health agencies. Similar to safe sleep advice, ALL practitioners should take the opportunity, where they can, to be professionally curious about parental stresses and coping with a newborn baby.







Abusive Head Trauma (AHT) causes catastrophic injuries that can lead to death, or significant long term health problems and learning disabilities. AHT takes place when caregivers lose control and shake the baby. Around 1 in 14 cases of AHT are fatal before hospital discharge and half of severely injured survivors die before aged 21. Approximately 200 children are killed or hurt annually in the UK and these figures are likely to underestimate the real numbers involved. Incidences increase in the 1st month of life, peak at 6 weeks and decrease during the 3rd to 5th months of life. 70% of perpertrators are male.



Information

The ICON programme provides key messages and resources to let parents and carers know that babies cry (sometimes a lot!), helping them to understand why they cry and helping them find ways of coping with crying. Resources include leaflets and video clips which are shared with parents and carers at specific evidence-based contacts. The ICON approach recommends parents/carers try and soothe their baby through comforting methods. ICON guidance suggests ways of calming the child, before putting them down in a safe environment and walking away for a few minutes if the parent is struggling.



The first phase of the ICON programme will be delivered from January 2021 through Barnsley Maternity Service and the 0-19 Public Health Nursing Services, to provide support within the first six to eight weeks of a baby's life when all babies start to cry more. The programme advises and provides professionals with resources including a leaflet and a "Coping with Crying plan", which they can complete with parents so they can plan in advance who to turn to for support if the crying becomes too much.





It's OK to walk away for a few minutes if crying is becoming too much, as long as the baby is safe.

Never ever shake a baby - it can lead to serious lifelong



Familiarise yourself with the ICON resources and attend training if available. Take the opportunity to raise awareness of ICON among colleagues. Talk through the key points in the ICON leaflet with parents and encourage them to share the information with any family and friends who may care for their child, such as aunts, uncles, grandparents etc. ICON always recommends contacting a health professional such as a health visitor, midwife or GP for support with their baby and always recommends that the leaflet is given with a conversation to accompany it.



injuries and death.



NHS Barnsley Clinical Commissioning









Believe in children Barnardo's







How to manage when a baby cries

Babies born prematurely



EasyRead version



How to manage when a baby cries



EasyRead version

BEBEKLER AĞLAR! Bebek ağlamak normaldir ve duracak

Bir bebeğin ağlaması üzücü olabilir ve sinir bozucu. Almak için tasarlanmıştır dikkat ve endişelenebilirsin yanlış olan bir şey var sizin bebek.

Bebeğiniz daha çok ağlamaya başlayabilir sıklıkla yaklaşık 2 haftalıkken.

Ağlama daha sık olabilir _____lent ve sonraki birkac gün daha uzun süre davanır haftalar, yaklaşık 6 ila 8 arasında zirveye ulaşıyor haftalar.

Her bebek farklıdır ama sonra r yaklaşık 8 hafta, bebekler daha az ağlamaya başlar ve her hafta daha az.



Barr RG. The normal cryino curve: what do we really know? Barr RG. Normal ağlama eğrisi: gerçekten ne biliyoruz? 41:356-362. Gelişimsel Tip ve Çocuk Nörolojisi 1990; 32 (4): 356-362.

Bebeğime yardım etmek için ne yapabilirim?

Konfor yöntemleri bazen bebeği rahatlatabilir ve ağlama duracak.

Bebekler ağlayabilirlermiş gibi nedenlerle are aç, yorgun, ıslak / kirli veya hasta iseler. əll.

Bu temel ihtiyaçları kontrol edin ve bazı basitleri deneyin sakinleştirici teknikler:

- Sakince konuşun, mırıldanın veya bebeğinize şarkı söyleyin
- · Tekrarlayan veya yatıştırıcı bir ses duymalarına izin verin
- Onları yakın tutun cilt cilde
- Bebeğinizle dışarıda yürüyüşe çıkın
- Onlara sıcak bir banyo yapın

Bu teknikler her zaman işe yaramayabilir. Olabilir bir kombinasyon veya birden fazla deneme yapmak bebeğinizi yatıştırın.

Eğer sende yanlış bir şey olduğunu düşünüyorsan bebek ya da ağlama doktorunuzla konuşmayı kesmeyecek, Ebe veya Sağlık Ziyaretçisi. Eğer endişeleniyorsan bebeğiniz iyi değil NHS 111'i arayın.

Ağlama durmayacak , şimdi ne yapabilirim?

Her bebeği sakinleştirmek kolay değil ama bu değil yanlış bir şey yapıyorsun demek.

Bebeğinize veya kendinize kızmayın. rself.
Bunun yerine bebeğinizi güvenli bir yere koyun ve yürüyün uzakta, böylece kendini sakinleştirebilirsin aklını kaçıran bir şey yapmak the ağlıyor. Deneyin:

- Müzik dinlemek, bazı egzersizler yapmak veya seni sakinleştiren bir şey yapmak.
- Bir akraba veya arkadaşınızı arayın yapabilirler sakinleşmenize yardımcı olmak için sizin bebek.

Sakin olduğunuz birkaç dakika sonra geri dönün ve bebeği kontrol et.

Ebeveynlerin özellikle strese girmesi normaldir. y ağlayarak. Kendinize biraz zaman ayırın ve bebeğinizin yanı sıra ihtiyaçlarınıza da dikkat edin başa çıkmanıza yardımcı olur.

Ne yapmamalı ...

Bir bebeği kabaca tutmak onları daha çok yapacak üzgün. Bebeğinize bağırmak veya kızmak işleri daha da kötüleştirecek.

Bazen ebeveynler ve bakanlar looking after bebekler bir bebeğe çok kızar ve hayal kırıklığına uğrar ağla kontrolü kaybederler.

Dürtüyle hareket ederler ve bebeklerini sallarlar.

Bir bebekle sinirlenmek veya sinirlenmek çok zry tehlikelidir ve şunlara neden olabilir:

- Körlük
- Öğrenme engelleri s
- Nöbetler
- Fiziksel engeller ies
- · Ölüm

Hatırlamak: Asla asla salla veya bir bebeği incitmek



Unutma - Bu aşama sona erecek! İkon ol ICON bebeğiniz için ve ağlamasıyla başa çıkın.

Bebekler Ağlar, Başa Çıkabilirsiniz!

ben Bebeğin ağlaması normaldir ve duracaktır

C Konfor yöntemleri bazen neumes soome me bebeğim ve ağlama duracak

Kontrol ettiyseniz, çekip gitmeniz sorun değil bebek güvende ve ağlamak sana geliyor

Asla bir bebeği sallamayın ya da incitme













It is a good idea to have a think about how you can help yourself cope at this time before it happens. That's better than happens. That's better than waiting for it to happen. Think about the following things and you may want to write them

·Who can I go to for help with

crying? •What will I do if I need a few minutes to myself?

•What makes me feel better?

•What makes me feel calmer?



If you think your baby is unwell, contact your Health Visitor, NHS 111 or your GP.

Remember the ICON message:

Infant crying is normal and it will stop

Comfort methods will sometimes help and the crying will stop.

OK to walk away for a few minutes to calm down if the baby is safe and the crying is getting to you

Never ever shake or hurt a baby.





Comfort methods can sometimes soothe the baby and the crying will stop.

Babies can cry for different reasons like when they are hungry, wet/dirty or if they are unwell. Sometimes babies can cry for no particular reason. are unwell. Sometimes bables can cry for no particular reason.

Check these basic needs and try some simple calming techniques. Some of these will work and some may increase the crying. Something that work for staying calm, knowing your work today, it can be so frustrating but it really is just about that this is a phase that will pass.

When should you worry about a baby's crying?

Medical professionals will always be prepared to see your baby if you have serious concerns. You shad seek passesses on medical badis seek. serious concerns, you should seek professional or medical help if you notice your baby has any of the following:

A fit (seizure or convulsion);
 A cry that doesn't sound normal, like a very high-pitched cry;
 Breathing is a struggle or noisy or unusually fast;
 Skin is growish mother, blue are

unusuany pare;
• When you check their temperature it is

Skin is greyish, mottled, blue or

Babies UNDER 3 months: 38° C/ 100.4° F; Babies BETWEEN 3 – 6 months:

• A rash that does not fade when you

https://www.rcpch.ac.uk/sites/default/files /2020-04/covid19_advice_for_parents_wh en_child_unwell_or_injured_poster.pdf

More information can be found here:

unusually pale;











Not all of these will work all of the time but remember, that's OK.





Stay calm, this phase will pass.

ICON Ambassadors

Heva and Jacob



Mae and Ellis



Laura and Jason



Joanne and Charlie



ICON – future focus

- Families already known to Children's Social Care
- High School age group
- Specialist Tertiary NHS services
- Secondary preventative services



Parent/Families ICON Group

- Ellis's Story
- "I don't know if anyone else feels the same but seeing it there in a newsletter, somehow feels like there's some sort of relief/accomplishment! That make sense?"
- "ICON means so much to myself and my family.
 Knowing we can turn a negative life changing
 event into something positive, is what we
 wanted. I'm so proud to be apart of it."



Parents/Families ICON Group

- "I still have to pinch myself and check ICON is real sometimes. Im so proud to be part of it, it means so much to myself and my family.. we also have an extended family now thanks to ICON."
- "I miss Ellis every day, and hope ICON can prevent babies being shaken, and brothers being taken away as Ellis was."





Thank you!

