

Engagement with parents (phase 1) 2016:

Key findings and implications for the redesign

We gathered the perspectives of 330 parents from across Scotland between February and September 2016 through a survey and several focus groups.

We wanted to hear your views on the health information that NHS Health Scotland currently provides for parents, what health and parenting topics you need to know about, and what format you would like to receive this information: whether printed, digitally, or face-to-face.

The topics covered were:

- The best and hardest things about being a parent
- Ready Steady Baby!, Ready Steady Toddler!, Young Parent Survival Guide, and CHANGE resources for people with learning disabilities
- Importance of printed copies of resources
- Use of websites, including video clips
- Social media
- Ready Steady Baby! app and other apps
- New age banding of resources
- Demand for a pre-school resource
- Any other support requirements
- Interest in staying in touch with the project

We have summarised what you told us in 25 key points, which can be seen below. We have also listed 21 things that we will do as a result of these findings in the next stage of the [Redesigning Health Information for Parents \(ReHIP\)](#) project.

A full research report is available upon request.

A: The best and hardest things about being a parent

You said...	We will...
1. The best thing about being a parent is the wonder of child development – seeing your baby grow and hit milestones. You mentioned this almost three times more often than any other ‘best thing’ about being a parent.	<ul style="list-style-type: none">• Consider how the new products can promote the rewards of parenting, while realistically balancing these with the challenges.
2. Sleep deprivation is the hardest thing. It was by far the most common response to the	<ul style="list-style-type: none">• Consider whether the new content should include a greater

question of the hardest thing, followed by self-doubt/not knowing what to do, shortage of time, money concerns for young parents and constant worry.	focus on developmental milestones and sleep.
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B: Ready Steady Baby! print

You said...	We will...
<p>3. You're more likely to use the guide to dip in and out of than to read it cover to cover. Slightly more parents read it during a first pregnancy and far more during pregnancy than in the postnatal period. A third of you read it cover to cover during pregnancy.</p> <p>4. The best thing about the guide is it is written by experts. The second best thing is its 'week by week' format, so you can find out how your baby is developing and what changes you can expect in each week of pregnancy. Both fathers and mothers agreed on this, and the parents in the Black and Minority Ethnic (BME) and young parent focus groups also agreed.</p> <p>5. The things you dislike about the design and content of Ready Steady Baby! include the book being 'too thick' (mentioned by four parents) and the tone being too patronising (mentioned by eight parents).</p> <p>6. A number of parents thought that there should be a better alignment of Ready Steady Baby! with other publications and online resources, as the volume of material is overwhelming. There should also be better signposting by health professionals.</p>	<ul style="list-style-type: none"> • Consider whether the Ready Steady Baby! print resource should be for first-time parents and for the pregnancy period only. • Ensure that we draw upon appropriate expertise when we develop content for the new products. • Consider how we can keep the 'week by week' format, while reducing the overall size of the product. • Make sure the tone of the new products is empowering and not patronising. • Map the overlap between Ready Steady Baby!/Ready Steady Toddler! and other print resources, and explore the best way of streamlining these. • Consider how staff can be better equipped to signpost parents to appropriate sources of quality assured information.

C: Young Parent Survival Guide

You said...	We will...
<p>7. All the young parents we spoke to in focus groups had never seen the Young Parent Survival Guide before, but everyone felt it was a valuable resource.</p> <p>8. New content areas suggested by young parents included advice to keep yourself and your child safe, for instance when using digital media, dating sites and chat rooms. A significant majority of the young mums we spoke to preferred accessing information online and on phones. Everyone in the groups used social media, but no one had used the Ready Steady Baby! app before.</p>	<ul style="list-style-type: none"> • Consider whether information for young parents should be provided through digital channels, signposted to by trusted professionals. • Consider new content areas for the new products, for instance parent and child internet safety.

D: CHANGE resources

You said...	We will...
<p>9. The parents we spoke to who had learning disabilities had mixed experiences of using the CHANGE resources. Parents emphasised the importance of print, but there was also a preference for content to be made available on DVDs. However, the group was relatively small, so more feedback needs to be gathered.</p>	<ul style="list-style-type: none"> • Gather more feedback from parents with learning disabilities across Scotland to inform decisions on the CHANGE resources.

E: Ready Steady Toddler! print

You said...	We will...
<p>10. Only half of those who should have received a copy of Ready Steady Toddler! had received it.</p> <p>11. Due to time pressures, far fewer of you had read Ready Steady Toddler! cover to cover, compared to Ready Steady Baby!. If you had read it, you found it less helpful than Ready Steady Baby!.</p>	<ul style="list-style-type: none"> • Consider whether different media channels are needed for the toddler stage, compared to pregnancy, bearing in mind that parents have less time to digest information during the postnatal and toddler periods.

F: New age banding of resources

You said...	We will...
<p>12. Two thirds of you agreed that Ready Steady Baby! should be divided into two resources, one just for pregnancy.</p> <p>13. Of those parents who answered 'no' or 'not sure', most explained that this was because they like to read ahead or it would be an unnecessary expense to make the change.</p>	<ul style="list-style-type: none">• Consider the costs and benefits of changing the age bandings of the resources.

G: Importance of a printed copy of resources

You said...	We will...
<p>14. Almost two thirds (61%) of you thought it was important to have a print copy of the Ready Steady resources. Twelve percent said that having a print copy was not important.</p> <p>15. Most of the women we spoke to in the BME focus groups preferred having a printed copy of Ready Steady Baby! (as opposed to the app or the website) even when it was not printed in their first language.</p>	<ul style="list-style-type: none">• Bear in mind that withdrawing entirely from print production of Ready Steady Baby! would compromise many parents' expectations.

H: Use of websites including video clips

You said...	We will...
<p>16. Most of you use websites to access parenting information and almost half of you also watch video clips.</p> <p>17. You visit a wide range of websites for parenting information: 51 were mentioned in total. NHS Choices, BabyCentre and Netmums are the most popular.</p>	<ul style="list-style-type: none">• Think about how much we should invest in the Ready Steady Baby! and Toddler! websites in future, considering neither were mentioned by parents.

I: Social media

You said...	We will...
<p>18. Almost three quarters of you use social media to access parenting information and for social support.</p> <p>19. The three networks you use the most are Facebook, Netmums and BabyCentre.</p>	<ul style="list-style-type: none"> • Consider investing in social media as a way to share parenting information. • Bear in mind that not all parents find social media easy to use: some said that they find it a confusing and unreliable way to access parenting information.

J: Ready Steady Baby! app and other apps

You said...	We will...
<p>20. The Ready Steady Baby! app is not widely used. Only a fifth of you had used it, and those who had did not rate it particularly highly.</p> <p>21. Babycentre and The Wonder Weeks apps were the most used apps that you mentioned, in addition to or instead of the Ready Steady Baby! app.</p>	<ul style="list-style-type: none"> • Consider how much we should invest in the Ready Steady Baby! app: significant investment would be needed to make it competitive in the field.

K: Demand for a pre-school resource

You said...	We will...
<p>22. The topic you need most information and support in is children's transition to nursery and to school. This is followed by advice on developmental milestones and healthy eating/mealtimes.</p> <p>23. These topics were mentioned by both mothers and fathers, and by people at different stages of pregnancy and with different ages of children. They were also mentioned by the focus groups with people from BME communities.</p>	<ul style="list-style-type: none"> • Consider producing a resource that supports parenting children aged 2.5 – 5 years, with a particular focus on developmental milestones.

L: Any other support requirements

You said...	We will...
24. Some people suggested providing information through different channels, e.g. parent advice lines. You also suggested some other areas of content, e.g. more information on coping with child illness. It was also recommended that there should be more consistent advice between professionals.	<ul style="list-style-type: none">• Ensure these areas are fully explored if they stay within the scope of the ReHIP project.

M: Interest in staying in touch with the project

You said...	We will...
25. 113 parents indicated an interest in staying involved in the project going forward, offering their contact details.	<ul style="list-style-type: none">• Stay in touch with all parents who would like to continue their involvement in the project.

Next steps

The recommendations made by parents will be used to inform the next stage of the ReHIP project. Over the next year (2017–18), we will make decisions about the format, style and content of the new products, and start developing and testing them.

Parents will be right at the heart of this process to ensure that the final products meet your needs, and provide the right kind of support and information.

Please get in touch if you'd like to be part of the next phase of ReHIP. You can contact us at Healthscotland-Rehip@nhs.net. Or you can follow us on Twitter [@NHS_CYPF](https://twitter.com/NHS_CYPF).

Debbie Sigerson, Laura Brown, Rose Vickridge, March 2017