

Babies benefit from parenting classes even before birth

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A brief series of classes to help first-time parents better support each other through the often stressful transition to parenthood has a positive effect on birth outcomes as well, according to health researchers.

A decade ago Mark Feinberg, research professor at the Bennett Pierce Prevention Research Center for the Promotion of Human Development, Penn State, developed Family Foundations, a series of classes for expectant parents. In two research trials, the program was shown to improve the way parents support each other—to reduce parental stress, depression and anxiety; enhance parenting quality; and improve long-term child outcomes.

"We never thought that a class series meant to help the parents manage the stresses of parenthood would have an impact on [birth outcomes](#) as well," said Feinberg.

During the past 10 years, research has linked maternal prenatal stress, depression and anxiety to poor birth outcomes. Feinberg and his team reasoned that the Family Foundations program's effectiveness in improving maternal [mental health](#) might reduce poor birth outcomes for mothers at risk.

Indeed, the researchers found for mothers who had moderate to high levels of financial stress, depression or anxiety, participation in the program was linked to more optimal [birth weight](#) and/or shorter hospital stays after birth. Feinberg and colleagues report their findings in

Maternal and Child Health Journal.

In this study, 399 couples expecting their first child were randomly assigned to either the intervention—the Family Foundations prevention program—or a control group—literature mailed to the home. Those participating in the intervention were offered a total of nine classes, five during pregnancy and four after birth.

"We found that the program buffered the negative influence of financial stress and depression on infant birth weight," said Feinberg. "We also found consistent evidence across all three risk indicators measured—[financial stress](#), depression and anxiety—that duration of both mother and infant stay in the hospital was reduced for intervention couples compared to controls at higher levels of risk."

Couples participated in a survey at the start of the study that helped the researchers assess the mothers' levels of depression, anxiety and financial strain as measured by items assessing hardship due to lack of resources, recent need to reduce standard of living and difficulty living on current income.

The recent findings extend results from a prior study of Family Foundations, in which the program was found to improve birth outcomes for mothers with moderate to high levels of cortisol—a stress-related hormone—during pregnancy.

"By reducing low birth weight and length of hospital stay for both mother and infant, these preventive strategies may lead to early savings in health care costs," said Feinberg. "This demonstrates the power of helping parents cooperate and support each other across the transition to parenthood. Better support and lower levels of conflict between parents have now been shown to benefit parents' mental health, family relationships and children's well-being from birth through entry into

school."

In separate work, the researchers have estimated that \$1 spent implementing the Family Foundations program saves society at least \$3 to \$5 in costs due to mental health and behavioral problems. The program is being disseminated by the Department of Defense for military families, and the researchers are beginning to work with states and health systems to disseminate the program to civilian families as well.

Provided by Pennsylvania State University

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