

# Library rhyme times and maternal mental health: results of an action research project



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“What part of today's rhyme time made the most difference to how you feel?...”

The warm  
welcome

The Wheels on the  
Bus as my son  
joined in with me

It makes your mood  
better seeing your  
children interacting  
and singing

Meeting people  
who are the same  
as me – a new  
mum

Being able to sit  
down for 1/2 hour

Singing together,  
seeing everyone,  
mums and babies,  
and talking to  
people

Written comments left by parents at rhyme times

*“We looked at mothers differently – who was that mum we didn't recognise, or the one sat quietly?”*

Essex Libraries staff

# 1 Research summary

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*“We used to look at rhyme times from a child’s point of view, but it has showed us just how phenomenal it is for mums”*

Essex Libraries staff

- 1.1 This project aimed to test, through a year-long action-research project with Essex Libraries, whether library-based rhyme times could be a large-scale platform for supporting maternal mental health. Although estimates vary, current literature indicates that in the UK one in five women, during pregnancy or in the first year after the birth of their child, experience maternal or perinatal mental illness. It has also been shown that first-time mothers are less likely to seek help than ‘multi-mums’.
- 1.2 Rhyme time sessions, aimed at under 5s and their adult carers, take place in the majority of public libraries across the country. They typically comprise 30 minutes of singing, reading, and rhymes, often with music and toys. Content, style, and structure varies depending on the library service, and the individual rhyme time leader. Any accompanied child can turn up and join in subject only to space, and they are almost always free of charge for library members and non-members alike. In Essex, rhyme times are run across the county network of 74 public libraries, with larger libraries running several sessions each week. We estimate library-based rhyme times in Essex reach 4,000-5,000 individual mothers each year, many of whom attend throughout their children’s early years.
- 1.3 Over a 16-month period staff from Shared Intelligence and Essex Libraries undertook this collaborative action research project which focused on eight libraries across the county. Our main task was to design, implement, and test a series of evidence-based modifications to the existing rhyme time sessions. We were specifically interested in designing evidence-based modifications which might benefit the mental well-being of mothers. For example one of the modifications which was designed and implemented was ensuring every session included a rhyme or song with face-to-face or synchronised movement and sounds (like “row your boat” or “Round and round the garden”). This came about because library staff were interested in the evidence that synchronous maternal behaviour (synchronised movement, or vocalisation) is associated with increased maternal dopamine, and supports parent-child bonding. Another modification was to agree that at the start of every session, session leaders would always congratulate parents with the greeting “well done everyone for getting here!”. This aimed to apply the evidence that mothers experiencing poor mental wellbeing may struggle to get themselves and their children out of the house, and that receiving acknowledgement and recognition can help them.
- 1.4 Jointly with Essex, and an expert advisory group, we set three main research questions:
- 1 - Do the modified rhyme times have a positive effect on maternal mental health and if so, how and why? Our shorthand for this is “Impact.”
  - 2 - What is the reach of these activities and can it be increased? Our shorthand for this is “Reach.”
  - 3 - Can a more structured approach to rhyme times be implemented consistently in a public library context? Our shorthand for this is “Fidelity”

- 1.5 We used simple data-gathering methods to record data from 309 modified rhyme time sessions. Methods included 'mood charts' which parents marked with sticky dots on arrival and departure, sign-in sheets to capture demographic data, focus groups with parents, and participant interviews.
- 1.6 **Looking at 'impact'** we found attendance at the modified rhyme times had a positive effect on the mood and mental well-being of mothers both immediately and over a longer period of weeks and months. Mothers told us this was due to being in a group, the warm welcome, singing and reading, and seeing their child interact and develop. For many, simply getting to the rhyme time brought structure to the day, sense of achievement, and half an hour of respite. One of the starkest findings was the increase in the proportion of mothers saying they felt 'happy', or 'very happy' on leaving a session compared to when they arrived. Aggregated results from 207 rhyme times shows that 95% of mothers felt 'happy' or 'very happy' upon leaving a session compared to 77% when they arrived. Longer-term benefits were also reported including; increased personal confidence to join-in activities, sense of routine, and new friendships.
- 1.7 **Looking at 'reach'**, the sign-in data we gathered at the modified rhyme times showed 73% of adult attendees were mothers and of these 61% were first-time mothers. Besides large-scale reach, rhyme times have also been attended by people from across the socio-economic spectrum including those living in some of the most deprived postcodes in Essex (which includes some of the most deprived postcodes in the country). We also saw that compared to general library use in the areas surrounding the eight libraries involved, rhyme times attracted slightly more mothers from deprived postcodes. We also found that awareness of rhyme times spreads principally through friendship and social networks, followed by information from libraries themselves. Taken together the combination of large-scale platform, inclusive reach, and awareness transferring via human social networks, makes rhyme times a fascinating case in terms of public service innovation.
- 1.8 **Looking at 'fidelity'** this research shows rhyme times can be modified, can be delivered with a degree of consistency, and can be measured in terms of impact, reach and operation of the process. Our interviews with staff, their managers, and observations at sessions indicate that the consistent and disciplined approach of frontline staff in applying the modifications (and the support from their seniors) stemmed from their sense of ownership in creating the modifications – and the fact that tackling maternal mental health was a strong motivator. As we were completing the main research phase Essex took steps to make some of the modifications mainstream practice through revised training for staff in all 74 of their libraries. The modifications included in the new Essex training come from this research and are those which staff felt could be delivered easily, consistently, and which together coherently. This is perhaps of the most important immediate legacies of the project. Awareness training for staff about maternal mental health also contributed strongly to the results.
- 1.9 At the end of this report we make a series of recommendations; for public libraries to apply the learning from this research, including implementing the modifications to rhyme times, and for library services to align their activities with NHS-led initiatives aimed at perinatal mental health; for national sector support bodies to support the application of these findings and associated workforce skills and awareness development, align this work with that of other national agencies, and seek opportunities to build on this research; and for researchers and research funders to make use of these findings as a pilot and feasibility study towards further research on a larger scale, or using experimental methods.

## 2 Introduction

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- 2.1 This project was a collaboration between Essex Libraries and Shared Intelligence, with funding provided by Arts Council England. It was designed as an action research project to explore how library-based early years activities, specifically ones involving rhyme and story times, could help improve the mental health of mothers of pre-school aged children.
- 2.2 There were eight Essex libraries involved in the project. Six were chosen to be involved early-on in the project in February 2017; **Basildon, Brentwood, Chelmsford, Clacton, Colchester, and Witham**. Then **Great Baddow** and **Braintree** joined the project in September 2017. All eight libraries hold open-access rhyme time sessions either weekly or several times per week.
- 2.3 Prior to this research, the format of rhyme time sessions was typically 20-40 minutes long and comprised of songs and rhymes led by a member of staff, often using props such as toys, puppets and small percussion instruments. Content varied from branch to branch, as did the ways in which attendees were greeted, the instructions given to adults and children, and the physical layout of the sessions also differed. Some branches encouraged adults to stay and chat afterwards, with staff either joining in, or moving on to other tasks<sup>1</sup>.

### Maternal and perinatal mental health and illness

- 2.4 Although estimates vary, current literature tends to indicate that in the UK around one in five women, during pregnancy or in the first year after the birth of their baby, may experience some form of mental health problem. The study *Suffering in Silence*<sup>2</sup> conducted by the charity 4Children (2011) also found that first-time mothers tended to be less likely to seek help when they had mental health concerns, than 'multi-mums'.
- 2.5 Looking at weekly attendance at rhyme time activities in Essex Libraries, we estimate that each year 4,000-5,000 individual mothers could be using rhyme times. If we use the one in five figure for prevalence, that could mean each year rhyme times are reaching 1,000 women across Essex who are experiencing or have experienced a maternal and perinatal mental health problem.
- 2.6 Tackling mental health has received increasing public policy attention at a national and local level over the past decade, and maternal and perinatal mental health is an important part of this. Since 2015 the UK Government has re-iterated its support for investment in mental health services, most recently with new plans to support a million more mental health patients by 2020<sup>3</sup> – including a commitment to make specialist perinatal mental health services available in all parts of the country. This is backed by £23m of NHS funding through a Perinatal mental health community services development fund for 2018/19. At the local level Essex County Council, like many other councils, has

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<sup>1</sup> In February 2017 library development officers visited the six libraries taking part and observed and documented the rhyme time format being delivered in each branch

<sup>2</sup> 4Children (2011) *Suffering in Silence*. 70,000 reasons why help with postnatal depression needs to be better.

<sup>3</sup> In July 2017 the Government and the NHS published 'Stepping forward to 2020/21' an England-wide plan to significantly increase the scale of mental health provision

identified improving the mental health of its residents as a headline strategic goal<sup>4</sup>. Alongside this growing public policy response there have also been numerous activities to increase public awareness of mental health issues and encourage more people to recognise symptoms and seek help. This backdrop provides a conducive environment for activities such as this, seeking to find new ways to support people's mental health outside of clinical routes.

### An action research approach

2.7 This project was conceived as an action research project which would involve library service staff, library managers, and the public and would take place in the normal schedule of Essex Libraries' rhyme times sessions for under 5s. The intended beneficiaries were mothers with mild to moderate mental health conditions, although we envisaged that the project would benefit anyone who attended including fathers, other adult carers, and of course children themselves. The aim was to create benefit through a universal service and we were at pains to avoid creating any kind of specially targeted version of rhyme times.

2.8 Thankfully there are many adults who bring their children to rhyme times who have good mental health. One of the most important principles underpinning this project has been that whilst it has sought ways to increase the mental health benefits of rhyme times, it should benefit everyone. The design of this project has been inspired by other innovations encountered by the public every day on a large scale. A prime example of this are wide ticket-barriers at transit stations which are designed to help a specific group but at the same time help everyone; not only that but they do this without diminishing the usefulness of the service for anyone.

### Designing and implementing a series of 'modifications'

2.9 Central to the project has been the design and implementation of evidence-based modifications to libraries' existing rhyme time formats. The ideas for each modification came from an evidence review and were intended to achieve specific positive impacts. Most of the modifications were designed in a single workshop attended by library staff from the six original libraries, plus staff from Shared intelligence, and members of the expert group. In some cases, outline ideas from the workshop were worked up in more detail afterwards. The modifications are typically small changes to the rhyme time routine, or amount to providing additional information during the session. A full list of the modifications and underpinning evidence is in section 7 of this report.

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<sup>4</sup> The second of Essex CC's seven priorities is *"Reducing the gap in life expectancy, tackling avoidable physical and mental illnesses and promoting independence wherever possible."* From 'The Future of Essex', Essex County Council (2017)



## 3 Method and research process

- 3.1 This project was conceived as an action research project. Action research is an approach to research which aims to combine, simultaneously, real-life action with reflection and learning<sup>5</sup>. Our aim in designing a methodology was to find a way of working which would be systematic in terms of having clear research questions, and a logical approach to evidence, whilst also bringing about real-world change and enabling library staff to reflect and learn from all of this.
- 3.2 We wanted library service staff, library managers, and the public to be active participants in the research and not simply subjects. We also wanted the research to take place in the normal schedule of Essex Libraries' existing rhyme times sessions for under 5s, and to avoid creating some kind of 'pilot' or a special 'mental health' version of rhyme times. A total of 309 modified rhyme time sessions were run, 72 in the summer term, and 237 in the autumn term.
- 3.3 Our main methods and processes are described here:

Element	Description
<b>Scoping Stage</b>	
Literature review  Scoping: Data gathering – prevalence of perinatal mental ill-health	<b>The literature review</b> was a first step and now informs all aspects of the project. Its scope was to identify the range of accepted definitions of perinatal mental health problems, and prevalence in the UK. Secondly, it aimed to identify relevant interventions which could be adapted and used in the context of library-based rhyme times. The results helped us focus on designing modifications to rhyme times which are grounded in evidence and enabled us to build trust and confidence among our expert stakeholders and with frontline staff.
Expert group	<b>The expert group provided</b> expertise from across perinatal and maternal mental health, libraries, and public health. We convened the group on three occasions, to validate and seek advice about our methods, to test the logic of the modifications, and to test our emerging our findings.
Baseline data gathering on rhyme time participation levels	<b>Baseline data gathering on current rhyme time participation</b> was undertaken by Essex colleagues at over 100 different sessions across the county for the week of Saturday 28th January to Friday 3rd February 2017 before any of the modifications had been implemented. This included a headcount of adults and children attending, and the number who were attending for the first time.
Identification of 6 locations for testing	<b>Six locations were chosen initially – these were chosen because they had</b> different profiles in terms of demographics, physical size, and geographies: Clacton, Basildon, Chelmsford, Brentwood, Witham, and Colchester.
Baseline data gathering on content and style of in the 6 locations	<b>Essex senior library staff undertook observations of the rhyme times at the six locations in February 2017.</b> These recorded numbers of attendees, the structure and content of sessions, and observations on the style and tone of delivery.
Baseline data gathering on attendee	<b>April 2017 Essex library staff conducted a survey of mums at the six locations.</b> The survey asked how rhyme times help people feel better, how they could be improved, and what they enjoy most.

<sup>5</sup> See one of the seminal works on action research, *Theory in Practice* by Donald Schon and Chris Argyris (1974) in which Schon and Argyris argue that *“all human beings – no only professional practitioners – need to become competent in taking action and simultaneously reflecting on this action to learn from it”*

Element	Description
motivations for attending rhyme time	
Development of theory of change, research questions, data collection methods and evaluation framework	<p><b>As baseline data was being gathered a project level logic model was developed – and with it our data collection methods and an evaluation framework.</b> This was developed by ourselves working with the expert group.</p> <p>Our evaluation and outcomes framework are attached at Appendix III.</p>
<b>Delivery and action research stages 1 and 2</b>	
Design longlist of modifications	<p><b>Our first design workshop was held in Chelmsford</b> in March 2017 and attended by expert group members and rhyme time staff in the 6 Essex libraries. Using the evidence found in the literature review, we developed during the session a longlist of possible evidence-based modifications which we documented after the workshop and cross-referred with the literature review.</p>
Desk review of longlist and proposal of shortlist	<p><b>Following the workshop, we undertook a review of the longlist</b> to ensure that each modification suggested was indeed supported by evidence. This list was subsequently organised into areas of evidence which had clear objectives. Some modification proposals were altered to fit better with the evidence.</p> <p>A grid showing which libraries are implementing which modifications can be found at Appendix 1.</p>
Each of the six libraries chooses which modifications to implement	<p><b>We then met with frontline staff in April 2017</b> and asked them to identify which modifications from the longlist were already part of their rhyme time approach and then we asked them to select modifications they were not already doing – so that these would become their ‘new approaches’.</p>
Action research stage 1 Implementing the modifications in Summer Term 2017	<p><b>The first phase of testing the modified approaches took place during the 2017 summer term (May-July) with 72 modified sessions in the initial six libraries</b> and during this time data was collected and collated by Essex staff.</p>
Data collections from action research stage during Summer term 2017	<p><b>Attendee sign-in sheets</b> – adults were asked to complete a form which asked for demographic and postcode data, relationship to child, whether a library member, plus information about how they found out about rhyme times, and whether they had been before (due to the burden on attendees and staff these were used in sample weeks only).</p> <p><b>Before/after mood charts for adult carers</b> – adults were asked to mark a 5-category Likert scale with a sticky dot to indicate their mood from very happy or to very sad, once on arrival and again on leaving each rhyme time session - <u>data for mothers was separated from other adult data.</u></p> <p><b>Post-It note reactions for adult carers</b> - during Summer Term adults were asked to answer, using Post-Its, the question “<i>what did you enjoy the most?</i>”.</p> <p><b>Observations at two rhyme time sessions by Shared Intelligence staff</b> – at Clacton and Witham in July 2017 – both followed by informal discussions with parents in situ.</p>
Reflection session with Essex Libraries managers	<p><b>In August, with rhyme times on hold for the summer holidays, we held a stocktake workshop with Essex Libraries managerial staff</b> to review delivery of the modifications and the effectiveness of data collection. This led to some changes to the data collection ahead of the restart of rhyme times for the Autumn Term.</p> <p>At this point it was also agreed to include two new libraries to the project – Braintree and Great Baddow.</p>
Action research stage 2 Implementing the modifications in Autumn Term 2017	<p><b>The second phase of testing the modified approaches took place during the 2017 autumn term (September – December) with 237 modified sessions</b> across eight libraries and during this time data was collected and collated by Essex staff.</p>

Element	Description
Data collections from action research stage during Autumn Term 2017	<p><b>Attendee sign-in sheets</b> – adults were asked to complete a revised form from the previous version which reduced the number of open text boxes. The 6 original libraries circulated this sheet to attendees for one week mid-way through the term, and the 2 additional libraries circulated this sheet at every session during Autumn term.</p> <p><b>Before/after mood charts for adult carers</b> – adults at all 8 libraries were asked to continue this data collection method as above.</p> <p><b>Post-it note reactions for adult carers</b> - during Autumn Term, we asked “<i>What part of today’s rhyme time made the most difference to how you feel?</i>”. We did this for one week at all 8 libraries.</p>
Training for Essex staff on dealing with maternal mental health in libraries	<p><b>In October Essex commissioned a training session (using project budget) for staff covering various aspects of maternal mental health;</b> how to have conversations about maternal mental health – and where the boundaries might lie, common maternal mental health issues, signs of anxiety and how to identify them, how the rhyme time modifications can help, active listening skills, and what other services can be signposted.</p>
Reflection session with Essex Libraries frontline staff	<p><b>In October we also held a focus group and reflection session with frontline staff to review the modifications</b> – what was working what was not – and to enable staff to share with each other the approaches they had been taking and how they had overcome problems. This took place on the same day as the maternal mental health training.</p>
Focus Groups with rhyme time users	<p><b>Six focus groups were held in December 2017 with rhyme time users in libraries taking part in the research.</b> These were conducted immediately after rhyme time sessions at the libraries with adults who had just taken part. The purpose of these was to discover whether, how and why the rhyme times were affecting mother’s mood or mental wellbeing. We asked how rhyme times were affecting mood and wellbeing. We also asked what specifically it was about the way rhyme times were delivered that contributed to making them feel different.</p>
Change story interviews	<p><b>We conducted 10 phone interviews in December 2017 with mothers who attended rhyme time sessions at the libraries.</b> Interviewees were selected from those who had volunteered in response to a request disseminated by library staff. The request was for mothers who believed that attending rhyme times had made a difference to them of any kind. Ten mothers volunteered and took part in 20-30-minute phone interviews in which we asked about their personal experience of the impact of rhyme times – focusing as far as possible on changes they perceived in themselves which they felt might be connected to rhyme time attendance. We have named the ten Change Stories A – J and given the interviewees pseudonyms.</p>
Interviews with library managers	<p><b>Phone interviews were conducted with the Essex Libraries Audience Development Officers most closely involved in the project.</b> We used these to explore in more depth the practical and managerial issues encountered during the project and gain an understanding of the organisational challenges which the project had presented.</p>
Co-production session with adult carers to explore marketing and communication of rhyme times	<p><b>In February 2018 towards the end of the project we convened a co-production session with adult carers immediately following a rhyme time session in Clacton library.</b> The purpose was to test out existing leaflets and materials used to promote rhyme times and discover what designs and language adults would use to promote the sessions in a way which conveys the mental health benefits.</p>
Analysis and final reporting	<p><b>Analysis and final reporting has taken place during February and March 2018.</b> Data had been collected and collated throughout the project, and interim reports had been produced in August and October 2017. Final reporting draws on the interim reports and takes stock of all findings, forms conclusions and makes recommendations for next steps.</p>

## Limitations

3.4 Our research took place in real-life settings of public libraries, during rhyme times sessions whose main purpose was not to serve our research, but to deliver a great literacy and music-based experience for adults and young children. Furthermore, although we present data about attendees' self-reported reactions and mood-state immediately before or after attending a rhyme time, those rhyme times were a mere 30 or so minutes within busy days and lives in which many other unknown factors were at play. In the interviews which led to the change stories we asked interviewees to reflect on the place of rhyme times in the wider context of their lives and over weeks or months. Our focus groups also touched on longer term benefits, but much of the data from adult attendees is based on immediate or momentary reactions.

3.5 We would therefore like to highlight several obvious limitations to our methods:

- Before we implemented the modifications staff from Essex Libraries gathered valuable baseline data on participation and attendance, content and style of rhyme times, and adults' motivations for attending. This has been invaluable for understanding participation and context. However, we never intended to undertake a comparison between the effect of rhyme times 'with' and 'without' the modifications. This is important to note, as many of the positive effects of rhyme time which we describe in this report could potentially have been found among rhyme time attendees prior to implementing the modifications. Equally however, it should not be taken to mean that rhyme times without these modifications would generate the same effects. Those kinds of questions are outside the scope of this research.
- The data from the before/after mood charts is some of the most interesting and stark data we have been able to capture. However, it must be stressed that the before/after data was captured on charts which were in public view as adults were putting their sticky dots on them. Even though we have broadly similar numbers of 'before' responses compared to 'after' response, we did not associate an individual respondent's 'before' with their 'after'. Also, the overall proportion of attendees self-reporting in the most positive mood category in the 'before' response, seems unusually high. This may be a sign that respondents did not state their true mood, or perhaps shows normative bias (e.g. giving a response which they perceive to be helpful to the library service).
- In terms of data collection overall, both Shared Intelligence and Essex Libraries staff found this challenging as it involved co-ordination and data-entry of large amounts of recordings, coming in each week from across eight branches, submitted by different individuals, often in handwritten formats. Often data was missing, or incomplete, and had to be carefully cleaned and reorganised. In some cases, library staff voiced concerns that the demands of data collection during sessions was detracting from their ability to run the rhyme time well. All these factors will inevitably have led to some level of incompleteness.
- A frustrating gap in our data was how many unique attendees came to the rhyme times we were studying. This is an important piece of data to understand who is attending, and even more importantly who is not. Unlike when library users borrow books or request to use a library PC terminal, when people attend rhyme times they do not have their library card scanned. So instead we used sign-in sheets at sampled sessions which captured around 1,200 responses over several months, but we do not know for instance, whether these were from 600 people attending twice, 300 attending four times each or some other permutation. We have been able to model – very roughly – the number of unique

attendees based on the average number of new attendees at each session, but this is far from ideal.

### Expert group

3.6 Finally, as part of our research method we recruited an expert group at the start of the project. Our aim was that this group would provide advice and act as a sounding board for the project and provide advice on methods, interpretation, as well as supporting dissemination of the eventual findings. The group included individuals from library services, mental health, and national bodies. We convened the group on three occasions, to validate and seek advice about our methods, to test the logic of the modifications, and to test our emerging our findings. Members of the expert group also helped individually at certain points in the process. The members of the expert group were.

Nina Browne	Clinical Psychologist, Owls
Lisa Elmer	Arts Council England
Dr Gillian Granville	Independent researcher in maternal mental health
Felix Greaves	Public Health England and Libraries Task Force
Dr Charlie Howard	Clinical Psychologist and founder of Owls
Sophie Lancaster	Arts Council England
Julie Oldham	Society of Chief Librarians health lead
Ruth Rothman	The Family Nurse Partnership - national unit
Celia Suppiah	Director, Parents 1st

## 4 Logic model and research questions

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4.1 In parallel with the work to develop the modifications we also sought to document more clearly the aims of the project using a logic model. This is set out on the next page as a diagram. The logic model shown is the one we created at the start of this research and has not been updated based on these findings. In other words, this is an *ex ante* logic model; how we predicted things would work, rather than how things were found to be in practice.

4.2 Nonetheless, this a very valuable research tool. What it seeks to explain is how through the research activities and the rhyme times themselves, this work contributes to; a positive impact on maternal mental health, and the creation of new evidence and transferable learning to enable rhyme times to be used nationally as an intervention which can address maternal mental health.

4.3 Working from left to right, the logic model describes our original rationale, that thousands of mothers every year attend library-based rhyme times, that the focus is usually only on their benefit to children, even though we know mothers benefit themselves. Drawing on the evidence from the literature review, the logic model then describes how the practical activities of the project were intended to produce three key outcomes:

- Parents saying, they enjoy and benefit from rhyme time
- Parents attending rhyme time experiencing improved mental health and wellbeing
- Wider range of parents attending rhyme time

4.4 These in turn are intended to contribute to the two high level impacts.

- A positive impact on maternal mental health in Essex
- An evidence base and nationally transferable learning about how rhyme time can improve maternal mental health (what, why, for whom)

4.5 Producing this logic model also enabled us to produce an evaluation framework. It begins by setting three main research questions followed by five secondary questions. This is shown in annex 2.

**1 - Do the modified rhyme times have a positive effect on maternal mental health and if so, how and why? Our shorthand for this is "Impact."**

**2 - What is the reach of these activities and can it be increased? Our shorthand for this is "Reach."**

**3 - Can a more structured approach to rhyme times be implemented consistently in a public library context? Our shorthand for this is "Fidelity"**

### Secondary research questions

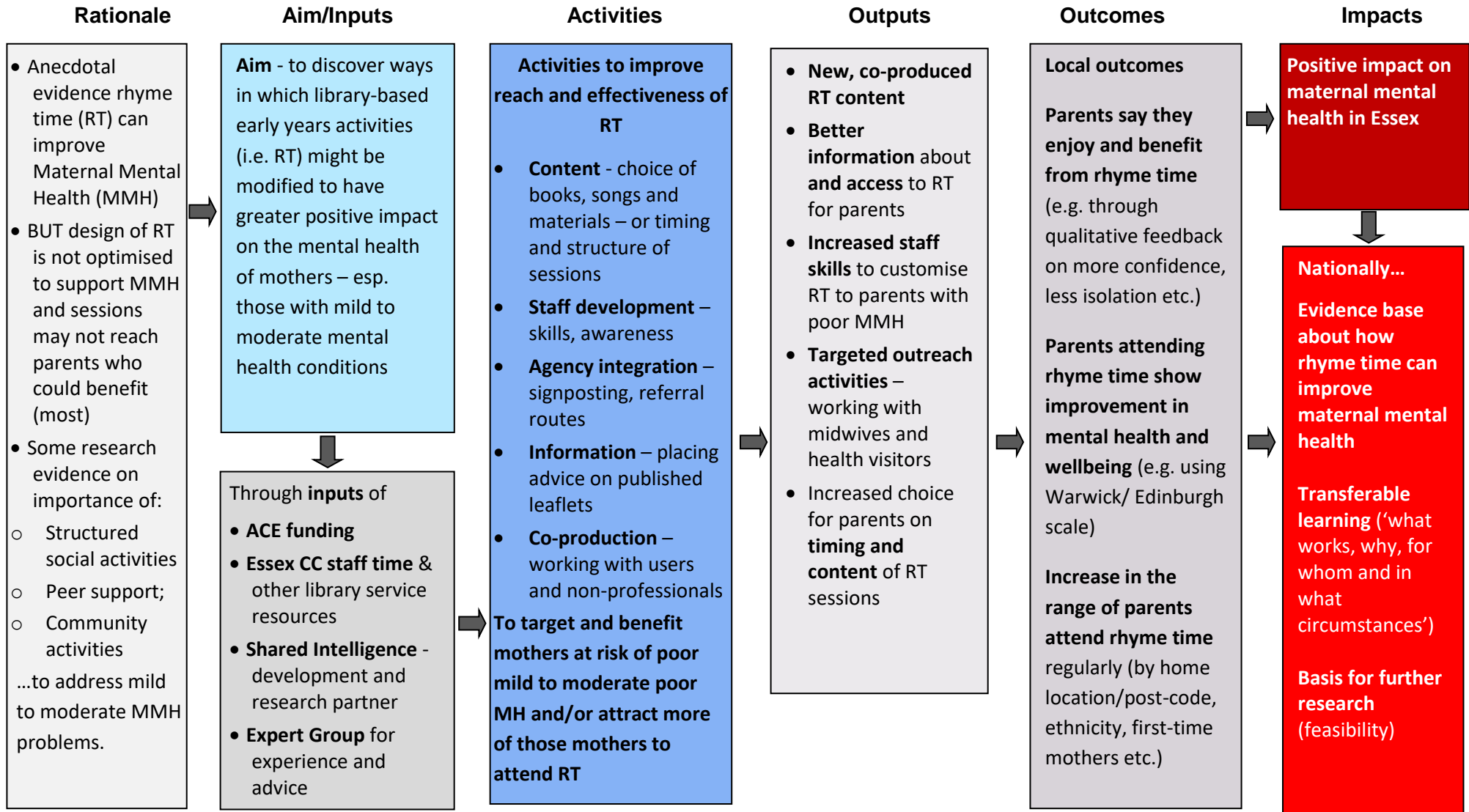
4 - What role do staff skills have in modifying rhyme time? What is the most effective way(s) of enhancing staff skills, so rhyme time has a positive impact on maternal mental health?

5 - Which existing networks and which new ones can be used to reach mothers with low to medium MH issues? Which are most effective for which groups of mothers?

6 - What are the advantages and disadvantages of a co-production approach with users of rhyme times? Is co-production an intervention in itself and if so, how does it have an impact?

7 - In what ways does a 'whole library' approach enhance rhyme times modification? What training/ support is needed for library staff?

### ex ante Logic model





## 5 Context and evidence

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- 5.1 One specific goal of this action research was to develop a model based in evidence, which could be replicated by other library practitioners and also give confidence to healthcare and library professionals when presenting rhyme time as support for improving maternal mental health. Identifying relevant evidence through a review of policy and research literature and using this as the basis for modifications to the Essex model of rhyme time, was an important project stage.

### Literature Review

- 5.2 The literature review began at the outset of the project, but continued as we discovered new articles and reports, or were signposted to useful materials by others. The literature review (which we will publish separately) was used to inform our overall scoping and research design, including the logic model, and it informed the rhyme time modifications themselves.
- 5.3 **The first area of evidence we looked for in the literature was prevalence.** What we found was that the policy and research literature provides no simple figure. This is partly due to different definitions of maternal mental ill-health from clinical post-natal depression to more mild or moderate forms of depression following childbirth, and it is also a result of authors focusing on different time periods before and after birth, with some focusing on the months before and after birth, and others including mothers whose child has reached age one. For example the Government policy paper *Closing the Gap: Priorities for essential change in mental health* (Department of Health, 2014) states that maternal mental health issues during pregnancy and after birth (including postnatal depression) “affect around 10% of women”, whereas Public Health England’s Early years | High Impact Area 2: Maternal mental health (PHE, 2016) states that that mental health problems in the perinatal period “affect up to 20% of women” and gives as examples: antenatal and postnatal depression (PND), anxiety, obsessive compulsive disorder, PTSD and postpartum psychosis. NICE, the National Institute of Clinical Excellence (2015) in their guidance on antenatal and postnatal mental health state that depression and anxiety “affect 15-20% of women in the first year after childbirth”. The highest figure for prevalence we found was in the *Suffering in Silence* report by the charity 4Children (2011) who in a survey of 2,318 mothers found 33% of new mothers with more than one child (‘multi-mums’) reporting some form of post-natal depression; of these only 54% had sought treatment. The same survey also found first time mothers less likely to seek treatment than multi-mums.
- 5.4 Hence, in this research we refer to “**one in five women (20%)**” during pregnancy or in the first year after the birth of their baby, experiencing some form of mental ill-health - meaning mild or moderate anxiety or depression, as distinct from ‘baby blues’ which is very common and affects a large proportion of new mothers for a short period of time soon after the birth of their child.
- 5.5 **We looked for broad categorisations of interventions for maternal mental health**, in order to locate library-based rhyme time in the broader context of support. This guided us towards seeing rhyme time as a non-clinical ‘low intensity’ or ‘community’ intervention which can support mothers experiencing mild or moderate depression or anxiety. Interventions of this kind are typically delivered in community settings by non-clinicians and are often described in the literature as having potential for wider community benefits beyond mental health, such as supporting personal growth and community empowerment. Community interventions in general have received less research

attention compared to medical and clinical, and for community interventions aimed specifically at maternal mental health, there are very few studies. We were also interested to see that among the limited research into low intensity community interventions, one factor seen to limit impact was the tendency for pilot programmes not to be sustained or adopted more widely. It is important to note that this is not a factor for rhyme times as they are already a widespread and mainstream activity – without the precariousness of a time-limited pilot.

**5.6 We looked for evidence about barriers to accessing support** and found that feeling isolated is in itself a common barrier to seeking support. Another is when support which is accessed makes it seem other mothers are coping (even though they may not be) which further exacerbates feelings of isolation and discourages participation in support-giving activities.

**5.7 Most importantly of all we looked for specific findings which could inform simple modifications to the library-based rhyme time model.** This led us to identify six areas of evidence which seemed easily transferable to the rhyme time model being delivered by Essex Libraries:

1. *Peer relationships enable mothers with poor mental health to seek validation and clarify experiences* – for example it could be made easier for mothers attending rhyme time to make new friends, there could be more recognition that mothers find it difficult to leave the house (due to practical reasons, anxiety, or low-mood).
2. *Being able to identify with a social group is beneficial for mental health* – for example rhyme time attendees could be encouraged to socialise as a group before or afterwards.
3. *Singing leads to mental health benefits:*
  - a. *Singing to babies is associated with enhanced wellbeing, self-reported mother infant-bond, and reduced symptoms of post-natal depression<sup>6</sup>* – for example mothers could be encouraged to sing in close proximity to their children in the library and to sing at home.
  - b. *Encouraging infants to learn to follow songs sung by an adult provides a mood boost for adult and child* – for example regular songs could be sung each week so everyone can learn them, and printed copies of the words could be provided.
4. *Reading aloud in groups helps social, mental and emotional wellbeing* – for example reading aloud could be encouraged by having multiple book copies.
5. *Synchronous and face to face interaction between mothers and babies is associated with increased maternal dopamine and maternal bonding* – for example there could be a specific ‘face-to-face’ section of every rhyme time.
6. *Receiving information and educational materials improves the ability of those with poor mental health to recognise and assess their own mental state* – for example written information could be displayed prominently in the spaces where rhyme time are held, and rhyme time leaders could sign-post other relevant support.

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<sup>6</sup> One study of particular interest was the Royal College of Music (2017) research into singing and postnatal depression involving sessions similar to rhyme times, and which was also Arts Council England funded.

## 6 Awareness training for frontline staff

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- 6.1 Part of the project plan was to commission awareness training for staff about perinatal mental health and ill-health. This was an area of learning front-line staff had begun to ask about early on in the project. Originally this was planned for the 2017 Summer Term to coincide with the initial introduction of the modifications. However, it took place in the 2017 Autumn Term when the second phase of modified sessions had just begun. The training was provided by Parents1<sup>st</sup>, a charity based in Essex specialising in family support and maternal mental health. The brief was to design a half-day training session to help library staff apply the learning on maternal mental health specifically to the delivery of rhyme time sessions.
- 6.2 Fifteen members of Essex Libraries' staff took part in the training including frontline staff from all (by then eight) participating libraries with the exception of Witham where staff scheduling made attendance impossible. Senior managers from Essex Libraries and Shared Intelligence staff were also present. The training covered; definitions of maternal mental health problems, how to discuss maternal mental health confidently including by developing active listening skills, understanding outward signs of anxiety and depression by considering how our 'thoughts, feelings and behaviours' are connected, and signposting other organisations who can help. Parents1<sup>st</sup> set out the aims of the training as follows:
1. *Create a welcoming environment [in rhyme time sessions] that enables anxious or depressed mothers to feel included and supported during their rhyme time experience;*
  2. *Gain an understanding of some common signs of maternal mental health problems;*
  3. *Build on their active listening and communication skills;*
  4. *Share signposting and useful resources about maternal mental health with attendees;*
  5. *Be clear about the ground rules and boundaries of their role including safeguarding;*
  6. *Reflect on and share new learning and experiences of delivering modifications with co-trainees.*
- (from Parents1<sup>st</sup> self-evaluation of their training for Essex Libraries)
- 6.3 Staff reaction to the training was overwhelmingly positive. At the start of the training some staff had voiced concerns that they were being asked to stray into territory better left to mental health professionals. By the end of the session all but one person seemed entirely comfortable with the idea that frontline staff can directly help improve maternal mental health through rhyme time. The majority said they felt they had learned the value of active listening. For most staff this was closely connected to being more enlightened about maternal mental health generally, and better equipped to recognise mothers with poor mental health and help them have a positive experience at the library. The training also led to more sophisticated discussion (immediately afterwards) of ways in which rhyme times could be modified and adapted to be beneficial for maternal mental health.
- 6.4 As we explain later in this report, in hindsight, the training now seems to have had a very important influence on the project. In particular it meant that all staff had a better understanding of the problems which rhyme times can help address. By contrast, had staff developed the modifications but without having the chance to learn more about the problems the modifications were meant to solve – the project as a whole may have had less meaning for them. Ultimately, staff found the training important as it enabled them to fully understand *why* they were doing something.

## 7 The modifications

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### Developing the modifications

- 7.1 The majority of the modifications were designed in a single workshop in March 2017 attended by senior and frontline library staff from the six original libraries, plus staff from Shared intelligence, and members of the expert group. In the session, having presented the evidence from the literature review, we asked participants to develop a longlist of possible evidence-based modifications which we documented after the workshop and cross-referred back to the literature review.
- 7.2 The longlist of modifications was grouped into five categories: physical setting; stock, materials and physical resources; the rhyme time session itself; information for parents; and staff training.
- 7.3 Following the workshop some proposed modifications were adjusted, either to reduce duplication or to fit better with the evidence, but none were altered significantly. We also developed instruction sheets and a workbook to enable staff to deliver the modifications.

### Ensuring everyone was attempting something new and different from before

- 7.4 We met again with frontline staff a month later with a fully documented list of proposed modifications and instruction sheets. In this session we asked library staff which modifications they wanted to implement and allowed each participating library to make their own selection.
- 7.5 We had originally envisaged all six library branches adopting the same modifications, but we changed our approach to allow each library to choose their own modifications. The main reason for this was to address concerns from the expert group that the participating libraries might gravitate towards those approaches which were most similar to what they were already doing. We therefore asked staff to identify which modifications from the longlist were already part of their rhyme time approach and then we asked them to select modifications they were not already doing – so that these could be identified as their ‘new approaches’. For example, although for five of the libraries taking part, having a welcome song was a genuinely new modification, for Basildon, Braintree, and Witham this was similar to what they already did.
- 7.6 What this also meant was that frontline staff had significant autonomy to judge what would work in their library and what would not. However, it also required frontline staff to feel empowered to take these kinds of decisions - which they did, although we did ask them to confirm their selection with colleagues back at their branch before the modifications went live.
- 7.7 Distinguishing between ‘new’ practice ‘business as usual’ was an important part of the action research process as we wanted to ensure that every library taking part was trying out something which was genuinely new and different for them, compared to what they had done previously.
- 7.8 A grid showing which libraries implemented which modifications can be found at annex 1. The grid differentiates between those modifications which were new to a library, and those modifications which the library had been doing previously.
- 7.9 The table below shows each of the modifications which were included in the final list alongside the evidence which underpins it.

Modification	Aim/evidence <sup>7</sup>
<b>Before session</b>	
Recognise achievement of the parent getting to a rhyme time	Provides validation and reassurance for mothers who feel anxious or find it difficult to leave the house <sup>i</sup>
Buddy up multi-mums with new mums	Peer support can enable mums to seek validation / clarify experience <sup>ii</sup>
<b>Main session</b>	
Have parents introduce themselves to their neighbours or other members of the session	Peer support can enable mums to seek validation / clarify experience (ref as above)
Explain parents and children can get up and move around at all times, and put them at ease about the possibility of their child crying	Puts parents at ease, reduces chance of feeling anxious about child's behaviour
Encourage parents to join in and reassure them that it does not matter if they do not know the rhymes and songs	Physical act of singing to babies has beneficial effects on mental health of those singing <sup>iii iv</sup>
Explain that rhyme time benefits both parents and children - children have fun and learn, whilst parents have a good time too	Raise awareness of that rhyme time is good for parents too, and make it acceptable at attend for own benefit
Introduce what you're going to do at the session	Reduce anxiety, increase participation
Welcome song (each branch to choose their own song which is already used/already familiar to visitors)	Build a sense of group identity, which in turn can benefit MH <sup>v</sup>
Include at least one synchronised <b>face to face</b> song or story (synchronised actions or singing) and explain the reasons for doing this are that parents get a mood boost from this	Synchronous activity between mother and child can increase maternal dopamine <sup>vi</sup> Encouraging infants to learn to follow an adult singing nursery song supports adult-infant bonding <sup>vii</sup>
End the session with a goodbye song (own song which is already used/familiar)	Same as for welcome song (ref as above)
Conclude the session by encouraging parents to sing the songs and rhymes at home	Same as for encouraging parents to sing (ref as above)
Conclude the session by encouraging parents to sing the welcome song at home or on the way to the session	Same as for encouraging parents to sing (ref as above)
Point rhyme time participants to the refreshments	Encourages development of social networks <sup>viii ix</sup>
<b>After session</b>	
Interaction with parents: "will we get to see you next week?", "Are you a library member..."	Encourages development of social networks (ref as above)
Teas and coffees, or bring your own	Encourages development of social networks (ref as above)
Encourage parents to stay and read children's books aloud after the session	Group reading aloud helps wellbeing <sup>x</sup>

<sup>7</sup> See annex 4 for references / endnotes

Modification	Aim/evidence <sup>7</sup>
<b>Stock, materials and physical resources</b>	
Have promotional materials visible nearby for other parent activities such as a mini book group.	Reading aides wellbeing <sup>xi</sup>
Provide materials or suggest resources which will raise mums' confidence in singing and rhyme at the library and at home, e.g. similar to Essex Libraries existing 'TLC' advice cards	Same as for encouraging parents to sing (ref as above)
Have multiple sets of children's books so that group reading can be suggested after the session	Group reading aloud helps wellbeing <sup>xii</sup>
Promote resources which signpost a range of local services that may benefit maternal mental health, including online resources, e.g. Leaflets	Receiving informational material means people are better able to assess own mental state <sup>xiii</sup>
<b>Physical setting</b>	
Make sure the layout enables parents and children to sit together	Encourages face to face and synchronised actions or singing
If possible have space for parents to informally stay and chat	Encourages formation of social groups <sup>xiv</sup>
Have enough space at the session for refreshments (provided by library or bring your own)	Encourages formation of social groups ref as above)
Have a nearby noticeboard/display stand with flyers for activities which might be beneficial to all parents, but in particular mothers with mental health issues	Same as for promoting information and leaflets ref as above)
If possible, make use of furniture and fittings (e.g. shelving, rugs) to define the rhyme time space	Physical environment contributes to atmosphere of group activities <sup>xv</sup>
<b>Written information - printed A6 card with the following</b>	
"You are always welcome even if you don't know the words, and we don't mind at all if babies or children cry!"	Puts parents at ease, reduces chance of feeling anxious about child's behaviour
Include the welcome song lyrics and encourage parents to practice singing it	Encourages singing <sup>xvi xvii</sup>
Include links to websites which will raise confidence in singing and rhymes	Encourages singing ref as above)
Include links to a range of local services (county wide service, or local support groups) which will benefit maternal mental health, including online resources	Same as for promoting information and leaflets ref as above)

## 8 Main findings

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### 8.1 This section draws on data from:

- Original scoping data including the data collected by Essex staff before the modifications were implemented (baseline data collection on attendance and newcomers, observations notes from sessions, and parents' survey)
- Literature review
- Attendee sign-in sheets
- Before/after mood charts
- Post-It note reactions for adult carers
- Observations at two rhyme time sessions by Shared Intelligence staff
- Reflection sessions with both frontline staff and area managers
- 6 focus groups with rhyme time users
- 10 interviews with rhyme time users to record change stories (included in annex 3)
- 4 Interviews with Essex library service managers

### 8.2 Findings have been grouped under the three main research questions:

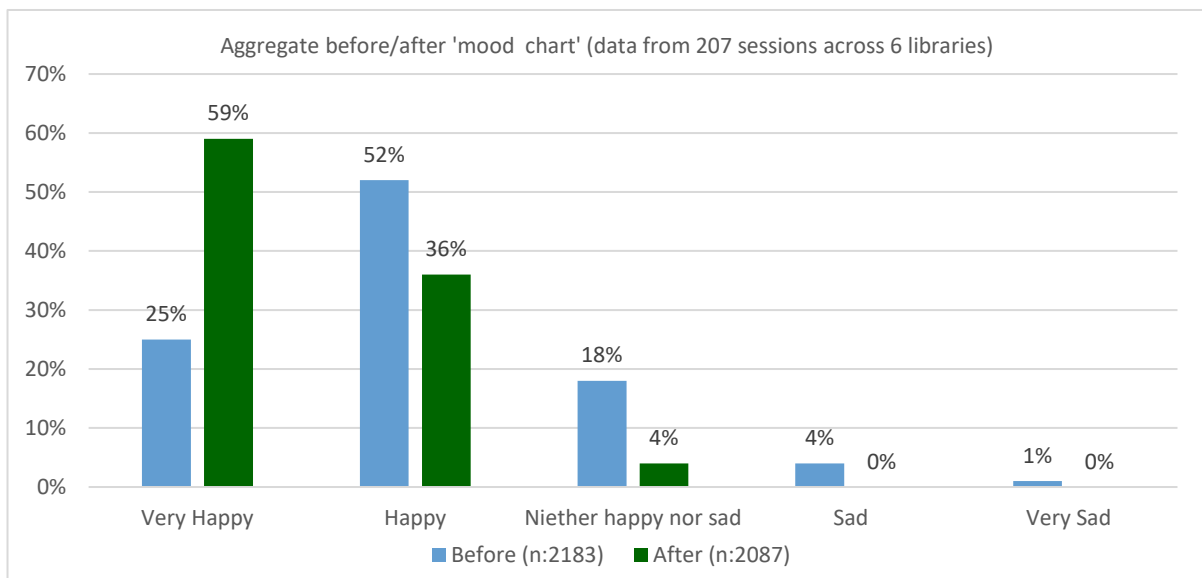
1. Do the modified rhyme times have a positive effect on maternal mental health and if so, how and why? Our shorthand for this is "Impact."
2. What is the reach of these activities and can it be increased? Our shorthand for this is "Reach."
3. Can a more structured approach to rhyme times be implemented consistently in a public library context? Our shorthand for this is "Fidelity"

## Impact: did modified rhyme times have a positive effect on maternal mental health?

8.3 Our findings on 'impact' come from the mood chart data, Post-It reactions, focus groups with rhyme time users, and the change story interviews. Findings under this heading have been grouped into sub-themes.

### Self-reported mood of mothers was higher immediately after the sessions compared to before

8.4 Using data from the self-reported 'mood charts' (pinned to a wall and completed each session immediately before and then after the session), we can see a strong pattern of mothers, upon leaving the modified rhyme time sessions, saying they felt happier than when they arrived. The data below has been aggregated from 207 sessions which took place in six of the participating libraries between May and December. This represents more than 2,000 responses and shows that 95% of mothers felt happy or very happy at the end of the session compared to 77% at the beginning.



8.5 As already noted, self-reported mood 'before' each rhyme time is higher than one might expect in a normal population and may be a sign of normative bias. Another possible explanation is that by gathering these responses moments before each rhyme time began, we picked up an increase in mood brought about by the sense of achievement of having made it to the session, and the anticipation of an enjoyable activity. That said, upon arrival, 18% described themselves as 'neither happy nor sad', and 5% as 'sad' or 'very sad'.

### Focus groups and observations confirmed the before/after mood chart data

8.6 The pattern seen in the mood chart data (mood becoming more positive) was confirmed by the focus groups and our own first-hand observations. We observed that sessions felt 'happy' with children and adults smiling and laughing, and parents seeming relaxed. From the focus groups two specific elements of the sessions stood out as contributing to an improvement in mood in the course of the 30-minute session: seeing their child enjoy themselves; and the act of singing.

8.7 In mothers' Post-It comments in response to the question "What part of today's rhyme time made the most difference to how you feel?" we also read; "singing together", "talking to people", "meeting people who are the same – a new mum", "my son joined in with me", and "the warm welcome".



### Reducing anxiety and increasing confidence.

- 8.8 Several of our change story interviewees revealed that they had suffered from varying types of anxiety or social anxiety when their children were infants, which had negatively affected their overall confidence, and that attending rhyme time had helped them reduce feelings of anxiety. Alleviation of anxiety was mentioned by four of the ten Change Story mothers (Change Stories B, D, H, F).
- 8.9 One mother who attends rhyme time at Clacton-on-Sea (Change Story D) said she suffered from feelings of anxiety after the birth of her first child, which caused her to worry about leaving the house. She described her anxiety being so bad that during her first rhyme time session, she had to leave halfway through the session. She felt her repeated attendance at rhyme time helped her deal with her anxiety by “taking her out of her comfort zone”. By this, she explained that rhyme time “forced” her to interact with strangers, which is something she initially felt uncomfortable with. Over time this helped reduce her anxiety and she felt more at ease in front of strangers, to the extent that she now looks forward to meeting new people.
- 8.10 The mother in Change Story F suffered similar anxiety which made it difficult to leave the house. For her the benefit of rhyme time as the library were that she saw the library as a “safe space” which was welcoming and relaxed. In Change Story G the mother credits rhyme time sessions with increasing her confidence. She told us she did not sing along to the nursery rhymes during the first few rhyme time sessions she attended. However, she attributes her continued attendance to her gaining the courage to get involve herself in the group singing, and feels this increased her general confidence in other areas.
- 8.11 The personality of the particular rhyme time leader and their ability to create a fun, welcoming and relaxed atmosphere was mentioned during several focus groups as one of the aspects of the session most valued by mothers, with several stating that the presence of the rhyme time leader was integral to their enjoyment of it. Another mother (Change Story H) stated that due to her social anxiety, she felt she wouldn’t have been able to continue her attendance of rhyme time were it not for the welcoming approach of this particular rhyme time leader. She felt repeated attendance coupled with the personality of the rhyme time leader helped her rebuild her confidence.

#### Change Story F: Reducing Anxiety

*‘Fiona’ feels as though attending the rhyme time sessions has had a very positive effect on her general feeling of wellbeing. She stated that both during and after her pregnancy she suffered from anxiety and felt slightly fearful of going outside. In many ways the rhyme time sessions became a “safe space” for her. She highlighted the warm, relaxing environment as well as their relatively short length as two things that made her feel welcome and “at home”*

*Clacton-on-Sea/ First-Time Mum*

### Providing a structure, routine and belonging

- 8.12 An important element mentioned by many mothers in the focus groups was that rhyme time sessions provided them with an event to plan their day around. Having a rhyme time session to go to helped structure the day and this helped increase a sense of control. It could also provide a goal, something to look forward to, which was particularly helpful if they were having a difficult morning. The fact sessions have fixed start and finish times means it cannot be put off until later in the day, unlike

#### Change Story C: Adding Structure

*‘Claire’ attributes adding a degree of routine and structure to her day as one of the most positive impacts of her attending rhyme time sessions.*

*Basildon/ Multi-Mum*

going to a play area in a local park. The mother in Change Story C went further explaining that rhyme times not only provide structure on any given day, but over time they provide “routine”.

- 8.13 As well as providing increased structure to their day, some mothers highlighted the value of having a clear structure within the 30 minutes session. Many focus groups attendees said that because the rhyme time sessions followed the same structure every time, this meant they could relax and reduced feelings of anxiety. This was because they knew exactly what to expect from the sessions and were not worried about having to do something that would make them feel uncomfortable. Others also linked this to the positive feelings brought about by a regular event that instils a sense of familiarity and belonging.

### Confidence as a parent

- 8.14 Becoming more confident as a parent was mentioned both in the focus groups and change story interviews as something mothers gained from attending rhyme time. In the focus groups mothers explained that attending rhyme time reassured them of their ability as a parent. For example, they found reassurance in being reminded (by seeing other children) that all children develop at different speeds, and also found it reassuring to talk to other parents about parenting.

- 8.15 The feeling of pride that came when mothers saw their child doing something praiseworthy was mentioned often as both a boost to mood and confidence. One mother at the Great Baddow focus group explained “there’s a lot of proud moments, like when you see your baby do something nice it makes you feel like you’re doing well as a parent”. Other examples were seeing your baby share a book with another child or helping the rhyme time leader clear-up at the end of the session. Seeing things like this brought about feelings of pride and mothers saw a link between this and their confidence as parents overall. At Witham library, one mother said, “getting to actually seeing my child play and interact with others is great, as I don’t get to see this when she’s at nursery which is the only other time it happens”.

- 8.16 For mothers with more serious mental illness, the effect of rhyme time on regaining confidence as a parent could be substantial. This was the case for the mother in Change Story B who said she suffered from post-traumatic stress. Four of the ten Change Stories mention rhyme times and confidence as a parent.

#### Change Story B: Confidence Increase

*‘Bal’ suffered from perinatal post-traumatic stress disorder and anxiety after birth, and this knocked both her overall confidence as well as her belief in herself as a mother. Attending rhyme times had a large part in changing this, and she now feels a lot more confident as a person as well as a mother. Bal attributed her interaction with other mothers on a regular basis as one of the things that helped her gain confidence both in herself as well as in her abilities as a mother.*

*Basildon/First-Time Mum*

### Isolation, stress, and respite

- 8.17 Feelings of isolation, boredom, loneliness, lack of motivation to socialise are all closely linked to poor mental health – and combined they can lead to feelings of stress and anxiety. Many mothers we heard from had experienced these kinds of feelings. Many mothers also mentioned that coming to rhyme time helped alleviate feelings of stress. One explained that if she had a particularly stressful morning with her child, attending a rhyme time helped take her mind off the stressful situation. Some said that simply getting ready to go out to a rhyme time was enough to alleviate stress, and that the fact that they knew a rhyme time was coming up was enough to help them feel calmer. Often this was linked to respite, the prospect of being “able to sit down for half an hour”.

- 8.18 For mothers who had been working up until late pregnancy the change of routine could feel particularly acute and disorientating. Some felt a real sense of shock at their orderly routine (travelling to work, interacting with a variety of people, having intellectual tasks to complete, socialising) seeming to disappear overnight. This had been replaced with extended periods at home and much less adult interaction. In this context mothers saw rhyme time as restoring a small amount of structure and adult company to their day. Not only that but it helped break the day up, so it felt less monotonous. Social Interaction
- 8.19 Providing mothers with a situation where they can interact with each other was seen as a major positive for two reasons. Firstly, talking to someone other than their baby played a large part in helping mothers feel better; as one mother phrased it 'kept her sane'. One mother stated how she had struggled with the lack of social interaction (Change Story A) which her job involved a lot of. She said that attending rhyme time gave her back some of the social interaction she missed. This was mirrored in the focus groups. Mothers mentioned the importance of meeting and engaging with other mums, and other new mums in particular. They valued the safe environment and the fact they could interact with others but did not feel forced to.
- 8.20 Secondly, mothers felt they benefited from just being in the presence of like-minded adults, and some spoke about feeling part of a community. Simply associating with other adults, even if only for a few minutes, and even if no words were exchanged, was brought up a number of times as a beneficial aspect of rhyme time – it was “just nice to be around other adults” said one mother.

#### A sense of achievement

- 8.21 Getting out of the house to go to rhyme time and the feeling of a small achievement that came with it was highlighted by several mothers as a major positive in the focus groups and change story interviews. Similarly, the positive feeling and sense of achievement of managing to leave the house after being cooped up was mentioned often. Several mothers spoke of rhyme time as alleviating “cabin fever” when they were stuck indoors with their child – feeling irritable and lethargic.
- 8.22 One mother from Clacton-on-Sea (Change Story G) said she often put off leaving the house - procrastinating until it was too late in the evening to go out. The structured timing of the rhyme time session made it harder to put off. The mother in Change Story E said something similar. She also explained she recognised the need to get out of the house to enable her to feel better, and rhyme time served as a self-motivator.

#### Change Story E: Getting out of the house

*'Elaine' sees the rhyme time as having a positive effect as it acts as an incentive for her to get out of the house, which she sees as something she needs to do regularly to keep her from feeling down. She states that having an actual event to attend is much more motivating than simply the prospect of going for a walk.*

*Clacton-on-Sea/First Time Mum*

#### Group singing and stories

- 8.23 The act of singing with their children in a group setting was highlighted by mothers in both the focus group and change stories as an aspect of the sessions that improved their mood. One mother at the Colchester focus group said, “I really enjoy the singing with my son, it just makes me feel so happy”.
- 8.24 There was a strong view across the focus groups that singing with your baby was great for putting you in a better mood and was listed as one of the favourite parts of the rhyme time. In one focus group some mothers felt the positive effect of singing was magnified when done in a group setting.

- 8.25 This fits with recently published research by the Royal College of Music (and also funded by Arts Council England) which showed singing to babies on a daily basis to be associated with lower symptoms of postnatal depression and enhanced wellbeing. Interestingly the activities used in the Royal College study were very similar in nature to a rhyme time format, involving facilitator-led group singing and play.
- 8.26 The mother in Change Story G explained how she had felt anxious about singing in public but having tried it now really enjoys it.

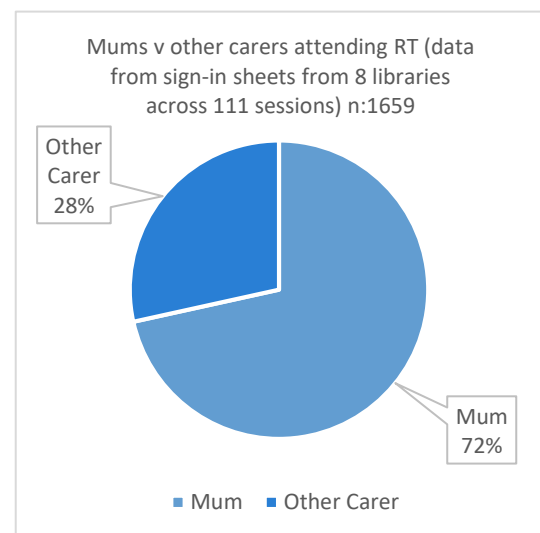
Change Story G: Singing

*'Georgie' attributes the sessions to making her more confident by allowing her to relax in front of other people, stating how she at first felt uncomfortable singing the nursery rhymes in front of the other mothers. However, now she is completely fine doing this and actively enjoys it, stating that it is now her favourite aspect of the rhyme times.*

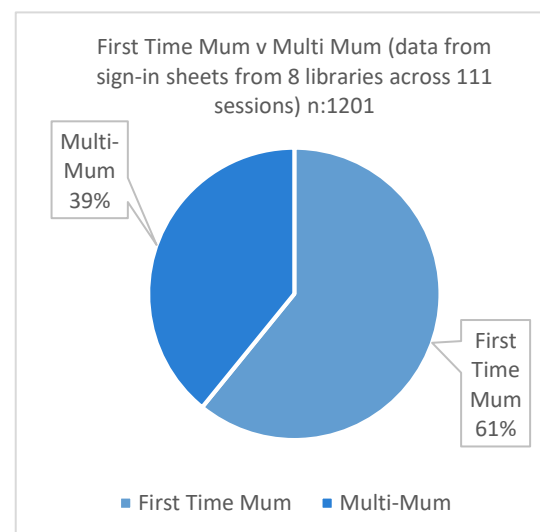
*Clacton-on-Sea/Multi-Mum*

### Reach: what was the reach of these activities and can it be increased?

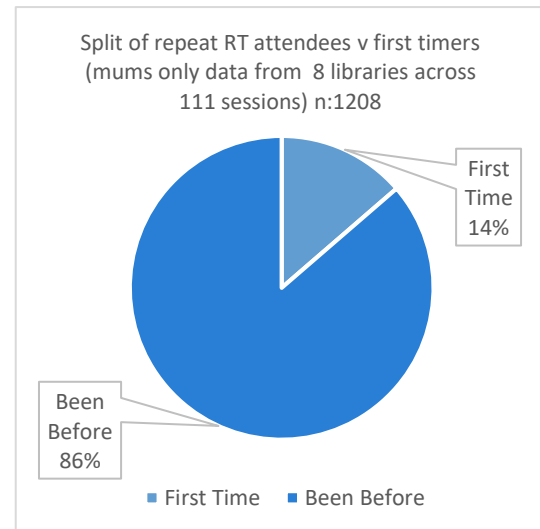
- 8.27 Most of our data for 'reach' comes from the sign-in sheets which captured demographic information from those attending, as well as asking if they had been to a rhyme time before, or were a library member, and how they found out about the sessions.
- 8.28 From this we see that almost three-quarters (72%) of adult carers at rhyme time in the eight libraries which were part of this project - have been mothers. In other words, rhyme times *are reaching* the audience we are most interested in.



- 8.29 We were also interested in the breakdown between first-time mums and those who have already had a child, because the evidence is that that first-time mothers have higher risk of maternal mental health than multi-mums. Here the data shows that three in five (61%) attendees are first-time mothers.



8.30 From the data we collected we were unable to calculate the number of unique attendees. This was because we chose not to seek any uniquely identifying details (e.g. full name, or library card number) on the sign-in sheets. In addition, unlike when library users borrow books or request to use a library PC, when people attend rhyme time they do not have their library card scanned. Scanning of library cards is a simple but effective way to acquire an accurate count of unique attendees. As a result, although we captured around 1,200 responses through sign-in sheets from a sample of 111 sessions, we do not know for instance, whether this represented 600 people attending twice, 300 attending four times each or some other permutation.

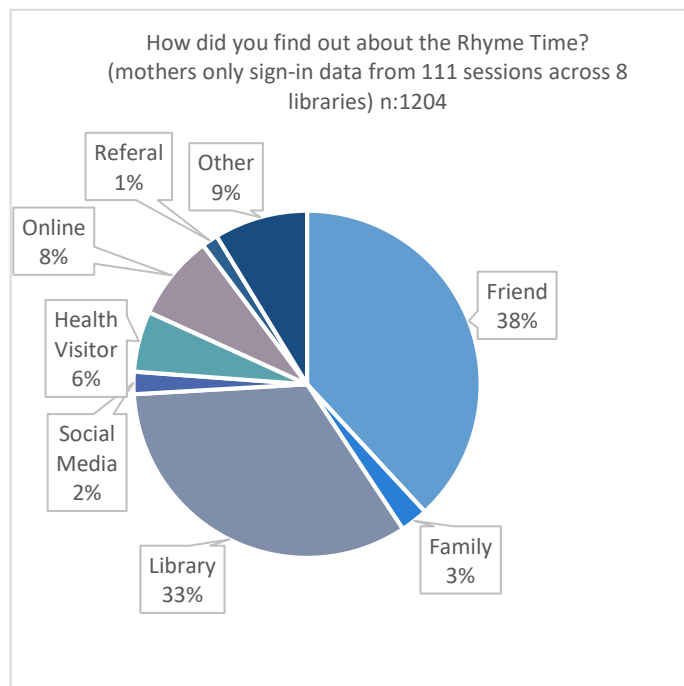


8.31 What we do have however, is data showing that in any given session, around one in seven mothers (14%) are new, with the others having been before. We were able to use the 14% figure to extrapolate a rough estimate of the number of unique individuals who might be attending rhyme times across all Essex libraries over a one-year period. The estimate we have made is that annually, between 4,000-5,000 mothers could be attending rhyme times in Essex.

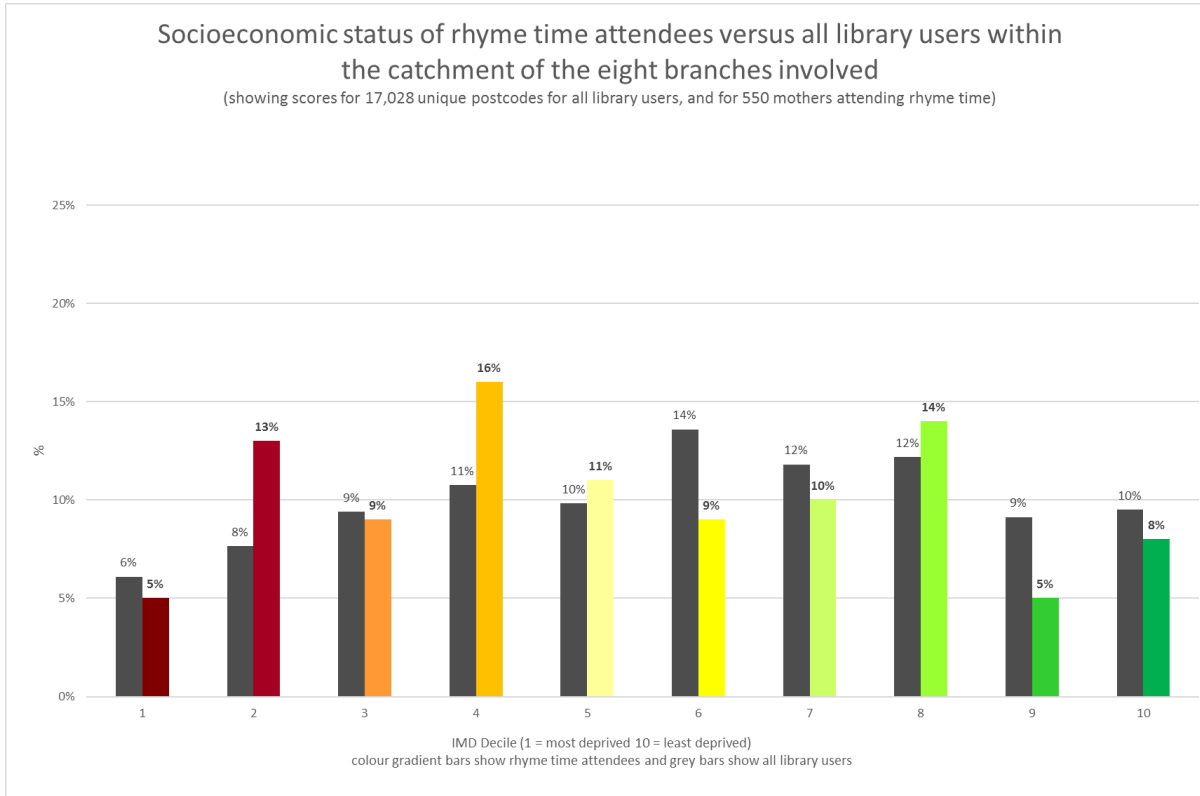
#### How people find out

8.32 The chart opposite shows how mothers found out about rhyme time. The two most common routes were friends and family (41%), or through the library itself (33%). This was followed by people finding out 'online' (8%). Responses were gathered in open-text fields and similar responses were grouped.

8.33 The proportion of mothers finding out through referrals from other agencies is small, and Essex are keen to increase this. We also found out that the project coincided with a major restructure of the health visitor service and that after this project the timing will be better to work with them. However, this also shows that the most effective routes are direct contact with the library service, and most effective of all – personal networks.



Socio-economic reach

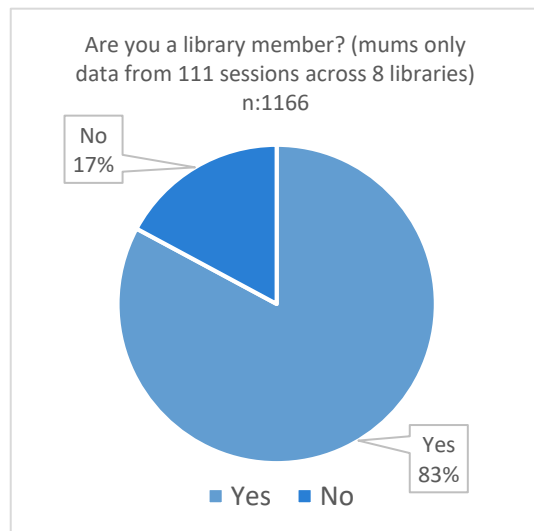


8.34 Taken together the eight libraries involved in the project have socioeconomically broad catchment areas, and this was the intention in selection them. For instance, much of Brentwood’s catchment is relatively affluent, located in the London commuter-belt, while Clacton-on Sea is a coastal community with pockets of extremely low socioeconomic status.

8.35 The table above shows the Index of Multiple Deprivation (IMD) decile spread of mothers attending rhyme times (rhyme times in coloured bars) compared with the IMD spread of all library users in the same catchment areas as the eight libraries in this research (grey bars). It shows mothers from across all IMD deciles attended the sessions with no notable skewing towards upper or lower deciles. It also shows that among rhyme time mothers there was a slightly higher proportion from postcodes falling in to the 2<sup>nd</sup> and 4<sup>th</sup> most deprived deciles, than among users of those same libraries overall. Data for this analysis was gathered using the postcodes collected using the sign in-sheets, and this was compared with postcode data from the main Essex Libraries library card database.

Library Membership

8.36 The vast majority (83%) of mothers who attended the rhyme times are members of Essex libraries. Membership of Essex libraries in the wider population is estimated to be between 20%-30%. In other words, rhyme time attendees seem to come mainly from the pool of existing library members who make up around one quarter of the population overall.



## Fidelity: can a more structured approach to rhyme times be implemented consistently in a public library context?

- 8.37 At the outset the expert group framed a 'feasibility and fidelity' challenge – by which they meant, is it feasible to implement this type of modified approach and gather sufficient data about it, and can modified rhyme times be delivered with an acceptable level of fidelity and consistency?
- 8.38 Overall we have seen from first-hand observations, and heard from staff, that modifications have been delivered with consistency and discipline, broadly in line with the original plans.
- 8.39 However, we also saw a degree of variation and difference in practical approaches and this can make a noticeable difference to attendee experience. There can be:
- differences in how specific modifications were applied (e.g. choice of words)
  - differences in the choice of modifications to apply
- 8.40 In our own observations we have seen modifications delivered with some practical differences in different libraries, as well as differences in the style of delivery. For example, some staff have louder and clearer voices, and pay more attention to addressing regular attendees by name. We also saw how some staff used a selection of books to structure the rhyme time (reading from one book after another) while others used books occasionally and instead recited rhymes and songs from memory.
- 8.41 We have already described how each library chose their own combination of modifications to apply. There were also some branches who had to abandon modifications they had wanted to deliver. The most notable were Clacton and Colchester who wanted to serve refreshments after each session to encourage socialising – but the logistics of this proved too difficult.
- 8.42 In staff meetings and workshops convened for this project, examples of differences in approach were discussed and reflected upon. For example, one modification is to ask parents to introduce themselves to their neighbours at the start of each session. Staff from some libraries did this by saying *"we'd like you to introduce yourself to the person next to you"* meaning for each adult to say their name, whereas in Colchester staff said *"say 'hello' to the person next to you"* i.e. 'hello' with no obligation to say your name. The latter was found to work better. Staff from other branches then decided that they would start taking the *'say hello'* approach.
- 8.43 Finally, there were concerns among staff about the combined effect of trying to provide too much information during the sessions and adding in new content or routines - all within the 30-minute format. In our most recent discussion with the library staff several expressed concerns about the amount of information they now need to convey at the start of each rhyme time and that this risked squeezing the time left for the rhyme time itself; some staff had included some of this information on the leaflet they would hand out, to cut the amount of verbal information required.

### New rhyme time staff training materials produced by Essex

- 8.44 In December 2017 Essex libraries launched a set of revised staff training materials for rhyme time delivery which incorporates eighteen of the full list of modifications – those being ones staff felt could be most easily applied. Although we had not expected the modifications to be formalised into Essex Libraries mainstream processes quite so quickly, this has been a hugely positive development



and essentially synthesises the findings of this research from a practical perspective and operationalises them.

8.45 It also deals, in one go, with many of the issues around differences in approach. The new training materials are based on implementing the following eighteen modifications:

#### Setting-up

- Set-up a noticeboard with details of activities and support including for mental health
- Staff to be in the rhyme time area of the library 15 minutes before and after the session to welcome and encourage attendees to socialise - welcome anyone 'hanging back'

#### Before the session:

- Look out for new mums and encourage them to chat to more experienced mums
- Ask who has not been before – make them feel welcome

#### During the session

- Recognise the achievement of getting to rhyme time
- Explain rhyme time can help with maternal mental health
- Explain socialising is important especially for mental health
- Say not to worry if you don't know the words, or if your child cries
- Encourage adults to learn songs and sing along
- Explain about adult-child interaction and getting a mood boost
- Welcome song – always the same
- Always have one face-to-face song and explain about 'happy hormones'
- Goodbye/finishing song – always the same
- Encourage adults to sing to their children at home

#### Afterwards:

- Reminder to stay and socialise – offer refreshments if possible - look out for new attendees
- Point to information sources and promote other events
- Give out flyers including welcome/finishing song and sources of local support
- Remind about noticeboard



## Secondary research questions

### 4 - What role do staff skills have in modifying rhyme time? What is the most effective way(s) of enhancing staff skills, so rhyme time has a positive impact on maternal mental health?

- 8.46 Staff have played an integral role in designing and delivering the modifications. The modifications were developed jointly by the frontline staff, Shared intelligence and members of the expert group. Frontline staff then undertook an important step in which they each consulted with colleagues in their own branches to check that everyone at that branch was comfortable with the modifications to be implemented. This meant staff felt these were ‘their’ modifications of which they had ownership.
- 8.47 In terms of skills we recognised from the outset that using rhyme times to support mental health would present challenges in terms of staff skills. This was reinforced at meetings with staff early on in the project when frontline staff explained that they were unsure how to discuss mental health with rhyme time users – for instance what language and vocabulary to use, as well as concerns they might come across needs which they did not know how to meet.
- 8.48 For these reasons project budget was allocated to commission a training programme. The training took place in early October 2017 and frontline staff from all participating libraries took part except for Witham where staff scheduling made this impossible.
- 8.49 Another skills and knowledge issue was around data capture and management. Some staff submitted data which seemed to be complete (based on the number of sessions we knew had taken place), whereas others submitted data which was obviously incomplete. We used meetings with staff to show how we had used the data they had collected in the hope it would incentivise better collection. Some staff comments later in the project suggest this may have had a positive effect.

### 5 - Which existing networks and which new ones can be used to reach mothers with low to medium mental health issues? Which are most effective for which groups of mothers?

- 8.50 Although we had hoped to investigate networks as a means of increasing reach, we did not pursue this for reasons of overall project resource and the likely complexity of this task.

### 6 - What are the advantages and disadvantages of a co-production approach with users of rhyme time? Is co-production an intervention in itself and if so, how does it have an impact?

- 8.51 Co-production with library staff proved integral to staff being motivated to implement the modifications. Their early involvement in the process of creating the modifications meant those involved felt close ownership of the project.
- 8.52 In terms of co-production with parents, in January 2018 towards the end of the research phase a session was held with parents and adult carers at Clacton-on-Sea library. The primary purpose of this session, which took place after a rhyme time session, was to co-design promotional material (a flyer or leaflet) aimed at promoting the sessions as support for mothers and maternal mental health, as well as babies and toddlers. This co-production session was a success, enabling us to find out ways to adapt current rhyme time promotional materials to advertise and promote the sessions as something that is enjoyable to mothers as well as their children. The session resulted in a very clear brief for future publicity based on messages like “Have you had one of those mornings? Why not try going to rhyme time?” Parents also gave a strong steer towards graphical rather than text based materials, and to be direct about mental health, but to use humour to avoid worthiness.

### 7 - In what ways does a 'whole library' approach enhance rhyme times modification? What training/ support is needed for library staff?

- 8.53 From the focus groups with frontline library staff involved in the project, it was clear that where other library staff (customer facing and managerial) understood the benefits of rhymes and what this project was trying to achieve, this made the modifications easier to implement. This helped in practical ways such as giving some flexibility to enable staff leading rhyme times to stay on with parents for a few minutes afterwards rather than moving immediately to another task. Having supportive managerial staff also helped in terms of enabling changes to routines or procedures to happen smoothly but also gave frontline staff confidence that they had permission to do things differently or try things out. The county Registration Service (for births and deaths) recently moved their public facing teams to Essex libraries. This provides further opportunities for a 'whole library' approach to rhyme time because of the new parents it brings into libraries. Similarly, the fact that the health visitor service has now completed its major restructure means that avenue of cross-referral can also now be enhanced.
- 8.54 After the Parents1<sup>st</sup> awareness training some staff felt it would be valuable training for all public-facing staff to have, especially given prevalence of maternal mental health problems and the fact that young children and their parents make up such a large proportion of Essex Libraries users. More broadly, we have also heard how this project has changed thinking among the Audience Development Officers who supported this project and whose responsibilities cover the entirety of the library service. Two statements from them from capture this well:
- We used to look at rhyme times from a child's point of view, but it has showed us just how phenomenal it is for mums.*
- We looked at mothers differently – who was that mum we didn't recognise, or the one sat quietly?*
- 8.55 This new mindset was also seen among front-line staff who said they had begun to focus on the needs of mothers and adult carers and not just child development. They said they felt more aware of how rhyme time groups interact as a whole, and that the project had prompted them to consider why someone was quiet, or seemed unengaged – and they felt better equipped to do something.
- 8.56 Towards the end of the project we briefed senior staff from the library service and other Essex County Council managers on the draft findings. Senior staff (including from social care) were very interested in the findings and there was vibrant and engaged discussion. There was also interest in the data gathering aspect of this project and how it links to Essex County Council's strategic goal of real-time data becoming central to service management and delivery. However, it was also clear that council managers outside the library service had probably not imagined the library service could impact maternal mental health in this way.

## 9 Conclusions

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### Impact

- 9.1 Rhyme time attendance has a positive effect on the mood and mental well-being of mothers. Our data from libraries where the modifications were implemented shows mothers experience an immediate uplift in mood during the 30-minute sessions and even allowing for normative bias this effect is stark. Mothers told us this was due to being in a group, the warm welcome, singing and reading, and seeing their child interact and develop. For many, simply getting to the rhyme time brought structure to the day, a sense of achievement, and half an hour of much-needed respite.
- 9.2 Mothers also felt they benefited from rhyme time attendance in the longer-term - over successive weeks and months; through increased personal confidence and confidence as a parent, sense of routine, and new friendships. For those who find it difficult to leave the house (through anxiety or lack of motivation) rhyme times can be particularly positive. What we have not been able to uncover fully is the extent these effects were experienced by mothers attending rhyme time in other parts of Essex where the modifications were not introduced, or indeed prior to this research. However, mothers made specific reference to modified aspects of the format; including warm welcome, parents and children singing together, and socialising with other parents afterwards.
- 9.3 The effectiveness of rhyme times can only be understood if there is a good flow of data about reach, and user benefit. The data gathering demands on staff during this project were more than could be sustained over the long term. But without basic data staff will be 'flying blind' in terms of reach and impact. There is an important question of how much data can (e.g. in terms of staff time, or indeed GDPR) or should be collected and we make recommendations below. However, with Essex Council moving towards services being informed by real-time data, the direction of travel is toward better and more efficient data. In this context the scanning of users' library cards at the start of each rhyme time (which does not yet happen) seems an important step that should be developed.

### Reach

- 9.4 Almost three quarters of adults attending rhyme times are mothers, and of these most are first time mothers. In other words, rhyme times are reaching (among many others) the demographic this research was interested in. Across Essex we estimate rhyme times may reach 4,000-5,000<sup>8</sup> individual mothers each year – one in five of whom (800-1,000) could be suffering from some form of maternal mental health problem. For comparison, NHS England's national target (in Stepping forward to 2020/21) is to provide support to an additional 30,000 women each year nationwide.
- 9.5 Besides large-scale reach, rhyme times are also attended across the socio-economic spectrum including by those living in some of the most deprived postcodes in Essex (which includes some of the most deprived postcodes in the country). Also relevant to 'reach' is that awareness of rhyme times appears to spread principally through friendship and social networks (libraries themselves are the second most common route to finding out). This combination of large-scale platform, inclusive

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<sup>8</sup> Estimate based on 2,800 rhyme time sessions per year, 13% of attendees at any session being first-timers, average attendance of 15 adults per branch per week, average of 70% of adult attendees being mothers.

reach, and awareness transferring via human social networks, makes rhyme times a fascinating case in terms of public service innovation, with potential relevance beyond maternal mental health.

- 9.6 Most of those attending rhyme times are already library users, which (if we assume library usership in the wider population to be around 20%-30%) leaves two-thirds or more of the population who could also be reached. Generating more referrals from other public agencies seems to be an important route for attracting people of different backgrounds. However, the evidence of awareness primarily spreading socially, opens other interesting possibilities. The proportion of mothers finding out from a health visitor was small, and not helped by a recent major reorganisation within the service. The reorganisation is now complete which may provide an opportunity to increase referrals (e.g. from those with weak social networks). Having Registration Services re-located into public libraries is another opportunity to market rhyme time beyond library members.

## Fidelity

- 9.7 This research has shown rhyme times can be modified, and can be delivered with a degree of consistency. It has also been possible to gather data on impact, reach and operation of the process. The consistent and disciplined approach of frontline staff in applying the modifications stemmed from their sense of ownership and involvement in creating the modifications and their enthusiasm and motivation to support maternal mental wellbeing. Essex have now made some of the modifications mainstream practice through revised training for staff across their 74 libraries. The modifications included in the Essex training come from this research and are those which staff feel can be delivered easily, consistently, and sit together coherently. This is perhaps one of the most important immediate legacies of the project.
- 9.8 It is also relevant to note that in parallel with this project Essex Libraries, in other parts of the county, were using Arts Council England's 'Quality Principles' for children's and youth arts practice to develop systems for ensuring quality more generally across library-based rhyme times<sup>9</sup>.
- 9.9 Among frontline staff there has been a dynamic process of sharing practical details of how specific aspects are managed (e.g. encouraging people to say hello to one another) and this is a good example of how the modifications are not fixed in stone. However, this poses a challenge for the future about how to build-in a process of continual learning and improvement, and local specificity, whilst retaining consistency and fidelity to approaches which are based in evidence.
- 9.10 As important as doing the same things on a practical level, is the issue of frontline staff having consistent skills and knowledge. We have seen how the skills of individual rhyme time leaders influenced attendee experience. We also heard from frontline staff (and their managers and colleagues) how learning more about maternal mental health helped them see rhyme time and the modifications differently - and how this combined with their growing sense of agency. Beyond those staff leading rhyme time, support from managerial staff also helped changes happen smoothly and ensured frontline staff felt they had permission to do things differently. As the modifications are rolled-out after this project it seems a vital ingredient is providing all library staff with some knowledge of rhyme time and the relationship with maternal mental health.

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<sup>9</sup> The [rhyme time and seven quality principles toolkit](#) has been developed by ASCEL and Arts Council England and was trialled by Essex Libraries during 2017.

# 10 Recommendations

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## Recommendations for Essex Libraries and the county council

- 10.1 We hope these findings provide Essex with a strong business case for expanding modified rhyme times to all Essex libraries, and that these findings underscore the importance of the maternal mental health awareness training which has been integral to the success of the approach.
- 10.2 We also recommend Essex continue gathering data to monitor quality and impact routinely:
- Attendee data.
  - Post-It exercises asking attendees what made the most difference - this should be periodic, and analysis should look at what session content is valued most by users.
  - Conducting ten 1-1 interviewees each year with users who say rhyme times have led to some kind of change, to grow the collection of stories and identify changes over time.
- 10.3 We recommend Essex consider introducing systems which result in rhyme time attendees having their library cards scanned just as they would if they borrowed a book, to deliver accurate real-time data on reach and unique attendance. An added benefit to doing this is that it would also encourage those attendees who are not already members to join and receive a library card.
- 10.4 We recommend Essex also implement the following to increase reach and impact of rhyme times:
- Hold an annual staff reflection session to review data and identify opportunities to increase impact.
  - Build on existing joint work with health visitors and Registration Services by developing and strengthening promotional campaigns and referral pathways to rhyme times.
  - Develop and test new methods for increasing rhyme time reach via current users, in particular to reach; those who do not use libraries otherwise, first time mothers, mothers who may be facing isolation or loneliness.

## For other public library services nationally

- 10.5 We recommend all library services consider applying the learning and practical tools from this research, in particular; the modifications, the evaluation framework, and data gathering tools. These should be considered alongside awareness training in maternal mental health for customer facing staff. To support this recommendation, we have produced a short practice-focused document including those shareable tools. We view the following steps as essential for any service applying this learning:
- Deciding what the strategic justification is for adopting this approach and how it links to the work of other agencies.
  - Discussing the modification list and associated evidence with those who lead rhyme times directly, in relation to their current practice and procedures.
  - Deciding what data to collect and what sorts of results will be evidence of success.

- Providing staff with basic awareness training about perinatal and maternal mental health.
  - Scheduling meetings to discuss progress, solve implementation hurdles, and agree improvements.
- 10.6 Convene discussions with local NHS colleagues to agree how to align library-based rhyme times with NHS-led activity to improve perinatal mental health community services and spending of national development funding, and to make plans for ensuring greater complementarity (e.g. looking at demographic or geographic segments libraries are reaching which NHS services are not).
- 10.7 Consider undertaking a larger-scale version of the Essex project, for example as a sub-regional collaboration, or aimed at other health challenges beyond maternal mental health.

### For national organisations

- 10.8 We would encourage national sector support bodies (Arts Council England, the Libraries Taskforce, DCMS, ASCEL, the Society of Chief Librarians, and CILIP) to give timely consideration to these findings at appropriate fora and identify how they can apply the learning for example:
- Libraries Taskforce – explore with other Government and Local Government colleagues how these findings can be applied for example by linking with NHS England’s development programme for perinatal mental health and local activity focused on improving support for perinatal mental health.
  - Society of Chief Librarians – use national events and publicity to support library services to learn about and use the tools and materials from this research for rhyme time delivery and maternal mental health awareness.
  - Society of Chief Librarians and CILIP – consider whether existing platforms and programmes for sector-wide learning and skills development could be used to transmit the learning from this project.
  - Society of Chief Librarians and ASCEL – undertake further research into the challenge of building quality and consistency in this approach and other low-intensity community-based interventions delivered through libraries.
  - Society of Chief Librarians and ASCEL – look specifically at incorporating learning from this research into ASCEL’s rhyme time and seven quality principles toolkit
  - Arts Council England – review how the findings of this research can be built upon through existing investments including the Library and Literacy NPOs, and through future research relating to music, mental health, and early years literacy (including any future work based on the findings of the Royal College of Music study into singing to babies and PND).
  - Arts Council England – explore potential to work with creatives to develop engaging, graphical promotional materials (based on co-production session with parents) which could be used nationally.
  - DCMS – include these findings as inputs to the Mental health and Wellbeing Evidence Review.

## For researchers and research funders

10.9 We recommend that relevant research organisation and research funders make use of these findings as a pilot and feasibility study towards further research (possibly experimental) on a larger scale, using this work to demonstrate:

- There is a worthy and timely topic of investigation here in terms of the mental wellbeing effects of library-based rhyme time sessions and the importance of maternal mental health in terms of health policy.
- A library-based approach can be delivered with reasonable consistency across multiple sites (i.e. library branches).
- Data and evidence gathering has some challenges but is feasible, and comparators or baselines can be easily envisaged.

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# Annex 1: Table of modifications

	Modification	Basildon	Braintree	Brentwood	Chelmsford	Clacton	Colchester	Gt Baddow	Witham	NOTES
<b>RT sessions</b>			Started Sept					Started Sept		
Before session	Recognise achievement of the parent getting to a RT	✓	✓✓	✓	✓✓	✓	✓	✓	✓✓	
	Buddy up multi-mums with new mums			✓		✓✓		✓✓		Basildon were going to but decided against
Main session	Have parents introduce themselves to their neighbours or other members of the session		✓✓	✓	✓✓	✓✓			✓✓	Basildon were going to but decided against
	Explain parents and children can get up and move around at all times, and put them at ease about the possibility of their child crying	✓✓	✓	✓	✓✓	✓	✓	✓✓	✓✓	
	Encourage parents to join in and reassure them that it does not matter if they do not know the rhymes and songs	✓	✓	✓	✓✓	✓	✓	✓	✓	
	Explain that rhyme time benefits both parents and children - children have fun and learn stories, whilst parents have a good time too	✓✓	✓✓	✓	✓✓		✓	✓✓		<b>Key</b>
	Introduce what you're going to do at the session	✓	✓	✓	✓✓	✓	✓	✓	✓	✓✓ = Introduced specifically for the project
	Welcome song (each branch to choose their own song which is already used/already familiar to visitors)	✓	✓	✓✓	✓✓	✓✓	✓✓	✓✓	✓	✓ = Branch was already doing something similar
	Include at least one synchronised <b>face to face</b> song or story (synchronised actions or singing) and explain the reasons for doing this are that parents get a mood boost from this	✓	✓	✓	✓✓	✓	✓	✓	✓✓	GREY FILL = Branch not doing it before, and not introduced it
	End the session with a goodbye song (own song which is already used/familiar)	✓	✓	✓✓	✓	✓	✓	✓✓	✓	
	Conclude the session by encouraging parents to sing the songs and rhymes at home	✓✓	✓✓	✓✓		✓✓	✓✓	✓✓		
	Conclude the session by encouraging parents to sing the welcome song at home or on the way to the session	✓✓		✓✓			✓✓			
After session	Point RT participants to the refreshments		✓			✓✓	✓✓			Basildon used to do this in conjunction with the café but can no longer do so
	Interaction with parents: "will we get to see you next week?", "Are you a library member..."	✓	✓✓	✓	✓✓	✓✓	✓	✓	✓	
	Teas and coffees, or bring your own		✓			✓✓	✓✓			Clacton and Colchester have been unable to provide refreshments but they do tell people about the onsite café
	Encourage parents to stay and read children's books aloud after the session		✓✓	✓	✓✓	✓	✓	✓	✓	
<b>Stock, materials and physical resources</b>										
	Have promotional materials visible nearby for other parent activities such as a mini book groups	✓	✓		✓		✓✓		✓	
	Provide materials or suggest resources which will raise mums' confidence in singing and rhyme at the library and at home, eg. TLC card	✓✓	✓	✓		✓	✓	✓✓	✓	
	Have multiple sets of childrens books so that group reading can be suggested after the session					✓		✓✓		
	Promote resources which signpost a range of local services that may benefit maternal mental health, including online resources, eg. Leaflets	✓		✓	✓	✓✓	✓✓	✓✓	✓✓	
<b>Physical setting</b>										
	Make sure the layout enables parents and children to sit together	✓	✓	✓	✓	✓	✓	✓	✓	
	If possible have space for parents to informally stay and chat	✓	✓	✓	✓	✓	✓	✓	✓	
	Have enough space at the session for refreshments (provided by library or bring your own)		✓				✓		✓	Basildon used to do this in conjunction with the café but can no longer do so
	Have a nearby noticeboard/display stand with flyers for activities which might be beneficial to all parents, but in particular mothers with mental health issues	✓	✓	✓✓	✓		✓✓	✓✓	✓	
	If possible make use of furniture and fittings (e.g. shelving, rugs) to define the Rhyme Time space	✓	✓	✓	✓	✓	✓	✓	✓	
<b>Design an A6 card with the following</b>										
	"You are always welcome even if you don't know the words, and we don't mind at all if babies or children cry!"	✓✓	✓✓	✓✓	✓✓	✓✓	✓	✓✓	✓	All branches now doing this using Clacton A6 Card
	Include the welcome song lyrics and encourage parents to practice singing it	✓✓	✓✓	✓✓	✓✓	✓✓	✓	✓✓	✓	All branches now doing this using Clacton A6 Card
	Include links to websites which will raise confidence in singing and rhymes	✓✓	✓✓	✓✓	✓✓	✓✓	✓✓	✓✓	✓	All branches now doing this using Clacton A6 Card
	Include links to a range of local services (county wide service, or local support groups) which will benefit maternal mental health, including online resources	✓✓	✓✓	✓✓	✓✓	✓	✓✓	✓✓	✓	All branches now doing this using Clacton A6 Card

## Annex 2: Evaluation framework

Capturing changes for individuals			
High level evaluation questions	Outcomes: <i>What change will result? What will success look like?</i>	Indicators: <i>What are the indications that you being successful? What are the signs that things are changing?</i>	Data collection: <i>Measuring the indicators. What needs to be collected and when?</i>
MAIN RESEARCH QUESTIONS			
1 – Do the modified rhyme times have a positive impact on maternal mental health? If so, how?	<u>1a High level</u> Mothers attending experience improved mental health and wellbeing (over time)	Mothers say mood has improved during sessions Mothers feel more positive over a longer period Mothers feel rhyme times support their mental wellbeing Mothers feel rhyme times are helping their child	<ul style="list-style-type: none"> <li>• Mood charts – <i>(Before and after) How are you feeling today? Out of 1-5</i></li> <li>• Focus groups with users</li> <li>• Change stories with opted-in volunteers willing to speak about impact over time</li> </ul>
	<u>1b Mid-level</u> Mothers enjoy rhyme time, can identify benefits for them and get involved (e.g. co-production)	Mothers participate in rhyme time activity Mothers show increased confidence in reading aloud/singing at home Mothers feel positive about their child Mothers make new friends at rhyme time New mothers attend regularly Mothers join the library	<ul style="list-style-type: none"> <li>• Observations – <i>e.g. Levels of engagement; levels of group interactions</i></li> <li>• ‘Questions Board’ with post it notes. <i>Question: What part of today’s rhyme time made the most difference to how you feel?</i></li> <li>• Sign-in sheets (below)</li> </ul>
2 – What is the reach of these activities and can it be increased?	3. A wider range of mothers attend rhyme time regularly	Mothers attend from post codes that were previously under represented There is a steady flow of new attendees Rhyme time attendance reflects the local community demographically Mothers attend who have low mood or perinatal mental illness	<ul style="list-style-type: none"> <li>• Sign-in sheets to capture: <ul style="list-style-type: none"> <li>○ Unique numbers attending – <i>plus “who is here for the first time?”</i></li> <li>○ Characteristics - gender, relationship to child (parent, carer), first time mother/multi, ethnicity, post code, how they found out</li> </ul> </li> <li>• Referral data, self-reporting - <i>requires liaising with health visitors</i></li> </ul>

	Capturing changed processes – to address the evaluation questions and understand the contributors to outcomes		
	Changed processes	Indicators	Data collection
3 - Can a more structured approach to rhyme time be implemented consistently in a public library context?	Rhyme time is modified consistently	Rhyme Time implements new modifications	Staff reporting  Focus groups with managers and partner agencies/services  Independent Observation
SECONDARY QUESTIONS			
4 - What role do staff skills have in modifying Rhyme Time? What is the most effective way(s) of enhancing staff skills, so Rhyme Time has a positive impact on maternal mental health?	Staff feel confident running modified rhyme times	Staff undertake training (awareness of maternal mental health/ how to modify rhyme times)  Staff report training as making a difference	Records of staff training sessions run  Numbers attending  Staff survey and/or focus group
5 - Which existing networks and which new ones can be used to reach mothers with low to medium MH issues? Which are most effective for which groups of mothers?	Range of networks/ contacts used to promote/ refer to Rhyme Time	Community sector and health service professionals know about Rhyme Time and actively promote it	Records of inter-agency contacts  Interviews/focus group with contacts  Cross reference with participant records/register on how heard about rhyme time (above)
6 - What are the advantages and disadvantages of a co-production approach with users of rhyme times? Is co-production an intervention in itself and if so, how does it have an impact?	Co-production	Data and feedback from parents is used in the design of modifications  Parents are involved in testing and assessing modifications  Leads to better approaches	Evidence of parent involvement in design  Cross reference between parent feedback and modifications which parents have influenced

	<b>Capturing changed processes – to address the evaluation questions and understand the contributors to outcomes</b>		
	<b>Changed processes</b>	<b>Indicators</b>	<b>Data collection</b>
7 - In what ways does a 'whole library' approach enhance Rhyme Times modification? What training/ support is needed for library staff?	Rhyme time becomes more integrated with other library services activities	Feedback from staff who are not directly involved in the rhyme times project	Focus groups with staff

## Annex 3: Change stories

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Each change story is from a mother who attended rhyme time regularly during 2017, and who volunteered to be interviewed in response to a request from Essex Libraries for women who felt rhyme times had benefited them in some way. Real names are replaced with pseudonyms.

A

'Alice' is a new mother with one child and lives in Great Baddow. Alice has been attending rhyme time sessions at the library for three months after seeing an advert in the library window. She felt she was spending too much time indoors after the birth of her child and the monotony was having a negative effect on her mood. She missed the structure of a working day and felt she had lost the social aspect that came with interacting with other adults through work. For her, the notable change brought about by rhyme time attendance is bringing structure back into her day, giving her something to plan her day around. The fact it is free makes her feel less pressure to attend than pre-paid activities. The adult interaction helps with her overall mood and wellbeing, as she feels without it she could go all day without talking to anyone other than her baby. The real change for her is having a regular relaxed event, with adult company, that she can plan her day round.

B

'Bal' is a mother from Basildon with one child. She has attended weekly rhyme time sessions at Braintree library for approximately 20 months, starting when her son was 4-6 weeks old, he is now nearly 2. A friend recommended the sessions to her. She also attends other weekly mother and toddler groups, including Essex Fit Mums and baby swimming classes. Bal suffered from perinatal post-traumatic stress disorder and anxiety after birth, and this knocked her overall self-confidence and confidence as a mother. She feels attending rhyme time has helped her feel a lot more confident as a person and as a mother. Bal attributes her growing confidence to interaction with other mothers on a regular basis. She has also become part of a new friendship group of other mothers who also attend the sessions – which has helped her confidence further. As well as this, seeing her child interact with others and develop also helps her confidence.

C

'Claire' is a mother with two children living in Basildon. Her eldest child is 2 and has been attending rhyme time since birth. She also has a 6 month old, and is pregnant with a third. Claire says one of the most positive impacts of coming to rhyme time is that it adds routine and structure to her day, whereas she gets bored at home. She says the sense of achievement she gets when she attends rhyme time greatly helps her mood. She also has a good group of friends who also attend the rhyme time sessions, and seeing them helps improve her mood when she is feeling down. Claire enjoys rhyme time so much she sometimes tries to get to all three weekly sessions; she says she 'just can't get enough'.

D

'Debbie' is a mother of one from Clacton-on-Sea and has been coming rhymes time at her local library for the last year. She had tried to get into baby and toddler groups held at local nurseries but

was unable to get in, so her sister recommended rhyme time at the library. Debbie suffered from severe social anxiety and used to worry about having to leave the house. Her anxiety was so severe that during the first rhyme time she attended she felt so uncomfortable she began sweating and had to leave early. A year on, she feels more confident and attributes some of this to rhyme time 'forcing her out of her comfort zone'. By this, she means having to interact with strangers which is something she had not felt comfortable with. However, she has pushed herself to interact, and feels this has improved her confidence; now she looks forward to meeting new people at rhyme times.

E

'Elaine' is a mother of one who lives in Clacton-on-Sea and has been coming to rhyme time for a year and a half after her health visitor recommended it to her. She feels attending rhyme time has had a positive effect on her mood, well-being and overall mental health. Elaine sees rhyme time as having a positive effect as they act as an incentive for her to get out of the house, which she needs to do regularly to keep from feeling down. She says that having an actual event to attend is more motivating than simply the prospect of going for a walk. She feels interacting with other people on a regular basis is good for her mental health and if she were unable to go that would negatively affect her mood and well-being. The most notable change she has experienced is an increase in her confidence in terms of interacting with her child.

F

'Fiona' is a mother from Clacton-on-Sea with an 18-month-old. She has been going to rhyme time for just under a year and found out about them from the Essex Libraries website. Fiona feels rhyme time sessions have had a very positive effect on her general feeling of wellbeing. Both during and after her pregnancy she suffered from anxiety and felt fearful of going outside. She says the rhyme time sessions have become a 'safe space' for her. She highlighted the warm, relaxing environment as well as the 30-minute duration as two things that made her feel welcome and 'at home'. She also says that the delivery style of rhyme time adds to her feeling of being in a safe space and that this is partly down to the rhyme time leader at her library who is very welcoming and makes her feel extremely comfortable.

G

'Georgie' is a mother with 2 children and is expecting a third. She has been attending rhyme time at Clacton-on-Sea library for 5 months with her youngest child but went previously with her eldest child. She found out about the rhyme time sessions from her local children's centre. Georgie feels that if it were not for the rhyme time sessions she would sometimes not leave the house, because they act as a simple but necessary form of motivation. She says that because of the structured timing, she has more incentive to go (unlike going to the park or local shops). She feels the sessions make her feel more confident by allowing her to relax in front of other people, having originally felt uncomfortable singing rhymes in front of other mothers. However, now she is very comfortable singing aloud and actively enjoys it, in fact it is now her favourite part of the rhyme times.

H

'Helen' is a mother of two from Clacton-on-Sea. Her eldest child is a 7-year-old girl who came to rhyme time with her childminder. Knowing how much her eldest enjoyed the sessions, Helen

decided to go to the rhyme time sessions with her youngest, a boy now 8 months old. They have been attending since he was 4 weeks old. Helen enjoys mixing with other people as well as seeing the development of her baby at the sessions. Helen used to be less confident than she is now and suffered from anxiety, which initially made her wary of attending the sessions. She feels pride when she manages to make the effort to go, and this helps her confidence. She finds the environment of rhyme time very relaxing and welcoming and the same goes for the personality of the rhyme time leader - both of which have been reasons for to keep coming back. Although she still gets anxious about attending some group activities, she sees rhyme time as having helped her become more confident attending things like this in general.

I

'Izzy' is a mother of two in Clacton-on-Sea who had previously attended rhyme time sessions in London with her eldest child. After her recent move to Clacton-on-Sea she began going to the sessions with her youngest. She sees the rhyme time as one of the many positive aspects of her move from London to Clacton, feeling generally very happy it. Rhyme times are part of that, she prefers them to the London ones that she attended.

J

'Jasmine' is a mother from Witham with a 7-month-old. She has been attending the rhyme time sessions at Witham library for two and a half months. Jasmine feels rhyme times have had a positive effect on her. She says she sleeps better after attending a rhyme time session, as she feels she has engaged in something. They also provide an opportunity to leave the house, something she feels she does not do often enough. She also attends a baby group at the local church, however, she enjoys the rhyme time sessions a lot more. Jasmine likes the sessions as they're local. Because she does not drive she feels she would struggle to make it out of the house were it not for having the rhyme time sessions close to home. She says rhyme times help keep her sane, as they give her an excuse to leave the house. She also enjoys seeing her baby interact with others and generally enjoys the fun environment of rhyme time.

## Annex 4: References/endnotes

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### Areas of evidence:

- Peer relationships enable mothers with poor mental health to seek validation and clarify experiences
- Being able to identify with a social group is beneficial for mental health
- Singing leads to mental health benefits:
  - Singing to babies is associated with enhanced wellbeing, self-reported mother infant-bond, and reduced symptoms of post-natal depression
  - Encouraging infants to learn to follow songs sung by an adult provides a mood boost for adult and child
- Reading aloud in groups helps social, mental and emotional wellbeing
- Synchronous and face to face interaction between mothers and babies is associated with increased maternal dopamine and maternal bonding
- Receiving information and educational materials improves the ability of those with poor mental health to recognise and assess their own mental state

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<sup>i</sup> Anxiety and difficulty leaving the house affects many women with perinatal mental illness which in turn can hinder access to other support. Perinatal mental health experiences of women and health professionals: Boots Family Trust (2013)

<sup>ii</sup> Social networks and peer support enable women to seek validation to clarify experiences. Jones, C. C. G., Jomeen, J., Hayter, M. (2013) The impact of peer support in the context of perinatal mental illness: A meta-ethnography. Evidence on the importance of developing social networks. Hogg, S. (2013) Prevention in mind. All Babies Count: Spotlight on Perinatal Mental Health. NSPCC.

<sup>iii</sup> Evidence suggests the physical act of singing to babies has beneficial effects on the mental health of those doing the act. Royal College of Music (2017) Associations between singing to babies and symptoms of postnatal depression, wellbeing, self-esteem and mother-infant bond.

<sup>iv</sup> The act of singing to babies has found to be associated with enhanced wellbeing, self-esteem and self-reported mother infant-bond, and lower symptoms of PND. Royal College of Music (2017) Associations between singing to babies and symptoms of postnatal depression, wellbeing, self-esteem and mother-infant bond.

<sup>v</sup> This will be decided by the RT leader. This will help build a sense of identity, which evidence has found beneficial to mental health. Tajfel, H. and Turner, J. C., (1986) The Social Identity Theory of Intergroup Behaviour. *Psychology of Intergroup Relations*, 5, 7-24.

<sup>vi</sup> Research has found synchronous maternal behaviour is associated with increased dopamine in the mother's brain. Atzil, S., Touroutoglou, A., Rudy, T., Salcedo, S., Feldman, R., Hooker, J. M., Dickerson, B. C., Catana, C., Feldman Barrett, L. (2017) Dopamine in the medial amygdala network mediates human bonding. *PNAS*, volume 114, number 9.

<sup>vii</sup> Babies as young as 4 months follow and anticipate familiar songs and rhymes when sung to by familiar adult and can make matching sounds and movements. Trevarthen, C (2013) The Infant's voice grows in intimate dialogue: how musicality of expression inspires shared meaning

<sup>viii</sup> Evidence on the importance of developing social networks. Hogg, S. (2013) Prevention in mind. All Babies Count: Spotlight on Perinatal Mental Health. NSPCC.



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- <sup>ix</sup> Social networks and peer support enable women to seek validation to clarify experiences. Jones, C. C. G., Jomeen, J., Hayter, M. (2013) The impact of peer support in the context of perinatal mental illness: A meta-ethnography. Evidence on the importance of developing social networks. Hogg, S. (2013) Prevention in mind. All Babies Count: Spotlight on Perinatal Mental Health. NSPCC.
- <sup>x</sup> . Billington, J., Dowrick, C., Hamer, A., Robinson, J., Williams, C. (2010) An investigation into the therapeutic benefits of reading in relation to depression and wellbeing. Liverpool Health Inequalities Research Institute and the Reader Organisation.
- <sup>xi</sup> Evidence suggests group reading helps social wellbeing, mental wellbeing and emotional and psychological wellbeing. Evidence around adult reading aloud (still to be found) . Billington, J., Dowrick, C., Hamer, A., Robinson, J., Williams, C. (2010) An investigation into the therapeutic benefits of reading in relation to depression and wellbeing. Liverpool Health Inequalities Research Institute and the Reader Organisation.
- <sup>xii</sup> . Billington, J., Dowrick, C., Hamer, A., Robinson, J., Williams, C. (2010) An investigation into the therapeutic benefits of reading in relation to depression and wellbeing. Liverpool Health Inequalities Research Institute and the Reader Organisation.
- <sup>xiii</sup> Having a range of alternative services in every local area is important. Hogg, S. (2013) Prevention in mind. All Babies Count: Spotlight on Perinatal Mental Health. NSPCC. Research has found those who received information and educational material were better able to recognise depression and assess their own mental state. Buist, A., Speelman, C., Hayes, B., Reay, R., Milgrom, J., Meyer, D., Condon, J., (2007). Impact of education on women with perinatal depression. Research has found the use of social media and chat rooms positively benefit maternal mental health. Khan, L. (2015) Falling through the gaps: perinatal mental health and general practice.
- <sup>xiv</sup> Identifying with a group provides stability, meaning and purpose. Tajfel and Turner, 1986
- <sup>xv</sup> Research found physical environment contributes to the atmosphere of the group. Billington, J., Dowrick, C., Hamer, A., Robinson, J., Williams, C. (2010) An investigation into the therapeutic benefits of reading in relation to depression and wellbeing. Liverpool Health Inequalities Research Institute and the Reader Organisation.
- <sup>xvi</sup> Evidence suggests the physical act of singing to babies has beneficial effects on the mental health of those doing the act. Royal College of Music (2017) Associations between singing to babies and symptoms of postnatal depression, wellbeing, self-esteem and mother-infant bond.
- <sup>xvii</sup> The act of singing to babies has found to be associated with enhanced wellbeing, self-esteem and self-reported mother infant-bond, and lower symptoms of PND. Royal College of Music (2017) Associations between singing to babies and symptoms of postnatal depression, wellbeing, self-esteem and mother-infant bond.