

Creating impact using storytelling in health visiting: A successful outcome for Cumbria and the North East

Deborah James, Claire Bradford, Jane Johnson & Sue Miller

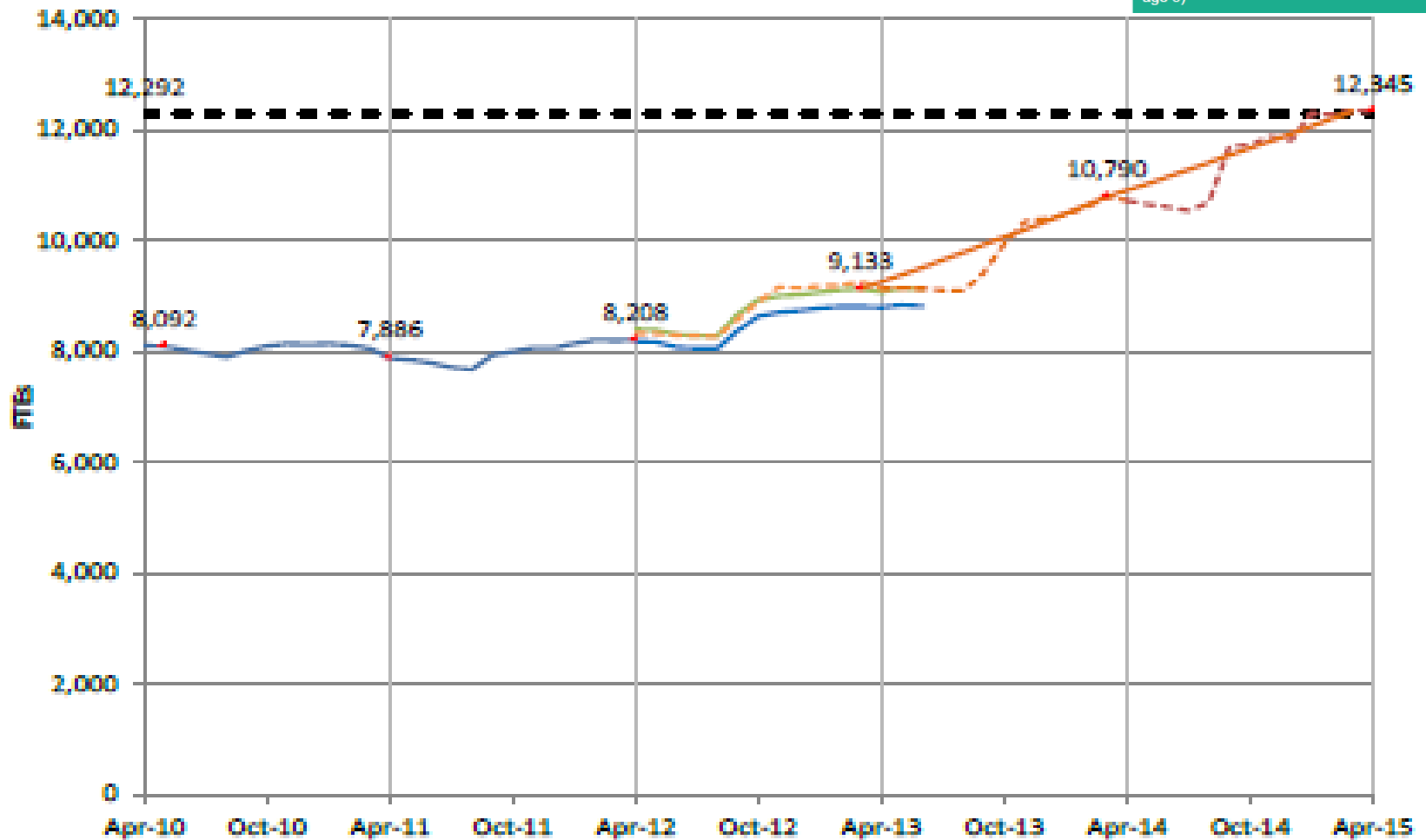
Commissioned by:
Dr Claire Bradford and Jane Johnston
NHS England



Public health functions to be exercised by NHS England

Service specification No.27
Children's public health services (from pregnancy to age 5)

Health Visitor Trajectories, England



After all those years the health visitor recognised the mother and went to her and introduced herself again. The mother was delighted that she had spoken to her, and turned to her daughter and said, “*This is Gill; your health visitor, I couldn’t have done without her!*” and gave her a big hug.

A little while later the nursery staff told the health visitor that the second child was playing well although still quiet and shy some speech was heard.

Following this good progress the mother asked the health visitor for help with toilet training – something she would never have asked before.

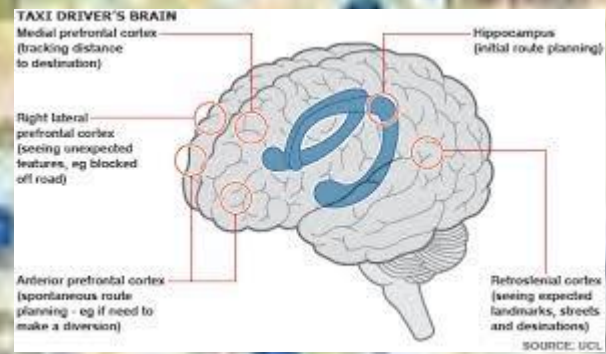
The Health Visitor agreed to liaise with nursery and we will plan a joined up strategy for the toilet training.

Preventive Role of Health Visiting Practice



Handwritten taxi meter receipt from London, showing a grid of time, date, and fare information.

Time	Date	Start	End	Fare
1:50	30.5.11	W	J.M.H.	0.00
2:10	30.5.11	W	ST	1.00
4:20	19. DEC	W	ST	1.00
7:00	7/20	W	MG	15.00
8:00	7.4.11	W	ST	15.00
7:30	25.4.11	W	ST	
8:05	28.5.12	W	ST	
11:15	14.6.12	W	ST	
11:35	25.5.12	W	ST	
12:40	24.6.12	W	ST	



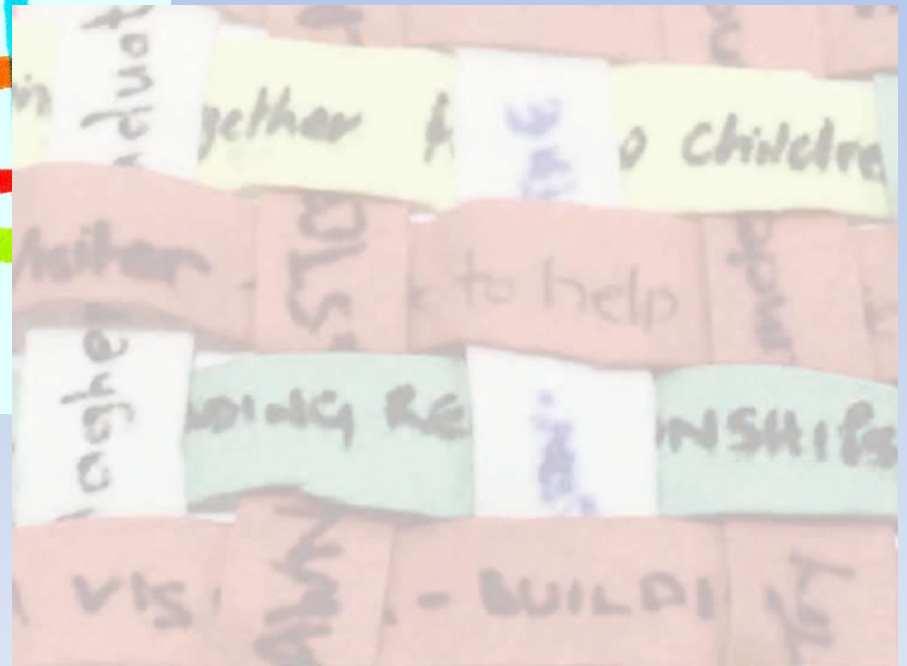
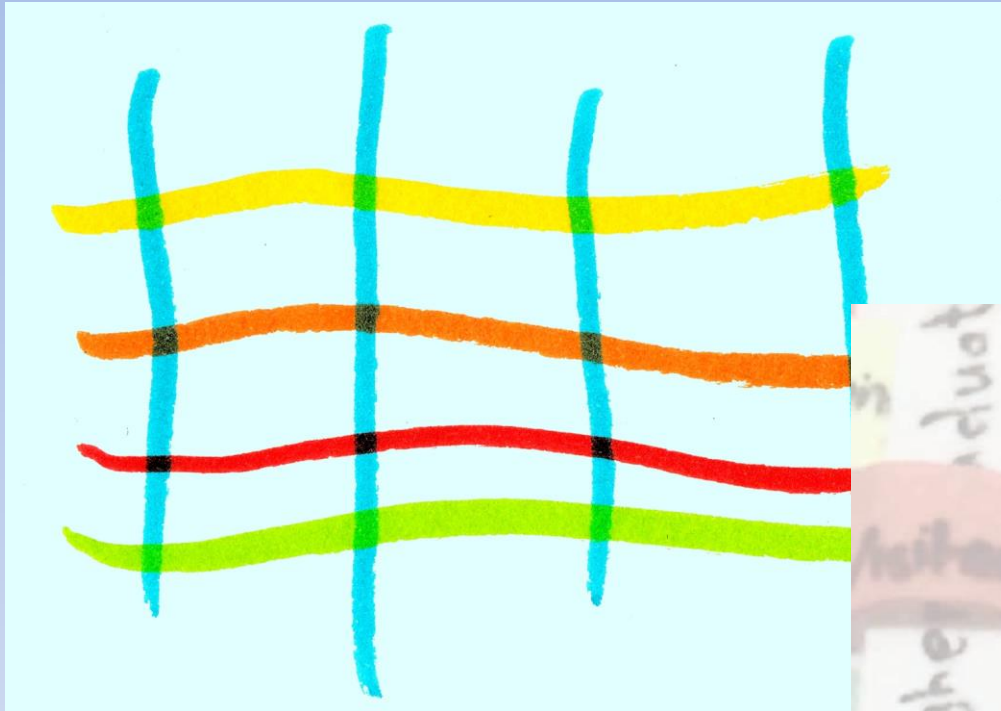
Space to Stop and Story Together



1. Question Wall - ask your questions
2. Weave – name your essence weave it to connection
3. Local BEST Practice Examples - think about building and learning from those examples in the local area
5. IHV – connect with the Institute of Health Visiting
6. Survey Monkey – time to stop and think with guided questions

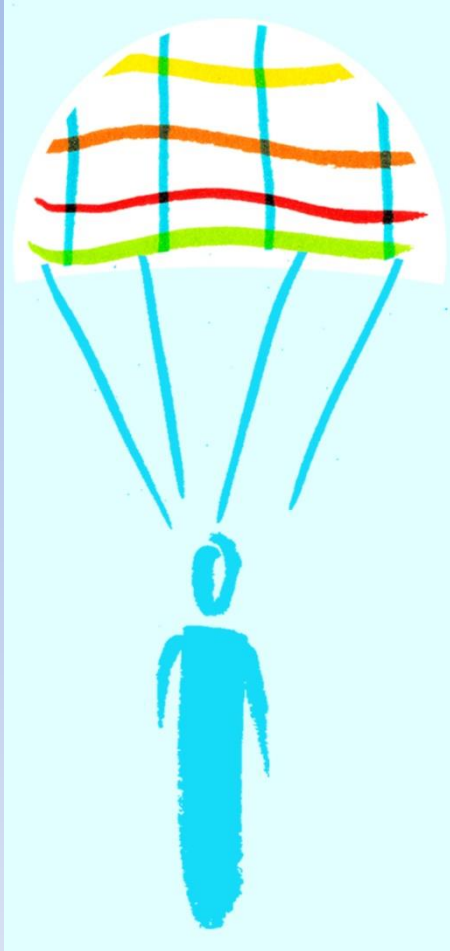


Using metaphor to support concept of integrated workforce with personal narratives



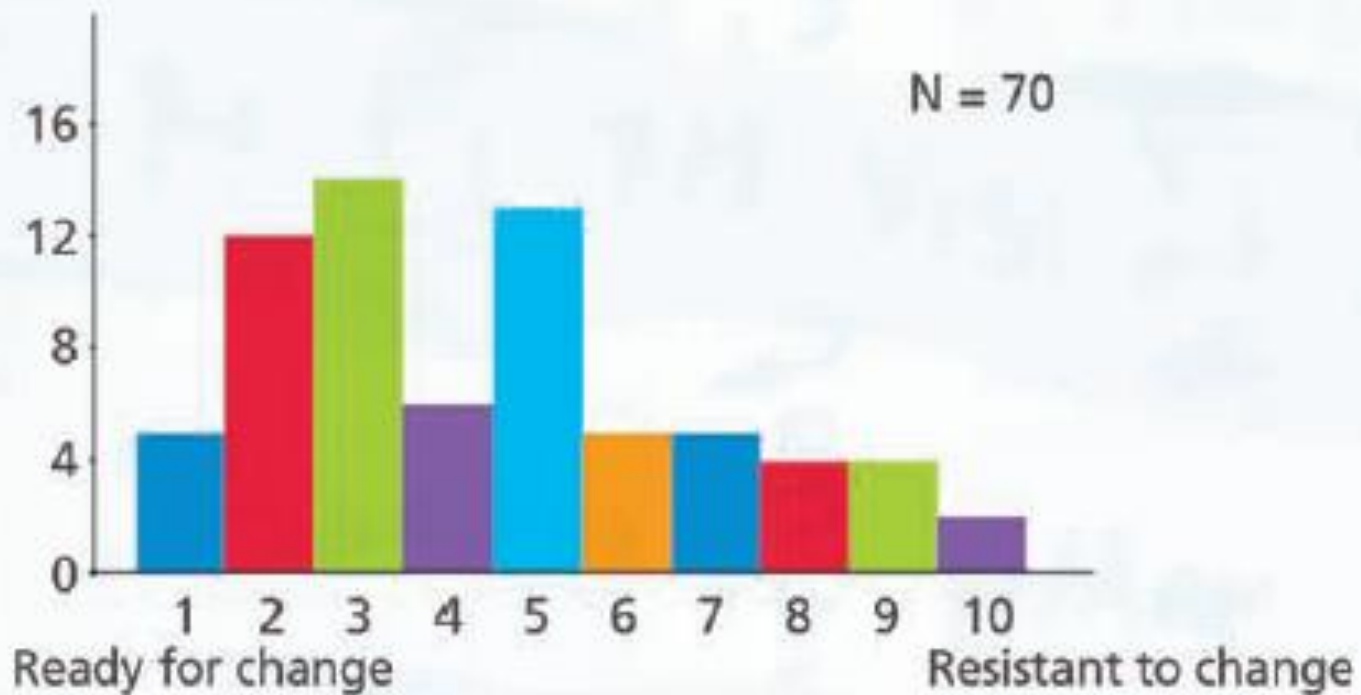






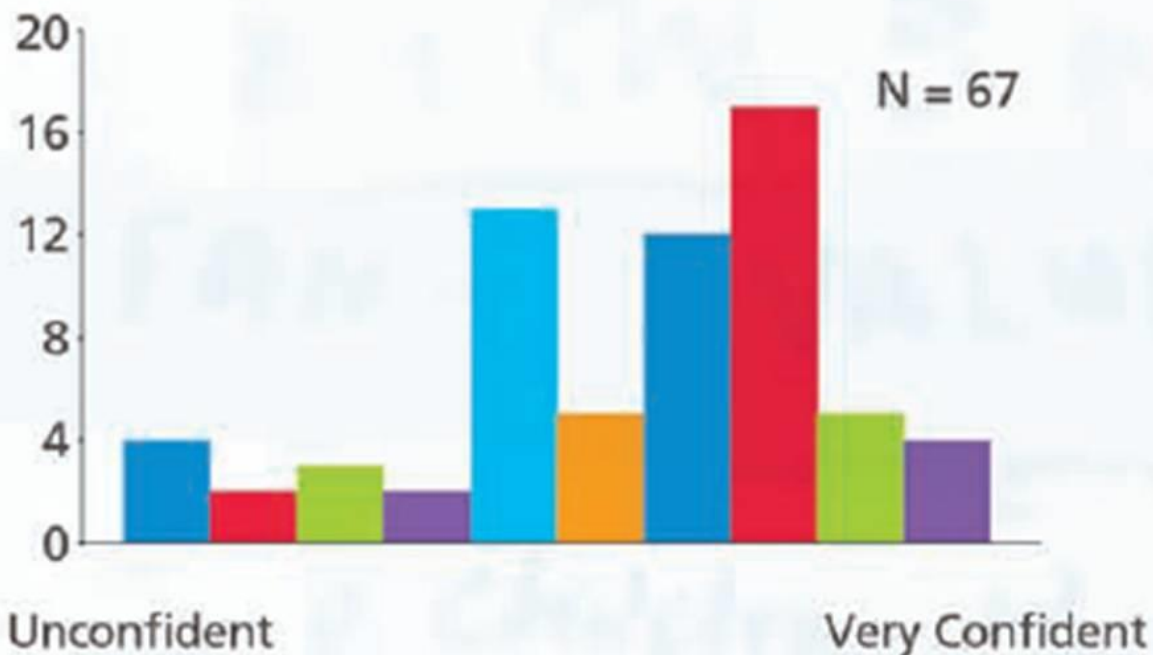
Personally ready for change?

Most of us find change challenging.
On a scale of 1 to 10 where are you?



Confidence to make change happen?

How confident do you feel in your own ability to make the most of the new commissioning arrangements for health visiting?



What is in their narratives and what is not?

A close examination of the responses showed that health visitors, like all of us, found it relatively difficult to 'step into the shoes' of the family or the other practitioners.

There were variations in the content of responses, for example, health visitors said that other practitioners would highlight traditional functional health activity such as weighing babies, immunisation and developmental checks as the main ways that health visitors spend their time. But there was very little differentiation in their responses concerning the unique causal contribution that the health visitor makes through their training in public health, community asset holding, relationship building and observation.

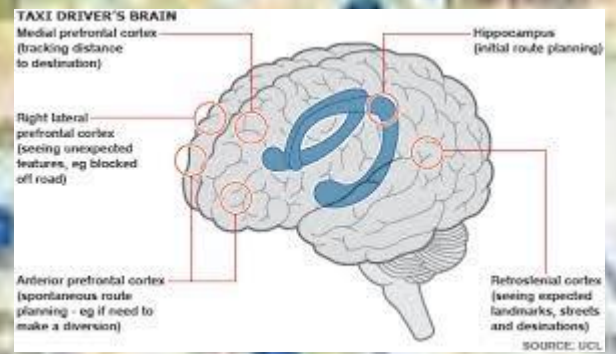
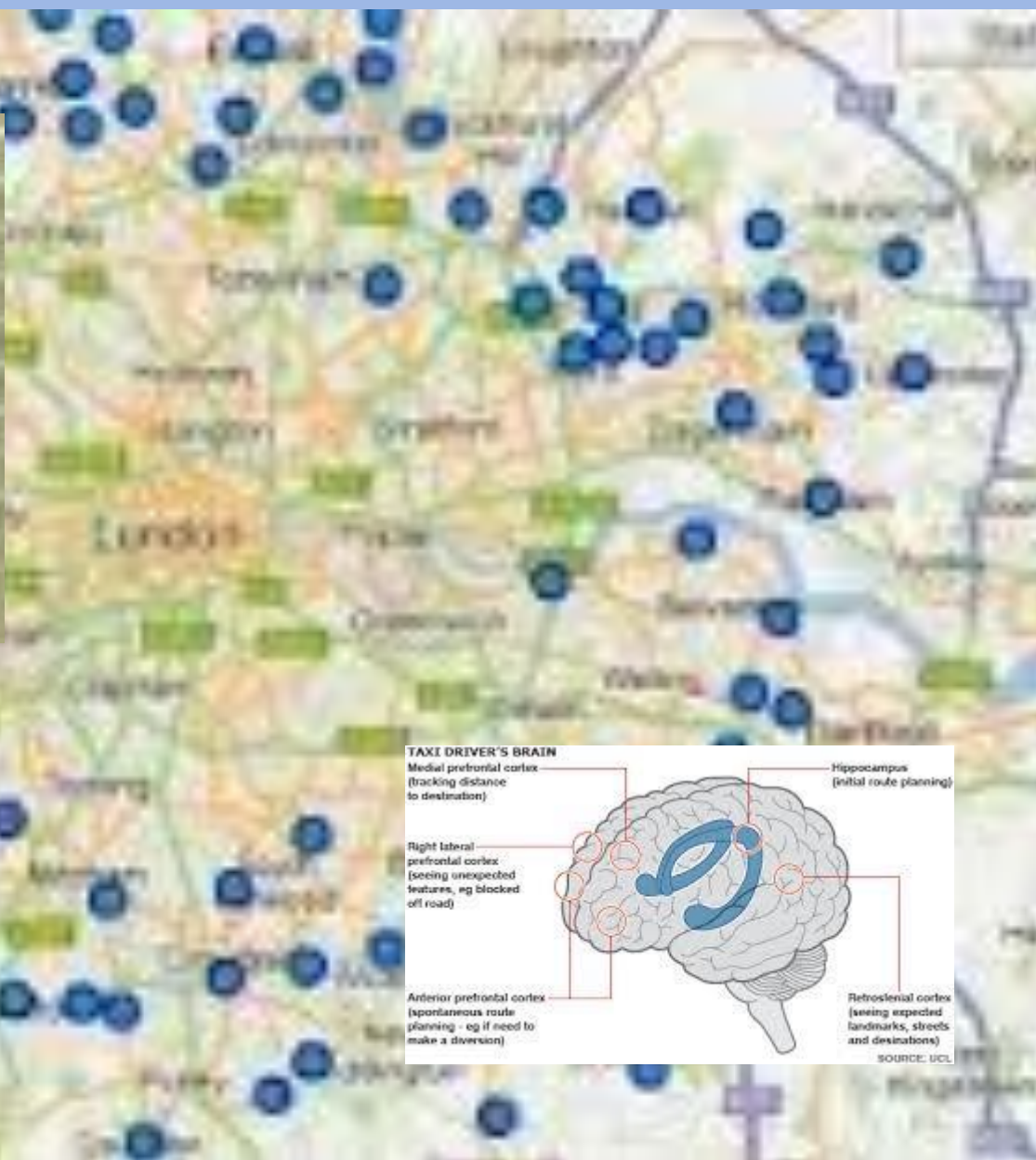
Whilst respondents or health visitors appeared to be aware of the energy being put into the relationship building between health visitors and families, it seems that they do not believe that the message around the value of the public siting of their practice as a universal provision has penetrated or been communicated to the wider workforce.

Given how far the health visiting workforce has moved on in the last ten years their record of how their colleagues view them suggests that they believe that their new strengthened and expanded practice base has not yet reached the consciousness of their colleagues.

Responses from the weave, the pledges and the survey questions showed that the main site of practice that is valued by health visitors is the interaction in the family home. This foundation for health visiting is just as important for the future as it was in the past.

Handwritten taxi meter receipt from London, showing a grid of fares and a handwritten route sketch above it.

Time	Rate	Stop	Notes
1:00	30.5.11	ST	ST
10:10	34.10.11	ST	ST
11:20	39.00.11	ST	ST
12:30	43.00.11	ST	ST
13:40	47.00.11	ST	ST
14:50	51.00.11	ST	ST
16:00	55.00.11	ST	ST
17:10	59.00.11	ST	ST
18:20	63.00.11	ST	ST
19:30	67.00.11	ST	ST
20:40	71.00.11	ST	ST
21:50	75.00.11	ST	ST
23:00	79.00.11	ST	ST



Conclusions and Recommendations

The Challenge

We collected over 2000 pieces of feedback during the workshops. When we were reviewing the findings we were struck by the relative absence of the concept of 'challenge'.

The reason the absence of this concept stood out was that in our professional experience, change is fundamentally linked to challenge.

Whether a practitioner facing change, a manager enacting change or a parent or carer who needs to change, challenge will always be present in the change journey.

Effective challenge that improves parenting comes from practitioners who are authentic, non-judgemental, well informed, well connected and authoritative and who have a relationship with the family. Using challenge with support to enact change at the site of practice is a high level skill which requires ongoing supervision for development in the workforce.

If the mechanisms that sustain high quality practice are not recognised, the value that should be assigned to them could be missed in future commissioning arrangements.

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Acceptability of financial incentives for breastfeeding: thematic analysis of comments to UK online news reports

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Contents

- Context: breastfeeding; financial incentives
- Brief overview of results
- Methodological details - Knowledge Exchange, focused on:
 - Methodological developments in creating evidence
 - Using media to source and develop evidence
- Conclusions



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Breastfeeding

- Recommended babies breastfed for first six months
- In 2010, 81% of mothers breastfed at birth; 34% at six months (UK)
- Difficulty in initiating and maintaining breastfeeding
- Benefits:
 - Promotes bonding
 - Nutritional benefits
 - Reduction in postpartum depression
 - Lower rates of obesity
 - Strengthens the immune system



Barriers to breastfeeding

- Limited support
- Negative experiences
- Personal preferences
- Opinions of others
- Lack of facilities
- Marketing of 'artificial' baby food
- Returning to employment
- Impact on baby-father bonding



What's already 'known' about financial incentives for breastfeeding?

- Financial incentives for breastfeeding is relatively under-researched
- Gifts and prizes have been provided for breastfeeding
- Lack of monetary incentives used
- Financial incentives:

'Cash or cash-like incentives provided to individuals or groups contingent on behaviour'

Are financial incentives acceptable?

In general, evidence suggests:

- effectiveness and cost-effectiveness
- benefits for individuals and society
- ‘gaming the system’
- seen as coercive

THE LANCET
Volume 382, Supplement 3, 29 November 2013, Pages S103
Public Health Science



Abstracts
Views on the acceptability of financial incentives for breastfeeding: a qualitative study

Dr Barbara Whelan, PhD^a, Patrice Van Cleemput, PhD^a, Mark Strong, PhD^a, Clare Relton, PhD^a

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doi:10.1016/S0140-6736(13)62528-3 [Get rights and content](#)



Preventive Medicine
Volume 73, April 2015, Pages 145–158



Review

Acceptability of financial incentives for encouraging uptake of healthy behaviours: A critical review using systematic methods

Emma L. Giles^a, Shannon Robalino^a, Falko F. Sniehotta^a, Jean Adams^a, Elaine McColl^b



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Are financial incentives for breastfeeding viewed to be acceptable?

Research Question:

- What are the views of the UK general public towards financial incentives for breastfeeding?

Sub-Question:

- Is thematic analysis of online comments a suitable research method for exploring public health issues?



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Unacceptable viewpoints

Themes 1-5:

- Children are a lifestyle choice
- Financial incentives for breastfeeding are discriminatory and divisive
- Creating a culture of entitlement
- Financial incentives are personally insulting
- Emotional impact on recipients



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Unacceptable viewpoints

“Better still, don’t take it from the taxpayer in the first place. I am getting fed up with, and don’t see why I should fund the lifestyle choice of others to have children.”

“I find these constant rewards deeply divisive. What about the person in the next area who does not qualify?”

“I am finding the new initiative patronising and if I may say unfair. Women in Britain are capable of making the right decisions with regards to breastfeeding.”

Acceptable viewpoints

Themes 6-7:

- Effectiveness and cost-effectiveness
- Generating initial motivation

“This is a research study funded by the MRC [Medical Research Council] who independently select which studies to help fund. This isn't the government handing out benefits to mums! If research outcome[s] in the pilot study are good, it creates discussion as to how take it forward. The government are not just going to say 'ok, £200 for all mums'. The question being asked is about the efficacy of financial incentives - worth exploring!”

Design and delivery

Themes 8-9:

- Design, delivery and impact
- Inequitable impact on personal choice

“Why not make them Mothercare/child-centred vouchers?”

“...and what if a genuine mother starts to breastfeed and then changes her mind because of complications? Will she have to pay it back?”



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Summary of findings

What are the views of the UK general public towards financial incentives for breastfeeding?

- Most comments were not supportive of HPFI for breastfeeding
- Some adopted a pragmatic viewpoint regarding effectiveness



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Knowledge ... but, exchange?

- Using stakeholder views:
 - Direct 'contact' with target populations (i.e. breastfeeding mothers) and wider population
 - Uncensored opinions
 - 'Real-life' dialogue and conflicts expressed
 - Access to a wide audience



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Methodology

Examined reader comments posted online to a UK news story on incentives for breastfeeding

News coverage of:

The Guardian article titled "Breastfeeding Response: No, we're not ashamed about giving mothers financial incentives to breastfeed" by Clare Relton. The article is part of an opinion column. A sub-header reads: "We want to help a shift from infant formula milk feeding. Mothers are signing up to our scheme".

The Telegraph

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HOME » NEWS » HEALTH » HEALTH NEWS

New mothers 'bribed to breastfeed' by NHS with £200 shopping vouchers

New mothers will be "bribed to breastfeed" by the NHS, in an attempt to increase rates across the country - although those behind the scheme admit they are powerless to stop the £200 shopping vouchers being used to buy cigarettes and alcohol.

BBC News website navigation bar. Includes "Sign in", "News", "Sport", "Weather", "iPlayer", "TV", "Radio", "More", and a search bar. A "Find local news" button is also present.

Health

Breastfeeding mothers offered £200 in shop vouchers

By Nick Triggles
Health correspondent, BBC News

12 November 2013 | Health

Top Stories

Plan to evict illegal immigrants
Landlords will be expected to evict tenants who lose the right to live in England under new measures to clamp down on illegal immigration.

27 minutes ago

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Mothers to get a £200 incentive to breastfeed... in Poundstretcher vouchers: Critics claim scheme is form of bribery

Netnography

- An emerging method of obtaining qualitative data
- Naturalistic and immersive insight into online interactions
- Continuum:
 - Full ethnographic enquiry – internet based data analysis
- Limited research has used a netnographic approach to explore public opinions towards public health interventions



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Sample

- Continuum of netnographic approaches
 - Analysed responses to online articles
 - Six original news articles; six editorial pieces; one follow-up piece
 - 3,373 responses analysed
 - Thematic analysis in Nvivo

Giles et al. *BMC Pregnancy and Childbirth* (2015) 15:116
DOI 10.1186/s12884-015-0549-5



RESEARCH ARTICLE

Open Access

Acceptability of financial incentives for breastfeeding: thematic analysis of readers' comments to UK online news reports



Emma L. Giles^{1*}, Matthew Holmes³, Elaine McColl², Falko F. Sniehotta¹ and Jean M. Adams⁴



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Web sources

Table 2 Characteristics of included articles

Source	URL	Format	Title	Reader comments, n	Article stance
BBC	http://www.bbc.co.uk/news/health-24900650	Article	"Breastfeeding mothers offered £200 in shop vouchers"	1121	Mixed
BBC	http://www.bbc.co.uk/news/health-24908678	Article	"Breastfeeding vouchers: Midwives and health visitors verify claims"	0	Mixed
Daily Mail	http://www.dailymail.co.uk/news/article-2501812/Mothers-200-incentive-breastfeed-Poundstretcher-vouchers-Critics-claim-scheme-form-bribery.html	Article	"Mothers to get a £200 incentive to breastfeed...in Poundstretcher vouchers: critics claim scheme is form of bribery"	759	Mixed
Daily Mail	http://www.dailymail.co.uk/news/article-2507269/New-mothers-NOT-paid-breastfeed-Nick-Clegg-says-insists-controversial-voucher-scheme-government-policy.html	Follow-Up Article	"New mothers will not be paid to breastfeed, Nick Clegg says as he insists controversial voucher scheme is not government policy"	58	Mixed
Guardian	http://www.theguardian.com/lifeandstyle/2013/nov/12/researchers-offer-shopping-vouchers-breastfeed#start-of-comments	Article	"Researchers to offer shopping vouchers to mothers who breastfeed"	330	Mixed
Guardian	http://www.theguardian.com/commentisfree/2013/nov/12/worst-breastfeeding-initiative-shopping-vouchers?INTCMP=ILCNETTXT3487	Editorial	"The worst breastfeeding initiative I've ever come across"	546	Negative
Guardian	http://www.theguardian.com/commentisfree/2013/nov/20/not-ashamed-giving-mothers-incentives-breastfeed	Editorial	"No, we're not ashamed about giving mothers financial incentives to breastfeed"	140	Positive
Independent	http://www.independent.co.uk/life-style/health-and-families/health-news/the-nanny-state-mothers-could-be-paid-to-breastfeed-their-babies-8933503.html	Article	"The nanny state? Mothers could be given shopping vouchers for breastfeeding their babies"	0	Mixed
Independent	http://www.independent.co.uk/voices/comment/vouchers-for-mothers-who-breastfeed-isnt-there-enough-breastmoneering-in-the-world-already-8934923.html	Editorial	"Vouchers for mothers who breastfeed: isn't there enough breast-moneering in the world already?"	9	Negative
Independent	http://www.independent.co.uk/voices/comment/offering-poorer-mothers-200-to-breastfeed-is-barmy-middle-class-lactivism-8935416.html	Editorial	"Offering poorer mothers £200 to breastfeed is barmy, middle-class lactivism"	97	Negative
Sun	http://www.thesun.co.uk/sol/homepage/woman/5259728/Sun-Agony-Aunt-Vouchers-for-breastfeeding-are-an-insult-to-mothers.html	Editorial	"Vouchers for breastfeeding are an insult to mums fund health visitors not token gestures"	3	Negative
Telegraph	http://www.telegraph.co.uk/health/healthnews/10442290/New-mothers-bribed-to-breastfeed-by-NHS-with-200-shopping-vouchers.html	Article	"New mothers 'bribed to breastfeed' by NHS with £200 shopping vouchers"	268	Mixed
Telegraph	http://www.telegraph.co.uk/health/10443233/Mothers-might-not-breastfeed-after-taking-200-NHS-bribe-MP-warns.html	Editorial	"Mothers might not breastfeed after taking £200 NHS bribe, MP warns"	42	Mixed

Issues to consider

- Access to online websites
 - Angle of source/political affiliation
 - Deleted/unavailable comments
 - Timeliness of data sources/sites/comments
-
- Representativeness - readership characteristics...



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Readership characteristics

Table 1 Readership characteristics

	Website readership adults 15+ April and May 2013 (000 s)	Readership characteristics		
		Age (years)	Gender split	Socio-economic classification
BBC	Information unavailable	Average age 43	Male	Unknown
Daily Mail	8595	Aged 35+	Even gender split	Unknown
Guardian	8301	Range 15-44	Even gender split	ABC1 ¹
Independent	4076	Aged less than 45	Male majority	ABC1
Sun	1662	Aged 35+	Male majority	ABC1
Telegraph	7506	Average age 43	Male majority	ABC1

¹ The National Readership Survey uses social grade as a way to classify individuals. ABC1 individuals are those in higher ('A' – upper middle class), intermediate ('B' – middle class) or supervisory/junior ('C1' – lower middle class) managerial, administrative, or professional occupations [90]



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Ethical issues

- ‘Participants’ didn’t know they were part of a research project vs. public forum
- Limited ethical guidance on undertaking a netnographic approach vs. best practice
- Sought website permissions
- Discussed project with the Chair of the Medical Faculty Ethics Committee
- Adhered to data confidentiality and anonymity
- No formal debriefing vs. practicality of undertaking this online



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Use of media for knowledge exchange

Positives:

- (Relatively) Quick
- (Cost) Efficient
- Large sample
- Real-world views and contexts
- Different population groups depending on source
- Exploratory

Negatives:

- One-way opinion, unless you post feedback and/or results
- Ethical dilemmas of accessing sources
- Biased sample – strong opinion formers?
- Exploratory



Knowledge exchange

- **A conversation?**
 - Shared knowledge within an online group of: new mothers, medical professionals and so on
 - Non-experts are potentially more likely to value shared and unique contributions of others (*Thomas-Hunt et al., 2003*)
 - Allows social connections between online members
 - Perhaps enables knowledge evolution within group members
 - So less about KE between 'us and them', but more about KE between group members...which in turn impacts on our research findings



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Acknowledgements



<http://www.biomedcentral.com/1471-2393/15/116>

Giles et al., 2015 Acceptability of financial incentives for breastfeeding: thematic analysis of readers' comments to UK online news reports, BMC Pregnancy and Childbirth, 15(116).

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