

Let's Talk about Children Logbook for working with families expecting a baby

Tytti Solantaus
2023



**UNIVERSITY
OF TURKU**



**Funded by
the European Union**

Every family is different

Some families have a mum, dad, and children, while others have only one parent with children or have two mums or two dads. Children might also come from different backgrounds and live with grandparents, legal custodians or in out of home care.

In our logbooks, we use the word "caregiver" instead of "parent" to include all types of families. We have "the one caregiver" and "the other caregiver." Participants can of course choose what they want to be called during discussions.

Thank you to all the families who trusted me with their life stories. What I learned from you is translated into Let's Talk about Children for helping other families.

Thank you to Emmi Riihiranta-Laine and Miia Äänismaa in Turku University for sharing their experiences in the everyday practice of LTC and the logbooks.

Thank you to Brad Morgan from Emerging Minds in Australia for sharing his experience of LTC in the Australian context, correcting my English, and adapting the logbook to international use. As further changes and additions have been made, the author takes full responsibility for any possible grammatical and other errors in the English language.

Thank you to all colleagues and collaborators and who contributed to the development of the current edition of the logbook with their wise comments and challenging feedback. Further feedback and comments can be forwarded to Tytti Solantaus (firstname.lastname@gmail.com).

Thank you to the Finnish Cultural Foundation for the Eminentia Scholarship that was awarded to Tytti Solantaus.

The Let's Talk about Children Logbook © Tytti Solantaus

Logbook Let's Talk about Children Network Meeting © Mika Niemelä and Tytti Solantaus

The logbook should be referenced as: Solantaus T. (2023) Let's Talk about Children logbook for families expecting a baby. University of Turku /INVEST

Let's Talk about Children Logbook for working with families expecting a baby © 2023 by Tytti Solantaus (the logbook) and Mika Niemelä (Network meeting) is licensed under [CC BY-NC-ND 4.0](https://creativecommons.org/licenses/by-nc-nd/4.0/)

Dear Caregiver/s,

Congratulations on expecting a baby! Whether it's your first or not, having a child is always a miracle. As you prepare to welcome your new little one, you may find yourself feeling very emotional. Your mood might change unexpectedly, between happiness and worry about the baby's health and maybe, how to manage as a parent.

You have been invited to discuss your child's wellbeing along the lines of the Let's Talk about Children (LTC) approach. Welcome to the discussion! Here is a brief overview of the approach, hopefully answering some of your questions about what is ahead.

What is LTC for?

LTC was developed to help caregiver/s and other important people in the child's life to support children's wellbeing and development. The aim is to contribute to the child's a day-to day life that supports their wellbeing, learning and development.

How does this happen?

The practical part first. LTC consists of two discussion sessions with a plan on what to do next and, if needed to carry out the plan, LTC Network Meeting. Network Meeting includes a gathering of the individuals that are identified by the caregiver/s to explore opportunities to support the child.

LTC discussion focuses on the child's day-to-day life as everyday interactions, encounters and routines are important to children and their wellbeing. However, life is not always easy. Every family has times of stress. Sometimes they are short-lived, sometimes they come to stay longer. Hardships take their toll and erode caregiver/s' energy and mental health resources. Caregiver/s might become impatient and irritable, maybe silent and withdrawn. Children react in their particular ways and parenting becomes more challenging. Everyday routines fall on the wayside, and when it happens, caregivers feel even worse.

Every family has unique strengths, which family members may not always recognize or give themselves credit for. Let's Talk About Children is a resource that helps families identify and nurture their strengths in the everyday life, and find solutions to difficult issues. The program is designed to support families and provide them with the tools they need to thrive.

It is time to start! I hope you have an interesting and inspiring discussion.

Kind regards,



Tytti Solantaus

Child psychiatrist, Emeritus Professor, University of Turku/INVEST
tytti.solantaus@utu.fi; tytti.solantaus@gmail.com

FIRST LTC SESSION

Getting started

1. Welcome and introduce participants.
2. A brief overview of the aims and what to expect during the discussion.
3. Confidentiality and how the discussion is documented in the family member's records, as needed.
4. Before going on: How did you feel about coming here today? (caregiver/s and the worker)
5. A closer look at strengths and vulnerabilities:

Strength: An area of the family life and of child's life outside home (day care, school and leisure environment) that is progressing well, including everyday routines, time spent together and activities with friends and the community.

Vulnerability: An area of the family life and of child's life outside home (day care, school, leisure environment) that might cause problems if nothing is done, or is already a concern which would benefit from further attention and support.

Caregivers often have different experiences and points of view. Do not worry, it is fine. If you disagree about strengths and vulnerabilities, mark them both.

Two examples to be discussed with the caregivers

A shy child in a lively and loud class room (or some other example)

The child is very lonely, left alone. The shyness is a vulnerability in this context. Action plan: to help the child integrate (caregivers and teacher), and to help the school mates learn to accept someone who is different in their group (teacher). Shyness could be a strength in another kind of environment.

A mother with alcohol problems takes the child to day care (or some other example)

The mother brings her child to the day care center in bad hangover and the staff looks down on her. Overall, the child is doing well. Strength: The mother brings the child does this risking her own reputation, because she is sure that it is better for the child to play with other children in day care than stay at home with an ill mother.

The family and expecting a baby

1. Would you like to tell something about yourselves and the caregivers also about your family?
(the participants and the worker)
2. What do you think and feel about being pregnant and expecting a baby?
 The pregnant caregiver Strength ☐ Vulnerability ☐
 The other caregiver Strength ☐ Vulnerability ☐
3. How is your physical health and how is the pregnancy progressing?
 Pregnant caregiver Strength ☐ Vulnerability ☐
4. Do you have any expectations concerning the delivery? Strength ☐ Vulnerability ☐
5. What are your thoughts and feelings of becoming a parent/ parents or parents of a baby again?
 If you think about the first three months, what do you expect?
 The pregnant caregiver Strength ☐ Vulnerability ☐
 The other caregiver Strength ☐ Vulnerability ☐
6. How do sisters and brothers feel about the pregnancy and getting a new baby?
 Strength ☐ Vulnerability ☐
7. How are they doing?
 Their wellbeing, mood and behaviour Strength ☐ Vulnerability ☐
 Getting on at school / in a day care setting Strength ☐ Vulnerability ☐
- 8-10 How do you manage household chores, parenting and gainful employment?
 Are you happy with how you divide up responsibilities between yourselves? Do you have friends, extended family, or other sources to help you out?
 Child care and parenting Strength ☐ Vulnerability ☐
8. Carrying out household chores
 cooking, doing the dishes, washing clothes, cleaning up etc.
 construction work at home, fixing the car etc.
 Strength ☐ Vulnerability ☐
9. Gainful employment
 Strength ☐ Vulnerability ☐

Caregiver/s' own wellbeing

10. How would you describe your wellbeing?

For instance, are you experiencing any persistent stress reactions or mental health issues? (refers to both caregivers)? Do they impact and how on your everyday life at home, work, hobbies?

On your feelings about pregnancy and the baby?

The pregnant caregiver

Strength ☐ Vulnerability ☐

The other caregiver

Strength ☐ Vulnerability ☐

11. Other concerns. It's possible that you may have concerns related to your other children, the health of extended family members, work-related issues, family stress, or other matters. Do you have any other concerns, and if so, how do you manage them? Is help needed from other services? (e.g. school, health and social services, income support services, etc.)

The pregnant caregiver

Strength ☐ Vulnerability ☐

The other caregiver

Strength ☐ Vulnerability ☐

12. Communication and solving problematic issues

How do you feel about talking about worries, potential signs of stress and mental health concerns among caregivers or with your support person?

The pregnant caregiver

Strength ☐ Vulnerability ☐

The other caregiver

Strength ☐ Vulnerability ☐

13. Couple relationship Pregnancy is a time caregivers settle into the role of being parents together and prepare the the home for the baby: a whole new element in the relationship.

How has this been for you as a couple? Delight and joy in each other's company? Empathy and support for each other?

The pregnant caregiver

Strength ☐ Vulnerability ☐

The other caregiver

Strength ☐ Vulnerability ☐

14. Caregiver/s' social life with friends, relatives

Joy and shared time

Strength ☐ Vulnerability ☐

Practical support available

Strength ☐ Vulnerability ☐

15. How would you describe the atmosphere at home in general? Examples of strengths: in spite of possible problems, the atmosphere is warm and caring. Possible vulnerabilities: the atmosphere is often quarrelsome, avoidant, stressful.

Strength ☐ Vulnerability ☐

16. Is there anything else you would like to talk about?

17. Home assignment*

18. Ending the meeting

How was this discussion for you? For the worker?

Set up the next meeting _____

Thank you!

*Home assignment

It is time to close this discussion and to give you two tasks to focus on at home.

No.1 We would like to ask you to get acquainted with **Annex 1 and Annex 2** or the booklet, **How Can I Help My Children?**

If the family is dealing with mental health problems, recommend or give them a copy of the booklet **How Can I Help My Children**. It has a more thorough presentation of the family situation and talking with children.

Annex 1, SHARED UNDERSTANDING AND CO-OPERATION IN THE FAMILY explains what shared understanding means. It describes how important it is for family members and their wellbeing to be able to make sense of what is happening in the family. As you will see, this is true also with children.

Annex 2, TALKING ABOUT DIFFICULT ISSUES WITH YOUR CHILDREN and booklet **How can I help my children?** Give guidelines how to talk with children about issues that have an impact on their life but are difficult for everyone to talk about. These include anything from economic problems to a family member's mental health issues or a severe illness.

Although N is not yet here to talk, it might still be useful for you to get acquainted with the Annex and especially if you have older children. The Annex might also elicit thoughts about how to discuss difficult issues among caregivers.

Annex 3, TALKING ABOUT DIFFICULT ISSUES WITH ONE'S CHILDREN for practitioners and **"How can I help my children?"** give more detailed information about talking with children and will help you to discuss these issues with caregivers. They can also be given to caregivers.

No 2. As to the action plan, we'll discuss ways you can nurture your strengths and address vulnerabilities. To prepare for this, we ask that you select the strengths you'd like to focus on and identify any vulnerabilities you'd like to find support and solutions for. The list of ****Things to pay attention to when making an LTC action plan** is helpful in putting the plan together. Please take your logbook with you when you come next time.

You may involve your older children in these discussions. They may have helpful insights related to their own experiences and situations.

****Things to pay attention to when making the LTC action plan**

Here are some important things to consider when creating an action plan for Let's Talk about Children (LTC). They refer to both caregivers and children, including young people.

Note! It is not expected that families manage all these situations, probably no family does. The list helps you to identify the strengths that you have and select issues that you find important to focus on in the action plan and family life.

1. Shared understanding and co-operation in the family
2. Caregivers discuss difficult things and make plans in a constructive manner
3. In case of problems affecting children, they are helped to make sense of what is happening and to cope with the situation
4. Parenting and housework are shared between the caregivers to their satisfaction.
5. Children have responsibilities in a way which is appropriate for their age and situation
6. Regular hours and sufficient rest for everyone in the family

7. Shared moments of joy between the spouses and with the whole family
8. Friends and relatives who bring joy and give practical help

9. Children feel loved and are cared for, and valued by the caregivers
10. Caregivers play and spend time with children
11. Children have interests and friends
12. Children are valued by teachers at day care/ kindergarten/school and by leaders/ coaches in activities /hobbies and appreciated in respective peer groups

13. Courage to ask for help even if it is difficult and feels shameful
14. Services that are available, understanding, get involved and provide help

The second LTC session

1. **Greet the participants: How have you been?**
2. **How was the previous LTC discussion for you? For the worker?**
Is there anything you would like to go back to?
3. **Explain the aims and process of this session**
4. **How did you feel about the home assignment?**
Did you have time for it? If not, that is fine. Let's look at them now.

Annex 1 Shared understanding and co-operation in the family
What do you think about this? How does this sound to you, does it make sense?

Annex 2 and the booklet How can I help my children?
What do you think about talking with children about those difficult issues?
How about talking with each other?

Annex 3 and “How can I help my children” for worker

These include information about mental health issues in a family and also serve as guidelines for discussing these issues with caregivers. You can also study the booklet together with caregivers and choose issues especially relevant for them.

Remember never to put pressure on caregivers to talk about something they are ambivalent about or resist.

If the caregivers are expecting or have a baby, they might feel that Annex 2 is not of interest for them at this point and the discussion can be omitted. However, follow their lead as open discussion is an issue also between the spouses and with possible older children. Proceed according to the Annex. Discuss the contents and examples from different angles, and add your own examples

Be prepared to respond to questions concerning children's age, type of problem to be told (from low mood to suicide attempt), who tells, how the process continues from that, etc. If the caregivers have difficulties discussing distress and mental health issues, consider adding a session in the action plan for them to talk about such issues with you and each other.

5. **How was this discussion for you? And the worker?**

The aim is to approach these issues from different angles. Remember that you are not the one who 'knows' and tells what family members should do. Let family members decide. At best, this is a learning period for both you and the family.

6. **Did you have a chance to look at the strengths and vulnerabilities** identified in the first session? If not, no problem. We can do it now and continue the discussion on that basis. What kind of thoughts came up/ come up regarding your strengths and vulnerabilities? Any surprises, any disappointments, any questions?

Drawing up the action plan

1. Which strengths did you choose to make a plan for? Brainstorm options of what to do, write down what is decided

2. Which vulnerabilities did you choose to make a plan for. Brainstorm options of what to do, write down what is decided.

- If no further activity is needed, proceed to **4. Ending the meeting**
- If further help is needed, proceed to **3. Planning LTC Network Meeting**
- If further help is needed, but Network Meeting is not an option, information is given about the needed services and how to reach them

Planning LTC Network Meeting

- Explain the purpose of meeting
 - Explain how the meeting is set up
 - Caregivers agree on the topics
 - Agree topics family does not wish to discuss
 - List of strengths and vulnerabilities and possible other topics for the action plan
 - Who is to be invited and by whom?
-
-

It would be fruitful for the family to talk with children at home about strengths and vulnerabilities in situations which involve them. Children might have ideas that are important to be included in the action plan.

- Set a date for the meeting _____

Ending this session and the LTC process

- How was this session and the LTC process for you? And for the worker?
Has it been helpful for you? In what way?
Was there something problematic that you would like to talk about?
- If the you continue to use the service, you are welcome to talk about the family situation and children whenever you like. The staff is delighted to hear good news and ready to provide support when needed. Agree on whether the worker may initiate a discussion about the children also later on.

Thank you!

LTC Network Meeting

© Mika Niemelä, Tytti Solantaus

1. Begin by warmly welcoming everyone making introductions.
2. The leader of the meeting describes the outline of the meeting and how it has been prepared.
3. Caregiver/s or the worker, as agreed, describe the reasons for the meeting and areas of action.
4. Discussion among caregivers and invited participants
 - a) Clarifying questions and points of view
 - b) Ideas on how to proceed on each item
 - c) Turn the ideas into concrete actions that family members agree on
5. Write a memorandum* stating the courses of action. Use a flip chart or project it on a wall.
 - a) Service workers are usually at the top of the list, followed by the family's social network and the family. This way, the family can plan their own actions based on the overall effort. If called for, the order can be changed.
 - b) All participants are given a copy of the memorandum at the end of the meeting, if family members agree.
6. Set up the follow-up meeting and agree on who will be there. **

7. Ending Network Meeting.

How was this meeting for the participants, especially family members?

To family members: Did you feel that you were understood? Do you think you received the help you needed?

The leader of the meeting makes a summary, hands the memorandum to the participants as agreed, thanks the participants and declares the meeting closed.

** At least one follow-up meeting is recommended to let the involved parties note what has been achieved and whether a new meeting is called for. The time between meetings and their number depend on the overall situation. The follow-up meeting begins with family members giving a short outline of the current situation and whether the original plan was put into action. If a deed was not carried out, the responsible person describes why not and what was done instead. A discussion follows on what was learned for the future while implementing the plan. If further action is called for, a new memorandum is written stating what courses of action should continue and what else is needed.

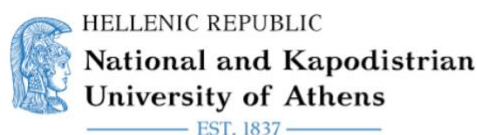
***Format the memorandum**

Network meeting _____ (date)

Topics (For example, 3)	Topic 1: Topic 2: Topic 3:	
Participants	What specific action, when (For example, date, time of day)	Follow-up meeting date

EU4Health

Project number: 101101249



Co-funded by the European Union

Funded by the European Union under the EU4Health Programme (EU4H)-Grant Agreement N°: 101101249. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or European Health and Digital Executive Agency (HADEA). Neither the European Union nor the granting authority can be held responsible for them.

