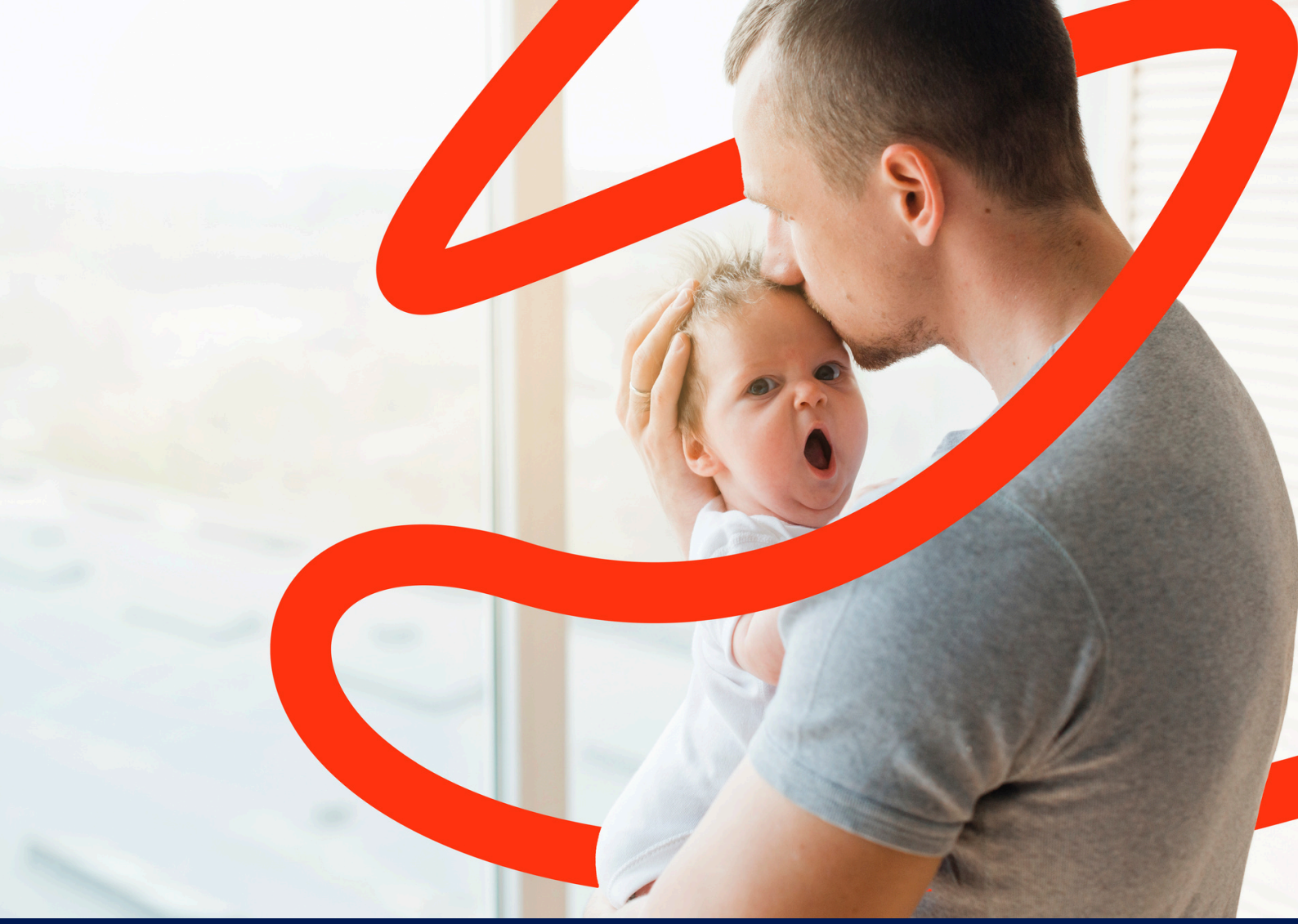


Spurgeons
Together with families

A guide for dads-to-be

Becoming a Dad

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www.spurgeons.org

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Welcome to fatherhood!

Becoming a dad is one of life's biggest changes. You might feel excited, proud, worried, hopeful, nervous or unsure. You might feel several of these things at the same time. There is no 'right' way to feel.

This workbook has been designed to help you:

- Think about who you are as a father
- Learn about building a relationship with your baby
- Build confidence
- Find support
- Record your reflections on what matters most
- Think about the future you hope to create.

As a dad-to-be you may be feeling:

- Shocked/surprised and unprepared for this news
- Excited and happy but anxious about the pregnancy – will everything be ok?
- Worried about the responsibility of becoming a dad and your role in the baby's life
- Mixed emotions, excited one minute then uncertain the next
- You may be concerned about how you are going to manage this financially



All of these feelings are perfectly natural as becoming a dad is a BIG moment in your life! However you are feeling remember a whole range of feelings are normal and you are not alone!

You are already becoming a dad.

Fatherhood begins before birth. The things you do now matter, including where possible:

- Being involved in appointments and scans where you can
- Talking to your baby and feeling them move during pregnancy
- Preparing for their arrival
- Thinking about the future
- Talking to your baby's mother about how you both want to parent and how you both feel about this change
- Supporting your baby's mother
- Learning new things.
- Thinking about who can support your growing family. Consider individuals and organisations.

Every family is different. Some fathers will be preparing for parenthood alongside the baby's mother, while others may be planning how to be positively involved from a different household.



Your baby - the story so far

Gender of the baby (male, female, not known).....

Baby names we have chosen.....

Why we chose these names.....

.....

My baby is due to be born (date).....

Location (where).....

Who will be at the birth.....

Guess his/her weight.....

Guess his/her hair colour.....

Who will be the support network for my partner and baby.....

.....

.....

What three words would you like your child to use to describe you in the future?

.....

.....

Treat this page as optional, you can either fill it in or just think about the questions.

Supporting mum-to-be

As the partner of someone who's pregnant, the closer the two of you are, the more you will be able to share the experience of pregnancy. Being able to support your partner emotionally is a crucial part of this.

You can read the list in this pack of what happens each month when the baby is developing and share this with your baby's mother, or ask questions about how she is feeling. Taking an interest in her and the baby will demonstrate that you care and give you both an opportunity to talk about your feelings.

Pregnancy brings big changes to your life, especially if this is your first baby. Some people find it easier to cope with these changes. Everybody is different, and that is ok. The important thing is not to keep it in. If you are finding things difficult try to talk to someone, maybe a friend, a family member or a health professional like your GP. You may not be the one who is pregnant, but it's important that you take care of yourself so you can be supportive.

Your relationship

It's common for couples to have disagreements during pregnancy, even when you are looking forward to having the baby. The pregnancy may be stressful for you both, and she may be experiencing nausea, sickness, hormone changes, discomfort etc. It is important that you both communicate how you are feeling so that you can be understanding towards each other.



It is important to remember that during pregnancy there are pressures on you both, and it is understandable that there may be occasional difficulties between the two of you.

If you can't resolve difficulties, it is a good time to reach out for help- your local family hub can offer support.

How your partner may feel during pregnancy

During the whole pregnancy the mother may feel very tired and need to sleep more. She may feel sick, or vomit. There may be certain smells or tastes that she can't tolerate and make her feel sick.

During this time she may appreciate you being understanding of what she is going through, asking her how she is feeling etc. If she is more irritable than usual, this may be due to how tired she is, or her anxiety around being pregnant.

Talking together during the pregnancy is important and helps you support each other through this time of change.

The later months

Towards the end of pregnancy (around 27 to 40 weeks) the baby may feel very heavy - this may be uncomfortable and tiring for her. She may start to feel irritable again (as in the early weeks) and may start to feel worried about giving birth.



If she is feeling anxious, it may help if she can talk to you about her feelings. Sometimes she may just want to talk to you, so don't feel that you need to have all the answers or 'fix' any problems. Just being heard can reduce anxiety in itself.

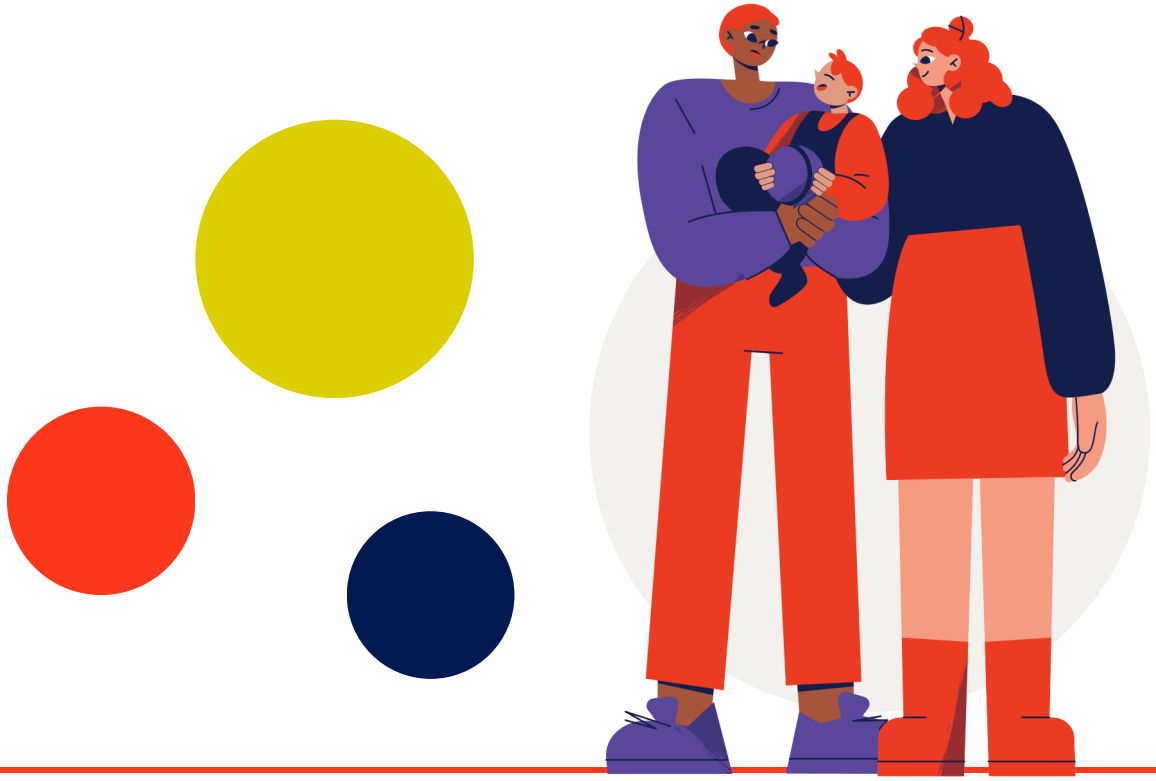
You can also advise her to speak to her midwife about how she is feeling, or close family and friends.

Screening tests

Your partner may be asked to have some blood tests in early pregnancy. These tests will check whether the baby is at risk of certain genetic conditions like sickle cell anaemia or cystic fibrosis. If you are the biological father, you may be asked about your family history too as some conditions are more common depending on family history.

There are other tests (including urine tests) that you and your partner may choose to have, like a test for the chance of the baby having Down's Syndrome.

Sometimes antenatal screening tests find something to indicate that the baby has a higher chance of having a certain health condition. Your partner will receive support from her midwife or doctor if this is the case. If this happens, you may feel that you are unable to be directly involved, but it will be important that you support your partner and that you are also supported (friends, family or your keyworker etc). This could be an anxious time for you both. There may be decisions to make, so keeping yourself emotionally well, maintaining communication and a positive relationship with your partner, where possible, could be crucial.



Dating scan (by 14 weeks)

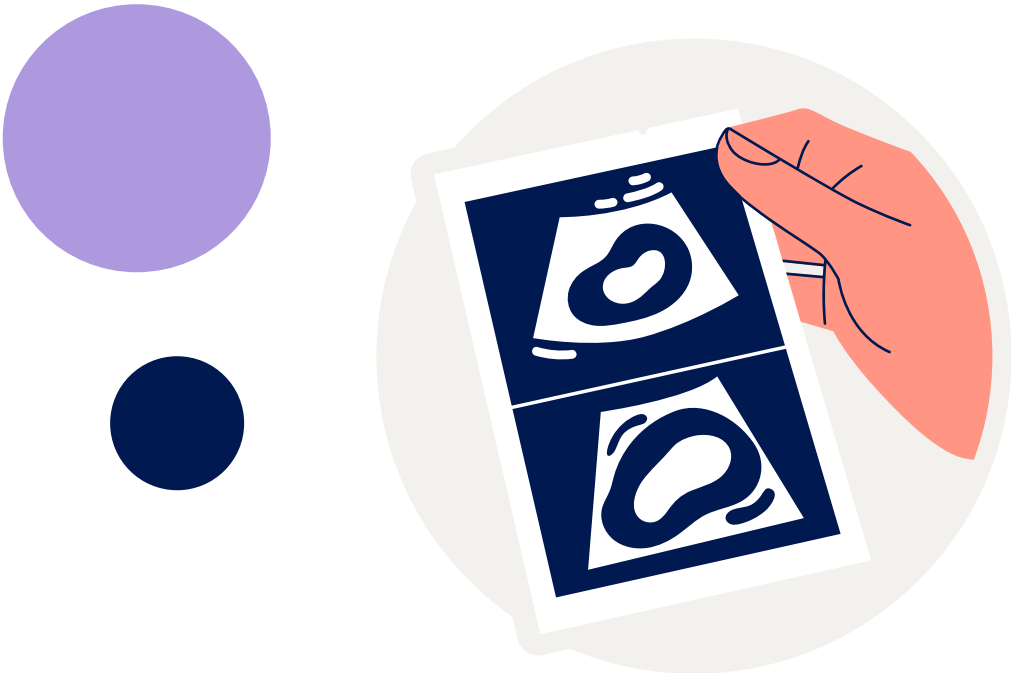
This ultrasound scan is used to calculate when the baby is due (the due date) and find out how many babies the woman is carrying.

20 week scan

An ultrasound scan is offered between 18 and 21 weeks (often called the "20 week scan"). This is a highly detailed scan to check on how the baby is developing physically.

The scan looks at the baby's bones, heart, spinal cord, brain, face, kidneys and abdomen. The person doing the scan (the sonographer) will check the baby for 11 rare conditions. The scan only looks for these conditions and cannot pick up everything that may be wrong.

In most cases, the scan will show that the baby appears to be developing as expected, but sometimes there may be concerns. The sonographer may share any concerns at this time.



Antenatal classes

Antenatal classes can help you and your partner learn what occurs in labour and birth, including pain relief and information on caesareans. Classes also provide information on caring for a newborn and recovery after birth. If you are not in a relationship with your baby's mother, you can still learn this information online. Antenatal classes may take different approaches so check before you sign up to one.

The birth

Many people find it is helpful to put together a birth plan (preferences, who will be present, what to take etc). These plans may need to change as the health of the baby and the mother are most important, so it may be good to discuss different options depending on what may happen. If you won't be there, your partner may choose to have a relative or a friend present.

Not every father will be there at every appointment or be part of the birth journey. What matters most is finding positive ways to be involved in your child's life where possible.

After the birth

Some parents become depressed or anxious after having a baby and may need lots of extra support, both practical and emotional. It may be that you are not able to be present to help her with practical tasks, so the focus may need to be on supporting her emotionally. You may also be able to suggest that she accesses support from her GP, health visitor or other local services.



Postnatal depression

Postnatal depression is a type of depression that many parents experience after having a baby.

It's a common problem, affecting more than 1 in every 10 women a year. It can also affect fathers and partners.

Signs of postnatal depression

- a persistent feeling of sadness and low mood
- lack of enjoyment and loss of interest in the wider world
- lack of energy and feeling tired all the time
- trouble sleeping at night and feeling sleepy during the day
- difficulty bonding with your baby
- withdrawing from contact with other people
- problems concentrating and making decisions
- frightening thoughts – for example, about hurting your baby

Postnatal depression is also common in men.

If you or your partner are experiencing low mental wellbeing after the birth, get in touch with your GP and let your health visitor know.

If you need to speak to someone immediately the Samaritans are available 24/7- just call 116123 or you can contact the confidential charity Shout by simply texting SHOUT to 85258.



Baby's development over 9 months

Months 1-2

(approx. 1.5cm long) The embryo is growing and developing. The nervous system is already forming, as are the foundations for the organs (heart, lungs etc). The brain is growing fast which means the baby has a large forehead at this stage. The eyes and inner ears are starting to form. The baby is now officially called a foetus, which means 'offspring'. The legs are getting longer, although it will be a bit later before the knees, ankles etc develop.

Month 3

The baby's face is slowly forming, the eyes are bigger and even have some colour in them! There is a mouth with tiny taste buds. The outer ears are developing on the sides of the baby's head. On the baby's face there is an upper lip and two tiny nostrils. The heart is now fully formed and beating 180 times a minute - 2 or 3 times faster than yours! The eyelids are closed and will not open for a few months yet. The baby now has fingernails. By week 12, the foetus is fully formed. All the organs, muscles, limbs and bones are in place. From now on, the baby just needs to grow and mature.

Month 4

The baby now weighs up to 100g. The ovaries or testes are now fully developed inside their body. Around now, the baby starts to swallow little bits of amniotic fluid, which pass into the stomach. The kidneys are starting to work and turn fluid into urine. Around this time the baby starts to hear muted sounds from the outside world. The eyes start to become sensitive to light too, which the baby can sense even with their eyes closed.

The muscles of the baby's face can move now. The baby's hands can reach each other, form a fist and hold each other when they touch. By week 17 the baby weighs approx. 150g. The face looks more human and eyelashes and eyebrows are starting to form. The baby now has their own individual fingerprint. By the end of week 18, the baby starts moving around quite a bit and can respond to loud noises from the outside world such as music.

Month 5

At this time, the baby is looking quite wrinkled due to not having much fat. They will put on weight and 'fill out' at the pregnancy continues. By 20 weeks, the baby's skin is covered with a white greasy substance called vernix. It's thought this helps to protect the skin whilst in the amniotic fluid. The baby now weighs more than the placenta.

The baby is beginning to get into a pattern of waking and sleeping. This may be different to the sleeping pattern of the mother! The baby is also practising breathing movements to prepare for when they are born.

Month 6

By the time the baby is 24 weeks they have a chance of survival if born. Most babies cannot live before this time as their organs are not developed enough. The baby is moving around a lot, and they may jump or kick if they hear a loud noise. They also may get hiccups!

By week 26 the baby's eyelids are starting to open for the first time and they will soon start blinking. The heartbeat has slowed down to 140 beats per minute, which is still much faster than an adults. The brain, lungs and digestive system are fully mature.

Month 7

The baby now weighs approx. 1kg and is perfectly formed. The heartbeat can be heard through a stethoscope. The mother will probably be aware of lots of movements from the baby by this stage. The sucking reflex is developing now so the baby can suck its thumb or fingers. The skin is less wrinkled and the white vernix is starting to disappear.

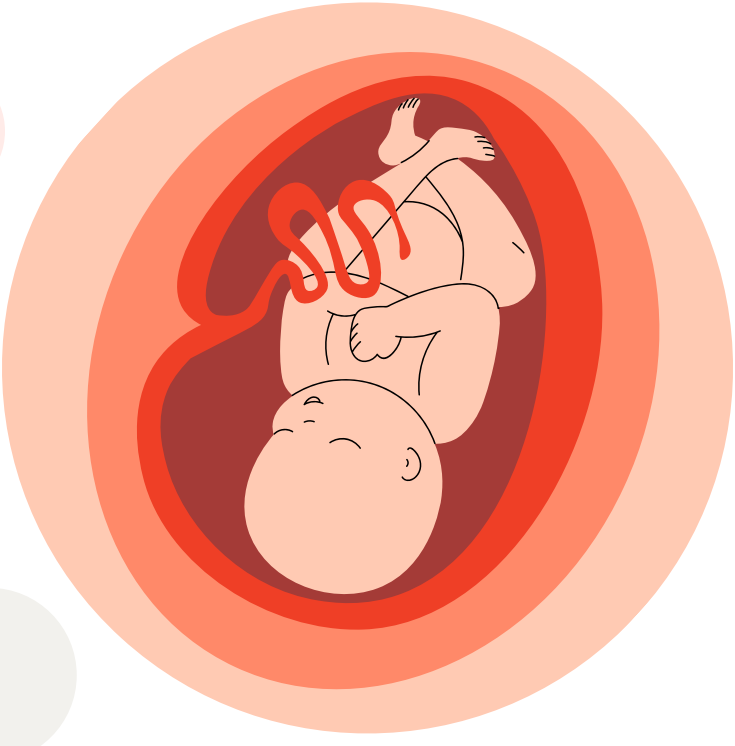
Month 8

By now, the baby is usually lying with their head pointing downwards, ready for birth. The brain and nervous system are now fully developed. The baby's bones are continuing to harden, apart from the skull bones. These will stay soft and separated until after birth. The baby is curled up in the uterus now with legs bent up against their chest. There's little room to move about now!

Month 9

The lungs are fully formed and the baby is ready to take their first breath after birth. The digestive system is also fully formed. The pregnancy is now considered full term. The average baby weighs between 3-4kg by now.

Most women go into labour between 38 and 42 weeks of pregnancy.



An important reminder

Not all pregnancies progress to full term.

What is miscarriage?

Miscarriage is the term given when a woman loses a baby any time up to 24 weeks into the pregnancy. Although many people find the subject difficult to talk about, it is very common and experts think more than 1 in 5 pregnancies ends in miscarriage.

Why does it happen?

There is still a lot we don't know about miscarriage and there is often no reason found. This can be very difficult to deal with emotionally. It is important to remember that it is very unlikely that the miscarriage happened because of anything your partner did or didn't do.

If this happens to you and your partner and you would like further information or support, go to: tommys.org/baby-loss-support



Her hormones explained

During pregnancy your partner will change. Not just her body shape, but also the way she acts.

Hormones are chemicals that get sent out from various glands in the body to run things. When a woman becomes pregnant, her hormones leap into action like never before to create the perfect conditions for the baby.

In the early stages she produces:

- Human chorionic gonadotropin (HCG) which, aside from getting things ready in the womb and placenta, is also thought to be responsible for morning sickness and overwhelming tiredness.

- Then there's progesterone, which allows baby to grow, but also can cause upset stomachs, painful breasts, a bloated feeling and sore legs in mum.

- Oestrogen is produced for the placenta but it may also be responsible for the magnification of emotions.

Put all that together and you've got someone who needs as much help and support as you can give her from where you are, however difficult it might be at times.

Nearer to the time the baby is due, hormones can also induce 'nesting', where some women suddenly feel an unstoppable urge to clean and tidy.



Who's who in pregnancy and beyond

There are a lot of professionals that are going to be involved in this journey. They are all there to care for your partner and your baby. Here is a list of who they are and what they do:

Midwives

They are going to look after things right through the pregnancy, keeping an eye on what's happening. You may not have the same person at every appointment Your community midwife during antenatal appointments will answer any questions your partner has, listen to any worries and give advice. Your partner's hospital midwife will look after things during labour and will most likely deliver your baby.

Obstetrician - looks after mums

An obstetrician is a doctor specialising in the care of women during the whole process. An obstetrician will normally only be involved if your partner needs extra special care during pregnancy/birth.

Paediatrician - looks after babies

This is another doctor, but specialising in the care of babies and children. Again, you'll only see a paediatrician if the baby has a special health problem, or if the labour has been difficult.

Health visitor

A specially trained nurse or midwife who's concerned with the health of the whole family. Your partner will meet their health visitor after the birth, when they take over from the midwife. They will give your partner all the advice and support she needs and may stay actively involved until your child turns five.

Getting prepared for fatherhood- some things to consider

- Your baby's mother can ask for her maternity exemption form so she can apply for free prescriptions and dental care
- Check what benefits you are entitled to, including child benefit at gov.uk/benefits-calculators
- Remember you need to give your employer 15 weeks notice of paternity leave/shared parental leave

Pack the hospital bag ready ahead of time. Some things to include are:

- Antenatal notes
- Comfortable nighties/ loose t-shirts and a hoody/ cardigan
- A washcloth or spray bottle of water
- Toiletries and hairbands
- Toothbrush and paste
- Books/magazines/headphones
- Chargers
- Medications
- Something comfortable to wear on the way home
- Front opening tops if breastfeeding
- Dressing gown and slippers
- Underwear (take several pairs)
- Maternity pads
- Maternity bras
- Breast pads
- Nipple cream
- Snacks.

Some things to include for baby:

- Sleepsuits and vests
- Nappies and cotton wool for cleaning with warm water
- Sterile bottles and teats and formula if not breastfeeding
- Muslins.

You will also need your baby's car seat (if 2nd hand ensure it's never been in a car accident and check the best before date) and a blanket to take them home.

Reflection: the experience you bring

Think about the qualities and experiences you are bringing to fatherhood. These reflections are optional- you can write here or discuss these questions in your own time.

What am I proud of?

What skills do I already have?

What values matter most to me?



What have I learnt in my life that can help me as a father?

What would I like to pass on to my child?

What do I hope for my child?

A poem

Walk With Me, Daddy

Walk alongside me Daddy
and hold my little hand,
I have so many things to learn
that I don't yet understand.

Teach me things to keep me safe
from dangers every day,
show me how to do my best
at home, at school, at play.

Every child needs a gentle hand
to guide them as they grow,
so walk alongside me Daddy
we have a long way to go.



Further support

Spurgeons' wish is to transform the nation one child at a time. Have a look at our Digital Family Hub for more on-the-go support to families through resources, courses and parenting articles, available 24/7.



Spurgeons Digital Family Hub

spurgeons.org/digitalfamilyhub

Further useful resources

Baby care and early years

NHS Best Start in Life
nhs.uk/best-start-in-life
BBC Tiny Happy People
bbc.co.uk/tiny-happy-people
NSPCC Look, Say, Sing, Play
nspcc.org.uk/keeping-children-safe/support-for-parents/look-say-sing-play
National Literacy Trust: Words for Life
wordsforlife.org.uk
ICON (Babies Cry, You Can Cope)
iconcope.org

Support for dads

Dad Matters
home-start.org.uk/find-your-local-dad-matters
Pandas
pandasfoundation.org.uk/our-services/support-for-dads/

Positive communication support

One Plus One
oneplusone.org.uk

Mental health support

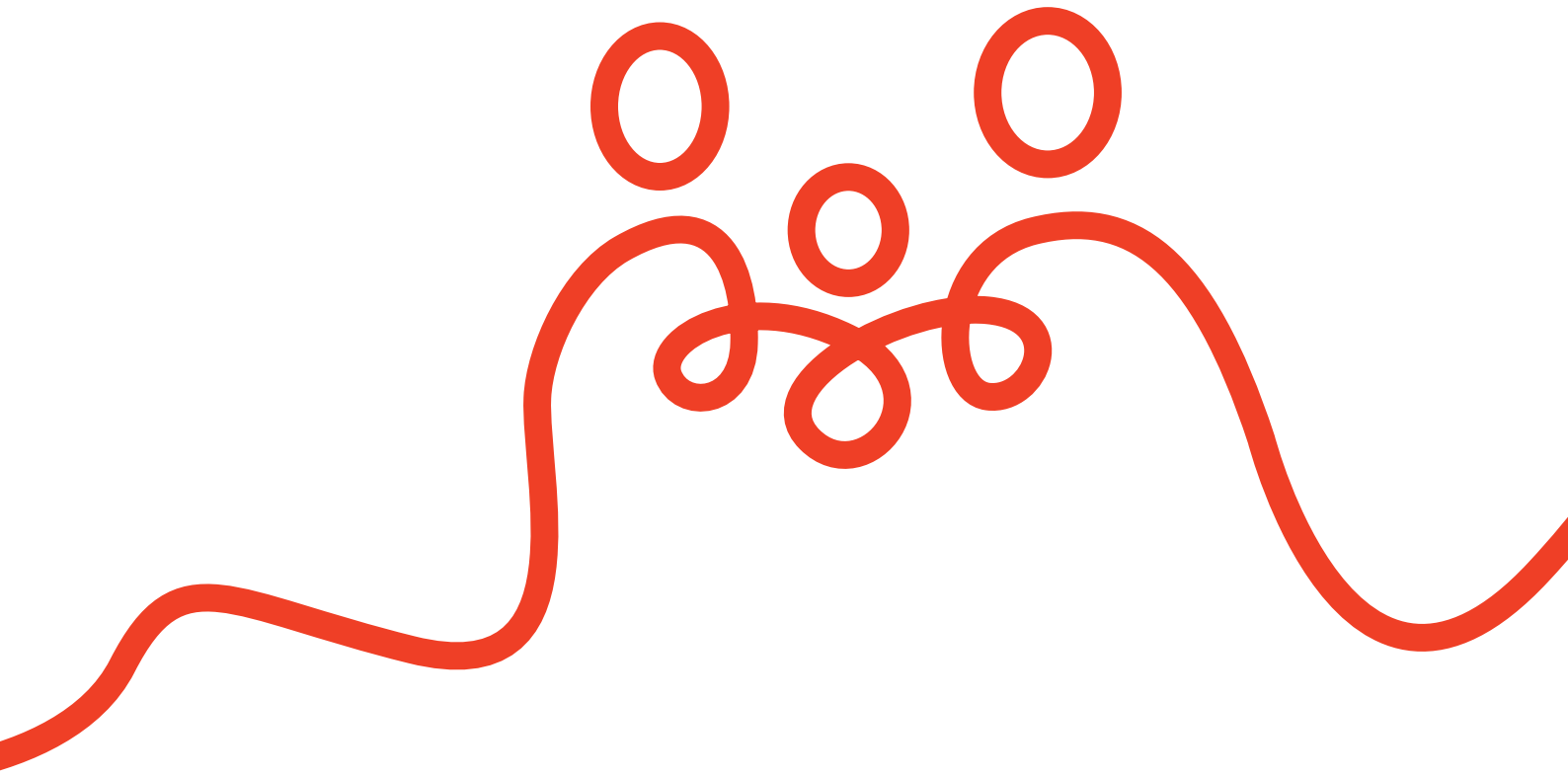
Samaritans
www.samaritans.org
Calmzone
www.calmzone.net
SHOUT
Text SHOUT to 85258

Domestic abuse support

For Baby's Sake Trust
forbabyssake.org.uk
Mankind
mankind.org.uk
Respect
respectphoneline.org.uk

Baby loss support

Tommy's
www.tommys.org
The Lullaby Trust
www.lullabytrust.org.uk



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