

Ealing NCT



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Autumn 2018



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Letter from the Editor

Hi! Hallowe'en is over and we're (scarily) counting down to Christmas.

We're at the super-friendly Grosvenor pub for Bumps & Babies every Tuesday afternoon until Christmas so we would love to see any expectant mums now on maternity leave or those with new babies.

In this issue, Jess tells us why she chose to have a C-section for her second birth, while I give my insight into working part-time. (If you're a dad who's gone part-time, we'd love to hear from you too!) And Ealing NCT's antenatal teacher Lou Toosey gives some valuable advice on getting your baby to sleep!

If you think you could spare



an hour or so a week to help keep Ealing NCT going, then please get in touch. It's a great way to meet other local parents and support the community. We're in need of people to help out with social media, our accounts and our nearly new sales.

Jess

Contents

P4 Birth Story

P7 Part-Time Mummy

P8 Sleep, Glorious Sleep

P10 Advertising Rates

P11 Your Ealing NCT Team

NCT Contact Details

Your Local Branch

As well as Ealing, we cover Acton, Brentford, Hanwell, Greenford, Northolt, Perivale & Southall.

You can find out more on our website:

<https://www.nct.org.uk/branches/ealing>

You can also check out our Facebook & Twitter pages:



@NCTEaling

NCT helpline: 0300 330 0700
www.nct.org.uk

Birth Story

Jess Pickering explains why she chose to have a C-section for her second baby and how it went for her

Two and a half years ago I gave birth to my daughter. I was induced after my waters broke and labour did not start. For various reasons it was one of the most harrowing experiences of my life. It was not until I started the birth plan for my second pregnancy that I was diagnosed with PTSD caused by my first birth experience. Thankfully I can happily say that my experience the second time round was the complete opposite and an utterly joyful and happy one.

Due to the PTSD I opted to have an elective C-section at 39weeks +1. The midwife I saw was incredibly supportive and understood that this was the only way I was going to feel happy following my previous experience. As there were no physical reasons for my C-section I was warned that there may be some emergency ones which would have to go in ahead of me.

So hungry

I was booked for 9am but I didn't end up going into theatre until 1pm. I was very anxious (a side effect of the PTSD) but the midwife team were wonderful and put me in a side room while I waited. The worst part of the wait was being so hungry as I wasn't allowed to eat anything pre-op! At 1pm my husband and I walked into theatre. Everything was so calm and everybody so friendly - a complete contrast to the birth of my daughter

when everything had felt so frantic in the final moments.

I was introduced to all the staff and I lay down on the op table. The anaesthetist was particularly friendly and reassuring. She administered the epidural and I felt a lovely warm feeling spread up through my body as though somebody had pulled a duvet up over my legs! Unfortunately my blood pressure dropped very suddenly after the epidural so I passed out. Far more dramatic for my husband to witness than it actually was for me though as the anaesthetist gave me something that got me back on track in no time at all.

Amazing moment

They then started but I couldn't see anything as there was a screen up. I just felt a small amount of pushing and pulling but not anything painful or unpleasant. Very soon they were telling us that we would be meeting our son and moments later they dropped the screen and I watched him be lifted up. It was an amazing moment and something I will remember and treasure forever, not least because I don't have any memory of my daughter's birth as I blacked out.

They took my son away to check him over and my husband took masses of photos. Even though I couldn't move it was wonderful hearing all the staff taking care of my son and I could



listen to his little newborn cries! Soon he was handed over to me and he lay on my chest and I could hold him and cuddle him.

Meanwhile, little did I know, but I was losing masses of blood! Everyone was so calm about it that I didn't notice anything until the anaesthetist told me and said that a few extra people were needed in theatre to help stop the bleeding! In the end I lost 2.2 litres but thankfully I just managed to avoid having a transfusion.

Less dramatic

Again, I cannot help but make the contrast with my first birth experience as I lost 1.5 litres then. Even though I lost more blood the second time, it all felt so much more calm and in control. From my husband's point of view it was all a lot less dramatic too.

Once I was wheeled out of theatre I was able to breastfeed my son. I spent 24 hours in a special observation unit as they monitored my blood pressure and also my iron levels after blood loss. The next day I was moved to the postnatal suite.

In terms of physical recovery I would say that both birth experiences were comparable - I had an episiotomy and a tear with my first. The main positive difference that I noticed with the C-section though was that I was able to sit down and lie down comfortably whereas due to the episiotomy with the first I had been in almost constant discomfort.



The most marked difference was my mental state. I felt so happy and elated after my C-section. There was none of the trauma or depression that I suffered with my first. Really, I think that the point is not that C-sections are better than vaginal births but that it is crucial to find a birth plan that suits each woman. I feel very lucky that the hospital recognised this the second time round and that they put together such a wonderful birth plan for me.

I am now three months in to being a mum of two. It is relentless hard work but comes with many joys too. No plans for a third baby right now but I absolutely would opt for a C-section again.

When we publish birth stories, we provide an account of just one woman's experience(s).

Those suffering, or who think they may be suffering, mentally after giving birth should contact a health professional. There is also advice available on the NCT website and the Birth Trauma Association.

Equally, if you are pregnant and have any concerns about any aspect of your pregnancy, giving birth or coping with being a parent, then please also speak to a health professional as soon as possible.

Ealing has plenty of support available, including a perinatal mental health service. You can ask your GP or midwife to refer you.

You can also self-refer to Ealing IAPT (www.ealingiapt.nhs.uk).

Box it up.

P	U	S	H	C	H	A	I	R	T
E	N	T	R	A	M	S	W	S	Y
L	E	E	A	R	K	A	S	E	U
T	P	R	T	S	C	F	R	I	M
T	Y	I	T	E	Y	I	C	P	O
O	A	L	L	A	V	O	E	P	B
B	L	I	E	T	T	S	T	A	I
P	P	S	V	Y	R	P	B	N	L
H	R	E	C	N	U	O	B	I	E
L	M	R	S	W	I	N	G	C	B

BIBS
COT
TOYS
PRAM

SWING
CAR SEAT
PLAYPEN
~~PUSHCHAIR~~

STERILISER
MOBILE
RATTLE
BOTTLE

BOUNCER
NAPPIES



Part-time Mummy

More and more women are choosing to work part-time after having children. Jess Hinds is one of them.

Almost two years ago, nine months after my son was born, I joined the ranks of the millions of mothers working part-time. Sometimes it has been the best of both worlds, sometimes it has felt like the worst of both.

Being a working mother has become more common. According to the Office for National Statistics, almost three-quarters of mums with children under 18 are employed today, up from 62% in 1996. And over 6 million are working part-time, with the majority not wanting to take on a full-time job.

A closer look at the statistics shows that, rather unsurprisingly, it is mums with young children who prefer to work part-time. Around two-fifths of all women living in England whose youngest child is aged between one and three work part-time. I didn't have to fight with my employer to work four days. Having heard some bemoan their companies' lack of flexibility or forward-thinking, I count myself very lucky.

Of course, it hasn't always been easy juggling work and childcare. I spend Mondays looking after my son so if we have a particularly difficult day, I don't start my four days at work refreshed and ready to tackle my job.

There's also always the temptation to check and respond to work emails on my "day off", particularly during a busy period, even though my boss and colleagues would never expect a reply. And there's the lost salary and (probably) some disadvantage in terms of career progression.

However, these downsides have been more than offset by all the positives. Logistically, it has worked well. Doctors and dentist appointments are easier to arrange. If needed, I have an extra day to catch up on washing etc. That has allowed us to spend more time as a family at the weekend.

There is also the benefit of not having to do the nursery run once a week. When my son started at nursery, he was a year old.

Due to mine and my husband's jobs and where they are located, he needs to be dropped off at 7.30am and collected just before 6pm. That's a long day for anyone, let alone a baby.

Dedicated time

But most of all, it has allowed me to spend dedicated time with my son while also allowing me to do something for myself and giving me an identity beyond that of being his mother. I think I enjoy my day a week with him more because I know it isn't my every day. (And, being honest, when it's been a tough day I know that on

Tuesday I can hand him over to nursery.)

I also appreciate work more. The adult conversation, the application of my brain and, perhaps most of all, the hot cups of tea and trips to the toilet without someone following me in and providing a running commentary and praise!

Working part-time isn't always an option for many, so I feel very lucky most of the time to be able to work as well as spend extra time with my son. I'm sure I'll go back to full-time at some point, but for now I'm going to enjoy what I have.



Top: Jens Johnsson; Bottom: rawpixel. Both from Unsplash

Sleep, Glorious Sleep

Ealing NCT ante-natal teacher Lou Toosey gives some advice on understanding babies' sleep patterns

Along with Sarah Johnson, I have started SleepGeeks - a West London-based sleep consultancy helping parents of babies and young children find better sleep habits.

As NCT antenatal teachers, they work with current scientific research into infant sleep which may be hard for parents to pull out from all the advice.

We have three main focuses:

Firstly, we are immersed in evidence-based research - hence our name.

Secondly, we try to put ourselves into the child's mind and see problems (if problems they really are) from their point of view. What's going on in the child's head? And what does the child need to move forwards?

Thirdly, we know that parents are the experts of their own children, and so we work closely with mums and dads to find the relevant practical and individual solutions for their families and not a one-size fits all approach.

Hot Topic

Sleep is fascinating and a hot topic not just for parents but among sleep-deprived millennials, too. What helps anyone to get to sleep, whether child or adult, is a complex mixture of hormones, habits and associations.

Hormones fluctuate with the time of day and can be easily disrupted by travel, certain foods and the blue light emitted by your Smartphone or tablet (which is why everyone needs to put those devices away for an hour before they go to sleep!)

Habits take time to build up and can be derailed by all kinds of distractions: which is why a regular, reliable bedtime routine is very important. Especially for little ones.

Associations with falling asleep are crucial. Children need to be confident that



Photo: Julie Johnson on Unsplash

their bed and bedroom is a secure, friendly place and it is very easy to give them quite the opposite message, without even meaning to.

Most parents know that effective blackout blinds will help their child to sleep better but what about the rest of the room? Is it somewhere the child regards as a safe haven - or is it a little-used space, even a punishment area?

Taking a long view of humanity, the majority of families, have typically shared a room, even a bed, at night. This doesn't mean it is wrong to fix up that nursery for your baby to sleep in, as long as you take note of the evidence that shows that the risk of SIDS is dramatically lowered when a baby sleeps in the parents' room until six months.

But it does mean parents should be sensitive about how it might feel for their baby to sleep alone.

Self-soothe?

Many people still believe that learning to "self-soothe" means a baby being left alone in a room, crying herself to sleep.

However, the scientific evidence suggests this is not learning to self-soothe so much as learning that however much you cry, nobody

will come to help you. It means learning that the world is a cruel, unpredictable place and that the communication methods Nature has equipped you with are useless. Not very soothing at all.

A child who has learned that lesson might reasonably choose, on being taken to a new place such as a day nursery, to either be incredibly clingy or to be withdrawn and emotionally hard-to-reach.

Most children adapt - they are resilient. But research shows that when a child has no doubt that her adult caregiver is a safe, reliable haven, she feels more confident about exploring new places and tackling new experiences. She's more likely, for

example, on being introduced to a new nursery, to let go of the parent's hand and walk over to check out a toy box.

We have found in the journey to becoming sleep consultants that sleep problems are not isolated. The child's whole life is involved...along with the parents' lives...and those of their siblings.

It can be daunting and we believe in being completely frank if we can't see a solution. But when something that we have suggested works, it can brighten the family's whole life!

To have a chat and see if we can help you please contact us via www.sleepgeeks.com or www.facebook.com/sleepgeeks



Photo: Sadik Kazu on Unsplash



"The NCT bumps and babies group gave me a safe and welcoming place to go every week with my brand new baby when the world felt so very different to me."

Sophie, Edinburgh

Last year the money you raised allowed NCT branches to run more than **10,000** events, such as Bumps & Babies groups, helping thousands of parents like Sophie.

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Our branch is run by volunteers. We are mostly parents with young children working from home which means we are not always available. Please be considerate of meal/bed times if you telephone us, and allow a few days for us to respond to emails. This includes our agents such as bra fitters, valley cushion and pump agents, and also our breastfeeding counsellors and peer supporters.