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Mentalization-based Families First Group Intervention for First-Time Parents: Parents' Perspective

Johanna Sourander, M.Ed., Marja-Leena Laakso, PhD, and Mirjam Kalland, PhD

ABSTRACT

The study investigated, first, the benefits reported by first-time parents after attending a Families First mentalization-based group intervention and, second, looked for indicators of mentalization. A total of 367 mothers and 183 fathers completed a web-based questionnaire. Data analysis concentrated on parents' responses to seven open questions that were subsequently processed by qualitative thematic analysis. Also a chi-square test was performed to study the differences between mothers and fathers on the benefits reported. Four main benefits were reported by the parents: peer support, understanding of the baby, insights into oneself as parent and parent-child interaction, and family involvement. Indicators of mentalization and differences between mothers and fathers in the number of experienced benefits within the four main categories of benefits were found. The results indicate that the Families First intervention succeeded in benefiting first-time mothers and fathers in various ways. Also, the findings suggest that a mentalization-based group intervention supports parents during a significant transition phase in their lives. The findings highlight the value of preventive support for first-time parents and the application of a mentalization-based approach in parenting programs.

Background

Becoming a parent is considered one of the most significant transition periods in the life course of an individual (Cowan & Cowan, 2000). It has been pointed out that the transition to parenthood is an ideal life stage for intervention programs (Salmela-Aro, 2012). One of the most promising approaches in parental support is in the field of research focusing on the impact of mentalization and parental reflective functioning (PRF), defined as the parental ability to understand his/her child's mental states, on the parent-child relationship. A recent review by Camoirano (2017) includes 47 studies that, taken together, supported the notion that higher parental reflective functioning was associated with adequate

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caregiving and the child's attachment security, whereas low maternal reflective functioning was found in mothers whose children suffered from anxiety disorders, impairment in emotion regulation, and externalizing behaviors. In addition, the review shows that clinical interventions focusing on enhancing parental reflective functioning were effective in improving maternal mentalization and quality of caregiving.

However, more information is needed on the impact of group-based parenting programs on the well-being and health of first-time mothers and fathers. The present study provides knowledge of aspects that Finnish first-time mothers and fathers felt as being beneficial in a mentalization-based parent group intervention. The Medical Research Council (MRC) in the United Kingdom has developed a stepwise framework for designing and evaluating complex interventions (Craig et al., 2008). The MRC approach has proved influential and is widely cited (Campbell et al., 2007). This paper represents the early phase of piloting and development work, with a focus on parental reports on the perceived benefits of participating in a mentalization-based Families First parent group. As recommended in MRC (Craig et al., 2008), we included this qualitative study of the participant's perspective in the development and evaluation of the new intervention model. Furthermore, following the guidelines of MRC, parents' perceptions can be used to formulate research questions and in developing the final intervention research design.

Parental mentalization and parental reflective functioning

In the last couple of decades, there has been growing interest in studying parental mentalization (Camoirano, 2017; Katznelson, 2014), and its operationalization, reflective functioning. Fonagy et al. (2002) define mentalizing as a capacity to see and understand the self and others through mental states (i.e., feelings, beliefs and intentions), and to understand the connection between one's own and others' behavior and mental states. Futher, Slade (2005) and colleagues (Slade et al., 2005) introduced the concept of parental reflective functioning (PRF), which brought the concept of mentalizing to the field of parenting research and is defined as parents' capacity to mentalize about themselves, their children, and their relationship with their children. PRF have been defined as a relationship-specific manifestation of the more general capacity for reflective functioning (Luyten et al., 2017). In this article, we use terms PRF and parental mentalization interchangeably.

According to Slade (2005) PRF may be a critical factor in the transition to parenthood that promotes sensitive and adaptive caretaking behavior. Consequently, in this study we concentrate on the PRF of first-time mothers and fathers. Furthermore, Fonagy et al. (2002) suggested that affect regulation and mentalization are closely related. Hence, the capacity to mentalize supports parents' abilities to regulate and withstand their emotions. Similarly, the findings of Schultheis et al. (2019) support the relationship between emotion regulation and maternal reflective functioning.

There are three validated measures of PRF. The pregnancy interview (PI) is a semi-structured clinical interview used to assess PRF during pregnancy (Slade, 2003). The parent development interview (PDI; Slade et al., 2004), also a semi-structured clinical interview and the Parental Reflective Functioning Questionnaire, an 18-item self-report questionnaire (Luyten et al., 2017), apply to parents after the birth.

Previous studies have mainly concentrated on the mentalizing capacity of the mothers. However, Benbassat and Priel (2015) noted that there is evidence to indicate that paternal mentalizing capacity is connected to child development and that paternal mentalizing capacity may have special meaning in challenging life situations. In addition, the conclusion of their recent study Buttitta et al. (2019) states that fathers' RF has an essential role in parenting and in children's emotion regulation. Therefore, in this study we are interested in the viewpoints of both first-time mothers and fathers.

Empirical studies on mentalization-based parenting interventions began to be conducted in the early 2000s. As Camoirano (2017) points out, the interventions were planned to overcome the

limitations that behavioral and psychoeducational parenting programs showed in improving caregiving behaviors (for a review, see Suchman et al., 2006). To date, several intervention programs have been developed for different populations, for example, for adoptive and foster parents (Adkins et al., 2018; Bammens, Adkins & Badger, 2015), mothers in prison with their babies (Sleed et al., 2013), parents of infants, toddlers, and preschoolers (Goyette-Ewing et al., 2002; Slade, 2005), first-time mothers and fathers (Kalland et al., 2016), substance using mothers in residential treatment and their babies (Pajulo et al., 2012), vulnerable young families having their first child (Sadler et al., 2013; Slade et al., 2020), parents of children suffering from a neurodevelopmental disorder (Sealy & Glovinsky, 2016), substance-abusing mothers with children up to 3 years of age (Suchman et al., 2012) and mothers involved with mental health services (Suchman et al., 2017). Promising evidence for the effects of these interventions on children and parents have been found in both randomized trials and naturalistic studies (Kalland et al., 2016; Ordway et al., 2014; Slade et al., 2020). However, previous research on mentalization-based group interventions, especially on preventive programs for both mothers and fathers, is limited. Therefore, in this study, we concentrate on exploring the benefits first-time mothers and fathers reported after attending to the mentalization-based group intervention called Families First.

Based on the literature reviewed above, the main aim of this study was to investigate first-time parents' perceptions of the mentalization-based Families First parent group intervention model. Among the studies of mentalization-based parenting interventions, fathers' perspectives are still underrepresented. In this study, we had a large number of both, mothers and fathers participating. Hence, we wanted to include a research question that allowed a direct assessment of fathers' viewpoints, without a reliance on maternal report. Further, as first-time parents, mothers and fathers may experience the new life-situation differently and, consequently, benefit from different aspects of an intervention program (Carlson et al., 2014). Therefore, we wanted to explore whether there were commonalities or differences in what mothers and fathers felt to be beneficial in the intervention. As the intervention model related to this study is mentalization-based, we wanted to address this on the third research question. Without making a formal assessment of the level of mentalization, we were able to study the content and indicators of mentalization in parents' reports.

The research questions were the following: RQ1: How do parents describe the benefits of the intervention after attending the group sessions? RQ2: What differences, if any, exist between mothers' and fathers' descriptions of the benefits of the group sessions? RQ3: What kinds of indicators of mentalization can be seen in the benefits described by the parents?

Families First parent group intervention model

The mentalization-based intervention model used in this study is based on a format called Parents First. It was originally developed at the Yale Child Study Center (Yale University, CT, USA) as a 12-session group intervention. The Parents First format was adapted for use in the Finnish health care and family service system under the name Families First.

In Finland, the aim of the program was to develop an intervention that includes several approaches: dyadic (parent-child interaction), triadic (communication between family members), health promotion (resilience to withstand future adversities) and peer-support (social support network). An additional aim was to employ an intervention program that can be implemented within basic municipal services, such as well-baby clinics, and universal support for all first-time families that does not require personnel with extensive specialized therapeutic training (public health approach). For a more detailed description of the Families First program, see Kalland et al. (2016).

Methods

Participants

Around 80 municipalities in Finland signed a contract to implement Families First parent groups. The municipalities were located in different parts of Finland and differed in size. In Finland, all pregnant mothers and their partners are provided cost-free services during pregnancy in maternity clinics within primary health care. Similarly, when the baby is born, the family is provided cost-free primary health care services and health checkups for the infant in the well-baby clinics until the child is seven years old. According to national statistics, 99.7% of the mothers use the service during pregnancy. Families First groups were mainly organized by well-baby clinics as a continuation of prenatal education classes. Nurses working in the well-baby clinics invited first-time parents, without targeting any particular risk group, to participate in the parent group during the prenatal education classes and health checkups.

A web-based questionnaire was sent by e-mail to 1,103 parents at the end of their parent group during 2012–2014 and was completed by 550 parents (367 mothers and 183 fathers). Most of the mothers were aged 30 years or under and most of the fathers were aged from 31 to 35 years. According to Statistics Finland, the average age of first-time mothers was 28.8 years in Finland for the year 2015 and for fathers 31.0 years (Statistics Finland 2016). The mean age for mothers and fathers in our sample did not differ from the national average. The educational backgrounds of the participants varied from a high school diploma to a master's degree, most having either a high-school diploma, vocational training or a bachelor's degree, and they represented a variety of occupational backgrounds (for example, nurses, engineers, farmers, teachers).

Questionnaire

The questionnaire consisted of four sections: demographic information, parents' motivation in signing up for the parent group, practical arrangements of the groups, and parents' perceived benefits of the groups. The questionnaire included both closed questions (74 items) and open-ended questions (seven items). The focus here is on the seven open-ended questions targeting parent's perceptions of the parent group. Open-ended questions were used to obtain parents' accounts in their own words.

For each of the seven questions, parents were asked to write their answer in a box below the question. The questions were the following. First: What themes or discussions in the parent group did you find most helpful and why? Second: Was there anything that you would have wanted to hear about or discuss that was not included in the intervention? Would you have wanted to hear about something else or discuss something else in the parent group? Third: Would you like to comment on the meetings of the parent group? Fourth: What did you find most beneficial in the parent group intervention? Fifth: Have you noticed yourself behaving differently with your baby since attending the group? If so, how? Can you give an example? Sixth: Would you recommend the Families First parent group to your friends? If yes, why? If not, why not? Seventh: Would you like to give feedback or give us your thoughts about the Families First parent group? How would you develop the model?

In this study, although a majority of the parents attended the parent group as a family, we wanted parents to answer the questionnaire individually and thus obtain each participant's personal viewpoint. The parents gave 1,584 answers to the seven open-ended questions. Of these answers, 888 contained one or more descriptions of the benefits of the parent group. One mention of a benefit is considered a code in this study. Our analysis focused on the mothers' ($n = 805$) and fathers' ($n = 297$) codes, $N = 1,102$ codes.

Data analysis

The first author engaged in inductive thematic analysis, described in detail by Braun and Clarke (2006). To ensure the trustworthiness of the analysis, the other writers checked for coding consistency and emerging themes several times during the analysis process. In addition, peer debriefing and support meetings, where coding and emerging themes were discussed, were used throughout the analytical process to reduce research bias (Padgett, 2008). To discover commonalities running through the data as a whole, the analysis was conducted across the questions.

The analysis followed Braun and Clarke (2006) six-phase approach which contains the following phases of familiarization with the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes and producing a report. Additionally, a 15-point checklist for assessing the quality of thematic analysis by Braun and Clarke (2006) has been followed for this study. Direct quotes from the data, providing a clear illustration of each theme in the parents' own words, along with the number of the code, are presented in the results section.

To address the second research question, the codes of mothers and fathers were kept apart to identify possible differences between the responses of each and the benefits they reported. The differences were studied by exploring the content and frequencies of the codes and the results are presented in sub-sections one and two in the results section. However, as Toerien and Wilkinson (2004) make clear, although frequency is not necessarily a measure of significance, it gives an idea of the extent to which a specific experience is common across the responses given by different people. Further, to see if the differences in frequency between the main benefits reported by mothers and fathers were statistically significant, we performed a chi-square test.

To answer our third research question, we approached the analysis using a theoretical lens, which sensitized us to attend to mentalization-related issues. As the study was web-based, parents' descriptions of the benefits of the parent group can be considered as their spontaneous and independent answers to the questionnaire. Thus, we could not make a formal assessment of the level of mentalization, but we were interested in the content and indicators of mentalization in the parents' reports. Our guidelines when going through the data were previous research on parental mentalization, the Addendum to Reflective Functioning Scoring Manual for use with the Parent Development Interview, Version 3.0 (Slade et al., 2010), and the Reflective Functioning Manual, Version 5 for application in adult attachment interviews (Fonagy et al., 1998).

Results

The results of the study are prearranged according to the research questions and reported in two sub-sections: 1. The main categories of benefits of the Families First parent group and the differences between mothers and fathers found in them (RQ1 and RQ2); and 2. The detailed descriptions of the benefits reported by the parents and the indicators of mentalization in these (RQ1 and RQ3).

RQ1 and RQ2: The main categories of benefits and the differences between mothers and fathers

Our analysis revealed four main categories of benefits reported by parents participating in the Families First parent group: 1. Peer support, 2. Understanding of the baby, 3. Insights into self as parent and parent-child interaction, and 4. Family involvement. Each of these main categories are reported in more detail in sub-section two of this results section.

During the analysis, we kept the responses of the mothers and fathers apart to determine whether gender differences were present in the benefits reported by the parents. Interestingly, no gender-related differences were found in the content of the codes. We could not say, on the basis of the content, if an answer randomly selected from our data was from a mother or from a father. To

Table 1. Frequencies and percentages of the four main categories of perceived benefits of the Families First parent group.

Main benefits	Codes of mothers	% of the codes of mothers	Codes of fathers	% of the codes of fathers
Peer support	318	39.5%	89	30%
Understanding of the baby	138	17.1%	97	32.7%
Insights into self as parent and parent-child interaction	201	24.8%	63	21.1%
Family involvement	53	6.6%	16	5.4%
	<i>n</i> = 710		<i>n</i> = 265	

illustrate the contents of the parents' responses, direct quotes are presented in the sub-section two of this results section. However, we found gender-related differences in the number of reported benefits. Frequencies and percentages are reported in Table 1 and in sub-section two of this results section to demonstrate the quantitative differences between mothers and fathers.

Because fathers and mothers differed in the number of benefits reported in the four main benefit categories, we conducted a chi-square test to explore whether the differences were statistically significant. In the chi-square test, the overall composition of the reported benefits between the mothers and the fathers was tested. The results showed a statistically significant difference in benefits between mothers ($n = 710$) and fathers ($n = 265$): $X^2(3) = 31.42$ ($p < .001$). The category which showed the biggest gender difference was "Understanding of the baby." It seems that this aspect of the intervention was experienced as more beneficial for fathers than mothers.

RQ1 and RQ3: The benefits described by parents and indicators of mentalization in their descriptions

This sub-section reports the four main categories of the perceived benefits of the Families First parent group from the parents' perspective, illustrated by direct quotes from the data. Indicators of mentalization are reported after each main benefit.

Peer support

For mothers, peer support was the leading benefit gained from participation in the parent group: 39.5% of mothers' codes ($n = 318$). Fathers also strongly brought up the value of peer support: 30% of fathers' codes ($n = 89$). Most of these parents reported that sharing experiences and thoughts was important to them. Hearing the experiences of other parents gave them new viewpoints and ideas. Parents also mentioned that peer support from the family group was important when one had relocated and had no social network. Several comments were made about the importance of not being alone. Spending time enjoyably together was also frequently mentioned. One father wrote: "*You get good answers to questions about everyday life. You can share feelings. You are not alone*"(118).

Parents reported that it was helpful to hear about the difficulties that other parents faced. It helped them to understand that other parents also encounter problems and difficult times and that it is normal to have both positive and negative emotions about parenting and the baby. One father wrote that it was nice to hear that everyone experiences similar kinds of problematic situations. It freed him from feeling that the direction things were developing in was somehow bad, or that things were wrong (63). Another father wrote: "*In the parent group you could see that others experience the same kind of delights and sorrows in taking care of the baby or in family life. It made me feel that our family is not the only one with difficulties*"(206).

Becoming a parent for the first time was very often brought up in connection with the need for peer support. Many parents stated that with the first child everything is new and life changes completely. In that situation, it is helpful and a relief to be able to share experiences with others in the same situation. As one mother put it: "*Our baby is our first child. It is a big change. We got peer support from the group,*

for example, about staying up. You could see that many other parents struggle with the same kinds of difficulties in everyday life and some have even bigger problems”(179).

Parents' comments about the open and safe atmosphere in the parent group were also coded under peer support. A confidential atmosphere made it possible to tell others about one's difficult situations and feelings. One mother commented: *“I was very satisfied with the group. In my opinion it was good that no one tried to give the impression that their baby is perfect and that they never have any problems. Through open discussions in the group I also got ideas about how to act with my baby in different kinds of situations. I got so much more from the discussions after I realized that others might be struggling with the same things. When you think about it afterward you realize it was a small thing but everything is so new with your first child”*(434).

Indicators of mentalization in the main category of peer support

Viewed through the lens of mentalization, the main observations regarding peer support were twofold: first, parents found sharing thoughts and experiences helpful and gained an understanding from a diversity of perspectives; and second, they found normalizing their difficulties and strong emotions regarding their baby or parenthood helpful.

According to Fonagy et al. (1998), recognition of diverse perspectives is one of the elements of mentalization. In our data, both fathers and mothers mentioned that in the parent group it was possible to learn about alternative ways of thinking or acting in everyday life. This not only gave parents new perspectives on their parenthood but some parents also reported that it strengthened their own approach to parenthood. One father said that the discussions on each theme in the group was helpful because people have different ways of thinking and this provides different perspectives on things (39). One mother reported that families are different and that each has its own ways of solving problems in everyday life with a baby. Sharing these gave parents new tips and helped them deal with problems in ways that suited their own lives (84).

Understanding the baby

Parents reported that the parent group helped them to better understand their baby. For fathers, this was the premier benefit: 32.7% of the fathers' codes ($n = 97$) were in this category. For mothers, the corresponding proportion was 17.1% ($n = 138$).

Many parents simply stated that the most important benefit of the group was gaining a deeper understanding of their baby. Others provided more details, such as that they slowed down and started to think about everyday life from the baby's perspective. Parents also started to wonder what their baby's needs and experiences would be in different situations. As one mother wrote: *“How to relate to my baby in different situations because I was lost over that and I had difficulties understanding my baby”*(89).

Parents wrote that understanding their baby's behavior became easier after attending the parent group. For example, one mother felt that the group discussions on various factors that might underlie a baby's behavior helped her to understand the behavior of her own baby and how a parent can guide her or him. In addition, the discussions of the emotional life of a baby provided the new parents with alternative perspectives. One father wrote: *“Discussions of the baby's feelings and moods. These are the themes I had least been thinking about before the parent group”*(32). Some parents reported gaining the most benefit from the discussions on themes that were about the parent-infant relationship.

Making observations of the baby in the parent group and doing the related homework were perceived as beneficial by many parents, some of whom wrote that they had observed their baby more closely after attending the parent group. Some wrote that they realized they can simply watch their baby when she or he is playing, without interrupting or interfering in the baby's play.

Topics related to child development were also mentioned by the parents. Some felt that their strongest need was to learn about child development because their baby's growth was a significant part

of their everyday life. Many reported that discussions related to the temperament of children helped them to better understand their baby's personality and individuality. One father mentioned that he benefited from the discussions on child development, personality and diversity, because these made him aware of how individual children are and how they all develop at their own speed (2).

Indicators of mentalization in the main category of understanding the baby

The parents reported that participating in the parent group motivated them to observe and learn more about their baby. Parents became more curious to know what their baby was thinking or feeling and what she or he needed in different situations. One father wrote: *"It was only after thinking about the feelings and thoughts of my baby that the baby started to feel like a human being to me"*(66).

A large portion of the parents wrote that the most important benefit they derived from the parent group was gaining a better understanding of their baby. Our data indicated that participation in the group enhanced parents' motivation and capacities to see the world from the baby's perspective.

Insights into self as parent and parent-child interaction

The group discussions added new perspectives to the parents' ways of thinking: 21.1% ($n = 63$) of the fathers' codes and 24.8% ($n = 201$) of the mothers' codes were related to gaining a deeper understanding, first, of their own behavior and ways of thinking and feeling, and second, of their behavior and relationship with their baby. Many parents stated that the group discussions included themes and topics that they would not have thought about on their own. One mother felt that she gained confidence and encouragement from the parent group. She also said that the group conversations helped her to ponder her own actions as a parent (290). Many other parents also mentioned gaining confidence and trust in their own abilities from the parent group. For one of them, it was helpful to know that no one needed to be a super-mom. She acquired many tools to help her to read her baby and herself (30). A few mothers mentioned experiencing less stress and being able to relax more after attending the parent group. One father wrote: *"I play more with my baby, he/she likes to be bounced up and down and laughs a lot. I am now more confident and a better role model because I have more understanding of the needs of my baby"*(105).

For many parents, the most valuable discussions were those about stressful and challenging situations and feelings. One mother mentioned that discussions about contradictory and negative feelings were especially helpful for her. She felt that it was comforting to know that challenging feelings are okay and that the other parents have them too (55). One father felt that talking about difficult situations and strong emotions was fruitful and evoked many thoughts. He continued: *"Even if the discussion did not necessarily lead to any right answer, it was thought-provoking and continued at home. In addition, themes that you might never have thought about, but which were certainly beneficial, were brought up. These conversations also led me to notice my weaknesses in childcare and in my marital relationship"*(17).

The parent-group participants reported thinking more about how their behavior affects their baby and realizing how important their own moods are to her or him. And vice versa, after attending the group, the parents understood better how their baby's feelings and behavior affect them. One mother wrote that she was already now thinking more about how she may be affecting her baby. She also said that she thought more about how to react when she gets upset or frustrated with her baby (332). The most helpful benefit that another mother found was understanding that her baby reacts to how they act as parents. She continued: *"When we are calm and loving and we pay attention to our baby, everything is fine. My baby doesn't whine or cry without a reason or because she wants to irritate us or ruin something"*(244). Some parents mentioned coming to realize that there is always a reason for a baby's behavior and that babies don't cry because they want to be mean.

Other parents reported that their new understanding helped them to stay calm in challenging situations with their baby. One father wrote that when his baby throws a temper tantrum he can

now think more clearly (16). Another father mentioned that he is more patient with his baby, for example, in situations when he does not understand why the baby is crying (104). One mother wrote: *“In difficult situations I think more specifically why my baby might be behaving this way. Therefore, I don’t get upset right away and think that he/she wants to tease me. I understand that there is often something real that is distressing my baby, for example, separation anxiety, sore teeth, allergy”*(330).

Some parents gave even more detailed examples of enhanced emotional and behavioral regulation, as in the following quote: *In moments when my baby is crying hard and I am utterly exhausted, earlier I would have gotten irritable and maybe spoken harshly to my baby. I have now learned to count to ten or handle my frustration some other way than snapping at my baby”*(293).

Indicators of mentalization in the main category of Insights into self as parent and parent-child interaction

In this main category, indicators of mentalization included parents’ ability to mentalize themselves and to mentalize their relationship with their baby.

Parents described starting to think more and gaining new perspectives and a deeper understanding of their own thinking, emotions, and behavior. For example, one mother wrote that the group discussions helped her to understand that even though her baby is having a bad day, this does not mean she is a bad mother (2). Parents emphasized the value of the group conversations about difficult situations and strong emotions.

Parents also gave examples of situations in which they can now, after attending the parent group, think more clearly, behave more calmly or otherwise better regulate themselves with their baby. As one father wrote: *The group discussion theme “I am upset” stayed on my mind. When my baby ripped pages from a library book, I took the situation more calmly than I used to do. I now understand better why my baby is interested in books and that the fault in that situation was all mine”*(104).

When looking for indicators of mentalization in our data, the descriptions given by parents of increased self-regulation after participating in the group are of special interest. At the heart of mentalization theory is the idea that improvement in mentalization capacities manifests when a change in behavior occurs and emotions and behavior become better regulated. In this sense, the parents’ descriptions can be considered markers of enhanced parental mentalization. Some descriptions indicate a decrease in false or hostile interpretations of the baby’s behavior. For example, one mother wrote *“I am better with my baby’s temper tantrums. I have realized that my baby doesn’t cry because he/she wants to be mean, but that there is always some reason behind it and crying is the only way of showing it. I now see it this way and I stay calmer and more patient in these situations”* (313).

Family involvement

Parents reported benefits concerning their family, spouse and relationship: 5.4% ($n = 16$) of the fathers’ and 6.6% ($n = 53$) of the mothers’ codes were in this category. Several parents mentioned that the parent group was the first hobby for the whole family. They said it felt good to participate together and it was nice to be in the group with their baby and spouse.

Parents reported benefiting from hearing the thoughts and opinions of their spouse. Some parents said that the group conversations helped them to understand their spouse and strengthened their relationship. One mother felt that talking about how parenthood affects the parental relationship was of the greatest benefit for her (78). One father wrote that interpreting and dealing with his own feelings gave him new perspectives on his own and his wife’s behavior in different kinds of situations (26).

Parents also reported that the group discussions caused them to think about family matters. Some wrote that the group discussions continued at home. One mother wrote that she and her husband more frequently started to discuss themes handled in the group after the meeting and also tried some new ways of being with their baby (248).

Indicators of mentalization in the main category of family involvement

Most of the indicators of mentalization in our data center on parents engaging in efforts to better understand the experiences and behavior of their baby or themselves. However, a few parents expressed interest in their spouse's viewpoint. One mother wrote "*It was interesting to think about what might be going on in my spouse's mind*"(124). Another mother wrote that for her it was good to hear the fathers' opinions of the topics discussed in the group. It made it easier for her to understand her husband's feelings (100).

Many parents reported being more motivated to think about their family. One father wrote that being in the group was a pleasant experience and that the group discussions made him think about his own family and parenthood (112). Some parents reported gaining a wider understanding of their family life or relationships between family members. One mother wrote "*It was a hobby for our family that made us stronger as parents and gave us more understanding of our baby and also more understanding of each other*"(457).

Discussion

This study is the first to report on the benefits gained by a large number of first-time parents participating in the Families First mentalization-based group intervention. Along with the nature of the perceived benefits, the study also focused on the differences between mothers and fathers in the benefits they reported and on the indicators of mentalization in these. Four main benefits of the intervention were identified: Peer support, Understanding of the baby, Insights into self as parent and parent-child interaction, and Family involvement. Analysis of the differences between the benefits that the mothers and the fathers reported revealed a significant quantitative, but no qualitative, gender difference. This study also identified indicators of mentalization in the benefits the parents reported.

In addition to the benefits, parents were given the opportunity to share any perspectives on potential drawbacks or opportunities for improving the program. However, there was only a small number of drawbacks or improvement ideas reported and it was not possible to thematically analyze those. Nevertheless, as more general observations, it is notable that parents wished to have more open-ended discussions during the meetings, more discussions of everyday life with a baby, for example, about sleeping. Some parents would have wanted to discuss more about coping as a parent. Few parents mentioned that the themes of the discussions were too similar and few did not like the homework given after each session. Some parents mentioned that they would have wanted to hear more specifically about child development and discuss the coming developmental phases, like toddlerhood.

Furthermore, parents were asked if they would or would not recommend the Families First parent group to their friends in a similar life situation and why. Two of the fathers and four of the mothers commented that they would not recommend the group, because they felt that they did not benefit from it.

Among parenting programs, there are individual, home-based or group-based programs available. For the Families First intervention, a group-based approach appeared to be the most suitable. This choice was justified as peer support turned out to be the most-often mentioned benefit. Being among peers, the first-time parents could share experiences and normalize positive and negative emotions toward parenting and the baby. Ingley-Cook and Dobel-Ober (2013) similarly found that the greatest benefit of a mentalization-based group treatment for young people, who were in care or adopted, was meeting others in similar circumstances, sharing experiences and making connections.

In this study, many parents reported that having one's first child is a major life-changing event that can cause parents to feel confused and insecure. Slade (2006) points out that it is difficult to know another person's emotional state and that parents and children sometimes experience conflicting mental states. She continues that handling contradictions and misinterpretations can be very difficult

for parents. Nevertheless, she also states that parents find normalization of these processes in the group format very helpful.

Parents reported increased motivation to observe and learn more about their baby during the group process. According to Slade (2006), the idea of reflective parenting programs is to help parents keep their child in mind in increasingly complex ways. The present results showed that, particularly for fathers, the most important benefit of the parent group was greater understanding of their baby. Sharp and Fonagy (2008) state that different operationalizations of parental mentalization have a factor in common that they refer to as “a meeting of minds” between parent and child. According to Tomasello et al. (2005) a meeting of minds requires the motivation to share the emotions, intentions and perceptions of others. In addition, Benbassat and Priel (2015) acknowledge the importance of motivation in acquiring mentalizing skills. Our data indicated that the Families First program enhanced parents’ motivation and capacities to see the world from their baby’s perspective.

Research has shown that a high parental mentalization capacity associates with secure child attachment and correlates positively with the child’s development (Camoirano, 2017). In this connection, parents’ reports of enhanced understanding of their baby can be viewed as one of the most relevant findings of this study. Enhanced understanding of their baby may help parents to think not only about the behavior of their baby but also about the experiences and needs underlying it. With small children, and especially in challenging situations, this can be difficult for a parent, but simply reflecting upon it can lead to positive change in the mind and behavior of the parent and in parent-child interaction (Slade, 2006).

The third category of benefits experienced by the program participants comprised insights into self as parent and parent-child interaction. Parents reported gaining deeper understanding of their own way of thinking, feeling and behaving and of their interactional behavior with the baby. The findings showed that some parents started to think more about how their own behavior or feelings affect their baby and vice versa. Indicators of mentalization were present, especially in the descriptions by parents who gave detailed examples of the enhanced regulation of their feelings or behavior in interacting with their baby. Our findings indicated that the mentalization-based group intervention helped several parents to mentalize themselves, but also to mentalize about their baby and interaction with her or him.

The results on the fourth main benefit category, Family involvement, showed that parents expressed increased interest in the viewpoint of their spouse and the relationships between the family members after attending the parent group. These findings encourage the further development and implementation of mentalization-based group interventions for the whole family. Also, the initial findings of the Mentalization Based Treatment for Families (MBTF) intervention indicate promising signs of enhancing family harmony as members of the family learn to appreciate each other’s viewpoints more (Keaveny et al., 2012).

This study found a very interesting quantitative difference between mothers and fathers in the benefits of the Families First program. For mothers, the leading benefit was peer support, whereas for fathers it was gaining a better understanding of their baby. Research on parental mentalization has mostly been restricted to mothers. However, Benbassat and Priel (2015) note that the fathers’ mentalizing skills may be especially important in helping them cope with their children’s needs and feelings. This view gained some support from our findings, as fathers, more than mothers, reported gaining more understanding of their baby as the chief benefit of the program. It therefore seems that providing fathers with mentalization-based support may be particularly beneficial. Future research is needed to study paternal mentalization in more detail and to explore the ways in which both, paternal and maternal mentalization, support family interaction and functioning. Furthermore, such research should consider the most effective ways that parental mentalization can be supported at the family level. Similarly, Benbassat and Priel (2015) reported a need for the development and assessment of mentalization-based programs at the community, family, and individual level. Nijssens et al. (2018) also suggest, according to the findings of their recent study, that mentalization should be targeted in prevention and intervention programs.

Limitations

Aside from its strengths, such as the large number of participants, representing both mothers and fathers, this study also has its limitations. First, the findings represent only the views of those parents who answered the questionnaire. Next, as all the participants had invested time in attending the group meetings they probably were more prone to attributing positive benefits to the intervention. This limitation does not, however, detract from the interesting results on the quality of the benefits experienced. A further limitation is that the parents answered the questionnaire right after participating in the parent group. It might, therefore, be worth considering a follow-up study to examine parents' perspectives and the long-run benefits of the program.

Clearly, there is scope for further research, using both qualitative and quantitative methods, on mentalization-based group interventions for parents. This qualitative study offers insights into users' perspectives of the group intervention. The study forms part of an ongoing Finnish research project on the impact of mentalization-based parental groups on family health and child development called Families First study. The project has been described in Kalland et al. (2016).

Conclusions

Unusually for a qualitative project, this study, using the survey method and open-ended questions, reported findings from a large sample of first-time mothers and fathers in Finland. The results indicate that the Families First parent-group model succeeded in benefiting first-time mothers and fathers in various ways. One major benefit was peer support. This important finding is one argument for using a group-based approach when organizing parenting programs and interventions.

Owing to the economic downturn experienced during recent years, many western societies have faced challenges in maintaining and delivering preventive services. Developing and implementing group-based programs in which many families are supported at the same time provides an economically sustainable alternative to more costly individual services. In addition, group-based programs provide social support and can help families to create social networks. This is especially important in modern societies where urbanization has dispersed family networks; for this reason, support from earlier generations and relatives living nearby is rare. Further, the provision of preventive support and services for families may diminish the need of more intensive and considerably more expensive services later on.

Moreover, the findings indicate that a mentalization-based group intervention supports parents during a significant transition phase in their lives. The parents in this study reported gaining more understanding of their baby, their own thoughts and behavior, and their relationship with their baby. Together, these results indicate that focusing on supporting the mentalizing abilities of parents from very early on may benefit parents, their children and families in various ways.

Further, the results of this study should prove valuable when considering the needs and expectations of fathers in implementing and evaluating parenting programs. The present data highlight the importance of encouraging fathers to understand family life from the perspective of their baby. It seems, therefore, that parenting programs in which parents and children participate together are more motivating and beneficial for fathers.

In Summary, the main findings of this research are twofold. First, the provision of universal, preventive support for first-time parents can be recommended and, second, a mentalization-based approach can be successful in parenting programs.

Disclosure statement

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