

The Brazelton Approach in Practice

An evidence-based case
study of implementation
and impact across UK
services



Brazelton
Centre UK

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The Brazelton Approach, comprising the Neonatal Behavioural Assessment Scale (NBAS) and Newborn Behavioural Observations (NBO), helps practitioners and parents understand newborn babies through their behaviour and communication. Over many years, Brazelton Centre UK has worked with services across neonatal care, maternity, health visiting, infant mental health and Family Hubs to embed these tools into practice.

Through workforce development, implementation support, champions programmes and partnership working, the approach has helped strengthen parent-infant relationships, increase parental confidence and create more relationship-centred services. This case study explores how local areas have used NBAS and NBO to improve outcomes for babies and families and highlights key lessons for councils seeking to strengthen early relationships and infant wellbeing.

Background

Local authorities and health partners are increasingly focused on improving outcomes during the earliest period of life through initiatives such as Family Hubs, Start for Life and infant mental health programmes. Delivering these ambitions requires practical approaches that help practitioners and parents understand newborn babies and support early relationships.

The Brazelton Approach was developed to meet this need. Through the Neonatal Behavioural Assessment Scale (NBAS) and Newborn Behavioural Observations (NBO), practitioners gain a structured way of understanding newborn behaviour and helping parents recognise their baby's unique strengths, preferences and communication signals.

Over many years, the Brazelton Centre UK has supported implementation of NBAS and NBO across neonatal services, maternity care, health visiting, infant mental health services and Family Hubs, helping strengthen parent-infant relationships and embed relationship-based care from birth.

The Brazelton Approach

The Brazelton Approach helps practitioners and parents understand newborn babies through their behaviour, communication and individual strengths. Developed from the work of paediatrician Dr T. Berry Brazelton, it is centred on two complementary tools: the Neonatal Behavioural Assessment Scale (NBAS) and Newborn Behavioural Observations (NBO).

The Neonatal Behavioural Assessment Scale (NBAS) is a comprehensive assessment of newborn behaviour used by trained practitioners to understand a baby's strengths, capabilities and developmental needs. Often described as the world's most comprehensive neurobehavioral assessment for newborns, it provides insights into how babies regulate themselves, respond to stimulation, interact with others and communicate their needs. The NBAS is used in neonatal care, infant mental health services, parent-infant relationship work and research settings.

The Newborn Behavioural Observations (NBO) is a flexible relationship-based tool designed for routine use with parents and babies. Through a shared process of observation, practitioners help parents recognise and interpret their baby's behavioural cues, preferences and communication signals. The NBO focuses on strengths, helping parents build confidence and develop responsive caregiving skills.

Together, the NBAS and NBO provide local systems with practical tools for understanding newborn behaviour, supporting parent-infant relationships and embedding relationship-based care across neonatal, maternity, health visiting, infant mental health and Family Hub services.

Developing the Approach

Over time, the Brazelton Approach has evolved from a specialist assessment and relationship-support intervention into an approach that can be embedded across local systems. NBAS and NBO are now used across neonatal care, maternity services, health visiting, infant mental health services, Family Hubs and community programmes.

A key strength of the approach is its flexibility. The NBAS helps practitioners understand newborn behaviour and individual strengths, while the NBO enables that understanding to be shared with parents in a practical and accessible way. Together, the tools support a common focus on infant

communication, responsive caregiving and early relationships across different service settings.

Implementation typically involves training practitioners across multiple services, creating a shared understanding of infant behaviour and communication. As organisations have adopted the approach, NBAS and NBO have increasingly become integrated into existing pathways and service models, including neonatal developmental care, maternity education programmes, health visiting pathways, parent-infant relationship services and Family Hub provision.

The following examples demonstrate how local areas have used the Brazelton Approach to strengthen support for babies and families across a range of services and communities.

Implementation in Practice

The flexibility of the Brazelton Approach has enabled it to be implemented across a wide range of services supporting babies and families. While individual models vary according to local need, the common aim is to strengthen understanding of newborn behaviour, support parent-infant relationships and promote responsive, relationship-based care.

Neonatal services: The NBAS and NBO have been used within neonatal settings to support infant and family-centred care, helping practitioners better understand individual babies and support parents during what can be a challenging and stressful period. Implementation examples include work within specialist neonatal teams and the development of pathways for practitioners working with high-risk infants. Services have used the approach to strengthen observation of infant behaviour, support parent-baby interactions and promote developmental care.

Maternity services: Maternity services have increasingly adopted the Brazelton Approach to help parents begin understanding their baby before and shortly after birth. Through the Baby Communication in Maternity programme, midwives received training and support to embed NBO principles within maternity pathways. At Royal Surrey Hospital, this led to baby communication resources being incorporated into parent education, postnatal programmes and wider maternity support, helping families develop confidence in understanding their newborn from the earliest days.

Health visiting: Health visiting services have been among the most established users of the approach. Examples identified across the UK include Manchester, Belfast and West Wales, where practitioners have used NBAS and NBO to strengthen support for parent–infant relationships and increase parental understanding of baby communication. In Belfast, the SIGNETS service has incorporated NBO within specialist parent–infant relationship support and has set an ambition for every Health Visitor to be trained in the approach. In West Wales, NBO has been embedded within perinatal specialist health visiting services and is being expanded across the wider health board.

Infant mental health and parent–infant services: The approach has also been adopted within infant and perinatal mental health services, including examples in Essex and Argyll & Bute. These services have used NBAS and NBO to support parents experiencing mental health difficulties, strengthen parent–infant relationships and ensure babies remain visible within care and intervention planning. A 2025 survey of specialised parent–infant relationship teams by the Parent–Infant Foundation found that NBAS and NBO were among the five most commonly used interventions delivered by these services, being used by **20 of the 43 teams** surveyed.

Family Hubs and integrated family support: More recently, the Brazelton Approach has been successfully integrated within Family Hub models. Examples include a London Family Hub pathway where Health Visitors and Children's Centre staff were trained in NBO, enabling families to receive consistent relationship–based support across services. Similar implementation examples have been shared through Family Hubs and integrated care partnerships in Portsmouth, Bristol and other local areas. These models demonstrate how NBAS and NBO can help create a shared language across services, supporting more joined-up care for babies, parents and families, while helping ensure the baby's voice remains central within assessment, care planning and service delivery.

Across these different settings, a common theme emerges: the Brazelton Approach provides practitioners with practical tools for understanding newborn babies and sharing that understanding with parents. Whether used in a neonatal unit, maternity service, health visiting pathway, infant mental health team or Family Hub, the approach helps place relationships and infant communication at the centre of care.

Implementation Examples and Further Case Studies

A wide range of organisations have implemented the Brazelton Approach across neonatal care, maternity services, health visiting, infant mental health services, Family Hubs and voluntary sector provision. To showcase these examples, the Brazelton Centre UK hosted an implementation webinar featuring services that have embedded NBAS and NBO within everyday practice and care pathways.

The webinar includes implementation examples from Manchester Health Visiting Service, Dad Matters UK, Essex Perinatal Mental Health Service, Camden Health Visiting Service and the Starlight Neonatal Unit, Royal Free London NHS Foundation Trust. Contributors describe how the Brazelton Approach has been integrated into neonatal care, health visiting, perinatal mental health, father-support services and Family Hub models, as well as the outcomes and lessons learned from implementation.

View the webinar: <https://www.youtube.com/watch?v=qlZXdne8O64>

Outcomes and Impact

Evidence gathered through training evaluation, implementation projects and service experience demonstrates that the Brazelton Approach delivers benefits for practitioners, parents, babies and services. In 2024, **1,132 practitioners** attended NBAS or NBO training, with a further **967 practitioners** participating in training during 2025². More than 1,000 registrations were also recorded across a series of implementation-focused webinars, demonstrating growing interest in adopting the approach across services.

Impact on practitioners: Evaluation of the NBO training programme consistently demonstrates high levels of practitioner satisfaction and perceived impact on practice. In 2025, **96 per cent** of participants reported that the training would have a significant or very significant impact on their practice and **100 per cent** said they would recommend the course to colleagues³. Practitioners consistently report increased confidence in understanding newborn behaviour and supporting parents through a strengths-based approach.

Impact on parents and families: Across implementation sites, practitioners report increased parental confidence, understanding of baby communication and responsiveness to babies' cues and signals. In father-focused services, the NBO has been associated with increased father-baby connection, greater parenting confidence and reduced anxiety about caring for a newborn.

Impact on babies: By helping practitioners and parents recognise babies' strengths, communication and individual preferences, the approach supports responsive caregiving and stronger early relationships. When babies get a feeling that their parent or carer understand them, they feel safe: When a baby cries or moves, and their parent quickly figures out what they need, the baby learns that they are safe and that their voice matters. Feeling this safe early on is the foundation for everything else. It helps them grow into children who can handle tough times, understand their own feelings, and build healthy mental health as they grow up.

Impact on services: Independent evidence from the Parent-Infant Foundation identified NBAS and NBO among the five most commonly used interventions within UK parent-infant relationship teams. Services have also reported that the approach provides a shared framework for understanding infant behaviour across neonatal care, maternity services, health visiting, infant mental health provision and Family Hubs.

Lessons from Implementing NBO and NBAS

Experience from implementing the Brazelton Approach across neonatal services, maternity care, health visiting, infant mental health services and Family Hubs highlights several factors that support successful adoption and sustainability.

Embed NBAS and NBO within existing pathways. The strongest examples have integrated the approach into routine services rather than creating separate provision, supporting relationship-based care across neonatal, maternity, health visiting, infant mental health and Family Hub pathways.

Train across services rather than individual teams. Organisations report the greatest benefits when practitioners from different backgrounds develop a shared understanding of infant behaviour and communication, creating greater consistency for families.

Use infant behaviour as a shared language. NBAS and NBO provide practical ways for professionals and parents to observe, understand and discuss what babies are communicating through their behaviour, strengthening assessment, care planning and support for parent-infant relationships.

Build on babies' strengths. Parents respond positively when practitioners help them recognise their baby's competencies, preferences and communication signals. This strengths-based approach supports parental confidence, responsive caregiving and relationship-building from the earliest days.

Develop local expertise and leadership. Sustained implementation is strengthened when organisations identify practitioners who can champion the approach, support colleagues and embed NBAS and NBO within local service models.

Adapt the approach to local priorities. NBAS and NBO have been successfully applied across neonatal developmental care, maternity pathways, health visiting, infant mental health services, Family Hubs and parent-infant relationship teams while maintaining a consistent focus on understanding babies and strengthening relationships.

Taken together, these experiences suggest that NBAS and NBO are most effective when adopted as part of a wider commitment to relationship-based care, helping services strengthen early relationships, increase parental confidence and place babies at the centre of support and decision-making.

Next Steps and Further Information

The Brazelton Approach continues to gain momentum as more NHS services, local authorities, Family Hubs and parent-infant services recognise the importance of early relationships, infant mental health and understanding babies' communication from birth. NBAS and NBO are increasingly being used to support joined-up, relationship-based care across neonatal, maternity, health visiting and community services.

For further information about the Brazelton Approach, NBAS, NBO or implementation support, please contact: info@brazelton.co.uk.

References

¹ Parent-Infant Foundation (2025), *Who is holding the baby? The development of parent-infant teams in the UK*, Figure 6. Available at: <https://parentinfantfoundation.org.uk/wp-content/uploads/2025/06/Who-is-holding-the-baby-The-development-of-parent-infant-teams-in-the-UK.pdf>

² Brazelton Centre UK internal training monitoring data, 2024-2025.

³ JV Taylor Tavares, *The Infant Voice*, Community Practitioner (September/October 2026, pages 36-39)

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Supporting stronger
relationships, greater
parental confidence and
better outcomes for
babies across the UK.



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