Make room in your calendars

Renae Gibson, Senior Health Promotion Officer, Women's Health Clinical Support Programs

A new year always brings new possibilities and if this newsletter is anything to go by, there are plenty of those if you're seeking extra professional development.

Close to home, Lea Davidson is still offering training in the EPDS and Perinatal Anxiety Disorders. There is a list of dates on page 8, or get in touch to find out if there is another trainer running a session near you.

Later this year, the Australasian Marcé Society conference will be held in Adelaide. For now, the call for abstracts is out, so get your thinking caps on! More on page 3.

If travel of any sort is out, you can stay right at your desk and complete a fantastic training on supporting infants and toddlers online – see page 2 for further details.

Also, coming up on 21 March will be the 15th annual Harmony Day celebrating Australia's cultural diversity. With this in mind, a few articles have been included in this issue to showcase the breadth of services and activities in WA to address the needs of migrant and refugee families, as well as our Aboriginal communities.


Happy new year!

Email: Renae.Gibson@health.wa.gov.au

WHCSP is a proud partner of Mentally Healthy WA's Act-Belong-Commit campaign.

Contact Women’s Health Clinical Support Programs

whcsp@health.wa.gov.au
(08) 9340 1795
www.wnhs.health.wa.gov.au
Supporting infants and toddlers e-learning course

Text and image from www.copmi.net.au

The ‘Supporting Infants and Toddlers’ course helps mental health workers to identify and intervene when their clients are parents who experience mental illness and have dependent children.

This introductory course takes learners through the impact of mental illness on the family through the antenatal period, explains attachment and principles of sensitive communication with parents regarding the needs of their children. Learn about parenting interventions and strategies to effectively support these families.

This course has been designed for adult mental health workers and any other practitioners working with parents of young children where the parent has a mental illness.

It is recommended that learners complete COPMI’s ‘Keeping Families and Children in Mind’ e-learning course, which provides training in development of a family-sensitive approach to working with families where a parent has a mental illness. However, this is not mandatory in order to undertake the course.

Why take the course?

- Understand how you can improve outcomes for parents, infants and toddlers where parents have a mental illness.
- It includes practical video demonstrations to help visualise training in practice.
- It’s interactive, practical and engaging.
- It includes links to practical resources that can be used in practice.
- It’s free!

How long does it take?

The course is estimated to take 1.5 to 2 hours to complete (including watching videos and completing the assessment). Ultimately, workers can complete the course in several sessions at their own pace. The last page you visit will be bookmarked so that you can jump straight back to where you left off.

For more information visit www.copmi.net.au/professionals/professional-tools/infants-toddlers.html

* A note from WHCSP Senior Health Promotion Officer, Renae Gibson:

I completed this online training in January and it was brilliant. It’s very easy to set up an account (you get emailed almost instantly, so no delay there) and the package itself is clear and easy to work through. A great feature is that you can stop at any point and when you log back in, you return to the last page you were on, so it’s not necessary to finish all in one session. The language used is sensitive and concise, and there are helpful links to other websites and Youtube clips to expand your learning further. I personally loved the bonus attachment clips by Dr Dan Siegal.

It’s probably of most use to those in clinical roles, but even as a non-clinician, this training took my understanding of the impact of parental mental illness on infants and toddlers to a new level. Best of all, it’s free! Highly recommended.
**Childbirth education program for refugee migrant women**

Kate Goodman, Manager, TheBumpWA

The challenges of preparing to birth in a new country can be overwhelming, especially when the language and culture is different. Making informed choices about where and with whom to birth can be difficult for all women, especially so if there is a language barrier.

The focus of TheBumpWA’s innovative Childbirth Education Program for Refugee and Migrant Women and their families is to ensure the women understand what their options are, and are educated about their body, their choices in childbirth and what to expect in hospital or at home.

We receive referrals through our network of providers in the southern suburbs. Our Midwife/Childbirth Educator makes phone contact with the client, assisted by a telephone interpreter service. During this call the Educator evaluates the woman’s need and suitability for the program. Where a woman has small children at home or transport difficulties, the Educator may schedule an initial home visit to assist the woman with her transition into the program. Antenatal education is provided by appointment at Women’s Health and Wellbeing Service (Gosnells). All appointments are supported by the telephone interpreter service. A postnatal follow up visit completes the program and assists the Educator to assess the effectiveness of support provided.

On the ground floor at Gosnells Community Lotteries House, Save the Children run a program called “It takes a Village”: Multicultural Early Learning Program supporting children aged 0 to 5 from migrant and refugee backgrounds and their families. This co-location enables us to provide much better collaborative support to women so they can access a range of services at the same venue.

For more information, please contact refugeemigrant@thebumpwa.org.au, call us on 9498 6033 or visit www.thebumpwa.org.au.

**Australasian Marcé Society 2015 Conference – call for abstracts**


The Organising Committee invites abstract submissions for presentations at the biennial Australasian Marcé Society for Perinatal Mental Health 2015 Conference. All abstracts submissions must be made via this website by completing the online submission form and attaching your abstract as per the layout guidelines.

Authors are invited to submit abstracts for oral and poster presentations. Please indicate the preferred platform on the submission form. The allocation of presentations is at the discretion of the Organising Committee. There is no limit to the number of abstracts you may submit.

**Abstract deadline is 1 May 2015, 5:00pm AEST.**

Crossing Boundaries: Working with a refugee parent-infant dyad

Gally McKenzie, Psychotherapist, Clinical Supervisor, member of AAIMHI WA, WAIMH and AAIMHI WA Infant Mental Health Competency Working Group

In child health clinics, general practices, hospitals, out-patient clinics, and in government and non-government agencies throughout WA, practitioners and students from many disciplines interact regularly with infants, parents and families for whom English is not their first language.

In recent psychotherapeutic parent-infant work with a refugee family, undertaken at a non-government agency, I learnt to observe, to listen, to focus, to act, all the while sitting with complex and difficult emotions and narratives. I learned that in order for this at risk infant and mother to be made safe, I had to tailor my usual model of working in many ways. This involved crossing many of the more traditional clinical/therapy boundaries, while upholding my commitment to ethical and professional practice. This work involved accessing the support of interpreters (in the main by telephone), as well as a number of other practitioners from a myriad of disciplines and services.

Selma Fraiberg, in her seminal paper “Ghosts in the Nursery” (1975) said of the infant: “this patient, who cannot talk, has awaited articulate spokesmen”. In this work I also awaited articulate spokespersons: the interpreters.

Fourteen sessions over eight months brought thirteen interpreters, a less than ideal structure, but the only one available. This infant and mother had their lives’ narratives articulated in English to me via these interpreters, and what was apparent, without a shared spoken language, was the ‘un-spokeness’ of the very great distress and difficulties that this baby and mother were experiencing, both before birth and in the immediate months after baby’s arrival.

With a parent-infant psychotherapy model in mind, together with interpreters, I endeavoured to benefit this baby and mother individually and together in their relationship. What I came to learn was that many more interventions, involving a number of other practitioners and services, would be needed.

Due to the serious disruptions caused by harmful life events both before and after the arrival of this new baby, this work also required a number of other articulate spokespersons. These included: a child health nurse; a hospital based social worker; a general practitioner; lawyers at both Legal Aid and the Women’s Legal Service; The Coalition for Asylum Seekers, Refugees and Detainees (CARAD); a multicultural centre; the Department of Housing; Centrelink; the local Politician’s office; a specialist migrant health nurse; and a school principal.

A secure refuge, a home, was the basic need of this baby and mother, both metaphorically and literally. Each needed refuge – the mother from the many traumata of her past and present, the baby from the traumatic start to life and from the ghosts of her mother’s past. In this infant-parent dyadic work, I sought to provide a space in which mother could explore her painful history of multiple premature losses so that she could begin to free herself of emotional pain and work towards having more generosity towards her baby.

(Continued on page 5)
All professionals involved contributed from their own disciplines to benefit this baby and mother’s development of a healthy secure attachment. Thus, together with the psychotherapy, their input constituted a nurturing environment. The Telephone Interpreter Service, together with the many disciplines and services, not only ‘held’ the infant and mother, but me too as I sought to ‘contain’ this dyad. Alongside this was my regular clinical reflective supervision, a necessity when working with such complex and painful emotional material.

“History is not destiny” wrote Selma Fraiberg in 1975. The history of our working models need neither be destiny. Like families, we need to be flexible, adaptive, open, willing, curious and supportive to each other’s contributions. Work with this at-risk infant, mother and family was best undertaken from an inter-disciplinary, interagency collegial model. This, it would seem, provided the family with an external comprehensive psycho-social system that in turn provided a safe and nurturing context – the antidote for this isolated infant, mother and family.

For more information, visit [www.aaimhi.org.au](http://www.aaimhi.org.au) or [www.waimh.org](http://www.waimh.org).

Note: Gally McKenzie presented this clinical material at the World Association for Infant Mental Health (WAIMH) Congress in Edinburgh and at the Australian Association for Infant Mental Health Inc. (AAIMHI) National Conference in Brisbane in 2014.

Reference:

‘Kalyakool Moort – Always Family’ – health practitioner survey

Jayne Kotz, PhD Candidate, Murdoch University

The ‘Kalyakool Moort – Always Family’ research outcomes will include the development of a state-wide alternate perinatal screening tool for depression and anxiety for use among Aboriginal mothers and fathers.

The research team is seeking your participation, which will contribute greatly to the input from the health practitioner perspective and be critical to the success of the project. There is an online survey taking approximately 10-15 minutes and is largely a tick box survey.

We are analysing this against data collected from Aboriginal and Torres Strait Islander women and men, and state-wide screening data.

If the tool is to be useful, it needs to be suitable for use by Aboriginal women and men and by the practitioner administering it. Therefore your anonymous feedback is of great value to us.

The survey went live on 28th January 2015 from the following link:
[www.surveymonkey.com/s/QYMMCRK](http://www.surveymonkey.com/s/QYMMCRK)

The ‘Kalyakool Moort – Always Family’ research project is a collaboration between Murdoch University, The Telethon Kids Institute and the Department of Health Office of Nursing and Midwifery and is part of a PhD by Jayne Kotz.

If you have any questions about the research or the survey, please contact Jayne Kotz – jaynekotz@aapt.net.au or Prof Rhonda Marriott – R.Marriott@murdoch.edu.au
Aboriginal health forum for PND

Delys Fraser, Aboriginal Community Liaison Officer, WACHS Midwest

On 20 November 2014, an Aboriginal health forum was organised at Three Springs “House of Welcome” by Delys Fraser (Aboriginal Community Liaison Officer, WACHS Midwest) and Ashley Bell (Aboriginal Liaison Officer, Mount Gibson Mining), with support from Mount Gibson Mining, Extension Hill. Both Delys and Ashley recognised a need to increase awareness of postnatal depression (PND) among Aboriginal mothers in the towns of Morawa, Perenjori, Three Springs, Carnamah, Coorow and Yalgoo. Local Community Child Health Nurse, Jenny Hennighan, also provided expert advice and support in holding this event.

The day started with a bus trip from Morawa to pick up families in Perenjori and Carnamah before arriving in Three Springs for an “Acknowledgement of Traditional Owners of the Land” by Elaine Walley. The event was catered by Centacare with the assistance of Teena Taylor and the “House of Welcome”. In addition to WACHS staff, Maternal and Child Health and Social Emotional Wellbeing teams from the Geraldton Regional Aboriginal Medical Service (GRAMS) also attended. GRAMS Maternal and Child Health staff presented an information session on PND awareness. The Child Health Nurse highlighted how important it is to keep child immunisations up to date, and check iron levels to ensure our children continue to grow and develop and to reduce the risk of them developing diabetes, heart disease and kidney disease. Emphasis was also given to making sure child health checks are done to ensure the baby or child is growing in a healthy way.

The children enjoyed promotional material provided by Mount Gibson Mining funding including toys and paints. The paints were used to complete hand prints to be used in conjunction with the logo for Aboriginal Health Forums, designed by local artist and program organiser Delys Fraser. Activities for the women included a quiz session with vouchers as the 1st, 2nd and 3rd prize and novelty prizes.

This forum focused on raising awareness of PND by providing information directly to Aboriginal communities in Midwest towns. The event also shared information on whom to contact if a problem arises within these Aboriginal communities and which services to approach. Overall feedback about the day was positive and participants expressed a greater understanding of issues such as PND and anxiety, and of ways new parents can keep mentally healthy. The attendees also commented that they now feel confident they can help themselves, as well as family and friends, and know how to approach others members of community with depression.

Images provided by WACHS Midwest.
New Pregnancy to Parenthood Clinic

Text and image from ‘Pregnancy to Parenthood Clinic’ flyer, Edith Cowan University

The Edith Cowan University ‘Pregnancy to Parenthood Clinic’ is a Perinatal and Infant Mental Health service and training centre, which is part of the ECU Psychological Services Centre.

It provides an early identification and early intervention service aiming to ensure optimal psychological, emotional and social wellbeing of mothers, fathers, infants, young children and families from pregnancy through to 3 years. Clinical Psychology interns provide this specialised service to the public under direct supervision of experienced clinical psychologists.

Students and staff offer a specialised service that provides triage, assessment and intervention for families during pregnancy through to early parenthood (0-3 years). This includes couple, dyadic/triadic, family and group based interventions for:

- concerns about not coping during pregnancy
- birth trauma
- difficulty adjusting to parenthood
- difficulty developing a bond with your child
- feeling flat, sad or depressed
- feeling more irritable and anxious than usual
- family or relationship difficulties
- a loss that is impacting on your family
- infant or young child is frequently emotionally upset
- young child is frequently sad, anxious or worried

The Centre is open from 8.40am to 4.45pm and appointments are made in consultation with a family and their schedule. In special circumstances, out of hours appointments can be offered. The Clinic offers home visiting as part of the assessment and therapeutic service, and also some out of hour’s group programs.

Families can be referred by doctors, paediatricians, child health nurses, health agencies, maternity hospitals and other government and community services.

The ‘Pregnancy to Parenthood’ Clinic is a low cost service and fees may range from $10 to $30 per session depending on personal circumstances. If families are attending the clinic during mother/carers maternity or paternity leave, the service will be free of charge.

For further enquiries or to make an appointment call 9303 7801 or visit www.ecu.edu.au/spss.
Training and events in 2015

March
9 – Perinatal Anxiety Disorders (Subiaco)

April
8 – EPDS: Uses and Misuses (Subiaco)

May
8 – Perinatal Anxiety Disorders (Subiaco)

June
8 – EPDS: Uses and Misuses (Subiaco)

July
1 – Perinatal Anxiety Disorders (Subiaco)

Also, if you want to discuss options for a free training session tailor-made for your workplace and conducted in your local area, please email: Lea.Davidson@health.wa.gov.au

WA perinatal and infant mental health resources

All resources produced by the Women’s Health Clinical Support Programs are free within WA.

Phone (08) 9340 1795 or email whcsp@health.wa.gov.au to order:

- You Are Not Alone: Emotional Health for Mothers (Ethiopian and Sudanese DVDs)
- Boodjarri Business: Yarning about Feelings After Baby (DVD)
- Boodjarri Business: Working with Aboriginal Mums, Babies & Families (DVD)
- Using the EPDS Translated into languages other than English
- The Edinburgh Postnatal Depression Scale (EPDS) (A4 2-sided sheet)
- Care for your baby by caring for yourself poster (A2 or A3)

Visit www.health.wa.gov.au/ordering to order:

- Finding help before and after birth (credit card sized fold-out pamphlet)

Please note that the Postnatal Anxiety and Depression brochure is currently out of stock. Until a reprint can be arranged, you may wish to email whcsp@health.wa.gov.au for a printable version or order beyondblue’s DL pamphlet (BL/0940; see page 8 of this newsletter for details).

If you have any queries about these or other resources on perinatal and infant mental health, please contact Women’s Health Clinical Support Programs on (08) 9340 1795.
**beyondblue** resources for health professionals

To order call 1300 22 4636 or visit www.beyondblue.org.au.

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**BL/0941 Booklet – Perinatal clinical practice guidelines – Executive summary**  
A guide for primary care health professionals

**BL/0942 Booklet – Psychosocial assessment and management of perinatal mental health disorders**  
A guide for primary care health professionals

**BL/0920 Wheel – Edinburgh Postnatal Depression Scale (EPDS) and Psychosocial Questionnaire scoring wheel for health professionals**

**BL0968 Scoring Pad – Edinburgh Postnatal Depression Scale (EPDS)**

**BL/0887 Fact Sheet – Puerperal (postpartum) psychosis**  
A guide for primary care health professionals

**BL/0900 Fact Sheet – Bipolar disorder during pregnancy and early parenthood**  
A guide for primary care health professionals

**BL/0470 Fact Sheet – Perinatal Depression and Anxiety**  
Evidence Relating to Infant Cognitive and Emotional Development

**BL/1019 Window Sticker – Proudly supporting beyondblue**

**BL/0967 Flyer – Overview of beyondblue**

**BL/0902 Postcard – PND guidelines and online training for health professionals**
beyondblue resources for communities

To order call 1300 22 4636 or visit www.beyondblue.org.au.

BL/0775 - Booklet - Dad’s handbook: A guide to the first 12 months

Hey Dad provides critical information to new dads during this important stage of their lives - the advice and practical tips are invaluable. Early brain development, changes in relationships, the importance of attachment, play, sleep and breastfeeding are all issues that fathers may not have explored before the birth and this booklet provides a ‘toolkit’ to help new families manage change.

Range of posters - Just Speak Up PND Campaign (double-sided) A3 or A2

BL/0868 - Postcard - Just speak up PND Campaign

BL/0940 - Flyer - Understanding perinatal depression and anxiety

This DL flyer provides women and their families with a brief overview of depression and anxiety in the perinatal period. This flyer has information on signs and symptoms, getting help, treatment options, tips for looking after yourself, and tips for partners, families and friends. It also includes the Edinburgh Postnatal Depression Scale (EPDS).

BL/0943 - Booklet - The beyond babyblues guide to emotional health and during pregnancy and early parenthood

The beyond babyblues guide to emotional health and wellbeing during pregnancy and early parenthood explains some of the common emotional challenges faced by new and expectant parents, and offers practical advice for mothers and partners on how to deal with these challenges.

BL/0944 - Booklet - Managing mental health conditions during pregnancy and parenthood: A guide for women and their families

Managing mental health conditions during pregnancy and early parenthood includes more detailed information about depression, anxiety, bipolar disorder and puerperal (postpartum) psychosis. It aims to assist women, partners and families to seek help and find the right treatment.
Other resources

**Mentally Healthy WA** [www.actbelongcommit.org.au](http://www.actbelongcommit.org.au)

Act-Belong-Commit is a health promotion campaign encouraging individuals to take action to protect and promote their mental wellbeing and encourages organisations to provide and promote participation in mentally healthy activities.

**What’s great about this resource?** The Guide for New Mums and Guide for New Dads (new in 2014!) provide Act-Belong-Commit messages tailored to accommodate the challenges of early parenthood, focusing on the positives and what parents can do to protect their mental health.

**PANDA** [www.panda.org.au](http://www.panda.org.au)

PANDA is a peer support organisation, based in Victoria with a national phone helpline. PANDA has taken over distribution of From the Heart WA’s ‘Write from the Heart,’ an A5 booklet of women’s personal stories of overcoming perinatal depression and anxiety.

**What’s great about this resource?** Women and families who may be struggling to put words to their experience tend to strongly identify with these personal accounts written in everyday language.

**COPMI** [www.copmi.net.au](http://www.copmi.net.au)

Not-for-profit organisation COPMI (Children of Parents with a Mental Illness) has a website featuring a range of resources for dads, mums, families, and health professionals, including some in languages other than English.

**What’s great about this resource?** The website alone contains plenty of fantastic information (particularly for dads), but you can also download and order print materials for your clients.

**Parenting WA** [www.communities.wa.gov.au](http://www.communities.wa.gov.au) (look under the ‘Communities in Focus’ section)

Parenting WA offers an information, support and referral service to parents, carers, grandparents and families with children up to 18 years of age. Services are free and no referral is needed.

**What’s great about this resource?** Each school term, a comprehensive 300+ page document is produced, collating a range of services available for parents in Perth. In addition, “Support for Families When a Parent Works Away” is just one of many great information booklets available to order or download.

**DadSkills** [www.DadSkills.com](http://www.DadSkills.com)

Run by two Doulas, DadSkills is an online and interactive resource for fathers. While some aspects of the website require a subscription fee, there is some really wonderful (and clearly marked) “Free Stuff” as well.

**What’s great about this resource?** It features free videos of real men talking about their experience of becoming fathers, plus a couple of fantastic tip sheets to help dad be an advocate for mum’s rest and time with baby.
About this newsletter

Who can contribute?

This newsletter was predominantly created to celebrate successes and share information among professionals working in the fields of perinatal and infant mental health in Western Australia.

In the interests of information-sharing, submission of articles and other relevant content are invited from external agencies, including those from the non-government sector and other Australian states. Please note, however, that Women’s Health Clinical Support Programs reserves the right to maintain editorial control, including the ability to decide the final content to be published and/or making editorial changes to content submitted.

If you would like more information about the submission process, please contact Women’s Health Clinical Support Programs as indicated below.

Contact information

This newsletter was produced by the Women’s Health Clinical Support Programs, Women and Newborn Health Service, Department of Health WA.

Please direct any queries via the following:

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Accessibility

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