



IMHAANZ

INFANT MENTAL HEALTH ASSOCIATION AOTEAROA NEW ZEALAND

PRESIDENT'S WELCOME

Kia Ora Koutou

Newsletters, generally twice a year, support networking within and beyond New Zealand and we welcome contributions from colleagues concerned with promoting the optimal development of infants and infant care relationships.

They are one way of improving our knowledge and experience, keeping us up to date with science in this discipline and - most importantly - keeping us connected with each other maintaining IMHAANZ's health.

Tanya Wright reports on the Prague WAIMH Congress. Tanya represented the New Zealand Affiliate at the meeting building our international connections.

Ensuring there are ways we can meet face to face is also important. On the 16th of August the Executive met with colleagues at the AGM preceded by a scintillating afternoon of professional development. One theme of the afternoon was considering the mind of the 'other' who cares for the baby. What strengths this person or system may have particularly around mentalizing, what vulnerabilities and how and where interventions may be directed. Further considerations

around this theme can be found in the review of the online course *Babies in Mind* and the latest developments with IMHAANZ developing a New Zealand Fussy Baby Network [FBN] and Facilitating Attuned Interaction [FAN] training.

In May this year WAIMH published the *Position Paper on the Rights of Infants*. Please have a read, discuss with your colleagues and consider making a place on your noticeboard for this perhaps alongside the recently released Covenant for the protection of New Zealand's Children written by Judge Carolyn Henwood.

This "Declaration of Infants Rights represents a significant step the WAIMH Board has actually decided upon, that is to be action-oriented and to take explicit ethical stance and advocacy positions." WAIMH recognises the United Nations Convention on the Rights of the Child (UNCRC, adopted 1990) but noted significant limitations in distinguishing infants' needs.

"Infants and toddlers are totally dependent upon the availability of consistent and responsive care from specific adults for the adequate development of their basic human capacities."

PRESIDENTS WELCOME, continued

The Declaration looks first at the Infant's basic rights that should be endorsed everywhere, regardless of society and cultural norms, and then develops principles for health policy that are more 'sociocultural context-dependent'. Read more at: www.waimh.org

Executive News

The Executive sadly says goodbye to Louise Burrowes who has been the coordinator for

regional networks these last two years. Louise brought enthusiasm and tenacity to this role as well as her clinical experience in working in the community with families holding relationship based practice. Our connection with Louise will continue albeit differently and we wish her well. Thank you Louise for your contribution to IMHAANZ.

Denise

Dr Denise Guy
President IMHAANZ

WAIMH

BASIC PRINCIPLES OF INFANT'S RIGHTS



1. The Infant by reason of his/her physical and mental immaturity and absolute dependence needs special safeguards and care, including appropriate legal protection.

2. Caregiving relationships that are sensitive and responsive to infant needs are critical to human development and thereby constitute a basic right of infancy. The Infant therefore has the right to have his/her most important primary caregiver relationships recognized and understood, with the continuity of attachment valued and protected--especially in circumstances of parental separation and loss. This implies giving attention to unique ways that infants express themselves and educating mothers, fathers, caregivers and professionals in their recognition of relationship-based attachment behaviors.

3. The Infant is to be considered as a vital member of his/her family, registered as a citizen, and having the right for identity from the moment of birth. Moreover, the infant's status of a person is to include

equal value for life regardless of gender or any individual characteristics such as those of disability.

4. The Infant has the right to be given nurturance that includes love, physical and emotional safety, adequate nutrition and sleep, in order to promote normal development.

5. The Infant has the right to be protected from neglect, physical, sexual and emotional abuse, including infant trafficking.

6. The Infant has the right to have access to professional help whenever exposed directly or indirectly to traumatic events.

7. Infants with life-limiting conditions need access to palliative services, based on the same standards that stand in the society for older children.

To read the full WAIMH Position Paper on the Rights of Infants visit www.waimh.org

WAIMH CONGRESS 2016

PRAGUE : 29 MAY - 2 JUNE

Tanya Wright, Child Psychiatrist and IMHAANZ Vice President, fills us in on her time in Prague:

Over 1500 delegates from nearly 100 countries met in Prague for this biannual extravaganza of infant mental health. It is always very stimulating to be part of this world community.

Many of you may not be aware, but there had been the intention that this conference would be held in Tel Aviv, as was the wish of the President, Miri Keren. Although this was not to be, the political charge was not lost. Not only was there much discussion of post-9/11 ideologies, terrorism and trauma, but also a challenge for the field of IMH to broaden our advocacy from infants and families and consider political action.

Prague is a beautiful city, but heavily scarred by deep layers of conflict and resilience. It is still recovering from long years of adversity. The presence in Europe of so many refugees and their children was not avoided in this conference but the need for addressing trauma and behaving humanely made evident. To see the suffering of infants and the re-introduction of institutions for their care comes only 75 years after Spitz and Bowlby began to show the world the suffering of these children and opened our eyes for the first time.

“The calibre of the speakers was extraordinary.”

Australian Louise Newman gave the plenary on Monday by videoconference, advocating passionately for asylum seekers. She is masterly in describing post traumatic sequelae and avoiding reductionistic conceptualisation. Not only has she borne witness to the

plight of asylum seekers in Australia, but called for therapists to also take a non-neutral role when we bear witness in our clinical settings.

“I struggle to pick out the highlights ...”

Arietta Slade, Kent Hoffman and Alicia Lieberman and P. Zeanah on a panel discussing the similarities and differences in their approaches to increasing reflective functioning stands out.

As does hearing from Bakermanns-Kranenberg and Ijzendoorn - what an astonishing research team, great speakers and clinical acumen. Alicia Lieberman. Bob Emde. Charlie Zeanah. Oh - so many more.

Plenty of controversy and variety - bed sharing, sleep, epi-genetics, neurotic imaging, longitudinal studies, ethics, experiences, new research, fathers, fostering, new research approaches and tools.

Two workshops particularly struck a chord with me. David Oppenheimer, Deborah Weatherston, Kaaja Puura and Antoine Guedeney asked the question “How has working in infant mental health affected us?”.



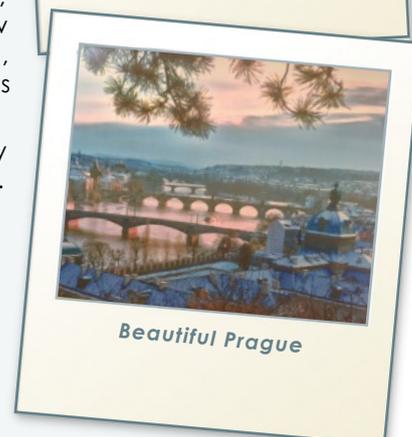
Alicia Lieberman delivering her Plenary Lecture on Day Three



Marian Bakermanns-Kranenberg and Marinus IJzendoorn



L-R: NZ'ers Maree Foley, Tanya Wright and Debbie Wilson



Beautiful Prague

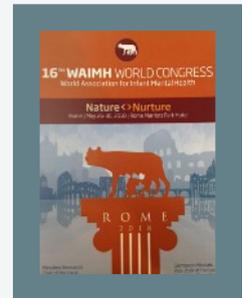
WAIMH CONGRESS FEEDBACK continued

They proceeded to speak of their own journey, "a-ha" moments, early influences and both the pain of not having had ideal early experiences and of owning one's inability to be a perfect parent and therapist oneself. Balancing this though, the gift of knowing the importance of relationships, and of the role of attachment from cradle to grave.

The second asked us to consider the use of video in IMH. From the outset it has been a primary tool for 'helping one see' when words poorly convey interactions and experiences. However in this time of social media, it needs reconsideration. Do families who consent to sharing video for teaching

purposes understand the richness of the information conveyed? Why do they allow us to keep it and use it, for our own gain? Increasingly medical records are allowing video to be stored and it is often used in court settings, yet the skill set to understand what is being shown, not just respond emotionally is limited. Many questions needing further consideration.

And finally - a great many friendships forged and rekindled.. And plans made to meet in Rome in 2018!



TRAINING NEWS

erikson

Fussy Baby Network[®]

We're here to help.



451 North LaSalle Street
Chicago, Illinois 60654-4510
www.fussybabynetwork.erikson.edu
888-431-BABY

Planning is progressing for Professor Linda Gilkerson, The Erikson, Chicago, to visit Wellington 7-11th November.

She will be supporting IMHAANZ in implementing the FAN Approach to Family Engagement and Reflective Practice, and becoming a member of the Fussy Baby Network®.

This joint initiative is one outcome of the very positive response to Linda's pre-conference workshop and Plenary at our Conference in Queenstown 2015.

TRAINING INFORMATION - FAN: Facilitating Attuned Interactions

Level I Core Training:

A two day training for practitioners and their supervisors which covers the FAN background, theory of change, FAN core processes and ARC of Engagement, and their application in working with families.

This training was developed for home visitors but is now implemented in early childhood education programmes, medical student teaching, and infant mental health and child development teams.

The FAN is a structure for engaging families, a tool for attunement during a visit, matching

interventions to what parents most need in the moment and a guide for reflective practice. Reflective Practice is a core professional competency in working with infants and families.

In New Zealand we would recommend this training for the following programmes and services:

- WellChild/Tamariki Ora providers
- NGO's providing home visiting programmes such as Family Start
- Early Intervention
- Early Childhood Education
- Child Protection intervention programmes
- Perinatal and Infant Mental Health services.

Practitioners attending the training will be working with infants and young children and their whanau across a variety of settings and disciplines.

Level II Facilitated Practice:

This supports practitioners and supervisors in applying the FAN approach in their setting after attending a Level I training. Level II occurs over a period of 5 months following training. Practitioners select two FAN families with whom to use the approach and complete one FAN Reflection Tool per family each month for 5 months.

Practitioners also meet monthly with their supervisor in one FAN Review Session (45 minutes/month) to process the tools and their use of the approach. All FAN Review Tools and FAN Self-Assessments are sent to the Fussy Baby Network® (FBN) for review.

Level II Facilitated Practice Supervisor Training and Mentoring:

Supervisors are trained to conduct the FAN Review Sessions in a half-day/3 hour Level II Supervisor Training which occurs at the end of Level I training for those who are eligible. Supervisors will receive monthly mentoring from an IMHAANZ Trainer Candidate for one-hour, as well as a one-off 1½ hour Supervisor Group Mentoring Conference Call from Trainer Candidates and FBN FAN Trainer (Professor Linda Gilkerson).

Level II Integration:

The final day of training occurs 6 months after the Core Training to consolidate the practitioners' and supervisor's learning and integrate the approach into the program processes and participant's practices.

Details for Wellington FAN Training

Level I Core Training 7-9 November 2016

We welcome registration from teams - practitioner(s) + their supervisor(s).

Registration is \$650.00 per person .

This will cover the 2 day training AND:

- the supervisor's attendance at the half day Level II Facilitated Practice Supervisor Training to be held on the morning of 10 November 2016
- 1 hour per month of mentoring for this supervisor for the following 5 months
- one 1½ hour Group Mentoring Conference Call linking the supervisor with The Erikson.

NB: The one day Level II Integration training which occurs 6 months after Level I Core Training is a separate cost.

To register your teams
interest in this training, email:
secretary@imhaanz.org.nz

UPDATE | Watch, Wait and Wonder® Intervention

The next Introductory Course is in Melbourne 21-23 September. Registration forms are available from Bronwyn Owen, Raphael Services Manager at St John of God Berwick Hospital: bronwyn.owen@sjog.org.au or from www.watchwaitwonderdownunder.com

An Advanced Course runs 24-26 August at St John's in the City, Wellington. Practitioners completing this course are then eligible for scholarships supporting supervision through the process of becoming an independent practitioner.

The charitable trust Incredible Families provides governance for Watch, Wait and Wonder training in Australasia.

NCAST TRAINING

The first training was delivered in April in Christchurch (and the second in early August in Auckland) and the participants are already beginning to utilise the assessments in their practice!

The NCAST PCI scales are micro analytic observational assessment tools that are systematic and unique in their ability to assess the interaction between the child, caregiver and the environment.

We are trained in both Scales and find the assessments to be unobtrusive, quick to score and yet rich with information, which has the potential to enhance the relationship between the infant/toddler and her/his caregiver, as well as the reflective capacity of the caregiver.

They are evidence based, well researched assessment tools that are now used in countries around the world.

In order to make the training available to others in New Zealand who work with infants, young children and their families, we undertook the NCAST PCI Instructors Course offered at the University of Washington, Seattle.

NCAST was developed by the late Dr. Kathryn Barnard, and a research team at the University of Washington's School of Nursing, to investigate ways to measure the health and caregiving environments of infants and young children. The Feeding and Teaching Scales have been used in different settings by numerous disciplines and in many different countries.

The NCAST PCI assesses the physical, emotional, cognitive and relational development of the infant/toddler. In conjunction with this focus, the NCAST PCI includes the primary support system of the infant/toddler.

The NCAST PCI is an objective assessment tool, which provides researchers with the ability to measure, observe and describe the infant/parent relationship while giving clinical practitioners a way to begin to identify and

We are happy to announce the birth of the NCAST Parent Child Interaction (PCI) Feeding and Teaching Scales Trainings in New Zealand.

address specific areas for intervention.

We are offering the NCAST training in Palmerston North to be delivered in late September, early October. We want to take this training to all areas of New Zealand. Please contact us if you are interested in training in your area.

Heidi Pace & Sarah Haskell
ITS: Infant Toddler Specialists
its_sarah.heidi@yahoo.co.nz

TRAINING REVIEW

Babies in Mind: Why the Parent's Mind Matters

an online course from The University of Warwick
and hosted by FutureLearn + The British Library

www.futurelearn.com

Reviewed by Denise Guy & Fiona Will

Developed by Jane Barlow, Professor of Public Health in the Early Years, at The University of Warwick and Dawn Cannon [Lead Educators], this "online course explored how the mind of the parent influences the developing mind of the child from conception through infancy and into later life."

We enrolled in this free four week course beginning late March 2016 and over the following 4-6 weeks completed the modules at our own pace. The enrolment process was straight forward and the welcome and reminders for the course were well timed and thoughtful. Each module is allocated 4 hours and as experienced IMH clinicians this was the maximum time either of us took. It may be that for clinicians new to the information it would take a little longer. The process is flexible however, with each module broken into small sections and you can leave and re-enter the programme at the section level.

The 'Babies in Mind' course is "aimed at everyone who has an interest in promoting the wellbeing of their own baby, or the parents and babies they work with".

Given that the course is available to everyone the introductory comments appropriately acknowledged that the material presented was likely to raise concerns for some/all of us

around our own experiences of being parented and of parenting. We were encouraged not to be critical of ourselves. There was a code of conduct around comments and we were encouraged to make comments at 3-4 times through each module. It was clear from the comments that for some participants the film material was observationally demanding.

Week One explored what is known about the impact of extreme environments on the development of babies. The research addressed why babies need experiences in terms of their brain development, our current understanding of experience dependent development and the way in which these experiences result in the development of infant brains that have unique patterns of wiring.

Week Two "examined the ways in which the infant's mind develops in the first two years and how it's shaped as a consequence of the parent's mind." This section addressed the process of attachment and its key role in enabling an infant to develop strategies for regulating their emotions and the development of internal working models. These models become the basic building blocks for the infant's mind and sense of self and are relatively stable over time. Interactions between the baby and their primary caregivers shape the development of these internal working models. The final sections addressed the aspects of the parent's emotional and cognitive mind focusing on postnatal depression and reflective functioning and the impact on interactions with the baby and the baby's mind.

Week Three "went back in time to explore the way in which the mother's mind influences the development of the foetus and specifically aspects that influence the development of the infant's mind. It started by looking at the concept of foetal programming and examined some of the early research focusing on maternal nutrition and its impact on foetal development." Later sections looked at recent research which has begun examining the impact of aspects of the mother's emotional and cognitive mind on foetal development and on the mother's developing relationship with the unborn baby.

Week Four looked at "some of the different methods of working to support parents during the perinatal period." It began looking at services that can be provided at a universal, targeted or indicated level and distinguishing methods that target the parent only, and methods that target the parent and infant together [typically dyadic interventions]. Some specific interventions that could be delivered were discussed.

We found this course excellent, cohesive, coherent and comprehensive. There was an impressive amount of knowledge conveyed over the four weeks. Highlights included the interviews with leading researchers and clinicians including Lynne Murray, Arietta Slade, Vivette Glover and Sue Gerhardt, Hilary Kennedy and Tessa Baradon and the illustrative films.

This course is a wonderful learning opportunity and we benefit from the leadership of Jane Barlow at The Warwick University in her drive to provide accessible quality training. This course affirmed what we knew and extended our knowledge.

Considering the parental mind - or the caregiving mind that supports the infant's mind to flourish - has become an extremely useful concept for our clinical and supervision

roles. It provides a critical point of focus in formulation, case planning and evaluation.

This course was repeated in June 2016 and we encouraged a number of colleagues to take advantage of the training. Some did this working as a group and others individually and the feedback has been universally positive. Koanga Tupu, the IMH Team at the Kari Centre, Auckland found the course "brilliant". They discussed the questions directed to online 'blog' format amongst themselves and found that of more clinical use.



Overall, highly recommended.

**Register your interest for the next course beginning 3rd October 2016.
Enrol @ www.futurelearn.com/courses/babies-in-mind**

REGIONAL GROUPS

IMHAANZ continues to be well represented by our dedicated and passionate regional groups. Each of the seven regions has its own unique focus, building strong connections and local networks while strengthening infant mental health pathways and services in their communities.

The regional groups are gaining benefits from connecting with each other (via their regional coordinators) to share ideas, resources, learning opportunities and support. Forming strong links with each other and providing mutual professional support will continue to be the main focus of my role on behalf of the IMHAANZ executive committee this year.

The IMHAANZ executive committee places great value on our regional groups and will continue to provide support in a variety of ways including: welcoming regional feedback at our executive meetings, providing resources for teaching, developing workshops and/or presentations for professional development, and providing National support to local initiatives

strengthening infant mental health pathways in the regions.

Individually and collectively we are strong advocates for New Zealand's children and if you are interested in joining a regional group or starting a new one in your area, please get in touch via the *Contact Us* tab on our website or email your local regional coordinator.

The IMHAANZ executive committee would like to pay tribute to Fiona Will, outgoing Christchurch Regional Coordinator. We thank Fiona for her time, passion, dedication and the warmth she brought into her leadership and we wish her well. In her place as co-regional coordinators for Christchurch are Judy McPhillips and Alison Gray. The executive warmly welcomes them both recognising the benefits for the Christchurch group that their extensive experience and leadership will bring.

It is with sadness that I am also handing over my national coordination role to Jacque Sokolov-Pearson and wish her all the best.

Louise Burrowes
Outgoing National Regional Groups Coordinator

AUCKLAND

Coordinator: Marion Doherty
Email: mariond@adhb.govt.nz

EASTERN BAY OF PLENTY

Coordinator: Anne Doree
Email: annedoree@xtra.co.nz

TARANAKI

Coordinator: Sally Phillips
Email: sally.phillips@tuiora.co.nz

HAWKE'S BAY

Coordinator: Judy Hunter
Email: judy.hunter@childhoodmattersnz.org

WELLINGTON

Coordinator: Lesley McSharry
Email: lesley@net-inc.org.nz

CHRISTCHURCH

Coordinators: Alison Gray & Judy McPhillips
Email: alison.gray@championcentre.org.nz
judy_mcphillips@yahoo.co.nz

CENTRAL OTAGO

Coordinator: Maria Frewen
Email: maria.frewen@qlfc.co.nz

NO GROUP?

If you are an IMHAANZ member (of 2+ years) and interested in championing the start up of a regional group in your area, contact our new National Regional Groups Coordinator: Jacque Sokolov-Pearson
Email: jacque@athomechildcare.co.nz

IMHAANZ RESEARCH SCHOLARSHIP

Scholarships are available to help fund research in the field of Infant Mental Health.

IMHAANZ supports and encourages research that aims to help improve the mental health needs of infants, toddlers and their families in Aotearoa New Zealand.

These grants are available to IMHAANZ members of more than 2 years and considered on acceptance of a written application.

Contact our Research Coordinator, Lucie Zwimpfer for further details:
lucie.zwimpfer@xtra.co.nz

MEMBERSHIP

IMHAANZ membership is open to practitioners and policy makers working with infants and their families.

Membership is \$40 per person per year. Students pay only \$25.

Join online:

www.imhaanz.org.nz

NEW WEBSITE

We have been working hard behind the scenes designing and building a brand new website for the online home of IMHAANZ.

Keep an eye out for the grand reveal - coming soon!

NEWSLETTER CONTRIBUTIONS

Keen to see something you have written or read about in the next IMHAANZ Newsletter?

Please email ideas or content to:

judy.hunter@childhoodmattersnz.org

FACEBOOK

Our Facebook page has regular updates on infant mental health events and news from NZ and around the world.

Follow or 'like' us to receive these straight to your Inbox.

EXECUTIVE COMMITTEE

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You can contact the Executive via the website.