



Facilitator

Suggested Pre-Workshop Preparation:

Provide handout prior to workshop or at least the list of resources at the end of the handout.

Have participants

1. Review chapters 3 and 4 from *Promoting Maternal Mental Health in Pregnancy* [Solchaney, 2001] – one of the NCAST programs – from the *Resources and References* in the handout. The section about definitions of attachment and bonding from chapter 4 may be particularly helpful.
2. If participants have taken part in the NCAST Training *Parent-Child Interaction: Feeding and Teaching Scales*, be prepared to discuss how these can be used to promote parent-child interaction and how it fits with supporting parents' strengths.
3. Review one or two additional items on the list of Resource in detail; be prepared to discuss how they would be helpful.

On Being a Parent with Depression

Maybe Tomorrow

*Why do they look so sad?
Are they mad?
I do see you.
I wish I could be with you.
I will make it up to you.
I love you.
I will come out of this sorrow.
Maybe tomorrow.*

Maybe Tomorrow is part of a moving collection of poems and photographs from the book *My Daughters Myself: My Rescue From Postpartum Depression*. The author, Alisia Morrow, describes her journey of parenting while suffering postpartum depression, what she observed and thoughts about her children, and her road to wellness, (see Resources section).

Facilitator discuss the poem.

Parents with Mental Health Challenges May:

- Struggle with daily functioning
- Constantly feel overwhelmed
- Experience feelings of guilt
- Tend to focus on their children's physical care
- Have little or no enjoyment when interacting with their baby/children
- Find it difficult to cope with their children's needs
- Have to rely on others (partner, family, friends) to help with parenting tasks

Parents with mental health challenges may struggle in their daily functioning and feel overwhelmed almost all of the time. They may experience feelings of guilt about their connection to their children. Sometimes they will focus on their children's physical care and may be anxious, to the point of being intrusive. A parent may have little or no enjoyment when interacting with their baby/children, find it difficult to cope with their children's needs, and have to rely on others (partner, family, friends) to help with parenting tasks. In short, a myriad of negative emotions about their ability to parent compound their mental health struggles.

Service Provider Survey Themes

Service providers asked for tools that would increase their knowledge and assist them in using a strengths-based approach to support:

- Attachment
- Bonding
- Positive parenting skills

In a recent survey, service providers working with families were asked about their needs related to their work. Most service providers asked for tools that would increase their knowledge and skills and assist them in using a strengths-based approach to support attachment, bonding and positive parenting skills.

Module Goals

To provide education and practical strategies on how service providers can help parents who are experiencing mental health challenges:

- Foster engagement with their child(ren)
- Facilitate secure attachment
- Enhance resiliency to stress

Module Content

- Mitigating Parent Mental Health Challenges and Their Impact on Infants/Children
- Service Provider – Parent Interaction: Focus on Parent Strengths
- Promoting Stability in the Home Environment
- Aiding Parent - Child Engagement
- Key Messages to Parents and Service Providers

This Module Is Organized as Follows:

- Mitigating Parents' Mental Health Challenges and their Impact on Children
- Service Provider – Parent Interaction: Focus on Parent Strengths
- Promoting Stability in the Home Environment
- Aiding Parent - Child Engagement
- Key Messages to Parents and Service Providers
- Resources

Handout including:

- Case Example
- Worksheet with Questions for Reflection
- Taking Care of Yourself (NURSE program) [O'Gorman]
- Strengths of Vulnerable Families [Toronto Public Health]
- Resources and References

Case Example



Shari, her husband and their two children 2 years and 10 weeks live in a rural community. Shari, who has no past history of mental illness, was diagnosed with severe postpartum depression. She is being supported by the Healthy Babies Healthy Children program of her local public health unit. Shari is on medication and spends a good part of her day sleeping or resting. She has a few hours in the afternoon when she has a bit more energy and

gets up for a while. Her house was in disarray until her mother arrived. She has not cooked a meal for weeks. She has let the 2 year old watch TV and has not been outside alone or with the children. She worries about not feeling instant love for her newborn, but can't bring herself to spend time with the baby. When either of the children cry, she feels like running away. Usually, she lets her mother settle both the 2 year old and the newborn. Her mother has moved in for an indefinite period to help the family. Shari's husband has resumed work after a 4-week leave.

Module 3: Supporting Parenting Skills

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Facilitator discuss Case Example from handout:

Questions for Reflection (1 – 6):

How would you respond to Shari's worries that her illness will "hurt the children"?

Though Shari spends much of the day sleeping or resting, is there opportunity for learning about her strengths as a parent? Or strengths of other adult family members in care-giving for the children?

What might you observe in this situation that can help to nurture the infant and older child? Given Shari's current state of health, what are some small steps that might be possible?

What signs of stability for the children might you observe during your visits?

Shari expresses significant worry about not feeling bonded with her infant – how might you respond to her comments? What ideas and strategies might aid Shari in engagement with her children?

Using the reflective questions 1 to 5, review and discuss a current case in your group.

Facilitator: Chapters 3 and 4 from *Promoting Maternal Mental Health During Pregnancy* from the list of resources may be helpful for this discussion, especially the section about and definitions of attachment and bonding from chapter 4.

Mitigating Parents' Mental Health Challenges and Their Impact on Children

- With the support of caring adults, children can learn how to manage
 - “positive stress”
 - “tolerable stress”
- [Centre on the Developing Child]

With the support of caring adults, children can learn how to manage “positive stress” (stress from short-lived adverse experiences, e.g., starting daycare) and “tolerable stress” (stress from adverse experiences that are more intense but still relatively short-lived, e.g., family disruption or short term illness). [Centre on the Developing Child].

Stress in Children

"Toxic stress": results from intense, adverse experiences that may be sustained over a long period of time.

- It may be related to a parent's mental illness that is not of brief, transient duration.
- It can be considered an "adverse childhood experience".
- "The negative effects of toxic stress can be lessened with the support of caring adults."

[Centre on the Developing Child]

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"Toxic stress" results from intense, adverse experiences that may be sustained over a long period of time – weeks, months or even years. A parent's mental illness, in particular, more severe mental illness that is not of brief, transient duration, can be considered an "adverse childhood experience". This is the kind of adverse childhood experience that is considered to be toxic stress for a child's developing brain and can contribute to short- and long-term health and behavioural problems. "The negative effects of toxic stress, though, can be lessened with the support of caring adults.

Taken from: National Scientific Council on the Developing Child (2005). *Excessive Stress Disrupts the Architecture of the Developing Brain: Working Paper No. 3*. Retrieved from www.developingchild.harvard.edu.

Child Development

- A child's healthy brain is built through positive interactions with nurturing and responsive caregivers.
- These positive, nurturing and stimulating experiences help to establish the wiring of the connections within the child's brain.
- Consistently responding warmly and appropriately when an infant/child is in distress is a key factor in promoting the development of a secure attachment.

More and more is now known about the role of nature and nurture. We know that a child's healthy brain is built through positive interactions with nurturing and responsive caregivers [Harvard paper] and that these positive, nurturing and stimulating experiences help to establish the wiring of the connections within the child's brain. These connections will serve them well throughout their life course [On Track p6].

Attachment is the connection between the baby and his or her primary caregiver. When the primary caregiver warmly and consistently responds to the baby's distress, the baby is more likely to develop a secure attachment. The pathway is well explained in *Promoting Maternal Mental Health in Pregnancy* and for parents in *My Child and I: Attachment for Life* (see resources).

Facilitator point out other resources from Best Start Resource Centre mentioned in the *Resources and References* from handout.

www.beststart.org/resources/hlthy_chld_dev/index.html.

- My Child and I: an Attachment for Life
- Building Resiliency in Young Children
- Healthy Baby Healthy Brain

Mitigating Parent Mental Health Challenges and Their Impact on Infants/Children

- Parents are aware of the impact their parenting skills have on their children.
- Parents whose parenting capacities are challenged by mental illness are feeling guilty, ashamed and confused.

More than ever, parents are aware of the impact their parenting skills have on their children. It is no wonder that parents whose parenting capacities are challenged by ill mental health challenges, are feeling guilty, ashamed and confused.

Mitigating Parent Mental Health Challenges and Their Impact on Infants/Children

- The whole family needs support and nurturing by consistent and responsive caregivers
 - This can include other parent, extended family, neighbours, friends and service providers
- Family members and care providers can ensure that older children in a family build relationships with other adults and children, e.g., through
 - Extended family
 - Respite care (e.g., therapeutic daycare)
 - Play groups (e.g., Ontario Early Years Centres)
 - Neighbouring families

When a parent experiences mental health challenges, the whole family needs support and nurturing by consistent and responsive caregivers (this can include other parent, extended family, neighbours, friends and service providers). The Best Start Resource Centre resource: ***Creating Circles of Support for Expectant Parents and New Families*** can provide some ideas and strategies to provide additional support (see module 1).

Family members and care providers can ensure that older children in a family build relationships with other adults and children. These relationships can be developed through

- Extended family
- Respite care (e.g., therapeutic daycare)
- Play groups (e.g., Ontario Early Years Centres)
- Neighbouring families

Parents do, feel and think ...

A parent with mental health challenges may:

- Focus on negative feelings
- Feel detached
- Worry that they are causing irreparable harm to their child(ren)

Your role as service provider is to assess the parent-child interactions and provide support to parents and children through a difficult time in their lives.

Facilitator discuss how to offer ways to provide support for parents.

Service Provider – Parent Interactions

Focus On Parent's Strength:

- How is the parent caring for the child?
- How is the parent responding to the child?
- Is the parent able to connect to the child?

To see where your support is needed most, you can assess the following:

- How is the parent caring for the child? Is the parent able to provide or participate in physical care and routines such as feeding, bathing, naps and sleeping, playtime?
- How is the parent responding to the child? Is the parent responsive to infant cues, sounds/cries/distress, and requests by older children?
- Is the parent able to connect through eye contact, speaking gently, cuddling, breastfeeding, skin-to-skin holding and feeding etc?
- How is the parent able to respond when the child is distressed?

Facilitator emphasize: Spending time watching, listening to parent-child interactions can provide a lot of information of parents' strengths. Spend some time to discuss how service providers can assess parent-child interaction. Facilitators and participants who have participated in the NCAST Training on *Parent-Child Interaction: Feeding and Teaching Scales* can discuss how these can be used to promote parent-child interaction and how it fits with supporting parent's strengths.

Service Provider – Parent Interactions

- Parents have many strengths.
- It is positive for parents to hear about what they are doing well even if it may only be a few small things.
- A parent might perceive that she/he is not doing enough for an infant through usual childcare tasks, e.g., feeding, bathing or changing clothes. Parents may not be fully aware that even simple daily tasks promote bonding and nurturing.

Facilitator use *Strengths of Vulnerable Families* from handout

The handout *Strengths of Vulnerable Families* by Dr. P. O’Gorman can provide many examples of strengths within a family and can help service providers find ways and words to reinforce positives.

Facilitator discuss the handout.

Focus on Parent's Strengths

- Acknowledge a parent's strengths
 - *"I can see how much you love your child."*
- Point out the infant/child's responses to the parent. Parents are not always able to read these cues and even less when struggling with mental health challenges.
 - Look how she smiles at you. I think she says: *"I am happy to be with you"*.

Module 3: Supporting Parenting Skills

Additional examples of acknowledging parents' strengths:

- *"You are really trying to take care of yourself."*
- *"I noticed you made a real effort to read (insert appropriate action) with your child, even though you were not feeling well."*
- *"Did you notice how quickly your baby settled? You did such a good job responding to her/him".*

Additional examples of pointing out the infant/child's responses to the parent:

- *"He is so relaxed now and ready to go to sleep, after you were singing to him."*
- *"You can hear the little sounds she is making. I think she would like you to talk to her."*

Facilitator use Questions for Reflection (7 and 8)

Think of some statements you have made to comment of a parent's strength. What did you say? What seemed to help the parent?

Take a look at the "Strengths of Vulnerable Families" handout. Which strengths did you notice when you were working with a client? Which strengths come to your mind now?

Promoting Stability in the Home Environment

- Help the parent in establishing routines that will promote stability.

It is important to help parents establish a stable home environment. This is reassuring to children and helps parents feel more in control, when they cannot control their mental state.

Promoting Stability in the Home Environment

- Do the children have a routine for eating, sleeping, and playing?
- Do the children have lots of physical activity each day?
 - This can be structured (e.g., swimming lesson) and unstructured (e.g., going for a walk, playing actively)
- Are there community programs for parent(s) that promote:
 - Education
 - Attachment
 - Coping skills?

Facilitator discuss with participants:

1. Their experiences about helping parents to establish routines for eating, sleeping, or playing.
2. What programs are available in their own communities for parent education (e.g., Right from the Start), attachment (e.g., Make the Connection) and coping skills (e.g., COPEing with Toddler Behaviour)

Aiding Parents with Child Engagement

- Encourage parents to respond to infant sounds with warm, affectionate voice tones.
- Encourage touch, including skin-to-skin holding and feeding.
- Encourage parents to respond to the initiatives of their children (e.g. questions, being offered toys or books to engage parents in play or reading).
- Encourage parents to take care of their child(ren)'s physical needs (e.g., bathing, dressing, feeding).

Module 3: Supporting Parenting Skills

Parent-child engagement is based on parental positive, warm, loving care for a child(ren). This includes sensory experiences such as visual contact, voice, touch, sounds and smells.

Aiding Parent-Child Engagement

Examples?

Module 3: Supporting Parenting Skills

Facilitator discuss examples from practice.

- Encourage and support the unwell parent to engage in activity with their infant/children as she/he is able – even a few minutes at a time, e.g., sit with them for a meal, help with bathing, massage, etc.
- As the parent is able, promote them to have one-on-one activities with each infant/child, e.g., read, play or go for a walk with them.
- In the event that a parent is too unwell to directly participate with their child(ren), promote she/he being present with them, e.g., sitting and observing, as they are able.

Key Messages to Parents

- You are NOT a bad parent.
- You don't need to be a "perfect" parent. Your baby/child thinks you are a wonderful parent.
- As you feel better, you will be able to take on more of your parenting responsibilities.

Key Messages to Parents

- Bonding with a child is a process that occurs over time.
- Developing a secure attachment depends largely on how sensitively the primary caregiver responds to the child in times of distress.
- Child(ren) can form attachments to other key care givers in their lives.
- Feeling guilty is a natural reaction to experiencing mental health challenges.

Key Messages to Parents

- Bonding with a child is a process that occurs over time, includes familiarity, closeness, comfort and responsiveness.
- Developing a secure attachment depends largely on how sensitively the primary caregiver responds to the child in times of distress.
- Child(ren) can form attachments to other key care givers in their lives. This will increase their resiliency.
- Feeling guilty is a natural reaction to experiencing mental health challenges, but children are resilient and the parent will feel better and more able to fulfill their parenting role with time and treatment.

Key Messages to Service Providers

Encourage the parent to:

- Seek treatment and support.
- Involve other family members and significant others to develop a nurturing, responsive relationship with the child.
- Use self-care strategies including time for herself to refresh her parenting energies.
- Use mood elevating activities such as infant massage or music when interacting with her child(ren).
- Attend programs or do activities at home that help with parent-child engagement.

Module 3: Supporting Parenting Skills

Key Messages to Service Providers:

- Encourage the parent to seek treatment and support.
- Help the parent involve other family members or significant others to develop nurturing, responsive relationships with the child.
- Encourage the parent to use self-care strategies including time for herself to refresh her parenting energies.
- Encourage the parent to use mood elevating activities such as infant massage or music when interacting with her infant.

Offer the parent options to attend programs or do activities at home that help her engage with her child (e.g. attachment activities from *My Child and I: Attachment for Life* (Best Start Resource Centre, 2009), taking an infant massage or yoga with baby class.

Facilitator discuss *Taking Care of Yourself (NURSE)* from handout.

Use Questions for Reflection (9 and 10)

Using the NURSE strategies from the “Taking Care of Yourself” handout, what activities can you encourage to promote your client’s self-care?

Which self-care strategies have you found effective with clients?

Resources

- Early child development
- Attachment theory
- Positive parenting
- Strengths-based interactions

Facilitator use *Resources and References* from handout.

Discuss pre-workshop reading: What resources did participants find helpful?

Are there other resources participants have found helpful regarding:

- Early child development
- Attachment theory
- Positive parenting
- Strengths-based interactions?

Best Start: Ontario's Maternal, Newborn and Early Child Development Resource Centre Health Nexus

www.beststart.org and www.healthnexus.ca

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