Plenary Session Keynote Winnicott Lecture:
Infant mental health: A global public health issue

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Acknowledgement

- I acknowledge the Aboriginal and Torres Strait Islander people.

- I acknowledge them as the traditional owners of country throughout Australia and recognise their continuing connection to land, waters, and culture.

- I pay my respects to their elders past, present and emerging.

Overview

- 1. Global United Nations Sustainable Development Goals (SDGs): Why they matter to our IMH field?

- 2. Wisdom from Winnicott

- 3. From evidence to action: Bringing global goals home

- 4. An IMH-Public Health engagement framework

Why pay attention to Sustainable Development Goals?

❑The UN general assembly made up of all member states (N= 193)

❑The umbrella framework is the UN Sustainable Development Goals (SDGs).

❑**Sustainable development is** : "… development that meets the needs of the present without compromising the ability of future generations to meet their own needs" (Brundtland, G. (1987).

❑Brundtland, G. (1987) *Report of the World Commission on Environment and Development: Our Common Future.* [online] Available at: http://www.un-documents.net/our-common-future.pdf

UN Sustainable Development Goals

❑ The SDGs (2015) represent global consensus on what these goals should be. They focus on a global call to act to end poverty, protect the planet and ensure that all people enjoy peace and prosperity.

❑ There are 17 interconnected goals. Each goal has specific targets to be achieved over the next 15 years (2030).

❑ SDG 17 explicitly states the need for partnerships for implementation between governments, the private sector and civil society (such as NGOs).

From Sustainable Development Goals, to Agendas, to Strategies, to Targets

❑ **The Sustainable Development Goals (SDGs**) include an **agenda** for early childhood development that includes **direct targets** on malnutrition, child mortality, early learning, and violence.

❑ Global institutions including UNICEF, the World Bank and the World Health Organization have prioritized **early childhood development** in their programmes of work.

Donald Woods Winnicott

❑**Partnerships**

There is no such thing as a baby there is always a baby and someone… (Winnicott, 1960). There is no such thing as IMH, there is always IMH and another field ….

❑**Sustainable Development**

"The **potential space** between baby and mother, between child and family, between individual and society or the world, depends on experience which leads to trust. It can be looked upon as sacred …" (Winnicott, 1967). "Similarly, "the potential space" between IMH and Global Public Health also depends on experience which leads to trust. It can be looked upon as sacred because infants and their families, and the next generation of each family, are at the core of the potential space" (Foley, 2019).

From evidence to action: "Bringing global goals home" (Foley, 2019).

- Csaba Kőrösi, the vice chair on the open working group on the SDG's said: "If we are serious about implementation, the bulk of the work will have to be to done back at home" (Csaba Kőrösi, 2015).

- "Home is where we start from" (Donald W Winnicott, 1986) – A book of collected papers published after Winnicott's death in 1971 by his wife Clare and close colleagues.

- Implementing the SDGs is challenging; current health targets are behind schedule; there is not yet sustained momentum between evidence, global commitment, strategies and actual implementation at community level – where infants in their families live.

- Kőrösi, Csaba. 2015. Negotiating a Common Future: What We Have Learnt from the SDGs. In Building the Future We Want, ed. Rajendra Kumar Pachauri, Anne Paugam, Teresa Ribera, and Laurence Tubiana, 74–82. New Delhi: TERI Press.

Challenges to applying an IMH lens to contribute to *sustainable development* in Public Health

1. Stakeholders and audience

2. Focus on child development and adult education

3. Inter-generational clients

4. Scaling up

5. Aging up

6. Member state reporting

Challenge 1: Audience and Stakeholders

- Governments

- Civil Society

- Media

- Business Community

- Philanthropic organizations

- Academic research institutions

- Bilateral organizations

- Multilateral organizations

"The infant and their primary caregivers within their relational caregiving environment is the primary audience. This view supports Selma Fraiberg's (1980) quest to return science back to babies (Foley, 2019).

Challenge 2: Focus on child development and adult education

Evidence based response:

- The intergenerational transmission of complex and relational trauma within a primary care relationship is a public health issue.

- Environment: Nurturing and safe relational change in the attachment relationship within a family is a major factor towards improved health and wellbeing.

- With targeted structured relational support, the relational and in turn, physical and mental health of parents and their young children, can significantly improve; even at times when other challenging conditions within the family and its community remain unchanged.

Challenge 3: Inter-generational clients

- "Parents who have suffered toxic stress as young children, and who are continuing to suffer, tend to initially push the offer (or order) of help and support away" (Foley, 2019).

- "Too often, our organizational systems are unprepared to welcome and greet families who are ashamed, suffering, and afraid. In response, there is often early failure to engage – attributed to the client via their non attendance and/or failure to comply" (Foley, 2019) .

- "We need to promote inclusions by developing and maintaining inclusive **health** oriented structures to help families experience themselves as a family in their community" (Foley, 2019).

Challenge 4: Scaling up: Barriers and enablers

- Professor Mark Tomlinson talks about issues in scaling up programmes and a pattern of omitting core elements of a programme in the upscale:

Central elements to the success of small Random Control Trial (RCT) studies and interventions:

❑ The relationship between the community health worker and the family

❑ Supervision

❑ Training

❑ Management of the programme

❑ Relationship sensitive interventions, can get lost, or dropped when funding is squeezed when programs are scaled up.

Cavallera, V., Tomlinson, M. Radner, J., et al (2019) Scaling early development: what are the barriers and enablers. Archives of Disease in Childhood, Vol 104, 543-550.

Richter LM, Daelmans B, Lombardi J, et al. Investing in the foundation of sustainable development: pathways to scale up for early childhood development. Lancet 2016; 389:103–18.

Challenge 5: Aging - Up

- Professor Linda Richter et al. (2019) studied the barriers to rolling out full-scale service to families with very young children. They looked at both attitudes in the community and those in the early childhood development sector.

- Findings:

❑ Shared agreement of the importance of early childhood development

❑ Major barrier: The tendency to "age up"; to focus on preschool skills and learning, school readiness rather than infancy.

❑ Infancy is not yet prioritized

Richter, L., Tomlinson, M., Watt, K & Hunt, X. (2019). Early means early: understanding popular understandings of early childhood development in South Africa. *Early Years, 39* (1) 1 – 15.

Challenge 6: Commitment from member states is not a legal obligation

- *On May 27, 2013, the World Health Assembly adopted the **Comprehensive Mental Health Action Plan 2013–2020.***

- 194 member states of the WHO committed to improve mental health and aim to meet the global targets.

- GLOBAL REPORTING ON CORE MENTAL HEALTH INDICATORS (2017 Mental Health Atlas, WHO)

❖ 177 out of WHO's 194 Member States (91%) at least partially completed the Atlas questionnaire.

❖ 37% of Member States regularly compile mental health specific data covering at least the public sector.

❖ 29% of WHO Member States compile mental health data as part of general health statistics only.

Building a potential space between IMH and Global PH

- "The **potential space** between baby and mother depends on experience which leads to trust. It can be looked upon as sacred …" (from "The Location of Cultural Experience," 1967) .

- "Similarly, "the potential space" between infant mental health and global public health also depends on experience which leads to trust. It can be looked upon as sacred because infants and their families, and the next generation of each family, are at the core of the potential space" (Foley, 2019).

- How do we build experience which leads to trust?

- Develop **Framework Conversation Bridges** (FCBs) (Foley, 2019)

Winnicott, D. W. (1971). The location of cultural experience. In *Playing and reality* (pp. 95–103). London, England: Tavistock. (Original work published 1967)

Framework Conversation Bridges (FCBs)

- "We are IMH specialists - we don't need to be Global Public Health specialists.

- As a field, we have a unique skill set: we observe interactions and track interactions; at best we engage in the moment, based on what is shared evidence – behaviour and conversation; we look for ports of entry into conversations that optimise engagement and mutual opportunity for sharing and joy.

- To engage in a Global Public Health Conversation, let's choose SDG's, Strategies and Frameworks that are most aligned to the quality of evidence that we currently have in our field and related fields.

IMH-Global Public Health Engagement Framework (Foley, 2019)
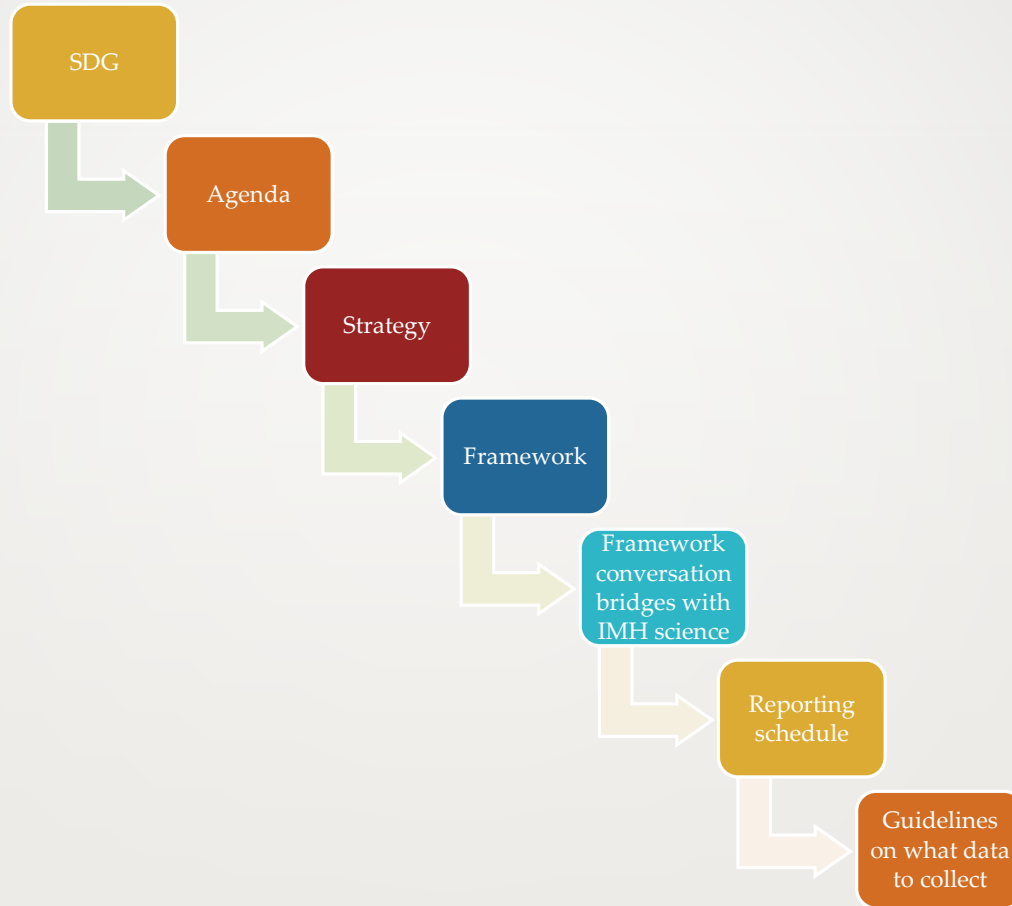
From an SDG, Agenda, Strategy, Framework

- **SDG**   2. Zero Hunger; 3. Health and Wellbeing; and 4. Quality Education

- **Agenda** Commitment to Child Development

- **Strategy** The Global Strategy for Women's, Children's and Adolescent's Health (2016–2030) Survive, Thrive and Transform**.** United Nations, New York; 2015

- **Evidence** Lancet (2016)(WHO and UNICEF Chaired this report) Professor Linda Richter lead researcher promoting "nurturing care".

- **Framework** The Global Strategy for Women's, Children's and Adolescents' Health (2016-2030): *Nurturing care for early childhood development: a framework for helping children survive and thrive to transform health and human potential.* World Health Organization, Geneva; 2018.

- The Lancet Series on Advancing Early Childhood Development: From Science to Scale (2016). https://www.unicef.org/pacificislands/Lancet_ECD_Series_Core_Messages.pdf

The Global Strategy for Women's, Children's and Adolescents' Health (2016-2030): **Nurturing care for early childhood development: a framework for helping children survive and thrive to transform health and human potential.**

The Framework outlines:

❑ *why efforts to improve health and wellbeing must begin in the earliest years, from pregnancy to age 3*

❑ *the major threats to early childhood development*

❑ *how nurturing care protects young children from the worst effects of adversity and promotes physical, emotional and cognitive development*

❑ *what families and caregivers need to provide nurturing care for young children.*

• The Framework describes how a whole-of-government and a whole-of-society approach can promote and strengthen the Nurturing Care of young children, what the guiding principles for doing so are, and what strategic actions are needed, and the monitoring of targets and milestones that are essential to progress.

• Cited from: https://www.who.int/maternal_child_adolescent/child/nurturing-care-framework/en/

Audience and Stakeholders

- "… Often times the cited audience and stakeholders are identified as: governments, civil society, the private sector. However, the Nurturing Care Framework (2018) states that, "Last, but not least, the Framework speaks – through these stakeholder channels – to caregivers who provide nurturing care for their young children every day" (Nurturing Care Framework, p. 4). In conjunction, the IMH-Global public health engagement framework also promotes **infants and their caregivers as primary audiences and stakeholders through which the other stakeholders channel feedback regards progress to the UN" (Foley, 2019).**

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Responsive caregiving

- *"Responsive caregiving includes observing and responding to children's movements, sounds and gestures and verbal requests. It is the basis for: • protecting children against injury and the negative effects of adversity; • recognizing and responding to illness; • enriched learning; and • building trust and social relationships. Responsive caregiving also includes responsive feeding, which is especially important for low-weight or ill infants"* (The Nurturing Care Framework, 2018, p. 14).

- Responsive caregiving is linked to indicators for SDG 4.2 and UNICEF'S Multiple Indicator Cluster Surveys (MICS).

- Goal 4, target 4.2: By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education.

Responsive caregiving response

- **Responsive caregiving also needs to also be directly linked to SDG3 Good health and wellbeing**

- "The intergenerational transmission of complex and relational trauma within a primary care relationship is a public health issue" (Foley, 2019).

- "Infant mental health related science shows that relational environment change within a family in its community is a contributing factor towards improved health and wellbeing. With targeted structured relational support, the relational and in turn, physical and mental health of parents and their young children, can significantly improve; even when other challenging conditions within the family and its community remain unchanged" (Foley, 2019).

The Nurturing Care Logic Model

- *"The aimed for impact: Every child is able to develop to their full potential and no child is left behind. All children are developmentally on track".* (Nurturing Care Framework, 2018, p. 33)

- "In full support of the aimed for impact in the Nurturing Care Framework (2018) the aimed for impact of the IMH-global public health framework is for ev**ery child and their caregiver/s to develop to their full potential" (Foley, 2019).**

- "The IMH-global public health framework aims to have an impact whereby: **No infant relational care environment is left behind. All infants and young children, and their parents/caregivers are developmentally on track"** (Foley, 2019).

The Logic Model – inputs, outputs, outcomes

- **Inputs:** "Strengthen existing systems and services, ensuring joint dynamic action between sectors and stakeholders" (Nurturing Care Framework, 2018, p. 33).

- **Outputs:** Strengthening service, national standards, training staff and monitoring child development when needed, timely referrals" (Nurturing Care Framework, 2018, p. 33).

- **Outcomes:** "The child has secure emotional relations with caregivers; Caregivers are sensitive and responsive to the child's cues; Caregiver-child interactions are enjoyable and stimulating; Communication is bi-directional" (Nurturing Care Framework, 2018, p. 33).

- "In support of the Nurturing Care Framework (2018) The IMH-global public health framework promotes that **inputs and outputs also need to include the primary care relationship as a health environment system…** " (Foley, 2019).

Reporting Schedules and what data is being collected …

- Reporting dates for the nurturing framework

- UNICEF Australia

- UNICEF New Zealand

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Crafting the IMH-Global public health framework into a new NGO: Aim and Principles

Global Infant Family Forum (Foley, 2019)

Aim: *Contribute to meeting the United Nations Sustainable Development Goals, Goal 3, Good Health and Well-Being for People; and Goal 17, Partnerships for the Goals by ensuring that communities are resourced to provide the conditions that enable all parents who suffer from relational trauma and complex trauma to heal and be part of healing, and creating relational health in the next generation of their family.*

Principles:

1. *The infant-primary care relationship is a health environment.*

2. *Infants and their families, in their local community, are primary stakeholders of sensitive care, nurturing, and protection.*

3. *Leave no child behind and leave no parent behind.*

4. *Local communities are central sources of action and sources for timely global reporting.*

Children separated from their families. Rwanda, 1994.
Red Cross Museum, Geneva, Switzerland.

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https://www.redcrossmuseum.ch/en/