Working with Fragile Families:
the evolving maternal and child health nurse role

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The Queen Vic

Two sides of one coin?

- Scott, D. "Nursing the Impaired Mother-Infant Relationship in Puerperal Depression", **Australian Journal of Advanced Nursing** (1984), 1,4, 50-6

- Scott, D. "Maternal and Child Health Nurse Role in Post-Partum Depression", **Australian Journal of Advanced Nursing** (1987), 5,1, 28-37

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Is maternal emotional and social well-being part of the MCHN role?

NO!   'it's not my concern'

MAYBE   'it's a concern but someone else's job'

I SUPPOSE SO   'not my role but maybe I have to do it'

ABSOLUTELY!   'it's part and parcel of my job'

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All families can be fragile but some are more fragile than others…

Parental characteristics of children entering out-of-home care for the first time

Parental substance abuse   69.4%

Domestic Violence   65.2%

Parental mental health problems   62.6%

Delfabbro, Kettler, McCormick & Fernandez (2012), The nature and predictors of reunification in Australian out-of-home care, AIFS Conference, Melbourne.

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Strategies for Fragile Families

Strategy A:

Build capacity within all sectors and services for "child and family inclusive" practice.

Strategy B:

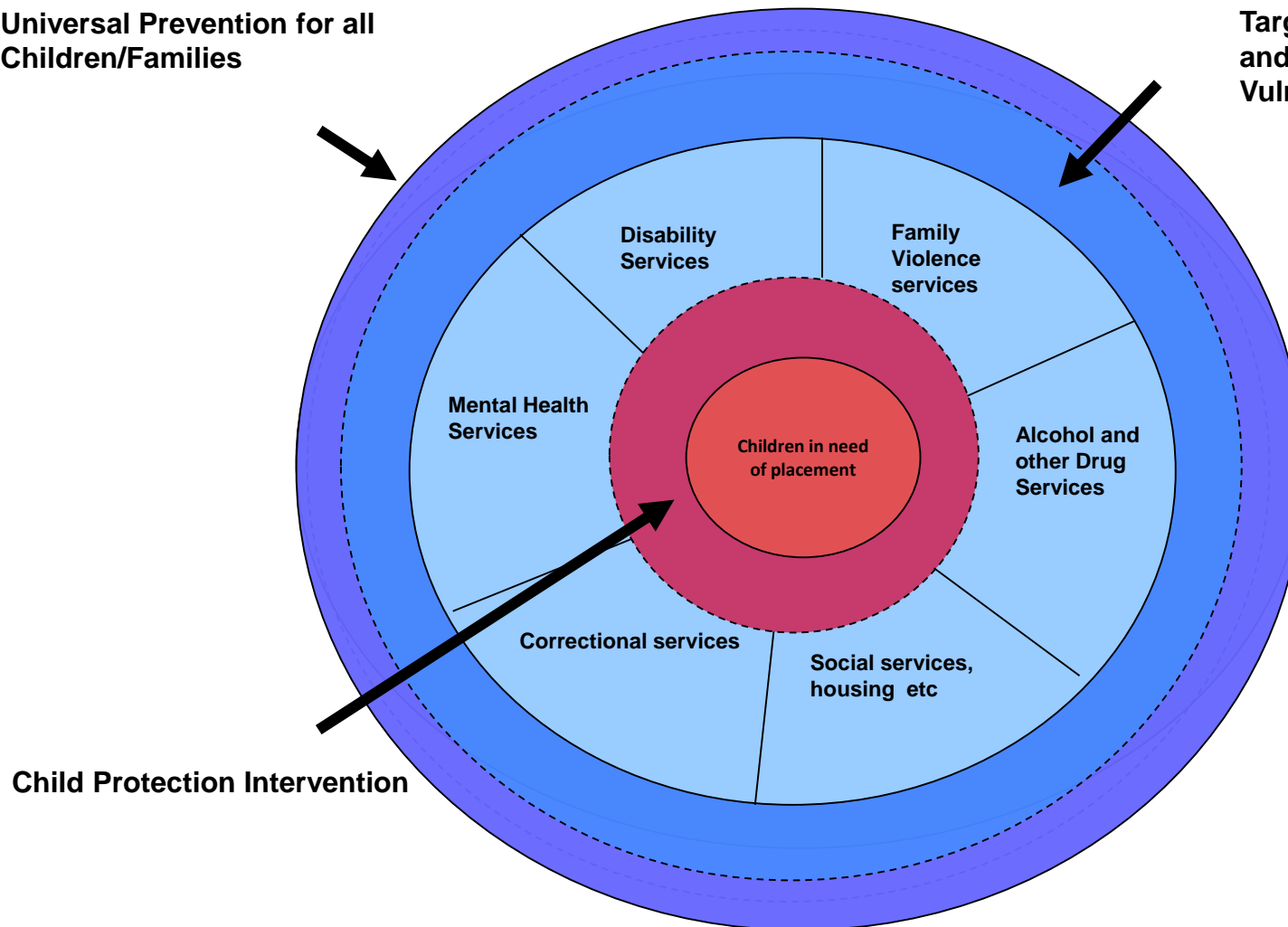Strengthen relationship-based practice.

Strategy C:

Build bridges between services and sectors.

Strategy A

Build capacity within all sectors for "child and family inclusive" services.

Universal Prevention for all Children/Families

Targeted Prevention and Intervention for Vulnerable Families

Disability Services

Family Violence services

Mental Health Services

Alcohol and other Drug Services

Children in need of placement

Correctional services

Social services, housing etc

Child Protection Intervention

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Practitioners

Organisational Context

Policy Context

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Policy Facilitating Factors

- Funding models with broad performance indicators
- "Joined up" policies which enable cross-sectoral collaboration
- Place-based models of service delivery
- Commitment to universalism - a shift to "targeted services" will ultimately stigmatise the service and "kill the goose that lays the golden egg"

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Organisational Facilitating Factors

- Reasonable size of caseload

- Mission-led organisation

- High calibre leadership

- Permission for practitioner flexibility

- High quality clinical supervision

- Enables relationship-based practice

- Positive culture and climate

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Keeping the mother in the picture
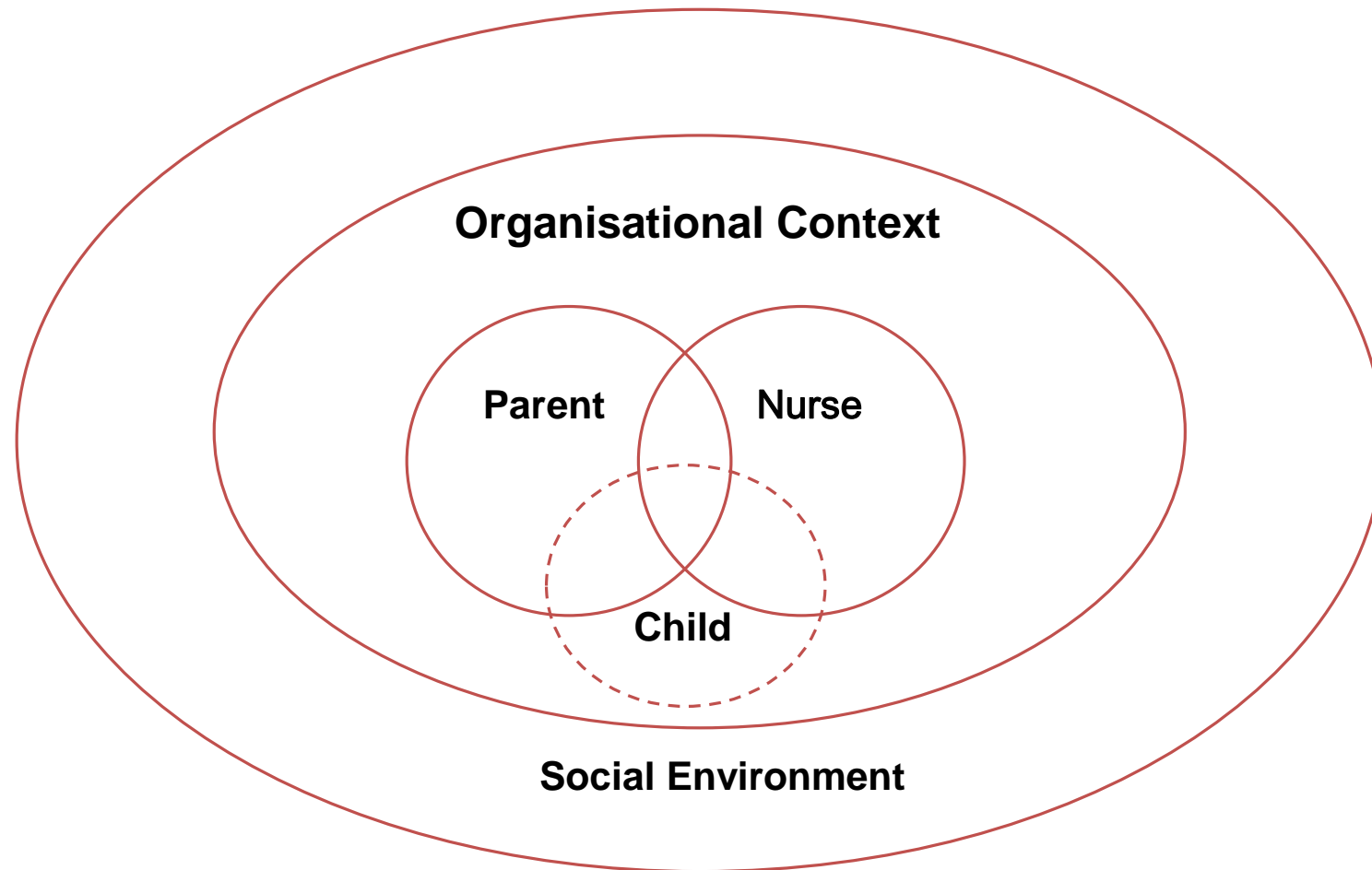
Keeping the father in the picture too

Reaching out to Fathers

One maternal and child health nurse sent written invitations to all fathers to an evening session of the first-time parent groups to which their partners belonged. The topic, 'come and learn how to save your baby's life' was the hook. Once she had the men learning CPR on the floor, she even tackled sensitive issues such as the danger of shaking babies, and post-baby couple relationships.

Strategy B: Relationship-based Practice

It is through relationships that we reach vulnerable families, so in a profound sense, we are the instrument of our own practice. How do we care for and fine tune this instrument? How do we sustain ourselves in our work? How do we sustain our colleagues?

The psycho-social "ecology" of the relationship triad

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MCHN insights on teenage mothers…

"… the one looking for a Mum thinks I'm wonderful, the one rebelling against Mum thinks I'm terrible."

"…we just sat on the floor and made toys and they loved it … all of that 'parenting propaganda' switches them right off!"

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GROWTH

Genuineness – "being real in role"

Respect – for people (not "cases")

Optimism – nurturing hope

Warmth – human empathy

Trust – honesty and transparency

Humility – not knowing it all

Brenda Stubbs, an inspiring Aboriginal woman living and working in a remote, combating infant failure to thrive said to me
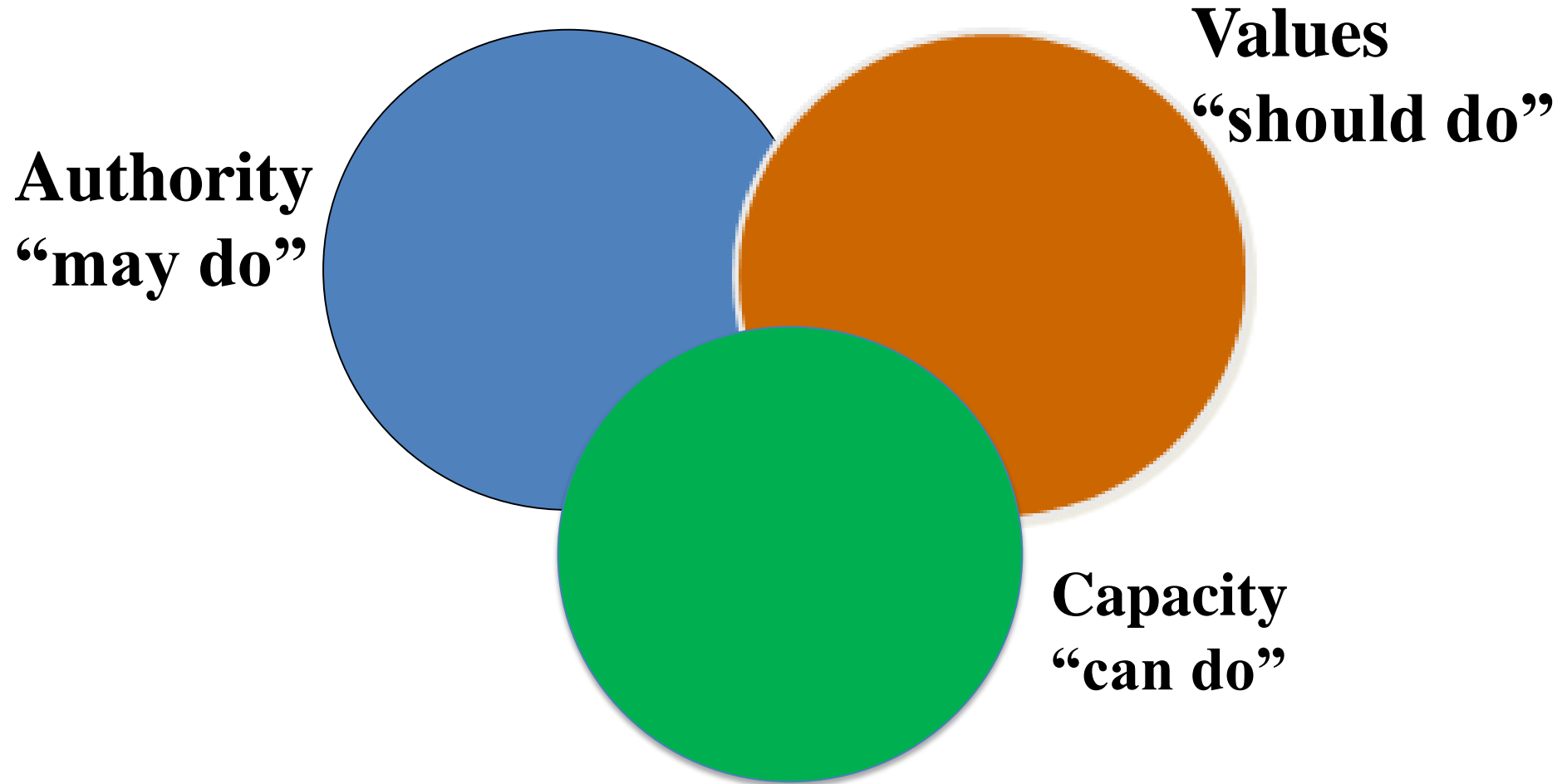
"everything I try to do is saying 'you can change things, it doesn't have to be like it is' "
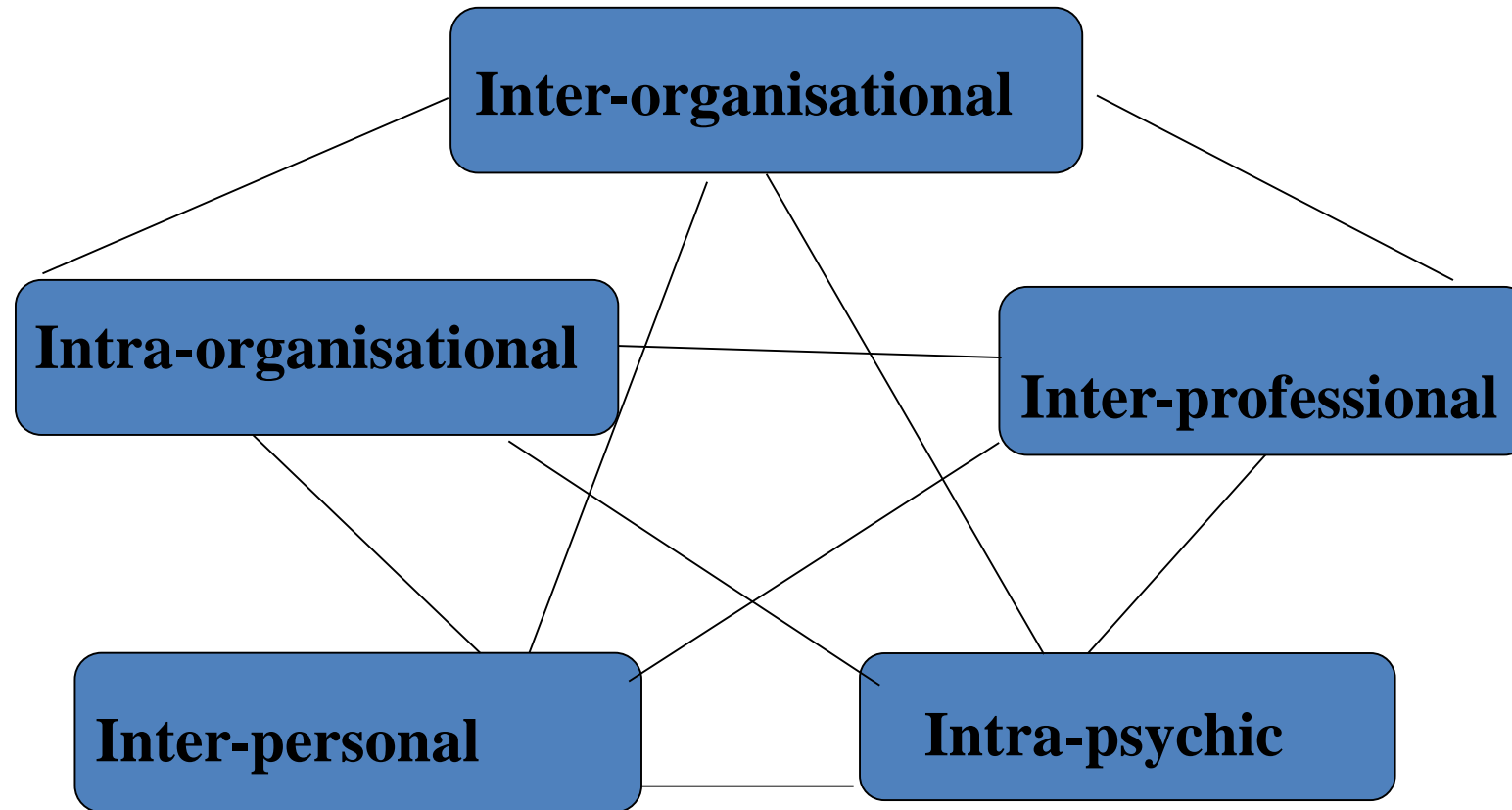
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Strategy C: Build bridges between all services

Michael White and Gail Winkworth: www.successfulcollaborations.com.au

Authority "may do"

Values "should do"

Capacity "can do"

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Sources of conflict in collaboration
(Scott, 2005)

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Scapegoating "the other"

"Inter-agency or inter-professional conflict is worse in bad cases. What happens is you see the other person as having the solution, you can't fix it so you imagine they can fix it, so you blame them for not fixing it and then get angry ... I could see that all over the place."

Interviewee in a study of interaction between child protection and mental health staff by Arney, Lange & Zufferey (2010) p. 187

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Transformational leaders

1. Select staff for their values as well as knowledge and skills

2. Uphold high professional standards and nurture healthy and effective teams

3. Facilitate collaboration between professions, services and sectors.

4. Demonstrate their sense of vocation in pursuit of a shared vision

Vocation in pursuit of a vision

"To be welcomed into the lives of families and to work with head, heart and hands"

Professor Phillip Darbyshire
CAFHN conference, Adelaide 2009

References

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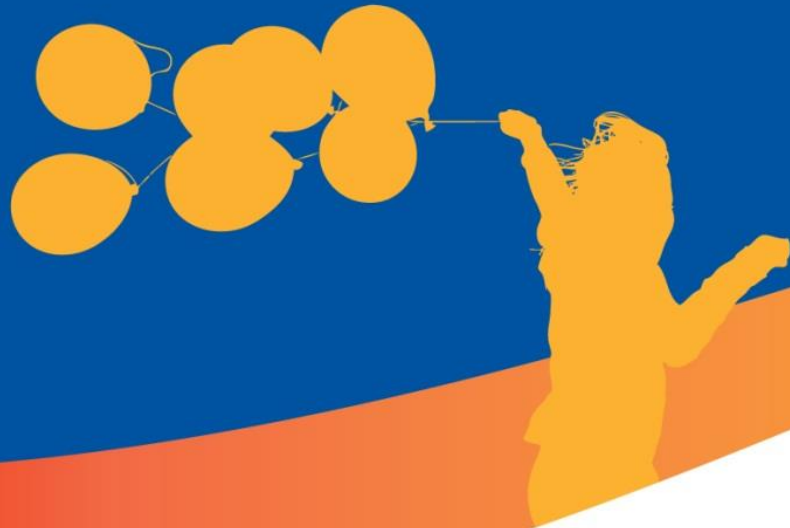
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