

## How to care for infant mental health

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Lynne Malcolm and Olivia Willis – All in the Mind ABC Radio

*With Prof Louise Newman, Sally Watson (President, AAIMHI) and Kathy (mother to Tomas)*

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WE FOCUS ON THE PHYSICAL, BUT WHAT ABOUT THE MENTAL HEALTH OF CHILDREN?

When caring for babies, we focus on keeping them warm, physically safe and well fed—but their mental wellbeing is equally important. What does that mean for vulnerable infants exposed to trauma, domestic violence or indefinite detention? **Lynne Malcolm** and **Olivia Willis** report.

For most parents, the primary focus in the first days, weeks and months is simply keeping the baby alive: ensuring their child is adequately fed, rested and settled, and out of harm's way.

But what about caring for an infant's social and emotional wellbeing?

What the research has shown is the more responsive we are to infants in the first two years of life, the more autonomous they will be as adults.

**SALLY WATSON**

Mental health during infancy is 'absolutely critical', according to Louise Newman, professor of psychiatry at the University of Melbourne and director of the Centre of Women's Mental Health at the Royal Women's Hospital.

'We think about infancy, the nought to three year period roughly, as foundational, meaning that a whole lot of both the psychological and neurological factors that are related to ongoing mental health are literally laid down during those critical early years,' says Newman.

The infant psychiatrist says brain development is largely shaped by a child's context, regardless of their genetic makeup.

'For brain development, we need the right sorts of social and interactive experiences for the brain to grow and develop in a normative way.

'We know, for example, that brains grow better in the context of caretaking relationships that are positive and warm, where there is a sharing of emotional states.'

Sally Watson, national president of the Australian Association of Infant Mental Health, also says infant mental health benefits from a safe and supportive environment.

'[When] they are able to express their emotions freely, they know that they are going to be responded to, they can make what they need clear to their primary caregiver, they are able to regulate their emotions ... they see that relationships are their source of security and safety.'

Watson says it is a common misconception that babies are too young to have genuine emotional and social needs.

'What we are increasingly finding is that certainly it's important for infants' physical needs to be met, but it's actually those emotional needs and sensitive responsivity from their parents that is really the keystone for good outcomes in the long term.

'If we don't have good infant mental health, then the trajectory for the future can be very compromised.'

### **Towards a framework for mental health**

The key theoretical framework practitioners use to study infant mental health is the attachment theory.

First developed by British psychoanalyst John Bowlby in the 1970s, the most important tenet of attachment theory is the need for infants to develop a secure relationship with at least one primary caregiver.

'Really, it's the idea that when a child needs safety or needs security when there is a threat, that they have somebody they can go to that is going to keep them safe, at a physical level but also at an emotional level,' says Watson.

In order for an infant to learn to effectively regulate their own feelings, those feelings first need to be managed and regulated by their primary caregiver.

Where that can go wrong, says Watson, is if the carer themselves is emotionally unregulated.

This can occur in a range of scenarios, including when the caregiver is a source of the danger or in a position of extreme vulnerability.

Watson says the 'toughen up attitude' that permeates much of Australian culture is not the approach parents should be taking when it comes infant mental health.

'If you fall over and the child cries or is upset, sometimes parents cannot actually see that for what it is: the child might be a little hurt and they just need some nurturing, and then they are fine.'

Watson says the key to building strong and secure relationships with infants is responsive and predictable parenting.

'There's a lot of pressure on parents to be doing things with their babies all the time, to have them knowing their colours and numbers, but you can actually just be with your baby with a face that when they look up they can see, yes, this person enjoys being with me.'

### **What parents can do**

Sydney mother Kathy has a 16-month-old boy, Tomas. As a first time mum, Kathy made Tomas' mental health a priority from the day he was born.

'The first emotion that I had was I need to protect this little thing,' she says.

'Every time I have an interaction with him, I imagine the little networks in his brain connecting, and I am just very conscious of the fact that whatever relationship or experience he has in the beginning will influence the rest of his life.'

One of the most significant challenges for any primary caregiver is the management of their baby's sleep.

When Kathy's son Tomas was five weeks old, she sought help from early childhood professionals.

'Sleep is massive, and it's such a contentious topic. When I was seeing the early childhood nurses and I was seeing the professionals, they were saying ... it's okay to let him cry, he won't remember.

'Even though it didn't really agree with me, I was feeling so vulnerable I didn't really challenge that.'

'Now looking back, for an adult we can justify that they are in a room, they are in a cot, they are nice and safe. For a five-week-old, they have no perception of the reality ... all they know is that if Mum is not there, my primary caregiver is not there, I'm not safe, I don't have access to food, I don't have protection.'

Kathy says she chose not to practice 'controlled crying'—a technique that involves leaving an infant to cry for increasing periods of time before providing comfort.

'I couldn't, because I just imagined how distressing it is for him to be in a room by himself crying without having that basic need being met.

'If he is crying in the middle of the night, it doesn't matter if it's two o'clock or three o'clock, I go to him and make sure he is OK. I gently try to encourage him to be able to sleep on his own without needing Mum to soothe him, but it's a challenge.'

According to Sally Watson, this responsive approach to parenting can help children build resilience in the long term.

'What the research has shown is the more responsive we are to infants in the first two years of life, the more autonomous they will be as adults. That is what security is about ... it actually gives them more confidence to be able to take risks.'

### **What's going on in the brain?**

When a child's mental wellbeing is disturbed by stress or trauma, it can affect them well into their adult life. Research shows that during infancy, stress-related hormones have a direct impact on the developing brain.

'High levels of stress that are not moderated in this critical period of early brain development can have short-term consequences, but importantly long-term consequences,' says Louise Newman.

'The infant brain, in situations of stress, is set up in a way to try and survive as best it can in quite difficult environments, but what that means in the long term is a stress regulatory mechanism that is set on high.

'It's like taking a thermostat and setting it on high; stress responses are likely to be exaggerated.'

Newman says the impact of early stress makes a person more vulnerable to a 'whole range of mental health problems'.

'This has been looked at in terms of fairly large-scale epidemiological studies looking at the rates of childhood adversity in the infant period, including disruptions of care, high levels of stress, abuse, which sadly is something very significant in the infant period.

'All of those stressful experiences are risk factors for the entire range of adult mental health problems.'

### **Infants in immigration detention 'developmentally delayed'**

Newman says the children of asylum seekers who are being held in immigration detention are at very high risk of lasting psychological damage.

'These infants, particularly the infants who are born in detention, have the double situation of risk: parents who are usually depressed, extremely anxious, deeply troubled

by the situation they find themselves in, and being in a restricted environment themselves, not getting the right sort of input.'

Newman says early studies of infants held at Australia's Woomera and Baxter detention centres found the children were 'developmentally delayed', and had difficulty forming secure attachments and relating to others.

'I think it makes it even more troubling that we are in fact replicating the conditions for these very poor outcomes by keeping any infants and parents in detention.'

In April this year, Immigration Minister Peter Dutton confirmed the release of the last group of children held in mainland immigration detention.

'Fortunately we have had the release of mothers with babies into various forms of so-called community detention, which is a partial reprieve ... [but] I think that means in practice that many of these families remain in a situation of high stress, and there are ongoing difficulties with parenting.'

'It's always of course terribly concerning when government policy results in damage to children, and this frankly is damage as a result of government policy.'

Newman and her colleagues at the University of Melbourne and the Royal Women's Hospital are now developing research-based interventions to protect children at risk of trauma and ongoing stress, with a particular focus on substance abuse, parenting in Indigenous communities and family violence.

'The other piece of work that we are moving into will be looking at situations where women might be in high risk relationships, where they are at risk of interpersonal violence or psychological abuse, because, again, that's a high stress situation,' she says.

'There is a lot of concern, particularly following the Royal Commission into Domestic Violence, about the impact of violent households and relationships on child development.

'We are going to be providing intervention programs and looking at outcomes in those situations.'

Newman says the intervention programs are about preventing infants being exposed to high stress situations where possible and bolstering their resilience.

'That will have positive mental health outcomes, we believe, across the lifespan.'