

# Promoting parental- and infant mental health in nursing and midwifery.

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What are the rules for promoting maternal- and infant mental health in nursing and midwifery?

- **Concepts** in nursing - guiding elements in practice, e.g. **Attachment** of newborn/ parent.
- Nurses **thinking about their work** in terms of rules and regulations, of routines and functional care - or in terms of knowledge, theories, concepts and research findings.

# Perinatal mental health (maternal-, infant- and family mental health)

- The perinatal period (conception to one year after childbirth)
- **Opportunities** for early intervention, prevention and health promotion both in physical and mental health.
- Evidence on nursing / midwifery practice that is likely to promote perinatal mental health
- **Symposium: Early intervention and interdisciplinary collaboration in the management of perinatal mental health problems. 29th congress of the Nordic Psychiatric Association in Stockholm, 22-24 September 2009 (<http://www.ncp2009.org>)**



# Prevention of mental health problems

- Primary: To reduce the number of new cases of mental disorder (incidence). Universal measures that are beneficial for everybody in the population
- Secondary: To lower the rate of established cases of mental disorder by reducing their duration. Selective measures that are beneficial to a subgroup of the population (high risk of becoming ill)
- Tertiary: To decrease the amount of disability resulting from mental disorders. Indicated measures applied to groups who are asymptomatic and carry a risk factor that justifies extensive interventions.

Fonagy P. (1998). Prevention, the appropriate target of infant psychotherapy. *Infant Mental Health Journal*, 29(2), 124-150

Thome M., Alder E.M., Ramel A. (2006). A population based study of exclusive breastfeeding in Icelandic women: is there a relationship with depressive symptoms and parenting stress? *International Journal of Nursing Studies*, 43, 11-20.



## Prevention in pregnancy

- **Violence**
- **Abuse (sexual, physical, emotional)**
- **Drug addiction /Alcohol abuse/ Smoking**
- **Depression/ Anxiety**
- **Relationship / attachment disorders**
- **Posttraumatic stress disorders**
- **History of mental health problems**
- **Lack of support**
- **Etc.**

## Prevention during the postpartum period (birth to six months)

- High levels of parenting stress, depressive symptoms and anxiety
  - Disregulations in early infancy (crying, sleeping, feeding)
  - Exhaustion and severe maternal fatigue
  - Low levels of social support
  - Bonding problems and Attachment disorders
  - Parental psychopathology
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- Skúladóttir A., Thome M. (2003). Changes in Infant Sleep Problems After a Family Centered Intervention. Pediatric Nursing, Sept/Oct 29(5):375-78.
  - Thome M, Skuladóttir A. (2005). Evaluating a family-centred intervention for infant sleep problems. Journal of Advanced Nursing, 50 (1), 5-11.
  - Eygló Ingadóttir, Marga Thome (2006). Evaluation of a web-based course for community nurses on postpartum emotional distress. Scandinavian Journal of Caring Science, 20, 86-92.



## Distressing conditions lasting beyond the sixth month requiring several levels of prevention

- Counselling for partnership/relationship problems,
- Past problems and various kinds of trauma and support with grief work.
- Treatment for alcohol and/or drug abuse of oneself or a family member.
- Treatment for depression and other nonpsychotic disorders.
- More help and support with infant matters and parental role issues.
- More health care for postpartum physical morbidity such as pelvic pain and fatigue.
- Support with self-care, in particular for increasing strength and managing Activities of Daily Life.
- Support with overcoming social isolation.

Thome M. (2003). Severe postpartum distress in Icelandic mothers with difficult infants. A follow-up study on their health care. Scandinavian Journal of Caring Sciences;17;104-112



What are the rules for the promotion of perinatal mental health in nursing and midwifery?

- To promote awareness of **health professionals** about perinatal mental health as an **interdisciplinary subject** through education
- To acquire the **knowledge** necessary to provide appropriate services at all levels of prevention
- To establish innovative services and base **them on evidence** (research, theories, concepts)
- To promote **social awareness** of perinatal mental health

