

Dublin City South Cathair Bhaile Átha Cliath Theas

# Report on

**Dublin City South** 

# Infant Health and Well Being Event

11<sup>th</sup> October 2023

The Mansion House

**Dublin City South** 

# Supporting Infant Health and Wellbeing in the First 1000 days









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#### **Note of Appreciation**

Members of the Dublin City South CYPSC Infant Health and Wellbeing Working group, are grateful to all who contributed to this event for the valuable and meaningful contributions. We wish to thank the Lord Mayor of Dublin Dáithí de Róiste for facilitating us in the Mansion House and formally opening the event, and to Fergus Finlay who kindly agreed to chair the event, drawing on his extensive knowledge and experience.

## 1. Background

The event 'Supporting Infant Health and Well Being in the first 1000 days,' was held in the Mansion House on Wednesday 11th October 2023, was planned by the Infant Health and Wellbeing (IHWB) working group of the Dublin City South Children and Young Persons Services Committee (DCS CYPSC). The working group is comprised of representatives from statutory, community and voluntary services across the Dublin south city area, including Daughters of Charity Child & Family Services, Coombe Maternity Hospital, Early Learning Initiative/ABC, Ballyfermot Chapelizod Partnership/Family Matters ABC, School Street Family Resource Centre and Dublin South City Partnership, as well as staff working across areas and programmes of the HSE and Tusla, the Child and Family Agency.

#### 1.1 Agenda

The event was held in Dublin's Mansion House over a half-day, hosted by Dublin City Lord Mayor Daithí De Róiste, who also gave the opening address. Participants were able to visit a space featuring a range of information stands showcasing some of the supports and services available in the South City area. Keynote speeches were given by Dr Anne Marie Casey and Dr Joanna Fortune and the event provided a welcome opportunity for participants to engage in a round table discussion, from which rich feedback was gathered, before concluding with input from an invited panel of service and programme managers in the Dublin South City area.

#### 1.2 Aims and Objectives of the Event

The aim of the event was to represent and enrich current service delivery in the Dublin south city area for infants and their families in the first 1000 days, by providing a platform for knowledge and information exchange. The main objectives were:

- ⇒ To increase awareness of the importance of Infant Health and Wellbeing
- ⇒ To acknowledge the issues and challenges for organisations and service users
- ⇒ To highlight the innovative and symbiotic nature of work which is taking place
- ⇒ To make initiatives and innovations visible to a more diverse and wider audience
- ⇒ To promote further interagency connection and collaboration

It was hoped that the event would serve to facilitate meaningful conversations, about how to further integrate service planning and delivery across community statutory and voluntary organisations, which will enable the IHWB working group of the DCS CYPSC, to further explore the potential for such collaboration to inform future planning and development, in this critical area of child and family support.

#### 1.3 Attendees<sup>1</sup>

The event was open to service managers working across the Dublin south city area, from community, voluntary and statutory services. Members of the Infant Health and Well Being sub-group attended, along with representatives from HSE, including Area Managers; PHN and Midwifery; Health Promotion and Child Health; TUSLA Family Support, Prevention, Partnership and Family Support (PPFS) and the Area Based Childhood (ABC) programme, including the Early Learning Initiative (ELI) and Family Matters (Ballyfermot) programmes.

#### 2. Keynote Presentations

To open proceedings, chair of the IHWB working group Emma Reilly addressed the event. Emma outlined that the event marked the start of a journey, and a central objective was to orientate participants' thinking as to how and why the first 1000 days matter and to think about how each person in the room can influence and promote the integration of service planning and delivery across our community. Emma introduced Fergus Finlay as the Chair of

<sup>&</sup>lt;sup>1</sup> A full list of organisations represented by attendees, is included in Appendix One

proceedings. Fergus made some opening remarks reiterating the value of having a focus on infant health and wellbeing, before welcoming the guest speakers.

#### 2.1 Dr Anne Marie Casey

Dr Anne-Marie Casey is a Senior Clinical Psychologist in Paediatric Cardiology at Children's Health Ireland (CHI) at Crumlin, and Chair of the Psychological Society of Ireland's *Special Interest Group in Perinatal and Infant Mental Health* (SIGPIMH). Annemarie has a keen interest in the use of the Newborn Behavioural Observations (NBO) system with high-risk infants and employs compassion focussed therapy approaches in her clinical work. She lectures on attachment, Infant Mental Health and working in Paediatric Intensive Care Units (PICU), on the Doctorate in Clinical Psychology at Trinity College Dublin.

Anne-Marie spoke about why supporting Infant Mental Health is so important, particularly in the context of the neonatal intensive care unit (NICU). She shared the story of a particular family (with their consent) whose experience of coping with congenital heart disease emphasised the need to listen to parents, and let the baby speak through their behaviours and the value of continued community supports, in the journey from hospital to home. Her compelling presentation left the audience with a strong sense of empathy and an increased awareness of the role of the professional in connecting with the real experiences of parents. Anne-Marie also referred to recent research2 which focuses on the potential for parental smartphone use in the presence of infants and toddlers to encroach on the quality of parent child interactions and the social and emotional development of young children. Anne-Marie expressed her belief that a paradigm shift is required, in the policy and practice sphere, to join and empower families rather than "fix" the child, and that by collaborating effectively, professionals can co-produce better outcomes.

#### 2.2 Dr Joanna Fortune (MICP; MIFPP; Reg Pract APPI; Ap Sup PTIrl)

Dr Joanna Fortune is an accredited psychotherapist with a special interest in the role of play across the trajectory of people's lives. Joanna has over 20 years of clinical experience specialising in therapy for trauma recovery and repair of ruptured attachment. She is also an author and podcaster on parenting. Joanna discussed the role and importance of play for infants, as well as the necessity of play for adults, to be able to engage with children in their

own language, but also as an investment in our own mental health and self-care. Joanna invited participants to think about their playful side, by engaging everyone in a game. Joanna emphasised that the nature of play is relational, not transactional, and stressed the need for professionals to be curious about potential issues for babies and children. The central importance of nurturing infants was a key message, with Joanna describing simple techniques for positively engaging with babies, such as "toes to nose," a simple carer to baby activity that includes, touch, feel, sound, facial expression, and interaction to promote bonding, connection, and attachment.



Keynote Speaker Dr Anne-Marie Casey, presenting alongside IHWB working group

Chair, Emma Reilly



Keynote Speaker Dr Joanna Fortune, addressing a captive audience.

#### 3. Discussions

Participants were allocated to small groups at tables to create a good mix of representation within each group. Each table had a facilitator who asked attendees to address a number of questions:

- 1. Please introduce yourself and provide your name, job title and the organisation you work in (is it in Dublin City South). Name two things that work well in your day-to-day work, and two challenges.
- 2. Based on what you have heard this morning, what are the key messages that you think need to be shared more widely, and with whom?
- 3. What would you like to see prioritised by the Infant Health and wellbeing working group?

#### 3.1 Feedback

There was a palpable energy around the room as people introduced themselves, spoke enthusiastically about their roles and described the work of their organisations.

#### 3.1.1 Things that are working well

The groups identified that skilled staff bring creativity and enthusiasm to the work, which itself is rewarding. Some specific early parenting supports taking place across the area were referenced (such as the PEEP Programme and home visiting initiatives). Participants felt that the value for money which is provided by investment in early intervention is more widely appreciated. Time for networking (such as happened at the event) was seen as providing positive opportunities for information sharing, peer support, exchanging contact details and learning from others.

#### 3.1.2 Issues and Challenges

When the discussion moved into identifying the key challenges which may undermine day-today work in infant health and well-being, these related mainly to two categories of issues.

#### (i) Needs of Specific Groups

Challenges in engaging with pregnant homeless women, families with infants living without housing and families living in isolation, were identified. Difficulties in reaching "the cohort of families who need the support most" were described across groups, particularly within what were referred to as "stigmatised communities," where low breastfeeding rates continue to feature. Supporting clients to realise that accessing support is not a weakness was mentioned, as was the challenge of enabling access to all the services which are required by families. Not having enough people trained in baby massage, a lack of childcare places and a shortage of family support were raised as particular issues in this context.

#### (ii) Barriers to Effective Working

Remaining grounded and focused on prevention and early intervention (PEI) work, while dealing with funding constraints and limited budget allocations was raised within the small group discussions, as was the issue of work often being over-complicated, with limited time available to plan and review. Such issues were cited as undermining opportunities to maintain and nurture relationships across and between services, as well as within staff teams.

#### 3.2 Key Messages

#### 3.2.1 Creating Greater Public Awareness of Infant Health and Well Being

The need to destigmatise infant mental health in information about babies which is provided to parents, guardians and carers, came up in the feedback from several groups. Much of the discussion was concerned with the need to develop simpler messaging strategies, such as cartoon images and videos, to convey information on infant health and wellbeing, using simple language and 'Universal Design Learning' (UDL) principles, to support people with literacy, learning and language challenges, and utilising social media platforms, to reach a wider audience. Messages which people feel are the most important to communicate, include promoting the concept of "one good adult" or "good enough" parenting; emphasising the importance of getting "back to basics" with babies and "teaching parents to be silly;" highlighting the impact of phone usage on child development and wellbeing, for parents and

professionals, as well as the need to have an explicit focus on mothers' antenatal psychological and emotional wellbeing.

#### 3.2.2 Promoting Further Collaboration and Connection

Creating a wider space and greater opportunities through which to share learning and offer support to people in similar roles, came up in the feedback from all groups, with the need to exchange information on services that are available on an area-wide basis singled out as very important. Participants warmly welcomed being at the event itself, which was described as "excellent, with top quality presenters" and "very well organised". However, the core need that was suggested was addressing the need for "ongoing interagency interaction and policy development," to enable coproduction of initiatives and innovation and to help develop specific connections and links across the area, that will benefit families.

#### 3.3 Panel Contributions

Seven senior practitioners and managers from the Dublin South City area<sup>2</sup>, were invited to participate on a panel, as leaders who are in a position to promote the importance of the first 1000 days of children's lives. Each panel member was asked to contribute, which would respond to the question: Based on what you have seen and heard today what key things can you do to support and input on the work being done in the area and what do you want the Working Group to do to keep you informed?

The points made by the panel speakers were very similar to the themes from the small group discussion, panel members stressed the importance of having a space within which to connect and network with others, to learn about the range of work that is being done, so that parents can be more effectively signposted to further supports and the importance of committing to connecting further with individuals and groups, to enhance and sustain the strengths of the community and voluntary sector. Taking responsibility "to say hello again" to colleagues, to enable more integrated working, was also emphasised.

The reality that all parents want to do better for their children but need additional tools and resources, the need to promote breastfeeding and to address systemic health inequalities,

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<sup>&</sup>lt;sup>2</sup> List of panel contributors is provided in Appendix Two

and the importance of drawing on evidence-based sources of information, were all mentioned. Panel members also referred to the universal nature of Public Health Nursing, and the role of the PHN, which is not currently confined to infants and children, as is the practice elsewhere, where there is a Community Midwife role, which many believe should be the practice in Ireland.

The unique position of nurses and midwives to promote the importance of the first 1,000 days was described, and the role that they already play in educating mothers about alcohol, breastfeeding and other important topics was highlighted, although it is felt that there may be room for more modelling of playful interactions with babies, such as "toes to nose." The new National *Standards in Antenatal Education* were described. These are based on five overarching themes (one of which is birth) which will provide a guide for parents to antenatal education.

Positive opportunities for collaboration, which exist within the prevention and early intervention space were highlighted and the *Infant Mental Health Network* was cited as a good example of a collaborative approach, as well as the positive potential for rolling out home visiting on a wider scale. The need to increase public awareness of parenting support was emphasised in the context of normalising the process of accessing it. One speaker described the role of Infant Health and Well Being as "mission critical" particularly within 'disadvantaged' communities where the impact of drug use continues to be disproportionately negative. It is felt that there is "no wrong door" in accessing services that can support the whole family and having one good adult to provide a role model for children and young people remains an important principle.

What was described as the "interplay between socio economic disadvantage and health inequalities" was attributed as having the effect of increasing the negative impacts of poverty and drug use. Where there may not be an ABC Initiative within every community, the focus is often on signposting families to Family Resource Centres (FRC's), and community-based support services, and the emphasis should be on removing barriers to accessing services, as well as identifying and addressing any gaps.

#### 4. Conclusions

The nature and the quality of speakers and of the interaction and engagement between participants at the event, created a richness of conversation which represents a welcome endorsement of interagency collaboration and indicates a positive welcome for future actions and initiatives.

#### 4.1 Key Recommendations

- Support and create further awareness of the importance of the *First 1000 days* and Infant Health and Well Being, through messaging to parents and professionals.
- Co-create and collate resources for crisis situations and marginalised communities.
- Facilitate a central 'hub' (perhaps using an online platform) to share information.
- Hold more CPD events to provide professionals with opportunities for self-reflection, networking, learning and development.
- Examine key demographics, trends, health outcomes and interventions within the Dublin south city area.

### 4.2 Next Steps

Ideas and themes which have emerged from this event will be further considered by the IHWB working group of DSC CYPSC. The working group will identify, and agree priorities for the next twelve months, which will be shared among the participating organisations and additional stakeholders, as a first step, after which actions will be planned and undertaken. It was also suggested by participants at the event that "following up a year from now" would provide a valuable opportunity to review progress since the event.

## Quote of the Day

Little trains can go to big places...



# **Appendices**

Appendix One: List of Attendees

#### Representatives from -

- Anew
- Baby Massage Ireland
- Barnardos
- Cuidiú
- Daughters of Charity Child and Family Services
- Department of an Taoiseach (Child Poverty Unit)
- Dublin City Childcare Committee

- Dublin City Council Arts office
- Dublin City Council Library services
- Dun Laoghaire Rathdown County Childcare Committee
- ❖ Focus Ireland
- ❖ La Leche League of Ireland
- Local Development Partnerships
- Maternity Hospitals
- Young Parent Support Programme (formerly TPSP)

## Appendix Two: Panel Members

Dr Tracey A Monson, CEO of the Daughters of Charity Child and Family Services

Karen Heavy, Health Promotion and Improvement/Health and Wellbeing Manager for Dublin South, Kildare and West Wicklow

Neill Dunne RGN, RM, RCN, RPHN, RANP, MSc Nursing (advanced practice), Director of Public health Nursing

Amy Mulvihill, National General Manager of Prevention, Partnership and Family Support (PPFS)

Margaret Quigley, National Lead for Midwifery in the Office of the Nursing and Midwifery Services Director

Anne Fitzgerald, CEO of Ballyfermot Chapelizod Partnership

Úna Lowry, CEO Dublin South City Partnership

# Appendix Three: Services who Participated in the Showcase

- Daughters of Charity Child and Family Services- Cherry Orchard Family Centre.
- Ballyfermot Chapelizod Partnership Family Matters Area Based Childhood Programme ABC
- Dublin South City Partnership
- Barnardos
- Health and Wellbeing in Dublin South, Kildare and West Wicklow
- National Healthy Childhood Programme HSE
- National College of Ireland Early Learning Initiative ABC
- TUSLA Prevention, Partnership and Family Support (PPFS)

## Appendix Four: Factors to Consider in Collaborative Working

Insights From Maternity and Early Years Services for Local Leaders and National Policymakers

Based On Learning from Twenty Local Areas In England And Wales

Plan with the whole local resource in mind

Get the leadership right

Support communities to drive change

Get the most out of evidence-based interventions

Make multi-agency working work

Face the challenge of sharing personal data

Information for families: a right not a gift

Step up on measuring outcomes and experience

Build a research practice partnership.

Taken from "Leading and delivering early childhood services 10 insights from 20 places across England and Wales." Authors: Ben Lewing, Jean Gross and Donna Molloy, February 2022

Accessible at: <a href="https://www.eif.org.uk/report/leading-and-delivering-early-childhood-services-10-insights-from-20-places-across-england-and-wales">https://www.eif.org.uk/report/leading-and-delivering-early-childhood-services-10-insights-from-20-places-across-england-and-wales</a>