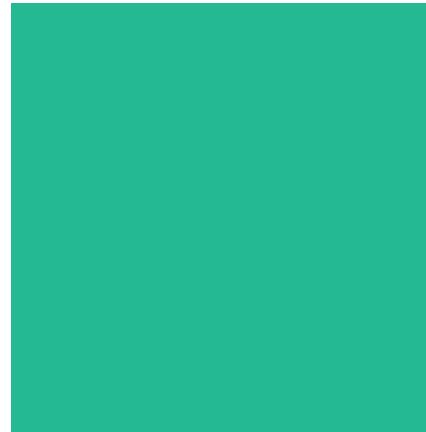
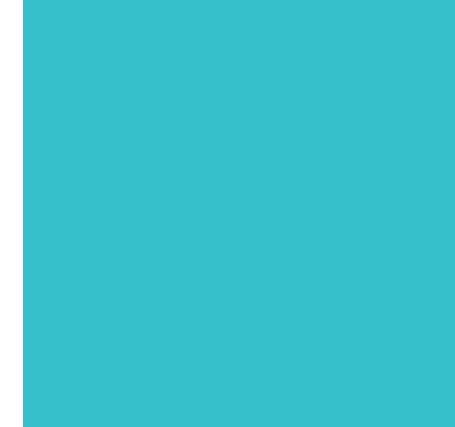
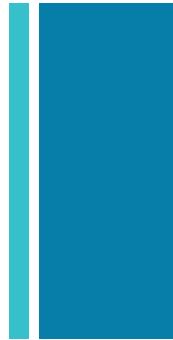


Pre- Work Group Debrief



Training in the Michigan Model of Infant Mental Health Home Visiting

Trainer's Intentions



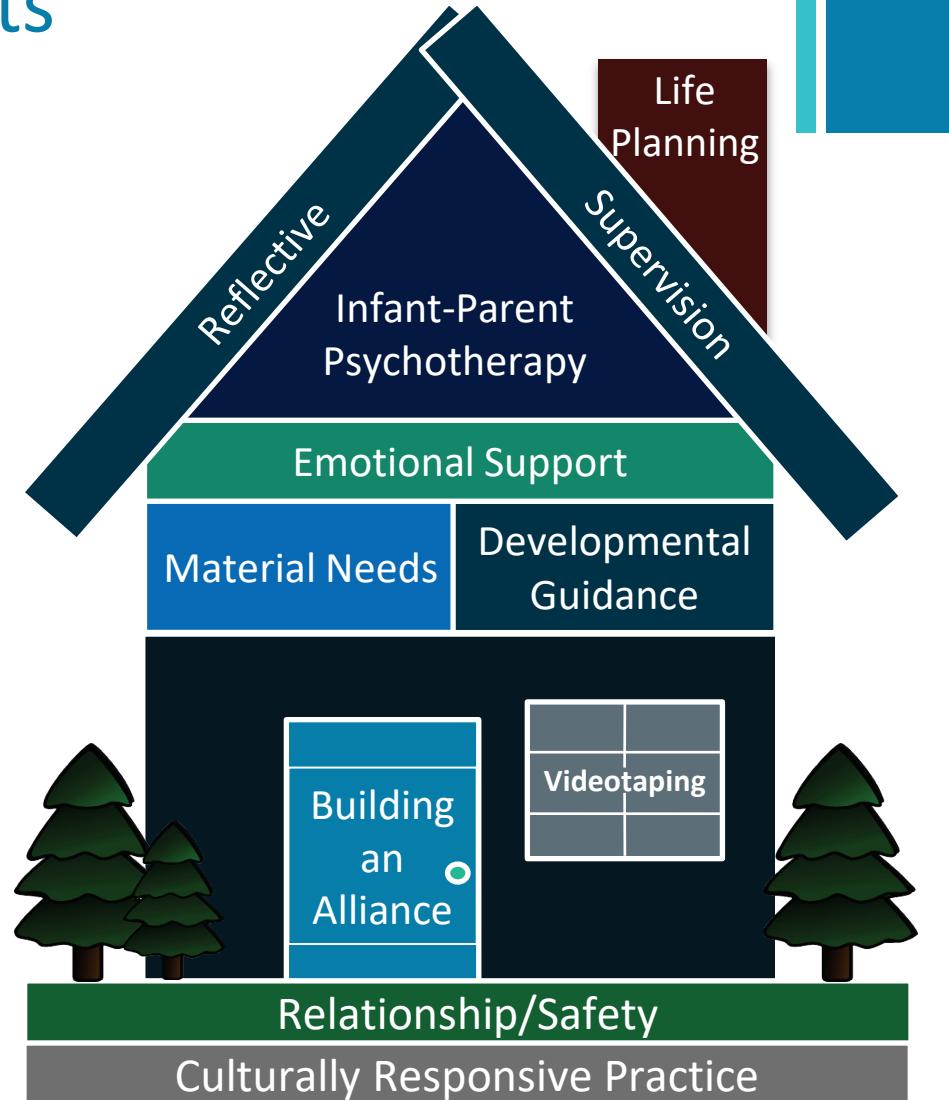
In this lecture we will:

- Review, reflect, and discuss the recorded lectures
- Emphasis on how we weave IPP through these components and opportunities to "practice" with case vignettes
- We may not 'practice' each one in this lecture but you have the slides in your handouts and can review/reflect on those that we don't get to on your own

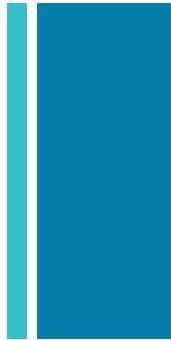
Treatment Fidelity Tool

The House: Treatment Components

- Our fidelity tool helps us keep track of which components we are delivering as part of IMH-HV
- It includes components and strategies



Introducing the IMH-HV Treatment Fidelity Form



- We want to introduce our IMH-HV fidelity too. You heard about this in the recording, and now you have a hard copy .
- As we review components and skills today, please reference this to see how it is described in the tool.
- This is organized around components of IMH-HV (the house) with potential strategies that follow
- You can check the box for those components you delivered, and if you want, indicate the strategy.
- It asks you to think about what was the most important strategy you delivered in that session (a subjective judgement call)
- Let's look at it together at a high level, we can look more closely as we go through each of the components one by one.

How do we use the Fidelity Tool?

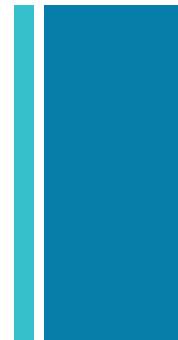
- You will NOT do all the things in all of the sessions (or even close!) -- nor will you necessarily weigh/do all of these things in the same way across clients
 - This is a needs-driven intervention. This tool helps us see both: what are doing,
 - and what we might be missing or overlooking in our work
- Many people say that this tool really helps with writing notes as it highlights the components delivered and strategies employed
- Reflecting back on the tool can reassure us that we "doing something" as it can sometimes be hard to see in the moment
- Can be reviewed in reflective supervision to think about unmet needs, or strategies that might be helpful to consider

IMH Components & Treatment Phases

Providing Material Needs

Let's review!

Reviewing Material Needs



- Review, reflect, discuss recording on material needs
- On the next slide are a series of vignettes. Discuss:
 - How you might approach these holding in mind the IPP goals of supporting relationships, including the therapeutic alliance with the parent and the parent-child relationship?
 - How can you approach this, holding in mind the call to: do for, do with, and stand by and admire?

Practice Incorporating IPP into Materials Needs

- L is pregnant and has minimal food to eat. She ignores her body so she can tolerate getting through the day hungry. She also ignores her baby moving or thinking about the baby at all.
- M has been couch-surfing with their baby for two months. They are at the whim of the person they are staying with so there is no set routine. The baby is often dirty and feeding is erratic. The baby cries a lot which is upsetting to M as they don't want to be kicked out.
- The power has been shut off in Q's apartment. The toddler resists diaper changes because it's so cold. Q loses their patience often during these times and become physically and verbally aggressive.

Example of Providing Material needs from the Fidelity Tool

2. Material Needs	
a. Helped family obtain material needs including food, housing, supplies, equipment, etc.	<input type="checkbox"/>
b. Encouraged parental problem solving	<input type="checkbox"/>
c. Coordinated with other service providers to meet material needs of family Specify type of provider(s): _____	<input type="checkbox"/>

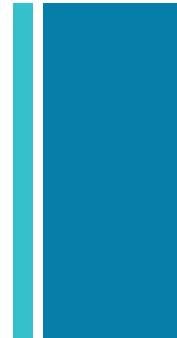
Providing Emotional Support

Let's review!

Things to Consider When Providing Emotional Support

- Is it ok for the person to tell professionals about their private business? What are the cultural norms around addressing trauma?
- What is the value of feelings and expressing those feelings in the person's culture?
- Has the caregiver experienced their views as valid and valuable in relation to their child?

Practice Incorporating IPP into Social Support



S is severely depressed. Their baby doesn't fuss much anymore. They don't notice the baby is hardly growing.

- Discuss:
 - How might you think about emotional support for the parent?
 - What other factors are you considering?
 - How can you balance attention to parent needs and baby needs?

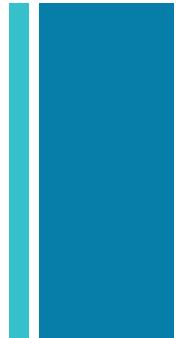
Example of Emotional Support from the Fidelity Tool

7. Emotional Support	
a. Supported parents/family in crisis or life transitions for family	<input type="checkbox"/>
b. Acknowledged strengths or validated/normalized challenges	<input type="checkbox"/>

Providing Developmental Guidance

Let's review!

Developmental Guidance

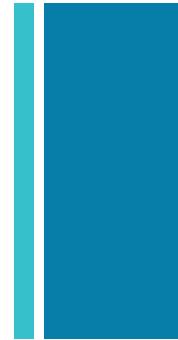


- Thoughts/reflections on the recorded lecture?
- What factors influence when and how you offer Developmental Guidance?

What are Your Values Around Babies?

- L is six months old. Her parents no longer give her a bottle and insist she drink out of a sippy cup.
- You take books for your client. The parents think reading to babies is nonsense and that they will learn in school.
- W is 10 weeks old and cared for by grandparents at night while the parent works. They insist on co-sleeping with him. You have seen the bedroom and notice lots of fluffy blankets and pillows on the bed.
- Each time Z touches something that's off limits his parents slap his hands hard enough that he cries.
- G has sensory issues and doesn't like the feel of most foods. The parents insist she eat the food she's given and must stay strapped in the chair until she does so. She usually cries the entire time she eats and often throws up.
- C is 30 months old. Recently a relative was shot and killed. The family members talk about it in detail in front of her. They state that terrible things happen all the time and kids need to understand that so there's no reason to shield them from the truth.

Practice Incorporating IPP into Developmental Guidance



M is developmentally delayed. At 18 months he is unable to crawl, sit up or hold a bottle by himself. His father has struggled to come to terms with the lifelong limitations that M will have. He tells you that he is thinking about picking up more hours at work so that he can put aside money for M's college fund. He wishes his parents would have done that for him and wants to make sure that M gets help in going to college so he can be whatever he wants to be. Maybe a doctor or lawyer or even the president.

Pair up. Discuss how you could incorporate IPP into this developmental guidance need.

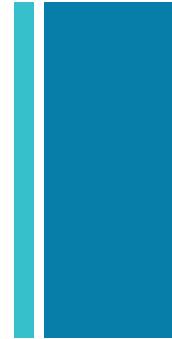
Example of Developmental Guidance from the Fidelity Tool

5. Developmental Guidance	
a. Interpreted child's behavior(s) and needs from a developmental perspective	<input type="checkbox"/>
b. Observed and/or discussed current and/or anticipated future stages of development with parent	<input type="checkbox"/>
c. Encouraged parent-child interaction and relationship development (e.g. promoting parent involvement, following child's lead, singing songs, finger play, peek-a-boo)	<input type="checkbox"/>
d. Encouraged play and language development	<input type="checkbox"/>

Developing Social Support

Let's review!

Practice Incorporating IPP into Social Support



You have been visiting with G and their 19-month-old baby for several months. G was placed in foster care as a teen and was moved from placement to placement and then aged out of the system. They have no family close by. You notice that G has a rotating group of “best friends.” The people often take advantage of G’s generosity. They stay in the home without helping financially and take the car and return it when it’s convenient for them. This often leaves G scrambling to get rides to work and appointments. They use G for childcare and do not babysit in return. G is alternately frustrated with the relationships that feel one-sided and proud that she can help and that others rely on her.

Pair up. Discuss how you could incorporate IPP into this social support need.

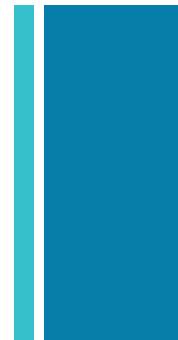
Example of Social Support from the Fidelity Tool

12. Social Supports	
a. Explored and/or encouraged the development of social supports for/with parent, including birth partner(s)	<input type="checkbox"/>
b. Connected the parent with community-based groups (e.g., Parent Café, church groups, etc.)	<input type="checkbox"/>

Life Course Planning

Let's review!

Practice Incorporating IPP into Life Course Planning



L has had two children. Her first child was premature and died within days of being born. The second child is in foster care. She has a dream of getting a good job and having her own home so she can provide a nice place to live for her child, but in the year you have worked with her, she has been reluctant to take any steps to accomplish those things. She has an on-again/off-again relationship with the father of her children. She is not on birth control and says she doesn't want another child until she's stable.

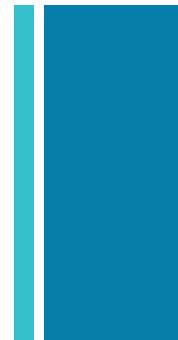
Pair up. Discuss how you could incorporate IPP into this life course planning need.

Example of Life Course Planning from the Fidelity Tool

11. Life Planning	
a. Discussed education, job training, employment	<input type="checkbox"/>
b. Discussed family planning and/or deferral of next birth	<input type="checkbox"/>
c. Discussed other community-based resources to support parent life course planning Specify focus: _____	<input type="checkbox"/>

Video Review

Video Review



Review, reflect and discuss the recorded lecture

- What stood out to you in the video review lecture?
- What are challenges or barriers you imagine, and how might you address these?
- How can you make this a meaningful 'window' into the IPP work?

Practice

- Jana is a 28yr old Afro-Caribbean identified mother who immigrated here with her family when she was 10 years old. Her baby is 6 months old. She expresses apprehension about doing the "video session" because she doesn't like to be on video. What are you curious about? How might you respond?
- Lily is a 22 year old white mother of a 2 year old boy. She is eager to video record, but when you watch with her, she is very self critical and also points out the ways her son is "bad." What are you curious about? How might you respond?
- Julia is involved in court-ordered psychotherapy. She is a white mother of a 6 month old child. She is worried the video will be "used against her". What are you curious about? How might you respond?



Any Questions?