IMH-HV Video Review How-To

Training in Infant Mental Health-Home Visiting as an Evidence-Based Practice

MICHIGAN MEDICINE
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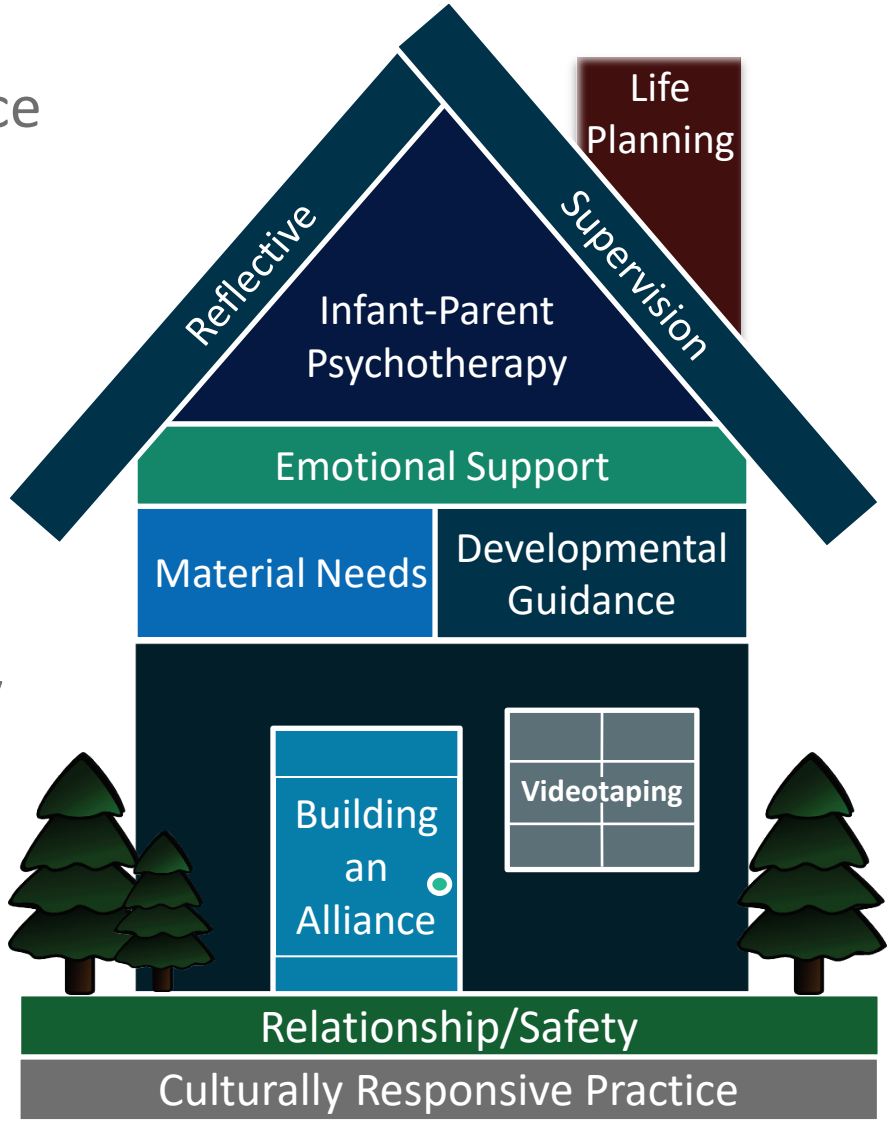
Intentions for this Module

Trainer's intentions:

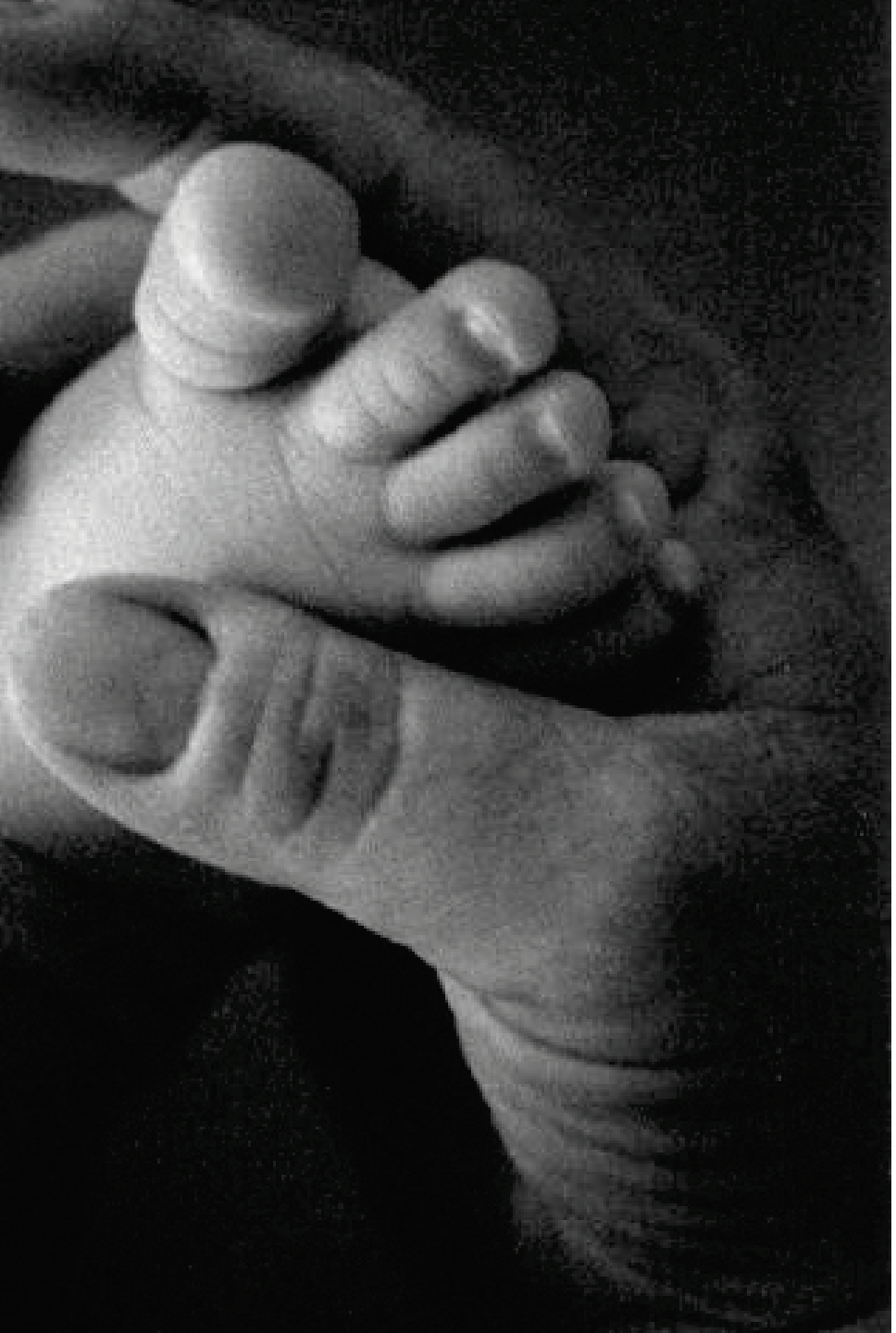
- To review the Video Review component of IMH-HV
- Discuss potential benefits of video review
- Explore cultural, ethical, and legal considerations in relation to use of video in IMH-HV
- Increase provider comfort with opportunities to practice
- Review tips on "how" to use video review, including introducing video recording, selecting clips, and reviewing with parents and caregivers

Infant Mental Health Home Visiting Components

- Culturally Responsive Practice
- Building an Alliance
- Material Needs
- Developmental Guidance
- Emotional Support
- Infant-Parent Psychotherapy
- Life Course Planning
- Reflective Supervision
- Videotaping



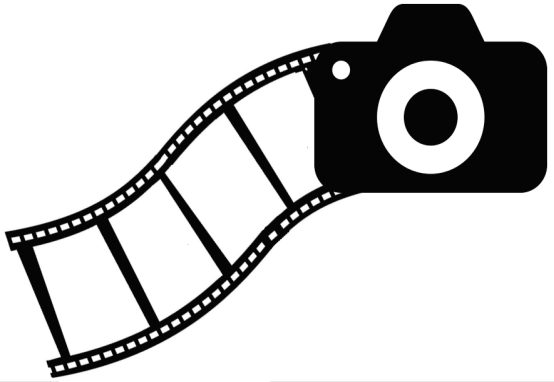
Any residual questions/thoughts/needs?



Practical Implementation of Video Review

Video Review with Families in IMH-HV

- Thoughts/reflections on the pre-recorded video about using video in IMH-HV?
- Today will be a brief review and practice.



Benefits for Baby

- Supports caregiver to really "see" the baby: caregivers are very busy, might not pause to watch baby and sit in their presence
- Caregivers might have an idea of the baby that is different than the “real baby”
- Delight in the little person and enjoy together with therapist
- Provides a record of baby's growth

Benefits for the Caregiver

- Recognizes the caregiver as the expert
- Allows caregiver to share own experiences and perspective with the provider
- Supports reinforcing caregiver, child, and relational strengths
- Promotes reflective functioning and perspective-taking

Supports the Therapeutic Relationship

- Can highlight reciprocity & mutual influence- “serve and return”
- Opens door to understanding and addressing challenges
- Can be used to engage multiple family members
- Allows clinician to see strengths in the relationship and can promote the building of strength in the relationship between clinician and parent

Many Models Use Video Review

- Significant evidence to support the power of video review – “seeing is believing”

- For example:
  - Interaction Guidance (Susan McDonough)
  - Video-feedback Intervention to Promote Positive Parenting (Alan Mendelsohn)
  - Circle of Security (Intensive Model)
  - IMH- HV (Rosenblum et al., 2019 IMHJ)
  - Early Relational Health Screening (Munson, et al.)

Others…

Hold in Mind the Potential Barriers

- Challenges can include family – and clinician– reticence (e.g., to be on video, initial discomfort observing self)
- Cultural considerations– cultural humility, the experience of videotaping, centering around equity and diversity-informed practice; who is allowed to be on camera
- Legal considerations -- protecting family from unintended use

Epistemic Trust

- Epistemic trust allows the recipient of the information to relax their natural, epistemic vigilance (protective and naturally occurring, as it is not in our interest to believe everything indiscriminately).
- This allows us to experience/accept that what we are being told matters to us. (Fonagy, P, et al., 2014)
- Epistemic distrust of families who have experienced systemic harm and oppression makes sense
- **Regarding video, how do we address issues of power, privilege and equity that create barriers to trust?**

Video Observation: Provider Strategy and Stance

- Goal of the providers' comments are:
  - to be curious, collaborative, and humble
  - to be open -- encourage and support parental observation and insights
  - to empower the caregiver to discover and own the knowledge

Provider Stance

- Video recording gives the clinician the chance to observe and appreciate the special strengths and characteristics of the caregiver and child
- Focus is to build on these strengths to promote relational health
- Empower caregivers by asking for their reflections and thoughts before giving any of our own thoughts and reflections
- Offer information / guidance with careful intention

Tips on “How” to Use Video Effectively

- Can be done in different settings (e.g., home, clinic, park, during daily routines)
- Face-to-face engagement can be particularly powerful
- You can suggest “making a movie together" to allow parents a chance to step back and observe their baby and their special relationship.
- Parents can then watch with the provider to learn more together about the baby and the parents' observations and perspectives.

Introducing Video Recording and Review to Families

- During the treatment planning phase introduce and explain why using video is typically an important part of IMH-HV
- For example: *“You are the most important person in your baby’s life, and you are also the expert on your baby. Making and watching movies of you and your baby together can help us learn more about your baby and your special relationship."*
- First few weeks may be focused on case management but plan to start using video soon after your treatment planning discussion

Observe this example: Video of a provider introducing the family to video recording

- Mother and a 7-month-old baby
  - What did you notice in this clip?
  - What might you do similarly or differently?