# Perinatal and intrapartum care for Aboriginal and Torres Strait Islander women:

### a culturally secure approach

Jayne Kotz Endorsed Nurse Practitioner Registered Midwife Child Health Nurse PhD candidate

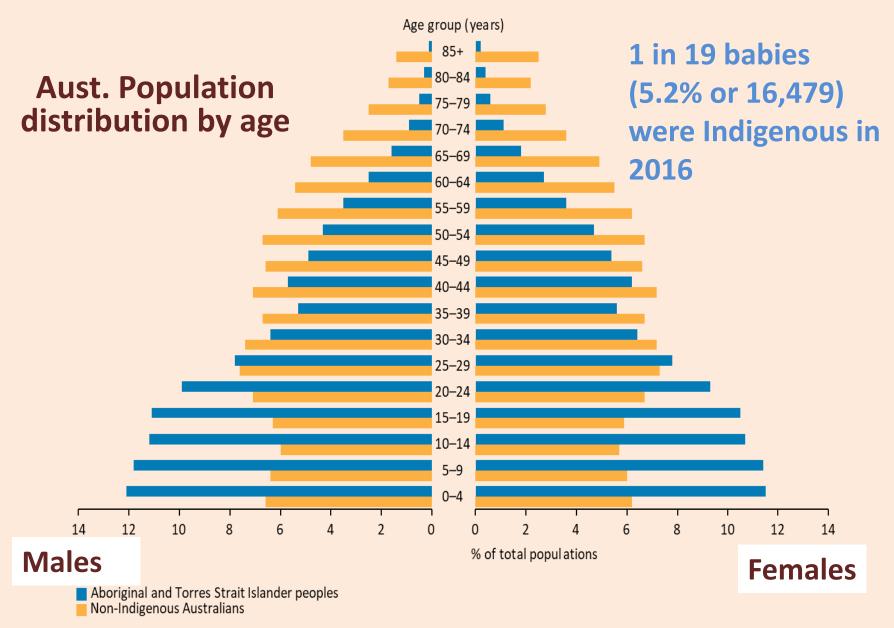


Valerie Ah Chee Binjareb woman Mother of 6 (Expert Consumer) Registered Midwife Artist Senior Project Officer

# Acknowledge traditional owners of Whadjuk Boodjar



## Reframing Our Focus



## Aboriginal & Torres Strait Islander babies

- 14% born preterm, v/s 8% of non-Aboriginal babies
   (AIHW, 2016)
- 2.6 times likely to be born with low birth weight (AIHW, 2016; 2019, Indigenous Healthinfonet)
- Mortality is 18.5 in 1000 births, v/s 14 in 1000 births(WA) (AHMAC, 2017)





## Aboriginal & Torres Strait Islander mothers

- -≥ 40% Aboriginal women smoke during pregnancy
- More likely to abstain from alcohol
- Those who do drink more likely to drink at risky levels
- Maternal mortality ratio is 4.6 times higher than non-Indigenous women (2019, Indigenous Healthinfonet)

## Aboriginal & Torres Strait Islander women

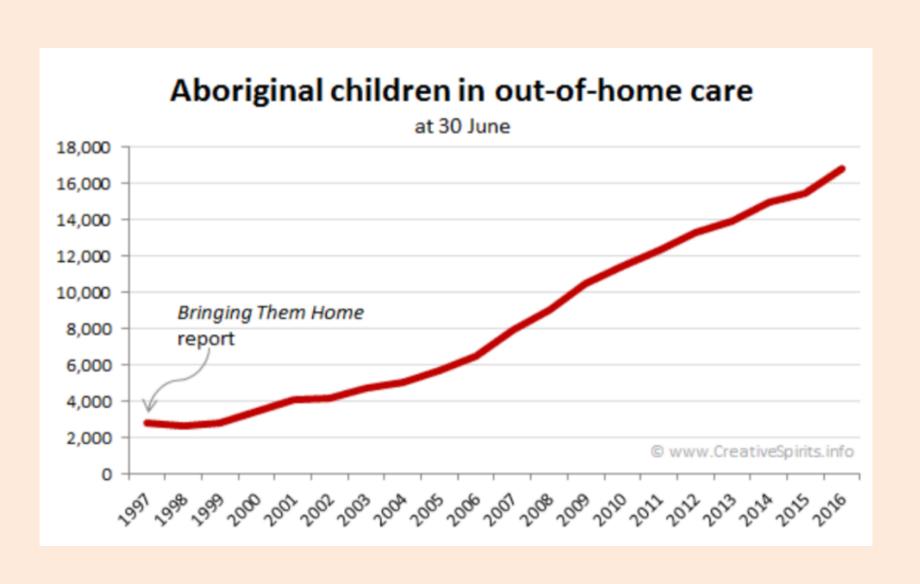
- -1/3 report high/very high psychological distress
- —Twice the rate of non-Aboriginal Australians
- Higher rates than their male counterparts
  - 36% compared 24%
- Rates are rising
  - Comparing 2007-2008 ABS data
- -Direct link between FDV and Dx of mental illness

### Maternal mental illness & infant outcomes Linked data 1990-2005

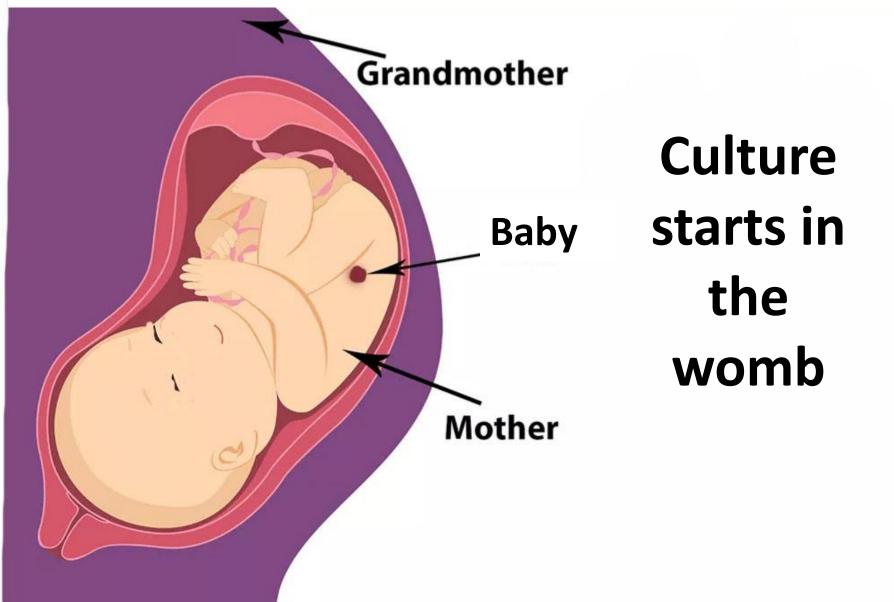
#### 404,022 live births

- Maternal mental health disorders 个 by 3.7% each year
- Aboriginal children born to mothers with a prior mental-health disorder \(\gamma x 2\) that for non-Aboriginal children
- Odds of mum having a mental health contact in 12 months before birth 个 by 4.7%
- Aboriginality linked x2 the risk of infant removal.
- Maternal substance-related contacts were a particularly high risk for Aboriginal infant

(O'Donnell et al, 2019)

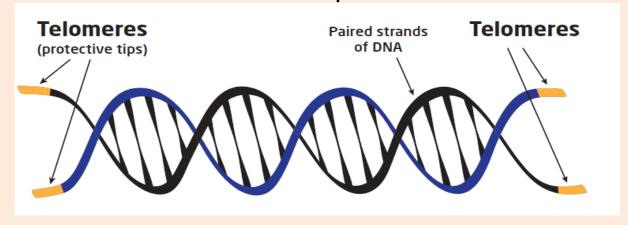


## Flow on epigenetic effects on foetal development



## Hypothalamus-pituitary-adrenal axis Epigenetics and Inflammation

- Two central mechanisms underlie biological embedding:
  - Epigenetics:
    - the 'genes listen and respond environment'
  - Synaptic pruning:
    - The 'brain listens and responds to the environment'



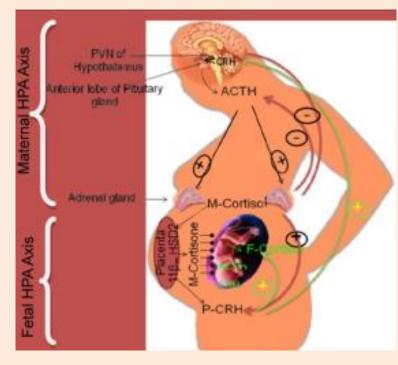
## Importance of *Antenatal* Wellbeing

### Sustained maternal distress is linked to infant:

- Low birth weight & preterm birth (Kramer, Lyndon, Seguin..et. al., 2009; Glynn, Schetter, Calvin, Hobel & Sandman, 2008; Thompson, 2014).
- Behavioural problems (Tagel et al., 2007)
- Learning difficulties (Bergman et al., 2010)
- Adolescent psychopathy

(Niarchou et al., 2015; Sandman et sal., 2012

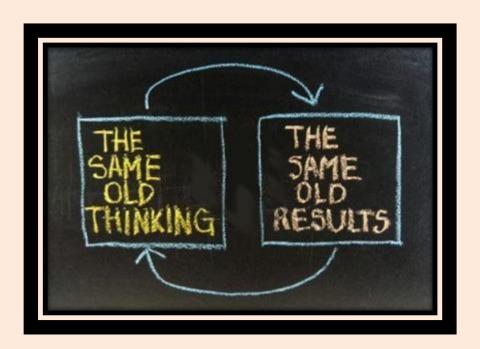
• Chronic diseases in later life (Harris & Seckl, 2011; Barua & Junaid, 2015)



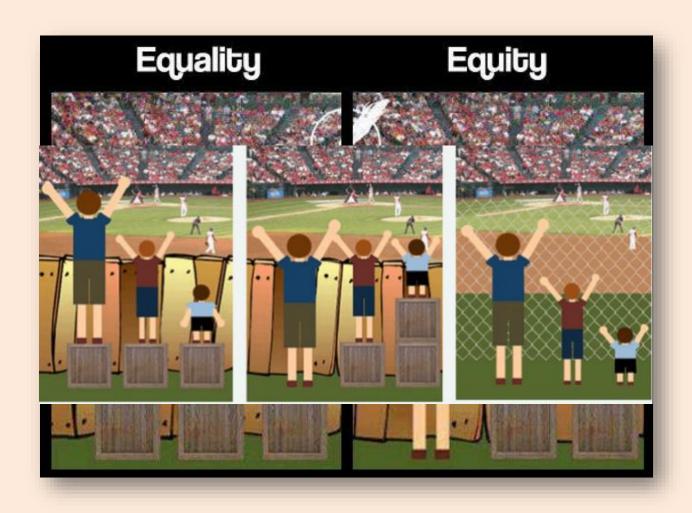
#### And so we screen ...and continue to screen

-"Insanity: doing the same thing over and over again and expecting different results."

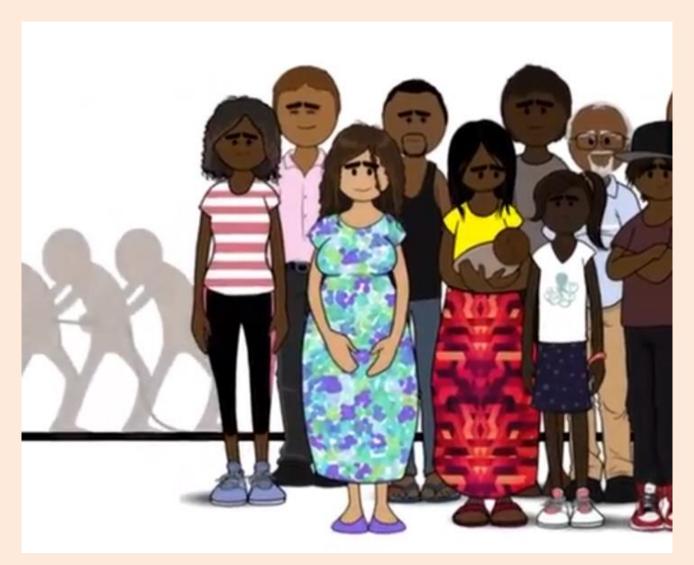
— Albert Einstein



## **Equality versus Equity**



## The Journey of Wellbeing





### Mental Health Screening

 Current reliance on tools performance with psychometrics



'Baby Coming-You Ready?'

a rubric for change



Focus is on Outcomes not Score



Baby Coming You Ready?



BCYR is a strength and relationship based wrap around approach to:

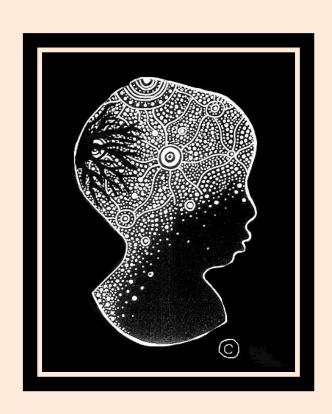
- Screening
- Assessment
- Intervention

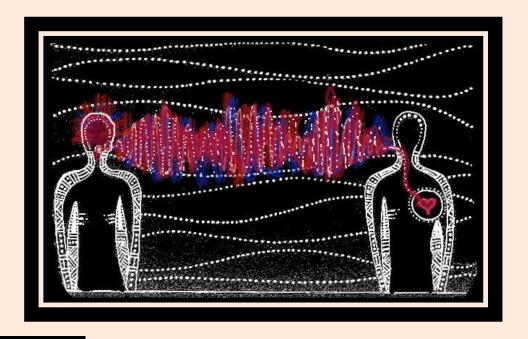
## 'Baby Coming You Ready?'

- The BCYR rubric & process is designed to minimise or overcome barriers to *effective* screening identified by:
  - Aboriginal & Torres Strait Islander communities:
    - Elders
    - Mothers
    - Fathers
    - Families
  - Clinicians
  - Organisations

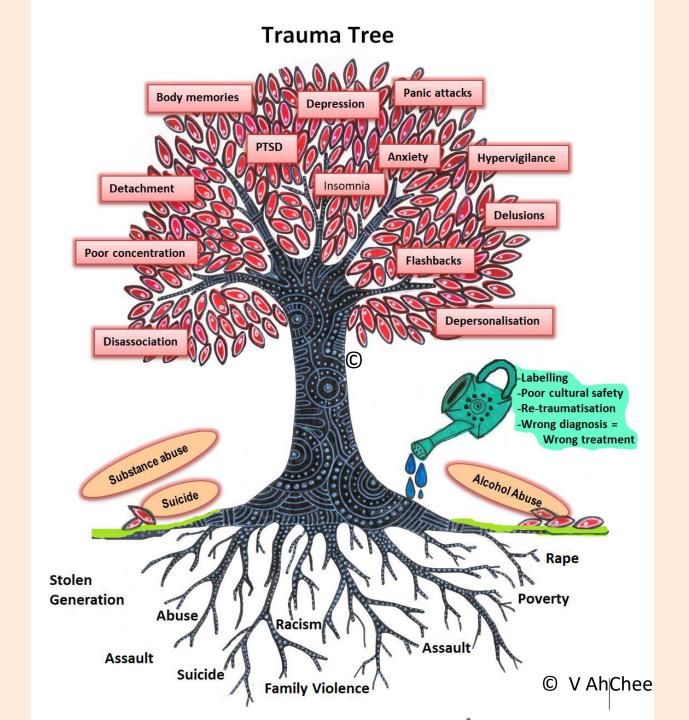


## Complex Trauma - Trauma informed care

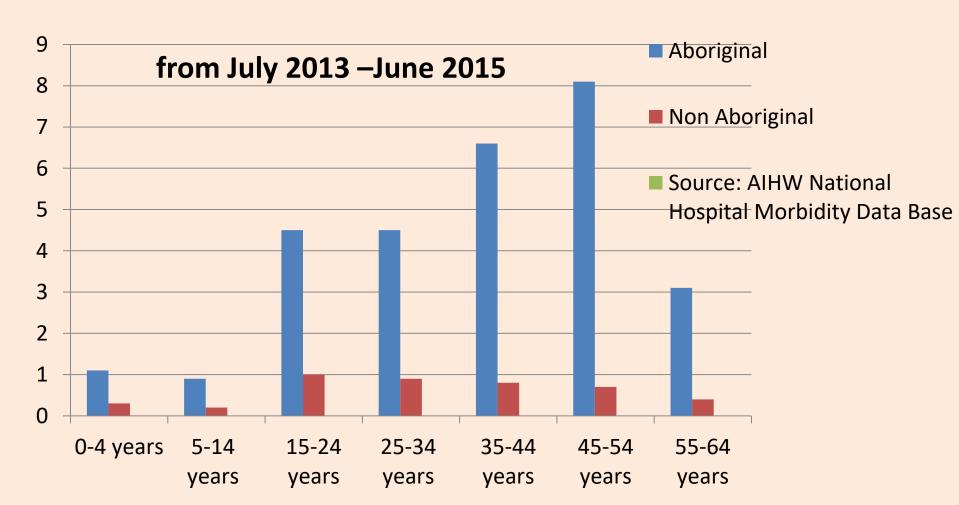




© V Ah Chee



## Proportion of hospital discharges against medical advice by Indigenous status



## Baby Coming- You Ready? emerged

- > Designed to:
  - Give control back to the Aboriginal parent-to-be
  - Overcome Barriers
  - Develop Engagement & Trust
  - Create Relevance to Antenatal Care & Service
- Engaging Validating Educational Enjoyable
- Touch Screen Technology & skip logic



## **Baby Coming You Ready?**

- Uses 'Yarning' to gather the story (assessment)
  - Culturally acceptable
  - Sound evidence-based methodological approach (Dawn Bessarab)
  - Uses naïve curiosity / innocent inquiry
- Visual prompters on iPads guide specified domains of inquiry
- > Aboriginal voice overs help guide yarn

Baby Coming You Ready?

## **Baby Coming You Ready?**

- Using Starts with 'easy' domains
  - Family Map Making
  - Supports & needs (physical / family / friends)
  - Relationships (Partner / Ex-Partner)
- Progresses to exposure to violence
  - Personal history of abuse
  - Current threat
  - Childhood trauma / abuse
- Identifies:
  - Strengths and resilience factors
  - Worries or Stressors
  - Accumulation of recognised 'Negative Life Events'



#### https://bcyr.conads.com.au/



Home

About Us

Mums

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Resources



A bold innovation designed to support the social and emotional wellbeing of Aboriginal and Torres Strait Islander parents-to-be and new parents.

#### Welcome to 'Baby Coming You Ready?'

'Baby Coming You Ready?' (BCYR) is a digitised web-based rubric. Touch screen images enhance the relationship between non-indigenous service providers and Aboriginal and Torres Strait Islander parents. It provides an engaging, culturally safe solution to the many barriers to effective screening and primary prevention that is currently available in the perinatal setting.

















#### Baby Coming You Ready?



#### √) Welcome Mum!





skip

Next →





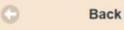
#### My Family

#### √ ) Family Connections!





skip



Next









#### My Family

#### (1) My family!



Families





skip



Back

Next









#### My Family

#### Who grew you up?



My Mother



My Aunties



My Siblings/Friends



My Father



My Grandparents



Foster Families



My Uncle/Brother



Mother



Grandmother



Grandfather



Uncle/Brother



Sister/Auntie



No-one Special



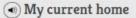












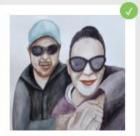




With my husband/ partner & our kids



With my partner/husband (baby's Dad)



With my partner (not baby's Dad)



With my partner



On my own with my kids



On my own with bub



On my own



With my partner's family



Living with my family



With my husband/ partner and HIS kids



Couch surfing



Refuge



No home



With lots of kids



Overcrowded



Friends



#### More about him



He works



He studies



He is away a lot



He is close to his family



My family get along with him



He is unemployed



Involved



Hands on



Spends lots of time with friends



Plays with kids



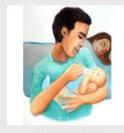
Not much involved



Couch potato



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Supports me and



me and

## Baby Coming You Ready?

Mum Prioritises Strengths



## **Baby Coming You Ready?**

Mum prioritises worries



#### Let's yarn about it



A lot



A lot



Often



Often



A little



A little



Rarely



Sometimes



Sometimes



Often

Often

Often



Often



Almost always



Almost always

## **Baby Coming You Ready?**

Mum prioritises worries







#### Goals

Vhat I can do to keep me, my family and baby strong.

Goal 1				
Step 1:				
Step 2:				
Step 3:				
Good things for me and my baby about this plan are:				
Other things I can do to that will help are:				
How much do you want these changes for you and baby?	A lot	A fair amount	A little bit	Not at all
How likely is it you will do these things?	A lot	A fair amount	A little bit	Not at all



#### Clinical Assessment Report

Completion Date: 11/10/19 Time: 10:48 AM Duration: 20 minutes

II II Presented for BCYR assessment

Client's Name:

لألأ

Date of Birth: 11/10/19

Partner's Name:

Baby's DOB/EDD: 11/10/19

#### Summary Report

Based on our conversation and the BCYR psychosocial and wellbeing assessment results, jj jj was identified as experiencing low level of stress/distress today.

jj jj is a regular of mine.

Her increased safety risk required the development of a SAFER Plan.

#### Safer Plan

jj jj has a safety risk and agrees that she would benefit from a SAFER plan.

#### Safety:

We discussed her commitment to keep safe as a result of her Gary will kit the kids.

To keep herself safe she has agreed to stay away when he is drinking.

She has nominated that her safe place to stay is nans.

To keep her kids safe jj jj will take them with me.

Strong support has been identified as Nans.

#### Appointment:

Time: 12:01 on: 11/10/2019 with: CASA

#### Engagement in plan:

She has demonstrated her engagement in this plan and stated that her motivation to stick to her safety plan is A lot.

And that the likelihood of her sticking to it is A lot.



#### Life Stressors

Three or more identified life stressors are associated with risk of high to very high levels of distress.

jj jj 's current experience of distress: using the K5+2 is reported as being: High (Score value: 24)

Her accumulative life stressors in recent months are:

- her own or someone else's use of alcohol

#### **Overall Plan**

After setting priorities for strengthening her family, jj jj has set her BCYR 'Growing Together' plan:

Goal 1:

Goal name:ss

Step 1: ss by 11/10/2019

Step 2: ss by 11/10/2019

Step 3: sss by 11/10/2019

Goal 2:

Goal name:aa

Step 1: aa by 11/10/2019

Step 2: aa by 11/10/2019

Step 3: aa by 11/10/2019

jj jj states her belief in her current capacity to achieve these goals as being : A lot.

She also states that her likelihood of achieving these goals are A lot.

Follow-up Review

A follow-up review has been set for 11/10/2019 - 01:00 at aa.

Current Wellbeing

jj jj says she manages well with day-to-day things, has some worries;

She is able to fall asleep and stay asleep naturally, overly worries;

Life Stressors

She says that over the past months she has been bothered by being homesick and being off Country, insecure access to food or money;

She is worried by someone else's use of alcohol or other drugs in particular.

Safety

jj jj says that previously her partner has been withdrawn and manipulative, controlling with money;

Currently she feels safe at home with her partner.

#### Follow-up Flags

Green Flags	Orange Flags	Red Flags	
Good relationship with mother	Overcrowded housing		
Supportive mother	Looks after lots of kids		
Supportive aunty/sister/cousin	Problematic relationship with family		
Partner helps with the baby/kids	Problematic relationship with		
Does not drink alcohol	friends		
Does not smoke cigarettes	Has no reliable supports		
Feels safe at home.	Is bothered by her own or someone else's use of alcohol		

#### **Clinical Opinion**

Throughout the assessment jj jj appeared generally: Relaxed, Resistant;

Her speech was: normal; ; clear;

Changes in her engagement/demeanour did not occur throughout the assessment.

jj jj has alcohol or drug concerns with qqq and appears to be at the contemplative stage of change.

Overall I felt able to easily engage jj jj in the BCYR assessment process and we were able to to develop good rapport.

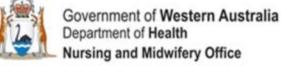
### **BCYR** Reporting

- BCYR shares the unique software built for iCOPE
- Data stored according to ISO standards
  - Password Protection and encryption SSL Certification
- Certified and signed off by the Australian Digital Health Agency
  - My Health Record friendly
  - Touch screen data & 'plan' automatically sent:
    - Parent's SMART phone if desired (password protected)
  - Touch screen data & 'plan' automatically:
    - converts to Assessment Report and Plan
    - Generated into client's or patient's file
    - Printout possible to file in paper based file.













## Thankyou for your time

