**Establishing a perinatal mental health service in a culturally and linguistically diverse community setting: not one size fits all**

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Perinatal Infant Mental Health (PIMH) teams have been established across New South Wales, Australia, as part of Ministry of Health initiatives. The teams have an over-arching brief to deliver specialist perinatal infant mental health services to women with severe and complex mental health problems but the articulation of service delivery depends on the demographics of the local service population. The Sydney Local Health District covers some of the most ethnically diverss populations in Sydney. This paper examines some of the lessons we have learnt in establishing a PIMH service that will appropriately meet the needs of the women and families in this context. We challenge the concept of “transcultural mental health” and attempt to articulate similarities as well as staggering differences between the group we traditionally think of as “CALD – culturally and linguistically diverse”. We consider factors such as places of origin, time of migration, role of trauma, displacement, loss of cross-generational guidance, knowledge and experience of parenting practices, expectations of migration, relationship with country of origin as they try to establish roots in their adopted country and the impacts of these factors upon parenting, attachment, infant development and engagement with services. We identify the complex factors including immigration status, and Medicare eligibility, mistrust of authority, cramped, shared or unsafe housing, lack of access to cars and transport impacting on their presentations and capacity to access health care. We explore challenges we have met in trialling the ‘usual’ approaches applied with CALD populations including use of health care interpreters and culturally specific parenting support groups. We discuss our lessons learnt in establishing and providing specialist perinatal interventions across cultural groups, how it has shaped our service delivery and describe our plans for further research to inform service development.