CHILDREN'S HEALTH SERVICES

Delivering the best care for our kids.

QUEENSLAND HEARING LOSS FAMILY SUPPORT SERVICE

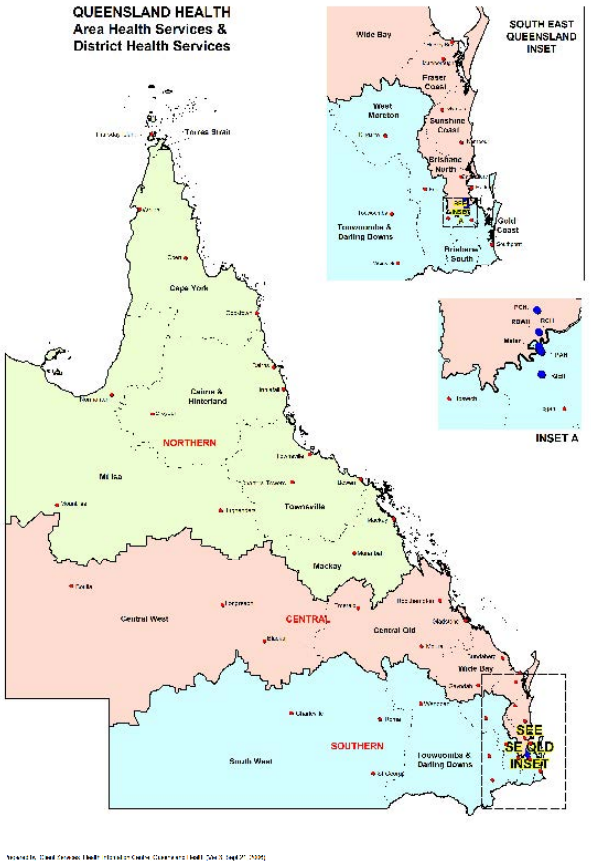
"Learning to listen to a baby who cannot hear" Infant Mental Health and Infant Hearing Loss

Presentation by Valerie Green B Soc Wk, MMH

Queensland Government

QUEENSLAND HEARING LOSS FAMILY SUPPORT SERVICE

- Established 2007
- Family-centred practice
- State-wide Service



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- Outreach
- Teleconference
- Videoconference

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The Team

Suzanne Harris (Team Leader, Social Worker)

Brisbane

- Valerie Green (Social Worker)
- Trish McLean (Psychologist)
- Melinda Thorpe (Social Worker)
- Michelle Wallace (Psychologist)
- Danny Haim (Office Manager)

Townsville

- Selma Kum Sing (Indigenous Community Development Worker)
- Jenny Savage (Social Worker)

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Family Centred Practice

§Recognise

§Acknowledge diversity

§Family strengths

§Family partnership

§Informed decision making

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What We Do?

§Facilitate access to Early Intervention and other community services.

§Provide post-diagnostic adjustment support, grief and loss counselling and therapeutic interventions

§Facilitate Informed Decision Making

§Link families with similar experiences to share concerns and support each other (Peer to peer support)

§Community development, training, representation on committees/forums, projects etc.

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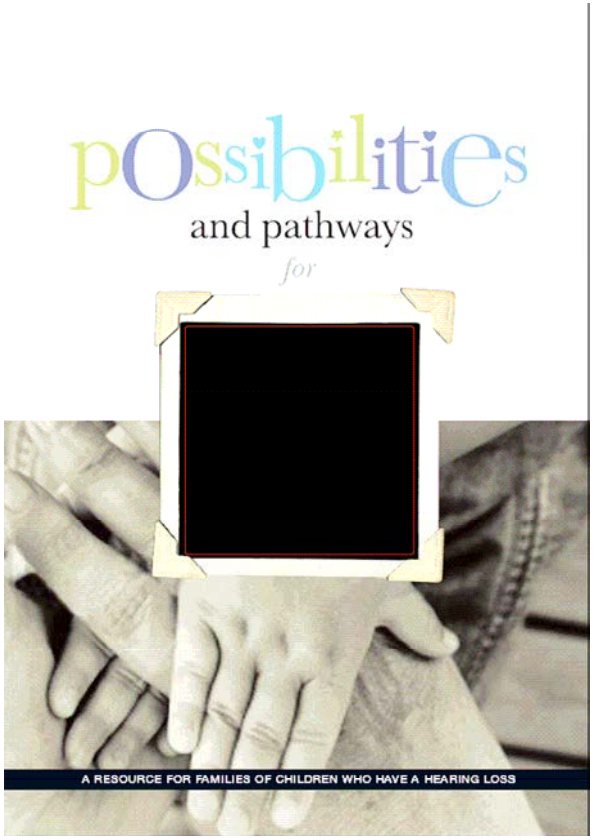
- Pathways following diagnosis
- Useful contacts and websites
- Information on the future



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Between You and Me, Communicating With Your Baby

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Clinical Pathways

§Double refer result – refer to QHLFSS

§Introductory letter

§Phone contact usually made post diagnosis

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Clinical Pathways

§Follow up with audiology

§Hearing loss confirmed- family becomes client of QHLFSS

§No hearing loss- family is discharged

§Support and information is provided as necessary until child's 6th birthday

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What do Infant Mental Health principles/frameworks add to this service?

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Secure base – parents out of their comfort zone

– seeking a guide to provide security for them

Need to establish this secure base in order for parents to be free to explore/understand the information they are being given about their child's hearing loss and its implications

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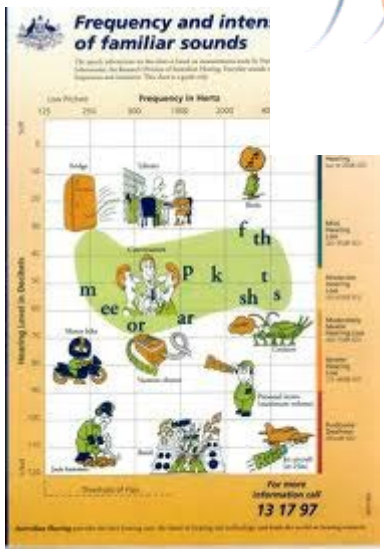
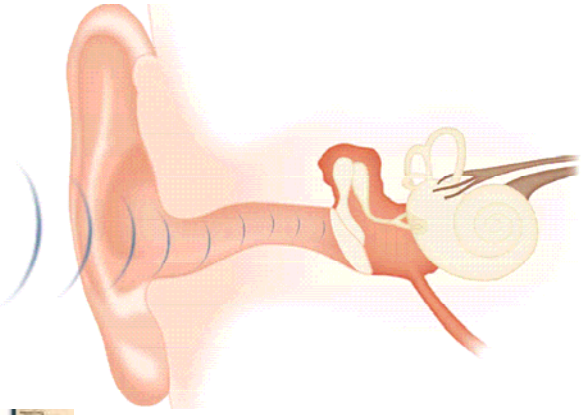
To provide a reflective space in the midst of the medical/ educational jungle…





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- **Increasing parental reflective function**
  Reflecting on parent's own experience of this journey, leading to reflecting on baby's experience.
- What would it be like to be a deaf baby?
- How is this child different from your other children?

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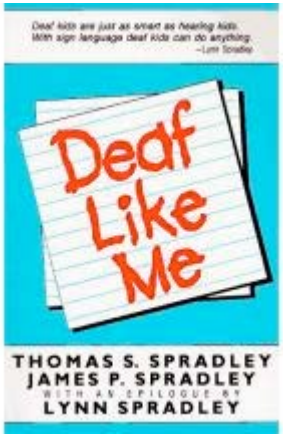
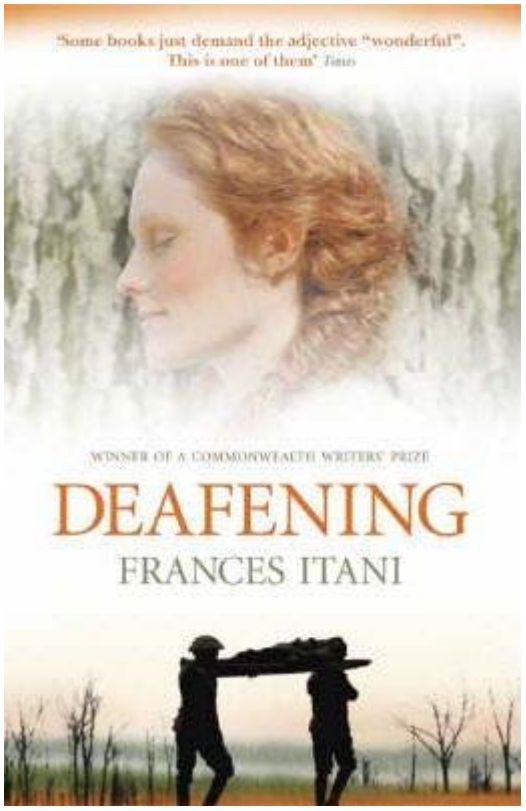
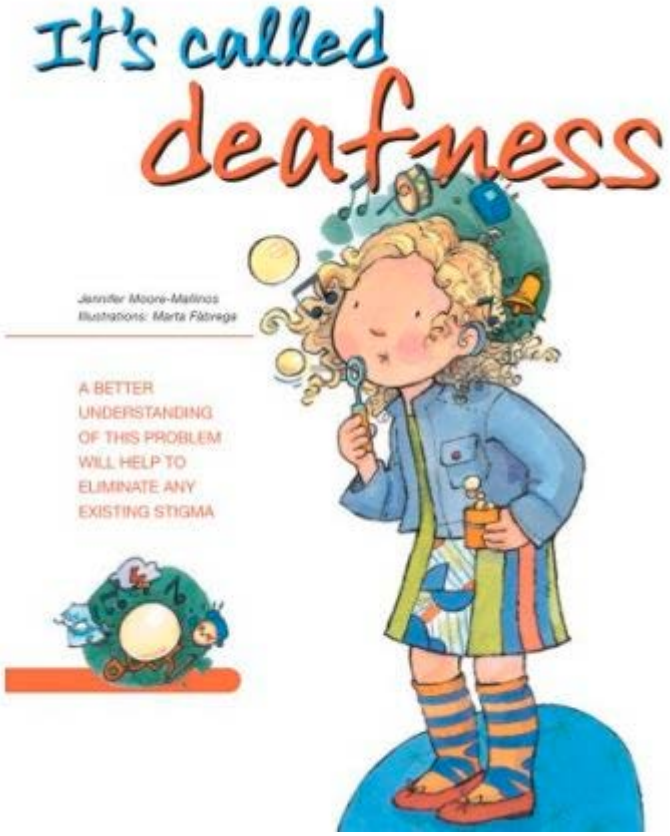
Story books – for adults; experiences of deafness

- for children







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“Parent to Parent” & “Life Stories” Programs

What is it like…

to grow up

as a deaf person?

to be the parent

of a deaf child?

Asking questions and

sharing others’

experiences

Deaf Children Australia

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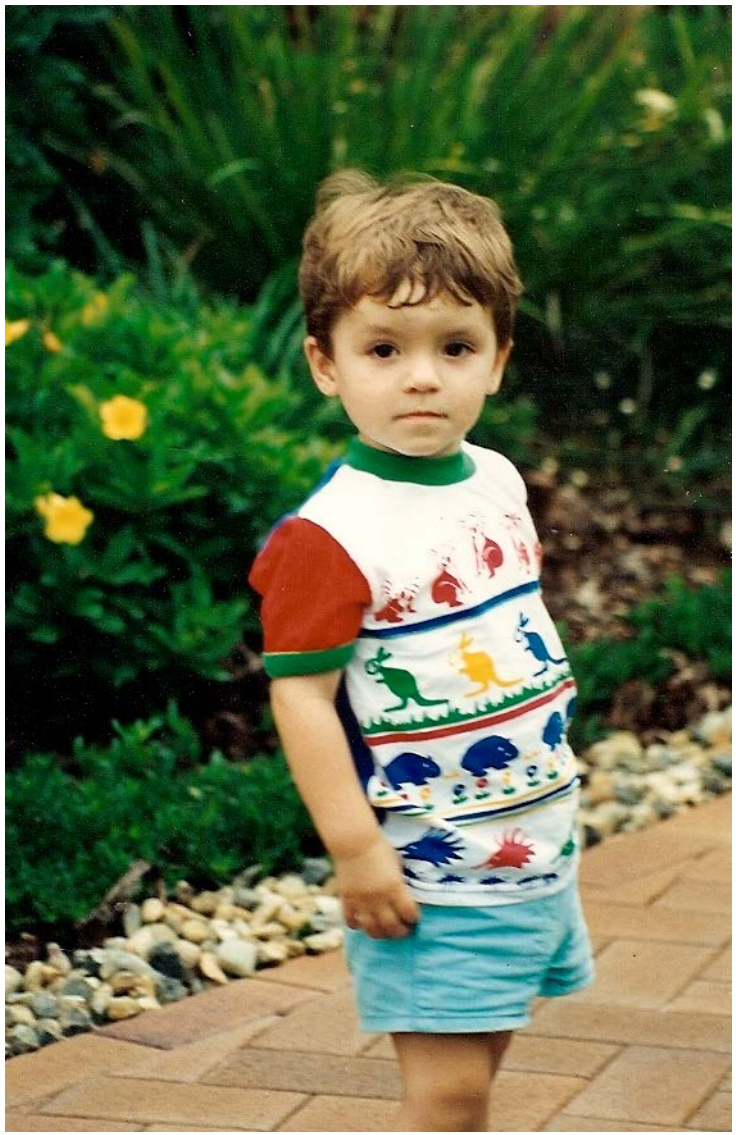
- Disability as a challenge to establishing secure attachment
- “not the baby we were expecting”
- Grief and loss/ blame
- Experiences and/or expectations of disability in family of origin



- Immaturity, other disabilities – sometimes need to look harder for responsiveness in baby.
- Some deaf babies very visually focussed and responsive, others not so much.
- Some also have vision problems – another layer of complexity in trying to engage emotionally with baby.

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Parental efficacy

Others seen as experts on baby – NICU, ENT Surgeon, Paediatrician, Audiologist, Speech Pathologist

Others ‘know best’ regarding - Cochlear implants

- signing/ not signing
- Child development

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- Our service (family centred practice) aims to ensure that parents are seen as experts on their baby/ family life –
- “whatever decision you make will ultimately be the best for your child.”
- Aim to empower parents by giving information and support in decision making.

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Questions?

Freecall 1800 352 075
3250 8609
QHLFSS-RCH@health.qld.gov.au