

## Keeping the Infant in Mind in a Mother-Baby Unit

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The benefits of admitting both mentally ill mothers and their infants to mother-baby units (MBUs) have typically been seen to be a positive experience for the dyad. This is thought to be due to the reduction in trauma experienced with separation, increased opportunities for bonding and a focus on addressing parenting behaviours in conjunction with the recovery of the mother. Thus far the literature has largely focused on the outcomes for the mother's psychiatric disorder with little focus given to the infant's experience and potential outcomes. The small body of literature does suggest that infants admitted to MBUs are more likely to have poorer outcomes in terms of physical well-being and development with emerging signs of disturbance in the parent-infant relationship. These factors are known risk factors for later developmental and psychological difficulties.

The impact of the MBU intervention for infants has not been described in great detail. Our unit is undertaking a prospective cohort study of infants admitted to our MBU with the objective of defining infant characteristics at admission and discharge by recording systematic paediatric and developmental assessment. These will include standardised measures such as the Parental Reflective Functioning Questionnaire, the Maternal Postnatal Attachment Scale, the Alarm-Distress baby Scale, and the Parent-Infant Relationship Global Assessment Scale. The infants will also be assessed according to the DC 0-5 Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood to fully characterise their current mental health status. This presentation will provide initial data regarding infant health and well-being in an MBU. We expect this data to contribute to tailoring the MBU intervention and post-discharge services to this group of vulnerable infants.