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How a HypnoBirth experienced and what is its effect on the months following birth? A grounded theory approach to understand maternal wellbeing

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Primary Objective: This research aims to explain the impact of HypnoBirthing on mother's self-efficacy in a labor and beyond, to understand whether the program may be of use in improving maternal well-being.

Design: The research uses a qualitative perspective with the use of semi-structured interviews.

Method: Initially six participants will be recruited through HypnoBirthing groups. The research will then employ theoretical sampling to recruit further participants, as consistent with the Grounded Theory approach employed for data analysis.

Implications: To the author's knowledge the subjective experience of women who engage with hypnosis for labor, specially using the HypnoBirthing method has not been reviewed at depth and requires further formal investigation to elucidate the anecdotal information available. It is vital that more is understood about the protective factors women can draw upon to prevent or mediate a traumatic birth experience. An understanding of this should lead to a better understanding how women at risk of Post-Partum Post Traumatic Stress might be facilitated in protecting themselves against psychological trauma. This should also serve to protect and promote the emotional availability of postnatal mother's to their children.

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Infant mental health: A debate

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Several factors have contributed to interest in the emotional and behavioral problems in infants. First, there have been advances in understanding models that highlight the need to integrate knowledge about infant functioning and psychopathology in the various contexts within which the child is developing. Second, contrary to the notion that problems in very young children are transient, a number of studies have highlighted that they may be precursors to mental health difficulties in later stages of infancy and beyond. Third, empirical studies have shown that the prevalence of mental health problems in two to five year-olds and school-age children is high, which suggests that it is important to be aware of problems prior to those ages to offer early intervention. Finally, a number of studies have emphasized the complexity of identifiable psychopathology in infancy but prevalence rates have been similar to those for older children, ranging from 6%-12%. Despite this increasing interest in and concern about infant psychopathology, it is debated whether infants' emotional and behavioral problems can and/or should be identified. The nature, form, and function of infant behavior and its interpretation are influenced by factors such as developmental level, age, cultural and family differences, expectations, and parental attributions. It has been argued that this period of development involves such rapid shifts that reliable identification or measurement of symptoms is difficult, if not impossible. Also, and perhaps the most crucial factor and one that differentiates the identification and measurement of infant mental health problems from that of older children, is the utmost relational dependence infants have to their caregivers and to the dynamics intrinsic to infant-parent relationships. It is important for service delivery and planning, as well to advance knowledge, to debate this crucial developmental topic.

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