

Preventing Intergenerational Disease Transmission Using Relationships in MCH

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Abstract: CDC and other researchers demonstrate that Adverse Childhood Experiences (ACE) significantly increase the risk of chronic disease in later life. The core mission of Maternal Child Health, preventing intergenerational transmission of ACE, is reflected in Public Health Standard 6 Prevention and Education. MCH programs that target ACE survivors during the developmental stage of new parenthood will be most effective when program design moves beyond education to recognize the therapeutic relationship as the primary intervention strategy. Adverse childhood experiences are embedded in complex systems of relationships and environments. The primary protective factor in building resiliency and preventing the transmission of ACE is the experience of being in a caring, committed relationship. PHN's are experts at working within and across complex systems of relationships and environments throughout the life span. In Washington State we have 10 years of success using the Nurse Family Partnership model with a high risk MCH population. The central defining element of NFP is the emphasis on the therapeutic relationship between the PHN and the mother. The success of this relationship leads to behavior changes in the mother resulting in improved physical and mental health outcomes; mitigating the negative impacts of ACE for both the mother and infant.

This presentation will focus on therapeutic relationships and program elements required to support therapeutic, transformative relationships.