I am one of three Directors of the Hopscotch Foundation. Over the past eight years, our Foundation has supported the Acorn program to encourage, establish, and scientifically evaluate Acorn's community-based activities. We now provide evidence that this multi-faceted program, with interventions designed to provide an opportunity for mothers with mental health difficulties to come together - once a week - and be supported in their relationship with their young child aged from birth to three years, provides significant and lasting benefits to this important and valued cohort in the broader community. This program enhances and stabilises the mother-infant bond, underpinning optimal developmental pathways in the vital first 1000 days.

The outcome of this work is detailed on our website [www.MeB4three.org.au], its scientific evaluation having just been published in the peer-reviewed journal *Frontiers in Global Women's Health*, 17 January 2023 [See PDF attached below ]. Other evidence, presented on our MeB4three.org.au website, lists documents, evidence, and economic verification for the proposed program to make significant contributions to the long-term benefit of a large [>450] cohort of mothers/babies.

We hypothesise that approximately 10 to 25% of mothers in the South Australian population would significantly benefit from improved depression scores and that these mothers together with their babies would also benefit from improved lifelong behavioural, educational and employment outcomes. We therefore strongly suggest that the identification of these mothers, and the provision of these therapies within the SA Heath Service, would significantly improve the health of these vulnerable mothers, children, and families. We, therefore, propose that it should be the State Government's responsibility to introduce the Acorn program into the community for its overall benefit to all. We contend that this program will significantly reduce costs in the public health, education and child protection areas. Whilst we are aware that early education is the primary focus of the Royal Commission, we underline the evidence that providing therapy to unwell mothers along with infant interventions is necessary to allow children to learn better by the age of 3 and that coordination of services between health AND education will provide more robust pathways.

We acknowledge this document is a late submission, however we would value and appreciate an opportunity to interact with this Royal Commission to discuss our proposals, evidence, and particularly, the relevant potential to impact young lives in vulnerable families within our overall community. We strongly hold an evidence-based belief that intervention at this early time in a child's development will significantly benefit children and mothers within these vulnerable families Australia-wide.



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EDITED BY
Caroline Gurvich,
Monash University, Australia

REVIEWED BY

Huynh-Nhu Le,

George Washington University, United States Nusrat Husain,

The University of Manchester, United Kingdom

\*CORRESPONDENC

Paul Aylward

⋈ paul aylward@torrens.edu.au;

Paul@actionrp.co

<sup>†</sup>These authors have contributed equally to this work

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Holistic community-based group parenting programs for mothers with maternal mental health issues help address a growing public health need for a diversity of vulnerable mothers, children and families: Findings from an action research study

Paul Aylward<sup>1,2\*†</sup> and Anne Sved Williams<sup>3,4†</sup>

<sup>1</sup>Action Research Partnerships, Adelaide, SA, Australia, <sup>2</sup>Torrens University Australia, Public Health, Equity and Human Flourishing, Adelaide, SA, Australia, <sup>3</sup>Department of Psychiatry, Women's and Children's Health Network, SA, Australia, <sup>4</sup>Faculty of Health and Medical Sciences, University of Adelaide, SA, Australia

Background: Maternal mental illness is a major growing global concern which can affect parenting with serious negative implications for offspring. Group-based parenting programs for mothers which both enhance the parent-child relationship and address mental health symptoms in a supportive social setting may optimise better outcomes for mothers and children. The Acorn program in South Australia draws on attachment theory to integrate dance play, reflective diary keeping and therapeutic letters in a holistic program for a diversity of vulnerable mothers and children aged 1–36 months. The program seeks to nurture and enhance parental wellbeing and the quality of the parent-child relationship for mothers experiencing identified mental health illnesses that impinge upon their parenting. This study presents the evaluation of the program and its effectiveness.

**Methods:** Action research approach for continuous monitoring and program improvement engaging Acorn program staff in evaluation data collection and interpretation of pre and post self-completion measures and standardized observations. Additional data was collected through a telephone interview of attending mothers 6–8 months after program completion to address sustainable impacts on parenting and wellbeing.

**Results:** The program engaged 353 diverse vulnerable mothers with their children. Many had profound overlapping mental health issues including borderline personality disorder (BPD) and depression. The quality of the parent-child interaction, parental confidence, competence and enjoyment were enhanced; mothers' wellbeing, ability to cope and lasting social supports were augmented. This occurred for a number of "most vulnerable" subgroups including single mothers, mothers with BPD, mothers from non-English speaking households and those with lower levels of education or household income. Mothers reported sustained improvements in their wellbeing, parenting, social and family lives, and feeling closer to their child as a result of participating in the program.

**OFFICIAL: Sensitive**