



MHYF Vic Newsletter No. 79 May 2022

This edition

Winston Rickards Memorial Oration

MHYFVic Annual General Meeting

Reducing childhood mental disorders

wordSmyth

Our Website

WINSTON RICKARDS ORATION

The 2020 Winston Rickards Memorial Oration which was deferred from its originally planned date because of the Covid-19 pandemic, was re-scheduled for April in 2021 but, sadly, had to be postponed yet again. We acknowledge that the Royal Children's Hospital restrictions on visitors could not be relaxed to allow the necessary audience.

Unfortunately, the hospital was still in the same situation this year, so we decided to hold the postponed Oration in the Ian Potter auditorium of the University of Melbourne Brain Centre in the Kenneth Meyer building, on Wednesday 16th March 2022.

The event is to honour the lifetime of dedicated service to child mental health by our founding President, Winston Rickards. We would prefer it to be a free event but were faced with major venue costs that we can ill afford. We therefore requested attendees to register on TryBooking with a fee of \$15 to help us recover costs. I am glad to report that the venue costs were covered and the surplus

of about \$100 went on incidental expenses, so we are most grateful for the member support.

The event was broadcast worldwide on Zoom. Anyone now wishing to review the oration can watch it on U-Tube through a link on the Orations page of MHYFVic website.

“The Elephant leaves the Room”

Professor Frank Oberklaid's Oration was a masterly account of how the past era of unawareness of the serious stresses on the mental health and wellbeing of young children is being overcome. The ongoing challenge is to develop a system to deal with those stresses.

Professor Oberklaid has spent most of his career in the University of Melbourne Department of Community Child Health, based at the Royal Children's Hospital and in close collaboration with the Murdoch Children's Research Institute. Increasingly, his work came to focus on the importance of child mental health for our nation's progress. His oration highlighted the significance of research in the field and public advocacy for solutions.

MHYFVic ANNUAL GENERAL MEETING

The MHYFVic Annual General Meeting was not able to be held as planned at Bleak House Hotel, but was held as an on-line Zoom meeting.

Sadly, Harry Gelber's after-dinner talk, **“Hearing the Voice of Children: reflections**

from a child engagement project conducted at the Royal Children’s Hospital” had to be deferred. We are planning to hold this at our 2022 Annual General Meeting.

This will be held on Wednesday 24th August. Details of venue and Notices will be given in a future newsletter.

News from Emerging Minds.

Newsletter 31 March 2022

Working with children to prevent self-blame after disclosures of child sexual abuse

When children endure traumatic events, without the language to give meaning to their experiences, overwhelming narratives of self-blame and shame can develop – particularly when the perpetrator was known and trusted. These stories, when left unchallenged, can dominate the narratives of children throughout their lives.

As a generalist practitioner, you have a significant role to play in early intervention responses for children who have experienced child sexual abuse. By developing the confidence and skills to respond to disclosures when they occur, you can contribute to building supportive environments where children will be believed, will receive a supportive and positive response, and will be more likely to recover from the adverse mental health impacts that can affect victims of abuse across a lifetime.

A new practice paper is available from Emerging Minds – see their website.

New Aboriginal and Torres Strait Islander lived experience advocates fact sheets

Collaborating with people who have lived experience of service provision is vital. It has been essential for our organisation to develop authentic partnerships with child and family partners, in ways that allow them to share their unique stories and contribute to the work that we do. Co-designed with Aboriginal Lived Experience Advocates Rosetta Milera, Neva Wilson and Josie-Anne Wilson, we have developed three fact sheets about what it is like, what to expect and the key considerations for engaging and working with Aboriginal and Torres Strait Islander lived experience advocates.

- [Working with Emerging Minds as an Aboriginal and Torres Strait Islander lived experience advocate](#)
- [Talking points for work with Aboriginal and Torres Strait Islander lived experience advocates](#)
- [Key considerations when working with Aboriginal and Torres Strait Islander lived experience advocates](#)

The Fact Sheets can be viewed on the EM website

Emerging Minds is researching child emotional regulation – and we'd love your help!

Emerging Minds is starting some exciting new work in child emotion regulation. If you are a preschool teacher, or a health professional that regularly assesses children’s emotional regulation, we would love you to be involved. The team plans to run two studies: one study will explore emotion regulation in a preschool context, while the other will seek to understand how health professionals use emotion regulation measures. You can register your interest in taking part by completing a form on their website.

wordSmyth: opening up

Jo Grimwade

What makes a person want to open up to a counsellor? A person presents, usually, with the intention of opening up, but will not always feel that safe enough to do so. This may be something to do with the client's embarrassment or the peculiarities of certain events, but it can also be about the counsellor. The paper describes the attitudes of the counsellor that enable the client to feel that opening up is worthwhile. The enabling sensibilities of the counsellor are discussed as competence, confidence, compassion, collegiality, and collaboration.

Sensibility

Sensibilities are attitudinal and are conveyed by staff manner and the ethos of the setting. The emphasis is upon an availability to subtleties external to the person or to be observed in another, in a way that does not convey aggression, disenfranchisement, or judgement. Values and beliefs are involved, but there is a presentation of the counsellor to the potential client that confirms or deters. Fear of judgement is a major concern and is part of each of the sensibilities.

Each of the sensibilities is discussed in terms of etymology and dictionary meaning (www.etymonline.com). The purpose of this enquiry into meaning is to have counsellors understand more deeply what is needed and to live the sensibilities, such that opening up can be achieved with little effort.

(First use, from late 14th century, "capability of being perceived by the senses; ability to sense or perceive", from Old French *sensibilite*, from Late Latin *sensibilitatem* (nominative *sensibilitas*), from *sensibilis*, meaning "perceptible by the senses", a meaning that eventually evolved into "having good sense, reasonable". From Latin *sensus*, "faculty of feeling, thought,

meaning", from *sentire*, "feel". From late Middle English (as a noun in the sense of "meaning"), this very much a cognitive, rational usage, whereas the senses (sight, hearing, touch, taste, and smell) are pre-cognitive and presumably instinctive.

The second part of the word dates from the mid-16th century, *-abilitas*, meaning an ability, and word-forming elements expressing ability, fitness, or capacity, from Latin *-abilitas*, forming nouns from adjectives ending in *-abilis*. From Latin *habilitas*, from *habilis*, "able".

Therapy

This word has Ancient Greek origin, meaning "to attend to" or "being with", rather than treatment or curing. The Ancient Greek doctor did have certain medicinal herbs and did perform operations involving broken bones and relief of infection, but the capacity most available to the patient was the capacity of the doctor to be with the patient in their suffering.

Therapy involves the ability to respond with care to the pain of the patient without judgement or deception. The actions of the doctor need to be competent, confident, compassionate, collegiate, and collaborative. (First use, 1846; "medical treatment of disease", from Modern Latin *therapia*, from Ancient Greek *therapeuein*, "to cure, treat medically", literally "attend, do service, take care of").

Competence

Many would be concerned to be competitive in client transactions, but the Latin origins of competence are the same. With all these words, the prefix of "com", "con", or "co" means "with". The Latin root *-pet-* means to seek. Competence is "seeking with or

alongside”, but also involves a seeking that is guided by knowledge and skill. It is important that a treating doctor is recognized to have qualifications and experience by peers and patients. Qualifications engender confidence and collegiality.

(First use, 1590s; "sufficiency to satisfy the wants of life", from Latin *competentia*, "meeting together, agreement, symmetry", from *competens*, present participle of *competere*. Meaning "sufficiency of qualification" is recorded from 1797. The word changed in meaning over the life of Latin: Late Latin *competere* "to seek together", from Latin, "to come together, agree, be suitable", from *com-* + *petere* "to go to, seek").

Confidence

Confidence is often taken to be an attitude or presentation that is interpreted by others, based on observed behaviour. But the etymology shows a deeper meaning in two ways: with faith as the Latin root, the confident person is believing in what they do, what they know, and how others perceive them. Secondly, the keeping of faith means the guaranteeing of privacy where privacy is necessary.

(First use, from mid-15th century: "reliance on one's own powers, resources, or circumstances, self-assurance". Meaning "certainty of a proposition or assertion, sureness with regard to a fact" is from 1550s. Meaning "a secret, a private communication" is from 1590s. The Latin root is *fides* is most directly translated as "faith" and carries the implications of "trust, confidence, reliance, credence, belief").

Compassion

The Latin root for the word compassion is *pati*, which means "to suffer", and the prefix *com-* means "with". Many trainees and young practitioners talk about the need for passionate engagement with work in the mental health field. I am extremely wary of people say, "it is my passion". I am wary as they probably do not know that passion is about suffering rather than joy. Secondly, I do not think having suffered certain calamities entitles someone to special knowledge of suffering; one needs to listen to the particular suffering of the particular client. Yet, one needs to feel for and with the particular suffering.

(First use, mid-14th century, *compassioun*, literally "a suffering for another", from Old French, *compassion*, "sympathy, pity" from Late Latin, *compassionem* (nominative *compassion*) "sympathy", from past participle stem *compati*, "to feel pity"; *-pati* "to suffer". Latin *compassio* is an ecclesiastical loan-translation from Ancient Greek *sympatheia*, "feeling with". Sometimes in Middle English compassion meant a literal sharing of affliction or suffering with another).

Collegiality

One chooses one's company as much as one's company might choose a person as like-minded and invite the person to join a community of interest. The community is a college and participants are colleagues. Collegiality is an openness to others and respectful of the contribution of all other members of the formal or informal college. Teamwork in the mental health field is vital, even if it has become less popular.

(First use, mid-14th century., "pertaining to a college", from Latin *collegialis*, from *collegium* "community, society, guild", literally "association of *collegae*", plural of *collega* "partner in office", from assimilated form of *com* "with, together" + *leg-*, stem of *legare* "to choose", from Latin root *leg-* "to collect, gather").

Collaboration

It is one thing to work with, and alongside, one's colleagues, but it is another to extend such shared endeavour to one's consumers. Treatment as the administration of curative procedures to grateful patients (who must wait in their suffering), carries an assumption that is unsustainable in mental health work based in communication and discourse. To return to the original meaning of therapy: attending to or being with. But collaboration and compassion are not instinctive in systems that train experts.

(First use, 1830, "act of working together, united labor" (especially in literature or scientific study), from French *collaboration*, noun of action from past-participle stem of Latin *collaborare* "work with", from assimilated form of *com* "with" + *laborare* "to work").

Conclusion

Think about the words one uses to describe one's work. Think about the words consumers use to describe their plight. Rely on the ancientness of language to guide thoughtful response to words spoken in the present. Be prepared to help the consumer open up.

Reference

www.etymonline.com

OUR UPDATED WEBSITE

After much thought our website has been significantly revised to give casual visitors immediate information about what we do and what we stand for, whilst at the same time allowing members to go straight to specific sections such as Projects or Newsletters or Events, without having to navigate past reams of information.

Now that the main revision has been implemented we are working on tasks of development of Projects to give us the evidence base for our advocacy. There are quite a few items under development at the present time which are not yet reflected in the website but over the next few months we expect to see a burgeoning of activity.

Visit us on mhyfvic.org

2022 MHYF Vic Committee

- * President : Jo Grimwade
- * Vice-President : Jenny Luntz
- * Past President: Allan Mawdsley
- * Secretary : Cecelia Winkelman
- * Treasurer/Memberships: Kaye Geoghegan
- * Projects Coordinator, Allan Mawdsley
- * WebMaster, Linda Purcell
- * Newsletter Editor, Allan Mawdsley
- * Youth Consumer Representative, vacant
- * Members without portfolio: Suzie Dean, Miriam Tisher, Celia Godfrey.