

# Mother Nature

Strengthening professional capacity to support mothers in personal transformation

## **Target needs' assessment and analysis Report January – March 2017**

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# Target needs analyses Part 1

## Primary target group:

### Professionals working with mothers

The first part of our target group's needs assessment was focused on our main target group: professionals working with mothers. Interviews were conducted by the members of our project team in 4 different countries: Hungary (4), Italy (2), Slovenia (2) and Germany (2), originally in mother tongues. The people being interviewed are of different profession, they all work with mothers in various settings. Some of the interviews were conducted personally, some by phone conversations, in January-February- March, 2017, each took approximately 45 minutes.

The following document is the summary of the main findings plus the English translation of the interviews (see pag.)

## Professionals interviewed:

**Emese Dömösi**, Hungary

Mother Centers International Empowerment Centers, member of board (see pag. 17)

**Rita Kishonty-Kardos**, Hungary

Holdam Association, Miskolc (ex-president), women's equal opportunities expert, Regina Foundation (see pag. 18)

**Katalin Orosz**, Hungary

Clinical psychologist, Perinatus Foundation (see pag. 20)

**Edina Hiripi**, Hungary

HOLDAM Association, president, Office manager, EMI national network (see pag. 22)

**Laura Casadei**, Italy

Doula, trainer for Mondo Doula association (see pag. 24)

**Roberta Fetti**, Italy

Psychologist, self-employed and employed by municipal Family Center, Forlì (see pag. 26)

**Radmila Pavlovič Blatnik**, Slovenia

Univ. dipl. psih., Post Partum School, Psychologist (see pag. 27)

**Petja Kovačević**, Slovenia

Family therapy doctor, Igrivisvet (see pag. 28)

**Miss Mummert**, Germany

Employees in youth office since 2 years; work experience as a social worker for single parenthood (see pag. 29)

**Alicia Soldan**, Germany

Kindergarden teacher In Munich (see pag. 30)

## Summary of the main comments:

- The whole family should be targeted, a focus on the new model of fathers
- A mother peer group is really important, should be empowered, and methods should be passed on from mothers to mothers as trainers. Empowerment approach: the training empowers mothers to become leaders/coaches, then they make personal tailored courses for peer groups
- The authentic vocation - supporting new professional area is important (this is important part of the “getting back to work” - workforce reintegration after maternity leave issue), the skills acquired during maternity leave should be recognized and validated, and to provide training opportunities during maternity leave to support career changes.
- The adult learning approach of the project is important, it is a niche, it focuses on the group who are not the most in need (of psychological or material support) but would need some support, peer-group support for example
- Possible target groups: coaches, psychologists, peer group leader mothers, civil organization, official mother counsellors (“health visitors”), workers of family services, adult educators, civil workers, mother centers’ staff, women’s circle leaders, baby-mother club and other self-supporting circles and groups, workers of “family centers”,
- A possible follow-up to the project is to be involved in the public services and financed by the health care services
- A structured curriculum and written material help support the work of the trainers greatly, very useful, but the most important part of the process will be the people who will take part.
- Supervision to the trainers, professional working with mothers should be part of the project design
- Possible parts of the training curricula: to deal with own story as mothers, and to reconcile his/herself with motherhood, helping mothers to focus on their dreams, balance between dreams and reality and being able to take advantage from the unexpected
- Schedule the pilot training course as soon as possible early in the project timeline

## Target needs analyses Part 2.

### Secondary target group: Mothers

To assess the needs of our secondary target group, we created a questionnaire, and translated it into English, Italian and Hungarian. The 3 versions were fill out by 208 mothers with small children (0-3 years) in total from various European countries.

The following is the list of the answers (to the open questions) from mothers who completed any of the 3 versions of the questionnaire. This data will complete the charts we create to present the results of the questionnaire(s).

In the first part (“Summary of the answers”), we organized answers for each open questions into clusters. The second (“Complete version - answers”) part of the document contains all the answers for the open questions.

#### **The full questionnaire can be found here:**

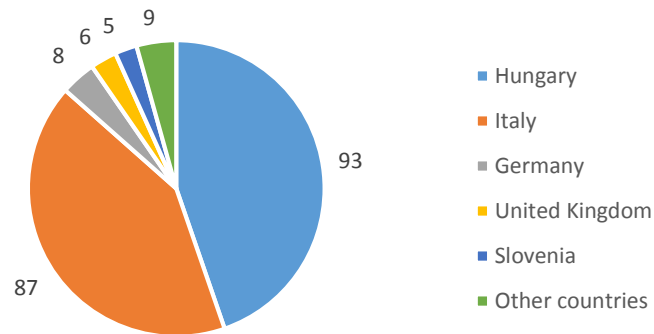
English questionnaire (with 27 answers): [here](#)

Italian questionnaire (with 88 answers): [here](#)

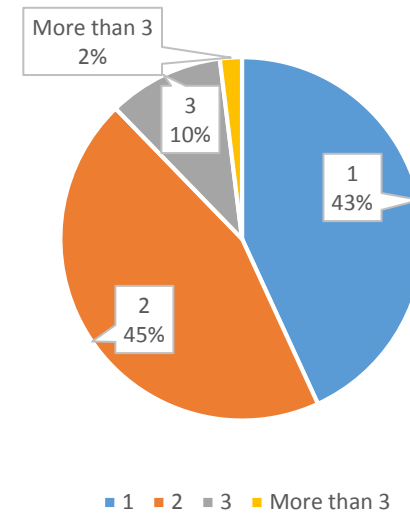
Hungarian questionnaire (with 93 answers): [here](#)

## Who we interviewed

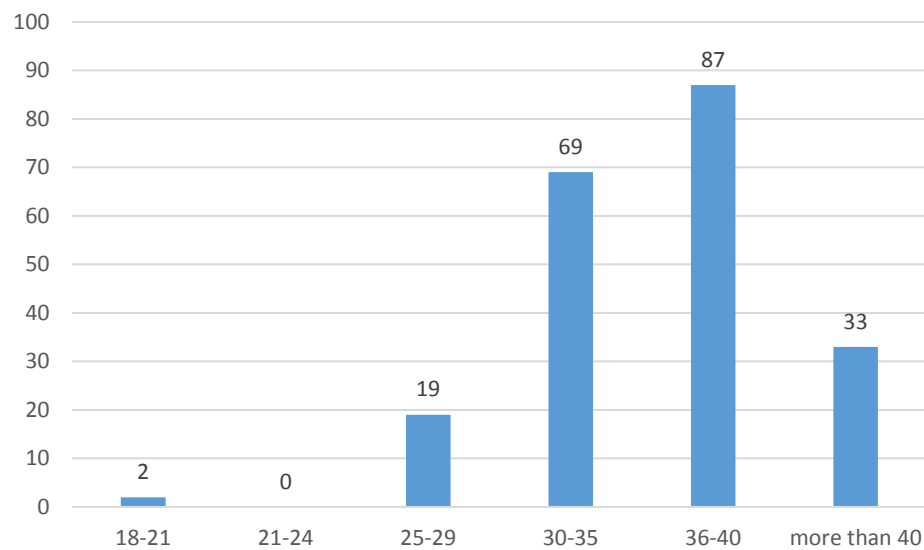
### Country of origin



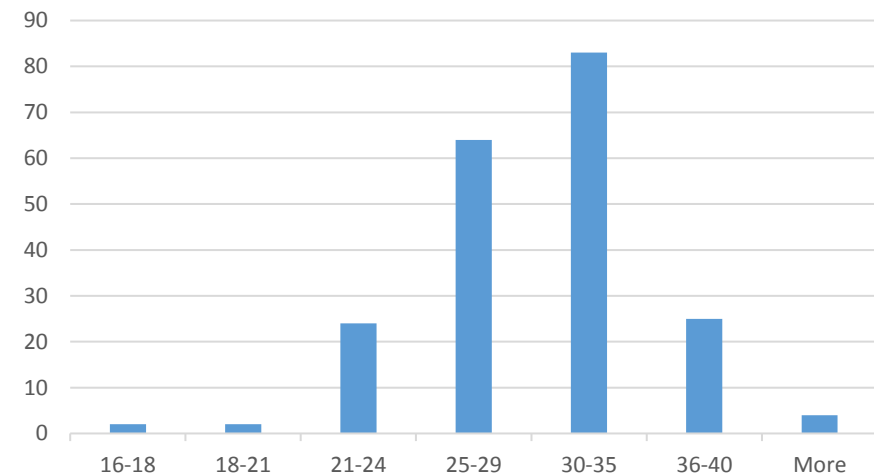
## How many children do you have?



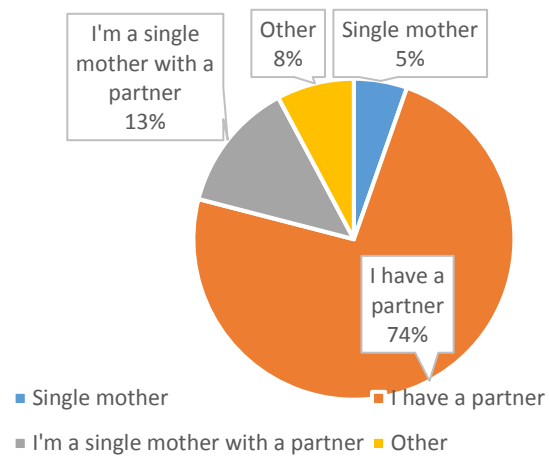
## How old are you?



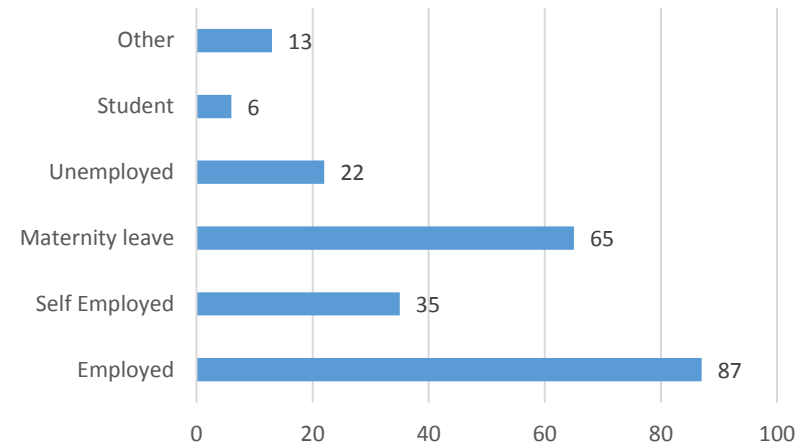
## How old were you when you had your first child?



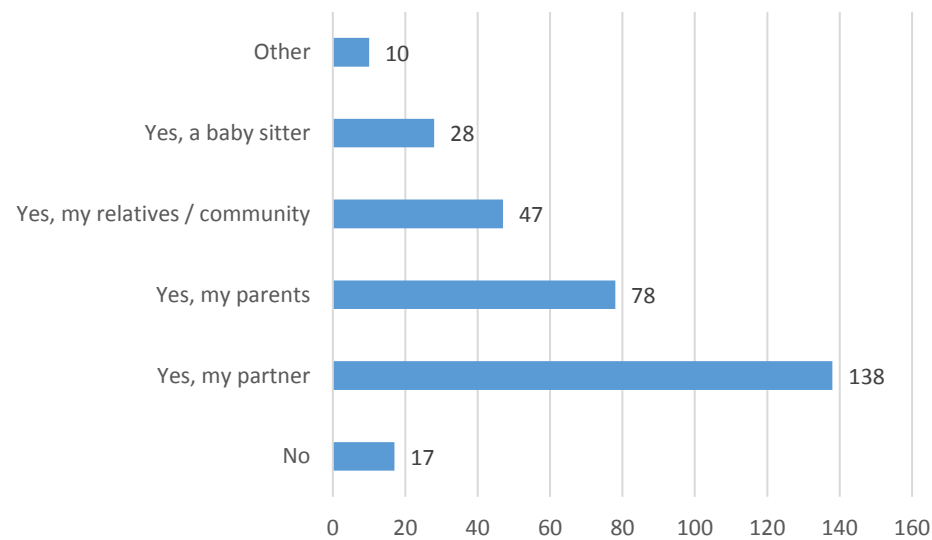
## Are you a single mother or do you raise your children with a partner?



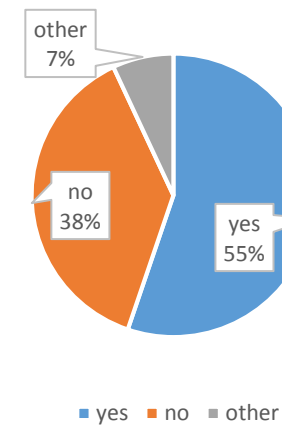
## What is your working condition at the moment?



## Do you have any support at home to look after your child/children?

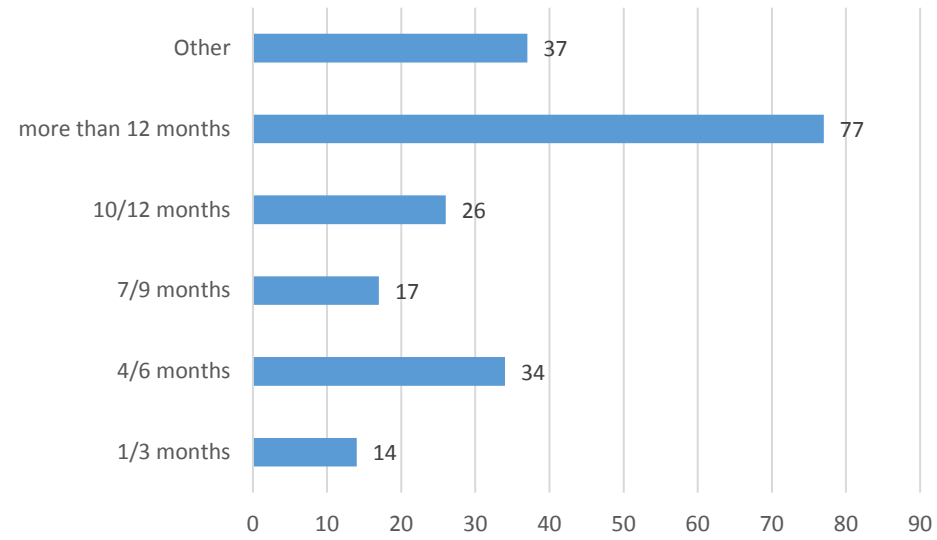


## Did your children attend a crèche or any other institutional childcare service between 0 - 3 years old of age?



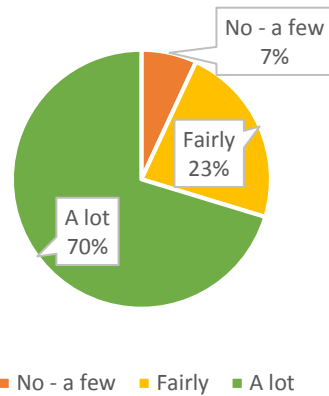


## How long did your maternity leave last?

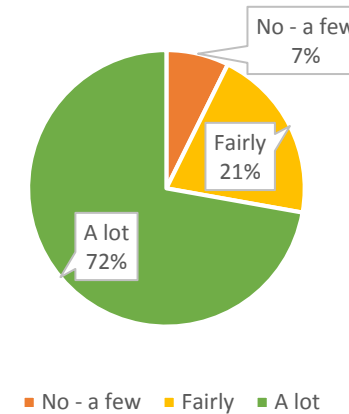


## What are the main issues you are dealing with since you became a mother?

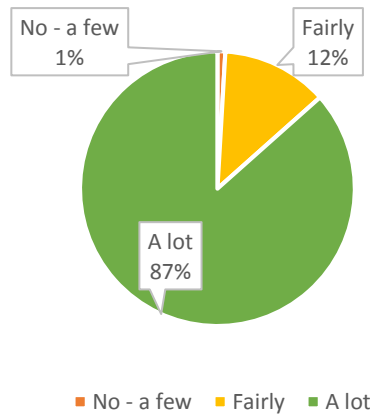
The experience of the birth and how it changed my personality



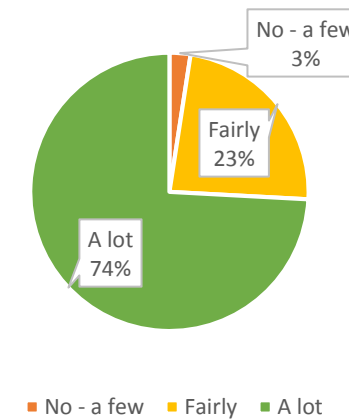
Expectations and stress management - how to recharge myself while being there for my baby



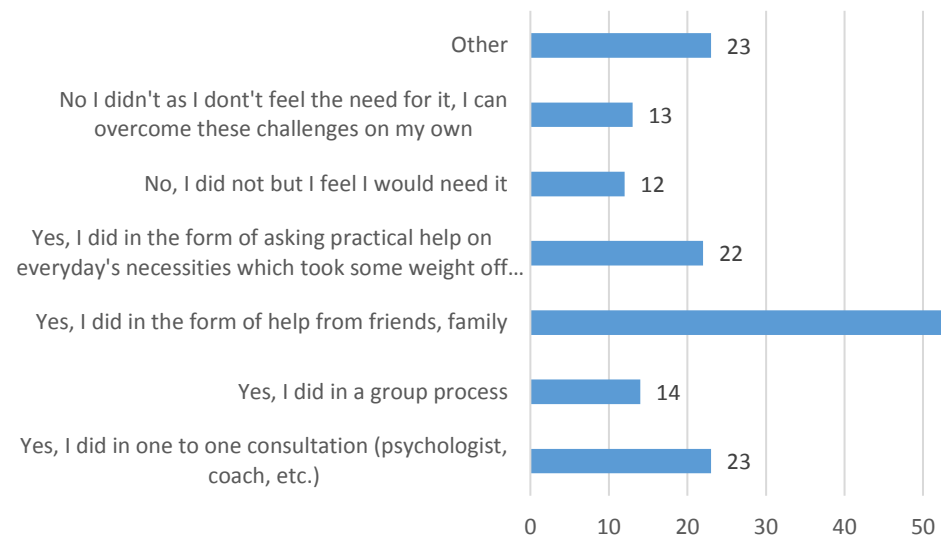
Challenges related to the role of being a mother



Responsibility of raising children - how to become a "good enough" parent?



## Have you received any support to go through these challenges?



## Which kind of professional support did you receive?

(open question) – most relevant answers

Mother-baby club, Psychotherapy and alternative therapies, Mother circles, peer groups, parental groups, Breastfeeding and other counselor, Civil organizations' services for mothers, Family and friends, Medical help,

Free healthcare services for mothers, Midwife, Kindergarten teachers

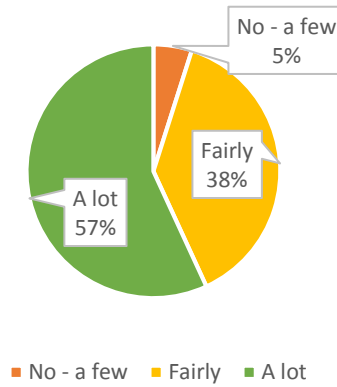
## In case you haven't received professional support but you feel you would need it, please provide details on what kind of support could help you overcoming these challenges

(open question) – most relevant answers

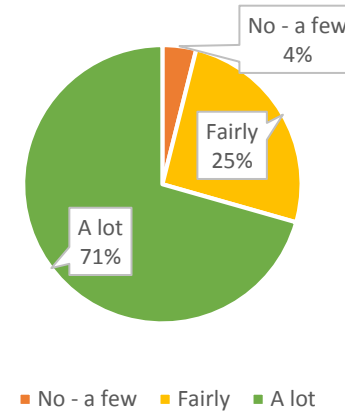
- Mother-baby club
- Psychotherapy and alternative therapies
- Mother circles, peer groups, parental groups
- Breastfeeding and other counselor
- Civil organisations' services for mothers
- Family and friends
- Medical help
- Free healthcare services for mothers
- Midwife
- Kindergarten teachers
- Marriage counselling and parenting support
- Support groups, being in a community and share with others
- A support method that doesn't say what to do but enables one to find her own solutions

## What soft skills of yours were improved thanks to the maternity experience?

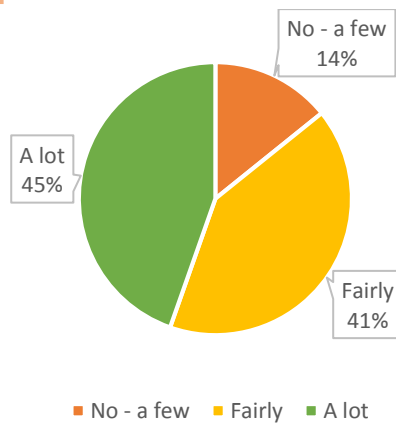
### Problem solving skills



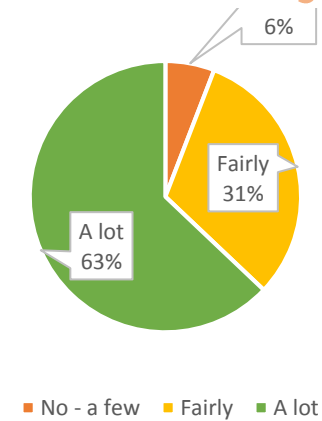
### Managerial and organizational skills



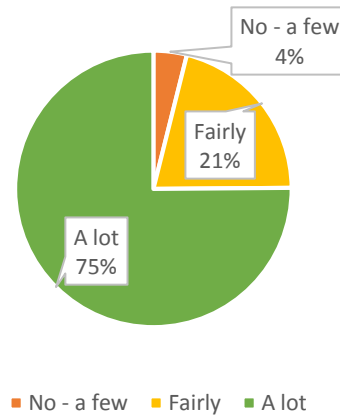
### Leadership skills



### Communicational and listening skills



## Care relationship skills



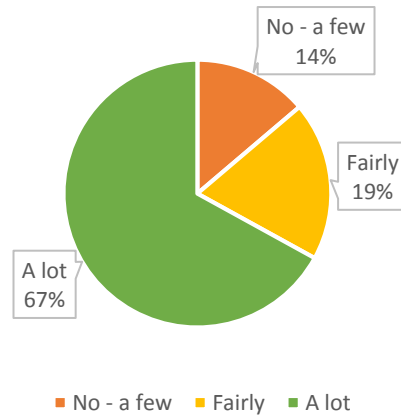
## Others

(open question) – most relevant answers

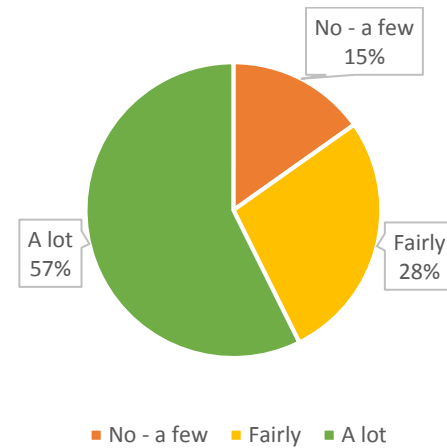
- Standing up for my needs
- Multitasking
- Conflict resolution, positive approach to conflict
- Emotional development, surrender and unconditional love, patience
- To be able to respect my own needs and ask for help
- Self-knowledge
- Organize a support network
- Making priorities, simplifying life
- Intuition, listening oneself, accept that I am not perfect
- Empathy and patience
- Cooperation
- Endurance
- Efficiency
- Increased self-awareness

## What are your main issues regarding work, employment, career?

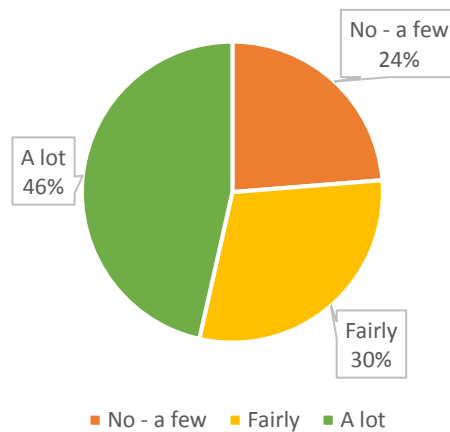
Work / life balance - how to find a "child-friendly" workplace?



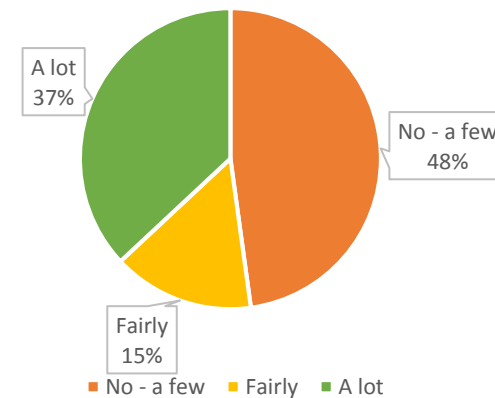
## Changing career path - how to adapt my work life to the personal changes I went through to make a switch in my career?



## How to get back to my previous profession and get back to the work routine



## Becoming self-employed - how to become an entrepreneur to create my own dream job?



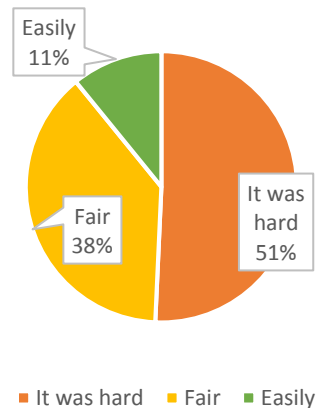
## Other

(open question) – most relevant answers

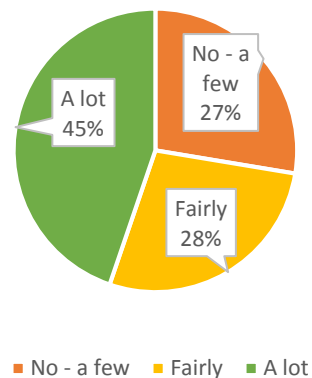
- Work/family life balance
- Conflicting roles of worker and mother
- Time management
- Financial stability
- Refreshing professional competences
- Acceptance from colleagues
- Changes priorities, changing career path, authentic career
- Not being able to find a job

## Getting back to work

How "easily" have you adapted to getting back to work?



Do you feel supported regarding your special needs as a mother at your workplace?



## What are your main concerns related to work?

(open question) – most relevant answers

- Work/family life balance
- Conflicting roles of worker and mother
- Time management
- Financial stability
- Refreshing professional competences
- Acceptance from colleagues
- Changes priorities, changing career path, authentic career
- Not being able to find a job

## How have you integrated the skills acquired through motherhood in your work?

(open question) – most relevant answers

- Improved efficiency, ability for multitasking, organizational skills, better prioritization, problem solving
- Improved time management
- Increased self confidence
- Better concentration
- Increased empathy and patience
- More flexibility
- Being able to start own enterprise, finding new life career



## **Attachment**

Full text of interviews with professionals

## **Emese Dömösi, Hungary**

Mother Centers International Empowerment Centers, member of board

### **1. What kind of work you do related to mothers?**

I am a doula, I prepare mothers for giving birth, I help at deliveries

### **2. What is your professional background related to that (certification, degree, etc.)**

I have doula certificate, birth preparation trainer certificate, various further training certificates,

### **3. What is the structure within which you work with mothers (one-to-one basis, groups, circles, coaching, trainings, etc.)**

I conduct workshops, courses, private one-to-one birth preparation sessions, member of South-East Doula Circle, birth preparation supporter training

### **4. What working / learning methods do you use?**

Non-formal, non-formal education methods, finding personal tailored birth preferences for each mothers, group working methods, working with couples

### **5. How do you see in your country, what are the support structures/ programmes/ measures that work and what is missing to support/help/accompany mothers?**

Usually support structures do not focus on mothers / parents. Mothers-to-be only plan till the birth and are unprepared for the difficulties that come afterwards. And what comes afterwards is a normative crisis, regardless of how the birth went, and they don't get any support. Birth preparation works well, but there are no preparatory courses/classes/service for the period after birth (first 6 weeks). There are breastfeeding

groups on Facebook, but mothers feel isolated with their problem, many of them fall into a depressive period, which makes them feel ashamed. There is a competition about what the baby does. The father gets in the role of family provider and are missing by the children. Daddy-baby clubs and support groups are missing.

### **6. TELL THE INTERVIEWER ABOUT THE PLANNED MOTHER NATURE PROJECT**

**How do you see the usefulness, validity of these planned outcomes?**

It would be important that the mothers learn how to integrate their new role into their everyday lives, to understand that they are more as a person with their new role of being a mother. Peer mothers and mother circles can help a lot. Mothers often loose solid ground, feel they don't fit to the picture anymore, they need support from their immediate environment. Immediate family and environment should be involved in the programme. You need to help them to find and validate their new skills so that they are able to use these in their everyday lives.

**7. Within which concrete structure professionals supporting mothers do you think could use the planned intellectual outputs (training, book, cards, videos)? What exact professional groups do you think could use these outputs?**  
Coaches and psychologist that work with mothers, this is a niche in Hungary - the whole area of mothers transformation and support in their changes, awareness about learnings from motherhood.

## **Rita Kishonty-Kardos,**

Holdam Association, Miskolc, Hungary (ex-president), women's equal opportunities expert, Regina Foundation

### **1. What kind of work you do related to mothers?**

Organizing birth week in Miskolc, as part of a national movement. Then: focused on work reintegration of mothers. Worked in a programme promoting mother/child friendly workplaces. Doing workforce counselling services. Career trainings trainer for mothers. Now works with underprivileged mothers. Also does a special body-based therapy, integrative core dynamics, She considers self-help from mothers to mothers important

### **2. What is your professional background related to that (certification, degree, etc.)**

Hungarian teacher, cultural organizer, ICD therapist, doula, sexual grounding therapy, coach, leadership support process for mother centers, career advisor, birth preparation

### **3. What is the structure within which you work with mothers (one-to-one basis, groups, circles, coaching, trainings, etc.)**

One-to-one, groups, civil organization's programme manager/worker, courses, workshops, therapeutic sessions. She does mainly project-based work.

### **4. What working / learning methods do you use?**

Integrative core dynamics, experience-based methods that bring participants closer to emotional drives, dance and movement, art methods

### **5. How do you see in your country, what are the support structures/ programmes/ measures that work and what is missing to support/help/accompany mothers?**

National health-care system mother support: there are good examples in it, this is the official support system. Alternative systems, services: psychology-based work to help mothers work on their birth experience, childhood traumas, support in self-knowledge, doulas, most of these are on a private basis, it would be good to integrate them into the health-care system, as free services. Perinatal groups, perinatal mourning circles, baby carrying counselling. Services that support the family in a complex programme would be good, as a health-care institutionalized service. The best, ideal situation would be if these support systems would be run by a community, mothers by themselves for themselves. Should be financed by the state - should be a free public service.

### **6. How do you see the usefulness, validity of these planned outcomes?**

The most efficient would be: if it is not written by professionals and offered to mothers, but the training for every group would be a process when they create the programme for themselves, self/individually tailored learning programme, this way connecting to our already existing inner resources. Professionals only accompany the group, and the group does the learning for themselves. If professionals work the programme out and offer it to mothers that also helps greatly.

### **7. Within which concrete structure professionals supporting mothers do you think could use the planned intellectual outputs (training, book, cards, videos)? What exact professional groups do you think could use these outputs?**

This written learning programme is a good starting point, but every new groups should start a new learning programme. This can inspire professionals, gives them a huge energy. The most influential are not the written materials, but the PEOPLE themselves who will lead the learning programmes (people we train during the project). A structured curriculum and written material help them greatly, very useful, but the most important part of the process will be the people who will take part. They will get a free training and in exchange they take on the task of passing it on. Mothers pass it on to mothers. New people will be trained, then they bring in new people. This is the most beautiful way of passing on knowledge, it is the “gipsy way” how gipsy mothers and grandmothers pass on their experience, they need to realize they have a valuable knowledge and a responsibility to pass it on.

## Edina Hiripi

HOLDAM Association, president

Office manager, EMI national network, Hungary

### 1. What kind of work you do related to mothers?

Operative work in the association on a voluntary basis, they focus on birth/female life cycles. Organizing programme for mothers, maintaining a space that is part of the international mother centers network.

### 2. What is your professional background related to that (certification, degree, etc.)

Special education teacher, mourning group leader, mourning counsellor

### 3. What is the structure within which you work with mothers (one-to-one basis, groups, circles, coaching, trainings, etc.)

As group leader, facilitation for mother support workers, thematic groups, one-to-one counselling. Since 2012 when my daughter was born.

### 4. What working / learning methods do you use?

Cooperative learning methods, holacratic methods, we create our own rituals.

### 5. How do you see in your country, what are the support structures/ programmes/ measures that work and what is missing to support/help/accompany mothers?

Structures and supports from civil organizations for mothers, workforce reintegration programmes, health-care mother support system (sceptic about it), child care institutions, maternity benefit systems.

Support and respect to mothers from the society would be

important. More human/mother/baby focused birth, more sensitivity from doctors and official mother counsellors, to give credit and reward for special skills gained through motherhood. There is a great need for information structures, a change in the healthcare system concerning child health. Two pillars of a good system would be: supportive public structures and self-helping mother circles and communities. Training opportunities during maternity leave to support career changes.

### 6. TELL THE INTERVIEWER ABOUT THE PLANNED MOTHER NATURE PROJECT

How do you see the usefulness, validity of these planned outcomes?

This sounds a really useful project. It is valid in 2 ways: giving credit to the mother's competences, making them aware that they acquired a lot of new skills as mothers, to elaborate on that, strengthen the mothers in their new skills. This is very important so that they become aware of the new skills and they can use them in the workforce market. A training programme like this has positive effect in increasing family health, increasing willingness to take on new children, decreases depression and impoverishment. This could happen mainly through civil organization workers, as they have experience and motivation, willingness, it would be good to gain the official Hungarian health-care system's mother counsellors ("health visitors") to this project, involve some of them, and other official family support networks as well. Women that are more aware of their values are more

successful, they have a greater impact on their social environment as well.

**7. Within which concrete structure professionals supporting mothers do you think could use the planned intellectual outputs (training, book, cards, videos)? What exact professional groups do you think could use these outputs?**

Concrete structure: as a training course, intellectual outputs can be used for individuals as well. Mothers, official mother counsellors ("health visitors"), workers of family services, adult educators, civil workers, mother centers' staff, women's circle leaders.

## Katalin Orosz

Clinical psychologist  
Perinatus Foundation, Hungary

**1. What kind of work you do related to mothers?** I am leading the work of Perinatus Foundation that provides psychological support to mothers, mainly to help them getting through traumas, mainly traumas related to birth and their previous life.

**2. What is your professional background related to that I am a psychologist.**

**3. What is the structure within which you work with mothers (one-to-one basis, groups, circles, coaching, trainings, etc.)**

I have been working with mothers for about 18 years in various settings, the foundation was started in 2010, since then we work with 8 other therapist, in total we are 22 people working for the foundation, plus two part-time administration staff.

**4. What working / learning methods do you use?**

I use psychological methods, as well as some of my colleagues, the other part of the staff are counsellors, using counselling methods. I use cognitive, emotional and body-based methods.

**5. How do you see in your country, what are the support structures/ programmes/ measures that work and what is missing to support/help/accompany mothers?**

On a strategic level the 3-years paid maternity leave is exceptional, it is beyond any imagination, unique in the world, it has been successfully working for 40-50 years, and it contributes a huge amount to the health of the children and the family. Mothers have the right to stay at home with their

children and it counts towards their pension. The other unique system which we can call *hungaricaum* (unique in Hungary) is the national network of the special “health visitor” nurse care. These women are employed and paid by the national health care system, they support mothers focusing on health issues rather than illnesses. This works well and supports children until they are 10 (officially 18). This has unique importance specially for the approx. 3 million people in need in Hungary. With Perinatus Foundation we provide trainings for this network. There are many things related to birth, national birth week, Emma movement, they are quite violent, but still they are successful. In Hungary women are just finding themselves, luckily not in an extremist feminist way. And there are a lot of good psychotherapy support for women. With Perinatus Foundation we wrote an educational material for the health visitors about birth. An increased central political will to support part time employment for women coming back to work would be needed. For this, a greater stability of the private sector would be needed. So women coming back to work after maternity leave don't get enough support, their rights are not totally taken into consideration.

**6. How do you see the usefulness, validity of these planned outcomes?**

Yes, it is a valid project. I really like the topic. Although it is a special issue and approach. I am more than happy to contribute to the project as an expert or/and in organizing supervision for the project team or/and the trainers who will be trainers to work with mothers.

**7. Within which concrete structure professionals supporting mothers do you think could use the planned intellectual outputs (training, book, cards, videos)? What exact professional groups do you think could use these outputs?**  
Baby-mother club and other self-supporting circles and groups, mainly civil organizations that are experienced in international project work, and they learn a good method and practice it, these are bottom-up alternative organizations. To empower these groups and organizations is an important aim for many professional groups. To empower and support mothers is exists already in Hungary, this is a more effective target group, rather than to aim official structures and the work of employment. The activists of these civil organizations. There are many people who learnt various methods already. It would be good to train them, and if someone needs support of supervision, the Perniatus Foundation can be there in the background. It should be an important part of this training for professionals to provide supervision, to hold a safe background for them.



## Laura Casadei

Doula, trainer at Mondo Doula, Italy

(Doula training course: [www.mondo-doula.it](http://www.mondo-doula.it))

[http://www.mondo-doula.it/trova\\_doula.aspx?doula=10#scheda-doula2](http://www.mondo-doula.it/trova_doula.aspx?doula=10#scheda-doula2)

### 1. What kind of work you do related to mothers?

I'm a doula, meaning that I work with mothers and families from the conception to around the first year of the baby. Plus, I teach at a Doula school, Mondo Doula (9 month, 1 week end per month).

- Support during the search for conception
- Orientation and support for assisted reproduction
- During pregnancy: orientation about the sanitary options; "normalize" and support about the changes coming with pregnancy and maternity; information about what having a baby means (many families I work with have never seen a baby closely)
- After birth: I work with Maslow's needs pyramid, starting from the basic needs.
- Emotional comfort
- I help to normalize the rhythm of life during the first month of the baby
- I help to build a network around the family
- The goal (for the whole family) is to "feel good". Every mother/family need to find her own model, follow her inclinations. "Help the woman to accept her own nuances"
- Support, cheer.

My work is more about staying than about doing. New mothers need to root. As a trainer: Mondo Doula School is open to everyone who wants to reconcile his/herself with motherhood, not everyone aims to be a doula. There are also professionals who work with women / babies (i.e. holistic practitioners, yoga teachers)...

### 2. Background

Since I was 14 years old I take care of new born babies. I attended 3 times the Mondo Doula school and I got the qualification to be a teacher. I practiced theater for many years and I also use theatre-based methods when I teach.

### 3. What is the structure within which you work with mothers

One-to-one basis, family, I have conducted groups of peers by the local family center. Kind of a self-help group for mothers. When I'm helping a mother I like to create groups based on the matriarchal line of the mother, about maternity

### 4. What working / learning methods do you use?

As a trainer: the training course is about personal development and reconciliation with motherhood (we also give technical information, but most of the training is about knowing oneself). Being a doula to me means that you need to know yourself and know how to deal with your own "maternity story", that cannot burst out when you are helping someone. This school is based on experience. We facilitate group work about "maternity". As a doula: I deal with intimacy, so what is very important to me is to learn to "walk on tiptoes", know how to enter into someone's home. Being able to listen to my emotional reaction to the situation I'm witnessing. Being able to deal and "stay" with my own story that is resonating. In our training course we talk about "conciliazione" (work life balance): for us it means helping mothers to focus on their

dreams, balance between dreams and reality and being able to take advantage from the unexpected (i.e. dismissals or layoff (also of the father) may be a blessing in certain situation). Connect to one's profound dream (for someone it might be getting back to work sooner, and this is totally fine).

#### **5. Support structures/programmes/measures that work and what is missing to support/help/accompany mothers?**

Italy is very variable, many differences from region to region. In my region (Emilia Romagna).

Working:

- “Consultorio” (family counseling public service). It is very important that it exists. It might be improved.
- Centri famiglie (family centers, public service). Normally they work very well, they depend too much on the political situation of a the city. Sometimes information is missing (not every family knows there is this opportunity)

Missing:

- Residential services are totally missing in the public (only doulas available)
- There is a “black hole” about the getting back to work issue. Centri per l'impiego (employment centers) do that but only for young people, not for this specific target group.

#### **6. Mother Nature: How do you see the usefulness, validity of these planned outcomes?**

It make sense. We could think about a weekend workshop about that in our training course.

My advice is to make a pilot training course as soon as possible, in order to start to “get your hands dirty” with the real world.

#### **7/8. Within which concrete structure professionals supporting mothers do you think could use the planned intellectual outputs (training, book, cards, videos)?**

Doulas of course, Family centers. I do not see many other professionals.

## Roberta Fetti

Psychologist self-employed and employed by municipal Family center, Italy

### 1. What kind of work you do related to mothers?

Psychologist by the Municipal Family center in Forlì  
Family centers are social services run by the local municipalities. The function is to support families 360°. There is a concrete space where the activities take place and a number of projects (free of charge) such as:

- Group support during pregnancy
- Group support during the baby's first year for the family
- Weekly meetings with educators for mums + children
- Meeting on topics related to child care (education, baby wearing, etc...)
- Psychological counseling to the couple / parent
- Educational counseling to the couple
- Psychological support for separations
- Support for families with teenagers

Roberta:

- Group support during pregnancy (psychological side)
- Psychological counseling to the couple or parent

### 2. Background

Developmental psychotherapist, I'm now attending a training course about Psychological therapy for couples and families.

### 3/4. What is the structure within which you work with mothers. What working / learning methods do you use?

- Group support during pregnancy: Structured group activities.
- Counseling: Face to face relationship. Clinical interview.

### 5. Support structures/programmes/measures that work and what is missing to support/help/accompany mothers?

There are many good services in our region and I would say that almost all needs are covered, by public or private services. The problem is that only a person who is already competent can find the right solution for him/her, or very fragile people who are already in the care of the social services.

What is missing is a space in between for the biggest part of the population who is neither very competent or very fragile.

### 6. Mother Nature: How do you see the usefulness, validity of these planned outcomes?

I found it very useful, I personally know a couple of mother whom I meet during the counseling sections that would need exactly this kind of support. There are many disoriented mothers.

Today the labor market is precarious but flexible: there is a lot of space to redesign oneself, but this is far from simple, lots of skills are needed. Interesting tools for anyone who does not need a full psychological support but is facing a crisis. My suggestion is to keep in mind the entire family when you develop the tools. Nowadays also fathers can face the same crisis.

### 7/8. Within which concrete structure professionals supporting mothers do you think could use the planned intellectual outputs (training, book, cards, videos)?

Family centers would be the perfect places, they involve a lot of mothers and they could ensure that also people who have less economical possibility could benefit from it.

## **Petja Kovačević**

Family therapy doctor, Igrivisvet, Slovenia

<https://www.igrivisvet.si/kdo-je-kdo>

### **1. What kind of work you do related to mothers?**

Young mother after they give birth (up to 6. month) contact us because they want to take part in the workshops for children's movement ("pedokinetics") or they want to join the support group for psychotherapy and this is what she does.

### **2. What is your professional background related to that (certification, degree, etc.)**

Doctor of family therapy.

### **3. What is the structure within which you work with mothers (one-to-one basis, groups, circles, coaching, trainings, etc.)**

Mostly groups, but also one to one, or couples.

### **4. What working / learning methods do you use?**

Psychotherapy. Other coworkers use pedokinetics and JKA - Jeremy Krauss Approach method.

### **5. How do you see in your country, what are the support structures/programmes/measures that work and what is missing to support/help/accompany mothers?**

There is a lot of support and resources for OUTSIDE the structure: instructions for how to take care for children etc. Very often causing sense of guilt and feelings of not trying

enough. Also many support groups are full of advice. In their organization they focus on INNER structure: building up mother's trust in her intuition and capacity to take for the child.

### **6. TELL THE INTERVIEWER ABOUT THE PLANNED MOTHER NATURE PROJECT**

Her comment was that the 2. Pillar of the project (authentic professional searching after maternity leave) is really innovative. She was positively surprised about the idea.

### **7. Within which concrete structure professionals supporting mothers do you think could use the planned intellectual outputs (training, book, cards, videos)?**

She was not clear if they could use those materials.

### **8. What exact professional groups do you think could use these outputs?**

>> I checked about the problem of mothers who "can't go to toilet" >> This is also happening in Slovenia, quite present but people don't speak about this.

>> also very relevant the issue of a new model of fatherhood >> new models are needed.

## **Radmila Pavlovič Blatnik**

Univ. dipl. psih., Post Partum School, Psychologist, Slovenia

<http://www.objem.org/>

### **1. What kind of work you do related to mothers?**

Counseling and therapy after birth (1st year).

### **2. What is your professional background related to that (certification, degree, etc.)**

Psychology, master in mental health in community

### **3. What is the structure within which you work with mothers (one-to-one basis, groups, circles, coaching, trainings, etc.)**

One to one, groups, coaching, training

### **4. What working / learning methods do you use?**

Various methods about how to take care for baby in natural way

### **5. How do you see in your country, what are the support structures/programmes/measures that work and what is missing to support/help/accompany mothers?**

Health system doesn't provide holistic support in after-birth period - there is no special service for mothers and their babies.

There are many alternatives available but people have to pay for them – e.g. doula, breast feeding counseling.

### **6. TELL THE INTERVIEWER ABOUT THE PLANNED MOTHER NATURE PROJECT**

The first response about the project was a feeling that we would like to take over something she is expert in - therefore I needed to be really clear that this project is not about children and child care! As we clarified that this is really about mother's process and support to find her vocation she has relaxed a little bit.

### **7. Within which concrete structure professionals supporting mothers do you think could use the planned intellectual outputs (training, book, cards, videos)?**

This woman is a pioneer of alternative childcare and mother care during pregnancy and after. She wishes that a mother groups would be all over Slovenia not only where she goes, therefore she was interested in the "kit" for establishing local groups where the mothers could decide by themselves which experts they need and they would ask them for help. She finds it crucial that safe space for mothers is being established.

## Miss Mummert

Employee in youth office since 2 years; work experience as a social worker for single parenthood, Germany

### **The causes of these pregnancies are manifold:**

- curiosity, carelessness, failure to assess the situation
- Rejection of a pregnancy drop or fear of it
- Desire for a child as an emotional substitute
- maternity as a life-design, which should bring about a social revaluation
- Social and financial coverage of maternity
- desire for something special, one can give one's love /
- Longing for security and love
- For love of the partner, with the desire to bind him
- Escape to motherhood, Detachment / escape from the parental home
- Protest against one's family
- Desire for independence
- Opportunity to change the current life situation

### **Focus of the pedagogical work**

- Clarification of the mother role with regard to cohabitation or separation, coordination of interests
- imparting security and protection, reducing anxiety, perplexity and fainting

- Help and support for a common life with the child
- Stabilization of the mother-child relationship
- Individual guidance on the independent management of the household, including the care of the child
- support and help with the organization of the day-to-day work and school, leisure and education
- Train and reflect maternal rolling behavior
- Development of future perspectives
- dealing with public institutions and applications

### **Methodical action**

- Reference retractor system as a transition
- Reflections / Pasting
- Everyday life as a learning and practice field
- Solution- and goal-oriented individual discussions, group discussions
- thematic group meetings
- Practical help and instructions
- Learning at the model
- Self and external reflection of behavior and procedures
- Biography, Genogram

## Alicia Soldan

Kindergarden teacher In Munich, Germany

### Obstacles

- Mothers have less basic competencies
- Change of age structures
- Contaminated sites
- no social network; lack of support

Children are all growing by themselves - the question is just how. There is no universal recipe to help children grow into balanced, social and competent personalities. But you can look for some basics for example:

- Find the balance between encouraging and challenging: children need free, unplanned time to evolve.
- The development of a child can only be influenced a little: Of course, you can mentally challenge your child by dealing with him a lot and acquiring suitable playing material. Nevertheless, the child will not run faster or learn to speak. The development of the motor is based on a kind of internal schedule which looks different for each child.
- Trust in your intuition: expert tips, education counselors and the pressure on children and parents to meet all the demands of everyday life can burden families. So be free from the excessive expectations of others and trust your gut feeling.
- The use of media is an everyday occurrence in many families. But the consequences for children are still

underestimated. Even many children's programs and games are challenging the little ones and they have problems to process what they see. This can have a lasting effect on social and emotional development - in the negative sense.

- Eating together, cuddling together in a large parental bed, being lazy together - in busy everyday life there is often little time for quiet family activities. You should counter this, as this strengthens the feeling of belonging together within the family and your children feel safe and relaxed.
- Frequently there is no correlation between punishment and the "offense" of the child. There is no point in penalizing the offense with a TV ban. The child cannot understand such sanctions and it is difficult for him to accept them.
- Recurrent rituals are important for children because they give them orientation and structure their daily lives. They also help families strengthen their sense of community. Pre-sleeping rituals help children better deal with the events of the day and fall asleep faster.
- Children need rules. This does not mean that you should not compromise- children who always want to do their will, will face problems at school and in society sooner or later.