



Reflections on the first conference of the International Marcé Society for Perinatal Mental Health convened in India, a middle-income country

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Abstract

Since its establishment in 1980, all biennial conferences of The International Marcé Society for Perinatal Mental Health had been convened in high-income nations. Relatively little consideration had been given to the experiences and needs of most women who live in the world's low- and middle-income countries (LMICs). The aim is to provide an account of the first conference convened in India, a middle-income country. The Global Experiences, Global Dialogues, Global Responses Biennial Conference of the International Marcé Society for Perinatal Health was convened at the National Institute for Mental Health and Neurosciences (NIMHANS) held in Bengaluru 26th–28th September 2018. The conference achieved all its aims of maximizing access for people living and working in LMICs through scaled registration fees, building capacity through a young professionals' program, promoting collaboration through symposia co-convened by South Asian and other international experts, and visits to NIMHANS' clinical services. It made an impact on the agendas of sister expert professional societies, and public policies in India and generated significant public interest. It was appraised as pivotal, transformative and presenting exceptionally high-quality science. It was financially successful in making the largest contribution to date from a biennial conference to the Society's resources. We commend this initiative to other international expert professional societies seeking to benefit from the opportunities for mutual learning that conferences convened in low- and middle-income countries can provide, and to reduce disparities in access to evidence to address health inequalities.

Keywords International conference · Perinatal mental health · Low- and middle-income countries · India

Professional conferences are intended to enable participants to maintain the currency of knowledge, present their work for peer review, interact with colleagues working elsewhere in the world and be stimulated by new ways of thinking (Hickson 2006). Conferences also have wider socio-political value by

drawing the attention of governments and the community to the problems being considered and to potential solutions.

It is argued, however, that the environmental impact of international travel means that face-to-face should be replaced by virtual meetings (Green 2008). Also, conferences can be so large and impersonal that meaningful interactions are precluded and data cannot be comprehended in 'ludicrously curtailed presentations' (Horton 2012). Drife (2008) provides the counter-argument that a conference can take participants beyond the familiar and provide an opportunity to interact with and experience the working and living circumstances of colleagues and communities in very different settings, including those that are resource-constrained, and that nothing can replace the transformative potential of in vivo experience.

Since its establishment in 1980, all biennial conferences of the International Marcé Society for Perinatal Mental Health had been convened in high-income nations. These invaluable interdisciplinary forums enabled accrual of evidence about the

Co-convenors of Global Experiences, Global Dialogues, Global Responses, the Biennial Congress of the International Marcé Society for Perinatal Mental Health held at the National Institute of Mental Health and Neurosciences, Bengaluru India September 26th–28th 2018

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nature of mental health problems experienced by women who were pregnant or had recently given birth, and approaches to prevention, recognition and treatment. There was however relatively little attention to the experiences and needs of most women who live in the world's low- and middle-income countries (LMICs). Perinatal mental health problems were once thought to be rare in LMICs because traditional care involving support from other women, rest, seclusion, rituals and gift-giving were argued to be psychologically protective. Evidence grew in the first two decades of this century that contrary to this supposition, prevalence was much higher in LMICs than in high-income nations and highest among the poorest women with the least access to services (Fisher et al. 2012). Some of this evidence was presented at the Society's conferences, but recognition of the seriousness of this situation was slow to grow. A dedicated symposium with eminent speakers presenting evidence from Pakistan, Vietnam and South Africa at the 2008 Conference attracted fewer than 12 audience members.

It was in this context that we proposed to hold the 2018 Biennial Conference at the National Institute of Mental Health and Neurosciences in Bengaluru India. While many responded to the proposal with enthusiastic interest, there was also opposition, with questions raised about participant safety, relevance and financial risks. We offer this account of the Global Experiences, Global Dialogues, Global Responses Biennial Conference of the International Marcé Society for Perinatal Health held in Bengaluru 26th–28th September 2018 to accompany the abstracts from the scientific program.

The conference was held at the National Institute of Mental Health and Neurosciences (NIMHANS) Convention Centre which had excellent facilities for large and small group presentations, poster display spaces, sponsor booths and informal meeting areas. It met Lancet Editor Richard Horton's (2012) criterion of being 'appropriately austere', while made extraordinarily inviting with a beautiful floral mandala and rich floral decorations.

Enabling access

We aimed specifically for the conference to be accessible to people living and working in LMICs. Registration rates were set on the basis of World Bank Group country classifications, with lower fees for people from less well-resourced nations and for students. In total, there were more than 630 registrants from 31 countries making it among the largest of the Society's biennial conferences.

Building capacity among early career professionals

We also wanted to provide opportunities for early-career professionals to participate and be mentored (Mata et al. 2010). We pioneered a scheme, whereby registrants could elect to

make a donation to support early-career professionals from LMICs to participate. Coupled with generous sponsorship from the T.S. Srinivasan Foundation, 11 early career professionals from nine countries were fully funded to participate. A specific Young Professionals Program was organised by NIMHANS trainees. It included mentorship breakfasts in which three people had breakfast with an international leader to discuss their aspirations and plans, and to hear about projects and opportunities in other countries.

In partnership with the International Association for Women's Mental Health, a preconference workshop about Women and Leadership enabled 30 women early in their careers to learn strategies for taking authority and accepting positions of responsibility. The Young Professionals Program included a social program and visits to Bengaluru sites to enable them to build collegial friendships.

Engagement with local institutions, professional societies and government representatives

The formal opening ceremony, inauguration and closing ceremonies demonstrated the support of the NIMHANS executive and faculty members and Indian and international expert professional groups. Senior representatives of sister societies including the Indian Psychiatric Society, the Bangalore Society of Obstetrics and Gynaecology, the International Association for Women's Mental Health, the International Society for Psychosomatic Obstetrics and Gynaecology, and the Royal Australian and New Zealand College of Obstetricians and Gynaecologists spoke about the close synergies between their organisations and the Society. The President of the Federation of Obstetric and Gynaecological Societies of India travelled from New Delhi to speak at the Inauguration, emphasising the value to India of an influential international conference being held there.

Scientific program

The eminent invited speakers were from diverse disciplinary backgrounds and countries. They gave extraordinary lectures: Lakshmi Vijaykumar about suicide among women; Evita Fernandez, the ethics of childbirth; Sherryl Goodman about why postpartum depression requires prioritisation; and Carmine Pariante on the most recent evidence about how mental health problems influence foetal development.

Atif Rahman gave the Channi Kumar Lecture, arguing persuasively that notions that mental health problems among women living in LMICs are not detectable or treatable are

myths. Bryanne Barnett, winner of the John Cox Medal reminded us that pregnancy and childbirth can be traumatising. Cindy-Lee Dennis, winner of the Marcé Medal argued that cross-national public health approaches can prevent developmental risks to adult disease. A festschrift in honour of Vivette Glover reflected her influential contributions to knowledge by synthesising the most recent evidence about maternal mental health and foetal growth and development.

Experts from South Asia and high-income countries were invited to co-convene symposia which drew together speakers from several nations. Topics included assessing and addressing perinatal experiences of interpersonal violence, trauma and childbearing, the biology of and pharmacological treatments for severe perinatal mental illness and universal community-based strategies for prevention. All attracted large audiences and stimulated discussion among participants. Poster discussions were facilitated and the poster sessions were timetabled specifically so that all delegates could join them. Poster prizes were awarded on the basis of reviews by senior academics to the five most scientifically rigorous posters presented each day. There were in total 224 oral and 180 poster presentations.

Recognition of perinatal mental health education

The White Swan Foundation for Mental Health is a Bengaluru-based not-for-profit organization that translates research evidence to assist people living with mental health problems and their families. It instituted the White Swan Foundation Prize to recognize organizations that increase awareness through stakeholder education, with a particular focus on models that are potentially scalable in LMICs. In a competitive process, the UK's Institute of Health Visiting, London, UK was awarded first, and the European Institute of Perinatal Mental Health in Madrid, second prize.

Opportunities to interact with co-delegates

All conference meals were included in the registration fee, and provided on site, enabling people to meet and have conversations without having to leave the conference location. St John of God Health Care, a not-for-profit private provider of perinatal community outreach services, and the Gidget Foundation, a not-for-profit organisation which raises awareness about perinatal depression and anxiety and provides services, sponsored a dinner for all delegates after the conference inauguration. The gala was an opportunity to learn Bollywood dancing taught by NIMHANS trainees.

Opportunities to learn about practice and research in India

NIMHANS is the national centre for research, clinical practice and education in mental health and neuroscience education in India. A highlight for delegates was the opportunity to visit its diverse services, including the Mother-Baby Unit, yoga treatment centre, outreach community clinics and general wards. All are research active.

Influence on policy and practice

The World Health Organization, UNICEF and the World Bank Group's *Nurturing Care Framework for Early Childhood Development: Linking Survive and Thrive to Transform Health and Human Potential* focuses on the psychological needs and mental health of mothers so that they are able to provide nurturing care to their young children. It was launched for the Society at the Conference. In 2019, the Federation of Obstetric and Gynaecological Societies of India made maternal mental health their national priority. Since the Conference, three Indian states have initiated screening programs for perinatal mental health problems among women.

Financial outcome

The Society relies on the biennial conference as a major income stream. Despite making the conference accessible to participants from LMICs, students and young professionals, it covered all costs and made a substantial profit for the Society.

Overall appraisal

Many delegates told us how much they had appreciated the cultural, spiritual and symbolic elements of the conference: the poetry from India, Australia, France and South Africa that was read at the beginning of each day, watering the Tulsi plant in the opening ceremony and the floating of candles on the lotus pond at the closing ceremony, and the specifically choreographed Bharatanatyam classical Indian dance performed at the inauguration.

There was widespread acclamation about the quality of science, exceptional opportunity for mutual learning and the power of the explicitly inclusive program. Participants described the conference as 'transformative', and 'pivotal' and as having achieved its goal of bringing people from the Global North and the Global South together for effective Global Dialogues. It represented

what Horton (2012) described as a ‘conference worth celebrating’ because it was both symbolically and materially important.

We commend this initiative to other international expert professional societies seeking to benefit from the opportunities for mutual learning that conferences of this kind can provide and to reduce disparities in access to evidence to address health inequalities.

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Compliance with ethical standards

Conflict of interest We declare that we have no potential conflicts of interest.

Statement of informed consent and human and animal rights and informed consent This paper is not reporting research involving human participants, and therefore no informed consent was required.

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