follow up. We were not sure what changes or developments would come from our time together with Hi but in true Hiram fashion he transformed our perspectives and the way we approach the field of IMH in so many ways we never imagined possible prior to his visit.

Hiram arrived with his wife Dee and from the beginning shook us out of our comfort zones. There were a few minor cultural issues to get our heads around such as Hiram’s persistence in calling our beautiful red flowering red “Bottle Brush” bush the “Pipe Cleaner” tree. More significantly was his way of viewing the responsibilities that universities have to community and his systematic perspective to improving the lives of vulnerable infants, young children and their families. He guided and shaped our understanding of the significant role the entire system plays in supports families transitioning into parenthood.

Hiram questioned why our focus was on one small part of the system rather than a much broader, holistic perspective that would engage stakeholders across the continuum of care and hold the views and experiences of families at the centre of everything we do in the field. Initially, Rochelle and I talked with Hi about how he might support us to develop a research framework that captured the positive changes in families and the clinical significance of the PIMH intervention work carried out in the newly established university based Pregnancy to Parenthood clinic. We also considered that Hiram might help build awareness of IMH in other areas of the university such as Education and Nursing and Midwifery as well as our Psychology Department.

Well, Hi’s first questions to us were “what is the point of evaluating one clinic that has an isolated impact?” How will that change anything across the system and impact more than the 50 families you treat each year? “What is the system of care your clinic sits within and how does it currently function?” What does your clinic offer in relation to improving the system that supports families with infants and young children? We were lost for words and didn’t know how to respond to Hiram’s direct questions as our perspective up until this point had been primarily focused on building an evidence base for the service we were providing families which we valued and felt pride in delivering within the community.

After we took a few breaths and reflected deeply about Hiram’s provocative questions we began to understand the field of PIMH from a new broader perspective. The questions Hiram posed enabled us to develop clarity about what we needed to do and how to proceed which was different to what we had ever imagined. Our minds opened and our perspectives changed. We shifted our focus and commitment to developing a deep understanding of our system and all its complexities and how we might offer interventions that improve the functioning of the system and the family’s experiences across the continuum of care. It didn’t take long for us to wonder how we could have not taken this approach prior to Hiram’s visit. We both feel that this experience exemplifies the impact of Hi’s presence. He had the capacity to dramatically shift our perspective towards a direction that will provide a much larger impact on vulnerable families than our isolated service provision could ever offer.

With Hiram’s guidance we developed a proposal, and to our surprise received a large grant to conduct a system analysis of the local PIMH system of Care. He has supported us at every stage of the process and with persistence we have now produced a report that has the potential to be so impactful on the wider PIMH system of care and be used as an exemplar for system evaluation and change at a state and federal level.

At all stages of this journey Hiram has generously provided us with his wisdom, expertise and knowledge. His input has transformed how we see ourselves and our capacity to make real and impactful long-term sustainable changes to the emotional lives of infants, young children and their families. It has given us renewed strength and courage to persist with these innovative ways of working from a systems-based approach that our Western Australian system has yet to fully understand. Hiram embodies ‘relationship-based work’ and has become one of our most important partners in the continuing journey of making real and impactful changes to the emotional lives of infants, young children and their families. He guided and shaped our understanding of the significant role the entire system plays in supporting families transitioning into parenthood.

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Hi had a wonderful way of helping younger colleagues like me to move forward with their careers. Ever since our first meeting, he recruited me to work as a reviewer, first for the WAIMH Congresses and then, once I had gotten my PhD, for the Infant Mental Health Journal (IMHJ). In addition to that, Hi has generously offered me and many other younger colleagues opportunities to contribute to special IMHJ issues about infant mental health or chapters in books. As a result of these opportunities, my list of publications got longer and, of importance, I also found that I had developed a large network of colleagues from around the world I might not have met otherwise. I am grateful to Hi for all that he has made possible for me.

Now that I have been the Executive Director of WAIMH for two years, I am truly thankful for the years that I have known Hi and worked as “Hi’s Shadow” (as we often joked about). The basics of the work around preparations for WAIMH World Congresses and many other responsibilities became familiar to me through Hi’s guidance, as well as his understanding of the unique characteristics of WAIMH as an organization.

People working in and for WAIMH are like a family where we take care of each other, so that we all in turn can care for infants and families around the world. In many ways, Hi has been my father figure in the WAIMH family and very important, both professionally and personally. Thanks to Hi I also got to know Dee, one of the warmest and most down-to-earth teachers.

I can say that I have known Hi now for about 10 years. But I have known Hi since the very beginning of my work in this field 25 years ago. Hi is a giant in infant mental health, especially in Michigan. His height and commanding voice lend to this “giantness,” but mostly it is his reputation that looms large. Many years ago, I asked Hi to send me his curriculum vitae so that I could print it out to keep on file with Endorsement records (back when paper files were still a thing). Hi said to me, “You don’t want to print it out, it’s far too long.” I asked that he send it anyway. And of course, he was right. I had to refill the printer twice because Hi’s CV is an astounding 106 pages. It is a remarkable tribute to his commitment to scientific inquiry, but also to Hi’s support and promotion of people, organizations, and most of all, infants and families.

What also stands out about his CV is the number of other giants in the field that he has mentored and with whom he has collaborated. It seems Hi’s passion creates a gravitational pull that has attracted hundreds of other experts. Together, they have advanced the field and paved the way for the application of research into practice.

The Alliance for the Advancement of Infant Mental Health (Alliance) is one of the many organizations who owes much to Hi. Hi has generously offered me and many other younger colleagues opportunities to contribute to special IMHJ issues about infant mental health or chapters in books. As a result of these opportunities, my list of publications got longer and, of importance, I also found that I had developed a large network of colleagues from around the world I might not have met otherwise. I am grateful to Hi for all that he has made possible for me.

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The Alliance for the Advancement of Infant Mental Health (Alliance) is one of the many organizations who owes much to Hi. Hi has been a supporter of the Alliance and our mission to build and sustain a diverse, reflective, skilled, and relationship-based workforce that supports pregnant women, infants, young children and their families with cultural humility. He lets us know when he sees us getting it right, and he lets us know if he sees us missing something important. The Alliance owes Hi a debt of gratitude for his honest feedback. It drives us to do the best possible job for the infant-family workforce. This is just a small part of what makes Hi Fitzgerald a giant force for good for the infants, caregivers, and parents around the world. On behalf of the leaders from the 32 associations for infant mental health that make up the Alliance, we say THANK YOU, and congratulations on an absolutely extraordinary career!