

Lessons Learned in Infant Mental Health Training at 3 Levels: *Creating A Role for Everyone*

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Evolution of Best Practice Infant Mental Health Is:

- Child focused
- Family centered
- Relationship Based

Infant Mental Health is the developing capacity of the child from birth to 3 to:

- Experience, regulate, and express emotions
- Form close relationships
- Explore the environment and learn

...all in the context of family, community, and cultural expectations for young children.

(Zero To Three Infant Mental Health Task Force, 2001)

Infant Mental Health refers to an infant's ability to:

- Experience emotions
- Develop relationships
- Learn through loving, caring relationships

(Joy D. Osofsky, Ph.D. Harris Center for Infant Mental Health, Louisiana State University Health Sciences Center, New Orleans)

Strategic Plan & 3-Level Chart-

- Available at <http://www.fsu.edu/~cpeip>

LEVEL 1

- Strengthening the Caregiver/Child Relationship

LEVEL 2

- Developmental, Relationship-Focused Early Intervention

LEVEL 3

- Infant Mental Health Treatment

LEVEL 1

- Strengthening the Caregiver/Child Relationship
- Responsive Caregiving
- Understands child's cues
- Promoting Continuity of Care
- Knowledge of Developmental Stages
- Supporting the child's on-going emotional development within the family
- Providing Family Support & Education
- Referring for Further Screening/Assessment

Who provides Level 1 Infant Mental Health services?

Front-line caregivers including:

- Parents
- Childcare Providers
- Health Care Providers
- Home Visitors
- Parent Educators
- Social Workers
- Child Protection Case Workers
- Police Officers
- Judges
- Lawyers

LEVEL 2

- Developmental, Relationship-Focused Early Intervention
- Identifying emotional or attachment concerns in children or parent child relationships
- Integrating relationship-based practices into child's therapies, medical treatment, foster care
- Consulting to Enhance Relationships

Who provides Level 2 Infant Mental Health Services?

- Social Workers (MSW)

- Psychologists
- Mental Health Therapists
- Child Development Specialists
- Early Interventionists
- Therapists (Occupational, Physical and Speech)
- Public Health Nurses
- Developmental Pediatricians

LEVEL 3

- Infant Mental Health Assessment & Treatment
- Infant Mental Health Specialists with clinical competencies and expertise in young children
- Comprehensive Assessments
 - For children under 6, must include assessment of baby, baby's interactions, and baby's relationships.
 - Serves as guide for placement, need for further services, and permanency planning.

Treatment

- Dyadic Therapy for Mothers and Children e.g., Mothers with Young Children in Foster Care

Who provides Level 3 Infant Mental Health Services?

- Licensed mental health professionals with advanced training, including:
 - Child, Adolescent, & Adult psychopathology
 - Development in infants/toddlers, and early parent-child interactions & relationships
 - Assessment & Treatment within parent-child relationship, including dyadic psychotherapy

Florida's Strategic Plan: Goal 5

- Build a training infrastructure for IMH in Florida including Level 1 front-line caregivers, Level 2 early interventionists, and Level 3 IMH therapists.

Training Formats

- Brief workshops
- Intensive trainings
- Consultation and technical support

Training at Multiple Levels

	Level 1	Level 2	Level 3
Brief	**	**	**
Intensive		**	**
Consultation/ Technical Support	**		**

Emotional Suffering in Young Children (Emde, R. (2001). A developmental psychiatrist looks at infant mental health challenges for early head start: Understanding context and overcoming avoidance. *Zero to Three*, 22(1), 21-24.)

- Pain and distress from trauma, abuse, or loss of caregiver
- Misery from neglect
- Suffering from cumulative stress
- Suffering from lack of opportunity

10 Things Every Child Needs- Video

(www.rrmtf.org, *WTTW Chicago {Producer}* (1997). *Ten things every child needs [Video]*. Chicago, IL: Robert R. McCormick Tribune Foundation.)

Common IMH Concepts

- Early development
- Attachment framework
- Focus on relationship
- Observation skills
- Reflective practice

Attachment Framework

Attachment

A reciprocal, profound, emotional and physical relationship between a child and his parent setting the stage for all future intimate, trusting relationships.

www.iamyourchild.org

Level 1 attachment:

Cycle of Need Year One

1. Need- Baby is hungry or wet or wants to be held
2. Reaction- Baby is angry, crying, or upset
3. Gratification- Baby's needs are met when she is fed, held or comforted.
4. Trust- Baby develops trust from having needs met.

Families Talk about : Bonding with your Baby- Video

(Sayre, J. (1996). *Families talk about: Bonding with your baby*. Marietta, GA: Active Parenting Publishers, Inc.)

Attachment in Level 2

- Discuss Attachment, Affiliation and Explorations Systems
- Describe Developmental Progression
- Introduce Secure-Insecure Patterns; Warning Flags & Indicators of Risk

The Developing Relationship

●Birth to 3 Months

CHILD

- Cries/Signals need
- Biologic preference for parent(s)
- Clinging/Molding

PARENT

- Recognizes signals/ Responds appropriately
- Maintains protective closeness
- Nurtures

●3-7 Months

CHILD

- Smiles and vocalizes
- Calms when comforted by parent(s)

PARENT

- Falls in love with the baby
- Provides comfort to child

●8-12 Months

CHILD

- Uses parent as secure base for exploration
- Experiences stranger/separation anxiety

PARENT

- Welcomes baby back/Celebrates accomplishments
- Respects baby's fears and need for closeness

●13 - 18 month

CHILD

- Explores their world
- Seeks parent support at times of uncertainty

PARENT

- Encourages exploration/Applauds child's efforts
- Interprets new/unfamiliar situations

●19-36 months

CHILD

- Becomes an individual
- Balances their wants/needs with caregiver desires
- Expands social circle

PARENT

- Provides opportunities to choose
- Sets appropriate limits
- Assists child in coping with range of emotions
- Support new friendships and experiences

Attachment in Level 3

- Discuss Systems & Developmental Progression
- Concept of “Working Model”
- Elaboration of Clinically significant patterns
- Attachment processes in assessment, diagnosis, & treatment

Enhancing Observation Skills (Weatherston, D. J. Infant mental health assessment through careful observation and listening: Unique training approaches. In J. D. Osofdky & H.E. Fitzgerald (Eds.), *WAIMH handbook of infant mental health: Vol 2. Early intervelntion, evaluation, and assessment* (pp. 119-156). New York: John Wiley & Sons, Inc.)

Getting in Tune-Video

(The Program for Infant Toddler Caregivers. (1990). Getting in tune: Creating nurturing relationships with infants and toddlers [Video]. Sacramento, CA: California Department of Education. www.pitc.org)

Signs of Problems in Baby

- Resists holding
- Clings unceasingly
- Cries uncontrollably for prolonged periods
- Failure to thrive
- Doesn't explore
- No preferred caregiver

Signs of Problems in Caregiver

- Rare eye contact
- Little physical contact
- Rarely speaks
- Angry and hostile
- No attempt to comfort or protect baby from harm
- Little interest in baby

- Joyless interactions

Observation in Level 2

Why Observe Parent-Child Interactions?

- Understand the emotional life of the parent and child
- Capture meaning from interactions
- Understand behavioral developmental capabilities
- Support developmental awareness
- Support responsiveness

What questions might you ask yourself as you observe?

- What am I seeing or hearing?
- What might the infant or toddler be feeling?
- What might the parent be feeling?
- What might be causing the infant or toddler's behavior?
- How is the parent responding?
- How am I, as the front-line caregiver, feeling about what I'm observing?

Observation in Level 3

- Observation is the key to understanding & assessing infants & their relationships
- Intensive training on observational categories & their inter-connections

Regulatory Functioning

- State regulation
 - state=continuum of alertness/arousal
 - quiet alert best for interaction & learning
- Can be soothed by others
- Shows effective self-soothing
- Uses language to self-regulate
- Persistence & frustration tolerance
- Aggression

Engagement

- Initial reaction to setting &/or strangers
 - Enters easily
 - Caution & wariness
 - Social referencing to family/ caregiver
- Quality of adjustment across time

- Quality of Relatedness to family/caregiver
- Reaction to & interest in play materials

Constitutional/Temperament

- Temperamental Qualities
 - Activity Level: overall, variability
 - Affect & Mood: modes, range, duration, intensity
 - Adaptability: Reactions to transitions, Approach/Withdrawal

Organization/Integration of Behavior

- Play
 - Developmental Structure
 - Dramatic Content: Emotional themes, Toy choices
- Goal-Directed Behavior/"Executive Function"
 - Planning & carrying out actions to solve problems

Reflective Practice

Reflective Practice in Level 1 Parallel Process

- "Do unto others as you would have them do unto others."
(*Jeree Pawl's Platinum Rule of Reflective Supervision*)

Reflective Practice in Level 2

- Examine thoughts and feelings
- Examine philosophical approach
- Broaden knowledge base
- Think of effective strategies
- Recognize, understand, and cope with challenges
- Experience respectful collaborative relationship with colleagues and supervisor

Reflective Practice

Reflect on your work with this family:

- What is it like to be this baby?
- What is it like to be this parent?
- How do you feel about the baby, parent, and their relationship?
- What personal challenges would working with this family bring up for you?
- What would be your next steps (i.e., referrals, consultation etc.)?

Reflective Practice

Reflect on your work with young children and their families:

- What is it like to be a child or family who receives your services?
- What is it like to provide these services?
- How do you feel about infusing an IMH approach into your work?
- What personal challenges would you face by integrating an IMH approach into your work?
- What are you going to do differently when you go back to work tomorrow (or next Monday)?

Reflective Practice & Supervision in Level 3

- Special challenges in work with infants & vulnerable families
- Power of Therapist feelings & Countertransference
- Secondary Traumatic Stress & Compassion Fatigue
- Issues in treatment termination

Reflective Supervision Provides:

- A safe place to express feelings
- An open space to consider options & alternatives
- A shared space to promote nurturance & prevent isolation

Community Stories

	Level 1	Level 2	Level 3
Palm Beach County	Frontline	Part C; Intensive Intermediate	Therapist
Miami-Dade County	Frontline	Part C	Therapist, Assessors
Tallahassee & North Florida		Part C	Therapist
Broward County	Frontline	Part C	Therapist