Foundations of Infant and Early Childhood Mental Health

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Our History

Founded by leading researchers, clinicians, and thinkers in the study of infancy and the early years, ZERO TO THREE is the foremost thought and practice leader in the field of early childhood development.

A national, nonprofit organization that informs, trains, and supports professionals, policy makers and parents in their efforts to improve the lives of infants and toddlers:

- Train professionals and build networks of leaders
- Influence policies and practices
- Raise public understanding of early childhood issues

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Learning Objectives

- Understand the definition of infant mental health
- Examine the importance of early experiences in supporting infant and early childhood mental health
- Discuss the importance of self-care when working with very young children and families

What does “mental health” have to do with babies?
Definition: Infant Mental Health

The developing capacity of a child to:

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

All in the context of family, community and cultural expectations for young children (ZERO TO THREE, 2001).

Mental Health Promotion

The Institute of Medicine (IOM) defines Mental Health Promotion as:

"Mental health promotion includes efforts to enhance individuals’ ability to achieve developmentally appropriate tasks (competence) and a positive sense of self-esteem, mastery, well-being, and social inclusion and to strengthen their ability to cope with adversity."

Past Experiences
Temperament/Personality

Current Stressors
Temperament/Personality

Development/Health
Stages of Parent Development

Gender
Race
Class
Education

Parent/Caregiver
Child

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Babies are by nature social creatures.

Research informs us that babies are social from the beginning:

1. Within 3 days of birth infants can tell the difference between people.
2. By 1 month, infants know which characteristics (voice, space, touch) go together with a certain person.
3. By 3 months, infants can tell the difference between voices and prefer those that are familiar.
4. By 4 months infants begin to form expectations about what their caregivers will be like—gentle and pleasant or upsetting and unavailable.

As babies, the way we are held, talked to, and cared for teaches us about who we are and how we are valued.

The “Responsive Dance”

- When I am distressed are my signals understood and responded to?
- What kind of responses can I anticipate?
- Will I feel better or worse as a result of the response I get?
- Which of the many signals I give get attention, and is it the kind of attention I want?

Definition of Attachment

Attachment is defined as the quality of the relationship. It is the connected, lasting, emotional bond a child has with a caregiver.

Attachment is NOT a sudden and magical bond, but rather a slow, social unfolding that requires the full participation of both parties.
Why is attachment important?

- Trust
- Learn
- Think
- Cope
- Develop Conscience
- Modulate emotions
- Become self reliant
- Develop future relationships

Attachment Patterns

<table>
<thead>
<tr>
<th>Attachment Classification</th>
<th>Caregiver is...</th>
<th>Child’s Patterns</th>
<th>Child’s Expectations Over Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secure</td>
<td>Sensible, responsive</td>
<td>Explores, seeks comfort when needed</td>
<td>Needs will be met consistently</td>
</tr>
<tr>
<td>Insecure-Avoidant</td>
<td>Distant, disengaged</td>
<td>Does not explore, shuts down</td>
<td>Needs will not be met</td>
</tr>
<tr>
<td>Insecure-Ambivalent</td>
<td>Inconsistent (sometimes sensitive/disengaged or neglectful)</td>
<td>Anxious, preoccupied with seeking caregiver's attention</td>
<td>Unsure of when needs will be met</td>
</tr>
<tr>
<td>Insecure-Disorganized</td>
<td>Frightened/Frightening</td>
<td>Stereotypic (head banging, arching, freezing or clinging)</td>
<td>Confused about how to get needs; may want to approach AND flee</td>
</tr>
</tbody>
</table>

Relationships Influence Lifelong Outcomes

(Source: Harvard Center on the Developing Child)
Individual differences are an integral component of babies’ functioning

Current stressors
- Changes in routine
- Violence in the home
- Unavailability or inconsistent availability of caregivers
- Intrusive caregiving
- Environmental stimuli
Temperament refers to the way individuals typically experience and react to their environment.

- Biologically based
- Consistent over time
- Influenced by environment and maturation

Every individual exists in a particular environmental context that deeply affects the person’s functioning.
Parent’s State of Mind

• Parent’s sensitivity and responsiveness key influence on child’s pattern of attachment
• Securely attached babies had sensitively responsive mothers
• Insecure-avoidant babies had rejecting and intrusive mothers
• Insecure-resistant babies had under-involved and unpredictable mothers

Parent/Caregiver’s Past Experiences

In every nursery there are ghosts. They are the visitors from the unremembered past of the parents, the uninvited guests at the christening. Under all favorable circumstances the unfriendly and unbidden spirits are banished from the nursery and return to their subterranean dwelling place. The baby makes his own imperative claim upon parental love and, in strict analogy with the fairy tales, the bonds of love protect the child and his parents against the intruders, the malevolent ghosts.

Selma Fraiberg (1975, p.387)

Stages of Parent Development (Galinsky, 1987)

Parent  | Child
--- | ---
Image-Making Stage | Prenatal
Nurturing Stage | Neonatal and infancy
Authority Stage | Toddlerhood
Interpretive | Preschool-Adolescence
Interdependent | Teen years
Departure | College/adulthood
Parent/Caregiver’s Current Stressors

- Physical Health
- Mental Health
- Poverty
- Quality of Relationships with Other Family/Friends
- Availability of Tangible Support
- Understanding of Child Development
- Experience of Oppression
- Fatigue

Goodness of Fit:

How compatible the demands and expectations of an environment and the people in it are with a person’s temperament, expectations, and other preferences. It also refers to how well an adult can recognize and respond or adapt to a child’s temperament.
Attachment, Stress, and IECMH

- The quality of the relationship between the parent/caregiver and the child directly impacts how children deal with stress.
- How children handle stress affects overall development, physical and mental health.

What is stress?

Stress is the physical and emotional response a person has to events or experiences.

The function of stress

- A small amount of stress reaction can be helpful.
  - Alert, focused, and poised
  - "Fight, flight, or freeze" response.
Attachment & Brain Development

- Very young children have limited ability to cope with stress and depend on adults to help them cope with stress.
- The part of the brain that controls reactions to stress (limbic system) is fully developed at birth. However, the forebrain, the part of the brain that controls thinking about feelings, memories, and experiences, is still maturing.

Attachment relationship facilitates the early growth of coping strategies to deal with novelty and stress.
Normal life stressors are not dangerous, and can be healthy for a developing brain.

**Examples**
- Having to wait for a moment for a bottle or breast-feeding.
- Tummy time — reaching for a toy, or learning to roll/crawl.

Children can experience tolerable stress that is time-limited without long-term developmental harm, if they are supported by nurturing, responsive caregiving relationships.

**Toxic Stress**
Toxic stress refers to the body’s stress response system being strongly activated over time.
Interventionists make an effort to understand how behaviors feel from the inside, not just how they look from the outside.

Behavior Communicates
Challenging Behavior: Any repeated pattern of behavior, or perception of behavior, that interferes with or is at risk of interfering with optimal learning or engagement in pro-social interactions with peers and adults. (CSEFEL)

The interventionist own feelings and behaviors have a major impact on the intervention.

Calming the Stress Response

What do you do to help yourself calm down from a stressful situation?
“If providers prioritize self-care, they are giving two gifts—one to themselves and one to the children in their care.”

(Rice & Groves, 2005, p. 49)

Stress Reduction Techniques

Consider the analogy of the whistling teapot:

What would YOU like to do to reduce your stress?

→ Let off steam (vent, de-stress)
→ Add water (replenish, relax, and self-care techniques)
→ Turn down the heat (reduce or manage the stress)

Breathing Exercise
Considerations for Intervention

Psychological Development in Early Childhood

Normal Anxieties/Fears

• Fear of Loss
• Fear of Losing Love and Approval
• Fear of Body Damage
• Fear of Internal “Badness”
  (Behavior vs. Self)
• Fear of Strangers

What Works?

✔ Encouraging Parental Motivation
✔ Partnerships between parent and interventionist
✔ Focus on parent-child relationship
✔ Emotional support
✔ Home visits
Evidence-Based Parent-Child Interventions

- Child-Parent Psychotherapy (CPP)
- Circle of Security
- Attachment and Biobehavioral Catch-Up (ABC)

Questions?

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Diagnosis: DC 0-5
References


