

Treating the Whole Child

Using relationship-based interventions

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Participants will:

- 01 Discuss how trauma impacts and is impacted by relationships.
- 02 Learn about the importance and necessity of dyadic-based strategies.
- 03 Review what to look for, noting what is concerning in the dyad and how it plays out (behaviors/body cues in both the child and adult).
- 04 Learn strategies to treat trauma by improving the health of the dyad.

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How trauma impacts and is impacted by relationships.

OBJECTIVE #1

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What is *Infant Mental Health*?

“The **developing capacity** of the child from **birth to five** to:

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

...ALL in the context of family, community, and cultural expectations.”

Adapted by Y.E.S. and WHIMH Alliance from a working definition developed by Zero to Three: National Center for Infants, Toddlers and Families – Infant Mental Health Task Force

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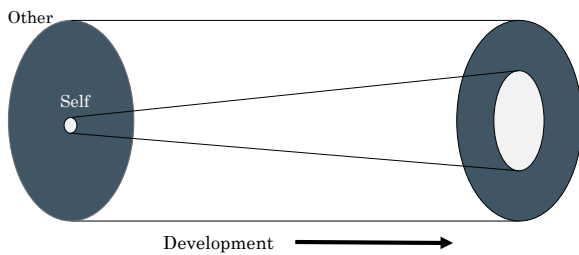
There is no such thing as “a baby.”

Donald Winnicott (1896-1971)

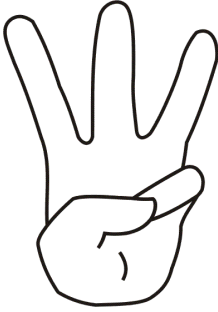


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Sameroff & Fiese, 2000



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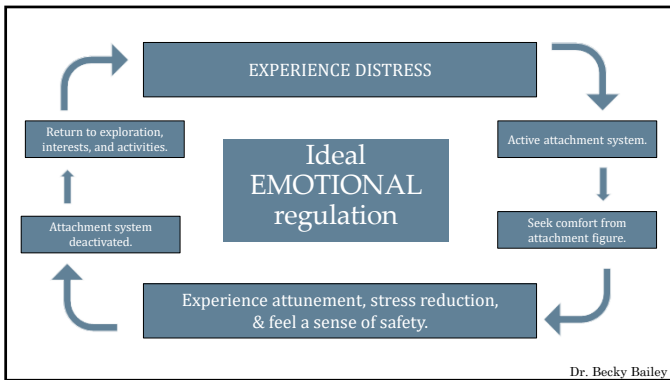


The Science of Attachment

- In humans, the attachment figure's internal state also regulates the child's internal state during most of the first **THREE** years of life.
- The health of that bond depends on the **caregivers'** attunement, emotional availability, continuity of care and responsiveness.

Dr. Becky Bailey

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What this looks like . . .

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"When children experience stable, nurturing relationships it fosters the development of healthy [neural] circuitry. And when children experience uncertainty or instability . . . it literally disrupts the circuitry in the brain's architecture as it is being built."

Jack P. Shonkoff, M.D.
Center on the Developing Child,
Harvard University

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First Relationships Confer:

Security- responsive caregiving provides a secure base from which to explore (Ainsworth, 1978)

- Capacity for empathy.
- Capacity to respect and value self and others.
- Templates for interacting with others.

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Attachment Styles

Are the lens through which we see the world. It provides for all of us our own internal working model of ourselves and others.

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CHILDS TERM	ADULT TERM
Secure / Autonomous	Secure / Autonomous
Anxious - Resistant	Preoccupied
Anxious - Avoidant	Dismissing
Disorganized	Unresolved / Fearful

Attachment Terminology

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Securely attached children develop a positive working model of themselves and have mental representations of others as being helpful while viewing themselves as worthy of respect (Jacobsen, & Hoffman, 1997).

Ambivalent children have a negative self-image and exaggerate their emotional responses as a way to gain attention (Kobak et al., 1993).

Avoidant children think themselves unworthy and unacceptable, caused by a rejecting primary caregiver (Larose, & Bernier, 2001).



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YouTube videos by Jacob Hamm

- A clinical psychologist, psychotherapist, researcher in psychotherapy and epigenetics, and trainer in traumatic stress.
- Assistant Professor in Psychiatry and Director of the Center for Child Trauma and Resilience at the Icahn School of Medicine at Mount Sinai in New York City and work out of Mount Sinai Beth Israel.
- www.drjacobhamm.com

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Possible effects of trauma on parenting

A personal history of trauma can:

- Compromise parents' ability to make appropriate decisions about their own and their children's safety.
- Interfere with their ability to form and maintain secure and trusting relationships (with their children, partners, and service providers).
- Impair parents' ability to regulate their emotions.
- Lead to maladaptive coping strategies including substance abuse.
- Cause parents to be triggered by their children's traumas and/or systems interventions.

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Practical Examples:

- Birth parents may not show up consistently or avoid time and experiences with their children because they are avoiding potential triggers.
- Parents might "blow up" when a teacher or other professional informs them of something that that occurred, that may have seemed insignificant or inconsequential to the other person.
- Parent may make poor behavioral and relationship choices that interfere with their child's progress.

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The importance and necessity of dyadic-based strategies

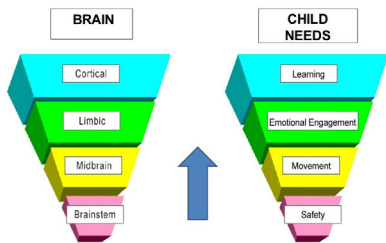
OBJECTIVE #2

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In order to heal a damaged or altered brain, interventions must target those portions of the brain that have been altered.

Bruce Perry, 2000

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Adapted from: McCaleb, M. & Mikaere-Wallis, N. Relationship-shaping: Teacher consistency and implications for brain development. *The First Years/Up3 Top* (Aotearoa New Zealand Infant and Toddler Education, 7(2), 21-25

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So what does this mean?

Children with insecure attachment, stress and/or trauma, by default have parents who are also struggling and hurting.

Therefore, relationships with parents of these children matters even more, but are more difficult to form and show progress.



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What to look for; noting what is concerning in the dyad and how it plays out (behaviors/body cues in both the child and adult).

OBJECTIVE #3

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Qualities to look for/assess

Emotional availability	Attunement
Joint attention	Co-regulation
Pulling in	Boundaries

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Video Samples
Compare & Contrast

<https://youtu.be/j9oTO6UheG4>

<https://youtu.be/hLK3ui2m61U>

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The Parallel Process



You need to be O.K.

To help the parent be O.K.

To help the child be O.K.

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Heal the parent
to heal the child.



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Strategies to treat
trauma by
improving the health
of the dyad.

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OBJECTIVE #4

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Core Components of Trauma-Focused, Evidence-Based Treatment

- Building a strong therapeutic relationship.
- Psycho-education about normal responses to trauma.
- Parent support, conjoint therapy, or parent training.
- Emotional expression and regulation skills.
- Anxiety management and relaxation skills.
- Trauma processing and integration.
- Personal safety training and other important empowerment activities.
- Resilience and closure.

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Child Parent Psychotherapy

- Sessions include child and caregiver(s) with therapist.
- Therapist attention is focused on the parent-child relationship.
- Therapist is attuned to the context of the relationship.

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How Does CPP Work?

- By supporting and strengthening the parent child relationship as a vehicle for restoring and protecting the child's mental health.
- By helping parent and child resolve shared trauma by creating a joint narrative (usually in play).
- By helping parent and child identify and address traumatic triggers that set off dysregulation of feelings and behavior.

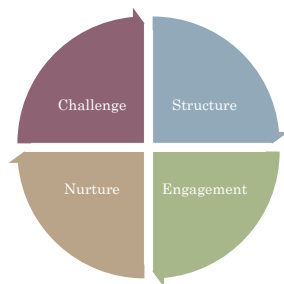
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Theraplay

- A child and family therapy for building and enhancing attachment, self-esteem, trust in others, and joyful engagement.
- Activities are meant to provide opportunities for **eye contact, shared enjoyment, playful interaction, and nurturing touch.**
- They are meant to allow the parent and child to develop memories of positive interactions, encourage trust, and allow them to relax with one another.

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Four Dimensions of Theraplay activities



Theraplay Activities

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Parent Child Interaction Therapy

- Sessions include both child and caregiver(s) and consist of 2 phases.
 - **Child Directed Interaction:** Therapist attention is focused on increasing positive interactions between the caregiver and child.
 - **Parent Directed Interaction:** Therapist attention is focused on increasing caregiver use of effective and consistent discipline.
- The caregiver wears a "bug-in-the-ear" device and the therapist coaches the dyad during real time interactions through a one-way mirror.

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How Does PCIT Work?

- By teaching caregivers specific skills to establish or strengthen a nurturing and secure relationship with the child.
- By encouraging prosocial behavior and discouraging negative behavior.
- By increasing the positive interactions and restructuring the parent child relationship.
- By teaching parents the delivery of effective commands and appropriate parent response for child compliance.



[PRIDE Skills Sample](#)

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References

Parent-Child Interaction Therapy with Toddlers; Improving Attachment and Emotion Regulation
 • Dr. Emma Girard, N. Wallace, J. Kohlhoff, S. Morgan, McNeil

Don't Hit My Mommy
 • Dr. Alicia Lieberman

Managing Emotional Mayhem
 • Dr. Becky Bailey

Baby Doll Circle Time
 • Dr. Becky Bailey

Whole Brain Child
 • Dr. Dan Siegel

Parenting from the Inside Out
 • Dr. Dan Siegel

Brain Rules for Baby
 • Dr. John Medina

Devereux Center for Resilient Children

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Nebraska Resources Project for Vulnerable Young Children (NRPVYC) Classroom:
<https://classroom.nebraskababies.com/>

Finding a CPP or PCIT Therapist:
<https://www.nebraskababies.com/ecmh>

Resources
