

What To Look for in Relationships

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2021 Tennessee CASA Conference
April 16, 2021; 9:00 – 10:15 am

This presentation will focus on the importance of understanding the caregiver-child relationship in the context of child welfare. Discussion will include how children develop in the context of relationships and how these relationships are impacted by trauma and stress. Participants will be provided with a practical tool, What To Look For In Relationships, that can aid in the identification of strengths and weaknesses in caregiver-child relationships.

Objectives:

- 1) Understand the impact of trauma and stress on relationships.
- 2) Recognize strengths in relationships.
- 3) Recognize concerns in relationships.

Assessment (observation) from the beginning of child welfare involvement is central to the outcome.

Observation...

- Determines necessary intervention that supports reunification without recidivism.
- Allows monitoring of the intervention's impact on caregiver(s) and child.
- Supports permanency planning and decision making

With the knowledge that, from the beginning, all individuals involved have received optimal supports.



What to Look for In Relationships:

In child welfare, we support parents (in the context of family, culture, and community) to:

- Recognize their child's needs and respond in a sensitive manner.
 - See their child as an individual.
 - Be able to take their child's perspective.
 - Take appropriate responsibility and describe how they can keep their baby safe.
 - Seeks and uses resources.
 - Take steps to demonstrate change.

Infant mental health refers to the capacity of children (in the context of family, community, and culture) to:

- Form close and secure interpersonal relationships.
- Experience, regulate, and express emotions
 - Recognizing that young children have big feelings and require co-regulation.
- Explore the environment and learn.
- Observe within context of different relationships across time

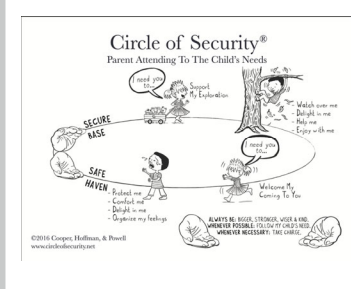


Attachment is a specific type of relationship.

Attachment is "an enduring emotional bond characterized by a tendency to seek and maintain proximity to a specific figure." (Bowlby, 1977).

"Attachment behavior is any form of behavior that results in a person attaining or maintaining proximity to a clearly identified individual who is conceived as better able to cope with the world" (Bowlby, 1988)

The primary purpose of attachment is felt security



Development of Attachment



- Pre-Attachment (Birth to ~ two months)
- Attachment in the Making (2 months to ~ 7 months)
- Focused Attachment (Begins at ~7 months to ~ 18 – 24 months)
- Formation of a Reciprocal Relationship/Goal Corrected Partnership (Begins at ~ 3 years)

Children Grow in the Context of Relationships: Functions of Attachment

Young children use the attachment with primary caregivers:

- To help calm/regulate themselves
Co-regulation leads to self-regulation
- To organize their responses to danger and stress
- As a secure base for healthy exploration and learning/social referencing
- To form internal working models
 - Of the self (Am I worthy of love?)
 - Of relationships (Can I trust others?)
 - Of the world (Is the world a safe place?)
- To learn socially/culturally accepted behaviors



Definition of Trauma in Infancy & Early Childhood

Trauma is an exceptional experience in which powerful and dangerous stimuli overwhelm the child's developmental and regulatory capacity.

- Stress response is activated

Loss of caregiver as a "protective shield"

- Loss of sense of security

Slide credit: UCSF: CPP Dissemination Team



Organizing experience:
Moving towards



Disorganizing
experience:
Moving away

Trauma & Attachment: The Impossible Dilemma:

The person who is supposed to keep you safe is the person who has hurt you, not protected you, or does not seem able to keep you safe.

This may impact how you interact with them and how you interact with others

Impact of Trauma on Child-Caregiver Relationship



- Loss of sense of security
- Changes parent's and child's view of each other
 - Either partner may develop attributions of self and other based on trauma experience.
 - Victim
 - Persecutor
 - Non-helpful bystander
- Caregiver's and child's affect regulation may be impaired by post-traumatic symptoms and/or continuing reminders
 - Impacts developing capacity for co-regulation

Slide credit: UCSF: CPP Dissemination Team

When Does Memory Start?

It depends on the type of memory

- Explicit: can be called to mind, expressed in words, and has a historical time frame
 - Develops with language (about the age of 1); rare to maintain before age 3
- Implicit/procedural: unconscious and nonverbal body & emotional memories
 - Sensory memories of frightening events (without verbal integration): explains reactions to triggers



<https://www.youtube.com/watch?v=1dP3dP3dP3d> (1:40 - 3:38)

What To Look for in Relationships

Recognizing trauma/attachment disruption in infancy and early childhood



Understanding What You Observe



Leakey & Heffron

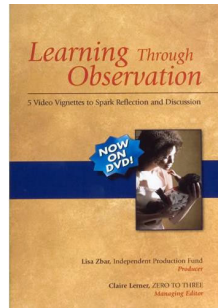
Observation Guidelines

- Practice reflection (self and other awareness)
- Use multiple lenses: development, culture, attachment, trauma
- Don't target for change what you don't understand
- If you don't understand someone's behavior you don't have enough history (Brandt Steele)
- What you don't ask, you won't know
- All behavior has meaning (multi-finality and equifinality)
- Strive for a realistic picture (challenges and strengths)
- Observation should occur over time, across settings, and across caregivers
- Observation is an ongoing process



Reflective Questions To Guide Observation

- What is my initial reaction?
- What are my thoughts/feelings?
- With whom do I identify?
- Does this situation remind me of a situation in my personal life?
- Am I having especially strong feelings in this situation?
- Do I act/feel differently with this family than I generally act/feel?
- What are my expectations of myself in working with this family?
- What am I taking for granted?
- What more do I need to know?
- What is the caregiver's state of mind?
- What is the child's state of mind?
- How may your presence/the assessment impact the caregiver and the child?



DIVERSITY-INFORMED TENETS FOR WORK WITH INFANTS, CHILDREN AND FAMILIES

Young Hearts Foundation Professional Development Network Tenets Working Group



CENTRAL PRINCIPLE FOR DIVERSITY-INFORMED PRACTICE

1. Self-awareness leads to better services for families. Working with infants, children, and families requires all individuals, organizations, and systems of care to reflect on our own culture, values and beliefs, and on the impact that racism, classism, sexism, ableism, homophobia, xenophobia, and other systems of oppression have had on our client families to provide diversity informed, culturally attuned care.

2. Challenge Children's Rights. Children's rights and children are critical to the work. The global community is responsible for supporting parents' caregivers, families, and local communities in nurturing, protecting, and nurturing them.

3. Work to Acknowledge Privilege and Combat Discrimination. Discriminatory policies and practices that harm adults harm the infants and children in their care. Privilege constitutes resistance. Diversity informed practitioners acknowledge privilege where the lack of, and work to mitigate, inequities. We combat racism, classism, sexism, ableism, homophobia, xenophobia, and other systems of oppression within ourselves, our practices, and our field.

4. Recognize and Respect the Overlooked Bodies of Knowledge. Diversity informed practice recognizes non-dominant ways of knowing, bodies of knowledge, sources of strength, and routes to healing within all families and communities.

5. Honor Diverse Family Structures. Families decide who is included and how they are structured. In particular, family consultation or organization is inherently optimal compared to any other. Diversity informed practice recognizes and respects the integral role of extended family and community. We honor the integral role of extended family and community. We honor the integral role of extended family and community. We honor the integral role of extended family and community.

THE TENETS
YOUNG HEARTS FOUNDATION
June 2020

Diversity-Informed Tenets for Work with Infants, Children, & Their Families

From: DC:0-5™ :

- Mainstream attitudes may not be shared by the family. Watch for:
 - Mis-interpretation
 - Overlooking because of cultural relativism

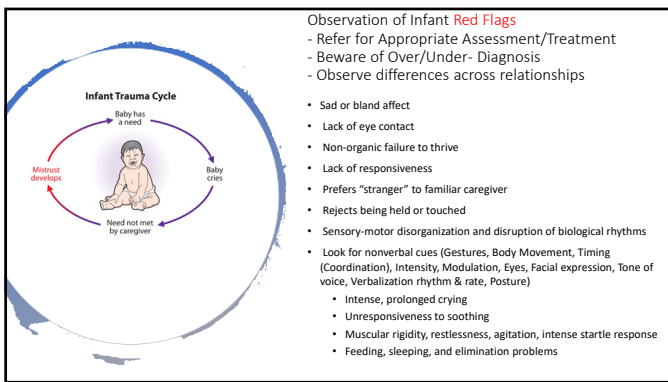
Tenet #4: Recognize and Respect Non-Dominant Bodies of Knowledge

(Leakey & Heffron; Larrieu; Lillas)

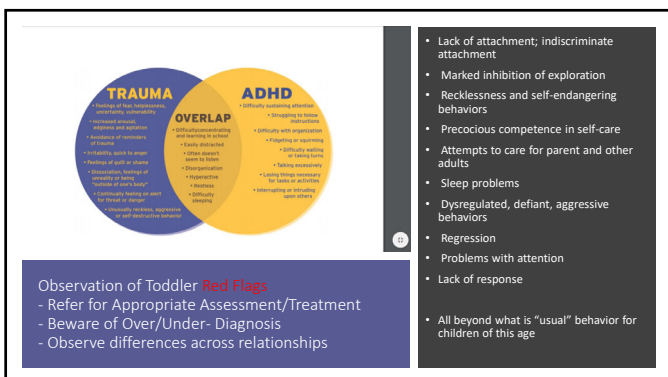
Be a sensory detective

<https://www.youtube.com/watch?v=iYyEEMIMMb0&list=PLGWTpk2zz7XNBQ7ieuoG7Z5Kqrg2xDQho&index=33> (7:25 – 10:57)

- Toddlers and preschoolers communicate through words, behavior, play, and affect



- Observation of Infant **Red Flags**
- Refer for Appropriate Assessment/Treatment
- Beware of Over/Under- Diagnosis
- Observe differences across relationships
- Sad or bland affect
- Lack of eye contact
- Non-organic failure to thrive
- Lack of responsiveness
- Prefers "stranger" to familiar caregiver
- Rejects being held or touched
- Sensory-motor disorganization and disruption of biological rhythms
- Look for nonverbal cues (Gestures, Body Movement, Timing (Coordination), Intensity, Modulation, Eyes, Facial expression, Tone of voice, Verbalization/rhythm & rate, Posture)
 - Intense, prolonged crying
 - Unresponsiveness to soothing
 - Muscular rigidity, restlessness, agitation, intense startle response
 - Feeding, sleeping, and elimination problems



- Lack of attachment; indiscriminate attachment
 - Marked inhibition of exploration
 - Recklessness and self-endangering behaviors
 - Precocious competence in self-care
 - Attempts to care for parent and other adults
 - Sleep problems
 - Dysregulated, defiant, aggressive behaviors
 - Regression
 - Problems with attention
 - Lack of response
- All beyond what is "usual" behavior for children of this age

What To Look for in Relationships

(Osofsky et al., 2019)

Observational assessments are a key component for understanding behaviors and emotions that contribute to the young child-caregiver relationship. Given the importance of observational assessments and the skill and experience that is required to learn to do them the *What to Look for in Relationships* (WLR) scale was developed to provide a guide for professionals from different disciplines. The goal was to help observers increase their skills in evaluating caregiver-child interactions systematically and reliably.



Joy D. Osofsky, PhD
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LSU Health New Orleans

Questions to Guide Understanding Relationships

Track both caregiver's and child's behavior closely (watching your own reactions)

Observe their interactions and their impact on one another

Observe who moves the interaction forward

Observe who holds the responsibility for recovery from distress in the dyad

What do we know about the quality of the relationship – and how do we know it?

What are the dyad's strengths?

Slide credit: Osofsky, Lieberman, Van Horn

Throughout the Observation, Notice...

For both caregiver and child

- Expression of emotion
 - Positive (to the other/to the situation)
 - Negative (to the other/to the situation)
 - Depression
 - Irritability
 - Anger/Hostility
 - Anxiety
- Caregiver's ability to "be with" emotion; child's ability to use caregiver for co-regulation

Throughout the Observation, Notice...

For caregiver:

- Emotional and behavioral sensitivity and responsivity
- Sensitivity: knowledge of child's needs
- Responsivity: actions to meet child's needs

For child

- Attachment behaviors
 - Use of secure base for proximity seeking and exploration
 - Physical (proximity seeking, gesturing), visual (referencing, eye contact), vocal (verbalizing, conversation)
 - Will be most prevalent during times of stress (separation/reunion)

WHAT TO LOOK FOR IN RELATIONSHIPS (Ososky, et al., 2019)

Caregiver-Child Engagement (How well does the parent/caregiver build a relationship) Positivity, Engagement, and Helpfulness	Observed NONE of the time	Observed SOME of the time	Observed MOST of the time
Caregiver responds positively to child's attempts at engaging using child-friendly tone of voice, physical or verbal demonstration of affection	0	1	2
Mutual positive engagement and affect (emotions) between child and caregiver such as smiling at each other, laughing together	0	1	2
Interaction between caregiver and child during play (vs. parallel play)	0	1	2
Caregiver expands child's play themes such as scaffolding (helping to support and build), encouraging imaginary play	0	1	2
Caregiver is helpful and aware of child's developmental needs	0	1	2
Caregiver uses praise	0	1	2
Caregiver models for the child	0	1	2
Caregiver scaffolds and helps the child learn	0	1	2
Caregiver gives age-appropriate assistance to child	0	1	2

WHAT TO LOOK FOR IN RELATIONSHIPS (Ososky, et al., 2019)

Caregiver Intrusiveness/Lack of Awareness Caregiver Intrusive Behavior and Lack of Awareness of Child's Developmental Needs	Observed NONE of the time	Observed SOME of the time	Observed MOST of the time
Caregiver is physically intrusive (physically in child's face, takes over for child, gives unwanted kisses, or takes over the child's play)	2	1	0
Caregiver is intrusive in play by being directive and ignoring the child's initiative or preferences	2	1	0
Caregiver does not allow child to work independently according to child's ability	2	1	0
Caregiver is rigid and directive in how child should play	2	1	0
Caregiver is verbally intrusive (repeats directions, talks and does not listen to child, or is not helpful to child)	2	1	0
Caregiver does not allow child to choose or explore toys or ways to play with toys	2	1	0
Caregiver directs play below or above child's developmental level	2	1	0
Caregiver handles child harshly	2	1	0

WHAT TO LOOK FOR IN RELATIONSHIPS (Ososky, et al., 2019)

Child's Negativity Child's Negativity toward Caregiver	Observed NONE of the time	Observed SOME of the time	Observed MOST of the time
Child maintains physical distance from caregiver	2	1	0
Child rejects caregiver's attempts to engage in play	2	1	0
Child is non-compliant	2	1	0
Child is aggressive toward caregiver or toys	2	1	0
Child acts negatively toward caregiver	2	1	0

WHAT TO LOOK FOR IN RELATIONSHIPS (Ososky, et al., 2019)

Caregiver Rejection Caregiver Harshness, Hostility, and Rejection	Observed NONE of the time	Observed SOME of the time	Observed MOST of the time
Caregiver teases child or frightens him with toys, mocks distress	2	1	0
Caregiver speaks to child in harsh tone	2	1	0
Caregiver is rejecting toward child	2	1	0

WHAT TO LOOK FOR IN RELATIONSHIPS (Ososky, et al., 2019)

Additional Questions for Separation and Reunion Observation

Separation and Reunion

Separation responses provide useful information about the parent/caregiver-child relationship. The following subscale is an extension of the *Clinical Rating of Interaction Scale* and may be used to rate the quality of parent/caregiver-child separation and reunification tasks if desired.

Separation

Caregiver's response to separation (if observed):

What child does during separation:



Professor Everett Waters
Ralph H. Horowitz Professor of Psychology
© 2011 Separation, Reunion, Avoidant & Ambivalent Attachment in Mothers & Babies. YouTube

WHAT TO LOOK FOR IN RELATIONSHIPS (Osofsky, et al., 2019)

Reunion: Acceptance Child's Openness to Caregiver, Acceptance	Yes	No	Not Applied
Child looks to caregiver for approval, to show toys, to engage	0	1	NA
Child seeks physical closeness with caregiver	0	1	NA
Child smiles at caregiver	0	1	NA
Reunion: Child's Rejection Child Rejects Caregiver's Return	Yes	No	Not Applied
Turns away from caregiver	1	0	NA
Expresses anger toward caregiver (verbal or nonverbal)	1	0	NA
Resists caregiver's approach	1	0	NA

WHAT TO LOOK FOR IN RELATIONSHIPS (Osofsky, et al., 2019)

Reunion: Interaction Caregiver-Child Interaction	Yes	No	Not Applied
Caregiver picks up child (if child wants to be picked up)	0	1	NA
Caregiver picks up child (if child does not want to be picked up)	1	0	NA
Child reaches for caregiver	0	1	NA
Child calms when held (if distressed)	0	1	NA
Reunion: Play Caregiver-Child Play	Yes	No	Not Applied
Child returns to play alone	1	0	NA
Child shows caregiver what they have been doing	0	1	NA
Child invites caregiver to play	0	1	NA
Caregiver returns to play with child (if child wants to play)	0	1	NA

Reflections

How are you feeling?
 Did you learn something new?
 What questions do you have?
 What do you want to learn more about?
 Based on today's discussion, will you change your practice? If yes, how?

We do not learn from
experience... we learn
from reflecting on
experience.

~ John Dewey
