



UAIMH NEWSLETTER

Utah Association for Infant Mental Health
Issue 3 – January 2004

President's Corner

**“Prediction is very difficult,
especially about the future.”**

Niels Bohr, physicist

I have had the good fortune to travel across Utah over the last 11 years, witnessing work, teaching and supervising mental health workers from community mental health centers, early intervention programs and child welfare.

In January of this year, I was delighted to share in a community's efforts to help a faltering family. A mother with learning disabilities and depression had been referred to protective services for neglect of her one- and three-year-old boys. The agencies in this small community had teamed together to intervene.

There was a home visitor twice a week to help the mother develop better skills. The delayed one-year-old was receiving early intervention services. The three-year-old was in special education for his language delays and disruptive behavior, and was also being seen by a mental health therapist. The mother was in treatment for her depression and a social worker was meeting in the home with the mother, the estranged father and the children to help mend the family interactions. In my wildest fantasies, I would only hope for a scattering of these services for one family with young children.

Here in a town whose greatest resource is a true commitment to families, an incredible effort is in process that will impact these children's lives. This community also recognizes that these children will be its future. We may come from many different backgrounds, but we are heading toward the same future—and indeed, giving birth, rearing, and nurturing that future together. The field of infant and toddler mental health embraces this concept, with the knowledge that we can predict disaster if we don't act on the behalf of our babies. My thanks to all the efforts of our members to work for a future that is unpredictable, but precious.

Kristina Hindert, MD, UAIMH President

News from UAIMH

UAIMH is growing and expanding! We currently have 77 members and hope to expand our membership even further in 2004 to improve options for Infant Mental Health in Utah. Benefits of membership will increase over the next few months. Already, UAIMH offers a discount to members for the upcoming **Bridging the Gap Conference** at the Salt Lake City Library, February 4-6, 2004. We will also have a **UAIMH Lunch Meeting** on Friday, February 6. Meet us at the UAIMH presentation table after the morning session. **Don't miss this opportunity!**

Recently, UAIMH became an official affiliate of the **World Association for Infant Mental Health (WAIMH)**. Janet Wade attended the affiliates' meeting at the WAIMH 9th World Congress. Utah was officially welcomed as an affiliate and commended on the thoroughness of their affiliate application. The new WAIMH president, Tuula Tamminen, pledged to devote more time to supporting affiliates. Please visit the web site <http://www.waimh.org/> to find out more about the World Association for Infant Mental Health and benefits of membership.

At the WAIMH Congress, Janet displayed the **State Practice Model for Supporting the Mental Health of Children 0-5**. The timeline for this model was part of the Poster Presentation and provides an overview of the effort that has gone into the practice model development. All countries seem to be faced with the difficulties of developing systems of care.

Janet Wade & Ilse de Koeper

Intervention in Utah

Touchpoints

The **Touchpoints™** Site at the Hope Institute at Utah State University has recently been funded by the George S. and Dolores Doré Eccles Foundation. Through Spring 2004, training in Touchpoints™ will be conducted for the Early Head Start programs in Utah and their Early Intervention and Child Care partners. The plan for the future includes all Early Intervention programs, Head Starts, and other early childhood programs throughout the state.

Touchpoints™ is a preventive, community-based child wellness program modeled after a nationwide project developed by world-renowned pediatrician, author and lecturer, **T. Berry Brazelton, M.D.** from the Children's Hospital in Boston and Harvard University. In Dr. Brazelton's own words,

"Touchpoints is a model for preventive care that focuses on the relationship between providers and parents. I believe that establishing, maintaining, and valuing this relationship is the basis of preventive care and helps strengthen families. And, when we strengthen families, we ultimately strengthen the community." (From: "Connections," The Quarterly Newsletter of Brazelton Touchpoints Center)

"Touchpoints" in a child's development can be defined as "those predictable times that occur just before a surge of rapid growth in any line of development—motor, cognitive, or emotional—when, for a short time, the child's behavior falls apart." These touchpoints can be seen as points of change for the child and the family. By forming an alliance with parents on behalf of their child, the Touchpoints™ model provides a framework for behavioral and developmental intervention. This formation and use of an alliance with parents is a process that requires knowledge, care and judgment.

The Touchpoints™ approach assists parents in anticipating and understanding changes or touchpoints in children's behaviors – from colic to toilet training to language development and other common milestones or developmental touchpoints -- so that the duration and severity of problems during any given stage of development can be significantly reduced.

Touchpoints are points not only in a child's life,

but also in an adult's life when changes are occurring and the individual or family is open to connecting with community services and resources. Through support, providers can help parents anticipate predictable behaviors and plan for reasonable responses. By combining relationship-building with child development information, parent-provider partnerships become opportunities for shared solutions. Parents and providers can work together to create a nurturing environment that supports each child's development. The Touchpoints™ model truly fosters the principle in which we all believe – "Parents are the expert of their child."

Our goal at Utah's Touchpoints™ Site is that parents everywhere work with supportive providers, feel confident in their parenting roles, and form strong, resilient attachments with their children. To help achieve this goal, providers must be responsive to parents, knowledgeable about child development, and eager to see every parent succeed.

We are very excited to begin the Touchpoints™ training and we look forward to developing further collaborative partnerships with organizations throughout the state as we create together – Utah, a Touchpoints™ Trained State.

For further information please contact Aziele Jensen, Touchpoints™ Coordinator, at 435-797-0986 or ajenson@cc.usu.edu or Kathryn Bell, Touchpoints™ Training Specialist, at 801-226-0901 or kathrynsbell@aol.com. You can also visit our web site at www.hope.usu.edu or the Brazelton Touchpoints Center website at www.touchpoints.org.

Aziele Jensen, M.Ed.

Additional Resource

Brazelton, T.B. (1992). *Touchpoints: The Essential Reference. Your child's emotional and behavioral development.* Reading, Massachusetts: Perseus Books.

Research Report

The Mother-Infant Dance: Dr. Beatrice Beebe's Research

Dr. Beatrice Beebe has been a researcher of mother-infant communication for 30 years. She started her career working with Daniel Stern and since then has contributed a great deal to our knowledge about infant mental health. She has also integrated her work with mothers and infants into her psychoanalytic work with adults (Beebe &

Lachmann, 2002). Dr. Beebe will present her work at the upcoming **Bridging the Gap Conference**, February 4 – 6, 2004. (See Mark Your Calendars section of this newsletter.)

In Dr. Beebe's view, mother-infant communication is always co-regulated (Fogel, 1993). All behavior that is unfolding in one individual (e.g., the mother) is simultaneously modifying *and* being modified by the continuously changing behavior of the partner (e.g., the baby). To understand patterns of mother-infant interaction, it is important to look at this process of mutual regulation.

In her 2000 article, "Co-constructing Mother-Infant Distress," Dr. Beebe addresses the subtle dance of interaction between mothers and infants. Specifically, she focuses on issues of synchronized movement, maternal intrusiveness, and infant avoidance. Dr. Beebe looks at this interaction through face-to-face play between mothers and babies in the first year of life. Dr. Beebe asks the mother to sit down facing her infant, who is sitting in an infant seat. The mother is instructed to play with her infant as she would at home, and the two are left alone to interact. This sequence is recorded on videotape, carefully observed, and then coded frame-by-frame. Observers note subtle changes in communicative behavior (e.g., smiling, gaze shifting, or head turning).

Results from these analyses show that within both positive and distressed interactions, each person's behavior can be used to predict that of the other. In other words, mother and infant are tracking the other's timing, responding to spatial orientation, and moving toward the same affective expression by increasing or decreasing their facial-visual engagement. The mother- infant dyad co-regulates in a continuously flowing dance of interaction. For example, in "facial mirroring" the mother and baby reflect each other's facial expressions within split-seconds. Another situation occurs when the mother "looms" with her gaze into the baby's face. Before the loom is completed, the infant moves his/her head back and then away. The mother then "chases" by moving her head and body toward her infant. As soon as she begins to chase the baby's head movement, the infant begins to move his head still further away at the very same time. Dr. Beebe calls this the "chase-and-dodge" pattern. These sequences occur with split-second responses, with the infant beginning to move before the mother finishes looming and dodging as the mother begins chasing.

Dr. Beebe's research shows that negative interactions are just as co-constructed as positive

ones. Each individual's behavior is predicted by that of his/ her partner. On a split-second level, mother and baby are reciprocating each other's behavior and thus remain intimately related. It is consequently misleading to describe the child as avoiding, withdrawing or disengaging, and it is also inaccurate to call the mother intruding or impinging - each movement is in response to one made by the other.

These rich descriptions of subtle mother-infant patterns of mutual regulation are not only interesting from a research perspective, but also extremely relevant for clinical practice. Dr. Beebe successfully uses her research as a basis for clinical intervention with troubled mother-infant dyads. She will elaborate on this topic during the upcoming **Bridging the Gap Conference**.

Kim DeRushia & Ilse de Koeeyer, University of Utah

References

- Beebe, B. (2000). Co-constructing mother-infant distress: The microsynchrony of maternal impingement and infant avoidance in the face-to-face encounter. *Psychoanalytic Inquiry*, 20 (3), pp. 421-440.
- Beebe, B., & Lachmann, F.M. (2002). *Infant research and adult treatment: Co-constructing interactions*. Hillsdale, NJ: The Analytic Press.
- Fogel, A. (1993). *Developing through relationships: Origins of communication, self, and culture*. Chicago: The University of Chicago Press.

Book Review

Infant and Toddler Mental Health: Models of Clinical Intervention with Infants and Their Families

J. Martin Maldonado-Duran, M.D. (Ed.). (2002)
American Psychiatric Publishing Inc.

At a recent infant mental health conference in Phoenix, Arizona, I had the good fortune of meeting **Dr. J. Martin Maldonado-Duran**, the editor of *Infant and Toddler Mental Health: Models of Clinical Intervention with Infants and their Families*. Dr. Duran is a psychiatrist specializing in childhood mental illness and infant and child development. He previously worked at the Menninger Clinic and is now at the Family Service and Guidance Center in Topeka, Kansas. He is also an Adjunct Professor for Infant Psychopathology at Kansas State University, and a Clinical Professor at the University of Kansas. Dr. Duran is only one of 30 leaders chosen for the "Leader for the 21st Century" fellowship by "Zero to

Three.” He is also the president of the Kansas Association for Infant Mental Health. He earned his medical degree from Escuela Superior de Medicina del Instituto Politécnico Nacional in 1977. Dr. Duran has worked extensively with young children and their families in clinical settings, and is published widely. He has co-edited two books in Spanish on themes of infant and child mental health that have been published in Latin America.

I had attended Dr. Duran’s workshops during the conference, and we ended up sharing a car back to the airport. During our car ride, Dr. Duran explained that his intent with the new book was to provide clinicians with a resource that contained specific methods for assessing and treating infants, young children, and their families. Within one impressive volume, Dr. Duran accomplished this goal. Dr. Duran called on several esteemed colleagues to contribute to the book, including Alicia Lieberman, Peter Fonagy, Klaus Minde, Elizabeth Fivaz-Depeursinge, and the late Serge Lebovici, just to name a few. The result is fourteen chapters written by actual clinicians working with infants and children and their families.

The main focus of the book is on methods and techniques of clinical intervention with babies, toddlers, and young children facing emotional and behavioral challenges. In Dr. Duran’s words: “Presenting clinical models of treatment and work with actual babies and families is a difficult endeavor; the idea is not to produce a ‘cookbook’ with prescriptions for what to do in all situations. Rather, the authors have attempted to illustrate their way of thinking, how they understand the problem presented by the child and family, and how they go about trying to help in that situation” (p. xvi).

The book is broken down into four sections: *Theoretical Framework*, *Therapeutic Approaches to Relationships and Their Disturbances*, *Therapeutic Approaches to Psychophysiological Disturbances*, and finally, *Illustrative Case Examples*. True to an infant mental health model, the book presents the reader with a diversity of theories and approaches to clinical work. The authors come from a variety of ethnic and cultural backgrounds, many of them living in other countries, such as Argentina, Japan, and France.

The first section, *Theoretical Framework*, sets the tone for later chapters of the book. It describes the theoretical background for understanding infant mental health and the way an infant mental health specialist conceptualizes troubled young children, their families, and approaches to intervention.

The second section, *Therapeutic Approaches to Relationship Disturbances*, begins to present the reader with more detailed information about interventions with troubled babies, toddlers, and families. Case scenarios are abundant within this section, and help the reader relate to his or her own work with this population. Of particular interest to me in this section was Alicia Lieberman’s article, “Treatment of Attachment Disorders in Infant-Parent Psychotherapy.” While there is a great deal written about attachment theory and research, information about the application of attachment theory and concepts has been more difficult to come by. Dr. Lieberman provides a well-written chapter illustrating her approach of providing a “corrective attachment experience” in her work with a vulnerable family. The late Serge Lebovici also provides a compelling chapter on “The Therapeutic Consultation” wherein he discusses concepts such as the use of the “sacred moment” and “enaction” in therapy sessions. This chapter is a must-read for anyone who is particularly interested in psychodynamic theory and its application.

The third section of the book on treating psychophysiological disturbances provides a wealth of information on ways to treat excessive and persistent crying, eating and feeding disturbances, and sleep disorders in infants and young children. I found this section to be particularly useful, as these types of problems regularly arise in work with very young children. In two chapters of this section, Dr. Duran comprehensively addresses crying and eating problems, while Klaus Minde, a renowned expert on sleep, deals with the issue of treating sleep disorders. These chapters are particularly helpful because they give clinicians specific ideas on how to address these psychophysiological problems in therapy. I personally have already started to implement these models in my everyday clinical work.

The final section of the book contains two chapters of case examples that are presented and then discussed by a team of expert clinicians from the infant mental health field. The first chapter is entitled “A 3-Year Old Monster,” and describes a case about a three-year-old child presenting with special needs and behavioral and emotional problems within the context of an at-risk family. The second case example deals with physical abuse and neglect in the first six months of life, and how parent-infant psychotherapy is approached in this situation. The expert consultants provide the reader with a wide range of approaches and ideas on how to work with the

difficult situations presented in the text.

Much like Charlie Zeanah's *Handbook of Infant Mental Health*, Dr. Duran's *Infant and Toddler Mental Health* is an important body of work that deserves to be a regular reference for clinicians working in the field. The applicability of the contents is the strength of the book, and I highly recommend it to anyone interested in the field of clinical work with infants and toddlers. When I met Dr. Duran, he inspired me greatly with his vast knowledge, passion, and kindness. His book has proven to be an extension of his commitment to vulnerable babies, toddlers, and their families, and it continues to inspire my work with this same population.

Nick Tsandes, LCSW
UAIMH President-Elect

Mark Your Calendars

Upcoming Conferences

- Fifth Annual **Bridging the Gap Conference, February 4-6, 2004, at the Salt Lake City Library, 210 East 400 South.** The focus of this conference will be on the *Clinical Application of Attachment Theory and Research*. On Wednesday afternoon, **Dr. David Oppenheim** and **Dr. Douglas Goldsmith** will make a presentation on "Attachment and Foster Care." On Thursday, **Dr. Mary Target** will present on "Attachment Across the Lifespan," and on Friday, **Dr. Beatrice Beebe** will present on "Infant-Parent Psychotherapy." There will be a **discount for UAIMH members**. For more information, please contact Nick Tsandes, 582-5534, or nick@tccslc.org.
- The 14th Biennial Conference of the **Society for Research in Human Development (SRHD)** will be held **April 1-3, 2004** at the **Yarrow Hotel in Park City, Utah.** On **Friday, April 2, Robert Emde, MD**, will make a keynote presentation on:
Infant Mental Health and Beyond: Diagnosis, Dilemmas and Frontiers
Time: TBA
Cost: \$30 - includes full day of conference and keynote reception

Dr. Emde is Director of the Program for Early Development Studies in the Department of

Psychiatry at the Colorado Health Science Center in Denver, Colorado. Dr Emde was the President of the World Association on Infant Mental Health and the Society for Research in Child Development. Dr Emde is well-published on issues related to infant mental health.

For more information on the **Society for Research in Human Development Biennial Conference**, please go to the website: <http://www.fcs.iastate.edu/swsrhd/2004/> Local questions can be directed to Mark Innocenti at mark.innocenti@usu.edu

- The **International Society for Infant Studies (ISIS)** is organizing its 14th Biennial Conference for **May 5 – 8, 2004**, in Chicago. The conference will host a large number of international research experts on infancy. The keynote address will be presented by **T. Berry Brazelton**. For more information, go to the website: www.isisweb.org

UAIMH Activities

- Join us for a **UAIMH Lunch Meeting** at the **Bridging the Gap Conference** at the Salt Lake City Library, **February 6, 2004, 12:30 PM** (after Dr. Beebe's morning presentation). Meet us at the UAIMH presentation table!
- **UAIMH website!** UAIMH is happy to announce our upcoming website. The site will be created in collaboration with Utah State University and should be up within the next couple of months. Check it out at: www.hope.usu.edu
- **UAIMH Training Day:** UAIMH will host its first training day in April 2004, for those interested in Infant Mental Health. The day will be organized by Nick Tsandes, LCSW with the Children's Center. Details will follow.

For Information regarding the **World Association for Infant Mental Health (WAIMH)** log on to www.waimh.org

To become a member of UAIMH, contact **Janet Wade** at janetwade@utah.gov

Deadline for submissions to the next UAIMH Newsletter will be March 29, 2004. Contributions are welcome! Please contact Ilse de Koeijer at ilse.dekoeijer@psych.utah.edu