

Diagnosing and Treating Young Children (0-5): Advances Over the Past 10 Years

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What have we learned over the past 10 years?

- Actually, Chris has been studying ECMH since the mid-90s
 - I have been since 1979, but didn't really know it
- My influences have been Bruce Perry, Donald Charny, Mark Katz, and Ira Chasnoff
- Chris's influences have been theorists/researchers from the fields of Attachment, Interpersonal Neurobiology, among others

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Children are not small adults,
but adults are big children

-Pradeep Gidwani, MD, MPH

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What has changed over the past 10 years?

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Advances in theory/research/practice

- Interpersonal Neurobiology
- Attachment theories & research
- IF-ECMH treatment
- Systems changes

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Interpersonal neurobiology

- "explores the ways in which relationships and the brain interact to shape our mental lives." (Siegel)
- Neurobiological/psychological developmental trajectories
- Epigenetics and the relational development of the brain/mind
- "Neuroception"- urge to connect, urge to protect (Porges)
- Unconscious interactions of our minds (pre-cognitive or pre-cortical). Mechanisms (dynamic unconscious/prereflective unconscious)

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The Awareness of Early Problems Causing Later Difficulties

- Developmental Psychopathology
 - The things that interfere
- Developmental Trauma
 - The excessive stresses and resultant neurological, psychological, and relational impacts on optimal development

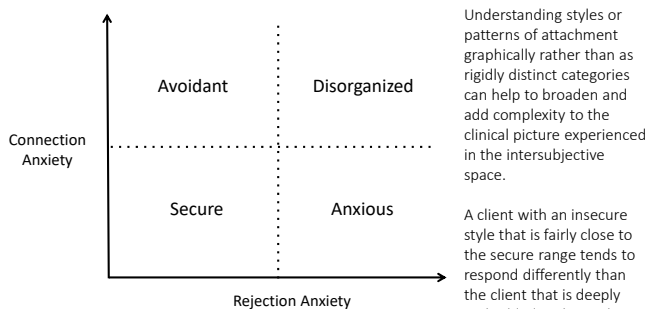
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Attachment

- The biological drive to preserve the relationship
- The styles that develop early tend to be maintained into adulthood
- Styles manifest under duress (or when parent appears unavailable)
- Conflicts in styles lead to conflicts in relationships, anxiety, demoralization
- Insecure styles represent compensatory mechanisms – defensive strategies to maintain the needed tie and a semblance of security
- Provides requisite relational context for the development of the brain

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Attachment Mapping:



Understanding styles or patterns of attachment graphically rather than as rigidly distinct categories can help to broaden and add complexity to the clinical picture experienced in the intersubjective space.

A client with an insecure style that is fairly close to the secure range tends to respond differently than the client that is deeply embedded in that style

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| Ainsworth | Main |
|---|---|
| Secure - explores if parent is nearby, is quickly soothed after separation; returns to play | Secure /Autonomous -values attachment, is reflective about relationship |
| Avoidant - appears not to respond to either the parent's leaving or subsequent return; dismissive | Dismissing - dismissing of attachment needs, tend to idealize or normalize past |
| Ambivalent - May be distressed even prior to separation; little exploration. Preoccupied with parent; fails to settle | Preoccupied -Preoccupied with past attachment relationships. Appears angry, passive or fearful. Inconsistently available |
| Disorganized - Displays disorganized, disoriented behavior suggesting a collapse in strategy (freeze at reunion, falls prone; clinging and crying but leaning away from parent | Disorganized - unresolved issues. Parent shows lapse in monitoring of reasoning or discourse. May lapse into silence. |

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How have assessment and treatment changed?

- What has been the focus of assessment/treatment?
 - Psychiatric perspective
 - Mental Health perspective
- What is the current focus of assessment/treatment?
 - Psychiatric perspective
 - NMT – Neurosequential Model of Therapeutics (Perry)
 - Mental Health perspective

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Our understanding of what is therapeutic

- How does therapy help?
- How do you know if you are being helpful?
- New/old concepts
 - Intersubjective space (expanded states of consciousness)
 - Co-regulation (working at/along the edges of window of tolerance)
 - Getting to states of "integration" (emotional states, cognitive states)
 - Understanding human drives (safety, connection, security, competence/mastery, self-understanding, self-control)
 - Understanding primary disruptors (fear, excessive arousal, neglect, misattunement, misattribution, trauma, non-mutual interactions)
 - Understanding of the role of the implicit/unconscious mind
 - Development of resilience

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The Development and Implementation of Dyadic Therapies

- Caregiver-child dyad as “unit” of assessment and treatment
- Caregivers as the primary therapeutic agent of change
- CPP, Attachment focused therapies, PCIT, PCAT, others
- “Parallel Process” and the role of Reflective Practice
- Using EBP’s to form EBK (evidence based kernels used in EIP)
- Working in the implicit, non-verbal domain

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Role and Necessity for Supervision

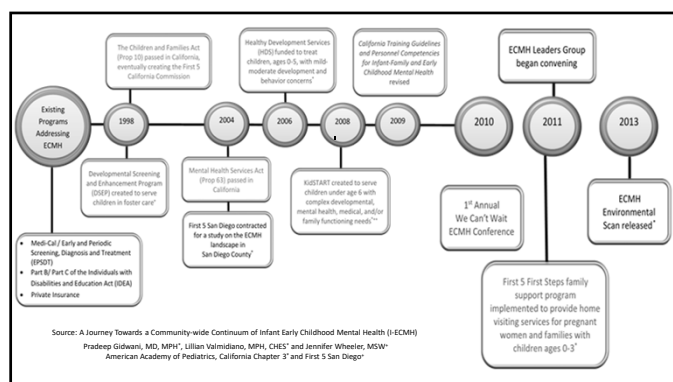
- The “energetic” and interpersonal requirements of the therapist
- The difficulty of “seeing the forest” from “within the forest”
- Parallel process (supervisor-therapist-parent-child)
- Working in the implicit, non-verbal realm
- Non-conscious, unconscious elements
- Enactments, transference-countertransference
- Resonance circuit (emotional loading)
- Secondary Traumatic Stress (STS)

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What are some of the systems changes?

- Earliest screening
 - Focus on high-risk populations
- Competent referral and handoff
- Efficient methods of accessing services
- Range of services including transdisciplinary approaches
 - Need for continuum of care
 - Focus on parent-child dyad
 - Complexity of service delivery required
 - ACES / Resilience and Protective factors

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ECMH in Education and Training

- College and University curriculum
- Post graduate training
 - IFECMH Compendium
 - Various programs (NCAR, NMT, EBP's)
- Slow in roads to medical training (medical school, Pediatrics, Child Psychiatry)

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Care Coordination for Complex Family Needs

- Needs a different name because of misunderstanding of the work
 - Therapeutic Care Coordination?
- Support of the Caregiver supports their child's wellbeing
- Address extrinsic stressors impacting family
- Address Caregiver's health and wellbeing
- Linkage to community supports and services

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Home Visiting as a Specialty

- What is their charge?
 - Meet and engage
 - Strengthen (educate, encourage, teach, demonstrate, admire, reward)
 - Disengage
- What do they need to have
 - Inside of them
 - From their organization

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Research and Implementation Science

- The proper "unit" of observation
- Counting things that are difficult to count
- Articulating the context and observations for multiple audiences

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