



Foundations of Infant-Family and Early Childhood Mental Health

Mental Health Specialists

Syllabus (Group C)

September 16, 2017 – April 21, 2018

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Meeting Location: Hartnell Alisal Campus, 1752 E. Alisal Street, Salinas, CA 93905

Course Overview

This is a course for mental health providers and others working in mental health treatment or settings where they are providing mental health consultation to early education, mother-child drug treatment settings, or other kinds of services where children may have experienced significant trauma or disruption in their lives.

Sessions present up to date evidence informed or evidence based information to support providers in expanding their knowledge and skills. Information is trauma informed and meant to encourage reflection about meaningful application in different settings. Content of the sessions is aligned with the eight knowledge areas from the California Training Guidelines and Personnel Competencies for Infant-Family and Early Childhood Mental Health. Your attendance is tracked and the number of hours you have in each knowledge area is reported in the spring a few weeks after the last session.

This year much session content will be linked to the new edition of the Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC:0-5) which is a manual about mental health treatment for infants and children 0-5 that includes a DSM V crosswalk. We will become more familiar with the five axes used for observation and diagnosis. We consider many of the specific diagnoses used for infants and young children always considering the complex interplay of development, culture, context, relationship, and behavior that we are observing and the applications in the settings where we are practicing.

Participants in the sessions are often at different levels of experience and knowledge and the interactive nature of the presentations fosters mutual learning. Information is presented in brief lectures, learning activities, and in discussion about vignettes and case examples related to the content of each session.

California Board of Registered Nursing (BRN) contact hours and California Association of Marriage and Family Therapists (CAMFT) continuing education are offered for F5MC IFECMH Training Programs completion of evaluations or forms as determined by the specific granting agencies. Provider approved by the California Board of Registered Nursing, Provider #CEP 13323, for 30 contact hours. WestEd CPEI is approved by the California Association of Marriage and Family Therapists (CAMFT) to sponsor continuing education for F5MC IFECMH Training Program participants under #CEP 135222. WestEd CPEI maintains responsibility for F5MC IFECMH training programs and their content.

Relationships hold the potential to increase understanding of self, each other, and our world. For mental health providers creating safe, nurturing and trusting relationships with the families we serve is one of the most powerful tools for helping to support positive change, growth and healing. Our relationships with adults in a family impact their ability to connect more positively with their children. Our awareness of ourselves and of what a parent and a child may bring to relationships is essential so we can help families find additional supports they want.

As mental health professionals, our first task is to create the safety and connection that allows working relationships to develop. In this group we will consciously work to provide safety and connection with one another so that we continue to grow and deepen our knowledge, skills and capacities to create this essential safety and connection with the families and children we serve.

Special Considerations in This Class

- There will be opportunities to reflect on our work and life experiences and to bring examples to particular discussions. As we do this please remember to keep all information shared confidential within this group, and to avoid using any names or share information that would be easy to identify. We will take some time in our first meeting to identify communication guidelines for the group.
- Signing in. Your attendance is tracked so be sure to sign in both in the morning. Continuing education hours are provided for LMFTs and LCSWs so your license number and sign in is required.
- Cell phone. Please keep your cell phone off and do not use while in session. If you need to be on call because of a family or work need, keep your phone on vibrate, and step out of the room to respond to a call or text.
- In the afternoon our group moves into a small cross disciplinary groups for vignette dialogue sessions. These small groups focus on application of the morning content and building our multidisciplinary collaboration and reflective practice skills.

Readings, Videos, Podcasts, Resource Materials and Reflective Questions

There is a great deal of evolving information and knowledge in the field of infant-family and early childhood mental health. We know you have limited time so have provided both print, video, and audio resources so you can more easily access information and to add this information to your professional resources.

Each session is outlined in a chart below. Note that instructors may add additional resources and any additions will be noted in the e-mail you receive a few weeks prior to the session. This e-mail lists all links for materials.

- The readings and videos listed in the left hand column are the most fundamental material for the session.
- In optional readings and further exploration, you will find more resources related to the topic for participants ready to go dive in deeper.
- Participants may submit up to two separate reading responses for any of these materials. Reading response forms are submitted to ifecmhmc@wested.org and can be submitted before the session or up to two weeks after the session. All questions on the form must be answered and each submission must be on a separate reading response form including the date of the session and your name.

- You can also use the reading response form to develop a response to any of the reflective questions. When choosing to respond to a reflective question, participants will receive a point for responding to two reflective questions in their written response; please prepare at least one paragraph for each question.
- The facilitators will respond to your response via e-mail. Each completed reading response will be counted for one hour of learning time in a particular knowledge area.

Recommended Texts: These materials are optional, but highly recommended:

- DC:-O-5-Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood. Zero to Three. 2016. Available from Zero to Three <https://www.zerotothree.org/resources/series/the-bookstore> or Amazon.
- Needs, Urges, and Feelings in Early Childhood (Helping Young Children Grow, Book 3) Edna Furman. 1988. Available on kindle from Amazon. This book is a classic written from a psychodynamic perspective.
- The Emotional Life of the Toddler. Alicia Lieberman. This classic book is going to be re-issued as a second edition sometime within the next year. You can also pick up a copy for a few dollars on Amazon.

Course Schedule

Session One:

September 16, 2017

Welcome to the Upstream World of Infant-Family and Early Childhood Mental Health

Alignment with California Competencies

Domain 1

Knowledge Area D: Risk and Resilience. 3 hours

Knowledge Area F: Diagnosis and Intervention. 2 hours

This session will consist of a series of learning stations and activities designed to orient participants towards the world of infant mental health and also provide an introduction to the program and the California Training Guidelines and Personnel Competencies.

Objectives:

1. To introduce the California Training Guidelines and Personnel Competencies.
2. To highlight key theoretical ideas and practices related to infant and early childhood mental health as a subspecialty of mental health treatment.
3. To outline and demonstrate intervention principles that support relationship based prevention and treatment approaches.

Readings September 16, 2017	Optional Readings & Further Exploration	Reflective Question(s)
<p>Written Materials:</p> <ul style="list-style-type: none"> • Communication Guidelines for Multicultural Interactions. (Early Intervention Services—HANDOUT ARTICLE) • California Training Guidelines and Personnel Competencies for Infant Family and Early Childhood Mental Health-Compendium <p>Websites/Video Clips/ Podcasts:</p> <ul style="list-style-type: none"> • Video. Core concepts in Early Development: Serve & Return Interaction Shapes Brain Circuitry. <i>Center on the Developing Child</i>, Harvard University http://developingchild.harvard.edu/resources/three-core-concepts-in-early-development/ • Video Change the First Five Years. https://www.youtube.com/watch?v=4zsF96H8ENw • Video Brain Builders: https://www.youtube.com/watch?v=OQTfmnYB7I0&t=54s 	<p>Articles: https://www.zerotothree.org/resources/114-the-fundamentals-of-infant-early-childhood-mental-health#downloads</p> <p>Video:</p> <ul style="list-style-type: none"> • The Carpenter and the Gardener https://video.search.yahoo.com/yhs/search?fr=yhs-adk-adk_sbnt&hsimp=yhs-adk_sbnt&hspart=adk&p=alison+gopnik+the+gardener+and <p>Podcasts:</p> <ul style="list-style-type: none"> • On Play. https://soundcloud.com/onbeing/stuart-brown-play-spirit-and-character • On attention https://soundcloud.com/onbeing/adele-diamond-the-science-of-attention?in=onbeing/sets/adele-diamond-the-science-of-attention 	<p>Reflective Question(s):</p> <ol style="list-style-type: none"> 1. In what ways do you think or have you experienced infant and early childhood mental health services to be different or alike from other kinds of mental health services? 2. What terms or concepts were new or unclear would you like to talk about more? 3. What thoughts come up for you as you consider the multitude of internal and external factors that can impact a child's development and well-being? 4. What does upstream mean to you? How do we get beyond symptoms and problems to more upstream wellness?

Session Two:

October 14, 2017

Assessment as Intervention: Using the New Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC:0-5)

Alignment with California Competencies

Domain 1

Knowledge Area E: Observation, Screening and Assessment. 3 hours

Knowledge Area F: Multidisciplinary Collaboration. 2 hours

Objectives:

1. To present and try out several aspects of best practices in assessment and intervention using Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC:0-5).
2. To outline principles of an assessment stance that include curiosity, not knowing, and collaboration with family, and other professionals.

Readings October 14, 2017	Optional Readings & Further Exploration	Reflective Question(s)
Articles: <ul style="list-style-type: none">• Introducing a New Classification of Early Childhood Disorders DC: 0-5. Zeanah et al. Zero to Three Journal, January, 2017	Articles: <ul style="list-style-type: none">• http://iacapap.org/wp-content/uploads/A.4.-INFANT-ASSESSMENT-072012.pdf	Reflective Question(s): <ol style="list-style-type: none">1. How might one work to create and maintain feelings of trust and safety when beginning to assess and build a shared understanding of the concerns with parents and caregivers?2. What thoughts come up for you as you consider the multitude of internal and external factors that can impact a child's development and well-being?3. What dangers might there be in prematurely "knowing" what is causing a child's symptoms?4. What responses do you have to the ideas of a diagnosis for a young child? How do you imagine others might respond?5. What comes up for you as you think about a diagnostic guide specifically designed for infants and young children?

Session Three:

November 18, 2017

Negative Emotions

Alignment with California Competencies

Domain 1

Knowledge Area D: Risk and Resilience. 3 hours

Knowledge Area E: Observation, Screening and Assessment. 2 hours

Negative emotions are observed over time to be more closely linked to later mental health problems than positive emotions. We will consider assessment, diagnosis and intervention planning strategies when children present with persistent sadness and irritability and related symptoms over time. We also will consider how genetic predispositions, social and physical environment and interactions can shape the expression of emotion and how to help parents support children when strong negative emotions are present.

Objectives:

1. To consider sadness and irritability as a symptom in young children and consider the possible meanings from an assessment and treatment standpoint.
2. To present information about how emotions are shaped by a variety of factors and how this shaping can influence intervention.

Readings November 18, 2017	Optional Readings & Further Exploration	Reflective Question(s)
<p>Articles:</p> <ul style="list-style-type: none">• Defining Relational Pathology in Early Childhood, The Diagnostic Classification of Mental Health and Developmental Problems. Charles Zeanah and Alicia Lieberman. Infant Mental Health Journal, vol. 37(5) pp 509-20 (2016) https://www.zerotothree.org/resources/1725-defining-relational-pathology-in-early-childhood-the-diagnostic-classification-of-mental <p>(Note, this article will be sent to you two weeks before the seminar).</p> <p>Websites/Video Clips:</p> <ul style="list-style-type: none">• http://www.peoplebehindt	<p>Articles:</p> <ul style="list-style-type: none">• https://source.wustl.edu/2005/12/researchers-identify-bipolar-disorder-in-preschoolers/• https://www.upi.com/Childhood-poverty-stress-can-hurt-brain-development/11941383017363/• http://www.medicinenet.com/script/main/art.asp?articlekey=189554• http://www.nbcnews.com/id/32271786/ns/health-childrens_health/t/kids-young-can-have-chronic-depression/-_WYPPqXeGOu4	<p>Reflective Question(s):</p> <ol style="list-style-type: none">1. What qualities within a parent child relationship can have the potential for building psychological resilience even when sadness and irritability are present?2. How might a child's irritability, over-excitability, or sadness impact a parent over time?3. What responses come up for you when you think about young children with persistent sadness?4. What is most intriguing to you about the ways in which relationships can impact young children?

Readings November 18, 2017	Optional Readings & Further Exploration	Reflective Question(s)
<p>hescience.com/dr-joan-luby/ (this is a podcast)</p> <ul style="list-style-type: none"> • https://www.zerotothree.org/resources/1857-como-ayudar-a-los-ninos-pequenos-a-canalizar-su-agresividad • http://stlouis.cbslocal.com/2014/08/06/study-depression-found-in-preschoolers/ • http://time.com/4150637/depression-preschool-brain/ • InBrief: The Foundation of Lifelong Health from the Center on the Developing Child at Harvard University. Go to: http://developingchild.harvard.edu/resources/inbrief-the-foundations-of-lifelong-health-video/ • https://www.bbrfoundation.org/blog/what-do-we-know-about-depression-preschoolers • Zero to Three: http://www.zerotothree.org 	<p>Websites/Video Clips:</p> <ul style="list-style-type: none"> • Zero to Three: http://www.zerotothree.org. On Home page, scroll down on the right hand bar until you find the purple box entitled: Resources for Parents. Look next on the left hand bar, under the Donate Now box, and click on the Little Kids, Big Questions link (marked <u>Click here</u> in the middle of the description). Under the Podcast List, find Podcast Group I, then find 3, Early Experiences Count: How Emotional Development Unfolds Starting at birth, Featuring Ross Thompson, PhD 	<p>5. What can the science of resilience/grit teach us about depression?</p>

Session Four:

January 20, 2018

Differential Diagnosis of ADHD, Typical Development, Relationship Disorder, PTSD or other Axis I Disorder? Why Diagnosis Matters.

Alignment with California Competencies

Domain 1

Knowledge Area F: Diagnosis and Intervention. 3 hours

Knowledge Area D: Risk and Resiliency. 2 hours

Objectives:

1. To consider factors related to differential diagnosis of common disorders of infancy and early childhood by using the axes as a guide to assessment.
2. To explore methods of effectively collaborating with parents during the assessment and treatment planning phases.

Readings January 20, 2018	Optional Readings & Further Exploration	Reflective Question(s)
<p>Websites/Video Clips/Podcasts:</p> <ul style="list-style-type: none"> • The Science of Early Childhood Development from the Center on the Developing Child at Harvard University http://developingchild.harvard.edu/resources/multimedia/videos/inbrief_series/inbrief_science_of_ecd/ 	<p>Websites/Video Clips/Podcasts:</p> <ul style="list-style-type: none"> • Zero to Three. http://www.zerotothree.org On Home page, scroll down on the right hand bar until you find the purple box entitled: Resources for Parents. Look next on the left hand bar, under the Donate Now box, and click on the Little Kids, Big Questions link (marked Click here in the middle of the description). Under the Podcast List, find Podcast Group I, find 5. "I like Me!" Developing Self-Esteem in the Early Years, Featuring Jeree Pawl, PhD. Listen to Podcast. Watch the video. <p>Article:</p> <ul style="list-style-type: none"> • van Dernoot Lipsky, Laura (2009). <i>Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others</i>. Read "Introduction: On the Cliff of Awakening", pp. 1-8 https://www.bkconnection.com/static/Trauma Stewardship_EXCERPT.pdf 	<p>Reflective Question(s):</p> <ol style="list-style-type: none"> 1. What have you observed and learned about risk and resilience in young boys? 2. How have you seen cultural values shape the ways boys are raised opposed to girls? 3. As you consider some of the scientific information about boys and the differences between the and girls what implications does this bring up for you? 4. How do we help parents see the social emotional needs of young boys more clearly?

Session Five:

March 24, 2018 Special Role of Fathers/Partners in Early Development and Mental Health: Supporting Parental Capacity to Parent Together

Alignment with California Competencies

Domain 1

Knowledge Area A: Parenting, Family Functioning, and Child-Relationships. 3.5 hours

Knowledge Area G: Interdisciplinary/Multidisciplinary Collaboration. 1.5 hours

In the next two sessions we will explore ways to engage all family members to support optimal development and well-being. The first workshop focuses particularly on the needs of fathers and their young children. We will also explore what research has shown us about the ways that father's impact children's development, and consider intervention approaches that engage and support relationships and parental investment.

Objectives:

1. To examine current findings about how fathers/partners impact early development.
2. To consider specific interventions that can engage fathers in meaningful ways that help them appreciate their role and meaning to their child.

Readings March 24, 2018	Optional Readings & Further Exploration	Reflective Question(s)
<p>Articles/Books:</p> <ul style="list-style-type: none"> • http://www.huffingtonpost.com/2015/07/29/why-dads-matter-state-of-fatherhood-report-n-7785938.html <p>Websites:</p> <ul style="list-style-type: none"> • http://www.fatherhoodinstitute.org/2014/fi-research-summary-fathers-impact-on-young-childrens-language-and-literacy/ • http://www.artofmanliness.com/2015/06/19/the-importance-of-fathers-according-to-science/ <p>Videos:</p> <ul style="list-style-type: none"> • http://abcnews.go.com/Health/dads-roughhousing-children-crucial-early-development/story?id=13868801 	<p>Web Links:</p> <ul style="list-style-type: none"> • https://www.fatherhood.org/ (information, posters and other materials to promote father involvement) • https://www.childwelfare.gov/pubs/usermanuals/fatherhood/ (free downloads, materials) 	<p>Reflective Question(s):</p> <ol style="list-style-type: none"> 1. What has been your highest high and lowest low in your experience of working with fathers? 2. How have you found out about the important people in an infant or young child's life? What approaches have you used? 3. Imagine how a family member might feel if his/her influence on a child is not considered? 4. Consider what defenses or reactions could be triggered by seeking information about fathers or partners.

Session Six:

April 21, 2018

Finding the Big Picture: Working with Both Parents to Observe, Assess, Diagnose and Intervene

Alignment with California Competencies

Domain 1

Knowledge Area A: Parenting, Family Functioning, and Child-Relationships. 2 hours

Knowledge Area G: Interdisciplinary/Multidisciplinary Collaboration. 3 hours

Engaging parents as well as other family members is considerably more difficult than working with one parent at a time. In this session, we will consider the pros and cons of this approach, consider techniques for assessment, planning and intervention with the whole family. Axis II of the DC 0-5 will be used to guide the assessment portion of this session.

Objectives:

1. To investigate various methods of engaging couples, and parenting family members to hold a child's needs central despite differing priorities.

Readings April 21, 2018	Optional Readings & Further Exploration	Reflective Question(s)
<p>Articles/ From Dyads to Family Systems. James McHale NIH Public Access</p> <p>From dyads to family systems: A bold new direction for Infant Mental Health practice. James McHale, Vicky Phares, Zero to Three Journal, May 2015 (this available through NIH public access as well as Zero to Three)</p>	<p>Web Links:</p> <ul style="list-style-type: none">• Baby makes Three: https://www.zerotothree.org/resources/1908-baby-makes-three-but-what-about-your-tuosome• https://childandfamilyblog.com/parents-divorce-regular-overnight-stays-dad-best-young-children/	<p>Reflective Question(s):</p> <ol style="list-style-type: none">1. What has been your highest high and lowest low in your experience of working with fathers and mothers together?2. How can self-awareness support clinicians to navigate complex parental relationships on behalf of infants and young children?