

Parenting during the First Years of Life and wellbeing During Adolescence: Prevention in Practice

Jane Barlow
Professor of Public Health
in the Early Years

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Overview

- Why is development during the first few years of life important for adolescents?
- What role does parenting play in influencing early development?
- What should we be doing to support early parenting?

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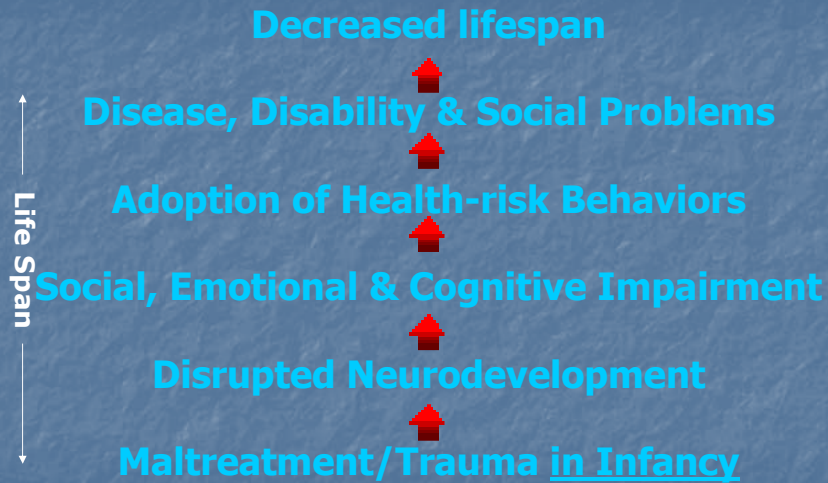
Early Development and Later Wellbeing



Aspects of Early Development

| | <i>Emotional competence</i> | <i>Intellectual Development</i> | <i>Social Competence</i> |
|--------------------|-----------------------------|--------------------------------------|--------------------------|
| <i>Infancy</i> | Trust/attachment | Alertness/curiosity | Impulse control |
| <i>Toddlerhood</i> | Empathy | Communication/ mastery motivation | Coping |
| <i>Childhood</i> | Social Relationships | Reasoning/problem solving | Goal-directed behaviour |
| <i>Adolescence</i> | Supportive social network | Learning ability/achievement | Social responsibility |

Far Reaching Consequences



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Parenting and early development



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Parenting and Later Health



Parenting and later outcomes

- **Educational achievement; School drop-out** (Desforges, 2003)
- **Behaviour problems, delinquency, criminality, violence** (Farrington, 2003)
- **Mental and physical health in adulthood** (Stewart-brown and Shaw, 2004)
- **Promiscuous sex and teenage pregnancy** (Scaramella et al., 1998)
- **Healthy eating** (Kremers et al., 2003)
- **Smoking** (Cohen et al., 1994)
- **Alcohol misuse** (Garnier et al., 1998; Egland et al., 1997)

Early Development and Later Wellbeing



Why is Early Parenting Important?

- Brain development and softwiring
- Affect regulation including stress
- Regulation of physical states

‘Affect Synchrony’ – the dance

- By two months the mothers face is the primary source of visuo-affective communication
- Face-to-face interactions emerge which are high arousing, affect-laden and expose infants to high levels of cognitive and social information and stimulation
- To regulate this infant and mothers regulate the intensity of these interactions – ‘affect synchrony’- capacity to be attuned and to repair ruptures
- Absolutely fundamental to healthy emotional development – prolonged negative states are ‘toxic’ to infants
- Adults that are incapable of ‘attunement’ i.e. intrusive; depressed, cannot regulate appropriately

Video Clip 1



For example...

- **Looks and smiles** help the **brain to grow**
- Baby looks at mother; sees dilated pupils (evidence that sympathetic nervous system aroused and happy); own nervous system is aroused - heart rate increases
- Lead to a biochemical response - pleasure neuropeptides (betaendorphin and dopamine) released into brain and helps neurons grow
- Families doting looks help brain to grow
- **Negative looks** trigger a different biochemical response (**cortisol**) stops these hormones and related growth

(Gerhardt, 2004)

The Infant's Brain - Softwiring

- Unique wiring of individual brain determines how we behave; think; feel; memories etc and our sense of 'self'
- Wiring takes place during **prenatal period to school-entry** – important first two years
- Rapid proliferation and overproduction of synapses followed by loss (pruning)
- 'Use it or lose it' – lost if not functionally confirmed

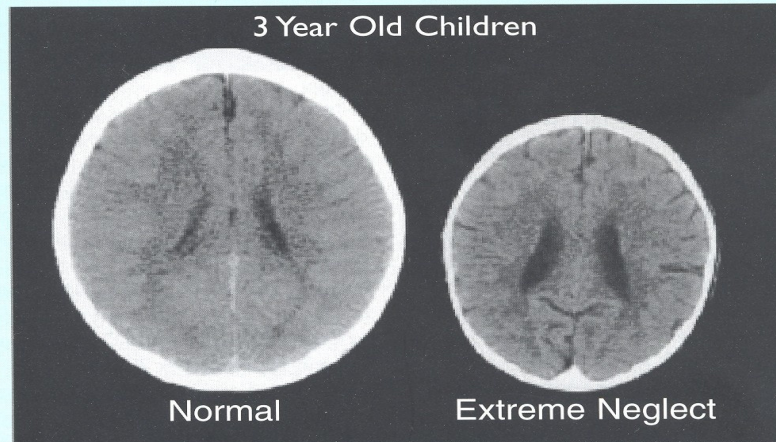
'Every moment of interaction - whether a shared meal, a tickling session, or a stern rebuke - fires off a select group of synapses in his limbic brain, stabilising them at the expense of others...This activates specific neural pathways, locking in the limbic circuits that will serve them for a life-time' (Perry, 1997)



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- **Babies of depressed mothers:**
 - nearly half show reduced brain activity
 - much lower levels of left frontal brain activity (joy; interest; anger)
- **Early experiences of persistent neglect and trauma:**
 - overdevelopment of neurophysiology of brainstem and midbrain (anxiety; impulsivity; poor affect regulation, hyperactivity)
 - deficits in cortical functions (problem-solving) and limbic function (empathy)

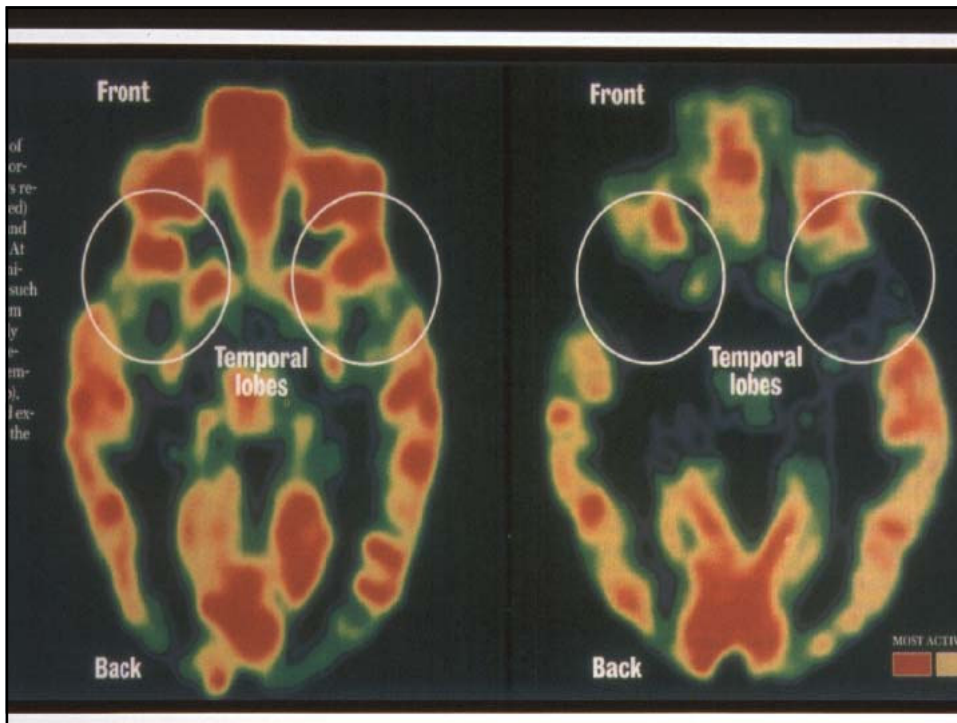
Figure 4.2: Differences in brain development following sensory neglect



This figure compares the brain of a normal 3-year-old child (the image on the left) with the brain of a 3-year-old who has suffered severe environmental sensory-deprivation neglect (the image on the right). The child who has suffered neglect has a significantly smaller brain and has enlarged ventricles and cortical atrophy.⁴⁷

Regulation of Stress - Neurochemistry

- Chemical neurotransmitters that have a direct affect on the brain e.g. neuropeptides such as Dopamine
- Early environment influences the production of these and thereby sets the thermostat for later control of stress response
- Excessive stress → brain flooded by Cortisol for prolonged periods → lowering of threshold for activation of fear/anxiety → more fear/anxiety and difficulty dampening this response
- Early relationships set the thermostat for later control of stress response



Parent-Infant Interaction

- **Attunement**

Stern, D. (1998) *The Interpersonal World of the Infant*.

- **Marked Mirroring**

Fonagy, P. et al (2004) *Affect Regulation, Mentalization and the Development of the Self*. London: Karnac

- **Containment**

Bion, W. (1962) *Learning from Experience*. London: Hienemann

- **Holding in mind**

Winnicott (1960)

- **Mentalisation/reflective function/'mind-mindedness'**

Fonagy (2004)

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Video Clip 2



Prevention in Practice: Supporting Parenting



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Framework: Progressive Universalism

- Universal system
 - services that are offered across the social spectrum to all parents
 - **used to identify families in need of further input**
- Progressive system
 - provided to families with additional needs for support

Key Points for Supporting Early Parenting

- **Pre birth** – Anxiety/depression; Substance abuse; Domestic violence; Unresolved trauma; Dysfunctional attitudes to pregnancy/baby
- **Birth** – Bonding
- **Early infancy (4-6 weeks)** – Empathic caregiving; Postnatal depression
- **9 months** – Attachment and cognitive development
- **15-24 months (toddlerhood)** – Developing independence – emerging behaviour problems

Innovative Early Interventions



Universal

- Infant carriers
- Brazelton NBAS
- Infant massage
- Parenting programmes

Selective

- Interaction guidance
- Home visiting
- Comprehensive early intervention programmes

Targeted

- Parent-infant psychotherapy - Representational and Infant-led

Introducing the Social Baby

- Both parents should be introduced to the 'social baby' - information about the sensory and perceptual capabilities of their baby (e.g. *The Social Baby* book/video or *Baby Express* newsletters) or validated tools (e.g. Brazelton or NCAST)
- Promoting closeness and sensitive, attuned parenting
(e.g. Skin-to-skin care and the use of soft baby carriers; infant massage etc)

Observing and supporting the Parent-Infant Relationship

- Using key opportunities to role model, observe and support the developing parent-infant relationship
 - Optimal parent-infant relationship;
 - Sub-optimal: in need of support by the CHPP team;
 - Sub-optimal: in need of referral to specialist support including child protection services
- This should be the core task of every visit

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Supporting the Parent-Infant Relationship

- Individualised coaching (by a skilled professional) aimed at stimulating attuned interactions (e.g. Interaction Guidance)
- Invitation to group-based parenting programmes (e.g. Mellow Parenting; an infant massage group)
- Father–infant groups that promote opportunities for play and guided observation
- Referral to attachment-oriented or parent–infant psychotherapy interventions

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Anticipating Problems

- Temperament-based anticipatory guidance:
 - practical guidance on managing crying and healthy sleep practices e.g. bath, book, bed routines, and activities
 - *encouragement of parent–infant interaction* using a range of media-based interventions
- Can lead to significant improvements in parents' routines with children

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Supporting Fathers

- Need to work with both parents from pregnancy onwards
- Methods of supporting mothers also work with fathers!! (e.g. infant massage; NBAS)
- Most effective methods of support involve:
 - Active participation with, or observation of, their baby
 - Repeated opportunities for practice of new skills
 - Responsive to individual concerns
- Important to address parental conflict

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Promoting Child Development

- Parenting and early environment are a significant influence on the infants developing brain
- Should start from the first weeks and months
- Encouragement to use books, music and interactive activities to promote parent–baby relationship and thereby development

Disadvantaged families:

- Group-based interactive support (e.g. PEEP)
- Encouragement to use good quality early centre-based support

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Reviewing Developments

- We know more about how to intervene effectively when children are toddlers than when they are adolescents;
- Many later problems emerge during the early years
- Regular early reviews of development are a key part of progressive universalism:
 - New baby review;
 - Health review at 6-8 weeks and 1 year;
 - Two year review

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Key Messages

- Early infant developmental tasks are key to later wellbeing
- Early parent-infant interaction enables infants to achieve these tasks
- Range of innovative ways supporting P-I interaction
- This should be the focus of our work during pregnancy and the early years

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Key References

- *The Child Health Promotion Programme: Pregnancy and the First Five Years of Life* (2009) - http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/DH_083645
- Barlow J and Svanberg PO (2009) *Keeping the Baby in Mind: Infant Mental Health in Practice*. Routledge Pub.
- Gerhardt S (2004). *Why Love Matters: How affection shapes a baby's brain*. Routledge Pub.

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