

COMPERIMENTER COMPENSATION

ATTACHMENT SUPPORTS FOR CAREGIVERS OF YOUNG CHILDREN

ADVOCACY IN ACTION: Resources to Improve Safety, Permanency and Well-Being

ATTACHMENT SUPPORTS FOR CAREGIVERS OF YOUNG CHILDREN

WHY IT MATTERS

A strong, nurturing and consistent relationship with a caregiver(s) is the key to the overall healthy development of children. It isn't the biological connection of the caregiver to the child, but the *quality of the relationship* that is important. Loving and consistent relationships are the scaffold to a positive trajectory of development.

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Children whose parents are responsive, nurturing, and predictable in their actions are able to form attachments, develop the capacity for self-regulation, and set the foundation for learning, coping and developing positive relationships. Attachment is the critical building block for how children learn and relate to the world.

To create the many meaningful connections they'll need in their brains during their first few years of life, children must feel safe to explore the world, be able to manage stress, and feel some control over the world around them. Having a secure bond with a caregiver sets the stage for those tasks to be accomplished. At about six months of age, the baby begins to prefer contact and nurturing from the primary caregiver. At one year of age, the child's attachment style starts to emerge as she begins to explore the world. When the attachment process has gone well, the parent or caregiver serves as a secure base for the baby. She ventures away to new experiences and returns periodically to reaffirm the presence of the parent. Scientists refer to this interaction as "serve and return." When the primary caregiver is around and there is a secure attachment to the caregiver, children show a buffered response to stress.¹

Sadly, children who enter foster care early in life are vulnerable. Faced with tremendous developmental hurdles that, if left unattended, will impact all aspects of their lives. The science of early learning brain research has highlighted factors needed for optimal growth as well as the ability of the brain to change/recover over time.

The good news is that children's brains are malleable. With extra stimulation and interaction, the brain can grow stronger and improve cognitive performance. Studies show that interventions must be early and targeted at the child and the socializing agent – the caregiver(s).

Self-regulation is another vital task of early development that is dependent on having a loving, responsive relationship with a caregiver. When infants have consistent care giving and predictable daily routines, they develop feelings of security which reduce the stress of new situations. As a parent responds to their baby's cry for food, the parent sets the stage for the development of selfregulation. If the response to a baby's cries is consistent, the child's emotional agitation will decrease as regulation of the emotion is learned. If, however, the child cries and only sometimes experiences an appropriate response, the child will continue to cry for longer periods of time. In the latter scenario, there is deregulation on the child's part due to the absence of consistency and responsiveness from the caregiver.

Caregivers caring for young children, whether they are the biological parent, foster parent, or a relative, will benefit from understanding how attachment is critical to a child's healthy development. The best path to resiliency for young children who have been abused or neglected is a strong, loving attachment with a caregiving adult.

TIPS FOR BUILDING A SECURE ATTACHMENT FOR YOUR BABY¹⁸

Share the joy: Babies are "hard-wired" to experience joy with their caregivers in the early months of life. This mutual joy supports increased brain growth. A baby feels more secure knowing that "Life is good, because my parent enjoys life when s/he is with me."

The power of touch: Babies soak up affection and love through their skin. Gentle touch shares the tenderness that every infant requires. Playful touch encourages joy. Holding your baby not only provides pleasure and reassurance, it is essential in helping to soothe and organize difficult feelings.

Look into my eyes: Newborns do make eye contact and will follow your gaze. At about six weeks, babies regularly focus in on their caregiver's eyes and read what they are "saying." Lots of eye contact will translate into feelings of reassurance and connection for babies.

Follow your child's lead: Caregivers who are sensitive and responsive to their child's needs helps them develop security of attachment. Requests for attention, comfort, holding, exploration, and discovery (with you nearby) will provides an increased sense of security.

Myth buster – Babies can't be spoiled: It isn't possible to spoil a baby in the first 9–10 months of life. Researchers are finding that the most responsive parents actually have children who are less demanding and more self-reliant as they grow older.

Stay with your child during difficult feelings: Young children often have upset feelings (e.g., anger, hurt, sadness, fear) that are difficult to manage on their own. Staying with the baby through intense child feelings will help them learn basic trust: "Someone is here with me when I am in difficulty and pain," and, "I can count on them during times of stress."

Talk out loud about feelings: From the earliest days, talking out loud about feelings will help the child to eventually label feelings and realize that they can be shared. As children get older, they will realize that intense feelings can be named (mad, sad, glad, and afraid) and discussed with another, thus ending a need to act them out.

"Mistakes happen (you only need to be 'good enough'):" Perfection is impossible in parenting. Do your best each day and recognize that if there is a secure attachment with the child, they will not suffer because you weren't perfect that day. Tomorrow is another opportunity.

Be bigger, stronger, wiser, and kind: At the heart of secure attachment is a child's recognition that s/he has a parent who can be counted on to lovingly provide tenderness, comfort, firm guidance and protection during the inevitable difficulties of life.

ADVOCATES IN ACTION

The baby's brain is exquisitely dependent on relationships and experiences to thrive.

ACTIONS

When it comes to advocating for children, it is important that decisions are made in the context of the child's developmental stage. For infants, babies and toddlers, their healthy development is contingent on their relationship with their primary caretaker. Having a loving, consistent adult who can provide them a secure base to grow and develop is paramount. Consequently, a good understanding of the development of attachment and critical periods is important.

- Ask whether in-home supports can be provided to prevent removal in the first place. Knowing how important the parent-child bond is and that disruption of that bond can derail a child's healthy brain development, inquire as to the possibility of in-home supports to the family versus removal of the child from the home and parent. Of course, the primary factor will be whether it is safe to leave the child at home.
- Don't move children to different homes, childcare
 or schools at critical developmental periods.
 Knowing for example, that the critical period of a
 baby's attachment growth is between 6 and 18
 months of age, especially if they are attached to
 their current caregiver, consider carefully any new
 placements for the baby during this time. If it can't
 be avoided, put supports in place that will help the
 baby make the transition with minimal trauma.

- Make the first placement the only placement. Because even one disruption of a relationship for a baby can have long-lasting impact, when placing babies in out-of-home care, advocate that the first placement be the only out-of-home placement.
- Encourage frequent and meaningful visits.² In order for baby to "hold the memory" of their parent, they must see them frequently. Furthermore, visits should be as natural as possible within the context of a caregiving relationship. The parent should be able to care for their baby as they would otherwise, if they were at home with baby – feeding, changing diapers, playing, soothing, and any other routines that baby needs.
- Ensure that parents, caregivers, child welfare professionals, court personnel and others are educated about the critical developmental periods of attachment. Unfortunately, many professionals still believe the myth that "babies can't remember, so it's okay if they are removed from their parents or frequently change placements." In fact, we now know through brain science that babies do remember these traumatic experiences and trauma can change the very physiology of their bodies and brains.

- Regularly provide caregivers and parents with information on how to nurture attachment. Use the tips listed in the *Tips for Building a Secure Attachment for Your Baby* section above and share the importance of reading with their young children, educate them on the importance of routines, and how to help them self-regulate.
- Learn if there are Babies Safe Courts or Early Childhood Courts in your community.³ These courts take a wrap-around approach to addressing the needs of babies and parents who are child welfare involved. Judges and court personnel understand the developmental complexities of babies and infants when they are removed from their parents and work hard with the team to alleviate the traumas associated with abuse and neglect.
- Plan concurrently for reunification and permanency.⁴ Unfortunately, young children spend the longest period of time in foster care placement. Given the rapid development that they go through in early childhood, ensuring they have a stable and consistent caregiver and placement means that

there should be multiple options for permanency planed for.

- Encourage parents to participate in evidencebased parent-child interaction-based programs. Many parents of children in foster care may have not had positive experiences being parented themselves; they may have unaddressed trauma and they may be struggling with mental health or substance use challenges. Participation in a program that teaches and models for them how to interact with their babies can boost their confidence and motivation to care for their babies and reunify.
- Address parents' issues so their problems do not interfere with caring for their children.
 Families facing challenging issues such as depression, poverty and substance abuse require more than parenting education; they may also need specific interventions that address these problems. In order to improve the lives of young children, we must support the complex needs of their caregivers by providing interventions that specifically address parental risk factors.

BRIGHT SPOT

BIRTH TO FIVE ADVOCATES CASA OF SANTA CRUZ COUNTY, CALIFORNIA

Until a couple of years ago, CASA volunteers in Santa Cruz County, California were not assigned to work with infants and toddlers. The program's model at that time required volunteers spend two to four hours a week visiting and interacting with their assigned child in order to develop a trusting relationship with that child. When the organization realized that 25% of children in foster care were aged birth to five, they became curious about the attention the youngest children in dependency were getting, and ultimately created a program to meet the unique needs of this population and provide an opportunity for CASA volunteers ("Advocates") to support them.

To best equip their advocates, an additional $2\frac{1}{2}$ hour in-service training was developed. The training,

offered three or four times a year, includes information about brain development and the impact of trauma, temperament, the importance of attachment and the adult's role in supporting the child's development of self-regulation skills. Advocates learn information about community resources including early intervention assessment and accessing child care. The training also provides advocates with information they can share with caregivers regarding child development and addressing challenging behaviors. includes connection to attachment figures, adaptation, developmental/health growth, mental health and home/ community environment. Additionally, all children under six are referred for a neurodevelopmental assessment. A development and behavioral clinic was established where professionals from Stanford University's Lucille Packard Children's Hospital can meet families locally. Advocates help ensure children receive timely services and can advocate for more frequent and longer visits with parents by providing information about the child (and caregiver(s) for those under three) to the ongoing caseworker and the court about the strengths they

In contrast to the one-on-one visits advocates who work

with children three and older conduct, advocates working with children under three are asked to stay with the caregiver and child together, to provide individualized support to caregivers, and support their bonding and attachment with the baby. The advocate acts as a caring adult, providing developmental insight, parenting support, helps with identification of child needs, and assistance with referral to community

GOALS OF THE BIRTH TO FIVE ADVOCATES PROGRAM

- Timeline for permanency is age appropriate
- Services for birth to five are effective
- Child's development is on target for age and adjusted age
- Child has connected to at least
 one primary caregiver
- Build up caregiver capacities biological parents and resource families

see. This information provides the caregivers and professionals involved an informed picture of the child's well-being.

Knowing the importance of addressing the needs of all children, but especially those of young children who are more vulnerable to adverse risk factors, CASA of Santa Cruz County engaged local judges and child welfare partners in developing their *Birth*

resources. For families receiving family reunification services, the advocate talks with all caregivers involved, and may meet with parents in the absence of the child to support reunification.

During visits, advocates observe the child and caregiver in the home and in community settings for the purpose of gathering information and providing this data back to the court, the social work team and other professionals involved. Gathered information to Five program to ensure services were added to those currently available and initiated efforts to focus on strengthening and supporting the caregiver-child relationship. Executive Director, Cynthia Druley notes that end-of-case surveys given to parents are positive and many express their appreciation for the one-on-one support the advocate provides.

For more information, contact training@casaforchildren.org

SELECTED RESOURCES

Focus Area	Programs
Development and Attachment	 <u>Centers for Disease Control, Infants and Toddlers,</u> <u>Milestones and Schedules⁵</u> <u>The Urban Child Institute, Social-Emotional Development</u> <u>in Early Childhood</u>⁶ <u>Zero to Three, Early Development and Well-Being</u>⁷
Evidenced-Based Parenting Programs	 The resources below are all evidenced-based parenting programs that offer additional resources and tools to support parents who are caring for young children. Active Parenting Now, First Five Years⁸ Incredible Years⁹ Promoting First Relationships¹⁰ STEP (Systematic Training for Effective Parenting)¹¹ Triple P: Positive Parenting Program¹²
Infant Mental Health Treatment	 For young children and their caregivers who are experiencing mental health challenges including failure to securely attach, there are a number of evidence-based programs that can be valuable resources. <u>Attachment and Bio-behavioral Catch-up (ABC)</u>¹³ <u>Circle of Security</u>¹⁴ <u>Interaction Guidance</u>¹⁵ <u>Parent-Child Interaction Therapy (PCIT)</u>¹⁶ <u>Minding the Baby, Yale University</u>¹⁷

ENDNOTES

- 1 Center on the Developing Child, Harvard University: The Science of Early Childhood Development (2011)
- 2 See Issue Brief on "Visitation Considerations for Young Children."
- 3 See Issue Brief on "Early Childhood and Safe Babies Courts".
- 4 See Issue Brief on "Concurrent Planning."
- 5 https://www.cdc.gov/parents/infants/milestones.html
- 6 <u>http://www.urbanchildinstitute.org/resources/</u> <u>publications/good-start/social-and-emotional-</u> <u>development</u>
- 7 <u>https://www.zerotothree.org/early-development</u>
- 8 <u>http://www.activeparenting.com/First-Five-Years-of-</u> parenting
- 9 <u>http://www.incredibleyears.com/</u>
- 10 http://pfrprogram.org/

- 11 <u>http://www.cebc4cw.org/program/systematic-</u> <u>training-for-effective-parenting/detailed</u>
- 12 http://www.triplep.net/glo-en/home/
- 13 http://www.abcintervention.org/
- 14 https://www.circleofsecurityinternational.com/
- 15 <u>https://www.researchgate.net/</u> publication/232589903_Interaction_Guidance_ Promoting_and_Nurturing_the_Caregiving_ Relationshiphttps://www.researchgate.net/ publication/232589903_Interaction_Guidance_ Promoting_and_Nurturing_the_Caregiving_ Relationship
- 16 http://www.pcit.org/
- 17 <u>https://medicine.yale.edu/childstudy/</u> <u>communitypartnerships/mtb/</u>
- 18 Adapted from: <u>HelpGuide.org</u>, Building a Secure Attachment Bond with Your Baby: Parenting Tips for Creating a Strong Attachment Relationship with Your Newborn.