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NYC Early Childhood Mental Health

Training and Technical Assistance Center

The Role of the Community Birth Worker in Nurturing Parent-Infant Relationships

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Who We Are

The New York City Early Childhood Mental Health Training and Technical Assistance Center (TTAC), is funded by the NYC Department of Health and Mental Hygiene (DOHMH)

TTAC is a partnership between the New York Center for Child Development (NYCCD) and the McSilver Institute on Poverty Policy and Research

- **New York Center for Child Development** has been a major provider of early childhood mental health services in New York with expertise in informing policy and supporting the field of Early Childhood Mental Health through training and direct practice
- **NYU McSilver Institute for Poverty Policy and Research** houses the Community and the Managed Care Technical Assistance Centers (CTAC/MCTAC), which offer clinic, business, and system transformation supports statewide to all behavioral healthcare providers

TTAC is tasked with building the capacity and competencies of mental health and early childhood professionals through ongoing training and technical assistance
http://www.TTACny.org

Updated TTAC Website

Explore all the provider resources at ttacny.org

A Selection of Features:

- Seamlessly filter, toggle and search through upcoming and archived content, trainings and resources
- View videos, slides, and presenter information on the same training page
- Contact the TTAC team by clicking on Ask TTAC and filling out our Contact Us form
- And more!

Have questions or need assistance? Please contact us at **ttac.info@nyu.edu** and we'll be happy to assist you

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TTAC Infant and Early Childhood Mental Health (IECMH) Learning Modules are now live!

MODULE I
Infant & Early Childhood Mental Health and the Impact of Adversity

Two Learning Modules:

- The first module in the series is **the Impact of Early Childhood Adversity (An Overview of the Topic)**
- The second module in the series is **Nurturing Resilience: Supporting Infant and Early Childhood Mental Health**
- CEUs Available upon completion!

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Dedicated to my ancestors- both who I knew and never met- who taught me our ways of loving, caring, and surviving.

Objectives

1. List two stages that a mother/birthing person goes through during the journey to motherhood/parenthood.

2. Identify three ways in which maternal/parent and infant well-being are mutually impacted through their relationship.

3. Discuss the ways in which doulas and perinatal health workers can help to nurture their clients' parent-infant relationships.

4. Identify two resources that can assist perinatal health workers and/or clients in understanding and accessing perinatal mental health care.

Transitions

The Making of a Parent

The Maternal/Birthing Person Journey
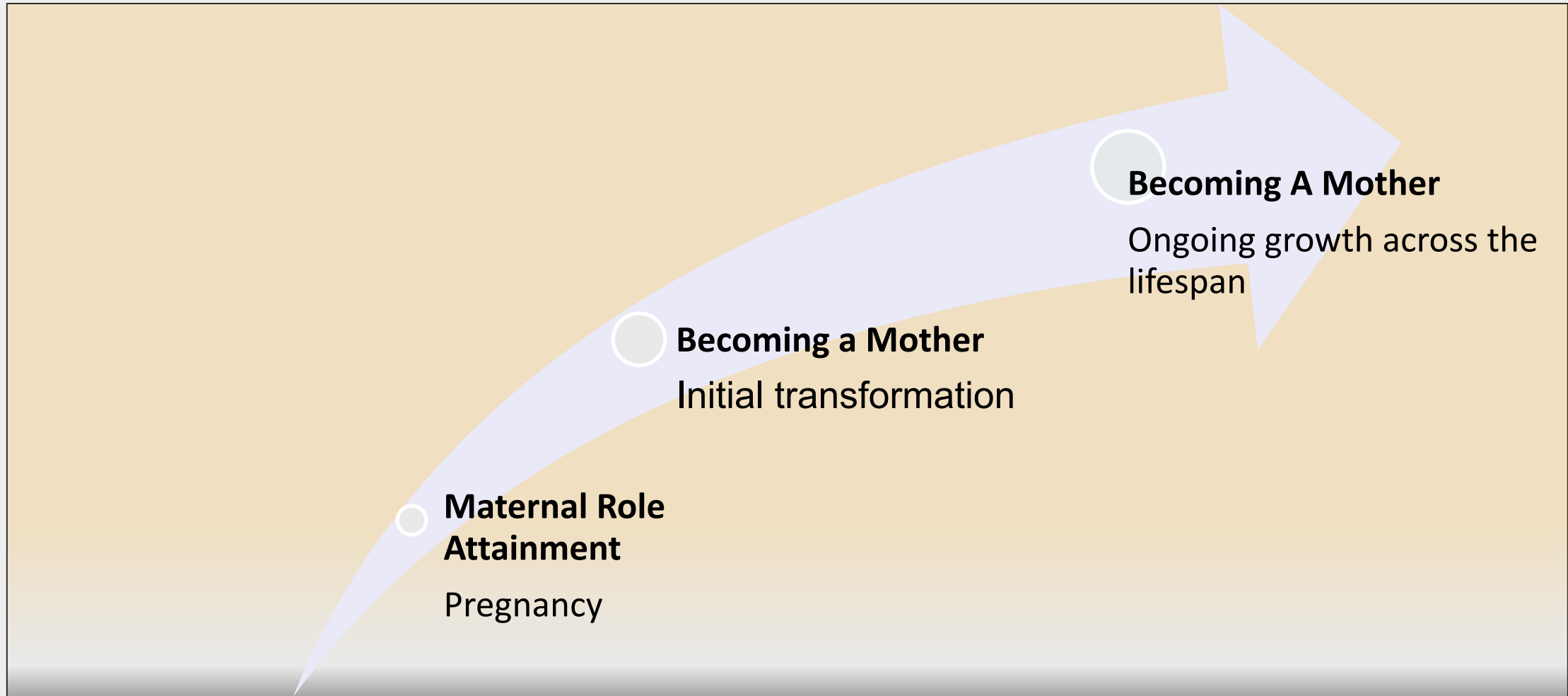
Becoming A Mother
Ongoing growth across the lifespan

Becoming a Mother
Initial transformation

Maternal Role Attainment
Pregnancy

Developmental Tasks During Pregnancy

Maternal Role Attainment
Reva Rubin (1977)

Giving

"Binding-in" to the child

Acceptance of the child by others

Safety for self, baby

Maternal/Parental Developmental Stages

Commitment, attachment, preparation

Acquaintance, learning, physical restoration

Moving toward a new normal

Achievement of maternal identity
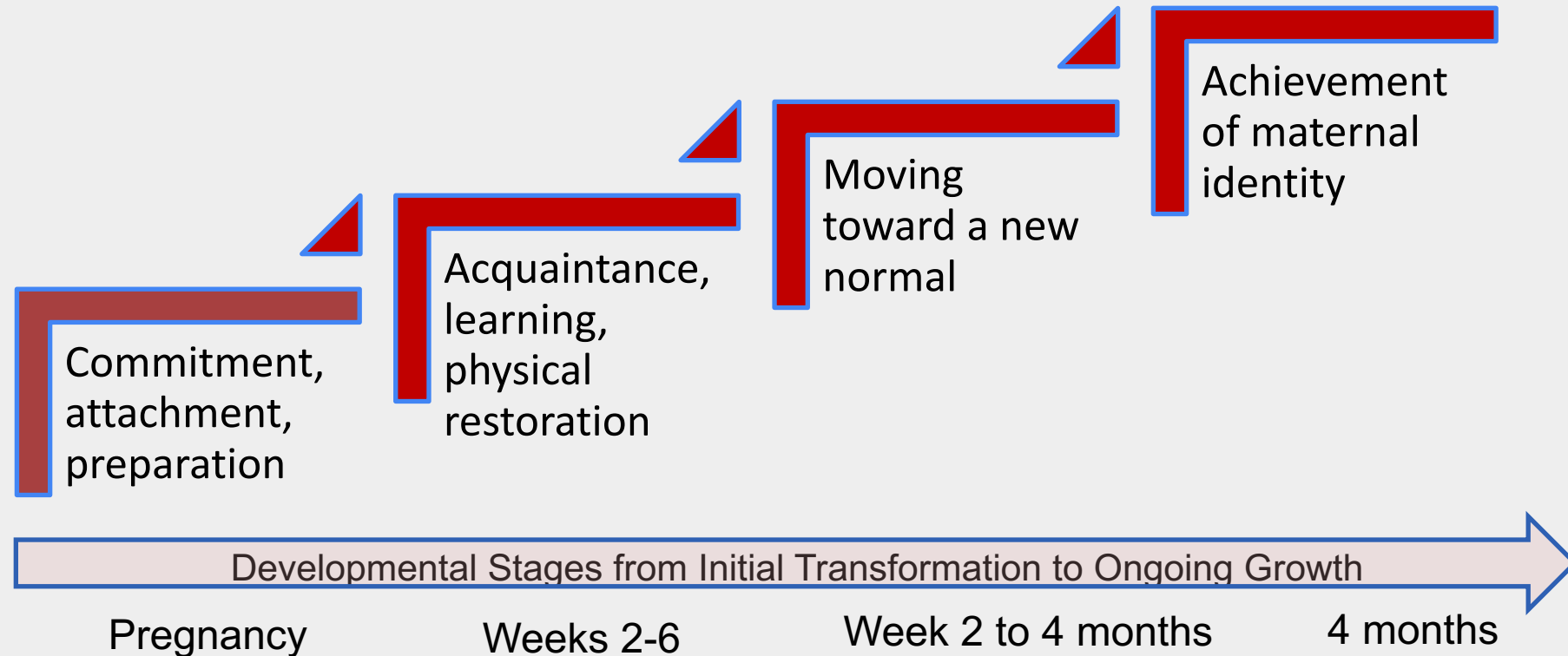
"Becoming a Mother" Ramona Mercer (2004)

Developmental Stages from Initial Transformation to Ongoing Growth

Pregnancy

Weeks 2-6

Week 2 to 4 months

4 months

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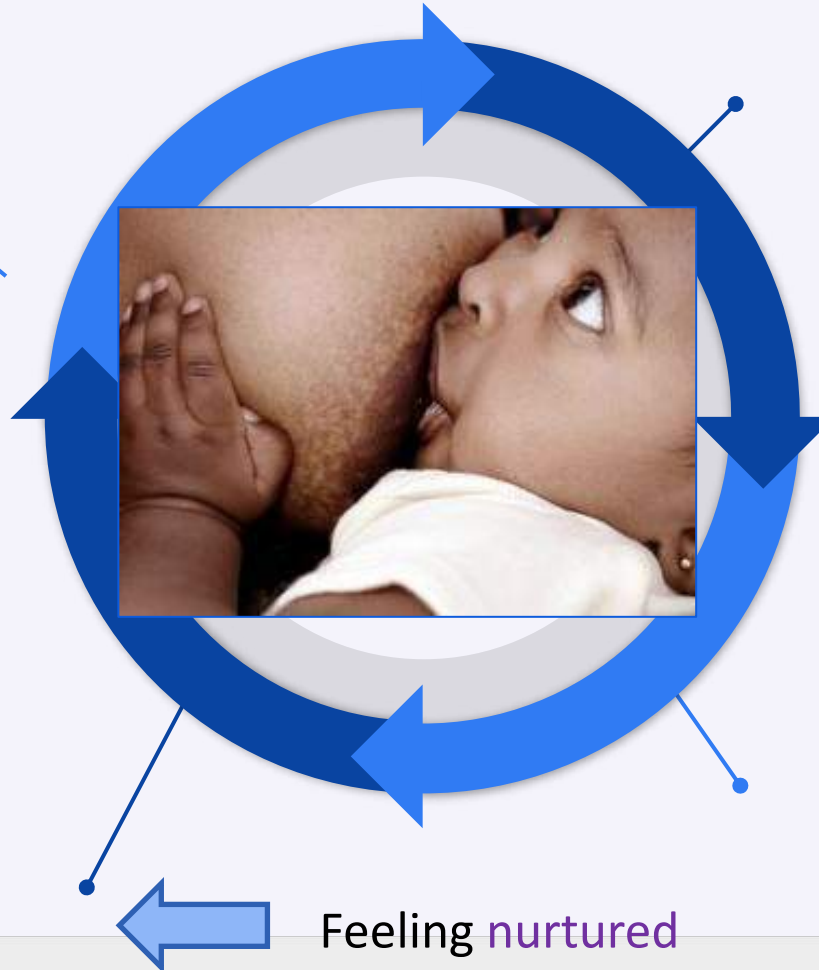Training and Technical Assistance Center

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Achieving Maternal Role Identity

- Identifying as mother/parent is characterized by role performance associated with an internal sense of:
  - ➢ Balance

  - ➢ Confidence

  - ➢ Competence

- Time duration may range from 3-10 months postpartum, **averaging 9 months**

- Impacted by **stress** and **social support**

The Emerging Child

The 4th Trimester

- **Bonding and relationships**
  - Feeding and sleeping schedule requiring 24/7 closeness
  - Build parental confidence & resilience

- **Security and Attachment**
  - Physical and emotional connections
  - Consistency and predictability

- **Responsive Parenting**
  - Learning baby's cues
  - Meeting baby's needs
  - Supports baby's self-regulation

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OBSERVE: A Relationship is Born

- **Meaning is made in each moment**

- **Curiosity leads to Moments of meeting**

- **Co regulation**

- **Witnessing the strengths**

The Birth Worker's Role in the Relationship

Role of the Perinatal Health Worker/Doula

- **Trust**

- **Relationship**

- **Parallel Process**

- **Witnessing of strengths**

WITNESS: Reflect Back

Reflection is Bi-Directional

- **Let's go back to the wisdom of transitions**

- **Before the water can reflect, it must have its own stillness**
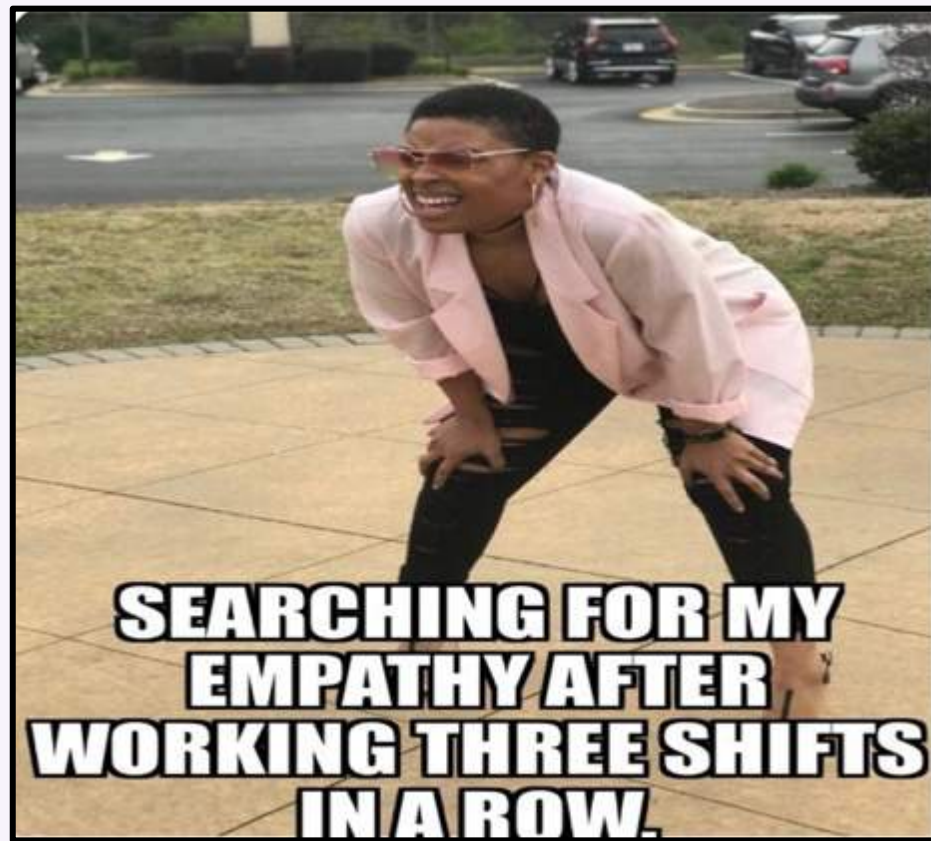
SEARCHING FOR MY EMPATHY AFTER WORKING THREE SHIFTS IN A ROW.

Keeping On Going

Redefining the Narrative

- **Trauma**

- **Burnout**

- **Racism**

- **Client mistreatment**

→

- **Hope**

- **Compassion Satisfaction**

- **Resistance**

- **Vicarious Resilience**

Radical Self Care

"Anyone who's interested in making change in the world also has to learn how to take care of herself, himself, theirselves." — Angela Davis

(Political Activist, Professor, Author)

Bring in your full self

- **Radical Healing Principles**:
  - ❑ Collectivism
  - ❑ Critical Consciousness
  - ❑ Strength and Resistance
  - ❑ Cultural Authenticity and Self-Knowledge
  - ❑ Radical Hope
  - ❑ Restorative Self-Care

Mindful self compassion

Mindfulness

Self-Compassion

Ability to hold compassion for self and others
through a **Parallel Process**

(Gerner & Neff, 2019)

Short Form Self-Compassion Scale

HOW I TYPICALLY ACT TOWARDS MYSELF IN DIFFICULT TIMES

Please read each statement carefully before answering. To the left of each item, indicate how often you behave in the stated manner, using the following scale:

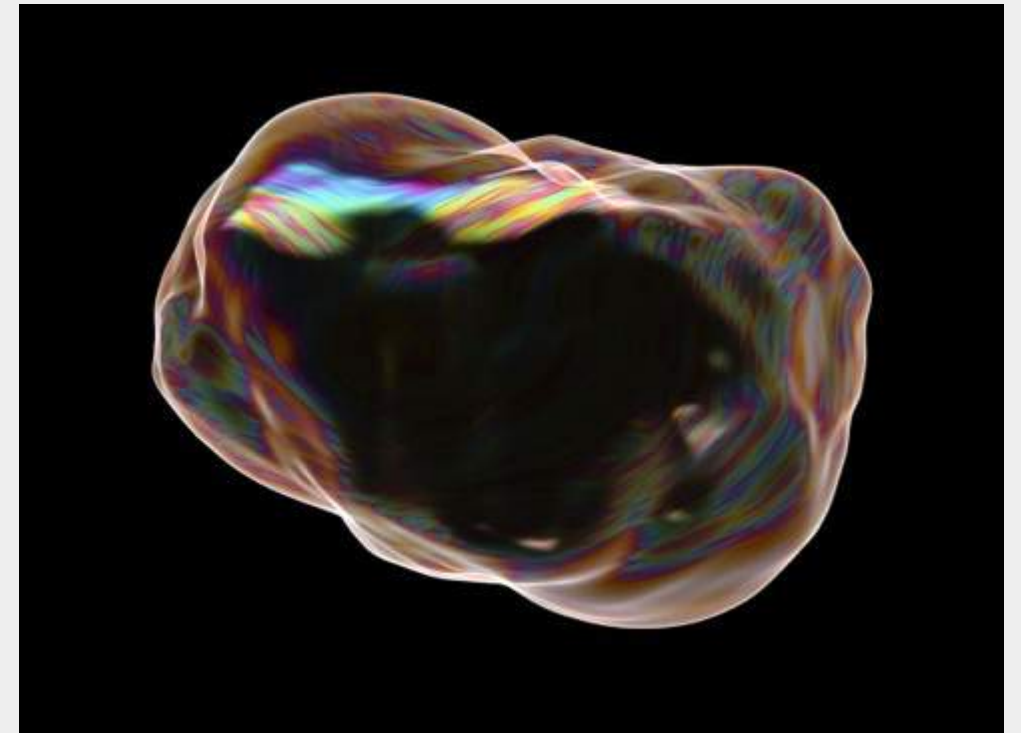Almost   Almost
Never   Always
    1   2   3   4   5

Raes, F., Pommier, E., Neff,K. D., & Van Gucht, D. (2011). Construction and factorial validation of a short form of the Self-Compassion Scale. Clinical Psychology & Psychotherapy. 18, 250-255.

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_____1. When I fail at something important to me I become consumed by feelings of inadequacy.

_____2. I try to be understanding and patient towards those aspects of my personality I don't like.

_____3. When something painful happens I try to take a balanced view of the situation.

_____4. When I'm feeling down, I tend to feel like most other people are probably happier than I am.

_____5. I try to see my failings as part of the human condition.

_____6. When I'm going through a very hard time, I give myself the caring and tenderness I need.

_____7. When something upsets me I try to keep my emotions in balance.

_____8. When I fail at something that's important to me, I tend to feel alone in my failure

_____9. When I'm feeling down I tend to obsess and fixate on everything that's wrong.

_____10. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.

_____11. I'm disapproving and judgmental about my own flaws and inadequacies.

_____12. I'm intolerant and impatient towards those aspects of my personality I don't like.

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Know Your Boundaries

Maintain a trusted relationship	Being their *only* resource
Listen and validate	Fixing, giving unwarranted advice
Focus on the strengths	Focusing on the problems
Acknowledge your own discomfort	Becoming absorbed in the issues
Value your own care, receive support from your own network	Forgetting one-self

Beyond Just Needing Support

- Constant worry, sadness, or feeling overwhelmed
- Struggles to function with daily tasks
- Does not appear to connect/bond with baby
- Feelings of guilt and shame
- Irritability, anger
- Self-medicating

National Maternal Mental Health Warmline

1-833-TLC-MAMA (1-833-852-6262)

Postpartum Support International (Postpartum.net)   **1-800-944-4773**

Reflections

Thank you

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