TITLE: MENTAL HEALTH IN INFANCY

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MENTAL HEALTH

Mental health is not just the absence of mental illness. It is defined as a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. (WHO, 2007)

A clinically significant behavioural or psychological syndrome or pattern that occurs in an individual and that is associated with present distress (i.e., a painful symptom) or disability (i.e., an impairment in one or more important areas of functioning) or with a significantly increased risk of suffering death, pain, disability, or an important loss of freedom. The syndrome or pattern must not be merely an expectable and culturally sanctioned response to a particular event. It must currently be considered a manifestation of a behavioural, psychological, or biological dysfunction in the individual. No definition adequately specifies precise boundaries for the concept of mental disorder. Also known as mental health, mental impairment, mental illness, brain illness, and serious brain disorder (DSM-IV, 1994; p. xxi).
CAUSES OF MENTAL HEALTH

BIOLOGICAL
- genetic vulnerabilities
- drug effects
- physical health
- disability

MENTAL HEALTH
- temperament
- IQ
- self-esteem

PSYCHOLOGICAL
- coping skills

SOCIAL
- family circumstances
- trauma
- peers

An overview of the various causes of mental health, integrating biological, psychological, and social factors.
Infancy: Birth to 18 Months

- Ego Development Outcome: Trust vs. Mistrust
- Basic strength: Drive and Hope

Infancy as the Oral Sensory Stage (as anyone might who watches a baby put everything in her mouth) where the major emphasis is on the mother's positive and loving care for the child, with a big emphasis on visual contact and touch. (Erikson)
Infancy is the period between birth and the acquisition of language one to two years later. Besides a set of inherited reflexes that help them obtain nourishment and react to danger, newborns are equipped with a predilection for certain visual patterns, including that of the human face, and for certain sounds, including that of the human voice. Within a few months they are able to identify their mother by sight, and they show a striking sensitivity to the tones, rhythmic flow, and individual sounds that make up human speech. Even young infants are capable of complex perceptual judgments involving distance, shape, direction, and depth, and they are soon able to organize their experience by creating categories for objects and events (e.g., people, furniture, food, animals) in the same way older people do.
CHARACTERISTICS OF INFANCY

- adjusting to the new environment outside the mother’s body
- hazardous period both physically and psychologically
- preview of the later development
- Sucking and swallowing starts
MENTAL HEALTH IN INFANCY

Infant mental health means the mental health of children from newborns to the age of three. It also includes the parent's relationship with the child. Infants learn a lot about feelings and relationships in their early years of life.
Infant mental health is the optimal growth and social/emotional, behavioral, and cognitive development of the infant in the context of the unfolding relationship between infant and parent. [Infant Mental Health Services Feasibility Study conducted by CEED]

The Minnesota Infant Mental Health Feasibility Study Consultant Team recommended that infant mental health services be identified and organized as a continuum of activities divided into five broad areas:

1. Public Awareness
2. Education and Support
3. Screening
4. Assessment and Intervention
5. Training and Consultation
DEFINITION

- Infant Mental Health represents a shift in focus from attention to the mental health of adults or children to the social and emotional wellbeing of infants, toddlers and their families or those who share responsibility for their care and nurturing. “Infant” refers to children under three years of age. “Mental” includes social, emotional and cognitive wellbeing. “Health” implies wellness (Fraiberg, 1980).
BASIC CHARACTERISTICS OF INFANTS

- Depend on an adult to care for them
- Have physical and emotional needs intertwined
- Are born with unique personalities
- Display individual temperaments (active, cuddly, distant, curious)
- Develop attachments to parents and caregivers
- Like to watch other children
- Use all five senses to learn about the world: seeing, hearing, tasting, touching, smelling
- Communicate with their bodies, their actions, and their sounds
- Explore first their bodies, and then their world as they began to stretch, sit up, crawl, and walk
- Love the traditional games of babyhood which promote coordination and development of attention (Patty Cake, This Little Piggy, Peek-a-Boo)
- Practice new physical skills—grasping, reaching, picking up, pushing etc.
- Begin to practice separating as they crawl
**PRINCIPLES THAT DEFINE THE FIELD OF INFANT MENTAL HEALTH**

- Babies are by nature social creatures.
- Individual differences are an integral component of babies’ functioning.
- Every individual exists in a particular environmental context that deeply affects the person’s functioning.
Infant Mental Health practitioners make an effort to understand how behaviors feel from the inside, not just how they look from the outside.

The interveners’s own feelings and behaviors have a major impact on the intervention. (Lieberman, 1998)
**IMPORTANCE OF INFANT MENTAL HEALTH**

**Social Development**
- ability to form healthy relationships with others
- knowledge of social rules and standards

**Emotional Development**
- experience of feelings about self and others
- positive and negative emotions
- ability to control and regulate feelings in culturally appropriate ways
- development of self-worth, self-confidence and self-regulation
SYMPTOMS OF MENTAL ILLNESS IN INFANCY

- Poor sleep patterns
- Difficulties with feeding
- Restlessness
- Gastric disturbance
- Anxious and tense
- Distressed and fearful
Attachment theory in psychology originates with the seminal work of John Bowlby (1958). In the 1930’s John Bowlby worked as a psychiatrist in a Child Guidance Clinic in London, where he treated many emotionally disturbed children. This experience Bowlby to consider the importance of the child’s relationship with their mother in terms of their social, emotional and cognitive development. Specifically, it shaped his belief about the link between early infant separations with the mother and later maladjustment, and Bowlby to formulate his attachment theory.

Learning / behaviorist theory of attachment (e.g. Dollard & Miller, 1950) suggest that attachment is a set of learned behaviors. The basis for the learning of attachments is the provision of food. An infant will initially form an attachment to whoever feeds it.

Evolutionary theory of attachment (e.g. Bowlby, Harlow, Lorenz) suggests that infant produces innate ‘social releaser’ behaviors such as crying and smiling that stimulate innate caregiving responses from adults. The determinant of attachment is not food, but care and responsiveness.
Attachment is a deep and enduring emotional bond that connects one person to another across time and space (Ainsworth, 1973; Bowlby, 1969). Bowlby defined attachment as a “lasting psychological connectedness between human beings” (1969, p. 194).

Attachment is a way of talking about a parent's relationship and bond with infant.
STAGES OF ATTACHMENT

Up to 3 months of age
indiscriminate attachments

After 4 months
preference for curtain people

After 7 months
special preference for a single attachment figure

After 9 months
multiple attachments
MAKING SURE YOUR CHILD IS HEALTHY ATTACHED

- Secure attachment
- Anxious/Avoidantly attached
- Anxious/Resistantly attached
CAUSES FOR DIFFERENT TYPES OF ATTACHMENT

- Parent Behaviour
- The Child Behaviour:
- Family Influences
**SIGNS OF GOOD ATTACHMENT TO THE INFANT**

- Comes to the parent when hurt, needing help or comfort
- Greets the parent and wants to be close after they've been apart
- Shows affection
- Interacts with the parent while exploring (looks back and makes eye contact)
- Is more comfortable with the parent than strangers
If an infant does not behave in these ways there may be an attachment problem. There may also be a problem if the infant seems to need the parent's help too little or too often. Other signs of attachment problems are if the infant doesn't show affection in any other social situation or shows a lot of affection to strangers. But these can also be signs of other health problems. That's why it's so important to seek help early.
DEPRIVATION SYNDROME

- Flattened nose and face, upward slanting eyes,
- Single palmer crease, short fifth finger that curves inward
- Widely separated first and second toes and increased skin creases

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Malnutrition refers to the situation where there is an unbalanced diet in which some nutrients are in excess, lacking or wrong proportion.

Def: acc. To medical dictionary

Malnutrition is the condition that develops when the body does not get the right amount of the vitamins, minerals and other nutrients it needs to maintain healthy tissues and organ function.
**TYPES OF MALNUTRITION**

*Under nutrition:* Under nutrition is a consequence of consuming too few essential nutrients or using or excreting them more rapidly than they can be replaced.

*Over nutrition:* Over nutrition results from eating too much, eating too many of the wrong things, not exercising enough or taking too many vitamins or other dietary replacements.

**Risk factors:**

- ✔ consuming a diet high in fat and salt, and taking high doses of:
- ✔ Nicotinic acid (niacin) to lower elevated cholesterol levels
- ✔ Vitamin B₆ to relieve *premenstrual syndrome*
- ✔ Vitamin A to clear up skin problems
- ✔ Iron or other trace minerals not prescribed by a doctor.
CAUSES AND SYMPTOMS

CAUSES
• chronic diseases
• diets
• allergies
• Bariatric surgery
• aging

SYMPTOMS
• anemia
• diarrhea
• disorientation
• night blindness
• irritability, anxiety, and attention deficits
• goiter (enlarged thyroid gland)
• loss of reflexes and lack of muscular coordination
• muscle twitches
• amenorrhea (cessation of menstrual periods)
• scaling and cracking of the lips and mouth.
PREVENTION

- Consume plenty of fruits, grains, and vegetables
- Eat a variety of foods that are low in fats and cholesterol and contain only moderate amounts of salt, sugars, and sodium
- Engage in moderate physical activity for at least 30 minutes, at least several times a week
- Achieve or maintain ideal weight
- Avoid alcohol
**DIAGNOSIS**

**Diagnosis**

**Nutritional status determination**
- weight
- body mass index (BMI)
- circumference of the upper arm

**Tests**
- blood test/urine test
- X-rays
formulate diets that will restore adequate nutrition

Tube feeding

Intravenously (parenteral nutrition)
INTERVENTION
An infant mental health service have four parts:

**PREVENTION**

Prevention programs reach out to families that are experiencing greater levels of stress that may increase their young children’s risk of developing social-emotional or mental health problems.

There are opportunities to undertake preventative work in the broadest sense at different developmental stages—

- **Pre-conception**
- **The antenatal period**
EARLY IDENTIFICATION

Early identification include knowing about risk factors of mental illness through parents or caregiver, which predict mental health problems in infant.

Primary care physicians play a critical role through the early identification of risk factors and mental health concerns.
PROMOTION

Promotion services encourage and support social-emotional wellness and good mental health.

TREATMENT

Treatment programs are designed to alleviate the distress and suffering of a young child’s mental health problem and support the return to healthy development and behaviour.
INFANT PROVIDERS NEED SPECIALIZED SKILLS

All providers who work with infants and their families need specialized knowledge and skills to address the unique developmental needs of children birth to three and their families (Fenichel & Eggbeer, 1990; Michigan Association for Infant Mental Health, 2002). Both the excitement and challenge of working with this population stem from the fact that all areas of development are interconnected. Because all areas of development are linked, understanding development is a complex task. There are also many interconnections between infants and their caregivers, between the family and the community, and among parents and the array of professionals concerned with very young children and their families.
LIST OF SKILLS

- Observing
- Listening
- Reflecting
- Building self-awareness
- Seeking collaboration and supervision
- Mastering important knowledge and skills
INFANT PROVIDERS NEED TO MASTER A CORE KNOWLEDGE BASE

The core concepts include:

- Genetic and environmental factors work together to influence development
- Healthy infants are born prepared to form warm emotional relationships
- Make sure there are opportunities for reflective supervision to increase caregivers’ competence and capacity to think through a situation, consider different approaches, observe carefully to figure out which approach might work best, try something and then evaluate whether it works – all the while being able to describe what is being done and for what reasons.
- Support infant providers’ competence by ensuring that they also have the opportunity to discuss issues or concerns with parents and with peers.
TEMPERAMENT HAS AN IMPACT ON BEHAVIOR

It is important to understand the impact of inborn, biological differences on the behavior of individual children. Each infant is born with a personal style, a typical way of approaching or reacting to the world (Chess & Thomas, 1996). Learning about temperament can help providers understand more about these inborn traits that play a major role in each child’s pattern of behavior and may eventually have a major influence on self esteem. Temperament does not predetermine behavior nor is it an “excuse” for behavior. However, being alert to and knowledgeable about temperament traits can help adults not only understand why children react to events differently but also provide help in knowing what kind of individualized support the child could benefit from.
NINE TRAITS OF CHILD’S TEMPERAMENT

- Activity level
- Biological rhythms
- Approach and withdrawal
- Mood
- Intensity of reaction
- Sensitivity
- Adaptability
- Distractibility
- Persistence
**TOXIC STRESS**

Toxic stress occurs when a child experiences strong, frequent and/or prolonged adversity without the buffering of adequate adult support. Infants respond to toxic stress by producing a stress hormone called cortisol. Sustained or frequent action of the cortisol hormone kills brain cells, reduces the number of cell connections, impairs thinking and creates anxious behavior.
FAMILY-BASED RISK FACTORS FOR INCREASED TOXIC STRESS IN INFANT

- Extreme poverty
- Domestic and community violence
- Abuse and neglect
- Homelessness
- Substance abuse
- Incarceration
- Maternal depression
- Lack of basic needs—food, clothing
- Isolation and lack of social supports

Signs of Toxic Stress

- Obesity
- Inflammation
- Poor Digestion
- Fatigue
- Headache
- Mood Swings
- Nausea
- Immune Dysfunction
- Allergies
- High Blood Pressure
- Hormone Imbalance
- Skin Irritation and Rashes
- Poor Energy
“Science clearly demonstrates that, in situations where toxic stress is likely, intervening as early as possible is critical to achieving the best outcomes.” – *Center on the Developing Child*
THE INFANT MENTAL HEALTH PROFESSIONAL COMPETENCIES

- Theoretical foundations
- Law, regulation and An understanding of the implications of laws and regulations as they relate to agency policy
- Systems expertise
- Direct service skills
- Working with others
- Communicating
- Critical thinking
- Reflection
INTERNATIONAL INTERVENTION PROGRAMS

INTEGRATED INFANT MENTAL HEALTH SERVICES (UK)
Having a baby is a time of hope, with the opportunity for a fresh start. Many disadvantaged people aim to do better for their own babies than their parents were able to do for them. They are open to encouragement from people they can trust, be it family, friends, or professionals, who empathise with them. Parents or caregivers who feel emotionally supported themselves are more emotionally available to their babies and this is the core of creative thinking about the infant mental health services.
PRINCIPLES FOR PROVIDING EFFECTIVE INTERVENTIONS

- Focus on the relationship of the parent or caregiver and infant
- Be offered at an early stage when relationships are still being formed
- Provide support to parents and caregivers, based on building up their confidence and skills in caring for children.
- Address the wider environmental circumstances of the family, including their socio-economic needs.
SERVICES PROVIDE

- Preparation for parenthood
- Social networks
- Parenting education
- Day care
- Emergency access clinics
- Identifying and supporting
depressed mothers
- Targeting marginalised families
- Specialist counselling and therapy
- Training courses
The Indian Association for Child and Adolescent Mental Health (IACAM) conceived in 1988 and born in 1990 is the realization of long cherished dream of those mental health professionals who have shown greater commitment to the mental health problems of children and adolescents over long years.
Healthy babies grow into healthy children

Thank you