

Welcome to the Barnard Center Bulletin, a newsletter from the Barnard Center for Infant and Early Childhood Mental Health. Check out what has been happening!

WORKFORCE

ACT Program Inaugural Cohort Celebration!!

On the weekend of May 13-15, 2022, the inaugural cohort of ACT Program clinicians gathered for our final content learning session! What a journey it has been over the course of the 15-month program! On the evening of May 14, 2022, ACT Program staff, 14 of 16 enrolled clinicians, their families and friends, and IECMH partners from private and public organizations and institutions attended the program completion ceremony and reception. We were gifted with a beautiful sunny afternoon, children playing, and a great view from the Vista Cafe in Foege Genome Building. We dearly missed the two clinicians who were unable to be with us, but look forward to continuing to stay connected through our ongoing community of practice.



ACT Program 2022-2023 Cohort Launched!

We've launched our second cohort of ACT Program clinicians! On the weekend of June 3-5, 2022, we proudly welcomed the 2022-2023 cohort of nineteen clinicians from across the state of Washington, bringing with them a wide range of professional and lived wisdom, knowledge, and experiences. Eighteen of the 19 enrolled clinicians were able to gather in-person in Seattle. Using technology available at the UW Tower, our hybrid (virtual & in-person) content learning sessions over the 3-day weekend focused on building relationships and introducing the framework of diversity-informed practice engagement. We are also excited welcome the Barnard Center Leadership Fellows, Haruko Watanabe and Abigail Bocanegra, who have and will continue to serve as instructors/facilitators for the ACT Program. We thank our infant and early childhood mental health (IECMH) community partners, both public and private, who have made it possible for the ACT Program to continue to identify, cultivate, and grow relationships across the state as we work to expand and diversify the IECMH clinical workforce and community.

Workforce Pathways Successful Presentations

The Workforce Pathways Committee (WPC), made up of a collaborative between the University of Washington (Barnard Center and Social Work), Green River College, Washington Association for Infant Mental Health, and the Department of Children, Youth, and Families has presented to over 400 participants in a variety of service settings. WPC provides presentations to community groups and service settings about career and educational opportunities in the field of Infant and Early Childhood Mental Health. Presentations are followed up with 'drop-in' sessions to support those interested in a career to learn more about funding options and support. This strategy has yielded at least seven participants enrolling in one of three programs featured at the University of Washington or Green River College.

DISSEMINATION

Barnard Center Free Lecture Series

The Barnard Center is providing free lectures to the community 6 – 7 times per year. These lectures are timely, brief, educational offerings on topics relevant to providers serving families with children under the age of five.

Don't worry if you missed the presentation, they are all available on our YouTube Channel, click here:

<https://www.youtube.com/channel/UCZsMDPcr5SEBY4bnaSDv-lg>

- In April 2022 Monica McLemore, PhD, MPH, RN offered a lecture titled *Operationalizing Reproductive Justice. Re-imagining What's Possible: A Future Where Reproductive Justice is Achieved.*
- In May 2022 we heard from Kadija Johnston, LCSW about *Addressing Racial Inequality in Early Care and Education through Mental Health Consultation.*

Our next lecture is on **July 26, 2022 at 9am PDT** and we will be learning about ***The Border is Here: Immigration Trauma and Loss*** from Carmen Rosa Noroña, LICSW, Ms. Ed. IECMH-E® and Ivys Fernández-Pastrana, JD. **To register visit** <https://www.pcrprograms.org/training/>.

NEW COURSE

Faculty at the Barnard Center in Child, Family, and Population Health Nursing teach an introductory course to infant and early childhood mental health (NSG 432). Over 1,500 UW undergrads across campus and programs have participated in the class since 2014, exploring how

“the first three years last a lifetime” and the potency of early relational health.

We are pleased to offer a new course, Trauma and Resilience in Early Childhood (IECMH 433), in the coming academic year. Using an infant and early childhood mental health lens, we explore evolving research on trauma and its impact in childhood, resilience in families and communities, and trauma-informed care and practice. Miriam Hirschstein and Monica Oxford, selected as fellows in the 2022 Technology Teaching Fellows Institute at UW’s Center for Teaching and Learning, will focus on strategies to increase equitable student engagement and voice in the course’s online environment. The 5-credit, online course will be offered twice a year.

RESEARCH

Promoting First Relationships® Has been Approved for Federal Funding

In February 2022, the Promoting First Relationships® (PFR) Home Visiting Intervention was approved by the Home Visiting Evidence of Effectiveness (HomVEE) review and is eligible for [Maternal Infant and Early Childhood Home Visiting \(MIECHV\) funding](#). This new opportunity gives organizations increased access to funding for PFR home visiting to serve families and their children birth to five. The HomVEE review is a rigorous evaluation of a program's effectiveness.

Promoting First Relationships® has undergone **five completed randomized clinical trial studies** over the last 15 years: two studies in child welfare, two with American Indian communities, and one with English and Spanish speaking women referred to mental health providers during pregnancy.

PFR results are exceedingly consistent. Across all five studies (Spieker et al., 2012; Oxford et al., 2016; Booth-LaForce et al., 2020; Oxford et al., 2021; Booth-LaForce et al., 2022), Promoting First Relationships demonstrated:

- Improved sensitive and responsive caregiving behavior, measured using the Parent-Child Interaction Scales by coders blind to the treatment status.
- Improved caregivers' knowledge of infant/toddler social and emotional development

PFR also produced child outcomes, including reducing child's acting out behaviors, as well as **child welfare outcomes** including preventing foster care placement by 2.5 times.

What works for whom? Mother's psychological distress as a moderator of the effectiveness of a home visiting intervention (under review).

Oxford, Monica L., Hash, Jonika B., Lohr, Mary Jane, Fleming, Charles B., & Spieker, Susan J.

The National Institutes of Health funded randomized control trial, titled The Mom and Baby Program/ Programa Para Mamá y Bebé is ending this summer. Recent publications document that delivering Promoting First Relationships (PFR) home visiting to women with lower income and perinatal mental health needs is an effective strategy for Spanish and English-speaking new mothers. Results indicate that PFR improved caregivers' sensitive and responsive caregiving, increased their knowledge of social and emotional development and decreases the expression of externalizing behavior their children at one year of age (Oxford et al., 2021). Recent analysis also shows that women who began the PFR program with very high symptoms of psychological distress (e.g. depression, anxiety, post-traumatic stress symptoms, anger, and interpersonal sensitivity) showed greater sensitive and responsive parenting skills relative to the control group and commensurate with those who did not report high psychological distress at the start of the program (when child was six weeks old). Women who started PFR with high levels of psychological distress also increased in their parenting confidence relative to the control

group, through the baby's first year. These results are important because they reduced health inequality within this population. , As in prior research with other populations, these results indicate that PFR benefits those with the greatest psychological need.

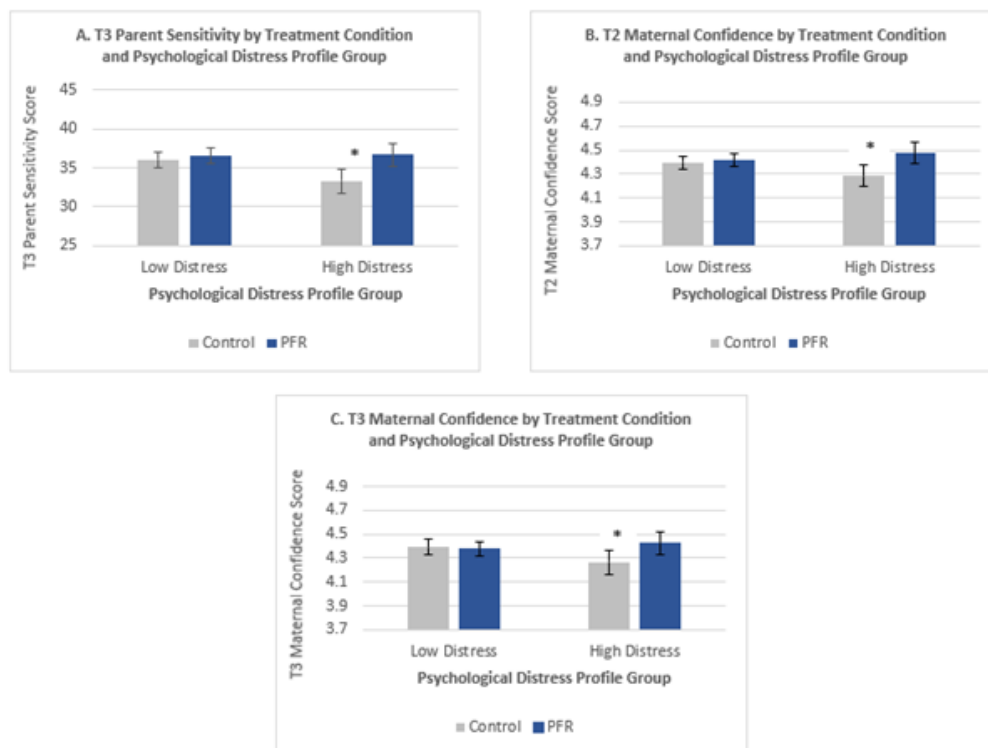


Figure 1. Treatment condition by psychological distress profile interactions for A.) T3 parent sensitivity, B.) T2 maternal confidence, and C.) T3 maternal confidence. Shown are estimated marginal means and 95% confidence intervals. *N* = 216.

Spieker, S. J., Crittenden, P. M., Landini, A., & Grey, B. (2021). Using parental attachment in family court proceedings: an empirical study of the DMM-AAI. *Child Abuse Review*, 30(6), 550-564. <https://doi.org/10.1002/car.2731>

The two methods for classifying Adult Attachment Interviews (AIs) for family court decision-making, Berkeley and DMM, both expand Ainsworth's three ABC infant attachment categories. The Berkeley (ABC+D) method adds a fourth Disorganized/Unresolved category in adulthood. In contrast, the DMM method identifies an expanding array of strategies across the lifespan as neurological development makes

more complex strategies possible. This study examined DMM-AAI classifications in a sample of 332 British AAIs and compared the results to published meta-analyses of the Berkeley AAI. Six a priori hypotheses addressed the central question raised: which classificatory method for the AAI is more useful for child protection?

The study's results support the validity and utility of the DMM-AAI to provide important and unique information for family courts. DMM-AAI classifications differentiated (1) normative adults, (2) parents with mental health problems, (3) parents in family court proceedings, and (4) incarcerated violent criminals on attachment strategy, psychological trauma, and pervasively high or low arousal. We assert that the DMM can contribute to court decision-making when integrated with other assessments and clinical reports.

IN THE NEWS

Founding Executive Director of the Nursing-Child Assessment Satellite Training Program (NCAST), Ms. Georgina Sumner, passed away at age 91 on April 30th 2022.

Ms. Sumner's long career in nursing began when she graduated from the RN Nursing School at St. Paul Hospital in Vancouver, BC, Canada. In 1979, Ms. Sumner was recruited by the University of Washington School of Nursing to direct and disseminate a new, innovative assessment tool. It was developed by Dr. Kathryn E. Barnard. While serving as the Executive Director of NCAST Programs from 1979 – 2001, Ms. Sumner tirelessly and passionately promoted and mentored nurses around the world in the new, ground breaking Teaching and Feeding Parent-Child Interaction assessment. She was also instrumental in the development and dissemination of the internationally renowned Keys to Caregiving program, which taught nurses to help new parents appreciate the capabilities of their new baby and the importance of learning to read their baby's cues. Ms. Sumner retired in 2001 to immerse herself in her other passion, nurturing and growing her garden at her home in Matthews Beach. Ms. Sumner's legacy still thrives and exists at Parent-Child Relationship

Programs (formerly NCAST Programs) at the Barnard Center for Infant and Early Childhood Mental Health at the University of Washington School of Nursing

[New report on IECMH dyadic services & billing in WA](#)

Barnard Center and WA-AIMH recently published a report regarding the Infant-Early Childhood Mental Health (IEMCH) Dyadic Services and Billing Survey. The survey was sent out in the fall of 2021 and gathered information from clinicians working with children from birth through age five and their families in Washington State. Respondents were asked about their experiences billing for dyadic mental health services. In response to feedback related to Apple Health, Health Care Authority (HCA) provided a response to address the needs and challenges raised by clinicians, which can be found on pages 14-16 of the report. [Read the report here.](#)