



BABY TALK

The Official Newsletter of the Ohio Association for Infant Mental Health

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Notes From The President

by Mike Thomasgard

OAIMH has made remarkable progress in the last year and I'm proud of what we've accomplished. Our membership continues to grow. We now have five local chapters, a web site(www.oaimh) and work is about to begin on forming case-based continuing education Collaborative Peer Supervision Groups.

I hope that those of you who attended our 4th Annual Fall Conference in Columbus found it as enjoyable as I did. A tremendous amount of work was done behind the scenes by board and regular members as well as volunteers at various agencies and institutions.

For 2004, we hope to enlist the services of a conference coordinator to help us with the many details that must be attended to for a successful conference. If you have a specific topic you'd like to learn more about and/or a specific speaker, please contact me at my email address: thomasgardm@pediatrics.ohio-state.edu.

I am optimistic that we can gradually increase the number of physicians and child psychologists in our organization by continuing to offer continuing (medical) education credits. The more perspectives we have represented in the Ohio Association, including the parents of young children, the richer our collaboration in the service of young children can become.

OAIMH will be well represented at the upcoming 9th World Congress for Infant Mental Health (WAIMH) in Melbourne Australia. A poster presentation by John
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FOURTH ANNUAL OAIMH CONFERENCE A SUCCESS!

By John Kinsel

On November 21, 2003 two hundred ninety-one folks gathered at the Worthington Holiday Inn for the Fourth Annual OAIMH Conference. With the theme of "Back From the Edge: Relationship-Based Interventions", the conference focused on Infant Mental Health treatment and intervention.

Charley Zeanah was back for a second year, providing a keynote address that masterfully wrapped key principles and concepts around an illustrative case study. Personable and informative, Dr. Zeanah again made the complex issues associated with infant-parent relationship disturbances and their treatment readily accessible.

This year the afternoon provided a variety of breakout sessions that covered such topics as Traumatization, young victims, genetics and culture, self-regulation and foster care. Leadership was provided by Dr. Zeanah, Beth Troutman, PhD, Maria Sargent, PhD, and Jane Sites, PhD.

Sandwiched between sessions was lovely lunch disturbed only by a brief OAIMH business meeting chaired by OAIMH President Mike Thomasgard. Results of the voting done by the 79 OAIMH members present were shared (see related article on page 2), Treasurer Jeff Rosenbaum gave a report (we're solvent!) and recognition given to Lynne Henkel for her extra effort in helping organize the conference and Roz Williams for her years as OAIMH Board secretary.

While some of us missed the natural setting of past conferences at Deer Creek State Park, the accommodations at the Holiday Inn were more suited for this our largest conference. A look
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OAIMH BOARD TRANSITIONS

By John Kinsel

The November Annual Conference provided OAIMH members with an opportunity to vote on several important issues affecting the operation of our organization. Passed was a resolution authorizing the OAIMH Board to pursue incorporation as a 501 c3 non-profit organisation. Read more about what this will mean for OAIMH in a future BABY TALK.

The membership also elected two new members of the Board to fill vacancies left as terms were completed. Roz Williams of Columbus has ended three years on the Board. She has served as Secretary from the Board's inception and her concise and accurate recording, as well as her strong voice for quality Infant Mental Health will be sorely missed. Charter President John Kinsel also has completed his three year term. The Board is not so easily rid of him, however, as he returns as the representative from the Greater Dayton Chapter.

New to the Board is **Janece Warfield, Psy. D.** Janece is Associate Professor in Wright State University's School of Professional

Psychology and Program Coordinator of the Center for Child and Adolescent Violence Prevention. She is founder of Dayton's Collaborative Office Rounds peer supervisory group, as well as Co-Coordinator of the Greater Dayton Chapter of OAIMH. She is active in both local and state Early Head Start programming. Janece has a long time interest in Infant MH, having been an original member of the Infant Mental Health Stakeholders group, OAIMH's historical predecessor.

Also beginning a term, but not new to the Board, is **Chandra L. Pester, MSN, RN, CS.** An Advanced Practice Nurse in **Cincinnati, Ohio**, she is the Manager of Early Childhood Mental Health at The Children's Home of Cincinnati where she has developed a continuum of services for Early Childhood Mental Health. Her practice has focused on the healthy development of young children and families, as well as on the impact of chronic illness or trauma on young lives. Chandra has been serving on the OAIMH Board as the representative of the Southwest Ohio Chapter, a group she has helped to organize.

We welcome these two strong leaders to the 2004 OAIMH Board.

Case Study: "The Sky is Falling:" Helping a Two-Year-Old Use the Bathroom Again After a Traumatic Experience. By Mike Thomasgard

(The following narrative is based on a recent Collaborative Peer Supervision Group.)

Fresh from Dr. Zeanah's recent presentation on PTSD, I met Marie, age 31 months, and her mother in the hospital-based Behavior Clinic where I work. Marie greeted me with a smile and eagerly picked up a mother figure and her daughter from my toys and headed for the small playhouse. Before any words were spoken, Marie was guiding the mother figure up the steps to the second floor bathroom to check out the toilet and bathtub, while the smaller daughter figure remained in the kitchen. Marie had been toilet trained for several months and was dry at night until early September when a portion of the bathroom ceiling fell down on her while she was using the toilet. Marie's mother had two simple goals: 1) Marie would again use the toilet and, 2) take a bath in the bathtub in the family's only bathroom located on the second floor. *(Continued on Page 4)*

President

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Kinsel and Mike Thomasgard will highlight accounts from 66 volunteer Disaster Childcare workers who cared for young survivors of the World Trade Center collapse and the Traumatic Stress Disorder symptoms that followed.

A conversation hour on “The Electronic Age and IMH” will highlight work done by Mike Thomasgard and Jeff Rosenbaum on our web site with potential applications for WAIMH affiliates. I look forward to sharing what I learn about caring for infants, young children and their families soon after I return from Down Under.

We will continue to improve the utility of our web site in 2004. A parent section has been proposed for the future and we must continue to reach out to other families and professionals who work with, care for and serve infants, young children and their families. A copy of Dr. Zeanah’s “Working Model of the Child Interview” should be available in pdf format under the announcement section of our home page by late January. Thank you for being patient since updates to certain sections of the site do involve a fee.

Have a safe and enjoyable start to the new year. On behalf of the OAIMH board, may 2004 treat you well. Happy New Year!
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NEW PHONE NUMBER FOR OAIMH

If you have questions about OAIMH that require a phone contact, please use our new number: 614-722-2435. You will then be in touch with President Mike Thomasgard’s office at Columbus Children’s Hospital. Either he or his able assistant, Lynne Henkel, will help you. Please stop using the old 888 number, as it is now a private line. Thanks!

The Ohio Early Childhood Mental Health Plan

By Mike Thomasgard

It’s been a long haul! However, work continues on Ohio’s Early Childhood Mental Health (ECMH) Plan. First begun in 1994 by the Infant/Family Mental Health (IFMH) Subcommittee of the Ohio Interagency Early Intervention Council of the Ohio Department of Health (ODH), the current effort is being led by Marla Himmeger of the Ohio Department of Mental Health (ODMH).

From the perspective of OAIMH, our representatives (John Kinsel and Mike Thomasgard) are working to ensure that the plan reflects the infusion of infant mental health principles into all aspects of governmental policy, public awareness, services, funding and training that ultimately interface with Ohio’s youngest citizens and their families.

Almost every conceivable Ohio state government department (e.g., ODJFS, ODH, ODE, ODMH) and several non-governmental organizations (e.g., Build Ohio <http://www.buildinitiative.org>), OAIMH) have a representative on the ECMH Advisory Group.

Over the past months, a number of different documents have been carefully reviewed by the committee, including a Strategic Plan for Ohio drafted by OAIMH’s predecessor, the ODH IFMH Subcommittee, as well as the ODMH ECMH Initiative, the President’s New Freedom Commission on Mental Health (<http://www.mentalhealthcommission.gov/reports/finalreport/fullreport-05.htm>) and the Florida Strategic Plan for IMH (<http://www.cpeip.fsu.edu/IMHplan.pdf>).

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Case Study (Continued from Page 2)

The story was recounted in some detail: as Marie’s mother was going up the steps she heard her daughter scream. Upon entering the bathroom she saw Marie holding her head and crying. A portion of the drywall was on the bathroom floor. She called an ambulance. After examining Marie, the crew did not believe she needed to go to the emergency room. She did have a large “knot” on the top of her head, but there was no bleeding and she had been awake the entire time. Marie spent the night in her mother’s arms crying. In the morning, Marie was taken to the emergency room due to her clingy behavior and persistent crying. The exam revealed a “minor head injury” and she was sent home.

While the physical injury indeed had been “minor”, there certainly also had been an emotionally traumatic experience that was out of the ordinary and that had been witnessed by both Marie and her mother. Was this a form of PTSD or an Adjustment Disorder with Anxious Mood? I wondered why an ambulance had been called and could certainly understand why Marie didn’t want to enter the bathroom again.

For the past two months, Marie had been using her portable potty chair around the apartment and was being “bathed” at the downstairs sink. She still wouldn’t go upstairs with her mother and she resisted any attempts to get her to cross the bathroom threshold.

Marie was certainly fearful, demonstrated avoidant behavior, had separation difficulties and was just beginning to engage in repetitive play with her own dolls at home as they practiced using the
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CHAPTER CHAT

Southwest Chapter: We in the Southwest Association of OAIMH have had a very productive year. We have successfully sponsored a conference, two community presentations, adopted by-laws, established sub-committees and are planning two more conferences. WHEW!!!! Our group has about 20 members and as you can tell we have a lot of energy. We will be having training on helping therapists prepare to testify in court. We are excited to have the Hamilton County Magistrates, Guardian ad Litems, Court Appointed Special Advocates and Hamilton County Prosecutors and attorneys involved in our day. We are also planning our second annual conference for the spring that will focus on early childhood mental health issues in the daycare setting.. I am sure with this group and its new officers we’re off to another great year!

(Submitted by Chandra Pester)

Northwest Chapter: The Northern Ohio Infant Mental Health Consortium (Lorain, Erie, Ottawa, Huron Counties) had a full and active year in 2003. The year started with a

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ECMH Plan *(Cont. from page 3)*

The ECMH Advisory Group is currently crafting a document that will be part of a larger report on the welfare of all Ohio’s children to be presented by Gayle Channing Tenenbaum of the Public Children Services Association for Ohio (PCSAO) (<http://www.pcsao.org>) to Cabinet Council in early 2004.

“Cabinet Council was created in 2000 by Governor Taft to help families seeking government services...to streamline and coordinate existing government services for families seeking assistance for their children. This perspective was embodied in the creation of a Family and Children
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Case Study (Continued from Page 4)

portable potty chair. Marie was able to use a toilet away from home but only if her mother stayed with her. Sleep and eating habits were unchanged and there was no aggressive behavior.

Were either Marie or her mother's reactions out of proportion for the experience or inappropriate for Marie's age? Marie could easily speak in 5-6 word sentences and she listened intently as the story continued.

The history revealed several other traumatic events such as a poor feeding in the first week of life that resulted in several trips to the emergency room where nothing was found. Ultimately the primary care physician requested a barium study that revealed a significant problem—a twisting of Marie's gut that required surgery. When Marie was 6-7 months old, her mother had watched as she was nearly hit by a piece of her nursery's ceiling while Marie was crawling into the upstairs hallway. These certainly were traumatic reminders of perceived vulnerability from the past.

Did this mother feel guilty that she hadn't pressed the case more fully with the landlord to fix the ceiling after the first incident? What symptoms of re-experiencing were observed at home?

There was repetitive play that had less elaboration than previously. Marie had experienced several dreams in which she awakened screaming, "it's going to fall." There certainly was persistent avoidance—Marie avoided using the bathroom and she was regressed in her toilet training. (Continued in next Col.)

Case Study (Continued from Prev. Col.)

There were no changes in her interests, no social withdrawal, and her affect was unchanged. However, Marie no longer slept in her own room and she manifested increased arousal with an exaggerated startle to any sudden noise. A new fear of a "bogey man" had emerged in the apartment and plenty of separation anxiety remained, although this was getting better (she would go part way up the stairs alone).

I told Marie's mother that her reenactment in imaginary play was a good sign and that since she (mother) had not been directly threatened this predicted a better outcome for Marie. This was a significant problem for this dyad. The ceiling had been fixed, routines were being reestablished, and I advised her to praise any small steps toward entering the bathroom with stickers and a positive gesture.

I supported daily play between Marie and her mother with dolls to help Marie regain mastery over the experience and to represent the trauma in doses she could tolerate. In time, she might even be able to put a narrative together that would allow some closure and understanding of what happened.

One month later, Marie was just starting to use the upstairs tub although she appeared very uneasy while the water was being drawn. I wondered if this was a reminder of the toilet flushing just at the time the ceiling fell. She could now go upstairs by herself. I was optimistic that Marie would continue to do well with patience, support and time.

Thank-you Dr. Zeanah!

Chapter Chat (Continued from Page 4)

wonderful visit to the **Reggio Emilia Exhibit, The Hundred Languages of Children**, which stayed throughout the year at the Center for Leadership in Education near the Lorain County Community College campus. Members of our chapter and guests wandered through the exhibit, letting our questions and imaginations soar as we viewed the thrilling examples of the work done with young children in publicly financed infant-toddler and preschools in this northern region of Italy.

Many professionals in the early childhood education and mental health fields in Ohio are learning about this approach to working with children. We experienced the deep appreciation and respect their teachers have for the learning, curiosity and creativity of young children. It is striking how healthy mental health needs, parent involvement and respect for the children's community can be integrated and interwoven into every aspect of how teachers work with children.

Our Chapter has also become increasingly aware of the need to partner with a larger network of private and non-profit organizations to support community initiatives for developing services for young children and their families/caregivers. We are expanding our base of interested people, learning about all the services in our region, and making connections with other groups who have developed similar initiatives. This has been an exciting time for us, especially when everyone is so keenly aware of budget shortfalls.

(Submitted by Barb Feldmar, Chapter Chair)

Conference (Continued from Page 1)

the evaluations reveals an overwhelmingly positive response to the conference. Many thanks to all who worked hard behind the scenes to make the conference work!

ECMH Plan (Continued from Page 3)

First 'Cabinet Council' whose members would guide policy, [and] align program efforts/resources..."

At the state level, the membership of the FACFCC was "...composed of the Superintendent of public instruction and the Directors of [Youth Services, Job and Family Service, Mental Health, Health, Alcohol and Drug Addiction Services, Mental Retardation/Developmental Disabilities (MRDD) and Budget and Management.]" *

The ECMH Advisory Council held a meeting on November 20 in Cleveland that featured Cindy Oser of Zero to Three's Policy Center and Dr. Wil Blechman, Past President of the Florida Association for IMH. Gayle Channing Tenenbaum of PCSAO used this opportunity to gather further information from the ECMH Advisory Group and the guest speakers. Two useful publications from Zero to Three were highlighted: *America's Babies: The Zero To Three Policy Center Data Book* by Cindy Oser and Julie Cohen, 2003 (available through <http://www.zerotothree.org>) and *Growing Up Healthy: What Local Governments Can Do to Support Young Children and Their Families* by Rebecca Parlakian, 2003, Zero to Three Policy Center.

At a December 17 meeting of the ECMH Advisory Group in Columbus, five major goals for the Ohio ECMH plan were chosen: Training, Funding and Financing, Services, Public Awareness and Policy. Specific objectives and action steps are being drafted. The Advisory Group will be meeting again in January.

*All quotes from www.ohiofcf.org/documents/statut