To Our Colleagues and Friends...

New developments in the field of early childhood development, specifically those that shed light on the trajectories of low-income or poverty-affected young children, inspire us to think of new and more comprehensive ways to offer services to the very young children of the Bronx and their parents. Partly, this involves how we shape our direct services, and partly it influences how we seek partnerships and collaborations with other organizations to achieve better outcomes for our children and their families. Inspired by the Frontiers of Innovation Project of the Harvard Center on the Developing Child, and our role in it as part of the Innovation Planning Community, we are aspiring to develop and evaluate new approaches that have the potential to achieve “stretch outcomes” for the most vulnerable children. The Frontiers of Innovation theory of change has evolved over time from a focus on promoting nurturing relationships for vulnerable children, to an expanded focus on reducing children’s exposure to toxic stress, and, most recently, to include the need to build the assets and capacities of low-income parents in order to achieve breakthrough outcomes for children. By developing intensive programs to promote children’s secure attachments to parents, working with the child welfare and other systems to focus attention on ways to reduce children’s exposure to toxic stress, and designing systems of care that include adult development in the service plans for young children, we hope to be part of the community of practitioners that, in fact, achieves stretch outcomes. In all that we do, your input, participation and partnership contribute to these endeavors, and inspire us with new ideas and possibilities.

-Susan Chinitz, PsyD

HIGHLIGHTS: Professional Activities

- Susan Chinitz received the ACS Commissioner’s Child Advocacy Award.
- Susan Chinitz presented at the National Council of Juvenile and Family Court Judges Child Abuse and Neglect Institute, September, 2012.
- Lauren Gourley, Carina Wind, Erin Henninger and Susan Chinitz published a manuscript: “Sensory Processing Difficulties, Behavioral Problems, and Parental Stress in a Clinical Population of Young Children”.
- Joanne Loeb, Ethel Teichberg-Sabath, Anne Murphy and Emily Fried presented at recent New York Zero to Three Annual Conferences.
- Emily Fried co-wrote an article published in The 2012 Zero to Three journal.
- Joaniko Kohchi gave a training for the New York Center for Child Development in September, 2012 on “Subjective Responses to Helping Relationships”, and presented at the Connecting for Children’s Justice Conference in Nashville in November, 2012 on “Reflective Supervision and Relationship-Based Practice” with Mindy Kronenberg, PhD.
- Emily Fried and Anne Murphy each published chapters in a new book: “Attachment-Based Clinical Work with Children and Adolescents”.
- Joaniko Kohchi participated in the Borough President’s Health and Wellness Summit in April, 2013, presenting “Developmental Highlights Birth to Three: Brain Growth, Nurturing Relationships and Implications for Adult Health.”
- Joaniko Kohchi, Marian Silverman, Denise Giammanco and Merrill Schechtman (Director, EITI), presented at the Early Intervention Training Institute at the Albert Einstein College of Medicine.
- Denise Giammanco held a parent workshop on effective discipline at the Easter Seals Child Development Center, April 2013.
- Anne Murphy has been invited to present at the International Attachment Conference in Pavia, Italy, Aug. 2013.

Thank you

We would like to express our gratitude to the Robin Hood Foundation & The New York City Council for all of their funding and support.
Immigrant Families Mediating the Preschool Educational System in the 21st Century

According to the census, the fastest growing groups of preschool children are members of minorities. One in four children between the ages of birth and six is from an immigrant family originally from the continents of Asia, Africa, or Latin America and the Caribbean.

The ECC has partnered for several years with Bronx House Universal Pre-K on a Preschool Consultation Program which serves families from diverse and varied backgrounds. The parents and other caregivers focus on their child’s education as a path to success, simultaneously devoting themselves to seeking employment (often working long hours), and juggling responsibilities for numerous agencies to provide for family needs, such as housing and health care. Complicating the preschool experience for many of the students is that this is often the first time they are exposed to English and the mainstream culture, which can be significantly different from their home environment.

The role of the preschool is to provide a relationship-based learning environment, which helps the young child master academic tasks, and develop resiliency and social skills. A consideration for children from immigrant families is that they are dual language learners coming from a unique cultural background. Educators in high-quality early-education programs may wonder how children are viewed in their own culture, what activities and behaviors parents encourage, and how to support the children during the transition from home to school, and from one culture to another.

Even though preschools embrace cultural diversity, children still have the arduous task of bridging their two worlds. Children from immigrant families may have fear of the unknown and present as withholding or distractible until they have adapted to the program. They may be working throughout the day to hold/contain their behavioral and emotional responses to the new expectations, which can be a very difficult, demanding, and emotionally draining process. I have known a number of children, many dual language learners, who spend their day mutely in school but become very animated and vocal about their day when their parents arrive.

The ECC consultants have partnered with Bronx House educational staff in order to deepen understanding of the child’s home environment and cultural expectations, and have helped families understand the educational demands and adjustment their children experience. Parents have eagerly sought support following recommendations to create a language-enriched household and support their child’s independence in self-care. They have also focused on developing routines that mirror the child’s day in school in order to make the transition easier. This, coupled with push-in services to help children with separation, problem-solving and social emotional development, has contributed to providing a secure base so that all children can be ready for kindergarten.

- Denise Giammanco, M.A.
Child Development Specialist

Preschool Consultation Project UPDATE:

Bibliotherapy for Hostile Attribution of Intent among Preschoolers

A familiar scene plays out frequently in many preschools, including the Bronx House Universal Pre-K, where I have spent over a year as an extern in ECC’s Preschool Consultation Project: a child does something which accidentally affects another child, and the "victim" seeks retribution either by responding physically or by appealing to the teacher to punish the other child. This scenario can play out in the block area, playground, during snack, or could even be as simple as two preschoolers bumping into each other. The psychological construct describing these situations, which stems from the social information processing work of Crick and Dodge (1994), is “hostile attribution of intent” as it involves the perception of hostile intent in others’ actions.

Hostile attribution of intent is a cognitive interpersonal concept, and longitudinal studies have demonstrated that poor interpersonal cognitive skills are linked with psychopathology, higher levels of violence, and at-risk behavior. While cognitively based interventions have been explored to reduce hostile attribution of intent and have had immediate results, they do not address the emotional content. Taking these factors into consideration, for my dissertation I will be implementing bibliotherapy, which has a more personal connection, as an intervention for hostile attributions of intent among preschoolers. Teachers will read stories and explore the content with students with a goal of helping them to identify with the characters and events in the story, experience catharsis of their own emotional tensions as the character works through the hostile attribution of intent, and develop insight by becoming better aware of their attributions, more knowledgeable of possible alternative solutions, and better able to apply what they have learned. Regardless of findings, this study offers potential as an early intervention and a school-based intervention, as well as a guide for educators and psychologists for incorporating socio-emotional content into curricula.

- Caitlin M. Bonanno, School Psychology PhD Candidate, Fordham University
Many young children referred to the Early Childhood Center display anxious and aggressive behavior as well as inattention and hyperactivity. Their emotional and social difficulties often reflect the impact of early trauma and may also indicate delays in their acquisition of age appropriate developmental skills. The ECC takes a multi-pronged approach to these problems, providing a variety of therapeutic modalities and working with relevant social systems to address the needs of each individual child and family. Recently the ECC has begun offering a new treatment intervention, Parent Child Interaction Therapy (PCIT) which aims to improve child outcomes by helping caregivers develop positive, effective communication and parenting strategies.

Parent Child Interaction Therapy is an evidenced-based intervention originally developed by Sheila Eyberg, PhD., for children with behavior difficulties and their families. PCIT involves teaching parents effective communication and behavior management skills with the goal of promoting positive parent-child interactions. In early 2011 ECC was chosen as one of a few sites across the country to be trained in a model called “PCIT for Traumatized Children” funded through a SAMHSA grant given to the UC Davis CAARE diagnostic and treatment center in Sacramento, California. Since April of 2011 five different clinicians have participated in the training program, receiving supervision from an experienced California-based PCIT trainer who interfaced with trainees primarily using telemedicine capability.

During the training period each clinician provides therapeutic services for at least two families, teaching parenting skills in both child-directed and parent-directed play scenarios. Through weekly therapy sessions, parents learn both how to support and enhance child-lead play and how to provide clear, appropriate directions and consequences when needed. Clinicians remain in an observation room and communicate with parents by FM receiver through a “bug in the ear”. PCIT is notable for the component of live coaching, which allows the therapist to engage “in the moment” with parents. Sessions are videotaped and often reviewed later with the supervisor. Clinicians also collect multiple pre and post treatment measures to assess the progress of each family.

Over the past few months, clinicians have seen some positive aspects to the PCIT approach. For example, the idea of “special playtime” in which parents and children engage in child-lead play together for at least 5 minutes per day at home, appears to benefit both parent and child. Also, the fact that the therapist is out of the room for much of the therapy session allows for more interaction between the parent and child and forces the parent to take a more active role in engaging the child. The direct teaching involved in PCIT can be helpful to some parents who want clear directions to follow and to others who have never had models of effective, sensitive caregiving. Clinicians have already seen some noticeable improvements in the parent-child interactions for families participating in the training. As parents become more supportive, responsive and more predictable in their language and behavior, the children in turn become calmer, more focused and more communicative. Over time clinicians will have a better opportunity to assess whether these improvements reflect actual changes in the parent-child relationship. For many families this approach will be used in conjunction with an attachment-based parent-child therapy or with collateral parent sessions to address parent trauma history and mental health issues.

- Joanne Loeb, PhD
Parents of children who are seen at ECC often need individual mental health services, apart from the treatment with their children. They come to the center with lives marked by multiple stressors--ongoing poverty, their own history of trauma and loss, family dysfunction. They may be in crisis or struggling with longstanding or untreated psychiatric and emotional problems: depression, anxiety, post-traumatic stress disorder, learning disabilities, and/or relationship disorders. Their problems impact them and their children; indeed a child’s problems may be a manifestation of the parent’s and cannot be fully addressed without the parent being in treatment.

In an effort to supplement community mental health resources, ECC developed the Adult Mental Health Service in 2005, providing dedicated psychiatric services for parents. The psychiatrist is Board-Certified in child, adolescent and adult psychiatry, and thus attuned to issues of development and family which are core to the work of ECC. While maintaining the parents’ strict confidentiality, the psychiatrist is available to collaborate with other program staff in regard to supporting children in treatment and can liaison with other involved professionals.

Several of the parents who have been treated for mental health problems have furthered their education, moved forward in their jobs or found new employment, and successfully negotiated major life transitions (e.g. marriage, divorce, parental death). Parents with histories of severe relationship disorders have been able to establish a strong therapeutic alliance with the psychiatrist and use this helping relationship at times of personal or family crisis, returning for periodic support even after their children have aged out of ECC. The Adult Mental Health Service puts into practice the relationship-based approach central to our program and provides a continuity and breadth of care usually unavailable to the population served.

—Felice Perlman, M.D.

**Group Attachment Based Intervention**

The Center for Babies, Toddlers and Families’ Group Attachment Based Intervention (GABI) is a two hour, three times weekly (Monday, Thursday, and Friday- morning and afternoon sessions available) parent-child group focused on building a secure attachment between parent and child. GABI’s model was developed by CBTF’s Dr. Anne Murphy and has been manualized through a collaborative effort between Dr. Murphy and Miriam and Howard Steele at the at the Center for Attachment Research at the New School.

The group begins with an hour long parent-child psychotherapy session. Activating the attachment system, the parents separate from their children to have parent psychotherapy group, while children participate in activities facilitating social and emotional development. The group ends with a reunion of parents and children, building attachment security.

A very exciting development for the GABI team has been the recent funding for our research project: BIRTH TO THREE: A PRAGMATIC CLINICAL TRIAL FOR MALTREATMENT PREVENTION from the Maternal and Child Health Bureau of the Health Resources and Services Administration (HRSA), to gauge the effectiveness of GABI compared to a commonly used parent training (STEP) in preventing child maltreatment by improving parent child relationships. With this funding, we will be able to serve 100 families over the next two years—so there will be no wait list!

-Brooke Allman, LMSW
The Infant-Parent Court Affiliated Intervention Project (“Court Project”) of the Early Childhood Center has recently celebrated its fourth anniversary. The program, implemented in conjunction with the Bronx Family Court, is a long-term therapeutic intervention (26 sessions weekly minimum), targeting court-involved parents and their young children, birth to three. The children have been removed from their parents due to concerns about neglect or abuse. The intervention, consisting of Child Parent Psychotherapy sessions and coordinated case management, seeks to promote improved parent-child relationships, and thus support and expedite reunification efforts.

Young children who come to the attention of the court have often had prolonged exposure to multiple risks. Poverty, domestic violence, homelessness, parental substance abuse and mental illness are prevalent. Many court-involved parents carry their own complex histories of deprivation and struggle: 49% of the parents in the project are themselves the grown children of the foster care system, and 70% have histories of trauma. For the children, the removal from their parents, their placement with unfamiliar caregivers, as well as the alleged maltreatment, all constitute relational traumas. The parents, too, may feel victimized by the separation, which oftentimes echoes earlier traumatic losses.

The attachment-based intervention of the Court Project is informed by research establishing that secure attachments are critical to young children’s emotional, social and cognitive development. The goal of the Court Project is to increase parents’ ability to engage in safe and nurturing interactions with their children in an attempt to repair or establish more secure parent-child relationships. In this way, the intervention seeks to provide corrective attachment experiences not only for the children, but also for their parents.

Over the past three years, the parents who have participated in the Court Project have shown improved parent-child interactions (as measured by the Keys to Interactive Parenting Scale (KIPS), and have experienced progressive reduction in depressive symptoms over time, thus becoming more emotionally responsive and available to their children. Of the children seen to date, 99% have had no recurrence of direct maltreatment while engaged with the Court Project.

A central feature of the Court Project is its frequent communication with the Family Court. Clinicians provide detailed reports, and often in-person testimony, describing families’ progress in therapy and updating recommendations. An over-riding goal of the project is that planning for young children be informed by information about children’s relationships with their primary caregivers. Most families who have received services in the program have been permitted more frequent and less supervised contact, and many of the children have returned to their parents’ care. The Court Project also continually seeks to enhance the infant mental health knowledge of its legal and judicial partners and ACS and foster agency staff so that child welfare practice and decisions are increasingly informed by children’s developmental and relational needs.

—Dana Goren, Child Development Specialist

The Court Project acknowledges the funding provided by the Child Welfare Fund, the Warner Fund, the Price Family Foundation, the van Ameringen Foundation, the Wyomissing Foundation, and the Kenworthy Swift Foundation.
ECC's Training Program

This year I accepted the exciting opportunity of coordinating ECC’s training program. For nearly 25 years, Dr. Chinitz and the clinical and support staff at ECC have worked to ensure that our center is not only an incredible place for children and families, but also a center that provides world-class training for students in the fields of psychology, social work, nursing, and medicine. This year we trained students from Yeshiva University’s Ferkauf Graduate School of Psychology, Einstein’s College of Medicine, Silver School of Social Work at NYU, CUNY’s John Jay College of Criminal Justice, Teachers College at Columbia, Silberman School of Social Work at Hunter College, Long Island University, Adelphi, Fordham, and Kean University. At ECC, students fill a myriad of roles, including providing dyadic therapy to young children and their caregivers both in the clinic and in outreach programs, and participating as co-therapists in ECC’s robust group therapy offerings. Outreach projects include court consultation, preschool consultation and therapeutic visiting, and many students simultaneously participate in research projects.

As part of the training curriculum for all our students, we offer a weekly multi-disciplinary seminar, covering a vast range of topics relevant to the infant and early childhood field. By the end of the academic year, we “turn the tables” and students take turns presenting one of their clinical cases. It is in these final seminars that we are truly able to see the wide scope of learning that each of our students experiences during their time here. It is our goal that our student trainees leave ECC ready to make a valuable contribution to the field. Based on former trainees’ reports back to us, we have every reason to believe that the lessons learned in their year at ECC provide a lasting foundation for future careers. I am truly honored to work at ECC and to have the opportunity to participate in the training of our field’s future leaders, and look forward with anticipation to continued growth and improvement in the coming year. —Lauren Gourley, LCSW

A Student's Perspective

When I began my training as a psychology intern at ECC from my doctoral program at LIU Post, I was immediately impressed by the level of training, opportunities for group and individual therapy, and the exceptional support from supervisors and staff. While I had little previous experience working with infants and toddlers in a psychodynamic framework, I was quickly made to feel welcome and at ease and was able to discuss this with my supervisor, with no limit to the amount of support and guidance offered.

Over time, I have been able to integrate some of my cognitive-behavioral approaches, as well as aspects of PCIT, into child-parent psychotherapy, with the support and guidance of a collaborative supervisory relationship. In addition to individual cases, I have been involved in the Group Attachment Based Intervention (GABI). This has been a unique group experience, and at times it involves working with complex and trauma-laden parent-child dyads. I have found that the richest and most valuable learning for me has been through the GABI group supervision. Multiple trainees and clinicians are involved in the group, allowing for observation of trained clinicians as well as opportunities to debrief and support one another. During this supervision, I have also had the experience of participating in video feedback, which has enhanced my self-awareness and my understanding of moment-by-moment interactions.

The student seminar, held on Monday mornings, has given me a chance to interact with both psychology and social work students and learn about topics including play therapy, foster care, Child Parent Psychotherapy, self-care, sensory integration disorders, and trauma. I’ve also become familiar with the services offered at the Children’s Evaluation and Rehabilitation Center (CERC) at Einstein, including Speech, Physical, Occupational therapy, and multidisciplinary assessment, evaluation, and diagnostics. The variety of topics covered has influenced the way in which I have conceptualized certain cases and has expanded my thinking of various aspects of a child’s world.

As a psychology intern, I have also been fortunate enough to apply for and receive a fellowship through the Maternal and Child Health Bureau and Children’s Evaluation and Rehabilitation Center. Through the Leadership in Neurodevelopmental and Related Disabilities (LEND) fellowship, I have gained exposure to a range of topics and disciplines related to developmental disabilities through the Core Lecture series. These weekly lectures include topics such as OT, PT, Speech, intellectual disabilities and autism spectrum disorders, psychiatry, advocacy, and education. This fellowship provides a stipend and the opportunity to conduct a research project with a mentor in a chosen topic area. My selected project will utilize the Adverse Childhood Experience Questionnaire (ACE) in order to examine the nature and prevalence of adverse childhood experiences in the parent population at ECC.

As a student trainee at ECC, I have been provided with a well-rounded, rich, and supportive training experience, which has expanded my knowledge of clinical work with children and families and has provided me with invaluable confidence and tools, which I will utilize throughout my professional development.

—Michelle Conti, M.S.
PsyD Candidate in Clinical Psychology, Long Island University Post
That is what we often hear when we meet parents referred to our program. The Therapeutic Visiting Program works with parents whose children are in foster care, removed due to some type of abuse or neglect. Parents are often angry or frustrated and don’t want more services, so the first obstacle to overcome is building a relationship with parents so that they can be open and ready to reflect on how they can best meet their child’s needs. Parents and clinicians working collaboratively is what ultimately leads to change and better outcomes. -Marian Silverman, PsyD

“When it was first suggested by ACS that I attend the Therapeutic Visiting Program at the Early Childhood Center for dyadic therapy many emotions ran through my mind. I was anxious; I was upset; I was concerned about what the experience would be like. The work during each session required self reflection, analysis of my behavior and responses to my child, as well as education regarding important early childhood developmental milestones. Having completed my therapy course with Dr. Marian Silverman, I am pleased to say that the experience was extremely beneficial. Not only did I learn how to better understand my child’s cues, but I also learned a great deal about myself. I consider myself a more effective, nurturing, and understanding parent after completing my course of dyadic therapy.”

“My mom didn’t have the tools to raise me so at fourteen I had to raise myself in foster care. I became pregnant and went from teen to motherhood. I didn’t know how to understand what to do for my child or myself. The visiting program helped me to better understand my kid’s needs. I accomplished a goal that needed to be met through learning new approaches, being open to getting new ideas and putting into practice what I learned.”

-Parent attending ECC

Marian Silverman, Director of The Therapeutic Visiting Program @ the Early Childhood Center would like to graciously thank the Far Fund for their ongoing support.
### Incredible Years

The Incredible Years Parent Training Series is an evidence-based intervention offered in Spanish and English at the Early Childhood Center with sessions beginning in March or September. The groups run for 14-week cycles focusing on social-emotional development and academic competencies in children ages 2-7. This program provides parents with positive parenting techniques for behavior management and effective problem-solving strategies.

**ADMINISTRATOR:** Denise Giammanco

### Hispanic Support Group

Offers a safe and nurturing environment for Spanish-speaking caregivers, including foster parents, to share common struggles with their children who have developmental or behavioral problems.

**ADMINISTRATOR:** Ellen Endick/ Denise Giammanco

### @BxParents

@BxParents offers an accepting environment for young parents to get to know other parents and learn about their child’s growth, as well as explore age-appropriate activities.

**ADMINISTRATOR:** Joaniko Kohchi

### Another Chance

A support group for caregivers to share their experiences and learn about raising children who come from a variety of family environments. Caregivers discuss coping with many requirements, share parenting strategies, and learn about children’s challenges.

**ADMINISTRATOR:** Marian Silverman/ Joaniko Kohchi

### GABI

The Group Attachment Based Intervention (GABI) is an intensive parent-child therapeutic group focused on building a secure attachment between parent and child. GABI sessions meet for two hours, three times weekly and include a joint parent-child session, a separation where parent and child groups occur simultaneously, and an all-important parent-child reunion. GABI is a clinical application of attachment theory.

**ADMINISTRATOR:** Anne Murphy

### Peer Play Psychotherapy

This model of group play therapy uses peer relationships to promote social-emotional growth in children 2.6 to 6 years old. Each group contains two to four children with different presenting problems and strengths. Children who participate in these groups learn strategies for self-regulation, expressing emotions, to negotiate and interact with peers, and improve play skills.

**ADMINISTRATOR:** Emily Fried