

THE INTERNATIONAL ASSOCIATION FOR THE STUDY OF ATTACHMENT

10th Anniversary
International conference
Florence
2018



PROMOTING CHILD/PARENT ATTACHMENT IN ADOPTION
A Trans-Disciplinary Approach
Utilising DMM and Sensory Regulation
2018 ©

HELEN JOHNSON

attachmentworks.co.uk

&

ÉADAOIN BHREATHNACH

sensoryattachmentintervention.com

ETHAN

This film is an illustration of an intervention aimed at addressing the concerns the adoptive parents had about their child's behaviour. The intervention used a combination of the Dynamic Maturational Model of Attachment and Adaptation and Sensory Attachment Intervention.

The Dynamic Maturational Model of Attachment and Adaptation (DMM) – describes the organization of self-protective behaviours that develop in response to attempts to protect the self from the discomfort and fear elicited by perceived dangers from within the caregiving and wider environment.

Ayres Sensory Integration hypothesises that sensory information provides a reference for the body's relationship to gravity, people, and objects in the environment. The therapeutic goal is to activate the child's inner drive towards experiences that furthers maturation and integration. This is achieved by providing a structured sensory enriched environment. The core therapeutic principle is the child must organise his own brain, the therapist can only provide the milieu conducive to evoking the drive to do so.

Sensory Attachment Intervention is an integrative treatment approach for the treatment of trauma and abuse. It uses an adapted, trauma informed, form of Sensory Integration and combines it with the DMM. The focus of therapy is to address the sensory and attachment needs of parents and child, and to facilitate the process of self-regulation and co-regulation. This is achieved through the Therapist designing bespoke sensory enriched environments in clinic, home and school settings. Regulation is embedded into daily living routines i.e. personal care, food, work and leisure, to facilitate change. All treatment sessions are videoed and reviewed in feedback sessions with the parent. The Therapist explores with the parent the underlying reasons for presenting behaviours and how regulation needs can be met in the therapeutic, home and school settings.

The DMM provided the necessary attachment framework to enable the parents to reflect on their own and their child's behaviour and change their behaviour accordingly.

SI Theory offered a practical understanding of how sensory processing difficulties contribute to a breakdown in behaviour, and how sensory regulating techniques can be used to facilitate the processes of sensory modulation and sensory discrimination.

The authors hold the strong view that, for this intervention to be effective, the occupational and attachment therapists need to work together and take a trans-disciplinary approach to intervention.

BACKGROUND HISTORY

Originally this child was referred for adoption support. The DMM was used as a framework to support parents. The parents reported that this was helpful and things progressed positively. However, last year the parents reported significant changes in their child's behaviour, with him having regular and significant outbursts of aggressive and destructive behaviour. DMM and sensory processing assessments were completed.

These assessments indicated an intervention combining a DMM and Sensory Processing perspective might assist the parents' capacity to support the child's play/exploration and regulation. The parents and child were filmed in a room that contained a selection of sensory integration play equipment. The environment was structured by the OT based on clinical findings. The role of the OT there after was to film and observe the parent- child play. The footage from sessions was reviewed independently by the DMM practitioner and the specialist OTs, who consulted together, before reviewing the footage with parents. During the review sessions the focus was on the highlighting the ways in which the parents facilitated the child's regulation and sense of success. However, parents were also curious to look at what might have led to less regulated and aggressive behaviour.

The intervention consisted of a total of 6 child/parent sessions - two sessions with both parents and two each with mother and father. These sessions were interspersed with reviews of the footage, which were attended by both parents and both therapists. From the second session the film clips demonstrate a significant shift in the child's ability to regulate and the parent's capacity to support this by adapting to the child's needs. Crucially, parents also reported how the sessions changed their understanding of their child's needs and that the child's behaviour was much improved at home.

PRE AND POST INTERVENTION PARENTS COMMENTS

AGGRESSION

Before: Parents bought a people carrier to prevent their child assaulting them whilst they were driving. After school was a particularly difficult time and getting him into the car could be a struggle. Walking home from school was not possible.

After: "E is very very chatty when we walk home from school".

PAIN RESPONSE

Before: Parents were concerned about Ethan's lack of response to pain and the potential risk this presented to him. For example, he did not show a pain response after paying with and cutting his finger with a food blender.

After: Parents have noticed that Ethan now reacts to everyday bumps and thinks ahead to reduce risks to himself.

MODULATION OF AROUSAL

Before: "Before, when E got emotional there was no way to get him out of it". E had no door on his bedroom as he has smashed it so many times.

After: Parents said that they now understand E better and do things differently so that he is much calmer. E is now described as being generally slower to rise and easier to calm. "I can reason with him now and he will stop and think." On one occasion parents thought that Ethan was smashing his room up, but when they went to investigate they found that Ethan was hitting a punch bag.....and was indignant that they might have thought otherwise!

CO-OPERATION/ SHARED EXPLORATION

Before: It was really difficult to know what activities to do with Ethan. Even getting him out of the house could be a real struggle because he would refuse to put his socks and shoes on.

After: "We now expect less of Ethan and target some of our activities at Ethan's level (i.e. a younger child) He helps with chores in the garden and around the house with us, close by, usually doing things together. This works well and he enjoys it."

MUTUAL PLEASURE

Before: "We felt like we were walking on egg shells and family outings would often become a nightmare"

After: "We went to an ice-cream parlour and Ethan was getting really worked up. We now understand things better and do things differently. We had a good time together as a family. In the past we would have had to go home."

FEEDBACK FROM PARENTS

“Our relationship with Ethan has improved and hopefully he feels it too. We are more relaxed as we have a greater understanding of his functioning.”

“By filming the sessions we could really see how Ethan uses his body to communicate and how easily he can be triggered. We have adapted our behaviour to meet his needs and 70% of the time it works. Sometimes there is no talking or way of managing him and these times remain very challenging to deal with. It’s early days and we will continue to work with Ethan as we do. It is much calmer in the house and we find that we don’t feel the need to read the parenting manuals. We do things automatically.”

ACKNOWLEDGEMENTS

We would like to thank Ethan’s parents for their willingness to share their therapeutic journey, so that others may learn and benefit.

We would like to acknowledge the involvement of Sue Watson, the Occupational Therapist who facilitated the SAI Parent Child Engagement Sessions.

Thanks to Child Therapy Solutions (CTS) who provided the treatment venue and to Sighle Bhreathnach-Cashell for the video editing.