

WithinReach™
2025 LEARNING SERIES

NAVIGATING PARENTING
IN TIMES OF CRISIS

February
24 - 28, 2025

Noon to 1 p.m.

Parents deserve
more than just
survival.



Welcome and Land Acknowledgement

We want to acknowledge that we occupy the ancestral lands of the Coast Salish Peoples, in particular the Tulalip, Snohomish, Stillaguamish, Suquamish, Muckleshoot, Nisqually, Puyallup, and the first people of Seattle, the Duwamish People, past, present and future. We honor with gratitude the land itself.

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Thursday, Feb 27
noon - 1 p.m.



Dr. Leslie Butterfield



Sara Circelli



Tiffany Elliott

Parenting After the NICU: Prioritizing Perinatal
Mental Health and Family Well-Being

Parenting After the NICU: Prioritizing Perinatal Mental Health and Family Well-Being

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WithinReach Learning Series

February 27, 2025



Today's goals

- Understand challenges families face when an infant requires care in the NICU and transitions home
- Identify strategies to strengthen the parent-child relationship to integrate into your interactions with families
- Describe the efforts of Hospital-to-Home Systems Change work

Terms

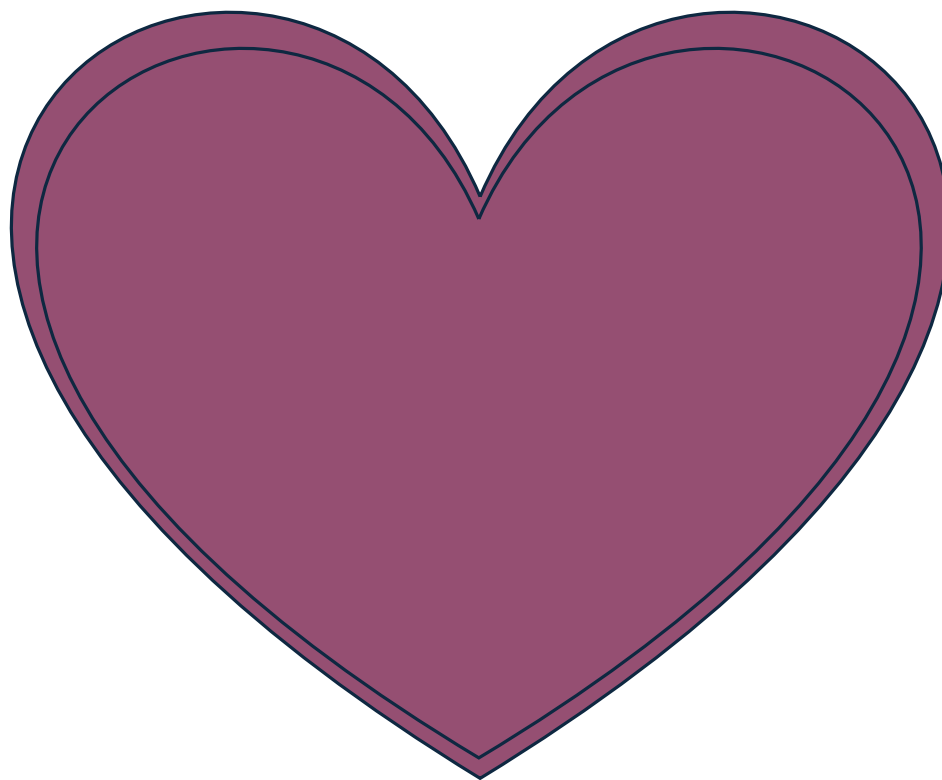
- NICU — Neonatal Intensive Care Unit
- ESIT — Early Support for Infants and Toddlers (Name for Part C of IDEA services in Washington State)
- Perinatal — Refers to the time from conception to a year postpartum
- PMADs — Perinatal Mood and Anxiety Disorders
- PFD — Pediatric Feeding Disorder

Language

- Use “caregiver” and “parent” interchangeable to recognize:
 - Non-biological parenting roles
 - Acknowledge not all birthing individuals identify as women or mothers
- Hospital-to-Home (H2H) Care Model — interdisciplinary approach to ESIT services for infants discharging from the NICU integrates support for the perinatal mental health of parents within therapeutic support for the infant's feeding, growth, and development



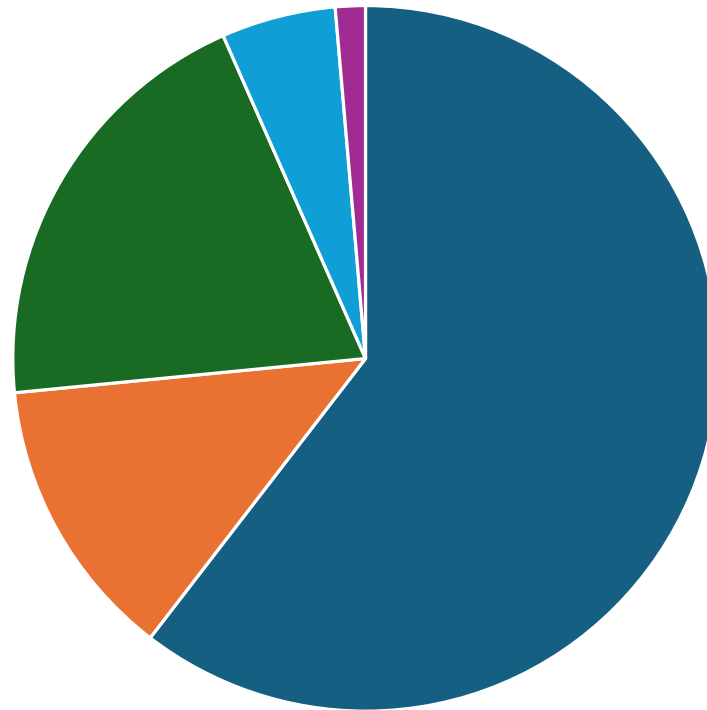
Trigger warning





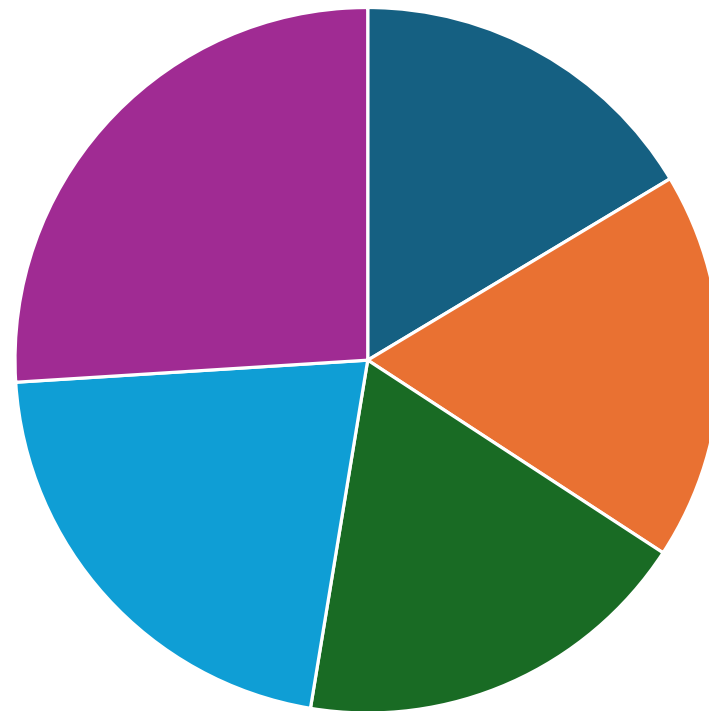
WA State Live Births: 2020-2022

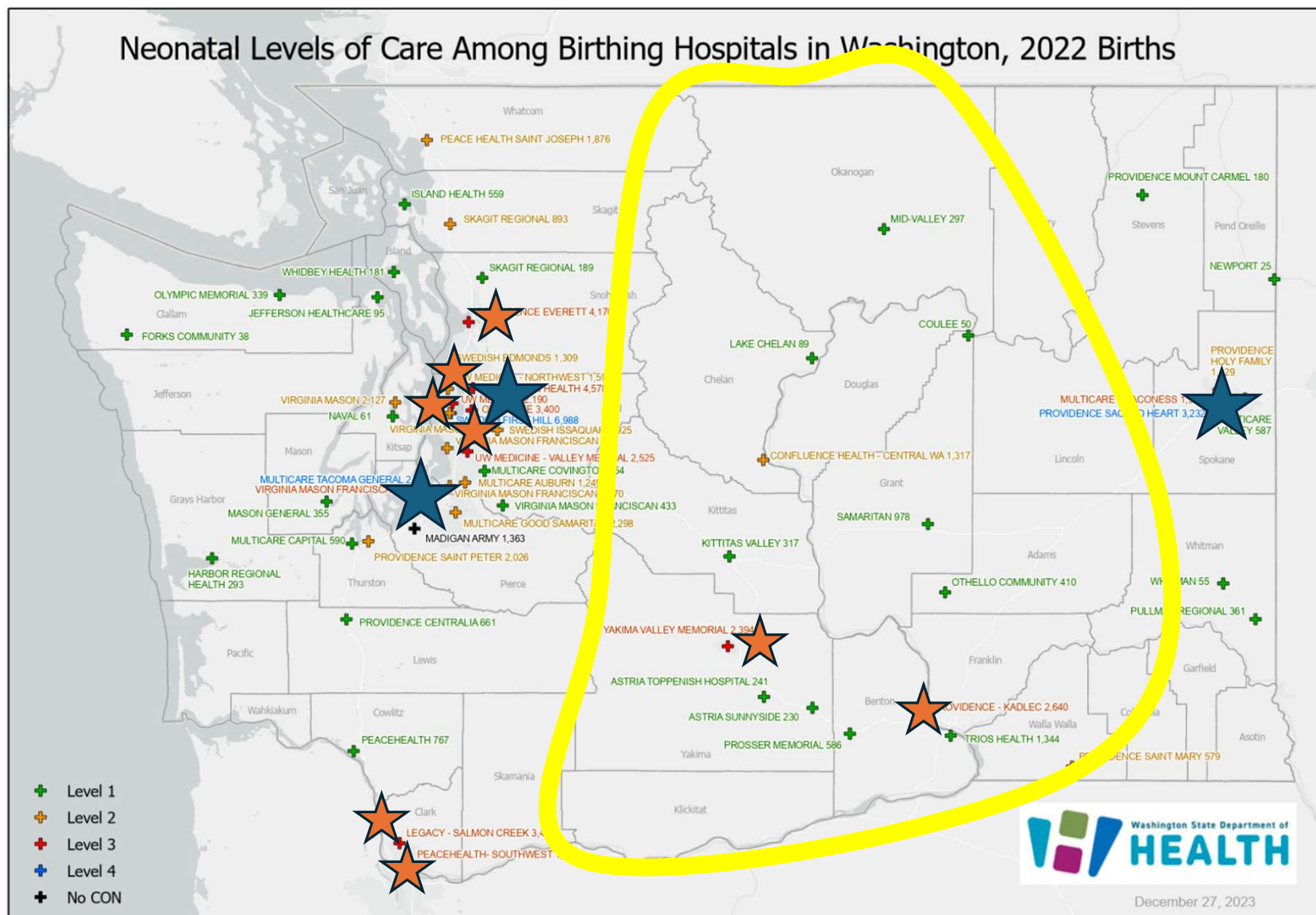
- White
- Asian/Pacific Islander
- Hispanic
- Black
- American Indian/
Alaska Native



WA State Preterm Birth Health Disparities

- White
- Asian/Pacific Islander
- Hispanic
- Black
- American Indian/
Alaska Native





Psychosocial Challenges for NICU Parents

NICU babies are fragile and need their parents' engagement and encouragement to develop and thrive

—

Their parents need the same level of loving kindness and skill building help to grow and thrive as new parents

Obstacles to Successful Bonding/Attachment

Infants

- Medical intervention, not relationships
- Fragility of baby's appearance
- Medical touch, not loving touch
- Unable to generate "typical" attachment behaviors
- Cannot offer regulating function for parent

Caregivers

- Discrepancies expectations vs reality (grief, loss, shock)
- Attachment vulnerabilities magnified to high levels
- Lack of emotional engagement
- Inability to perform typical parenting behaviors that build relationship and role confidence

Obstacles to Learning Infant's Cues

- Instead learning to read medical cues
 - “Read” staff for cues
 - “Med-speak”, not baby talk
- Hyper-vigilance
- Machines—lifesaving AND interrupt the natural development relationship
- Going home—anxiety provoking, without hospital cues and timing

Perinatal Mood & Anxiety Disorders (PMADs)

- NICU parents at high risk
- Likelihood increased with delayed or frayed attachments
- Creates obstacles to successful bonding and attachment

PMADs Rates in NICU Parents

- **Posttraumatic Stress Disorder (PTSD)** – NICU itself may be traumatic event separate from and in addition to other birth-related traumas.
 - PTSD rates in parents ranges 4.5% - 30% (McKeown et al; 2022)
- **Depression** – NICU mothers had 74% higher risk of developing PPD
 - general population PPD increased 3-fold during pandemic (Shuman et al; 2022), BIPOC and marginalized groups with marked increase
- **Anxiety** – NICU mothers show anxiety range 18-43%
 - Recent study just under half of parents in NICU level 4 had clinically significant levels of anxiety or depression

Parent Role Development

- Proximity
- Frequent interactions
- Successful completion of behaviors consistent with (pre-existing) images of "good parenting"

Becoming a Parent in the NICU

Requires building parental identity on a very different basis

—

new and never imagined tasks must be mastered in
the context of emotional distress, trauma, and grief.

Why does this Matter?

- On your doorstep, one or both parents:
 - 80% likely suffering from a PMAD
 - May be grieving loss of “normal...”
- Others may not have mentioned PMADs and/or provided resources
- Respectful acknowledgement, proper labeling helps parents enhance connection to baby

Challenges of Being Home Post-NICU

Social

- Discomfort in role
- Isolation and grief
- Future filled with unknowns

Economic

- Financial pressure
- Lack of childcare options

Physical

- Birth recovery
- Health exposure concerns

Logistical

- Home not set-up for medical equipment
- Difficulty navigating follow-up

Risk Factors

- Infants are at risk for feeding concerns and/or developmental delay
- Parents are at risk of experiencing PMADs

Addressing the Service Cliff: What can we do?

Critical to make timely referrals and provision of community therapy

- Reduces parental stress
- Improves parent-child attachment
- Supports better infant health outcomes
- May reduce overall medical expenditures

Early Support for Infants & Toddlers (ESIT)

- What is ESIT?
- Where do I learn more?
 - <https://dcyf.wa.gov/services/child-dev-support-providers/esit>

A screenshot of the Early Support for Infants and Toddlers (ESIT) website. The page has a purple header with the title "Early Support for Infants and Toddlers". Below the header, there is a paragraph explaining that early intervention services during the first three years can make a big difference in a child's life. A quote from Part C of the Individuals with Disabilities Education Act is highlighted in a light blue box. At the bottom, there is a list of goals established by Congress in 1986. On the right side, there is a sidebar with a purple "Contact" button and a white "Resources" button. The sidebar contains links to the ESIT Statewide Directory, Information for Healthcare Providers, and an Early Intervention Referral Form. It also lists ESIT Program Staff, an ESIT Staff Directory, and contact information for ESIT@dcyf.wa.gov and 360-725-3500. At the bottom of the sidebar, there is a section for families needing help with a referral, including the WithinReach Help Me Grow Washington Hotline and contact information for the hotline, toll-free number, and email.

Early Support for Infants and Toddlers

Early intervention services during the first three years can make a big difference in a child's life. The Early Support for Infants and Toddlers (ESIT) program provides services to children birth to age 3 who have disabilities or developmental delays.

Part C of the Individuals with Disabilities Education Act is a federal grant program that assists states in operating a comprehensive statewide program of early intervention services for infants and toddlers with disabilities, ages birth through age 2 years, and their families.

Congress established this program in 1986 in recognition of "an urgent and substantial need" to:

- enhance the development of infants and toddlers with disabilities
- reduce educational costs by minimizing the need for special

Contact **Resources**

I need services or support in my local area

[ESIT Statewide Directory](#)

[Information for Healthcare Providers](#)

[Early Intervention Referral Form for Healthcare Providers](#)

[ESIT Program Staff](#)

[ESIT Staff Directory](#)

✉ ESIT@dcyf.wa.gov

☎ 360-725-3500

For Families Needing Help with a Referral

WithinReach Help Me Grow Washington Hotline
155 N.E. 100th St., Suite 500, Seattle, WA 98125
Toll Free: (800) 322-2588
Email: childdevelopment@withinreachwa.org

H2H Care Model

Care
Continuum
Handout for
Providers



Community-based infant feeding and developmental therapy can support caregivers' emotional well-being by

Providing therapy in natural environment (e.g., home)

Offering family-centered care

Connecting families to community resources



H2H Care Model

Specially
trained
team

Rapid
follow-up
post
discharge

Interdisciplinary
team

Understanding &
supporting
perinatal mental
health

Clear
communication
with families and
medical providers

Feeding & Attachment Considerations

- Parents equate their parenting success to ability to feed their baby (Thoyre, 2001)
- Infant stable and still learning
- Evolution of feeding goals
- Support caregiver with intentional engagement

Feeding & Emotional Wellbeing are Connected

- Perinatal mental health impacts attachment, development, ability to implement feeding strategies (Park et al., 2016; Parker et al., 2016).
 - Learning, understanding and using feeding skills
 - Interactions and ability to read, respond and respect infant's cues

Learn more about pediatric feeding disorder at www.feedingmatters.org/

Caregiver Support: Create Space

Photos

NICU Admission photo

Parent holding infant
on CPAP and OG

Two pumped bottles
of milk with pump parts
attached

Parent bottle feeding
infant

Caregiver Support: Parallel Process

Photo: Infant looking lovingly at parent

Caregiver Support: Emotion Cues

- NURSE: Responding to Emotions
- **N**aming
- **U**nderstanding
- **R**especting
- **S**upporting
- **E**xploring

Hospital-to-Home Systems Change

Mission / Goals

- Address the barriers, gaps in care, and inequities that exist for infants and caregivers transitioning from the hospital into ESIT and community therapy services throughout the state.
- Build workforce capacity to support the H2H population.

Tenets of H2H Systems Change Work

Hospital	Home	Advocacy
<p>Understand landscape</p> <p>Connect with Referral sources to</p> <ul style="list-style-type: none">• Educate about ESIT• Support continuity	<ul style="list-style-type: none">• Build workforce capacity• Develop community of practice• Consultations	<ul style="list-style-type: none">• Present / Share out H2H• Convene PMH task force• Supporting state-wide change
Perinatal Mental Health		

Training Efforts to Build Workforce Capacity

- Interdisciplinary innovative 3-day training
 - Day 1: PMH (foundational)
 - Day 2: PFD in infants
 - Day 3: Special topics & Parent voice
- Project ECHO series:
 - “all teach, all learn” model

"Our ESIT therapists have been an incredible source of support in helping us recover from the feeding challenges and from the anxiety and trauma that came with them. We had been in a never-ending grind of counting ounces taken in, weighing baby weekly (only to find he had barely gained weight), and feeding around the clock. We were so drained, and our lives were deeply impacted by the struggle. We couldn't go for walks, outings, or trips like other families because feedings were so fragile and tenuous. We hated to think how our anxiety about feeds and his lacking nourishment might impact our baby's development and attachment. But our ESIT therapist helped us regain trust in baby's perfectly healthy instincts and his clear communication skills. He knew and had always known what worked for him and what didn't and he'd always let us know. Our ESIT therapist helped us see this and... we learned to trust and listen to him in a way that healed all of us from the rough start we'd had."

~Hospital-to-Home Parent



In summary, ways to prioritize perinatal mental health and family well-being...

- **Be Present** - sit with
- **Listen** - to caregivers
- **Collaborate** - seek opportunities to connect and partner
- **Reflect** - on ways to integrate support for the emotional well-being of parents into the work already being done
- **Advocate** - for systemic changes that best support the needs of infants and caregivers
- **Make** - small changes, they can lead to bigger changes

How to Connect with Us

- Sara Circelli, MA, IMH-E, PMH-C - scircelli@nwcenter.org
- Tiffany Elliott, SLP, CNT, IBCLC, NTMTC - telliott@nwcenter.org
or feedingconnections@gmail.com
- Leslie Butterfield, Ph.D. - dr.lesliebutterfield@gmail.com
- www.hospitaltohomesystemschange.org

Next Steps

- Q&A Time
- Handout
 - contact info
 - resources