



## Hope in the Face of Adversity:

Use of the Newborn Behavioral Observations system (NBO) to support parent-infant emotional health in the context of Substance Use Disorders

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The fact that many adults struggling with Substance Use Disorders are already parents or pregnant and expecting or both is often a source of tremendous concern for society and indeed, can compound judgment and stigma conferred upon individuals already battling a debilitating disease. However, this fact also offers a profoundly important opportunity to address SUDs through the lens and portal of the parent-infant relationship. Infant and Early Childhood Mental Health researchers and practitioners have the ability to promote non-pharmaceutical interventions for enhancing care and outcomes for birthing mothers with Substance Use Disorders and the youngest survivors of the opioid epidemic: the newborn infants born with Neonatal Abstinence Syndrome and ongoing effects of intrauterine substance exposures. Family systems are an opportune focus of treatment to the benefit of both newborns who have been exposed to substances and their parents; in relational context. Our efforts need to employ every available strategy to enhance the care for these infant-parent dyads. The Brazelton Institute and the Brazelton Touchpoints Center wish to assist in service of better outcomes for infants' functioning, as well enhanced maternal adherence to treatment for their substance-use disorders. Until relatively recently, inpatient care for SEN infants and those with NAS tended to isolate substance-exposed newborns from their birth mothers due to an ostensible protective stance and the gatekeeping among hospital staff and the birth families. We need to continue to combat that stance due to its profound missed opportunity for intervening in the earliest stage of infant-parent attachment; the first 100 days of life when highly consequential bio-behavioral shifts are occurring in the development of the infant brain. This is in service of optimizing infant developmental potential, *as well as* enhancing birth mothers' future-orientation and motivation for SUD treatment in order to be able to have their infant remain or return to their care. The impact of parents and other significant adults on children's early development, emotional well-being, and learning is well-established. Relationships, and the cultural contexts in which they occur, are extraordinarily consequential for children's development. The quality of the caregiving relationship is the critical factor in mitigating long term deleterious effects on children's development.

Given current demographic and socio-economic trends, and in specific, the growing trends of opioid use in Massachusetts communities across demographic and socio-economic status (SES) parameters, the ability to work effectively with families in diverse communities in order to achieve successful results for young children is more urgent

than ever. There is a clear and pressing need for practitioners in the field to receive formal training and education in the ability to translate research on the importance of family relational functioning into applied practice that makes a meaningful difference in child outcomes. Specifically, the need is for tools and practitioners who are prepared to treat mothers and infants *together* in the context of in utero drug exposure. Training institutions and professional preparation programs are grappling with how to bridge the gap between the major research findings and how to incorporate them into our training programs and into our practice. The Newborn Behavioral Observations system (NBO) is a tool uniquely capable to address these gaps; and the Touchpoints Approach offers strengths-based attitudinal shifts and relationship-based practices that carry forwards throughout early childhood development.

The functioning of mothers, infants, and the mother-infant dyadic relationship at birth is put at acute risk by in utero exposures because of the (a) concrete circumstances of the mother that are typically correlated with substance use disorders, (b) behavioral and emotional dysregulation of the substance-using *mother*, and the (c) physiological and behavioral dysregulation of the *infant*. That is, babies born with NAS are more difficult to console and soothe than non-addicted infants. The NBO offers specific techniques in soothing and mutually regulating infants, identifying their unique cues and qualities of sensory and interpersonal interaction, and coaching mothers and other caregivers in learning how to identify these cues and employ caregiving strategies that are tailored to individual babies. This is an essential step in facilitating the mother-infant process of emotional attachment and relationship which is severely stressed by addiction. It is also an essential step in facilitating the infant's acclimation to their environment and professional caregivers; offering medical staff and foster caregivers skills in attuning to the specific needs of infants with NAS and ongoing needs associated with in utero exposure. The NBO is a unique vehicle by which the mother with SUD is drawn into emotional attachment as a primary motivator for recovery treatment. The NBO serves as a tool to elicit and observe infant behavior and facilitate their care. This is particularly crucial for in-utero exposed infants given their greater degree of dysregulation; when the implementation of the NBO can assist new mothers to learn how to soothe their more reactive infant especially during withdrawal. These techniques focus on strengthening the mother-infant emotional attachment process which is stressed by addiction and withdrawal. This enhanced attachment process in turn provides a unique opportunity to promote and motivate treatment for the mother's addiction. That is, the mother becomes more motivated by the commitment to the new baby when an attachment is scaffolded. The Brazelton Institute offers training, reflective mentorship, and certification in the NBO, as well as the more extensive Neonatal Behavioral Assessment Scale. The Brazelton Touchpoints Center offers training, reflective mentorship, and certification.