



# Seeing the world through babies' eyes in times of crisis and change

## A resource for practitioners

You can help babies in times of crisis and change by trying to see the world through their eyes. This is not easy and PAIRS (Parent and Infant Relationship Service) has created this resource for practitioners.

Part one explores how babies experience distress. The following two sections are 'how to' guides with tools and techniques for practitioners.

Please get in touch to discuss and add to the ideas here. Seeing the world through babies' eyes is only possible when we learn from the baby, caregivers and each other.

PAIRS offers consultations for practitioners, as well as one-to-one and group therapeutic support for babies and their caregivers in four Lambeth wards: Coldharbour, Stockwell, Tulse Hill, and Vassall.

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# Part One - Think baby!

Think about a family you have worked with in a crisis. Describe what the baby was feeling and experiencing...why is that so difficult? A baby's perspective can be overlooked because:

- it is hard to find words for babies' feelings when they do not have words themselves
- the caregiver's perspective can dominate and services, interventions and safety plans tend to focus on adults
- it is painful, sometimes unbearable, to think about the needs of a vulnerable baby.

Seeing the world through babies' eyes helps us understand what they need at a critical time for their brain development, which can prevent serious difficulties in later life.

## Recognising babies' distress

Babies are affected by changes both 'outside' and 'inside' of them. A global pandemic is frightening, particularly as research shows that babies (including in utero) are negatively affected by the stress of their caregivers. Bodily or developmental changes, such as teething or language acquisition, can also be distressing for a baby.

Babies cannot talk about their distress nor 'fight or flight' their way out of a crisis, their distress is communicated through the body. Persistent crying and settling difficulties are clear signs that something is troubling baby. Not crying enough, turning away or 'switching off' also suggests something feels unsafe for baby (this is more difficult to spot and is often mistaken for an easy or compliant baby).

A baby's mind is shaped by early experiences of the world, particularly with caregivers. Babies rely on caregivers to understand and contain their distress because they have not yet learned to regulate their emotions.



# Part One - Think baby!

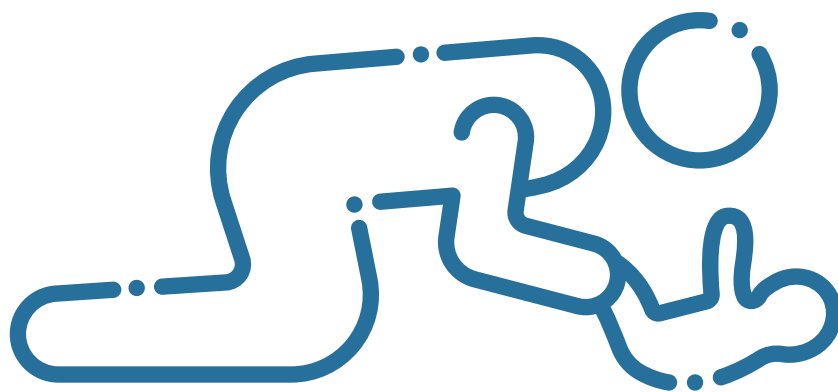
## Relational crisis

In times of crisis or change just when the baby needs most emotional support, the caregiver may be least able to provide it (because of their own stress). In this way, a crisis can become a 'relational crisis' for a baby who cannot get their needs met.

Fortunately, the relationship between babies and caregivers is resilient and often recovers from these crises. In fact the process of 'repair' in a relationship is important for a baby's development.

However, when there are a series of relational crises at critical times or additional risk factors (such as parental mental health difficulties and a lack of external support) babies can be left traumatised by negative interactions with their caregiver. This is a safeguarding risk and can create long-term difficulties for the baby in regulating their emotions and forming relationships.

As practitioners, we have an important preventative role by seeing what the baby needs and responding to what we see...but how do we do it?



# Part Two - Seeing through babies' eyes

## Observation

The first step to helping a baby in a crisis is understanding what they are feeling. Observation is key, and since a baby's mind is shaped by its relationships with the world, observing baby, their relationships, and ourselves are all important.

Observation is not easy, particularly in times of crisis when it can be hard to see through everyone else's stress. It can also be challenging when we are working remotely and by phone or video.

## Observing baby

A baby has no words yet they communicate a great deal. Noticing small details of gestures, behaviours and interactions can tell us how babies are feeling and what they may need. Our role is to be curious and to encourage caregivers to be the same. When observing, think about:

- does the baby communicate a wide range of feelings, how do they do it?
- is the baby playful and interactive with others?
- how does a baby respond when the caregiver approaches or leaves?
- does a baby cry a lot or too little?
- can a baby hold its caregiver's gaze or do they look away?
- can a baby be soothed?

A baby who is struggling in the relationship with their caregiver may not look to them as a source of support. They may turn away, be stiff or avoid physical closeness, finding ways to soothe themselves rather than turning to the caregiver for comfort.

## Play

Babies and young children communicate their feelings through play. Observing and encouraging baby-led play is important. A baby that is neither playful nor curious about the world may be distressed.

- PAIRS run 'Together Time' groups for babies and their caregivers to support baby-led play.



# Part Two - Seeing through babies' eyes

## Observing baby and caregivers

Observing the parent-infant relationship closely, the quality of contact and the capacity of the caregiver to notice the baby can help us understand what each may need in a crisis.

In a 'relational crisis', the caregiver and baby may seem disconnected or out of step with each other. It may be hard for the caregiver to make space to play, communicate or experience the baby as an individual with their own mind. A crisis or change can stir up past difficulties or trauma in a caregiver's own history.

Being curious about these relational difficulties can help us find the right support for the baby and caregiver.

## Observing family dynamics

Seeing through babies' eyes involves observing the extended family and the relational dynamics around the baby. Research shows that the quality of relationships between caregivers can impact babies' development.

Sometimes a baby's needs conflict with others in the family. It can be difficult to make space for a new baby in a family under pressure or a family in conflict. Babies can be on the receiving end of 'negative projections' by caregivers and the extended family, being blamed for something that is not actually about them.

Things to notice include:

- what conversations are taking place between caregivers and extended family around the baby's needs?
- what space is given to the baby within the family?
- how does the baby 'fit in'?

## Observing ourselves

How do we feel in relation to the baby and the caregiver? We all have moments where something looks fine on the outside but leaves us feeling uncomfortable. Noticing our own feelings, both positive and negative, can provide important clues as to what the baby may be experiencing.

# Part Three – Responding to what we see

## Being the voice of the baby

Voicing our observations of babies (to both baby and caregiver) can help bring about a shared understanding of difficult experiences.

- talk to the baby directly and get on their level (often on the floor!)
- try simple statements like “you were so worried when mummy went away to the kitchen” – these can help a baby feel heard and communicate to the caregiver the feeling behind a behaviour
- be sensitive and focus on the positive things as well as the challenges – caregivers may need help to notice babies’ distress but it can feel exposing for them.

We can also be the voice of the baby with other professionals, advocating for babies’ needs and the needs of the baby/caregiver relationship.

## Supporting the adults

Caregivers who are preoccupied with a range of stressors, including their own mental health difficulties, can struggle to see the world through their babies’ eyes. Attending sensitively and without judgement to their needs can help them to hear a babies’ distress. This may include:

- strengthening the support structures around the caregiver/baby which may include Children’s Centres and Early Help
- making specialist referrals where appropriate. For example to PAIRS and/or IAPT (Improving Access to Psychological Therapies) and adult mental health services
- suggesting a parenting group such as ‘Circle of Security’ run by PAIRS.

Working with babies in crisis can be painful and challenging for us as practitioners. Think about who you might go to when you need support:

- talking with colleagues in your team and the professional network can be invaluable
- supervision and reflective groups give space to think about the challenges of the work (PAIRS offer consultations to any practitioners working with LEAP families and facilitates reflective practice sessions for LEAP practitioners).

## Part Three – Responding to what we see

### Team work

It is essential that we work as a team around the baby and caregiver. No single practitioner, service or intervention can fully see the world through babies' eyes. We all bring our own expertise and perspectives. Multi-agency working is also key to effective safeguarding and child protection.

We often need to establish a team around the baby and caregiver for the first time. This can involve seeking advice or making a referral to specialist services where appropriate, for example to us at PAIRS. It is particularly helpful when practitioners involved with the baby are linking up with those involved with the adult caregiver.



## Further information and how to refer

**LEAP:**

[www.leaplambeth.org.uk](http://www.leaplambeth.org.uk)

**First 1001 Days Movement:**

[www.1001criticaldays.co.uk](http://www.1001criticaldays.co.uk)

**Association of Infant Mental Health:**

[www.aimh.org.uk](http://www.aimh.org.uk)

**Parent Infant Foundation**

[www.parentinfantfoundation.org.uk](http://www.parentinfantfoundation.org.uk)

**Association of Child Psychotherapists:**

[www.childpsychotherapy.org.uk](http://www.childpsychotherapy.org.uk)

**IAPT (Improving Access to Psychological Therapies):**

[www.slam-iapt.nhs.uk/lambeth](http://www.slam-iapt.nhs.uk/lambeth)

PAIRS are accepting referrals from local professionals and self-referrals from parents who live in the four LEAP wards of Coldharbour, Stockwell, Tulse Hill, and Vassall.

For the one-to-one service, a referral form can be found on the LEAP website and sent to the PAIRS email address: [PAIRS\\_Lambeth@slam.nhs.uk](mailto:PAIRS_Lambeth@slam.nhs.uk)

PAIRS offer telephone consultations to all Lambeth professionals, contact **020 3228 6771**

