

## *Infant Mental Health Assessment through Careful Observation and Listening*

The training program provides a context for master's and post-master's students and professionals from the fields of social work, psychology, early childhood, special education, and nursing to study theories about development and early intervention and develop new skills in the practice of infant mental health. In addition to the academic coursework, graduate students enroll in a yearlong clinical practicum that encourages the application of theories through supervised observation, assessment, and clinical experiences. The clinical practicum is the cornerstone of the graduate certificate program. Observation and clinical casework, individual supervision, group discussion within a biweekly clinical seminar, and supportive relationships with new colleagues and peers are of fundamental importance to each trainee's development within the clinical training year. Training experiences within the Graduate Certificate Program at Wayne State University are described in greater detail following.

### Assessment through Observation

Observation is fundamental to the assessment process. How one observes an infant and family affects the quality of the entire assessment. For the purpose of this chapter, we examine principles that support the process.

#### Basic Principles

Early assessment principles, stated eloquently by Fraiberg (1980) and restated by

Hirshberg (1993), Lieberman and Pawl (1993), Lieberman and colleagues (1997), Meisels and Fenichel (1996), Meisels and Provence (1989), Trout (1987), and Weatherston and Tableman, (1989) are integral to infant mental health practice and early development services. They shape the ways in which practitioners approach infants and families and influence the ways in which infants and families may be understood. Trainees who are new to the field of early intervention or infant mental health will use these principles to guide them in their work. For some, the "rules" will seem odd or inconsistent with previous training. They may struggle to integrate a relationship-guided assessment approach with one that focuses more individually on an infant or the parent of a child. Over time and within the context of supportive training relationships, infant mental health practitioners and trainees from very diverse fields learn to provide relationship-based assessments with these important tenets in mind.

#### INFANT AND PARENT TOGETHER

First, the trainee watches the baby in the context of a relationship in order to understand who that baby is, what the baby brings to the relationship, what the caregiver provides, and the nature of their relationship with one another. Looking at one or the other alone will yield half of the story. As Donald Winnicott (1965) so beautifully reminds us, "There is no such thing as an infant." By this he meant that there is always a baby and a caregiver. This powerful concept directs the infant mental health practitioner to consider both infant and

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