

## 別讓您的小孩輸在起跑點上

根據最新的神經精神學的研究，兒童與父母的關係會影響他們腦部的發育。兒童將來成長為一個學習能力強，情緒智商(EQ)高，有自信心，適應環境(AQ)能力強；或是成長為一個無法集中注意力學習，情緒不穩定，焦慮高，遇到挫折不能處理的人與父母跟他之間的連結有很大的關係。

小華〔化名〕和他的父母在小華二歲時從中國移民來美國，他的父母只能說一點英語，忙著適應美國的生活。他們沒有時間給他們的兒子。小華的語言發育遲緩，在幼稚園有行為問題。小華的家庭請求嬰幼兒服務幫助他們。他們不但得到說中文的心理治療師的親子輔導，還得到佛利蒙市的青少年及家庭服務部門說中文的社會工作人員在日常生活上的各種幫助。

嬰幼兒服務是一個新的家庭資源中心的服務，它提供有五歲以下兒童的家庭親子輔導。嬰幼兒服務增強父母瞭解子女對他們的需求的能力，幫助他們建立親子間親密的依附及連結。一個憂鬱，焦慮，或飽受打擊的父母可能有困難照顧小孩。有時一個小孩的個性及特殊需求可能成為對父母的挑戰。對這樣的家庭來說，在小孩很小時就作家庭治療可以幫助親子關係回到正軌，增進子女未來的前途。

因為嬰兒在三歲以前腦部發育最快速，腦神經細胞之間的連結受嬰兒對周遭環境的經驗，與別人的關係影響。腦神經細胞之間的連結控制兒童主要的認知及情緒功能—包括視覺，聽覺，語言，社交，情緒發育，及運動。一個受到虐待或是忽略的三歲小孩比正常的小孩腦容量要小很多，而且有許多情緒造成的學習困難。

嬰幼兒服務不但提供說中文的親子輔導，它還有說中文的社會工作人員幫助有需要的家庭獲得像健康保險，托兒，或就業等資源。

如果您需要

- 幫助您的子女達成最理想的生理及心理發展
- 幫助您的子女克服行為問題，例如侵略性，害羞，發脾氣，被校園惡霸欺負等問題
- 幫助您的子女克服家庭困難，例如家庭暴力，離婚，家人死亡，父親在國外工作等困難

親子輔導也幫助因為本身遭遇困難，例如憂鬱，焦慮，失業，產後憂鬱，或壓力過大以致無法與他們的子女連結的父母。

嬰幼兒服務位於佛利蒙市家庭資源中心 39155 Liberty Street, Suite E500, Fremont, CA 94537. 中文諮商輔導請與楊海澎連繫(510)574-2110x13. 楊海澎女士擁有心理輔導及電腦雙碩士，目前在嬰幼兒服務提供親子輔導，在身心靈健康中心提供婚姻，家庭，及兒童心理輔導。

# 佛市家庭資源中心 華裔當善加利用

## 家庭問題專家楊海澎任中文諮商輔導 幫助建立良好親子關係

【本報記者任維真佛利蒙報導】「透過我們的協助，能幫助父母重新與小孩有個良好的連結與依附關係。」2004年9月，佛利蒙市政府家庭資源中心聘請加州婚姻及家庭治療師協會東灣分會的多元化委員會主席楊海澎(Helen Yang)，負責中文諮商輔導，不過鮮少華裔利用這個管道。

楊海澎指出，很多時候小孩子出問題是父母本身遭遇壓力，譬如新移民、失業、離婚，尤其現在有很多「內在美」的家庭，爸爸長期不在家，老往台灣、中國大陸跑，媽媽一人在美國撐著，壓力太大而常打小孩，因此小孩容易懼怕。研究發現，小孩子處於懼怕狀態時是無法學習東西，因為沒有安全感，就比較沒有自信。

「三歲以前，孩子腦部的發育已達85%，可以說是情緒智商發展的關鍵期。」楊海澎說，心理治療是可以改變腦部

的連結，藉由被治療者的認知改變，來改變他的情緒智商。楊海澎也說，零到五歲之間的確是心理治療的關鍵期，但並不是過了這個關鍵期就無力回天，但研究也顯示，愈早治療效果愈好，如果錯過的最佳治療期，治療時間也相對拉長。

佛利蒙家庭資源中心裡設有兒童玩具室，楊海澎說，經由遊戲治療，你會發現孩子的眼神、表情或言語會透露出他的心理世界，以及與父母的依附關係，但這些都不是父母能夠輕易察覺得出來的，必需透過專業人士來諮商，有時候父母因本身情緒不易控制，沒有耐性，反而讓孩子情緒更糟。

「一兩年前，佛利蒙有個活生生的例子，先生來自香港，太太出生自台灣，先生失業後患有憂鬱症，沒有看醫生也沒有找諮商，後來先生殺了全家後自殺。」楊海澎說，四個人的生命就這樣消失了，很可惜，很多例子都是錯失治療的

關鍵期。

佛利蒙市家庭資源中心的「中文諮商輔導」協助孩子正常的生理與心理發展，也協助孩子克服侵略性、害羞、亂發脾氣等行為問題。另外如果有孩子遭逢家庭暴力、父母離婚、家人死亡或父母在國外工作而無法生活者，都可以向中文輔導楊海澎預約時間談談。

楊海澎說，孩子有需要，父母也時也需要協助。成人預約專線為(925)846-2090轉341，孩子預約專線為(510)574-2110轉13。



↑加州婚姻與家庭治療師協會東灣分會多元文化委員會主席楊海澎(見圖)，被佛利蒙市政府家庭資源中心聘請為中文諮商輔導，提供親子輔導與兒童心理輔導。(記者任維真攝)

## 菲蒙親子服務 提供華語輔導

本刊記者陳麗儀專訪

面對工作和生活的壓力，父母們有時可能會忽略與孩子的溝通。但不少最新研究發現，孩子與父母的關係對兒童的腦部發育有重要的影響；而非蒙市的親子輔導服務最近更提供華語輔導員，協助改善家長與孩子的關係。

從事輔導工作多年的楊海澎指出，因為父母與孩子間的關係影響兒童的腦部發育，而腦部與身體健康、心理健康、學習能力、智商和情緒智商都有直接的關連，所以小時候跟父母關係良好的孩子，長大後會更有自信，在與人溝通等方面也會比較成功。

她舉例說，即使孩子本身非常聰明，但如果父母因為日常工作太忙而沒有耐心陪伴孩子，孩子會產生一定的情緒反應。假如這種情緒或創傷沒有得到適當的處理，兒童長大後可能會出現更嚴重的問題。在她接觸的例子中，不管是青少年還是成人，如果他們小時候的創傷沒有得到適當的處理，即使他們已經很成功，但一旦遇到打擊或新的創傷，他們就會不知如何處理，把問題惡化。

菲蒙市的家庭資源中心則為父母和孩子提供了一個地方，讓兒童有一個安全的地方把自己的脾氣、情緒表達出來，而家長也可以更瞭解孩子的需要，明白溝通在親子關係中的重要。

其實親子輔導不但對孩子的成长有正面的影響，

對父母本身也有好處。楊海澎解釋，雖然做父母並不需要有任何證書或通過任何考試，但父母的工作絕不容易；初為父母的家長可能並不瞭解自己的角色，不清楚如何才是適合的父母。透過相關的輔導，家長既能幫助孩子成長，更能學習作為父母要留意的地方。

舉例說，很多剛來美國的家長，一方面要重新適應新生活，另一方面可能也要解決語言障礙。這些生活的問題既減少了家長和孩子溝通的時間，更可能為父母帶來很大的壓力。但親子輔導不但可加強家長和孩子間關係，更會給予適當的輔助，協助家長找尋所需的資源，例如看醫生、翻譯等服務。

針對華人對子女教育的高要求，楊海澎強調說：「小孩子將來在社會上是否能夠成功，不一定只是靠學歷。他們更需知道如何處理打擊以及與人相處等問題。華人家長非常高的標準，（給孩子）太大的壓力。」親子輔導讓家長有機會學習如何幫助子女發揮潛力，同時改善父母與子女間的關係，令孩子能夠在更健康、更正面的環境下成長。

位於菲蒙39155 Liberty Street, Suite E500的家庭資源中心（電話：510-574-2110內線13）主要是為零至五歲的兒童及其家長所設。但任何家長如果有親子關係問題，也可以致電楊海澎，電話：925-846-2090內線341。

## CHILDREN'S RESPONSE TO DIVORCE:

### DEVELOPMENTAL GUIDELINES FOR PARENTS

(Adapted from *Children of Divorce* by Mitchell A. Barris, Ph.D. and Carla B. Garrity, Ph.D.;  
*Parents and Divorce, Helping Your Children Cope - A Life Skills Education Pamphlet*; and *Kids' Turn* staff presentations)

Notes: The tips on how to help kids of one age can be useful for other ages also. Kids may vary on where they fall on this chart if they are mature or immature for their age. Other variables which affect how a child responds to separation or divorce include the child's temperament, his or her emotional/cognitive maturity, family and other supports, and the circumstances surrounding the divorce/separation.

### INFANCY TO 2-1/2 YEARS

DEVELOPMENTAL TASKS	CHILD'S RESPONSE TO DIVORCE	RECOMMENDATIONS FOR LIVING/VISITATION ARRANGEMENTS	HOW PARENTS CAN HELP KIDS OF THIS AGE	RISKS
<p><b>Infants:</b></p> <p>Build attachment to primary caretaker.</p> <p>Form trust in the environment.</p> <p><b>Toddlers:</b></p> <p>Begin to develop a sense of independence.</p> <p>Increased self-awareness assisted by emergence of language and locomotion.</p> <p>Growing capacity to use objects (special blankets, toys, photos) for comforting self.</p>	<p>Feeling of loss of contact with caretaking parent.</p> <p>Feeling of loss of familiar and comfortable environment.</p> <p>May fear abandonment by one or both parents.</p> <p>Progress with toilet training may slow. May become more clingy or needy. May have difficulty sleeping.</p> <p>May demand unusual amounts of attention.</p> <p>May act out anxiety rather than expressing it verbally.</p>	<p><b>PARENTS LIVING CLOSE TO EACH OTHER:</b></p> <p>Select primary residence based on caretaking history.</p> <p>Nonresidential parent has short, frequent visits daily, depending on availability and caretaking history.</p> <p>If dual primary parents, share daytime caretaking, establish one nighttime caretaker.</p> <p>Overnights are not recommended.</p> <p><b>PARENTS LIVING FAR APART:</b></p> <p>One parent travels to the residence of the other to enable nonresidential parent to have daily short visitation.</p> <p>Maintain long-distance relationship.</p>	<p>Maintain a consistent daily routine.</p> <p>Bring familiar, comforting objects to aid in transferring child from one home to another.</p> <p>Reassure him that he's done nothing to cause the change, and that having him around is a pleasure.</p> <p>Reassure her verbally and physically that you will always keep her safe, and love her. Give her lots of holding and cuddling.</p> <p>Don't belittle him if he starts displaying behaviors you thought he'd outgrown.</p> <p>Consult with a doctor as needed.</p>	<p>Feelings of loss can result in symptoms of depression, failure to thrive, developmental delays, or in the child acting younger than his age.</p> <p>Too long a separation from primary caretaker may result in problems with separation and to difficulty relating well to others when the child gets older.</p>

2:12 TO 5 YEARS

DEVELOPMENTAL TASKS	CHILD'S RESPONSE TO DIVORCE	RECOMMENDATIONS FOR LIVING/VISITATION ARRANGEMENTS	HOW PARENTS CAN HELP KIDS OF THIS AGE	RISKS
<p>Continued growth of individuality -</p> <p>Capacity to hold absent parent in mind to comfort self for extended periods.</p> <p>Verbal skills develop for expression of feelings and needs.</p> <p>Regulation and mastery of emotions and bodily functions.</p> <p>Increasing identification with same-sex parent.</p> <p>Begins to test parental limits (power struggles).</p> <p>Gradually increasing interest in peers, school, and activities; becomes more social.</p>	<p>Magical thinking results in sense of responsibility for divorce ("I caused the divorce because I didn't put my toys away.")</p> <p>Anxiety around basic needs being met: food, shelter, visitation logistics. May feel confused about residence/visitation schedule.</p> <p>May fantasize that the family is intact, or the parents are reunited. May pretend the divorce didn't happen.</p> <p>May revert to behaviors she has outgrown (bed-wetting, thumb-sucking, tantrums).</p> <p>Transition difficulties in moving between households can be expected.</p> <p>Fear of losing parental approval and love, of going to sleep, of the dark, of new places, of abandonment. Nightmares are possible.</p> <p>Periods of sadness, anger, usually brief and interrupted by play.</p>	<p><b>PARENTS LIVING CLOSE TO EACH OTHER</b></p> <p>Time initially distributed in proportion to parent's caretaking prior to divorce.</p> <p>May introduce longer visitation periods for child gradually throughout this stage to a maximum of a split week.</p> <p>Implement overnights for child: one per week initially, extended to maximum of three per week toward the end of this stage. Long-weekend, short-weekend concept, preferably including a weekday visit, is a possibility if one parent works full-time during the week and the other does not.</p> <p><b>PARENTS LIVING FAR APART</b></p> <p>One parent travels to the residence area of the other.</p> <p><b>Child overnights: 2 to 3 days maximum.</b></p> <p>Must have encouragement and help to maintain phone and letter contact with absent parent between visits.</p> <p>Carry photographs, comforting objects, and memorabilia of absent parent.</p>	<p>Provide a secure and stable environment, with a consistent eating and sleeping routine.</p> <p>Reassure child that she did not cause the divorce.</p> <p>Read books about divorce together.</p> <p>Reassure child that just because one parent has left doesn't mean that you will leave too.</p> <p>Eliminate or reduce stressors - maintain a predictable schedule.</p> <p>Protect the child from interparental hostilities and your own distress.</p> <p>Help your child talk about nightmares or other frightening experiences.</p> <p>Take time to have fun together.</p> <p>Keep your promises.</p>	<p>Losing mastery of developmental tasks previously mastered.</p> <p>Loss of opposite-sex parent as socialization agent or loss of same-sex parent as identification model.</p> <p>Experiencing feelings of abandonment may result in sadness, depression, low self-esteem, and interference with development.</p> <p>May carry power struggles characteristic of this age to an older age.</p>

6 to 8 YEARS

DEVELOPMENTAL TASKS	CHILD'S RESPONSE TO DIVORCE	RECOMMENDATIONS FOR LIVING/VISITATION ARRANGEMENTS	HOW PARENTS CAN HELP KIDS OF THIS AGE	RISKS
<p>Developing peer and community relationships, branching out to hobbies and activities.</p> <p>Development of morals and a value system.</p> <p>Capacity for empathy.</p> <p>Builds confidence through social activities.</p> <p>Can maintain a sense of internal security, can soothe self.</p> <p>Can share feelings verbally.</p>	<p>Prevailing sadness, grief over loss of family unit.</p> <p>Direct expression of pain and anger possible; may try to hide feelings.</p> <p>Fears around money, food, and a place to live</p> <p>Fear of losing both parents</p> <p>Self-blame manifested by feelings of responsibility.</p> <p>Sense of responsibility and need to take care of the parents, despite own emotional needs</p> <p>May scheme to reunite parents (e.g., feigning illness).</p> <p>Tries to please both parents; may tell each parent what he thinks the parent wants to hear.</p>	<p><b>PARENTS LIVING NEARBY</b> Many children still require a home base.</p> <p>Child visits from 1 to 3 days weekly with nonresidential parent. OR Alternating half-weeks at each parent's home if consistent contact with community, peer group, and school can be maintained.</p> <p>Child could have multiple overnights; full week at each parent's home can be phased in toward older end of this stage.</p> <p><b>PARENTS LIVING FAR APART</b> With history of attachment to out-of-state parent, child can phase in travel alone for up to two visits of one week each.</p> <p>Distant parent may travel to have frequent weekend visits, including overnights, finances and work schedules permitting. During these visits maintain the child's consistent contact with community, peer, and school activities.</p> <p>Child must have permission and help to maintain essential phone and letter contact with absent parent between visits.</p> <p>Visits may be longer (up to 4 weeks) as child gets older or if accompanying older sibling and formerly very involved nonresidential parent, especially if children are visiting an area in which they have previously resided.</p> <p>Homework possible. May need to curtail lengthy visits.</p>	<p>Need stable peer group relationships and activities.</p> <p>Avoid using your child as an ally or confidante - it will increase your child's sense of responsibility for helping you with your feelings.</p> <p>Structure special time with your child.</p> <p>Encourage your child to talk about his feelings. Reassure the child that her feelings are normal and ok.</p> <p>Give simple, honest answers to his questions.</p> <p>Don't lean on your child for support, or use her as a spy or messenger.</p> <p>Don't give false hope of reconciliation.</p> <p>Interact with the child through play or artwork or with puppets so reassure them they will be taken care of and assist them in expressing their feelings.</p> <p>Communicate with the other parent in an effort to reduce child's attempts to play one parent against the other ("Mom lets me stay up till 9.")</p> <p>Don't pressure your child to choose where she wants to live.</p> <p>Discuss adult matters (legal and financial issues) outside of the child's presence.</p>	<p>Achievement at school and learning affected, may have problems concentrating.</p> <p>Long-term depression.</p> <p>Preoccupation with divorce.</p> <p>Acting out around theme of parents reuniting.</p>

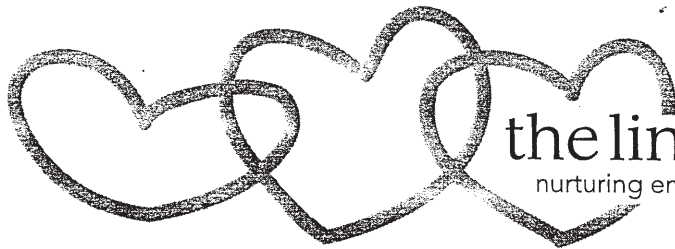
9-12 YEARS

DEVELOPMENTAL TASKS	CHILD'S RESPONSE TO DIVORCE	RECOMMENDATIONS FOR LIVING/VISITATION ARRANGEMENTS	HOW PARENTS CAN HELP KIDS OF THIS AGE	RISKS
<p>Developing proficiency in academic, athletic, artistic, and community activities.</p> <p>Developing an increased awareness of self, evaluating own strengths and weaknesses as compared to others.</p> <p>Concerned with popularity and fitting in with their peers.</p> <p>Increasing ability to see different points of view.</p>	<p>Empathic understanding of one or both parents, with possible intense condemnation for one parent.</p> <p>Demand adequate adult-level explanations.</p> <p>Aware of own rejection and vulnerability; obvious and sustained feelings of sadness, anger, and hurt.</p> <p>Possible sense of shame in community.</p> <p>May feel torn between loyalty to both parents.</p> <p>May fear parent will replace him/her with a new partner.</p> <p>Boys more likely to display anger, hostility, or uncooperativeness; girls more likely to show psychological distress through physical symptoms, depression.</p>	<p><b>PARENTS LIVING NEARBY</b> One home base with specific evenings, weekends, and activities at the other home scheduled for regularity and predictability <b>OR</b> Equal basis with each parent is possible, up to 2 weeks in each residence.</p> <p>Maintain accessibility to school, peers, extracurricular and community involvements from both homes.</p> <p>"Nesting" (both parents moving in and out of same residence) is another possibility.</p> <p>Presuming close relationship exists, summers may be split 50/50, approximately 4 to 6 weeks in one block.</p> <p><b>PARENTS LIVING FAR APART</b> One home base with 1 to 3 weekend visits per month at other home, depending on distance and capacity to travel.</p> <p>Half of winter break, all of spring break with nonresidential parent. If too far for regular weekends, then Thanksgiving and Presidents' Day weekend with nonresidential parent.</p> <p>Presuming close relationship exists, summers may be split 50/50, approximately 4-6 weeks in one block.</p>	<p>Protect children from interparental hostilities.</p> <p>Don't lean on your child for support.</p> <p>Don't use children as spies or messengers.</p> <p>Help them maintain frequent and consistent contact with the absent parent.</p> <p>Listen for the feelings behind the words and make assurances that you care about what happens to your child, even if they are expressing their distress in a way that is hurtful to you.</p> <p>Set limits on your child's anger. Do not allow her to break things or constantly yell at you or others.</p> <p>Stay in contact with your child's school.</p> <p>Attend performances and important events, even if it means traveling to get there.</p>	<p>Academic achievement may suffer.</p> <p>Possible lying or other deceptive behavior.</p> <p>Forming too close an alliance with one parent against the other.</p> <p>Loneliness, depression, low self-esteem.</p> <p>Isolating self from peers because of shame.</p>

**13 - 18 YEARS**

DEVELOPMENTAL TASKS	CHILD'S DIVORCE ISSUES	RECOMMENDATIONS FOR LIVING/VISITATION ARRANGEMENTS	HOW PARENTS CAN HELP KIDS OF THIS AGE	RISKS
<p><b>Psychological</b>                      emancipation; further solidifying identity, becoming an adult.</p> <p>Mourning the loss of childhood, dependency, protection within the family.</p> <p>Handling sexual feelings.</p> <p>Establishing sense of self vis-a-vis rules and regulations of society.                      May explore both those rules and different roles for himself.</p> <p>Preparing to leave home.</p>	<p>Having no intact family from which to emancipate results in accelerated or delayed emancipation.</p> <p>Behavior may vacillate between adult and childish.</p> <p>Possible de-idealization of or scorn for one or both parents.</p> <p>Embarrassment about family.</p> <p>Distress over parents' more obvious sexuality.</p> <p>Child will place peer needs ahead of family and therefore may not want to visit.</p> <p>Likely to express hurt through anger.</p> <p>May fear that own relationships will end in divorce.</p> <p>May try to act as if "it's no big deal," even though he's in pain.</p> <p>May withdraw emotionally during times of turmoil.</p>	<p>Establish "permanent schedule" with some flexibility built in. Adolescent input is essential; adolescent cannot be forced into schedule he/she had no involvement in creating.</p> <p><b>PARENTS LIVING NEARBY</b>                      One home base with specific evenings, weekends, and activities at the other home scheduled for regularity and predictability.                      OR Equal basis with each parent is possible, up to two weeks in each residence                      OR "Nesting" (both parents moving in and out of same residence) is another possibility.</p> <p>Maintain child's accessibility to school, peers, extracurricular and community involvements from both homes.</p> <p><b>PARENTS LIVING FAR APART</b>                      One home base with one to three weekend visits per month at other home, depending on distance and capacity to travel.                      Half of winter break, all of spring break with nonresidential parent.                      If too far for regular weekends, then Thanksgiving and Presidents' Day weekend as well as entire summer spent with nonresidential parent.</p>	<p>Ask about and acknowledge the feelings she has about the divorce. Explain some of the changes that will come about as a result and some of the expectations you have of her.</p> <p>Remind him you will be there as he needs support and encouragement.</p> <p>Put a stop to any self-destructive behavior by paying more attention to what he is feeling; seek professional help if necessary.</p> <p>Expect to answer questions on a more adult level, giving general information about the nature of the parental problems leading to the divorce.</p> <p>Help her maintain frequent and regular contact with both parents.</p> <p>Avoid the temptation to treat the adolescent as older than he really is.</p> <p>Allow them the opportunity to solve their own problems.</p> <p>Support from the peer group very important.</p> <p>Seek his input and participation in family decisions.</p> <p>Stay in contact with the school, attend important events.</p>	<p>Possible acting out (drugs, sex, gangs, religion), to attain a sense of belonging.</p> <p>Delayed entry into adolescence, or growing up too fast.</p> <p>Doubts about own capacity to have relationships; may invest too much or withdraw too soon from relationships.</p>





the link to children (TLC)  
nurturing emotional health in families with young children

June 2004

### President's letter

When I became a mother, at age 44, I never imagined what would be in store for me. The roller coaster ride of parenthood is not taught in any class or book. As my children grew I was amazed at the signs of stress that came from their own developmental and learning needs, having two working parents, and being adopted. Their teachers advised us to look for some child therapy options for them. We were fortunate enough to have the resources to address our children's emotional issues. The majority of the 35,000 Alameda county children in preschool/daycare do not have access to such resources. I became involved with The Link to Children (TLC) because I personally have seen the effectiveness of early intervention mental health services during critical developmental stages of my own children's lives. And I have seen the success of TLC.

Now as the President I am writing to solicit your sponsorship. TLC is expanding from a small non-profit agency to one that provides services on a wider basis. Since we began eight years ago we have put play therapy rooms and mental health interns at seven child development centers in northern Alameda County. We have a website that explains our services and governance. We are looking for funds to establish ourselves in the greater community of the East Bay. Please visit our website and make a direct donation at [www.linktochildren.org](http://www.linktochildren.org) or contact us to offer your advocacy in support of our work.

Thank you,  
Alicia Flores, President

### Bonding and the Brain

...You've heard that a baby's brain grows most rapidly during the first three years of life. During the first year, brain cells are busy making millions of connections. The connections peak at about one year and, in the process called "pruning," they are eliminated if they are not used. The connections that you regularly use are the ones that you keep...

"The most important thing that parents need to know is that their interactions with their infant, toddler and child literally help shape the biology of their child's brain," Bruce Perry, MD [from child trauma academy] says. And, through simple interactions—holding, rocking, singing, reading, laughing and playing with their child—they are helping express the underlying genetic gifts of their child." ♥

*Parenthood.com*

### Brain Development in Very Young Children: Why the Early Years Are Important

Children are born with roughly 100 billion neurons (ABC's of Early Childhood). Few additional neurons will be produced for the rest of their lives. At birth, the connections between these neurons are tentative. As the child grows, experiences the world, and establishes relationships with others, these connections are modified and "hardwired." Hardwiring connections are responsible for all of a child's major cognitive and emotional functioning—including vision, hearing, language, social-emotional development, and movement. This process of both discarding and establishing connections in the brain occurs rapidly: By age three, roughly 85% of the brain's core structure is formed (Bruner, Goldberg, & Kot, 1999).

Children's early experiences have a profound influence on which connections are hardwired and which are discarded. Positive, enriching, and nurturing experiences—with other people and within the environment—support children's optimal development. Access to high quality, developmentally appropriate services—whether child care, early intervention, or home visiting—is a protective factor for very young children. These programs help promote early learning and development.

Other variables can negatively influence brain development. The prenatal period is a time of massive brain organization

and development as well as increased vulnerability to prenatal stress or trauma, and environmental teratogens (e.g., drugs or alcohol). Once born, babies remain sensitive to the impact of stress, trauma, and environmental factors. For example, numerous studies have shown the devastating effects on intelligence and brain development of a lack of basic nutrients in the prenatal period, in infancy, and in early childhood. Risk factors such as these influence the connections made (or not made) in the brain, with lifelong results.

The development of very young children is also profoundly influenced by their relationships with others. Nurturing relationships with parents and other important adults—close relatives, childcare staff, pediatricians, early intervention professionals, and home visitors—support children's cognitive and social-emotional development, and promote healthy brain development. Research shows that warm, loving relationships ("attachments") with caring adults have a tangible and long-term influence on children's lives, contributing to optimal social emotional and cognitive development in infants and toddlers (Zeanah & Doyle Zeanah, 2001). ♥

*"Growing Up Healthy" by Rebecca Parkakian, ZERO TO THREE Policy Center, The National Association of Counties, and the League of Cities, by permission.*

## Aggression and Violence: The Neurobiology of Experience

Each year in the United States alone, over 5 million children are directly exposed to violence. The most common form of destructive aggression takes place in the home in the form of physical abuse or domestic violence. The impact of these various forms of violence on children and adolescents is complex, but one result appears clear: the number of aggressive and violent youth is increasing dramatically. Young murderers (under age 18) in the United States tripled from 1984 to 1994. Currently 28,000 children and adolescents are known murderers. The number of violent crimes committed by youth is expected to double by the year 2010.

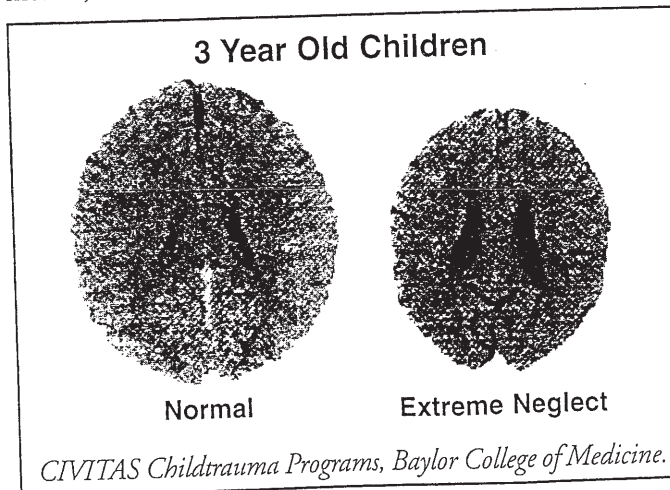
Are violent children conceived or created? Is there a neurobiological reason that a child is violent? What makes a child violent? Genes that make testosterone? Maternal neglect? Physical abuse? Modeling from a father hitting a mother? Impaired problem solving skills? Peer/gang pressures? Violence on television? Violent lyrics in music? Access to guns? In attempting to understand what makes a child violent, it is important to remember three points: 1) not all violence is the same; 2) the brain mediates all human behavior; and 3) the biological properties of the brain are the result of genotype and developmental experiences.

The most dangerous children are created by a malignant combination of experiences. Developmental neglect and traumatic stress during childhood create violent, remorseless children. This is characterized by sensitized brainstem systems (e.g., serotonergic, noradrenergic and dopaminergic systems). Dysregulated brainstem functions (e.g., anxiety, impulsivity, poor affect regulation, motor hyperactivity) are then poorly modulated by poorly organized limbic and cortical neurophysiology and functions (e.g., empathy, problem-solving skills) which are the result of chaotic, undersocialized development. This experience-based imbalance predisposes to a host of neuropsychiatric problems and violent behavior. ♥

*B.D. Perry, MD and the ChildTrauma Academy; www.ChildTrauma.org, by permission*

### Impaired brain development

Child abuse and neglect have been shown, in some cases, to cause important regions of the brain to fail to form properly, resulting in impaired physical, mental, and emotional development (Perry, 2002; Shore, 1997). In other cases, the stress of chronic abuse causes a "hyper-arousal" response by certain areas of the brain, which may result in hyperactivity, sleep disturbances, and anxiety, as well as increased vulnerability to post-traumatic stress disorder, attention deficit/hyperactivity disorder, conduct disorder, and learning and memory difficulties. ♥



#### Brain Fact

Abused children have smaller brains. Parts of the brain of a severely abused and neglected child can be substantially smaller than that of a healthy child.

Reproduced from [www.zerotothree.org/brainwonders](http://www.zerotothree.org/brainwonders) with permission of ZERO TO THREE, Erikson Institute, and Boston University School of Medicine.

to post-traumatic stress disorder, attention deficit/hyperactivity disorder, conduct disorder, and learning and memory difficulties. ♥

*B.D. Perry, MD, 2001, National Clearing House of Child Abuse and Neglect*

## Ten Things Every Child Needs

The latest research shows that starting from birth, you can dramatically improve your child's ability to learn by meeting these ten essential needs.

1. **Interaction.** Consistent, long-term attention from caring adults actually increases your child's capacity to learn.
2. **Touch.** Holding and cuddling does more than just comfort your baby – it helps his/her brain to grow and develop.
3. **Stable Relationships.** Developing strong, stable relationships with parents and other caregivers helps to buffer stress that can harm your child.
4. **Safe, Healthy Environments.** Safe environments should be free of lead, sharp objects, loud noises, and other hazards.
5. **Self-Esteem.** Self-esteem grows with respect, encouragement, and positive role models from the beginning.
6. **Quality Care.** Quality care from trained professionals can make the difference when you can't be with your child.
7. **Play.** Play activities help your child explore and develop his/her senses and discover how the world works.
8. **Communication.** Talking with your baby helps to build verbal skills needed to succeed in school and later in life.
9. **Music.** Music expands your child's world, teaches new skills, and offers a fun way to interact with your child.
10. **Reading.** Reading to your child from the earliest days of life shows its importance and creates a lifelong love of books.

*Prevent Child Abuse, Illinois. Adapted from a brochure published by the South Dakota Department of Social Services.*

# Strengthening Young Children's Developing Minds

Recent findings in brain research reveal that human development is a complex interaction between neurobiological processes and interpersonal relationships. The brain develops in a "use-dependent" way, shaped by the child's experience in relationships with significant individuals. A critical period for brain structure and organization is during the first years of life. Major neural systems form to regulate complex interactions related to social and emotional development. By age 3 a child's brain is 85% of the size of an adult brain. Given this critical period of brain development, young children are especially vulnerable to early disruptive experiences. Traumatic events or prolonged states of stress negatively alter a child's developing brain and sense of safety in the world.

The National Research Council published its study of brain development in early childhood in a report entitled *From Neurons to Neighborhoods: The Science of Early Child Development*.

It identified social policy recommendations to protect children from the damaging effects of poor nutrition, substance abuse, chronic stress, maternal depression, parental mental illness, physical and sexual abuse, family violence, and community violence. A lack of nurturing experiences and excess exposure to risk factors such as the above alter the developing central nervous system. Researchers such as Bruce Perry, MD, (1995) have shown that violence and trauma change the structure of the developing brain so that it functions in states of either hyper-arousal on constant alert for potential threat, or dissociation in retreat from potential harm. These states become embedded in the developing brain as neural sensitive "traits". Perry argues: "The most destructive violence does not break bones, it breaks minds."

Secure attachment to a stable, atten-

tive and consistent caregiver in the first year of life has been found to be the most powerful protective factor for high-risk children (E.E. Werner 2000). Close, dependable relationships can dramatically reduce hyper-arousal or dissociation in a young child exposed to trauma and stress (B. Perry, 1995). "Babies with strong emotional bonds to their caregivers consistently showed lower levels of cortisol in their brains...

genuine appreciation for a child's unique attributes help strengthen the child's sense of trust, self-esteem, motivation, hope and ability to cope. The positive impact of these supportive relationships has been demonstrated in children of diverse cultural, racial and ethnic backgrounds.

Early intervention services are also important in ameliorating the effects of risk factors. They can reduce the intensity and severity of the child's response to trauma and decrease the probability of the child developing a sensitized neural system. These services are especially needed for infants and young children who are most vulnerable due to their dependence upon their caregivers. During these critical periods when specific neural development occurs it is essential that a child receive screening to assess any potential need for additional support. Common characteristics of programs that successfully prevent negative

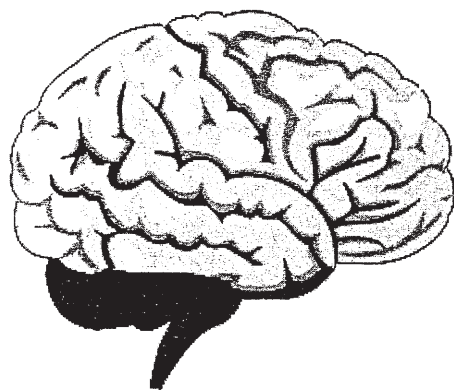
outcomes for at-risk children are the availability of a wide range of services in the areas of health, education, and family support with the goal of strengthening the child within the context of their families and community. These protective factors appear to transcend socioeconomic, ethnic, racial, and geographic differences.

The recent findings in brain research reveal the vital significance of secure relationships and early intervention in the first years of life when critical brain structure and organization takes place. The buffering effect of protective factors profoundly alters the child's developing brain and strengthens the child's potential for health and stability across all developmental domains. ♥

*Iris Greenbaum, MSW, Early Childhood Mental Health Consultant, Jewish Family & Children's Services/East Bay*

## Brain Structure and Function

*B.D. Perry MD, Childtrauma Academy*



- Abstract Thought
- Concrete Thought
- Affiliation
- "Attachment"
- Sexual Behavior
- Emotional Reactivity
- Motor Regulation
- "Arousal"
- Appetite/Satiety
- Sleep
- Blood Pressure
- Heart Rate
- Body Temperature

Children who received warm and responsive care were able to recover from the stress response more quickly" (J. Newberger 1997). The reciprocal nature of loving, attentive relationships with attachment figures promote the child's capacity for self-regulation in response to strong feelings and needs. In emotionally responsive relationships the brain develops increased internal harmony that supports the development of complex higher-level functions as the child matures, such as problem solving and cognition (D. Siegel 2003).

Alternative caregivers, grandparents or other family members who provide stability and attuned care can positively modify the effects of risk. Schools can also offer stability when they provide care, predictable, consistent rules and clear organizational structure. Teachers who give encouragement and reflect

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**“Communicating with infants and young children exposed to violence”**

A group of childhood mental health specialists from an array of organizations—including The Link to Children, Children’s Hospital, Safe Passages, CALICO, and Alameda County—has been meeting to develop a roll call training for the Oakland Police Department. The purpose of the training is to raise police awareness of the impact of violence on babies and children, and to provide guidelines for how to communicate with them at the scene of a conflict.

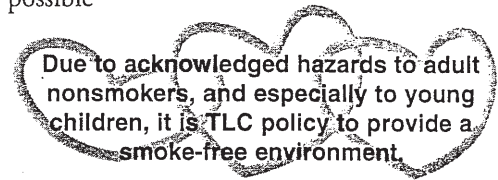
In Oakland, domestic violence-related calls to the police department were reported to increase by 28% between 2001 and 2002, from 2,043 calls to 2,608 calls (State of California Department of Justice, RAND California Community Statistics). According to a telephone survey done in 2000, 85% of the people who had contacted the police for a domestic-related incident had children, and of those, 63% had children 0 – 5 years of age in the home.

Children who experience violence as witnesses are at greater risk of becoming violent themselves. They are significantly at risk for increased depression, anxiety, post-traumatic stress disorder, anger and lower school attainment. Habitual exposure to violence alters the developing brain in permanent ways. It over-activates the stress response system, which predisposes children to violent and impulsive behavior in adulthood.

Because the police are the first professionals to have contact with children during a violent or threatening situation, they have an opportunity to lessen their trauma by calming and comforting them, or making sure that someone does. Their contact with a child, including babies, has far reaching effects on the child’s mental and emotional health. Also, encouraging the family to seek services will pay off for the child.

When calming a child who has experienced violence:

1. Lower yourself to the child’s eye level
2. Address the child in a quiet and calming manner
3. Allow the child to express his/her feelings fully
4. Assure the child that the domestic violence is not his/her fault
5. Explain what is happening and is going to happen in the most simple and truthful way possible



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