B.A.S.E.®-Babywatching
A Programme to Prevent Aggressive and Anxious Behaviour Problems
Workshop and Training

Karl Heinz Brisch

Dr. von Hauner Children's Hospital
Department of Paediatric Psychosomatic Medicine and Psychotherapy
Ludwig-Maximilians-University Munich

Karl-Heinz.Brisch@med.uni-muenchen.de

© Copyright K. H. Brisch Munich/Germany 2014. All rights reserved.
Homepage
www.khbrisch.de/en

• Downloads
  – Slides of presentation – BASE_GL_Edinburgh

• www.base-babywatching-uk.org
• www.base-babywathing.de
• www.base-babywatching-frankfurt.de
B.A.S.E.®

Babywatching

Karl Heinz Brisch
Kinderklinik und Kinderpoliklinik
im Dr. von Haunerschen Kinderspital
Abteilung Pädiatrische Psychosomatik und Psychotherapie
Ludwig-Maximilians-Universität München

B = Babywatching
A = Against Aggression and Anxiety
S = For Sensitivity
E = For Empathy

© Copyright K. H. Brisch Munich/Germany 2014. All rights reserved.
Babywatching in Kindergarten and schools

Overview

• Theoretical background
• Programme
• Training by video and life observation
• Results from research to date
• Costs
• Further perspectives
• Roots of Empathy
Henri Parens – A Pioneer

• Healing from the Holocaust
• Autobiographie
Aggression theory according to Henri Parens I

• Types of aggression
  - Positive healthy aggression as „exploration“
  - Negative hostile aggression against others
Aggression theory according to Henri Parens II

- **Cause of hostility**
  - Massive rejection and disregard of basic needs of the child by caregivers
  - Missing empathy in thoughts, feelings and actions of children
Prevention programme

• Goals
  - Ability for empathy
  - Preventing hostility

• Modules for pupils and teachers
  - From Kindergarten to grade 12 or 13
  - Significant reduction of aggressive behaviour in comparison to control groups
Kindergarten Programme
Baby-watching I

- Groups of children watching an infant in interaction with his/her mother/father
- Starting shortly after birth till approx. end of first year
- Up to autonomous walking and first words
Kindergarten Programme
Baby-watching II

• Instruction for Baby-watching by educators
• One educator leads the group, while another leads the watching
• Monitoring of protocol
• Frequency
  - 1 x weekly
  - Circle of chairs
• Duration approx. 20-30 minutes
Training of empathy

• Sensitivity for other people‘s
  – Thoughts
  – Actions
  – Motivations
  – Feelings and emotions

• Selfereflective capacity of mentalizing
  – „I think that you think that I think…“
  – „I feel that you feel that I feel…“
Sensitivity (1)

• The caregiver with the highest sensitivity during interaction will become the infant’s major attachment person.

• A high parental sensitivity will enhance the development of a secure attachment of the infant.
Sensitivity (2)

• The caregiver has to
  – perceive the infant’s signals
  – interpret correctly the infant’s signals
  – react properly
  – react promptly
to the infant’s signals
Gaze

• Reciprocal gaze with affect attunement between infant and caregiver promotes secure attachment (intersubjectivity)
Verbal Interaction

• Support of secure attachment by verbalization
  – of the „inner world“ of affective situations
  – of the infant‘s action context
Rhythm of interaction in action and language

• Support of secure attachment by
  – reciprocal change in mother-infant-interaction and communication
  – correction of mismatches

• insecure attachment
  – via hyper-synchronous interaction and communication
  – absolutely asynchronous interaction
Touch

- Sensitive touch/massage between infant and caregiver promotes secure attachment
- Hormon oxytocin
Levels of babywatching

• Behavior
• Motivation
• Emotion
• Identification
• Empathy
Level of babywatching I

• Level of behavior
  – What does the baby do?
  – What does the mother/the father do?
Level of babywatching II

- Level of motivation
  - Why does the baby behave in this way?
  - Why does the mother/the father behave in this way?
Level of babywatching III

• Level of emotions
  – How does the baby feel in this situation?
  – How does the mother/the father feel in this situation?
Level of babywatching IV

• Level of identification with behavior
  – What would I do in this situation, if I am the baby?
  – What would I do in this situation, if I am the mother/the father?
Level of babywatching V

• Level of identification with emotions – level of empathy
  – How would I feel in this situation, if I am the baby?
  – How would I feel in this situation, if I am the mother/the father?
Pitfall and failures

- No programme of developmental psychology
- No teaching with blackboard
- No teacher – caring for baby
- No student – touching, holding, cuddling the baby
- No focus on baby only and developmental steps
- BUT always:
  - **Focus is on mother/father-infant-interactions**
Results Kindergarten I

- RTC-Study
- Behaviour assessment of the children (N=50, age M=50 months) by
  - Educators
  - Parents
  - Test at start and finish of intervention
  - Comparison between control group (without intervention) and intervention group
Results II

• Improvements in the intervention group
  - Assessed by educators (CBCL)

• Boys
  - Less aggressive behaviour
  - Less oppositional behaviour
  - Improved alertness
  - Less social withdrawal
  - More emotional reactivity
  - Less „anxious-depressed“
Results III

• Improvements in the intervention group
  - Assessed by educators (CBCL)

• Girls
  - Fewer physical complaints
  - Improved alertness
  - Less social withdrawal
  - More emotional reactivity
  - Less „anxious-depressed“
Results IV

• Improvements in the intervention group
  - Assessed by parents (CBCL)

• Boys
  - Less aggressive behaviour
  - Improved alertness
  - Less social withdrawal
  - More emotional reactivity
Results V

• Improvements in the intervention group
  - Assessed by parents (CBCL)

• Girls
  - less sleeping problems
  - Improved alertness
  - Less social withdrawal
  - More emotional reactivity
Results VI

• Additional improvements in the intervention group

• Assessed by educators
  - Attachment behaviours
    - Looking for comfort from caregiver
  - Applying the method of baby watching and sensitivity of play with one another
BASE-School

- RCT Studie (Haneder, 2011)
- N=250 students, Tyrol/Austria primary schools (N=123 in intervention-groups, N=127 in control-groups)
- Strengths and Difficulties Questionnaire
- Pre-Post-Intervention
- Duration of intervention: 9 month
Results: Parents and Teachers

• Significant improvements in intervention-groups
  – Emotional problems
  – Prosocial behavior
  – Total index of behavior problems
Improvement
Emotional behavior problems

• Anxious-depressive
• Withdrawal
• Somatoforme complaints
• Sleep-problems
• Anxiety disorders
Improvement
Prosocial behavior

• Empathy in behavior
• Social competence
Improvement
Externalizing behavior

• Aggression
• Attention deficit
• Oppositional behavior
• Hyperactivity
Improvement
Global index of behavior problems

• Aggression
• Hyperactivity
• Emotional problems
• Problems in interactions with peers
Summary

• Overall positive effects for both boys and girls
• Positive changes of externalising and internalising disturbances
• Similar positive assessments made by educators and parents
Summary II

• For all involved, an emotionally positive experience
• Noticeable generalisation of the mode of baby-watching during play with one another
• Preventive intervention at minimal cost
Outlook

• More widespread introduction and testing of programme
• Testing in social areas with high risk families
• Testing in other age groups
• Follow-up programme
Costs of B.A.S.E.® -Training

• BASE-Group-Leader
  – One day training of kindergarten or school teacher – approx. 50 Euros/person

• Supervision by BASE-Mentor
  – One day training for Group-Leaders – approx. 120 Euros/person
  – Individual prize for supervision

• BASE-Trainer
  – In progress: 2 day training - approx 200 Euros/person
Costs of running B.A.S.E.® - courses in kindergarten and schools

• NONE
  – For teacher
  – For institution
  – For parents

• Cost for supervision
  – Recommendation: Mentoring/supervision by BASE-Mentor –costs depending on contract
  – Video supervised by mentor

• Mother and baby are not paid

• Number of children in intervention
  – As many as one teacher addresses
  – Each teacher can run more courses
Training-Grades

• BASE-Group-Leader (1 day training)
  – Running BASE-Groups by her/himself in school and kindergarten classes

• BASE-Group-Mentor (1-2 day training)
  – Hands-on experience with group-leading
  – Supervision of group-leaders

• BASE-Group-Trainer (1-2 day training)
  – Extended hands-on experiences with groups and mentoring
  – Training of group-leaders
  – Supervision of group-leaders and mentors
B.A.S.E.® - International

- Germany
- Austria
- Switzerland
- Belgium
- Netherlands
- New Zealand
- Australia
- UK
- In progress: Ukraine, Korea, Latvia, Russia

© Copyright K. H. Brisch Munich/Germany 2014. All rights reserved.
Steps towards a BASE-group (1)

- Do a BASE-Group-Leader training
- Find an institutional partner and sponsor
- Find a kindergarten or school
- Inform parents and children
- Do advertising
- Find a mother/father with a baby
- Organize cooperation with local partners e. g. obstetrians, midwives, media
- Ask for mentoring/supervision if needed
- Do documentation
- Do research and evaluation pre-post-intervention e. g. with Strength and Difficulties Questionnaire – SDQ (Goodman)
Roots of Empathy

- Canadian Programme – Mary Gordon
- Infant Development
- Teaching Book
- Baby and Mother visit ones a months
- Handling the baby, touching, cuddling
- Results – research papers
  - No clear methods, results to doubt
- See critical report in the internet
  - Making money
  - Benefit not clear from research results

© Copyright K. H. Brisch Munich/Germany 2014. All rights reserved.
DVD

• DVD SAFE "Embracing Closeness"
• DVD "BASE – Babywatching"
• Available for sale after presentation and after workshop or over the internet – s. webpages
Homepages

• www.safe-programm.de/en
• www.base-babywatching.de/en
• www.khbrisch.de/en
John Bowlby (1980)

- Intimate attachments to other human beings are the hub around which a person's life revolves, not only when he is an infant or a toddler or a schoolchild but throughout his adolescence and his years of maturity as well, and on into old age. From these intimate attachments a person draws his strength and enjoyment of life, and, through what he contributes, he gives strength and enjoyment to others. These are matters about which current science and traditional wisdom are at one.
- We may therefore hope that, despite all its deficiencies, our present knowledge may be sound enough to guide us in our efforts to help those already beset by difficulty and above all to prevent others becoming so.
Empathy and Loving Care

Author and lecturer Leo Buscaglia once talked about a contest he was asked to judge. The purpose of the contest was to find the most caring child.

The winner was:

A four-year-old child, whose next door neighbour was an elderly gentleman, who had recently lost his wife. Upon seeing the man cry, the little boy went into the old gentleman's yard, climbed onto his lap, and just sat there.

When his mother asked him what he had said to the neighbour, the little boy just said, 'Nothing, I just helped him cry.'
Reference

• Brisch, K. H. (2012)
  Treating Attachment Disorders
  (2nd edition)
  Guilford Press, New York, London
Information und Programme
www.khbrisch.de
Thank you for your attention!

www.safe-programm.de
www.base-babywatching.de
www.khbrisch.de