

# GROW YOUR KIDS: TREE (Talk Read Engage Encourage)

## Getting Started and Basic Principles (Ages < 2 Years) Ken Tellerman M.D. MDAAP

- Hand out toy/ book (can begin at 4 month well child visit)
- Informally observe: (more details on MDAAP website: <http://mdaap.org/TREE.html> )
- During developmental part of well child visit:
  - Ask “What kinds of things do you enjoy doing with your baby/child?” (discuss TREE concepts)
  - Ask “What fun things would you like to do with your baby/child between now and our next visit?” (review what to expect using Developmental Narrative)
  - Provide positive feedback for an observed parent behavior

## Basic TREE Concepts to Teach Parents and Observe (convey just a few concepts)

### TALK: *Bathe your baby in language*

- speak in *“parentese”* (using high pitch sounds to engage young infants)
- radio or sports announcer *narrative* approach (e.g. “you are rolling the red ball”)
- use gestures, label objects, give directions, play “show me” or “tell me” games
- talk during daily routines such as cooking, meals, driving, shopping, etc.
- sing or use finger games with young children

### READ: *Read regularly and enthusiastically*

- let young infants handle books and older infants select books (*let child take the lead*)
- read in a lively engaging manner
- label pictures or play “show me” or “tell me” games

### ENGAGE: *Have fun together/ Make your baby feel safe and loved*

- stimulate motor skills by using tummy time or placing objects just out of reach to encourage rolling or crawling
- provide warm physical contact and consolation when children are upset
- review the transition of play from *“doing with objects”* to *“doing to objects”* to *purposeful play* to *imaginary play*
- remain enthusiastically engaged when playing with children
- position child to easily access toys (*minimize use of electronic toys*)
- allow young children to *take the lead* and *to problem solve* before jumping in to help

### ENCOURAGE: *Be your baby’s cheerleader*

- use positive comments (Yeah!! You did it!)
- *praise effort rather than results* (“You really worked hard on that”)

## Developmental Narrative for Children Age 0-2 Years: Basic Concepts to Teach Parents and Observe Development on Progression of Development

### Motor:

- Head, neck and upper extremities
- Trunk
- Lower Extremities

### Communication:

- Vocalization: Coos/ Babbles
- Pre -verbal: gestures and imitation (“hi”, “bye”, “pick me up”, “peek a boo”)
- Verbalization: Receptive Language/ Expressive Language (single words, jargon, telegraphic speech)

### Cognitive: Play and Learning:

- Does “with” objects
- Does “to” objects
- Objects have *function*
- *Imaginary* play

### Social-Emotional:

#### Attachment in first year:

- “You and me”: social smile, laughing (sequential “*serve and return*”)
- “You and me and them”: stranger anxiety
- “Us”: shares delight (synchronous “*dance and duet*” and *joint attention*)

#### Separation and Exploration/ Autonomy in second year:

- Separation anxiety/ Oppositional behaviors

## Observe Parent infant interactions:

- Take the room temperature: *warm and nurturing/ red hot and angry/ steamy and anxious/ cold and devoid of emotion*) (see Parent Infant Observation Template and video #3)
- How does the parent make *you* feel?

## Parental Challenges:

When parent is *unsure* what to do: “What kinds of things would you like to do with your child before our next visit?”

- Ask: “What fun things have you seen other relatives or friends do with their children?”

Motivating parents to try: Does parent appear interested in the program?

(No/Maybe/Yes)

No: plant a seed “Perhaps we can talk about this some more at our next visit”

Maybe: process ambivalence and if interested, proceed with a plan

- “What kinds of things *might* you try?”
- Pros and Cons: “What is the *positive* side of doing these types of activities with your baby?” “What would keep you from trying?”

Yes: proceed with a plan

**Raising Concerns With Parents: when you note a parent to be overly angry, anxious or withdrawn**

- ***Ask permission:*** “Can I share some observations and thoughts with you? It seems like his behaviors make you upset. Tell me more about his behaviors at home”)
- ***Third person technique:*** “A lot of parents have difficulty with..... Is this something that you are struggling with?”
- ***Reflective listening:*** “From what you are saying, it *sounds* like your child can be difficult to handle... Tell me what it is like at home with your child”
- ***Empathic information gathering:*** “You seem frustrated/ tired/ stressed...Is it like this a lot of the time?”

**If advising referral:**

- If advising referral based on the prior discussion - state: “I am concerned about...It sounds like there is a lot going on...Would you be willing to meet with someone to talk about this some more?”

It is best to provide the parents with a name and telephone number to facilitate follow through or perform a warm handoff if a mental health consultant is available at the medical office. (Note: Summon the appropriate authorities if you suspect child abuse or neglect)

**When to Refer:**

- Parental mental health issues, domestic violence, substance abuse, significantly negative/neglectful parent child interactions, emerging child mental health needs and developmental/ behavior problems (Stay attuned to how parents handle *crying, sleep problems* and *oppositional behaviors/temper tantrums*)
- First line primary care interventions have not been effective or you are not comfortable handling the situation
- Parent requests referral