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Edible triangle: A model of early intervention in feeding difficulties for the under threes

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This is a presentation on the further development in the conceptualization, implementation and evaluation of a model of early identification and intervention of feeding difficulties in the zero to three groups. “The Edible Triangle” (TET) is a model of short-term intervention informed by child development research, psychoanalytic infant observation and video analysis. This model fills a gap in public health provision and adjusts itself to be used by the workforce of integrated children’s services. We use a semi structured interview and apply experimental measures to process material. We developed an outcome measure to ascertain the infant’s change in collaborating with interpersonal interactions. Further research is needed to establish the effectiveness and feasibility of delivery this model at local and national level. A mixed-method design analyses parent and infant outcomes from seven clinical cases referred to the service. Data is extracted from video-recordings of treatment sessions at three time points: baseline, mid-treatment and end of treatment. A five-minute section from each video-recording is coded for Parental Embodied Mentalizing (PEM). Through the PEM coding process, we developed an Infant Receptivity (IR) scale. This scale assesses the infant’s receptivity in dyadic and triadic interactions and capacity for pre-symbolic and symbolic play in relation to the feeding and eating situation. Preliminary results reveal that TET improves PEM and IR. Results indicate the TET is a valuable therapeutic intervention that influences outcomes for mother and babies with feeding and eating difficulties. This data should contribute to the absence of feeding and transition to solids data in the public health arena for the 0-24 months’ group. This study contributes to the research asked for as per recommendations from the NICE Maternity and Child Nutrition and Antenatal and Postnatal Mental Health guidelines. The graph indicates that prior to admission; infant’s weight in centiles was present at both low and high ends. At the time of discharge, the graph, illustrates all weights coming closer to centre centiles. The control group does not seem representative of a normative group, thus indicating further need which has been identified but has not been referred to PIFC.

Biography

Silvina Diaz Bonino is a child and adolescent psychoanalytic psychotherapist trained at the Tavistock Centre in London. She works in the NHS with adults and infants in perinatal psychology. She teaches Infant Observation at postgraduate level and has contributed to the journal *Infant Observation* as an author and as part of the editorial board. She has a longstanding interest and ongoing research in the feeding relationship between mother and baby.

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