

Australian Association for Infant Mental Health Inc.



Affiliated with
WORLD ASSOCIATION FOR
INFANT MENTAL HEALTH

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The Australian Association for Infant Mental Health Inc. (AAIMHI) aims (in part) to:

- É improve professional and public recognition that infancy is a critical period in psycho-social development, and
- É work for the improvement of the mental health and development of all infants and families.

Infants and overnight care - post separation and divorce ***Guidelines for protecting the very young child's sense of comfort and security***

This document is intended as a guide for those families caring for infants and very young children where parents have separated or divorced. It is acknowledged that conflict associated with a parental relationship breakup may be very stressful for all concerned and impact the emotional and development needs of the child.

Access to an available, responsive, continuous primary attachment relationship is central to infant mental health. The healthy development of second and subsequent attachment relationships is optimal. In keeping with developmental knowledge and current research (see *Infants and Overnight Care – Post Separation and Divorce* paper) AAIMHI offers the following points for guidance when considering post-separation parenting plans for infants and very young children.

1. If parental separation occurs before birth or in the first years of a child's life, special consideration is needed to ensure the continuity of a healthy primary attachment, together, where possible, with the safe building or maintenance of a warm, available relationship with the second parent.
2. As this may be a very difficult time for all concerned, separated parents may need extra help to understand that frequent, fixed overnight shared-time parenting schedules during the first years, while well intentioned, may severely disrupt important developmental gains for their young child.
3. Under the age of two years, overnight separations from the primary parent create unique stresses for the infant. In the majority of circumstances, non-essential overnight separations during these critical months of development are not advisable. Thus, in general, but always guided by the unique needs of each infant, prior to the age of two years, overnight time away from the primary care-giver should be avoided, unless necessary. Day times away from the primary parent should be kept to manageable periods of time, which can gradually increase as the infant matures.
4. After the age of two years, important developmental indices will help to predict the extent to which a young child can manage regular overnight time away from the primary carer. ***Most children would not be expected to have the developmental capacity to do all of these things adequately until around three years.*** AAIMHI considers these interdependent indices to be centrally important:

4.1 The child should be able to:

- a) at least in part calm him/herself when stressed and/or upset, and to use the second parent/care-giver to become soothed;
- b) imagine the main caregiver even when that person is not present;

- c) understand what is being said to him/her;
- d) anticipate events beyond the here and now, i.e. to understand what %tomorrow+means;
- e) communicate about past and future events, and verbally express his/her basic needs and feelings.

4.2 Furthermore, the young child's parents should be able to:

- a) have civil conversations together about the child;
- b) adequately trust that each will care for the child responsibly;
- c) contain any interpersonal conflict, especially on exchange of the child;
- d) talk to the child positively about the other parent.

4.3 The less cooperation equipment¹ parents bring to the task of effectively sharing the care of their young child, the more developmental equipment¹ the young child needs to independently manage the situation. **In Family Court populations**, when conflict is high and parents do not cooperate over the care of their children, regular overnight stays should commence once the young child's ability to communicate and tolerate separation is consolidated . usually from the age of three years.

4.4 In **Child protection populations**, when a parent experiences serious, chronic mental health and parenting difficulties that disorganize the baby's attachment, regular respite including overnight time in the care of a reliable other care-giver may be important. In these circumstances overnight separation from a primary care-giver may be protective but needs to be determined on a case-by-case basis.

5. Whenever undertaken, overnight time away from the primary parent is best with a parent/care-giver who is *already a source of security and comfort* to the baby or young child. In separated families, this level of security is optimally established and maintained over the first few years via regular, 2-3 times per week daytime care-giving based contact that supports the baby's routines. By the time the child is at least in part able to self-soothe, *consistently* turns to the second parent for comfort, and is less reliant on the primary attachment relationship to co-regulate his/her stress states, then the child is more likely to manage a well-supported shared overnight arrangement between cooperative parents.

6. Care should be taken not to fragment an infant's schedule, for example with long day care plus frequent visits with a second parent. When practical, and when the second parent is *already* a source of comfort and security to the infant, day-time care by the second parent should be prioritized above time spent in group day care.

7. Generally, in the third to fourth year, when developmental, parenting and practical conditions are supportive, regular overnight care with the second parent may be gradually phased in, at low frequencies, and always with monitoring of the child's response.

8. Finally, in all scenarios, priority should be given to the child's emotional security which should be carefully monitored and responded to sensitively and thoughtfully.

¹ McIntosh J & Smyth B (2012). Shared-time parenting and risk, an evidence based matrix. In: Kuehnle K & Drozd L. *Parenting Plan Evaluations: Applied Research for the Family Court*. Oxford University Press.