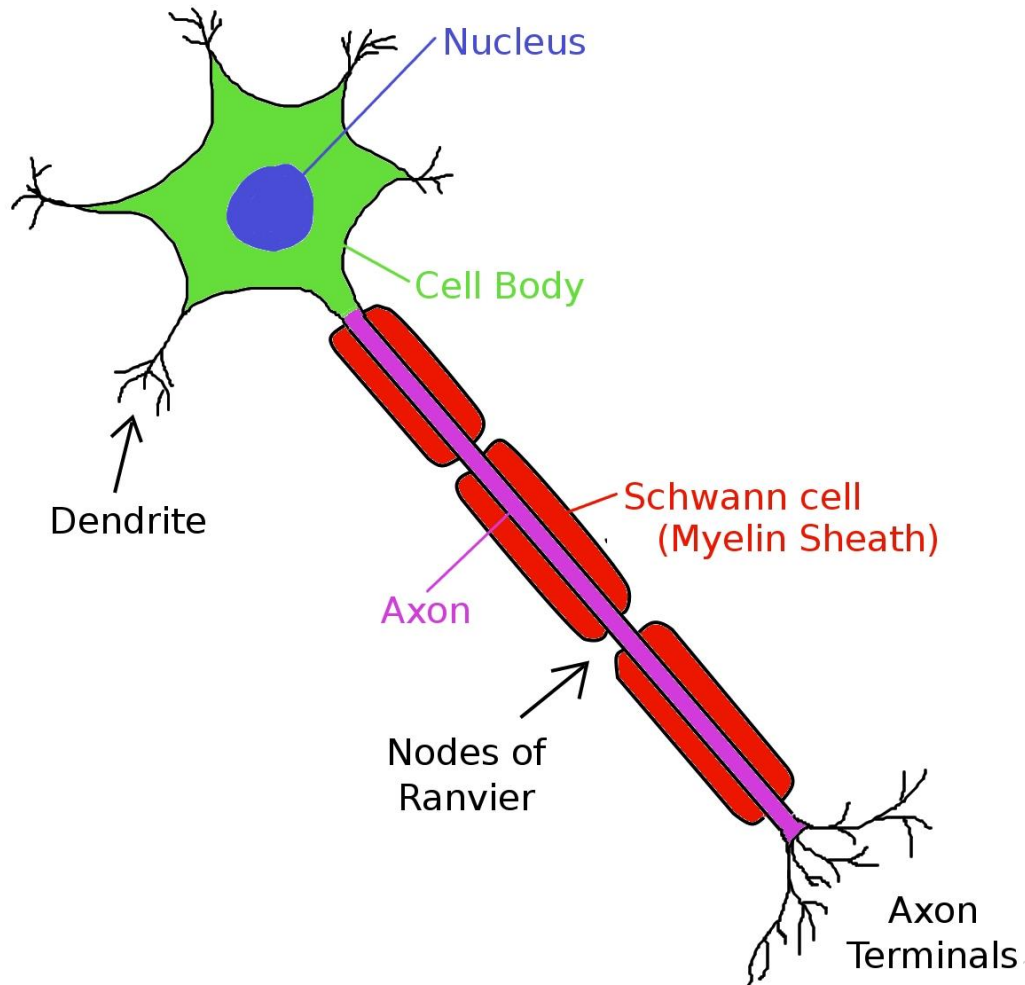


# Parenting by the unparented

The first 1000 days of a child's life is a period of enormous potential and also a period of enormous vulnerability.



From birth we are  
born with a  
lifetime supply of  
neurons



By three years of age synapses have formed based on early experiences



By fifteen years of age the mind is fine tuned to the world children inhabit



Genetics supply the  
basic plan for  
development  
providing the  
structure and means  
for the brain to  
develop





The environment  
has profound  
influence in shaping  
the capacity of the  
brain



Experience refers to the interaction the child will have with its environment





1. Stable and responsive environment and relationships
2. Safe and supportive physical environments and relationships
3. Appropriate nutrition



# A Dysfunctional Family

Any condition that interferes with healthy family functions



# Toxic stress

## **Positive**

Brief increases in heart rate,  
mild elevations in stress hormone levels.

## **Tolerable**

Serious, temporary stress responses,  
buffered by supportive relationships.

## **Toxic**

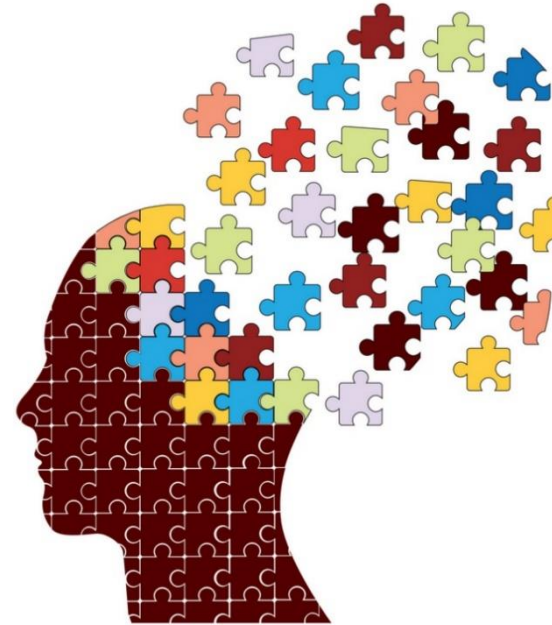
Prolonged activation of stress response systems  
in the absence of protective relationships.

In its most basic form we learn the skills  
and techniques of parenting from our  
parents



# Behaviours of the un or under parented

1. Guessing at normal behaviour
2. Difficulty following a project through
3. Lie
4. Judge themselves without mercy
5. Difficulty having fun
6. Take themselves very seriously
7. Overly sensitive
8. Overact to changes
9. Consistently seek approval and affirmation
10. Feel different from other
11. Super responsible or irresponsible or both
12. Extremely loyal
13. Impulsive
14. Seek approval or isolate when faced with conflict
15. Trust themselves more than others
16. Develop an attitude of independence
17. Need to be in control
18. Have difficulty hearing the positives.

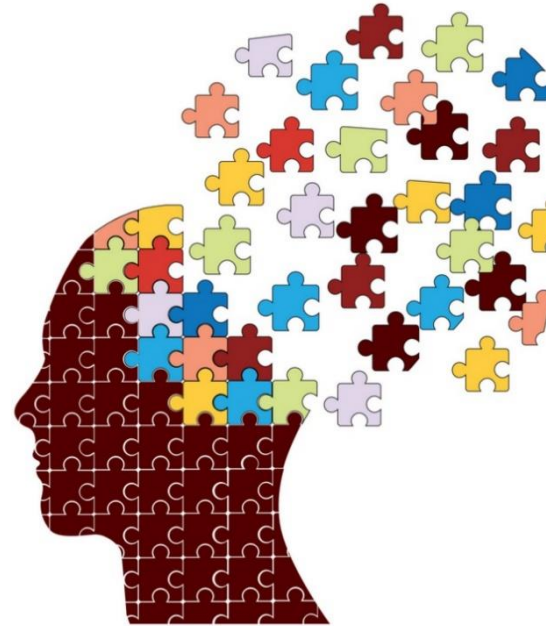


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# Behaviours of the un or under parented

- 19. Live in a black and white world
- 20. Poor self image
- 21. Compulsive behaviours and addiction
- 22. Compulsive need to be right
- 23. Suffer from denial
- 24. Have a fear of feeling
- 25. Depression
- 26. Fear of being themselves
- 27. Hypersensitive to needs of others
- 28. Repetitive relationship patterns
- 29. Inability to relax.



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# Baby M Case study

27 weeks gestation

Weight 970 gms

Spontaneous breathing at delivery

Intubated and given surfactant

Extubated to CPAP at six hours of age

Stable

Maternal history

20 year old primip

Smoker

Admitted smoking cannabis during pregnancy



- Shouting and sobbing
- Anxious
- Lack of trust initially
- Slowly began to trust small group of nurses



- Being a better mother than she had known
- Spent childhood living at several different relatives
- Mother was a known drug user
- N exposed to Marijuana at an early age



- 4 towns in 4 years
- On the move again back to Dunedin
- Baby's father not keen to be involved prior to birth
- Baby's father initially supportive after the birth





- Domestic violence arrest
- Bail conditions - no contact, no visitation
- N parenting alone
- Regrets
- Change of mind



- Struggling to know how to meet changing needs
- Lack of interaction
- Willing to learn
- Difficulty accepting praise
- Downplaying achievements



- Guess normal behaviours
- Harsh judge of herself
- Took herself seriously
- Sensitive
- Difficulty with relationships
- Loyal
- Over reactions and impulsiveness



# Case Two

Baby G  
24 week gestation  
Spontaneous labour  
Ventilated  
Surfactant



# Mother

- 19 years old
- Two other children not in her care
- Extensive psychiatric history
- Volatile relationship with her mother
- “kicked out of home” at 15
- Supported by friend
- Father not involved





- Not acknowledging she did not have custody of other children
- Plans on two more children by 25
- Giving advice to other parents
- Initially attentive
- Socialising with other mothers in unit
- Texting and playing games
- Lying about contact with CYPFS



- Custody obtained by CYPFS
- J not taking baby home
- Did not acknowledge decision initially
- Upbeat
- Baby became unwell
- Passed away within 24 hours

# What can we do?

- Provide a small team of nurses for each family
- Provide information to the team
- Non judgemental environment
- Consistent information
- Clear expectations
- Parenting classes
- Psychiatric liaison
- Mother and baby unit



# One final thought

