

# Let's Talk about Children

## Logbook

for working with families of  
children from birth to 12 months of age

Tytti Solantaus

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## Every family is different

Some families have a mum, dad, and children, while others have only one parent with children or have two mums or two dads. Children might also come from different backgrounds and live with grandparents, legal custodians or in out of home care.

In our logbooks, we use the word "caregiver" instead of "parent" to include all types of families. We have "the one caregiver" and "the other caregiver." Participants can of course choose what they want to be called during discussions. We use "N " as a placeholder name for the child being discussed, but we encourage using the actual name in the discussion and in the electronic logbook if possible.

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## Thank you!

Thank you to all the families who trusted me with their life stories. What I learned from you is translated into Let's Talk about Children for helping other families.

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Logbook Let's Talk about Children Network Meeting © Mika Niemelä and Tytti Solantaus

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## LETTER OF WELCOME TO CAREGIVERS

### Dear Caregiver/s,

**Congratulations on the arrival of your baby!** So small but so powerful. Having a conversation with a baby is like a wonderful dance - you smile and talk to them, and they respond by babbling and moving their arms and legs. Also, life can be challenging and exhausting. Recovering from pregnancy and delivery takes time and the baby keeps you up during the night. It is not uncommon for caregivers to experience low mood and mood swings.

In the middle of all this, you have been invited to discuss your child's wellbeing along the lines of the Let's Talk about Children (LTC) approach. Welcome to the discussion! Here is a brief overview of the approach, hopefully answering some of your questions about what is ahead.

### **What is LTC for?**

LTC was developed to help caregiver/s and other important people in the child's life to support children's wellbeing and development. The aim is to contribute to the child's a day-to day life that supports their wellbeing, learning and development.

### **How does this happen?**


The practical part first. LTC consists of two discussion sessions with a plan on what to do next and, if needed to carry out the plan, LTC Network Meeting. Network Meeting includes a gathering of the individuals that are identified by the caregiver/s to explore opportunities to support the child.

LTC discussion focuses on the child's day-to-day life as everyday interactions, encounters and routines are important to children and their wellbeing. However, life is not always easy. Every family has times of stress. Sometimes they are short-lived, sometimes they come to stay longer. Hardships take their toll and erode caregiver/s' energy and mental health resources. Caregiver/s might become impatient and irritable, maybe silent and withdrawn. Children react in their particular ways and parenting becomes more challenging. Everyday routines fall on the wayside, and when it happens, caregivers feel even worse.

**Every family has unique strengths**, which family members may not always recognize or give themselves credit for. Let's Talk About Children is a resource that helps families identify and nurture their strengths in the everyday life, and find solutions to difficult issues. The program is designed to support families and provide them with the tools they need to thrive.

It is time to start! I hope you have an interesting and inspiring discussion.

Warmly,



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## FIRST LTC SESSION

### Getting started

1. Welcome and introduce participants
2. A brief overview of the aims and what to expect during the discussion.
3. Confidentiality and how the discussion is documented in the family member's records, as needed
4. Before going on: How did you feel about coming here today? (caregiver/s and the worker)
5. A closer look at strengths and vulnerabilities:

**Strength:** An area of the family life and of child's life outside home (day care, school and leisure environment) that is progressing well, including everyday routines, time spent together and activities with friends and the community.

**Vulnerability:** An area of the family life and of child's life outside home (day care, school, leisure environment) that might cause problems if nothing is done, or is already a concern which would benefit from further attention and support.

Caregivers often have different experiences and points of view. Do not worry, it is fine. If you disagree about strengths and vulnerabilities, mark them both.

### **Two examples to be discussed with the caregivers**

A shy child in a lively and loud class room (or some other example)

The child is very lonely, left alone. The shyness is a vulnerability in this context. Action plan: to help the child integrate (caregivers and teacher), and to help the school mates learn to accept someone who is different in their group (teacher). Shyness could be a strength in another kind of environment.

A mother with alcohol problems takes the child to day care (or some other example).

The mother brings her child to the day care center in bad hangover and the staff looks down on her. Overall, the child is doing well. Strength: The mother brings the child does this risking her own reputation, because she is sure that it is better for the child to play with other children in day care than stay at home with an ill mother.

## The baby and the family

Caregivers have often different experiences and points of view. It is fine, do not worry about it. If caregivers disagree whether something is a strength or a vulnerability, mark both.

1. **Would you like to share a little bit about yourself and your role as a caregiver, as well as tell us about your family?**

To the worker: Would you like to share something about yourself?

2. **How would you describe your baby? What is N like?**

Replace N with the baby's name.

3. **Has N brought you any special moments of joy and delight? How about concerns or worries?**

The one caregiver

Strength ☐ Vulnerability ☐

4. The other caregiver

Strength ☐ Vulnerability ☐

5. **The baby's health and wellbeing** How is N's health and how is N developing? How about N's mood and energy?

Strength ☐ Vulnerability ☐

Examples of strengths: baby's development proceeds well; a baby is mostly satisfied and happy; interested in what is happening; smiles and is ready to socialize with others; can easily be soothed

Possible vulnerabilities: a baby looks often unhappy; cries a lot; is withdrawn; is quite demanding; difficult to soothe; there are developmental concerns

6. **Have you searched for help?**

Where \_\_\_\_\_

7. **N and sisters and brothers** It is not easy for older children to get a new baby in the family! How do they feel about N? Do they spend time together?

Strength ☐ Vulnerability ☐

8. **How are sisters and brothers doing?**

Their wellbeing, mood and behaviour

Strength ☐ Vulnerability ☐

Getting on at school / in a day care setting

Strength ☐ Vulnerability ☐

## Parenting and housework

### 1. What is it like to be a caregiver, a caregiver to N?

The one caregiver

Strength ☐ Vulnerability ☐

The other caregiver

Strength ☐ Vulnerability ☐

### 2. Caregiver and the baby together

How do you spend time with N? What kind of things you enjoy with N?

Is there something that is difficult?

The one caregiver

Strength ☐ Vulnerability ☐

The other caregiver

Strength ☐ Vulnerability ☐

Example of strengths: caregivers and the baby enjoy spending time together; nursing, cuddling, baby talk, playing first with fingers and toes and then with toys; caregivers admire the baby's achievements; when in stress, the baby finds comfort in the caregiver's lap

Possible vulnerabilities: caregivers lack energy to socialize and play with their baby; it makes them feel bad; a baby does not respond to caregivers' efforts; mutual joy is scarce: a baby spends time watching TV and alike; a baby is difficult to soothe

### 3. Stressful situations with the baby

As caregivers, you may encounter stressful situations, such as N refusing to eat or having crying spells at night

How do you typically handle these situations, and how do you navigate them with N?

The one caregiver

Strength ☐ Vulnerability ☐

The other caregiver

Strength ☐ Vulnerability ☐

Examples of strengths: Caregiver/s have found ways to calm the baby; caregiver/s have a support person who can take turns with the baby, especially at night; a support network and treatment services are helpful

Possible vulnerabilities: A baby is difficult to soothe; caregivers feel helpless, at times desperate; there is no support available; caregiver leaves the baby alone; the situation gets out of hand, there is shouting and rough behaviour; the treatment service is not efficient and does not include the family

If the situation elicits worries about psychological or physical neglect or abuse, discuss this with caregivers and mark it down on the page to develop an action plan for support

#### 4. Feeding the baby

Babies and caregivers can have varying experiences with feeding. It can be a pleasurable and enjoyable bonding experience for both, or it can be a real struggle, or anything in between

How is feeding generally going with N?

Strength ☐ Vulnerability ☐

#### 5. Sleeping and getting enough rest How do you and N sleep? Do you sleep enough?

N

Strength ☐ Vulnerability ☐

The one caregiver

Strength ☐ Vulnerability ☐

The other caregiver

Strength ☐ Vulnerability ☐

Examples of strengths: A baby sleeps longer periods at night with time; caregivers make different arrangements and they and the baby sleep enough

Possible vulnerabilities: Baby's sleep is frequently interrupted; the baby cries and has difficulties falling asleep again; pangs of colic interfere in sleeping; caregiver/s and the baby are not sleeping enough

#### 6. Household chores, child care and gainful employment

As parents, how do you handle all the tasks that come with caring for a new baby? Are you happy with how you divide up responsibilities between yourselves? If you're a single parent, do you have friends, extended family, or other sources to help you out?

Child care and parenting

Strength ☐ Vulnerability ☐

Household chores:

Strength ☐ Vulnerability ☐

- shopping, cooking, washing clothes, cleaning up etc.
- construction work at home, fixing the car etc.

Gainful employment

Strength ☐ Vulnerability ☐



## The baby in day care / substitute care (If N is does not attend day care, go to the next topic)

1. How does N like day care/substitute care? Strength ☐ Vulnerability ☐
2. Does N enjoy the company of other children? Strength ☐ Vulnerability ☐
3. How do the everyday routines go? Eating, sleeping, toileting, play, outdoor activities etc.  
Strength ☐ Vulnerability ☐
4. How do you see the relationships between N and the caregiver/s in day care?  
Is there someone N feels close to? Strength ☐ Vulnerability ☐
5. How is your collaboration with the caregivers in day care? Are they available for you? Do you discuss how N's Day has been? Strength ☐ Vulnerability ☐

## Caregiver/s' wellbeing and social life

1. How was the delivery and how have you recovered? Strength ☐ Vulnerability ☐
2. How would you describe your wellbeing and health?  
For example, are you experiencing any persistent stress reactions or mental health issues? Physical health problems? What do you think, do they have an impact on N and other children, and parenting?  
If the other caregiver is not present, discuss how they are doing, do they have any such issues that interfere in family life and parenting? (e.g., excessive work; exhaustion & burnout; health and mental health issues, substance use, and others)  
The one caregiver Strength ☐ Vulnerability ☐  
The other caregiver Strength ☐ Vulnerability ☐
3. **Other concerns.** It's possible that you may have concerns related to your other children, the health of extended family members, work-related issues, family stress, or other matters. Do you have any other concerns, and if so, how do you manage them? Is help needed from other services (e.g school, health and social services, income support services, etc)?  
The one caregiver Strength ☐ Vulnerability ☐  
The other caregiver Strength ☐ Vulnerability ☐



Examples of strengths: Caregiver/s are doing well; caregiver/s get support from their own network or support service during times that they are experiencing exhaustion or persistent mental health symptoms

Possible vulnerabilities: Caregivers' mental health is under considerable strain; symptoms of stress and mental health have been aggravated; both caregivers are overburdened; use of alcohol /drugs in the family has increased; increased relationship problems; there is no support available, treatment service does not involve families

#### 4. Communication and solving problematic issues

As caregivers, it's important to understand and support each other. By working together and fostering a shared understanding, we can better navigate difficulties that come our way. How do you feel about talking about potential signs of stress and mental health concerns? among caregivers or with your support person?

The one caregiver

Strength ☐ Vulnerability ☐

The other caregiver

Strength ☐ Vulnerability ☐

Examples of strengths: there is open discussion about difficulties, including stress reactions, possible mental health problems and issues concerning the baby; caregivers are able to negotiate and make plans; treatment services involve the whole family

Possible vulnerabilities: stress reactions and mental health issues as well as their consequences are hard/impossible to discuss openly; discussions often lead to blame and consequences are hard/impossible to discuss openly; discussions often lead to blame and discord; caregivers struggle alone; treatment services are not helpful and do not involve the family

5. **Couple relationship** There is one more in the family, a small one in size but intense in its presence. How has it been for you as a couple? Delight and joy in each other's company? Empathy and support for each other?

Strength ☐ Vulnerability ☐

#### 6. Social life, friends, relatives

Joy and shared moments

Strength ☐ Vulnerability ☐

Availability of practical support

Strength ☐ Vulnerability ☐

7. How would you describe the atmosphere at home in general?

Strength ☐ Vulnerability ☐

Examples of strengths: in spite of possible problems, the atmosphere is warm and caring

Possible vulnerabilities: the atmosphere is often quarrelsome, avoidant, stressful

8. Is there anything else you would like to talk about?

9. Home assignment, see below\*

10. Ending the meeting

How was this discussion for you? And for the worker?

Set up the next meeting.

Thank you!



## \*Home assignment

It is time to close this discussion and to give you two tasks to focus on at home.

**No.1** We would like to ask you to get acquainted with **Annex 1** and **Annex 2** or the booklet, **How Can I Help My Children?**

If the family is dealing with mental health problems, recommend or give them a copy of the booklet **How Can I Help My Children**. It has a more thorough presentation of the family situation and talking with children.

**Annex 1, SHARED UNDERSTANDING AND CO-OPERATION IN THE FAMILY** explains what shared understanding means. It describes how important it is for family members and their wellbeing to be able to make sense of what is happening in the family. As you will see, this is true also with children.

**Annex 2, TALKING ABOUT DIFFICULT ISSUES WITH YOUR CHILDREN** and booklet **How can I help my children?** give guidelines how to talk with children about issues that have an impact on their life but are difficult for everyone to talk about. These include anything from economic problems to a family member's mental health issues or a severe illness.

Although N is too small to talk, it might still be useful for you to get acquainted with the Annex and especially if you have older children. The Annex might also elicit thoughts about how to discuss difficult issues among caregivers.

**Annex 3, TALKING ABOUT DIFFICULT ISSUES WITH ONE'S CHILDREN** for practitioners and **"How can I help my children?"** give more detailed information about talking with children and will help you to discuss these issues with caregivers. They can also be given to caregivers.

**No 2.** As to the action plan, we'll discuss ways you can nurture your strengths and address vulnerabilities. To prepare for this, we ask that you select the strengths you'd like to focus on and identify any vulnerabilities you'd like to find support and solutions for. The list of **\*\*Things to pay attention to when making an LTC action plan** is helpful in putting the plan together. Please take your logbook with you when you come next time.

**You may involve your children in these discussions.** They may have helpful insights related to their own experiences and situations. Furthermore, if you like, you can invite N to join us in the second session to discuss these issues.



## **\*\*Things to pay attention to when making the LTC action plan**

Here are some important things to consider when creating an action plan for Let's Talk about Children (LTC). They refer to both caregivers and children, including young people.

**Note!** It is not expected that families manage all these situations, probably no family does. The list helps you to identify the strengths that you have and select issues that you find important to focus on in the action plan and family life.

1. Shared understanding and co-operation in the family
2. Caregivers discuss difficult things and make plans in a constructive manner
3. In case of problems affecting children, they are helped to make sense of what is happening and to cope with the situation
4. Parenting and housework are shared between the caregivers to their satisfaction.
5. Children have responsibilities in a way which is appropriate for their age and situation
6. Regular hours and sufficient rest for everyone in the family
7. Shared moments of joy between the spouses and with the whole family
8. Friends and relatives who bring joy and give practical help
9. Children feel loved and are cared for, and valued by the caregivers
10. Caregivers play and spend time with children
11. Children have interests and friends
12. Children are valued by teachers at day care/ kindergarten/school and by leaders/ coaches in activities /hobbies and appreciated in respective peer groups
13. Courage to ask for help even if it is difficult and feels shameful
14. Services that are available, understanding, get involved and provide help



## Second LTC session

1. Greet the participants: How have you been?
2. How was the previous LTC discussion for you? For the worker?  
Is there anything you would like to go back to?
3. Explain the aims and process of this session
4. How did you feel about the home assignment? Did you have time for it? If not, that is fine. Let's look at them now.
5. **Annex 1** Shared understanding and co-operation in the family.  
What do you think about this? How does this sound to you, does it make sense?

**Explain what shared understanding is about and use the example to clarify shared understanding. You can also use your own examples.**

### **Annex 2** a booklet **How can I help my children?**

What do you think about talking to children about those difficult issues? How talking with each other?

### **Annex 2 and “How can I help my children” for worker**

These include information about mental health issues in a family and also serve as guidelines for discussing these issues with caregivers. You can also study the booklet together with caregivers and for instance, choose issues especially relevant for them.

Remember never to put pressure on caregivers to talk about something they are ambivalent about or resist.

If the caregivers are expecting or have a baby, they might feel that Annex 2 is not of interest for them at this point and the discussion can be omitted. However, follow their lead as open discussion is an issue also between the spouses and with possible older children.

Proceed according to the Annex. Discuss the contents and examples from different angles, and add your own examples

Be prepared to respond to questions concerning children's age, type of problem to be told (from low mood to suicide attempt), who tells, how the process continues from that, etc.

If the caregivers have difficulties discussing distress and mental health issues, consider adding a session in the action plan for them to talk about such issues with you and each other.

**6. How was this discussion for you? And the worker?**

The aim is to approach these issues from different angles. Remember that you are not the one who 'knows' and tells what family members should do. Let family members decide. At best, this is a learning period for both you and the family.

**7. Did you have a chance to look at the strengths and vulnerabilities identified in the first session?**

If not, no problem. We can do it now and continue the discussion on that basis

What kind of thoughts came up/ come up regarding your strengths and vulnerabilities? Any surprises, any disappointments, any questions?



### Drawing up the action plan

1. Which strengths did you choose to make a plan for? Brainstorm options of what to do, write down what is decided



2. Which vulnerabilities did you choose to make a plan for? Brainstorm options of what to do, write down what is decided.



- If no further activity is needed, proceed to 4. Ending the meeting
- If further help is needed, proceed to 3 Planning LTC Network Meeting
- If further help is needed, but Network Meeting is not an option, information about the needed services and how to reach them is given

### 3. Planning LTC Network Meeting

- a) Explain the purpose of meeting
- b) Explain how the meeting is set up
- c) Caregivers agree on the strengths and vulnerabilities and possible other topics for the action plan.



- d) Agree topics family does not wish to discuss
- e) Who is to be invited and by whom?

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It would be fruitful for the family to talk with children at home about strengths and vulnerabilities in situations which involve them. Children might have ideas that are important to be included in the action plan.

- f) Set a date for the meeting \_\_\_\_\_

#### 4. Ending this session and the LTC process

- a. How was this session and the LTC process for you? For the worker?  
Has it been helpful for you? In what way?  
Was there something problematic that you would like to talk about?
- b. If the you continue to use the service, you are welcome to talk about the family situation and children whenever you like. The staff is delighted to hear good news and ready to provide support when needed. Agree on whether the worker may initiate a discussion about the children also later on.

Thank you!





1. **Begin by warmly welcoming everyone making introductions.**
2. **The leader of the meeting** describes the outline of the meeting and how it has been prepared.
3. **Caregiver/s or the worker, as agreed**, describe the reasons for the meeting and areas of action, i.e., the strengths and vulnerabilities.
4. **Discussion among caregivers and invited participants**
  - a. Clarifying questions and points of view
  - b. Ideas on how to proceed on each item
  - c. Turn the ideas into concrete actions that family members agree on
5. **Write a memorandum\*** stating the courses of action. Use a flip chart or project it on a wall. Service workers are usually at the top of the list, followed by the family's social network and the family. This way, the family can plan their own actions based on the overall effort. If called for, the order can be changed.

All participants are given a copy of the memorandum at the end of the meeting, if family members agree.

6. **Set up the follow-up meeting** and agree on who will be there. \*\*

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### 7. Ending Network Meeting.

How was this meeting for the participants, especially family members?

**To family members: Did you feel that you were understood? Do you think you received the help you needed?**

The leader of the meeting makes a summary, hands the memorandum to the participants as agreed, thanks the participants and declares the meeting closed.

\*\* At least one follow-up meeting is recommended to let the involved parties note what has been achieved and whether a new meeting is called for. The time between meetings and their number depend on the overall situation. The follow-up meeting begins with family members giving a short outline of the current situation and whether the original plan was put into action. If a deed was not carried out, the responsible person describes why not and what was done instead. A discussion follows on what was learned for the future while implementing the plan. If further action is called for, a new memorandum is written stating what courses of action should continue and what else is needed.

**\*Format the memorandum**

Network meeting \_\_\_\_\_ (date)

Topics (For example, 3)	Topic 1: Topic 2: Topic 3:	
Participants	What specific action, when (For example, date, time of day)	Follow-up meeting date



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