A Deeper Dive into CHEERS Observations
Conceptual Paper

CHEERS is a tool that we use to observe for the interactions between parents and their infants, toddlers, and young children. While each of the CHEERS domains is observed separately, the overall observation of parent-child interactions is integrated. This integration is similar to child development observations. While we can state that a particular activity is designed to support fine motor development, there are probably aspects of gross motor, language, self-help, cognitive, and social-emotional development present as well. Observing the individual CHEERS domains and how those interact together can increase knowledge about how to support a parent to increase their nurturing responses in a strength-based way.

Considering the CHEERS domains on each home visit trains our minds to see interactions from a relationship perspective and helps us to become adept observers. While these interactions are important, it is ultimately the emerging attachment between the child and parent that we want to promote and reinforce, intervening when there are signs that secure attachment might be compromised. In this paper, we are taking a deeper dive in connecting CHEERS to those critical attachment milestones.

When the parent-child interaction domains in CHEERS are integrated, they result in the formation of the parent-child relationship. It is the parent-child relationship, or attachment style, that creates the *internal working model* (John Bowlby) for the developing child for the rest of his life. Is the world safe or scary? Are people supportive or hurtful? This *internal working model* impacts each and every one of us every day of our lives. The connection between CHEERS and attachment milestones is critical for HFA's success in creating an environment in which parents can make changes to become the parents they want to be, but never had. The child's attachment milestones will be viewed through the overall CHEERS observations, rather than the individual domains.

While CHEERS does focus on observing the parent-child dyad (child, young toddler/child), attachment milestones are typically determined by observing the behaviors of the developing child. We are going to provide examples of both the strengths and challenges inherent within our observations, and then share the key attachment milestones for developing children during the first few years of life – the true goal of our model. We need to support the capacity of the parent to serve as a secure base and safe haven for their developing child both now and through the future. Please note that in each of the CHEERS, we are using the term "child" for each domain since our model serves families during the first three to five years of a child's life. That said, CHEERS does apply to all ages, even adults – the types of cues and responses may change, but the construct applies for life.

And finally, HFA does have 3 documentation requirements for CHEERS observations:

- 3 parts (what child does, how parent responds, and how child responds),
- Frequency (overall throughout the visit), and
- All domains of CHEERS observations must be documented post-natally.

CHEERS Observations

Cues: Observe for any behaviors that the child/young child uses to communicate, e.g., eyes widened, smiles, coos (behaviors that indicate "go" signals); or cries, fusses, arches back, looks away, puts hand out, spits up, has a bowel movement (behaviors that indicate "stop" signals). Cues are a child's way to communicate to parents when they need some help with regulation. Childs cannot exist without someone to regulate their needs so are 100% reliant on their parents' capacity to meet those needs (cold, hungry, scared, etc.). This is co-regulation, something we all seek out throughout our lives when we are dysregulated.

Look for the parent to:	*Be concerned if the parent:*
Respond sensitively & quickly	Does not respond to child
Try to figure out what child needs	Yells or speaks crossly to child
Speak to child with respect	Is intrusive or frightening to child
Use consistent sensitive responses	Is inconsistent with responses (some sensitive and some insensitive)

Holding: Consider the quality of the physical touch/holding of the child by the parent. Is it slow, soft, molding into to each other, and cuddly, with both the parent & child feeling the pleasure of connection with each other? Is it rough or abrupt, with child being held at a distance? It is important to remember that the skin is not only the largest organ of the body, it is also the earliest organ formed, developing in the womb very early in pregnancy. There are 2,500 nerve receptors in just 2 centimeters of skin on the fingertips alone. Soft pressure on the skin in a soothing and comforting way changes the neurobiochemical dynamics, including increasing serotonin (neurotransmitter for happiness and well–being) and oxytocin (the love hormone), and positively impacts changes in DNA & the human genome (the expression of genes), which leads ultimately to better health outcomes. It is not surprising that one of the first biological indicators we see in very young infants is the reflex to *grasp* an adult's finger. When positive touch is rough or intrusive, cortical levels are increased and often stay in heightened states without co-regulation from a sensitive and nurturing caregiver.

Look for the parent to:	Be concerned if the parent:
Hold child close and "mold" together with the child	Does not hold the child
Touch the child warmly, gently, and in a massaging manner that creates comfort	Touches the child roughly, at a distance, in a manner that creates discomfort
Create a safe haven-secure base, so when child is upset, he/she looks for parent for calming	Touches the child in an intrusive or frightening manner

Empathy: Observe for indications that the parent truly knows or *feels* what the child's emotions might be and how they hold the child emotionally. Empathy is based on an accurate interpretation of the child's state of emotion. Are the parents emotionally available to their child? Emotional availability is defined as the parent's capacity to share a range of emotional experiences with the child and to be able to label his/her own feelings as well as the child's inferred emotional state. Can the child use the parent when he is most upset? How does this happen? How quickly does child respond? What do you see?

Look for the parent to:	Be concerned if the parent:
Label one's own internal feelings as well as child's feelings	Has limited emotional vocabulary for self and for child
Respond quickly to the child's physical needs	Allows child to fuss or cry when hungry, cold, wet, or otherwise physically dysregulated.
Share a range of emotional experiences with child	Does not recognize when child is experiencing feelings of distress
Accurately tell the child what he likes and does not like.	Does not notice what child likes or dislikes
Check in to see if child is OK when he falls or is distressed (assist in emotion management)	Does not respond when child is distressed?

Expression: Language acquisition and verbal connections between parents and babies has a significant impact on attachment, social emotional learning, and school readiness, critical for future success. Observe for the tone and quality of what the parent says to the child. Are they having a conversation? Babies do not learn new words or language by just hearing them – conversations must be shared within the context of social interaction and joint attention. Here are three distinct styles of communication that are strong indicators for future interaction.

Functional Expression is when the parent only gives directions or commands (i.e., "Stop crying! I said, stop crying", "Pick up your toys", "Come here", "Let's go!").

Elaborative Expression is when the parent explains in detail to the child what is going on. "I know you are upset, you need your diaper changed. You will feel better soon", or "Tomorrow when you wake up, we will get ready to go to the zoo. You will eat your breakfast and then we will go for a ride in the car", etc.   This also includes labeling objects. Children who are given this type of explanation for all of their routine events do better in school.

Conversations: Parent and child share social referencing and "have a conversation". There is a connected conversation between the dyad, with each contributing equally, and expanding on the conversation. This is critical for social-emotional learning and is strongly connected to school readiness.

Look for the parent to:	*Be concerned if the parent:*
Have a conversation with the child	Does not speak to child
Label and expand on child's activities, repeat what child says and increase the context of the communication	Only uses functional expression, telling child what to do
Share authentic joint attention with the child – both are "talking" about the same content.	Encourages the child to learn language from child videos or TV
Read to the child every day, even in the first few months	Does not recognize the importance of reading to child, talking to child about what is going on in child's world, etc.

Rhythm & Reciprocity:

Rhythm and reciprocity between a child and her parent can often be considered as a dance or a weaving and flowing of interactions as the the parent and the child take turns, each expanding the interaction and finding pleasure in the new discovery of where this interaction takes them. There are four considerations related to rhythm & reciprocity. These include:

- Timing: How long does it take for the parent to respond to child/child?
- Appropriateness: Does the parent respond accurately to the child's cues (e.g., if the child is making sucking motions do they feed the child or do they bathe them instead?),
- Reciprocity: Does the parent give the child a turn and/or time to respond? Do they keep shaking the rattle in the child's face or do they shake it and then wait, giving the child a chance to look at the toy? Do parents and babies expand the play to keep it interesting?
- Consistently and reliability: Does the parent establish regular routines that fit with the child's individual differences or does the parent's needs override the needs of the infant/young child?

Look for the parent to:	Be concerned if the parent:
Follow the child's lead in choosing activities and toys	Initiates the interactions, expecting child to follow
Expand the interaction by adding new elements to the activity	Continues to shake the rattle when child looks away
Dance with the child – there is an ebb & flow to parent-child interactions	Misses opportunities for mutual sharing of attention

Smiles: Observe for smiles and laughter between the parent and their child. Is there a sense of joy? It is important to connect to your own feelings of what you observe. How are you feeling? How you are feeling may directly connect to how the child is feeling (parallel process). Is there mutual positive shared attention between the parent and the young child?

Look for the parent to:	Be concerned if the parent:
Smile frequently at child and call child affectionate terms	Frowns at child and calls child "it" or other judgmental names
Share positive interactions parent has had with child over the past week	Gets angry or frustrated with child
Smile when talking about child	Pays little attention to child

CHEERS is all of those daily interactions that ultimately result in attachment relationships.

What are the attachment milestones? What behaviors might be observed in securely attached infants and young children?

Attachment can be observed when the child returns to the parent to touch base (either visually or physically). They may lean or sit on the parent, or show the parent something before they go back to play. Observe for parent(s) acknowledging the child's presence and/or their bids for comfort (see attachment milestones below). This is known as the *Circle of Security*.

What happens if these behaviors are not present?

If things did not go well and the parent was intrusive, or available some times but unavailable other times, or vacillating between available and intrusive, then we might see a child who:

- Hesitates to explore the environment
- Clings to caregiver
- Is difficult to comfort
- Turns to her parent and then pushes away, however distress would not be relieved.

If the parent was consistently unavailable or hostile, dismissing the child's needs during the first 12 months, we might see a child who:

- Explores the world freely, but
- Does not turn to her parent when distressed

If the parent has been frightening, even if much of the time the parent has been sensitive, then you might see a child who:

- Does not have any strategy for getting comfort when distressed
- Wants to approach the parent, but then remembers that the parent is scary so seems confused for how to manage the distress.

Key points to consider: How does the child explore the environment and how does the child use the caregiver – especially when distressed?

Was the parent present, emotionally available, and able to assist the child in managing emotions (co-regulation)?

Developmental attachment milestones:

0 – 3 months	Regulation – both physical & emotional will be the same. Meeting the infant's physical needs. This is known as homeostasis
3 – 6 months	Regulation of arousal – when infant is scared, hurt, or sick, how does parent help the child cope and regulate? How quickly does the child calm down?
3 – 10 months	Potency and intentional communication – How does the child signal the parent to get a response, or make things happen? Does the child feel potent in his ability to be heard or impotent in that parent does not respond? Are activities between child and parent attuned? Do parents sensitively build on child's responses during joint play?
– 18 months	Attachment, exploration, and mastery – do babies interact with their environment freely or do they stick close to their parent? Do they demonstrate frequent touchbacks to parents while exploring? Do parents celebrate child's accomplishments and encourage more (safe base-secure haven behavior)? Does child continue to work at solving a problem or playing with a toy when figuring out how that toy works?
7 – 18 months	Intersubjectivity – Are parents and babies able to share affect? When child is smiling and laughing, is parent reciprocal? Is child able to socially reference interactions (e.g., if parent seems cautious or worried, does child sense the same?). Does child try to get parent to look at what she is looking at? Consider the *still face* videos.
12 – 36 months	Self assertion & individuation – Does the child let the parent know when she wants something different than the parent? Is there negotiation between parent & child?
18 – 36 months	Peer affiliation – does toddler/child connect with other children of a similar age? Do they interact together, negotiate the direction of the play? Does child recognize that peers can be a social partner?