

## Honoring IDA Member Denise Godfrey-Pinn

Members of IDA are from many diverse fields and expertise. What brings us together is our passion for promoting policies and practices that result in a supportive infrastructure for our very young children with disabilities and their families. IDA is honored to introduce Denise Godfrey-Pinn and the sharing of her incredible journey. Denise shares IDA's mission of meeting the needs of young children and the best practices to promote their well-being.

### Occupation: Clinical Psychologist

Denise is a clinical psychologist, psychology consultant, and Mental Health Liaison for Harbor Regional Center and is endorsed as an Infant, Family and Early Childhood Mental Health Specialist. Currently, her role is to consult with the early childhood service coordinators to identify their clients' mental health needs and mental health resources in the community. She has many other responsibilities, such as participating in community mental health collaboratives, assisting with providing previously inaccessible services to dually diagnosed HRC clients, and providing training in dual diagnosis to service coordinators and community partners.

### Denise's Journey to Early Intervention

Denise's interest in psychology began at 11 years old, watching the 1962 movie *David and Lisa*. Denise shared she was fascinated by the beauty of the friendship between David and Lisa and the special school they attended. David was very bright with an obsessive-compulsive disorder (understood much later) and could not tolerate human touch. Lisa was artistic and only spoke in rhymes (later learning she had schizophrenia). They were treated by what Denise thought was their teacher. She was unsure if he was a teacher and made up that he was an "educational psychologist." Denise decided at 11 years old that was what she wanted to do as her career - to work with children who have emotional disorders and are gifted. This was when mental health was not discussed, and Denise's journey began.

Denise started her college career majoring in child development training to be a 'nursery' schoolteacher (before we called it preschool or early childhood). As a student teacher, Denise decided to create her own Rorschach (ink blot) test for her final project and administer it to her first-grade students. When Denise completed her project, her academic advisor met with Denise encouraging her to focus on psychology as a major, and she decided that was the correct advice. This teaching college was in Illinois. Denise packed her bags and headed home to New York, declaring psychology as a major and continuing with early childhood education as a minor.

### Historical Perspective

Denise provided a rich historical perspective on this period and how much has changed since the 1970s. Denise spoke about learning about childhood schizophrenia, early infantile autism, and the "idiot savant." Most autism research focused on white, middle-class families and their male children. The accepted theory at the time and **since considered inaccurate** was that "cold mother" syndrome caused autism. Denise talked about how this irrationality made her move

away from studying autism. She discussed how so much has changed since these early theories and our understanding that autism is a neurodevelopmental disorder, not a response to the environment.

Denise discussed other theories found to be false. It was not believed that parents would intentionally hurt their child, not to mention how as a society, we would not sexually abuse a child. The term child abuse was new as it was just beginning to have recognition with minimal acceptance. In 1972, it was named Battered Child Syndrome. She talked about theories about non-whites being inherently less intelligent than whites. Yet, Denise spoke about this was also a time of social change. The release of individuals from “psychiatric asylums” and developmental centers across the country began. Community programs began to provide needed support services to persons with developmental disabilities, and community mental health was in its early stages.

### **Following Graduation**

Following graduation, Denise entered a doctoral program in clinical psychology at the University of Massachusetts, Amherst, as a Clinical Trainee, funded by the Bureau of Education for the Handicapped maintaining her interest in young children and creating a subspecialty in children under five.

Denise began her research by wondering what happened to babies considered rejected and neglected by their mothers. While in her third year, Denise received a prestigious Scholar-in-Residence award to work with Dr. C. Henry Kempe at the University of Colorado Medical Center. The fellowship chose ten people, each from a different discipline to learn and develop the skills for an interdisciplinary approach to addressing child abuse. The rigorous program involved working with different systems recognizing that it is not just mental health that gets involved in addressing child abuse. It is also the legal, medical, social service, child welfare, educational, and criminal justice systems. During this residency, Denise received her primary clinical training from Dr. Kempe's wife, Ruth, a renowned child psychiatrist at the University of Colorado. Denise expressed anger and frustration with how parents could inflict such significant abuse on their children. Denise talked about a powerful lesson from Dr. Kempe about working with parents who have physical or emotional disorders themselves and their children. Dr. Kempe said to her, "When you feel this anger and frustration, I want you to close your eyes and hear a child speaking to you, and that is how you deal with it." Denise said Dr. Kempe's advice carries with her today in always thinking of children who have experienced such trauma and recognizing that many of their parents also have histories of abuse and neglect.

An important module of the residency was for fellows to research how different communities addressed child abuse. Denise was sent to California, specifically Los Angeles, to address how the early leaders in Los Angeles identified and helped children experiencing child abuse and trauma. She met with the early leaders who contributed to how to interview young children and the training needs for responders in child abuse.

Following this residency, Denise planned to return to the University of Colorado to complete her clinical internship requirement with Dr. Kempe. Unfortunately, Dr. Kempe experienced a massive stroke. Denise talked about how it was devastating to her as he was a mentor and the uncertainty she experienced about how she would receive her clinical therapy training. Life's unfortunate events sometimes lead to unexpected new beginnings. Denise received a call from the Department of Child Psychiatry at Harbor-UCLA Medical Center. The Department was developing a new clinical pre-doctoral internship program and inviting Denise to join as their first intern. Dr. Roland Summit, a child psychiatrist whom she met while at her residency at Harbor-UCLA Medical Center, was an emerging leader in child sexual abuse. He offered her the opportunity to work with him on her dissertation research. Another opportunity was when Denise was permitted to train with their Child Psychiatry Fellows.

From there, Denise began her 35+ years of working with young children experiencing child and sexual abuse. While working on her dissertation, Denise held the position of the first Child Abuse Consultant for the Coastal Mental Health Region. After her clinical internship and completing her doctoral research, Denise directed a research program at Drew Medical Center with Dr. Kerry English exploring child sexual abuse in the Black community.

Denise's prolific career has included a child forensic practice, conducting comprehensive evaluations for Dependency Court and custody mediations. Denise has trained those in the legal system, law enforcement, pediatricians, and others in the professional community on how to address the unique needs of child physical and sexual abuse in very young children. Denise was a member of the original team at the Los Angeles County Child Sexual Abuse Crisis Center that developed protocols and standards of practice in evaluating and treating young children experiencing abuse. Her career goals and interest in infants and their families have led her to positions in child abandonment, prenatal drug and alcohol exposure, and pediatric HIV and AIDS. Denise continues to advocate for improved coordination and multidisciplinary practices among professionals and agencies. This has brought her full circle to the Regional Center and her work improving coordinated services for families with young children with disabilities.

### **What led Denise to IDA and Advice to IDA**

Denise shared she had been a follower of IDA for years before becoming a member. At the Regional Center, Denise's role is to help service coordinators identify their clients' and families' mental health needs and then identify and access those resources. Initially, Denise talked about how her responsibilities primarily focused on the adult and TAY (transitional adolescent youth) populations. However, she wanted to ensure that she stayed connected and did not lose touch with her lifetime professional interest in babies and young children. Denise maintained her involvement with community mental health and the needs of the birth through five population. In 2017, she was awarded a three-year grant from the California Department of Developmental Services to provide cross-disciplinary training to service providers and parents on the developmental needs of young children. That is when she reached out to IDA to help promote the Harbor Regional Center *Side by Side: Enriching Children's Lives Through Parent-Provider Partnerships*. The grant brought together nationally and internationally recognized experts in

infant and early childhood mental health. Denise shared that IDA provides her with an important connection through the training, Saturday Morning Chats, and other activities.

Denise shared that she believes there is always something more to learn and emphatically shared, "keep the wonderful training opportunities." Denise spoke about how IDA has always promoted the whole family, and she appreciates how the IDA trainings are collaborative and not focused on one discipline. Denise spoke about her appreciation of IDA, paying attention to the statewide issues impacting the early intervention field. While the Department of Developmental Services may pass down this information, IDA ensures we hear all perspectives and provides information on what we need to do. She passes the training on to her colleagues at Harbor Regional Center, who, as an organization, became a member this past year. Denise spoke about the Saturday Morning Chat, talking about the CDC milestone changes and how IDA was the first organization to inform and discuss the changes.

### **Advice for those interested in studying Clinical Psychology and Working in Early Intervention**

Denise shared that her training in early childhood education was invaluable in understanding the expectations for children at their developmental stages and the way they learn. In exploring graduate programs in clinical psychology, it is important to ensure that the programs offer a broad theoretical orientation and the opportunity for exposure to these different theories. Most importantly, Denise said, "go where you are going to be encouraged to learn... make sure you understand the program's specific focus." Understanding how to interact with people, network, and support collaborative efforts is critical for clinical psychologists and early intervention professionals.

### **Perspectives on Early Intervention in California**

Denise shared that the early intervention field must understand how social-emotional development is critical to the child and the family. Denise said she would like to see more of an emphasis on infant mental health. Denise wants all professionals, whether psychologists or speech and language therapists, to receive training in the critical importance of relationships, early mental health, and social-emotional development. This training would help professionals move away from focusing only on the children's developmental delays. Denise said that parents must have a chance to receive the same information as professionals so they can make informed choices. Denise shared her earliest training was looking at children within the families and prioritizing needs across disciplines. She would like to see the various professionals involved with a child sit with parents in a collaborative and coordinated delivery of services. "Our policies in the system need to change to encourage and promote relationships; only then will our children and families develop to their fullest potential."