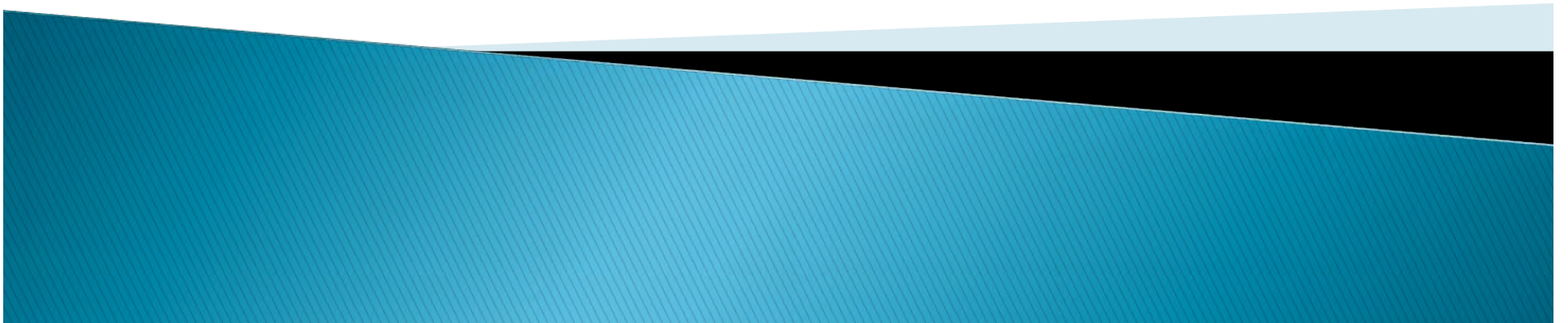


# When Moods Get Derailed

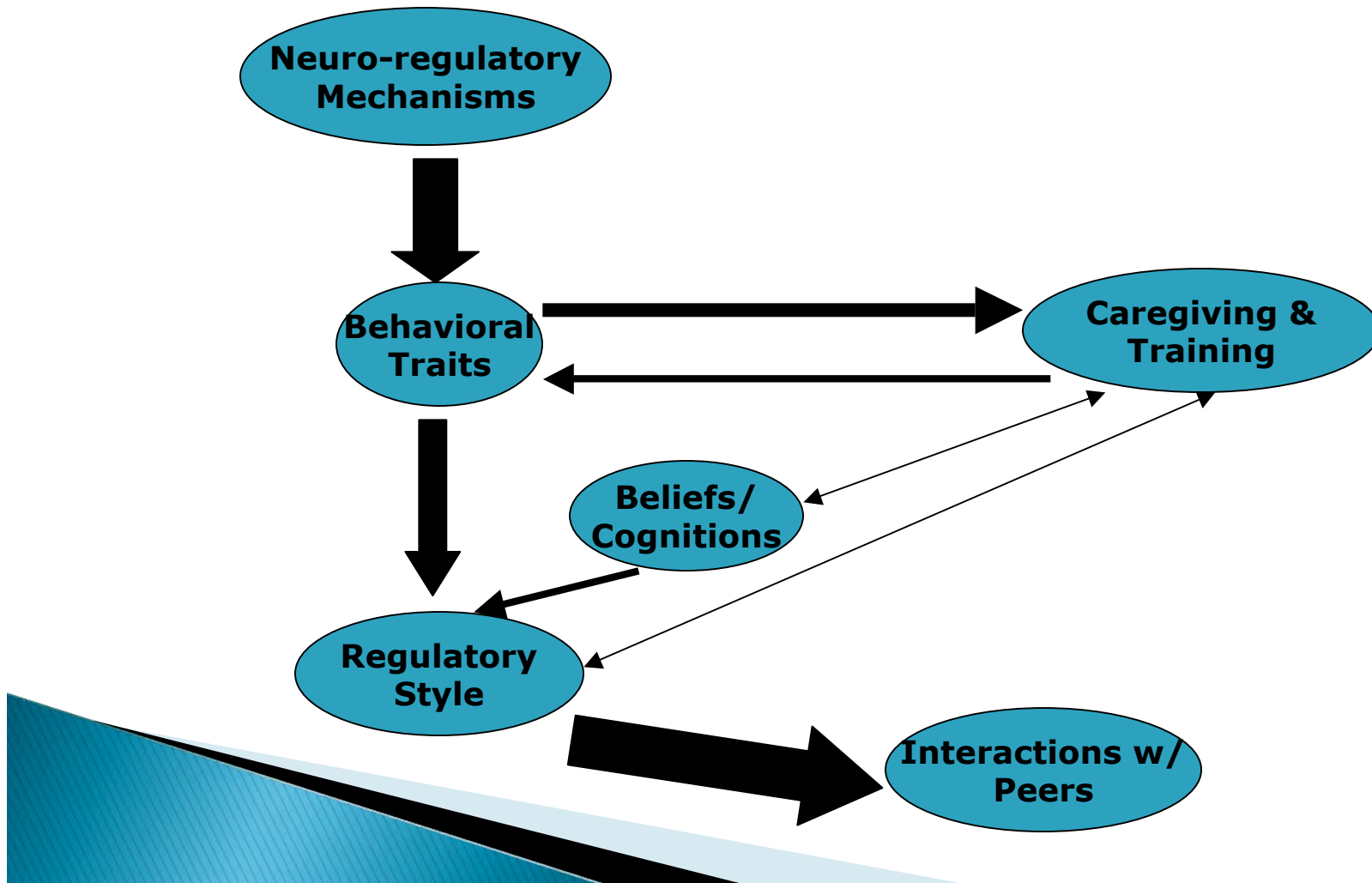
Ira Glovinsky, Ph.D.  
Auburn, Maine 2011



# How Do Moods Develop: A Model

▶ **INTERNAL COMPONENTS**

**EXTERNAL COMPONENTS**



# Characteristics of Moods

- ▶ **B. Moods are...**

- ▶ 1. **Sticky**- once an infant (and probably an adult) is in a mood, it is hard to move the infant out of it. When an infant gets out of a mood, she readily falls back into it!

- ▶ 2. There is a receptive process bias- the infant's response to affective input is based on that bias.

- ▶ a. "She woke up in a cranky mood, and she wouldn't get out of it, even when she smiled at her teddy. She just went back to fussing (Tronick, 2007, p.449)."

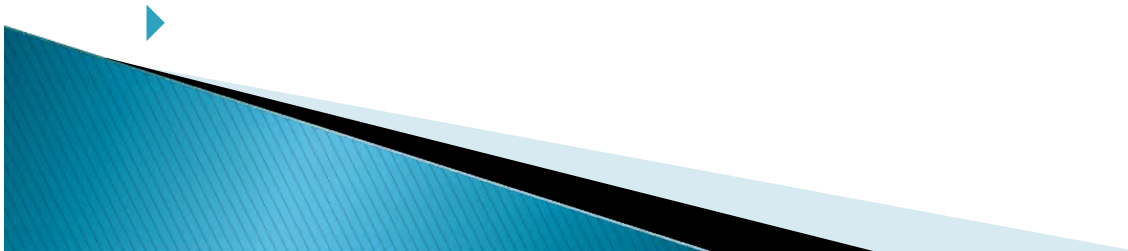
- ▶

- ▶ b. "She looked OK, not really happy, and then—bang!— she was screaming. I had no clue why. I sang her favorite song and it even made her worse. Everything annoyed her (Tronick, 2007, p.449)."



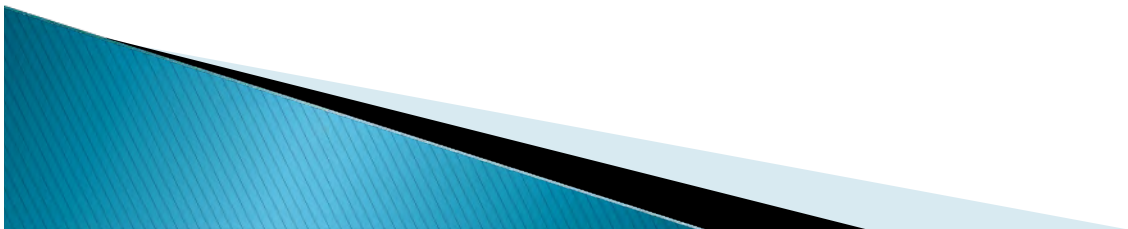
# Characteristics of Moods

- ▶ **3. Moods have a momentum- they continue to be manifest even when the triggering event is no longer there. Outside input may have little to do with maintaining a mood state. Moods just “go on and on.”**
- ▶ **a. She smiled to the rabbit and just kept smiling even when it was gone (Tronick, 2007, p.450.”)**



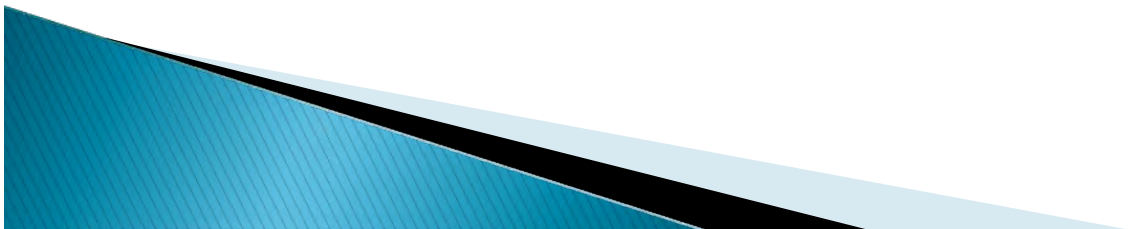
# Characteristics of Moods

- ▶ **4. Moods “ebb and flow” over the course of the day. “He really fussed for awhile, then he seemed to be better, but then he just exploded in rage!”**
- ▶ **5. Moods grow out of the recurring affective experiences that the child has. However, a child’s temperament may strongly influence mood states (e.g., negative affectivity).**
- ▶ **6. During social exchanges, different affective states are fitted to specific emotional input that exceeds an activation threshold. There are contingencies between infant affective expressions and maternal expressed affect.**



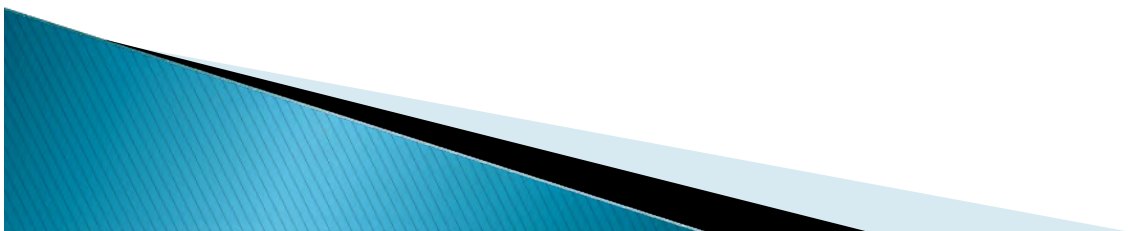
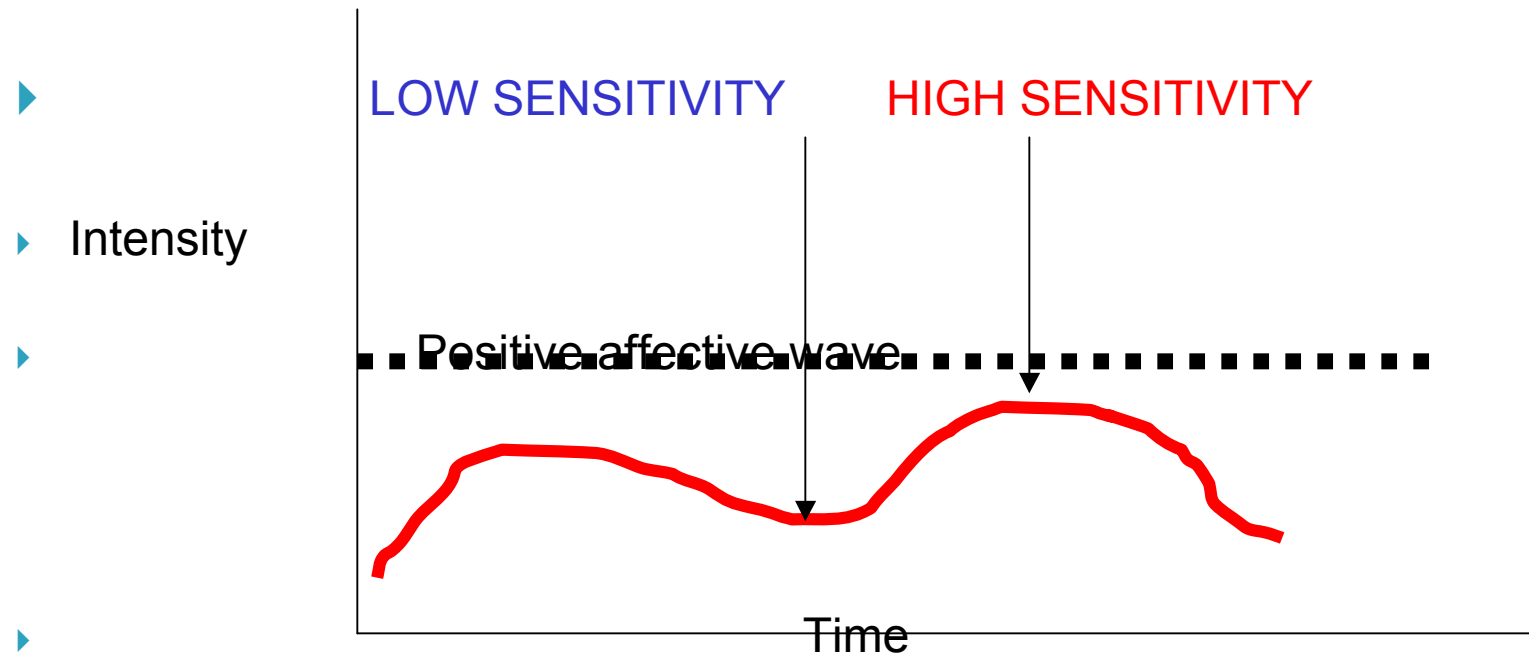
# A Revised Model of Moods

- ▶ 1. Moods are controlled in part by self-organized control processes;
- ▶ 2. Affective input induces as well as stabilizes changes in the settings of the affective control processes.
- ▶ 3. ***“Moods arise out of the interaction of external affective input from others and the infant’s internal self-organized affective processes, but then develop their own stability (Tronick, 2007, p.451).”***

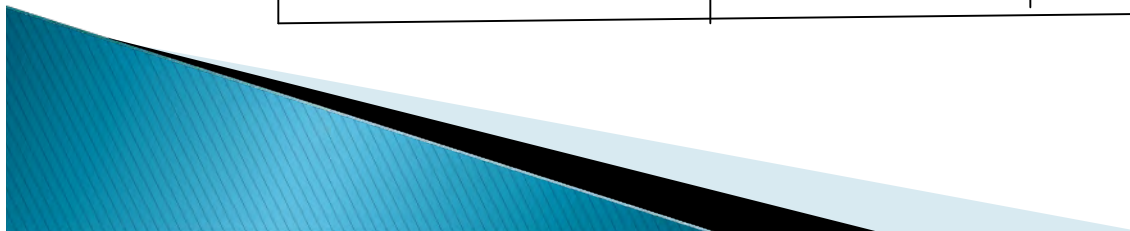
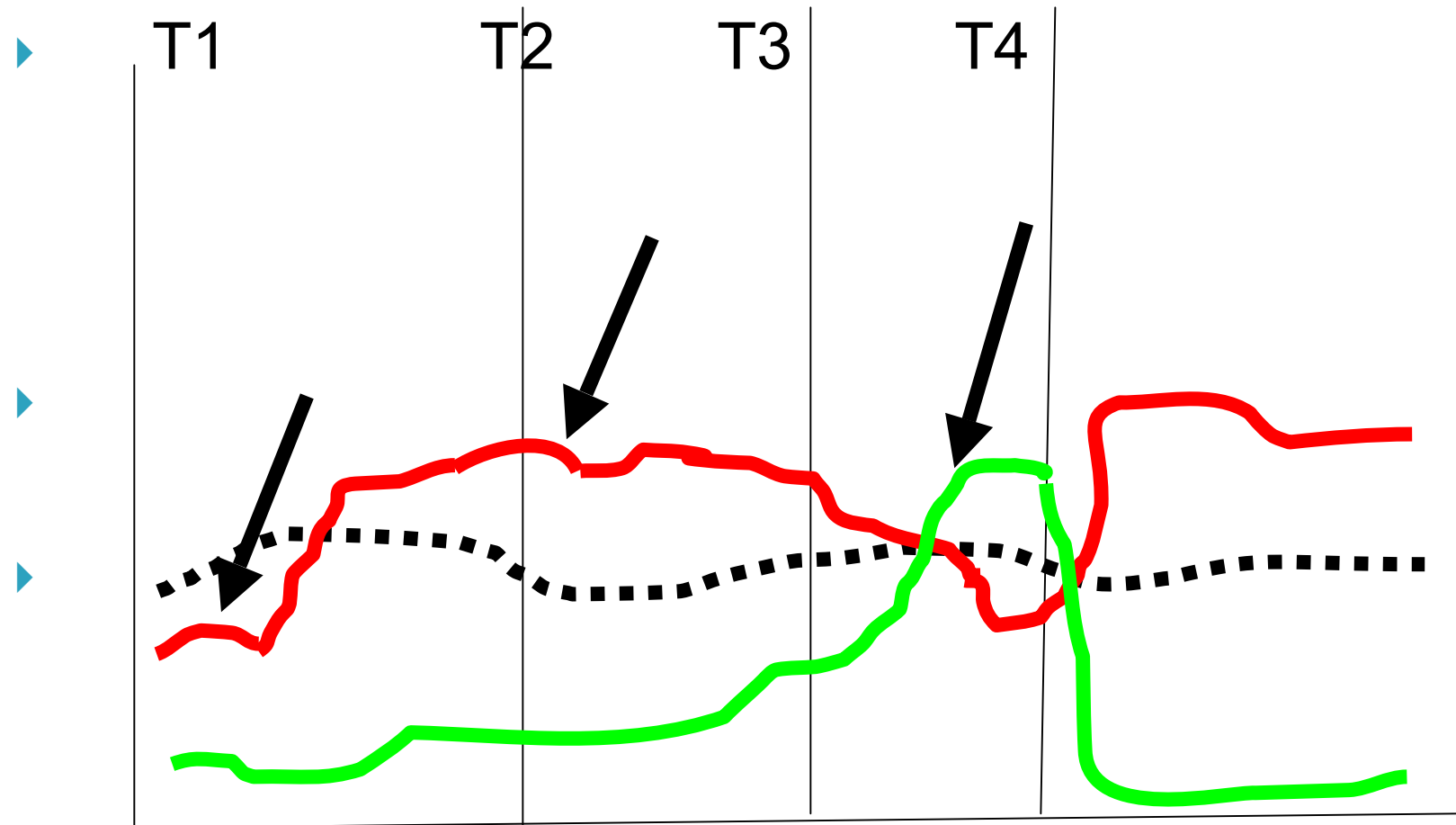


# Emotions Ebb and Flow

- ▶ The amplitude of an emotional wave at any point in time specifies the sensitivity that affective input will activate a mood state at that point.

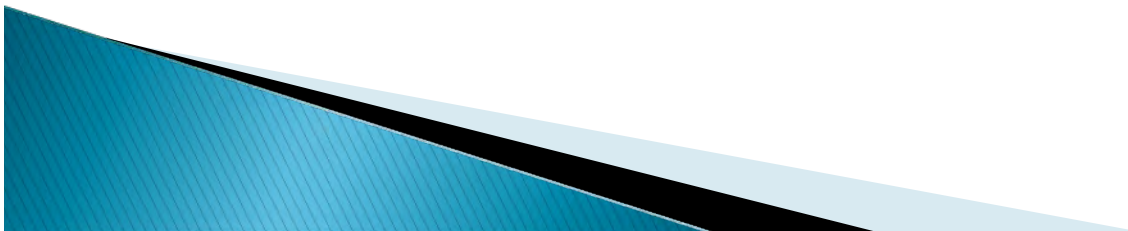


# The Mood in the Morning Model: A Story



# The Mood in the Morning Model: A Story

- ▶ I. Questions:
  - ▶ 1 . How did the infant get into this mood on this morning?
  - ▶ A. Given the amplitude of her negative wave when she first awakened. Her mother's negative affect activated the negative affective state.
  - ▶ 2. Why was wailing added to the state after a few moments?
  - ▶ A. Mood states self-amplify; they feed on themselves. Being in a state further raises its amplitude and leads to the recruitment of additional related behaviors. It is triggered by the infant's own behavior.
  - ▶ 3, Why does the infant stay in a negative state despite the mother's soothing?
  - ▶ A. States are sticky and not fully controlled by input. Less intense stimulation and even internal events can now activate the state. Self-amplification generates mood momentum.



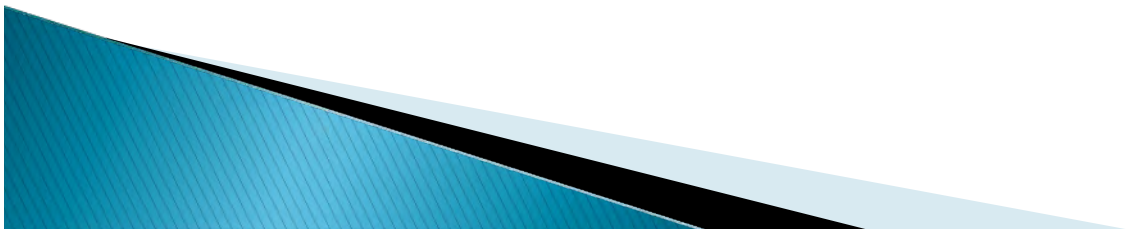
# The Mood in the Morning Model: A Story

- ▶ 4. Why doesn't the infant simply stay in a negative mood state for the whole morning?
  - ▶ A. The soothing no longer activated the negative state and its sensitivity dissipates below threshold. Soothing input activates a positive mood state.
- ▶ 5. Why does looking away trigger the negative mood state again?
  - ▶ A. The negative mood state does not go far below the threshold and can be activated by a less intense stimulus.
- ▶ 6. What is the effect of the infant's negative mood on the mother?
  - ▶ Her positive affect is likely to dissipate in the face of dealing with the infant's negative mood. There is a negative reactivity dance.



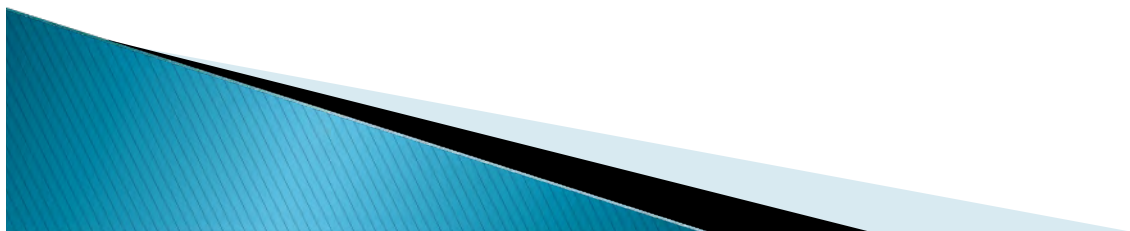
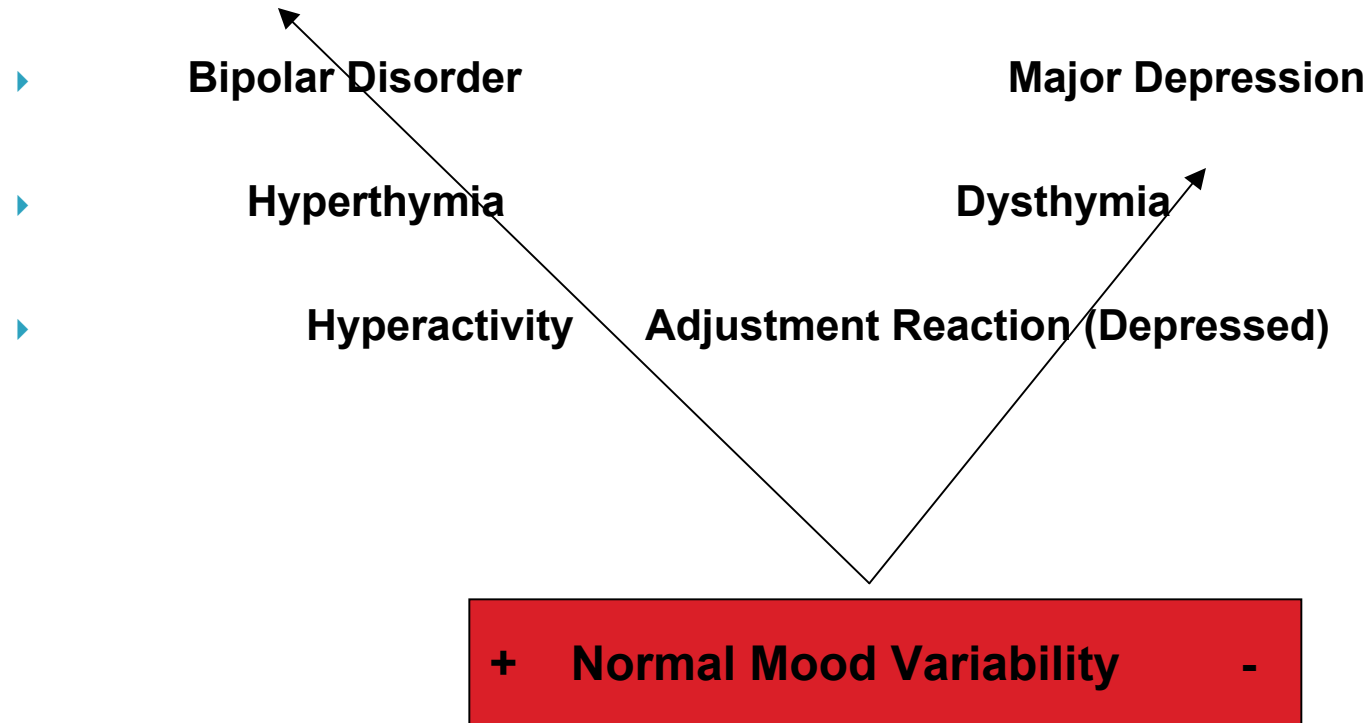
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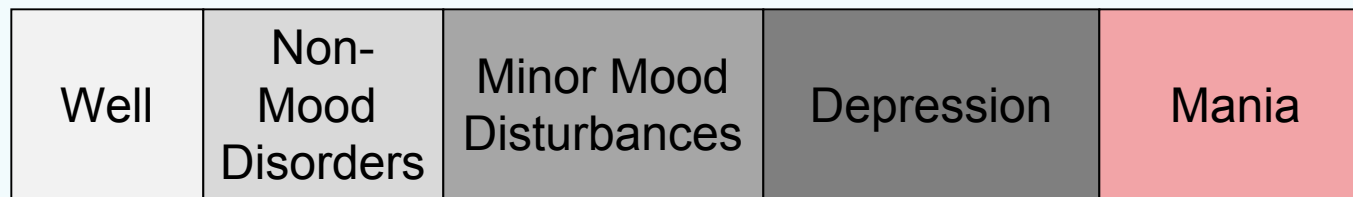
# Variability in Moods: The Development of Mood Disturbances in Young Children

- ▶ Schizo-affective Disorder

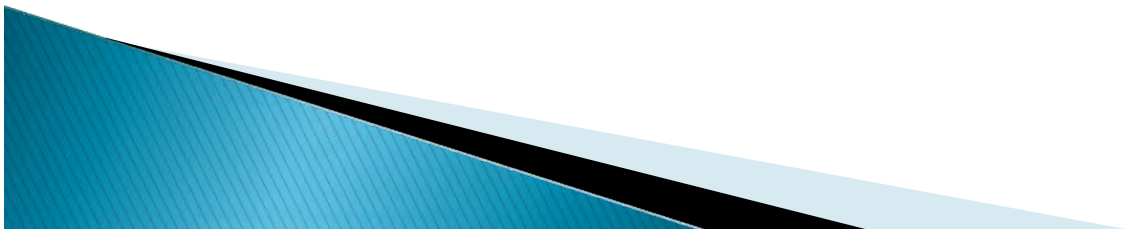
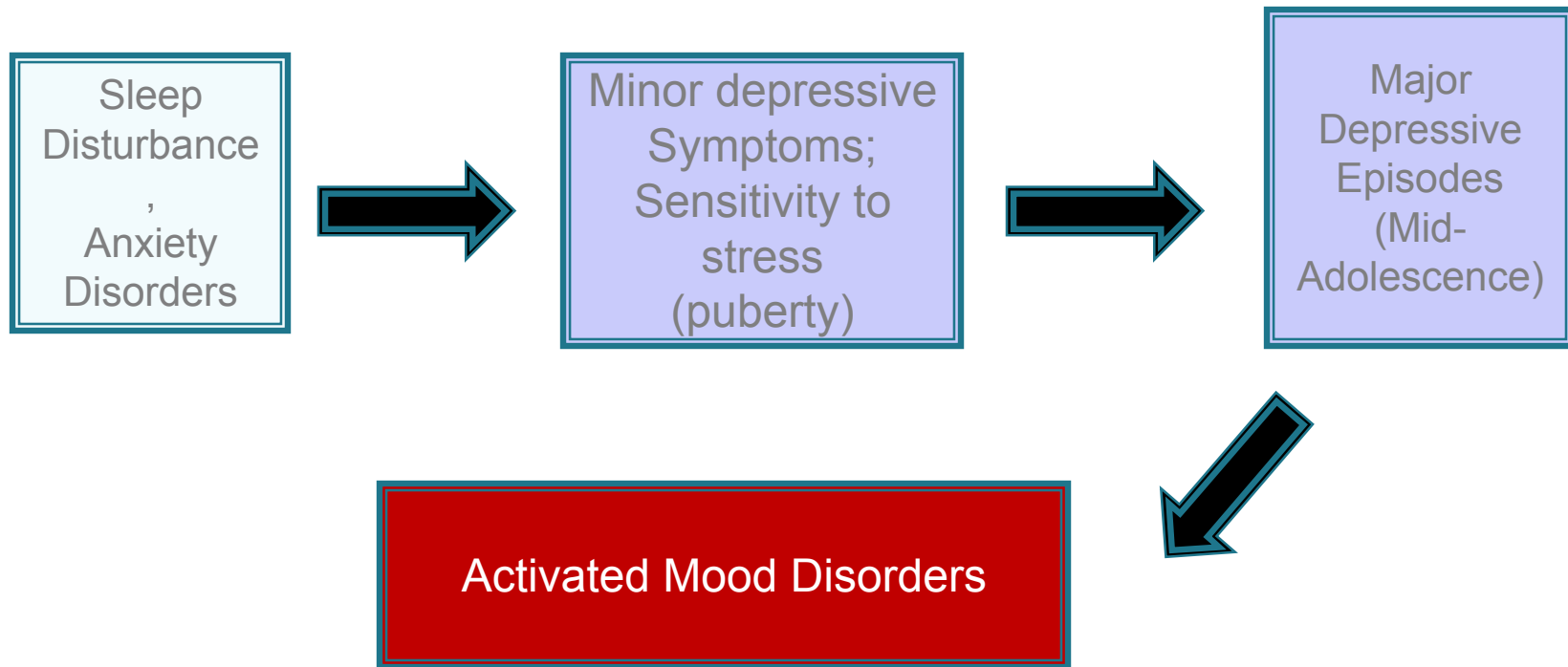


# Early Stages of the Development of Affective Disturbances in Children

- ▶ Conceptual Model: Duffy (2009)

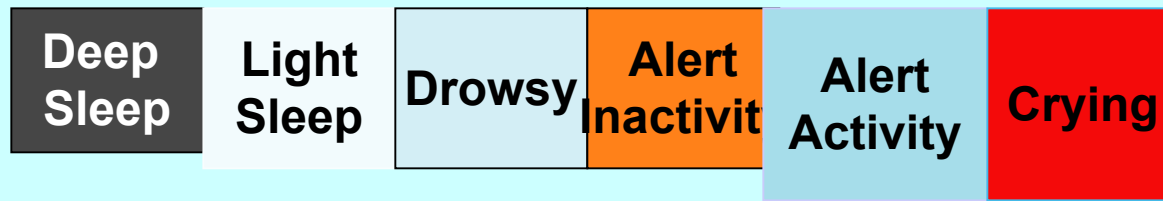


# Disease Progression



# Characteristics of Early Mood Problems

▶ Conceptual Model: Glovinsky



- ▶ 1. Sleep disturbances
- ▶ 2. Problems with shifting states
- ▶ 3. High alert activity (Hyperactive behaviors), Low alert inactivity (Optimal state for learning)
- ▶ 4. Rages, tantrums, crying
- ▶ 5. Temperament variability (negative affectivity)
- ▶ 6. Anger Proneness- irritable, labile, hard to soothe, less positive

# *Temper Dysregulation With Dysphoria and Severe Mood Dysregulation: Getting Acquainted!!*

- ▶ **Temper Dysregulation**
  - ▶ **A. Recurrent temper outbursts in response to common stressors:**
    - ▶ **1. Temper outbursts are manifest verbally and/or behaviorally, such as in the form of verbal rages, or physical aggression toward people and property;**
    - ▶ **2. The reaction is grossly out of proportion in intensity or duration to the situation or provocation.**
    - ▶ **3. The responses are inconsistent with developmental level**
- ▶ **Severe Mood Dysregulation**
  - ▶ **1. Abnormal mood (specifically anger or sadness) present at least half the day most days and of sufficient severity to be noticed by people in the child's environment (e.g., parents, teachers, and peers).**
  - ▶ **2. Hyperarousal as defined by three of the following symptoms:**
    - ▶ **a. insomnia**
    - ▶ **b. agitation**
    - ▶ **c. distractibility**
    - ▶ **d. racing thoughts**
    - ▶ **e. flight of ideas**
    - ▶ **f. pressured speech**
    - ▶ **g. intrusiveness**

# *Temper Dysregulation With Dysphoria and Severe Mood Dysregulation: Getting Acquainted!!*

- ▶ Temper Dysregulation
  - ▶ **B. Frequency:** The temper outbursts occur, on average, three or more times per week.
  - ▶ **C. Mood between temper outbursts:**
    - ▶ 1. Nearly every day, the mood between temper outbursts is persistently negative (irritable, angry, and/or sad).
    - ▶ 2. Negative mood is observable by others (e.g., parents, teachers, peers)
  - ▶ **D. Duration:** Criteria A-C have been present for at least 12 months. Throughout that time, the person has never been without the symptoms of Criteria A-C for more than 3 months at a time.
- ▶ Severe Mood Dysregulation
  - ▶ 4. Compared to his/her peers, the child exhibits markedly increased reactivity to negative emotional stimuli that is manifest verbally or behaviorally. For example, the child responds to frustration with extended temper tantrums (inappropriate for age and/or precipitating event) verbal rages, and/or aggression toward people or property. Such events occur at least three times a week.
  - ▶ 5. The symptoms noted in 2, 3, and 4 are currently present and have been present for at least 12 months without any symptom free periods exceeding 2 months

# *Temper Dysregulation With Dysphoria and Severe Mood Dysregulation: Getting Acquainted!!*

- ▶ Temper Dysregulation
  - ▶ E. The temper outbursts and/or negative mood are present in at least two settings (at home, at school, or with peers) and must be severe in at least one setting.
  - ▶ F. Chronological age is at least 6 years (or equivalent developmental level).
  - ▶ G. The onset is before 10 years.
- ▶ Severe Mood Dysregulation
  - ▶ 6. The symptoms are severe in at least one setting (i.e., violent outbursts, assaultiveness at home, school, or with peers. In addition, there are at least mild symptoms (distractibility, intrusiveness) in a second setting.
  - ▶ 7. Ages 7-17, with the onset of symptoms before age 12.

# *Temper Dysregulation With Dysphoria and Severe Mood Dysregulation: Getting Acquainted!!*

## ▶ Temper Dysregulation

H. In the past year, there has never been a distinct period lasting more than one day during which abnormally elevated or expansive mood was present most of the day for most days, and the abnormally elevated or expansive mood was accompanied by the onset, or worsening of three of the “B” criteria of mania (i.e., grandiosity or inflated self-esteem, decreased need for sleep, pressured speech, flight of ideas, distractibility, increased goal directed activity, or excessive involvement in activities with a high potential for painful consequences).

# Studying Moods in Young Children: Functional Emotional Assessment Scale

- ▶ I. Self Regulation and Interest in the World
  - ▶ A. Is interested and attentive to play with toys:
    - ▶ 0= not at all
    - ▶ 1= Some of the time
    - ▶ 2= consistently present
  - ▶ B. *Explores objects freely (spontaneously, child is actively searching for objects)*
    - ▶ 0= not at all
    - ▶ 1= some of the time
    - ▶ 2= consistently present
  - ▶ C. **Remains calm** for play period with no signs of distress (crying or whining), showing appropriate frustration.
    - ▶ 0= not at all (*child is not calm, shows significant distress*)
    - ▶ 1= some of the time
    - ▶ 2= consistently present



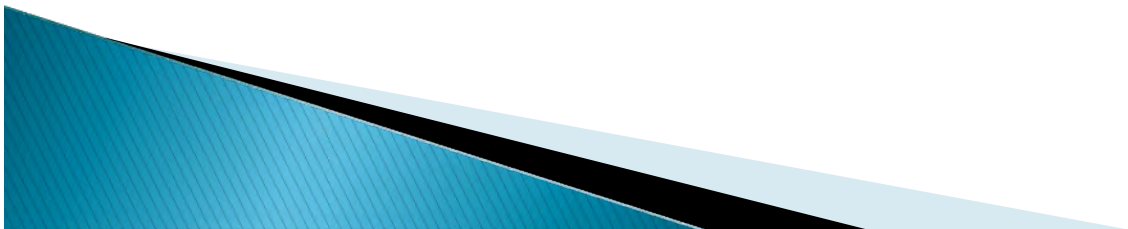
# Studying Moods in Young Children: Functional Emotional Assessment Scale

- ▶ Da. Is comfortable touching textured toys
- ▶ 1. 0= not at all (child is not comfortable with textured toys.)
- ▶ 2. 1= some of the time
- ▶ 3. 2= consistently present
- ▶ Db. Is comfortable being touched by caregiver.
- ▶ 1. 0= not at all
- ▶ 2. 1= some of the time
- ▶ 3. 2 consistently present
- ▶ E. Enjoys moving on equipment or engaging in roughhouse play.
- ▶ 1. 0= not at all
- ▶ 2. 1=some of the time
- ▶ 3. 2= consistently present
- ▶



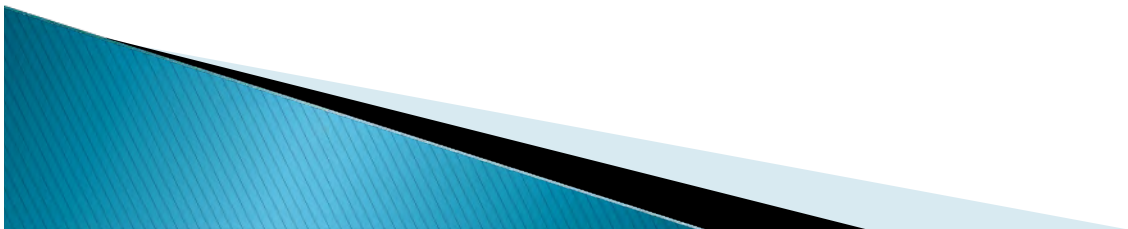
# Studying Moods in Young Children: Functional Emotional Assessment Scale

- ▶ F. Is overly visual looking at details of the toys rather than using them purposefully, and focusing on the toys rather than the caregiver.  
(Converted score\* Score of 0 converts to 2)
  - ▶ 1. 0= consistently present (child spends most of the time looking at toys rather than playing with them purposefully).
  - ▶ 2. 1= some of the time (child spends some time looking at the toys rather than playing with them purposefully but ALSO spend some of the time playing with toys purposefully)
  - ▶ 3. 2= not at all (child is not overly visual, he might observe a toy to explore it but does not spend significant amount observing the toy rather than playing with it purposefully).
  
- ▶ G. Shows happy, content affect
  - ▶ 1. 0= flat, somber, or depressed affect
  - ▶ 2. 1= content, but neutral
  - ▶ 3. happy, robust smiles, warm and engaging affect



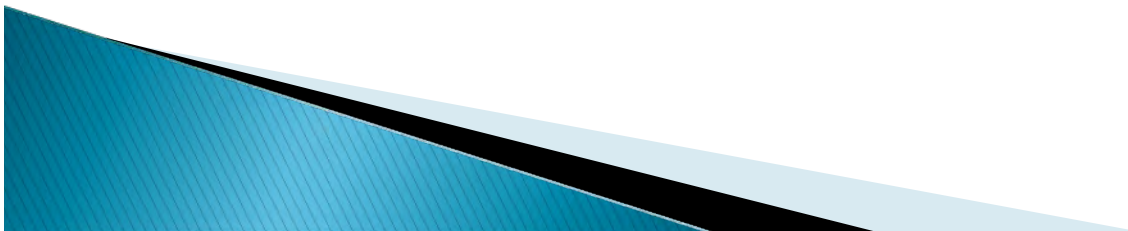
# Studying Moods in Young Children: Functional Emotional Assessment Scale

- ▶ H. Remains **focused on objects** or caregiver **without being distracted** by sights or sounds.
  - ▶ 1. 0= distracted frequently
  - ▶ 2. 1= distracted some of the time with brief periods of focused play
  - ▶ 3. 2= remains focused in play most of the time with only brief distractibility.
  
- ▶ I. NOTE: SCORE ONLY ITEM Ia OR Ib, WHICHEVER APPLIES.
  - ▶ Ia. Appears **sluggish or withdrawn**
    - ▶ 1. 0= withdrawn, difficult to engage
    - ▶ 2. 1= sluggish or slow-paced in actions but can eventually be aroused or engaged.
    - ▶ 3. 2= shows a bright, alert state with focused playthroughout



# Studying Moods in Young Children: Functional Emotional Assessment Scale

- ▶ Ib. Appears over-aroused by toys and environment.
- ▶ 1. 0= Very active, moves quickly from one toy to the next or wanders away from caregiver and toys constantly.
- ▶ 2. 1= Moderately active, occasional bursts of changing activity quickly or wandering away, then settles into play with one toy for short period.
- ▶ 3. 2= Well-modulated in pace and activity level, focusing on a toy or caregiver for long periods before changing activity.
- ▶ TOTAL FOR SELF-REGULATION AND INTEREST IN THE WORLD (Maximum possible score: 18)



# Nolan: A Study of Moods in a Toddler and Mother

