

The Formation of the Parent-Infant Attachment Relationship: Implications for Prevention and Infant Mental Health Programs



Byron Egeland

Prevent Child Abuse America

Chicago January 21, 2009

Goals

- Summarize findings from MLSPC which illustrate the importance of the parent-infant attachment relationship for later development
- Discuss implications of these findings and attachment theory for prevention and intervention programs for young children

Minnesota Longitudinal Study of Parents and Children

Co-investigators: Alan Sroufe and Andy Collins

- **Sample:** N=180 primiparous women enrolled in last trimester
- **Risk Factor: Poverty**
 - Mother's age at birth of child (Mean = 20.5, Range=12-34)
 - Mother's education: 41% did not complete high school
 - Single parents: 62% at time of birth of child
 - Multiproblem families

Major risk factors from the early years for predicting behavior problems in adolescence

- Poor quality parenting and parent-child relationship
 - child abuse and neglect
 - emotionally unavailable/distant
 - hostility
 - intrusiveness
 - boundary dissolution
- anxious parent-infant attachment relationship
- high family stress
- chaotic, disruptive, unstable home environment
- witnessing violence

Major “protective” factors predicting resilience in adolescence

- good quality alternative social/emotional support
- language skills
- organized, structured, and stimulating home environment
- secure attachment in infancy
- competent functioning in the toddler and preschool period

Attachment Theory

- Enduring emotional bond that develops between infant and parent (or primary caregiver) over time
- Caregiver's response to infant's signals (e.g. crying) and bids for attention (e.g. smiling) shapes the quality of the attachment relationship
- A securely attached infant has a history of sensitive and responsive care
- From this first relationship infants form mental representation of self and relationship with others

A securely attached infant / toddler

Based on a history of sensitive, responsive care:

- has trust and confidence in the caregiver as a source of comfort when distressed
- uses caregiver as a secure base to explore and master environment

Anxious-Avoidant Attachment

Based on a history of unresponsive care, an anxious-avoidant infant:

- avoids caregiver when distressed and upset
- displays little affective sharing with caregiver
- does not use mother as secure base to explore

Anxious-Resistant Attachment

Based on a history of inconsistent care, an anxious-resistant infant:

- is not easily comforted by caregiver
- is preoccupied with whereabouts of mother
- is not particularly interested in exploration

Cognitive representations of early parent-child relationships

- Child develops cognitive model (IWM) based on quality of early parent-infant interaction
- This model influences one's expectations about self and relationship with others
 - e.g., secure child has developed an internalized view of self as lovable and others as caring and trustworthy
 - e.g., maltreated child has developed view of self as unlovable and of others as not dependable

What is STEEP?

- a relationship based program
- a comprehensive program
- a program designed to promote a good quality relationship between primary caregiver and young child

STEEP

Duration:

- Prenatal to 24 months (12 months in original study)

Approach:

- Home visitation beginning prenatally
- Parent-infant groups, biweekly, led by same person
- Family night

Target Population (original study):

- Mothers below poverty level, 18 or older, who were pregnant with first child

STEEP Goals

1. Promote healthy, realistic attitudes, beliefs, and expectations about pregnancy, childbirth, childrearing, and the parent-child relationship
2. Promote understanding of child development and form realistic expectations for child behavior
3. Encourage a sensitive, predictable response to the baby's cues and signals
4. Enhance parent's ability to see things from the child's point of view

STEEP Goals (continued)

5. Facilitate the creation of a home environment that is safe, predictable, and conducive to optimal development
6. Help parents identify and strengthen support networks for themselves and their child
7. Build and support life management skills and effective use of resources
8. Help parents recognize options, claim power, and make healthy choices

Strategies for Change

- Facing the past – looking to the future
- Identifying coping strategies and defenses
- Challenging all-or-nothing thinking
- Reframing and perspective-taking
- Problem-solving
- Videotaping and guided self observation

Seeing is Believing

- a training videotape illustrating the use of videotaping during home visits
- purpose: to increase parental sensitivity and responsiveness to their babies' cues
- strengthen parenting skills and promote perspective taking and understanding

Suggested reading

- Sroufe, L.A., Egeland, B., Carlson, E.A., Collins, W.A. (2005). *The Development of the Person*. New York: Guilford Press.
- Egeland, B. (2007). Understanding Developmental Process and Mechanisms of Resilience and Psychopathology: Implications for Policy and Practice. In A. Masten (Vol. Ed.), *The Minnesota Symposium on Child Psychology: Vol. 34. Multi-Level Dynamics in Developmental Psychopathology: Pathways to the future* (pp. 83-118). Hillsdale, NJ: Lawrence Erlbaum and Associates.
- Egeland, B., & Carlson, E., & Sroufe, L. A. (1993). Resilience as process. *Development and Psychopathology*, 5(4), 517-528.
- Egeland, B. & Erickson, M. (2004). Lessons from STEEP: Linking theory, research and practice on the well-being of infants and parents. In A. Sameroff, S. McDonough, & K. Rosenblum (Eds.), *Treating parent-infant relationship problems* (pp. 213-242). New York, NY: Guilford Publications, Inc.
- Egeland, B., Weinfield, N. S., Bosquet, M., & Cheng, V. K. (2000). Remembering, repeating and working through: Lessons from attachment-based interventions. In J. D. Osofsky & H. E. Fitzgerald (Eds.), *Infant Mental Health in Groups at High Risk. WAIMH Handbook of Infant Mental Health* (Vol. 4, pp. 35-89). New York: John Wiley & Sons, Inc.