

THURSDAY, 15 January 2004

- 130 Attachment and Trauma: The Convergence of External Reality and Inner Experience in Infancy and Early Childhood

*Alicia Lieberman (United States)*

The impact of traumatic events on infants, toddlers, and preschoolers is only beginning to be systematically documented and understood. This dearth of information about young children's suffering as a result of violence, accidents, natural disasters, and other traumatic events is perhaps the result of a pervasive wish to think of infancy and early childhood as a time when adult protection buffers children from the experience of pain. Even a cursory look at young children's experience shows that this is far from the case. As just one example, abuse is the leading cause of death in the first year of life after the perinatal period (National Center for Child Abuse and Neglect, 1995).

- 132 Infant Sleep, Attachment, SIDS, and Breast Feeding

*Campbell Paul (Australia)*

The symposium would examine both empirically and theoretically what contemporary comparative cross-cultural and cross-species studies (of nonhuman primates) combined with human clinical as well as laboratory studies reveal about heretofore ignored realities concerning the mismatches between infant and parenting biology, and the cultural environment--of ideas, research, expectations. That shape and determine clinical models of human development. The symposium would reveal that some of the most cherished underlying assumptions about healthy infant development; most notably the relationship between solitary sleep and the process of individuation--and autonomy and future mental health -are fundamentally false. The symposium will include a discussion of evidence that show that mothers and infants experience a mutual physiological-psychological regulatory relationship and when recommended child care practices block, prohibit, or otherwise discourage and interfere with those regulatory effects, their are potentially damaging trade-offs, and sometimes fatal consequences.

- 133 Infant Sleep, Attachment, SIDS, and Breast Feeding: Infant Psychiatry Learns It's Not Nice (Nor Correct) to Fool Mother Nature

*James McKenna (United States)*

The symposium would examine both empirically and theoretically what contemporary comparative cross-cultural and cross-species studies (of nonhuman primates) combined with human clinical as well as laboratory studies reveal about heretofore ignored realities concerning the mismatches between infant and parenting biology, and the cultural environment--of ideas, research, expectations. That shape and determine clinical models of human development. The symposium would reveal that some of the most cherished underlying assumptions about healthy infant development; most notably the relationship between solitary sleep and the process of individuation--and autonomy and future mental health -are fundamentally false. The symposium will include a discussion of evidence that show that mothers and infants experience a mutual physiological-psychological regulatory relationship and when recommended child care practices block, prohibit, or otherwise discourage and interfere with those regulatory effects, their are potentially damaging trade-offs, and sometimes fatal consequences.

- 134 Parental Orientations and Sleep Patterns in Babies

*Joan Raphael-Leff (Great Britain)*

With changing social mores and scattered extended families due to urbanization and job-mobility, increasingly the childcare choices made by new parents are internally driven rather than tradition-led. Delineation of several parental orientations -- Facilitator, Regulator and Reciprocator & "Ambivalent" reveal distinct patterns of childcare, including sleeping arrangements, with the first group co-sleeping, the second insisting on separate bedrooms, the

third alternating beds according to perceived need and the fourth conflictedly inconsistent. These sleeping arrangements are in keeping with the particular configuration of other childcare provisions within any one orientation, based on underpinning assumptions, expectations and unconscious representations of self and baby. This paper will present sleep habits and other behavioral differences between the groups based on survey data and mother-baby observations from the UK. Using in-depth interviews and clinical experience I will also explore the identifications, fantasies and defenses underlying these practices and underpinning conceptualization of parent/baby interchanges. This will be augmented with material from a large scale longitudinal study in Israel using this model, which found significant differences between infants of these parental orientations, and relates infant night-waking to maternal separation anxiety, and attachment variables.

136 The Baby's Place in the Group: A National P.A.I.R.S Forum on Group Work with Mothers and Babies at Risk

*Jan C. SMITH, Melissa Ferrier (Australia)*

This national forum aims to explore the efficacy of the P.A.I.R.S or Parent and Infant Relationship Support group program for different clinical populations across Australia. Against a backdrop of a projected slide illustrating the structure of the PAIRS group program, four multidisciplinary interstate teams will present papers. Firstly, the case for early intervention with mothers and infants experiencing transgenerational trauma (Maroondah, Victoria). Secondly, the effectiveness of the parallel, combined group model for treating eating disorders in mothers and infants with failure to thrive (Cranbourne). Following this, Brisbane PAIRS will illustrate effective treatment of mothers with mental illness and their babies in time limited groups, using the infants as mirrors of the mothers' moods and changing mental states. Finally the usefulness of the PAIRS group treatment model for parents and infants where the baby is placed at risk by maternal rejection will be presented by the Dandenong team. Some presentations will be highlighted by video vignettes. The presentation will conclude with an overhead summary of encouraging outcomes from a controlled, longitudinal study of mothers and infants from 0 to 3 years attending PAIRS programs at multiple sites over an eight year period. Issues for discussion/debate will include: long term outcomes, the role of the father, cost effectiveness and contra-indications for PAIRS.

137 The Baby Who Mistook Her Mother for a Shoe: The Maroondah Experience with Unmothered Mothers and Their Infants

*Sophia Xeros-Constantinides, Anne Cumming, Toni Heron, Siobhan Hannigan, Christine Steentjes (Australia)*

The Maroondah parent-infant group program began in 1997, modeled on P.A.I.R.S. To date the multidisciplinary team of therapists has conducted 10 groups for distressed mothers and infants. This presentation will focus on a clinical case illustrating the extreme difficulty one mother-baby pair experienced in relating face to face. The index mother told the story of a sudden rupture in her relationship with her own mother, resulting in lack of contact for a period of years and subsequent difficulties re-engaging with each other. In the group program, the mother-infant pair were seen to actively avoid en-face contact, and the crawling infant sought comfort at mother's feet by resting her cheek against mother's shoes. Gradually as the weeks passed, baby ventured further up her mother's body, to her lap and ultimately her neck and face area, where they cuddled in a more conventional manner. The parallel themes in the weekly telling of the mother's story in the mothers group, the baby's exploration of others in the infants group and their journey to find each other's faces in the re-enactment of the mother's history and the subsequent improvement in their relationship, will be explored in more depth during the presentation.

138 The Baby's Place at the Table: Finding a Place for Failure to Thrive Infants in a Cranbourne P.A.I.R.S. Group

*Judy Coram, Rosemary Taylor, Nicole Dour, Jane Brooks, Thelma Verill (Australia)*

This case presentation concerns a distressed mother and baby dyad who attended the tenth Cranbourne PAIRS group in early 2003. The mother presented with a long-standing pattern of eating difficulties herself. She reported her own recent weight loss due to the stress of the baby's poor feeding and sleeping patterns as well as distress about her lack of enjoyment in their reciprocal interactions. This baby had been preceded by a medically ill brother and had herself been previously diagnosed with failure to thrive and had been hospitalized. She was being medically monitored and investigated by a team of specialists at the Royal Children's Hospital at the start of the group. By the end of the ten week mothers, infants and parents group, the mother and baby were less distressed, the baby had gained weight and was sleeping better. In addition, the pair were able to relax and enjoy a more positive reciprocal relationship. The role of each of the three components of the PAIRS group: the babies group, the combined group and the mothers groups will be examined in terms of both the group content and parallel group processes in the journey of this mother and baby over the life of the group. The impact of the narrative content and group processes on the outcome of a happier mother-baby relationship will be explored.

139 Clinical Observations of Infants Constructing Internal Working Models: Brisbane P.A.I.R.S.  
*Elisabeth Hoehn, Jeffrey Perry (Australia)*

140 No Place in the World: Unwanted, Rejected Babies Find Mothers in a Dandenong P.A.I.R.S. Group  
*Jan C. Smith, Emma Levy, Megan Turner (Australia)*

This paper describes an unusual experience, where after many years of uplifting P.A.I.R.S group programs, a particular group of six mother-infant pairs with infants aged from 6 to 12 months, was characterised by the mothers' emotional rejection of their infants. The presentation will explore the containment of hostile feelings transferred to staff and infants from the mothers (transference) and the feelings evoked in staff and other mothers in response (counter-transference). Melanie Klein's notions of toxic projection and projective identification were helpful in understanding the many attributions of badness directed firstly to the babies, then to targeted mothers, next to staff, especially the most senior, later to grandparents, and then the babies' fathers, as wave after wave of rejection, blame, guilt and a sense of helplessness assailed the group. Bion's concept of mentally containing the uncontainable, helped staff to think about what was happening in staff de-briefing sessions after each group. The use of metaphor and Lacan's concept of the word of the father (the law, rules) also assisted in understanding and tolerating the process as staff revisited the rationale for the group and its parallel combined structure, before bringing the group to a successful, if unorthodox conclusion. The babies showed resilience in finding other laps until their mothers were ready to claim them as they gradually took responsibility for their many bitter disappointments in life. The presentation will be illustrated with a brief video vignette.

143 The Impact of the HIV/AIDS Epidemic in South Africa: The Provision of Psychosocial Support to Infants and Young Children  
*Linda M. Richter (South Africa)*

Abstract Not Available

144 Understanding the Needs of Infants in Foster Care: An Approach to Assessment  
*Jenn McIntosh, Carolyn Coburn, Jennifer Re, Cecile Ruegg (Australia)*

Abstract Not Available

- 145 Parenting and Family Functioning Predictors of Toddler Social Competence in Play at 24 and 36 Months  
*Holly Brophy-Herb, Rachel Schiffman, Lorraine McKelvey (United States)*  
Abstract Not Available
- 147 STARTING EARLY: STUDYING YOUNG MOTHERS IN PREGNANCY AND POST-PARTUM.  
*Sandra Lancaster (Australia)*  
The four papers in this symposium focus on adolescents becoming mothers. The studies reported are part of an Australian longitudinal study, The Next Generation: A Longitudinal Study of Young Mothers and their Babies, beginning during the pregnancy and continuing through the first year of the child's life. The aim of this longitudinal study is to examine some of the risk factors associated with adolescent pregnancy (e.g. depression, history of abuse, smoking), and how they affect the child's development, the parent-child relationship, and subsequent child adjustment and maladjustment. Primiparous pregnant adolescents (n 60) aged 13 to 20 years attending the Young Mothers Clinic at Monash Medical Centre were recruited during the first trimester of pregnancy, with further data collection in the third trimester, and at 6 weeks, 6 months and 12 months post-partum. The first paper provides the background for the following three papers which report preliminary results on some of the research questions being examined in the various stages of the longitudinal study. These papers look at predictors of smoking patterns in pregnant adolescents, the relationship between a history of sexual abuse and postnatal depression in pregnant adolescents, and effect of maternal attachment on maternal separation anxiety in adolescent mothers.
- 148 Conducting a Longitudinal Study of Young Mothers and Their Babies: Challenges and Opportunities  
*Sandra Lancaster (Australia)*  
This paper describes the development of a longitudinal study, The Next Generation: A Longitudinal Study of Young Mothers and their Babies that focuses on pregnant adolescents and examines how adolescent characteristics, including depression, experiences of abuse, health risk behaviors (for example, smoking), affect the child's development, the parent-child relationship, and subsequent child adjustment and maladjustment. Greater understanding of how prenatal characteristics and affect parenting, child-parent relationships and child adjustment in this high-risk population will provide a basis for effective preventative work with young mothers and their infants. Some of the risks for pregnant adolescents and their babies are outlined together with the benefits of longitudinal designs and the difficulties in carrying out such studies. This paper provides the background for the following three papers which report preliminary results on some of the research questions being examined in the longitudinal study.
- 149 Predicting Smoking Patterns in Pregnant Adolescents  
*Katrina Bottomley, Sandra Lancaster (Australia)*  
Both smoking and depression are common in pregnant adolescents. Although pregnant adolescents have a higher rate of smoking than non-pregnant adolescents, patterns of smoking throughout pregnancy have been shown to vary. Previous research has reported that while some pregnant adolescents may either cease or reduce smoking around 30% of adolescents increase their smoking from the first to the third trimester. A better understanding of these patterns would enhance efforts to improve the health of adolescents and their babies. While a relationship between depression and smoking has been demonstrated, there has been no investigation of whether a relationship exists between these two factors in pregnant adolescents. Data on attitudes to smoking, levels of depression and smoking behaviour in a sample of Australian pregnant adolescents was collected as part of a larger longitudinal study. The sample

comprised 60 primiparous pregnant adolescents attending the Young Mothers Clinic at Monash Medical Centre. The aim of this study was to examine the relationship between levels of depression and smoking behaviour throughout pregnancy. Cross-sectional results are reported for first and third trimester as well as for the change between first and third trimesters. Discussion will focus on how such baseline data could inform the development of an intervention programme for depression and smoking behaviour in pregnancy.

150 The Relationship Between a History of Sexual Abuse and Depression During Pregnancy and Postpartum for Adolescent Mothers

*Kathryn Gilson, Sandra Lancaster (Australia)*

Research has shown a relationship between a history of sexual abuse and depression during pregnancy and the postpartum period. Such research has been restricted to adults with little attention given to adolescent mothers although up to 66% of pregnant adolescents report a history of sexual abuse. Sexually abused adolescents have reported greater difficulties in parenting and more psychological symptoms than non-abused women. Depression has also been noted to have an important impact on parenting. Such findings suggest that the relationship between abuse and parenting may be indirect through, for example, higher rates of depression. The current research aimed to investigate the relationship between a history of sexual abuse and depression measured during the third trimester and six weeks postpartum. As part of a longitudinal study 60 primiparous adolescents were recruited from The Young Mothers Antenatal clinic at Monash Medical Centre. At recruitment information was collected about abuse history and the Hospital Anxiety Depression Scale and the Edinburgh Postnatal Depression Scale were used to assess depression in the 3rd trimester and 6 weeks post-birth. The relationship between depression and abuse history is reported at both points and the opportunities for early intervention are discussed.

151 The Effect of Maternal Attachment on Maternal Separation Anxiety in Adolescent Mothers

*Rachele Aiello, Sandra Lancaster (Australia)*

This study examined the effect of mother-infant attachment on maternal separation anxiety in Australian adolescent mothers. The incompatibility of adolescent developmental tasks with the demands of motherhood may account for findings of difficulty in the formation of close mother-infant attachment and poorer parenting of adolescent mothers. Maternal attachment typically begins during pregnancy and can be measured prior to birth and during the first half of the infant's first year. Maternal separation anxiety is a mother's response to separation from her infant and is influenced by her own attachment history. While moderate separation anxiety is considered normal, too much or too little may result in problematic parenting, unhealthy maternal psychological functioning, a poor mother-infant relationship and restriction of infant development. Adolescent mothers exhibit heightened maternal separation anxiety that has been attributed to their ongoing personality development, but there have been no studies examining the link between maternal attachment and maternal separation anxiety. As part of a larger longitudinal study, fifty primiparous adolescents were recruited in first trimester from the Young Women's Antenatal Clinic (MMC). At 6 months post-partum, the Maternal Postnatal Attachment Scale and the Maternal Separation Anxiety Scale were used to assess attachment to their infants, and their reactions to separation from their infant. In the discussion several theoretical frameworks are used to consider the reported relationships between these variables and the implications for infant development.

152 The Drawings of Preschool Children Exposed to the Trauma of Domestic Violence

*Bridget Boulton (Australia), Mary Sue Moore (United States)*

Preschool children who live with domestic violence are considered to be at risk of developing traumatic stress disorder. Determining how children experience trauma is a complex task. One way of getting a glimpse of a child's personal experience is through an examination of their

drawings. In the present study, children (aged 2 to 5 years) and their mothers were recruited from women's refuges in Western Australia. Two sample groups included children and their mothers recently exposed to domestic violence who accessed either: 1) crisis accommodation from women's refuges; or 2) community outreach services provided by women's refuges. As part of a larger study, 42 preschool children were asked to complete 4 different drawings. These included drawings of a Person, Self, Self and Mother, Mother, and Father, which were examined using the Koppitz Emotional Indicators Scale. When compared with a control group, children exposed to domestic violence had significantly higher Emotional Indicators suggesting levels of emotional stress revealed in their drawings, were of concern. The data usefully shows that very young children are able to display their distress in an understandable and measurable way. Results from the present study also provide insight into how the child perceives his/her environmental context. An overview of the analysis of the children's drawings will be presented along with a number of illustrations and stories told by the children themselves. We will discuss implications of the present results for future research into childhood trauma.

153 Assessment and Treatment of Postpartum Depression: A Relational Approach

*Roseanne Clark (United States)*

Abstract Not Available

154 The Same Needs on Different Continents: Supporting Mother Infant Interaction in Europe, Australia, and Africa

*Maerja-Maaria Turunen, Kaija Leena Puura (Finland), Hilton Davis (Great Britain)*

Child psychiatric international epidemiological studies show high disturbance rates, the disturbances seem to start early and persist often into adulthood, if left unrecognized and untreated. Specialist child psychiatric resources are limited even in the wealthiest countries. New developments in infant psychiatry have put more emphasis on the very early years. This led WHO in the 80's to start South European Project to train health visitors to support parenting. European Early Promotion Project (K.Puura, H.Davis, K.Papadopoulos, J.Tsiantis, V.Ispanovic-Radojkovic, N.Rudic, T.Tamminen, M-M.Turunen, T.Dragonas, A.Paradisiotou, S.Visakou, C.Day, R.Roberts, A.Cox, 2001). That incorporated a solid method of parent counseling with new intervention to support mother-infant-interaction. The training consists of eight whole days of group teaching (12 persons in the group) and subsequent two years supervision in small groups. The crucial skills that health visitors are trained in are very practical and concrete: how to create a respectful partnership with parents, exploring their strengths and problems and supporting positive interaction with their infant. This can be done in different settings, cultures and care giving contexts. In the second part of the workshop dr. Puura will present the design and preliminary results of the European Early Promotion Project - evaluation study that was carried out to assess the impact of the work of the specifically trained primary health care workers.

155 The Realities of Service Delivery at the Coal-Face: The Queensland Experience

*Helen Baker, Raeleigh Bryant, Michael Daubney, Elisabeth Hoehn, Brett McDermott, Debra Sorensen, Janet Rhind (check on first author), Susan Wilson (Australia)*

In South East Queensland, Australia, an area with a population of approximately 3 million people, four Infant Mental Health programs have been set up over the last five years; they are now at differing stages of their development. This workshop proposes to address some of the problems involved in setting up such programs to ensure service delivery to at least some of the population at risk by virtue of the birth of a baby. We want to look closely at the concepts that link the vision and outcome. All the Infant Mental Health Services have been developed from within existing community child psychiatric services and at times seem to be competing against the glamour of suicidal, starving or acting out adolescents. How can we ensure the infant and their family's needs are met above the roar Establishing the vision for an Infant Mental health

service is not the problem, achieving that vision is the difficulty. Project management is essential with a nominated "champion" needed to translate across the knowledge, belief and operational systems.

156 Family Affective Process Between Baby, Father and Mother: Functional and Problematic Patterns over Infancy

*Elisabeth Fivaz-Depeursinge (Switzerland), James McHale (United States)*

The development of affective communication during infancy has most typically been studied at a parent- child, dyadic level in the family. Most conceptualizations stress the significance of infant s propensities for intentional and affective sharing, and of parent s propensities to engage warmly and sensitively with their baby. Perturbations of these processes are known to interfere with the establishment of intersubjective communion. Recent descriptions of affective process at the level of the three-person family group (infant, father and mother) have added new complexities to understanding affective process. Among more recent phenomena of interest have been the co-parenting partners' propensities to support or undermine one another in relating to the infant, and the infant s capacity to relate to two persons at the same time. This workshop will sensitize clinicians and researchers to both functional and problematic family affective processes, as evaluated during semi-standardized or free play situations.

157 Kummer: A Life of Hermine Hug-Hellmuth

*Sara Murphy (Australia)*

Abstract Not Available

162 Babies and Their Mothers

*Christine Ann Hill, Anna Molan (Australia)*

This presentation aims to show what babies and their mothers look like when the mother uses her own words to describe how she feels about her baby on a particular day. The work is presented rather like pictures at an exhibition, encouraging the viewer to make his/her own links and associations to the image and to the words. The authors are interested in the presence or absence of a 'match' between what we see and what we hear and what this might mean.

163 Predicting Four Patterns of Initial Interaction Between Mother and Infant Through the Experience of Pain in Childbirth and Emotional Variables in Different Cultural Sub-Groups

*Sari Goldstein, Michel Granot, Ruth Feldman (Israel)*

Pain perception and pain catastrophizing were not assessed as yet in the delivery room and in relation to mother infant interaction. 94 mothers and infants from four cultural sub-groups, Jewish Israeli-born, Arab-Israeli-born, Jewish-African-born and Jewish- immigrants from Russia, who were enrolled in this study filled in the Trait- State Inventory , the Pain Catastrophizing Scale (PCS) , the Edinburgh Depression Inventory during contractions, on the second day after delivery and at 6 weeks post-partum. General physical and mental well being using the SF36 survey was assessed 6 weeks after delivery. Pain perception was assessed using Visual Analog Scale (VAS) during contractions and on the second day after labor. Demographic data was collected too. At 6 weeks mothers and infants were video-filmed in a play situation and the interactions were analyzed using the Coding Infant behavior (CIB) method. The results showed that pain catastrophizing significantly predicted two factors of the CIB, maternal interruptions and dyadic reciprocity. Pain perception at both times of measurement was positively correlated with the pain catastrophizing levels. Dyadic reciprocity significantly differed between the cultural subgroups. It is suggested that higher pain perception and higher tendency to catastrophize the pain during delivery are significant indicators together with cultural and emotional background of long term effects on the initial mother infant interaction and the adaptation of the mother to her infant's social cues.

- 164 Emotion Displays During Reunion Play in Six-Month-Old Infants at Risk For Abuse: The Impact of Home Visiting is Examined.

*Esther E. Cherland (Canada)*

This study reports on emotion displays during reunion play by six month old infants of mothers who were in a high risk prenatal program. Forty primiparous women who presented to a community high risk prenatal program were screened for risk characteristics for abuse and psychiatric symptoms. Prenatally, twenty-six mothers scored as high risk for psychiatric distress using the Brief Symptoms Inventory (BSI) and had two or more risk characteristics for abuse. Fourteen scored as low-risk for both psychiatric symptoms and abuse characteristics. At six months, infants were assessed using Tronick's Face-to-Face Still-Face Paradigm. The infants' facial emotions were coded second by second using Izard's AFFEX system. Differences in emotion display and communication between the high risk infants whose mothers received home visiting services and high risk and low risk infants whose mothers received telephone contact will be discussed

- 165 Partnering Practice Development in Two Home Visiting Programs

*Sue Couper (Australia), Jane Drummond (Canada), Bride Mosley (Australia)*

An important challenge documented in a recent systematic review of home visiting evaluation literature is the lack of reporting on the practices used to engage parents. Partnership with families is the overriding practice philosophy of the home visiting programs sponsored by the Queen Elizabeth Centre (QEC) in Melbourne, Victoria. In this workshop the components of two home visiting programs will be introduced. Findings from the most recent program evaluations of each will be presented with a special focus on client satisfaction with the partnering abilities of the home visitors. As a method of specifying and enhancing the partnering practices of the home visitors, a program designed to improve cooperative behavior and team communication was introduced at the QEC. WE CAN be a team practice skills have been designed to enhance home visitors' ability to engage with at-risk families and to transmit to at-risk families the communication skills required for family members to function as equals on the home visiting team. These deliberate practice strategies for enhancing team behavior between families and home visitors were piloted at QEC. Evaluation of the usefulness of WE CAN be a team strategies for the staff at the Queen Elizabeth Centre will be presented.

- 166 Study of the I Feel Story Technique: Analysis of Mothers Data

*Naoki Hirano, Yoko Hamada, Keigo Okonogi (Japan)*

The objective of this study is to consider the possibility of using the IFEEL Story technique, or using the Japanese IFEEL Pictures (JIFP) as projective stimuli similar to those used in the TAT. At the previous Congress, we presented the results of our survey that used this technique on university students (Hirano, Hamada, Chiba and Okonogi, 2002). Our report for this year's Congress is aimed at studying the narrative responses we obtained through using the IFEEL Story technique on mother subjects, in the context of the test battery. We conducted an IFEEL Story technique targeting 65 mothers of children aged 0 to 6. The subjects were shown photographs of infants, and were then told to make up a story, describing (1) the situation the baby in the photograph is currently placed in, and (2) what happens to the baby after that. The subjects were also asked to answer a questionnaire, including the Emotional Empathy Scale, and the Scale of Maternal Awareness etc. The findings obtained from this survey have shown that the JIFP can act as a projective story stimulus that reveals individual differences between subjects. The subjects identified emotional themes in infants that were common to various photographs, and, in the context of these themes, developed stories that were individually characterize their style of interpersonal relationships. Moreover, the narrative responses to the photographs reflected the subjects individual differences in emotional attitudes associated with interactions with infants.



- 167 **Parental Experience in Interpreting Infant Emotions: The IFeel Pictures Assessment**  
*Jutta Raita-Hasu, Eila Räsänen, Kaarina Kemppinen, Kirsti Kumpulainen (Finland)*
- The emotional availability and sensitivity of the caregiver is extremely important for a child's mental and physical health and development. This study focuses on the emotional availability of Finnish mothers as well as fathers; more specifically on their ability to interpret infant emotions. The stability of the interpretation was one of the main interests in this study; will change over time occur when more experience is gained in parenting. In order to find this out, the IFEEL Pictures assessment was used as one method. The IFEEL Pictures (Infant Facial Expressions of Emotions from Looking at Pictures) is an objective instrument developed by R. N. Emde, P. M. Butterfield and J.D. Osofsky (1987) for interpreting infant emotions. A total of 79 first-time mothers and 69 fathers were shown the IFEEL Pictures first when their children were 6-8 weeks old and again when their children were 2 years old. Both the categorical method and the dimensional method were used in this study. The responses of these two assessments will be compared. This report is part of a major follow-up study of the formation of the parent-child relationship that started in 1997 at the university of Kuopio. The results will be presented at the Congress.
- 168 **Young Children with Mental Health Problems: DC 0-3 and ICD 10 Classifications in an Out-Patient Pre-school Psychiatric Clinic in Scandinavia**  
*Pia Risholm Mothander (Sweden), Rigmor Grette Moe (Norway)*
- This presentation focuses ongoing WAIMH and Scandinavian work with the Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (Zero to Three, 1994) (DC: 0-3). During a period of two years infants and toddlers referred to the Nic Waal's Institute in Oslo, Norway, were assessed and classified using the DC 0-3 procedure. The children were independently diagnosed according to the ICD 10 system, as part of the clinic routines. Sixty-four children received both DC 0-3 classifications and an ICD 10 diagnosis. Twice as many boys as girls were classified. Thirty-eight children (59) had a DC 0-3 Axis I classification. Frequent classifications on DC 0-3 Axis I were Trauma (12), Disorders of Affect (11) and Regulatory Disorders (25). Thirty-two children (50) were classified with a DC 0-3 Axis II disorder. Forty children (63) were given an ICD 10 diagnosis. Frequent ICD 10 diagnoses were Hyperkinetic Disorders (9), Mixed Disorders on conduct and emotions (11) and Emotional disorders with onset specific to childhood (17). Differences and similarities in the diagnostic profiles will be discussed. The final discussion will focus on reliability and validity issues as well as on the implementation of DC 0-3 as a complement to an already established diagnostic system and how DC 0-3 can augment ICD 10 and guide treatment.
- 169 **Conveying the Infants' Experience to the System: Hearing What Cannot Be Heard**  
*Jennifer Faulkner, Nicole Milburn, Marell Lynch (Australia)*
- Infants who can not be protected by their parents are afforded substitute care and protection by the state. Entering foster care presents particular challenges to infants who cannot talk, and whose usual language of communication might not be understood by a new caregiver. The infant's experience is often overlooked by the system in favor of the adult's rights or needs. Some methods and challenges that were piloted through the Royal Children's Hospital Mental Health Service Stargate Program for recognizing the infant's experience and needs will be presented. Also presented will be some means for advocating for the infant within a complex Child Protection and legal system, along with challenges to having painful experiences heard and incorporated into future planning.
- 170 **A Social Work Intervention Program for Infants of Indeterminate Sex and Their Families**  
*Elizabeth Loughlin (Australia)*
- The occurrence of a child with indeterminate sex is 1:5500, about 8-12 infants a year at a large

tertiary pediatric hospital. The shock for parents of unclear genitalia in their newly born infant can compromise the parents beginning relationship with their infant. It also can threaten parental confidence, attachment to the infant and introduction of the baby to the world. Additional presence of individual family vulnerability or dysfunction can exacerbate these dilemmas and further impinge on the infant's early emotional experiences with the family. Furthermore long-term follow up may be intermittent due to geography or absence of need to for medical review. The poster will describe a social work assessment framework and counseling intervention as part of the designed medical protocol used at diagnoses of these infants. This relatively brief inpatient and outpatient intervention aims to support parental interest and concern for the baby, assess parental adjustment, help parents reframe the medical condition to kin and family networks and anticipate possible future social and emotional difficulties for the infant. The data derived from the assessment framework will be examined in relation to two case studies. The poster will offer health practitioners a way to think about assessment needs and counseling intervention for an infant diagnosed with a condition that is visually very different.

- 171 First Applications of the LISMEP: A Checklist for Early Detection of Possible Evolutions Toward Severe Mental Disorders in the Childhood or in the Adulthood

*Jorge L. Tizon, Montserrat Goma (Spain)*

The LISMEP Project (Pre-scholar Mental Health Check-list), subsidized with the research help 014510/2001 of the Marat TV3 Foundation (after evaluation of the National Agency for Evaluation and Prospective), is based in a list of alarm signs and biological, psychological and psycho-social risk factors elaborated from a revision of the accessible scientific literature on the topic. The objective is to create an instrument to use it in diverse segments of age of the first childhood. The purpose is predicting the possible appearance of severe mental disorders in the adolescence and in the mature age (in particular, schizophrenia or other psychoses). We are trying to create four versions of the instrument with objectives of early detection: the general-one, and three other for Childhood Mental Health teams use, to find information in the clinical dossiers of Primary Care pediatrics and finally, another version prepared to be used by means of mental health personnel's interviews with pediatrics personnel.

- 172 A Comprehensive Transdisciplinary Initial Assessment for Children from Birth to Five

*Zohreh Zarnegar (United States)*

Abstract Not Available

- 174 Cluster Analysis of Presenting Symptoms in an Infant Mental Health Clinic

*Brian Keith Wise, Karen Frankel, Lisa Boyum and Robert Harmon (United States)*

The focus of current study is to review presenting data on infants and young children, explore relationship between symptoms using cluster analysis, and consider how clustering maps onto the current diagnostic systems (DC: 0-3 DSM-IV). Retrospective chart review was conducted for 177 children seen in an academic Infant Psychiatry Clinic (1982-1999). Subjects' age ranged from newborn to 58 months (mean of 30.96 months), 56 were male and 73 Caucasian. Forty-four presenting variables were identified from available chart information. Symptoms conceptually related were combined and those with low occurrence were eliminated. Thirty-seven remaining variables underwent a hierarchical agglomerative analysis using an "Average" clustering method and Jaccard's coefficient of association. Additionally, cluster analyses were done separately by gender and age group resulting in different cluster formations. Five clusters were found with the total n, but when separated by gender, only three of these held for both sexes: disruptive, attachment, and anxiety. Boys had an autistic cluster. When subdivided into three age groups, autistic cluster becomes more differentiated, disruptive cluster drops hyperactivity and is elaborated by the addition of sleep problems and cognition/language delay,

anxiety was related to sleep problems and reactive attachment /neglect was strongly associated with sexual abuse (manifested by eating problems and slow cognitive/language development in 0-18 months old). This study offers a unique perspective on our current nosology and suggestions for future classification systems.

175 **Infants Tell Us About Their Internal Worlds: Early Emotional Understanding Revealed Through Symbolic Gestures**

*Claire D. Vallotton, Livna Grlnbaum (United States)*

Do infants consciously recognize emotions in themselves and others Can they articulate what they feel Study of infants understanding of emotions is limited by the difficulty of understanding infant behavior before the onset of speech. This study examines infants use of gestures by normally-hearing infants and toddlers to discover whether infants will use emotion concepts such as sad, happy, and scared, or feeling words such as cold or hurt, in their communications. Participants were 22 children (5-28 months) in a university childcare where the use of symbolic gestures is encouraged through caregiver modeling. Children were videotaped during normal routines, including stressful (separation from parents, diaper changes) and non-stressful (snack- time, free-play) routines for a period of 9 months. Gestures used by children in each episode were coded to determine the context, characteristics, and frequency of symbolic gesturing. Results show that 20 of 22 children used symbolic gestures. Six children used emotion gestures, beginning at 10.9 months; and 4 used feeling words, beginning at 16.7 months. Furthermore, data show that infants demonstrate emotional understanding by using emotion gestures in context-specific ways; i.e., 3 children demonstrate articulated empathy, beginning at 15.4 months. Results reveal the sophistication of infants' internal worlds, as well as demonstrating the potential of symbolic gesturing as a method for understanding early emotional and cognitive development.

176 **Developing Choices: How Parent-Infant Interactions Set the Stage for Life-Long Decision Making**

*Carol Gibb Harding (United States)*

Making decisions is a life-long human activity. From the moment infants begin to choose one toy over another, recognizing options and overcoming obstacles become important parts of decision-making. A developmental model of decision-making across the lifespan is proposed, incorporating empirical evidence from research studies of (1) choice co-construction occurring within infant/parent interactions, (2) decision-making about risky behaviors observed during childhood and adolescence, and (3) adults self-reports of their own decision-making. Anscombe's (1957) theory of intention provides the underlying theoretical framework used to describe how interactions between parents and infants set the stage for later patterns of decision-making. The primary goal of the proposed decision-making model is to describe how decision-makers (at different ages and in different circumstances) think about options and obstacles.

177 **Parent Cognitions, Parent-Infant Interaction and Infant Development in the First Twelve Months: Pathways Towards Preventative Intervention**

*Melissa Ferrier, Helen Skouteris, Lyn Littlefield (Australia)*

The aim of this study was to examine the influence of parent cognitions, expectations, attitudes, perceptions, attributions and appraisals on the parent-infant interactional relationship and infant development in the first 12 months. Participants were 100 mother-infant dyads recruited from both metropolitan Melbourne and surrounding regional areas. A battery of self-report questionnaires (including a demographics questionnaire) was administered in order to obtain information about mothers' cognitions as they relate to various aspects of the parenting role. Mothers also participated, with their infant, in a face-to-face interaction task that was playful in nature. From this, interactional relationship constructs including mutual attention, affect within the dyad, activity within the dyad (turn- taking within bouts of play; parental pauses within and

between bouts of play) and communication within the dyad (infant clarify of signals; parental sensitive responsiveness) were coded. Infants' mental skills, motor skills and behavioral development were also assessed. Overall, this research illuminates the key cognitions that (independently and cumulatively) predict optimal parent-infant interaction and suggests how the parent-infant interactional relationship mediates between parent cognitions and infant development in the first 12 months. This research has implications for how preventative intervention strategies for Australian parents and infants (birth to 12 months) may be best delivered.

178 Effect of Infant Gender and Parent Responsiveness on Infant Stress Reactivity

*David Wilson Haley (United States)*

This study examined the influence of infant gender and parent responsiveness on infant cortisol reactivity to an emotional challenge. The challenge was a modified version of Tronick's Still-Face procedure, in which a second Still-Face Reunion sequence was added. Saliva samples were collected before the start of the procedure and 30 minutes after the end of the first Still-Face episode from 40 five to six month old infants. Parent behaviors that were contingent to the infant's behavior, such as, mirroring/amplifying of the infant's negative or positive expressions, were scored for each second of face-to-face interaction. Results indicated a significant infant gender by parent responsiveness interaction on infant cortisol,  $F(1, 33) = 4.75, p < .05$ . Specifically, male infants of less responsive parents had a greater increase in cortisol (from  $M = .24 \text{ } \mu\text{g/dl}$  to  $M = .58 \text{ } \mu\text{g/dl}$ ) compared to female infants of less responsive parents (from  $M = .19 \text{ } \mu\text{g/dl}$  to  $M = .12 \text{ } \mu\text{g/dl}$ ),  $F(1, 20) = 4.65, p < .01$ . Results underscore the importance of gender and parent behavior in understanding individual differences in the regulation of infant stress physiology. Findings are discussed in light of prior Still-Face studies reporting on gender x parent behavior effects on infant regulation of affect

179 Correlation Between Attachment, Temperament, Withdrawal Reactions, Separation Anxiety and Somatic Disorders in Children Entering Nursery

*Francesco Grasso, Silvia Cavallini (Italy), Nafsika Starakis, Xavier Paoletti, France Mentré, Antoine Guedeney (France)*

This research is at its second step. The authors, through a six months longitudinal observation of children in nursery for the very first time, investigated the links between 4 types of variables concerning the child and his environment: 1) Health and occurrence of the diseases; 2) Temperament of the child; 3) Secure/insecure attachment of the child towards the mother; 4) Withdrawal reactions; 5) Maternal separation anxiety. The child's personal history before the nursery and his life events as well as those of his family is taken into account. In 2002 the authors presented the preliminary data of a research that was carried out in a nursery in the 15th arrondissement in Paris and the definite protocol of the research. At first, in Amsterdam WAIMH Congress, the statistic analysis doesn't give any significance regarding the comparison between infection scores and the evaluations of Attachment, Temperament and Withdrawal of infants. However, we can make some important consideration on description of the infection rates. A further analysis of data has given us some other important indications especially on the relation between infant's security and withdrawal reactions. This revision will be presented in this poster with the new data of the study carried out in two nurseries in Livorno, Italy.

180 Maternal Employment and Mother's Experiences of Separation from Their Infants

*Cecelia Winkelman, Amanda Gai Williamson (Australia)*

Increasing numbers of women are returning to employment in their child's first years of life. As a result of their employment these mothers are separated from their infants. One possible consequence they may experience is maternal separation anxiety. In the past, much of the research in the area of maternal employment has focused on the separation effects to the child. However, both Bowlby's (1973) theory of attachment and Levy's (1970) theory of maternal

overprotection emphasize it is the mother-child dyad that becomes separated and not just the child from his/her mother. Subsequently both the child and the mother may experience anxiety when separated from each other. Using a sample of employed women with children aged three years and under, this study aimed to investigate how emotional well being and social support networks along with child care and employment preference contribute to maternal separation anxiety that may be experienced by employed mother.

182 Future Families: A Collaborative Infant and Early Childhood Attachment and Mental Health Program

*Elisabeth Hoehn (Australia)*

The development of parent-infant attachment is closely linked to early brain development. Childhood trauma, abuse, and non-optimal attachment with a significant adult can permanently alter the structure and function of the developing brain, by influencing the structure and type of neuronal connections. Infants who have not been supported by a caregiver to regulate their emotions during the critical periods of brain development in infancy are at risk of setting adverse physiological response pathways to stress that can prevail throughout the lifespan. The Future Families Program recognizes the impact of attachment relationships on mental health, and aims to identify at-risk families, prevent mental health problems and promote nurturing environments to maximize attachments. The Program is a collaborative infant and early childhood attachment and mental health initiative designed to improve access to mental and child health services and to better coordinate support for infants, young children and their families. The target is infants and children who may be experiencing, or are at risk of experiencing attachment difficulties due to factors such as parental mental illness, substance abuse, neglect, domestic violence and intellectual or physical impairment. Support for at-risk families is achieved by using a coordinated care plan approach, linking families into appropriate services as required by their situation. It is anticipated that an individualized, family and infant focused approach to early intervention may avert future mental health problems.

184 Stability of Atypical Caregiver Behaviors During Infancy

*Diane Benoit (Canada)*

Infant disorganized attachment, a major risk factor for childhood psychopathology, has been linked to the display of atypical behaviors by caregivers. This study examines the stability of atypical caregiver behaviors during mother-infant interactions across two situations and over 8 months. The Atypical Maternal Behavior Instrument for Assessment and Classification (AMBIANCE) was used to assess atypical caregiver behaviors in 85 mothers with their 12-month-olds in the Strange Situation and a 5-minute play. A subgroup of 59 dyads was also observed in play at 4 months. The total number of behaviors for each dimension of the AMBIANCE (affective communication errors, role/boundary confusion, fearfulness/disorientation, intrusiveness/negativity, withdrawal) was positively correlated across situations. The mean number of affective communication errors, fearful/disoriented and withdrawn behaviors was significantly higher for the Strange Situation than for the play. Comparison of 4- and 12-month play revealed significant positive correlations between total scores for affective communication errors and role/boundary confusion, and the overall total number of atypical behaviors. Role/boundary confusion scores were significantly higher at 4 months and withdrawal scores were significantly higher at 12 months. These findings provide evidence for the stability of atypical caregiver behaviors across situations and over time, and indicate that the context in which atypical caregiver behaviors are assessed and child age may affect the types of atypical behaviors displayed.

185 Interpreting "Amae" within an Attachment Frame

*John Kirkland, David Bimler, Misato Kurosaki, Naomi Yuhara (New Zealand)*

In this poster we show the concept of amae within parent-toddler interaction can be operationalized to reveal a combination of security and insecurity. Two steps were involved. First, 45 Toddler Attachment Sort items were translated from English into Japanese. To ascertain their dimensional structure data were collected from 70 Japanese adults (in Japan) using the Method of Triads sorting procedure. Sets of 3 items are dealt from a shuffled item deck and participants identify the one item-statement least like the remaining two. They may use any "sensible" criterion and this may change between successive triads. Rather surprisingly, this map's dimensional structure was over 80 agreements with the previously obtained and well-verified "Western" one. In a second step these Japanese adults distributed the 45 items into 5 rank-ordered piles (arranged from "more-" through "less-" apply) with amae as the criterion target. MDS analyses revealed very high agreement between participants. The results closely parallel outcomes from other studies using the same 45 items and point to the conclusion that amae is essentially a B4 attachment classification, at least amongst toddlers and their parents. We suggest this atypical blending, whilst documented, is still largely unfamiliar to non-Japanese. This is one reason neither the significance nor the relevance of amae has been picked up in the West.

186 A Reexamination of Mahler's Original Data Research

*Adriana Lis, Mazzeschi Claudia, Parla Ivan, Migali Giulia, Napoli Chiara, Stragliotto Chiara (Italy)*

In the international scientific background, psychoanalytic theories have often been considered scientifically poor or methodologically inadequate. For many years, psychoanalysts have given major attention to clinical qualitative aspects. One of biggest changes in psychoanalytic approach has been brought by Mahler's thinking: she introduced a systematic method of observation and coding to link clinic and research in psychoanalytic world. Nowadays, Mahler is considered one of the main precursors of Infant Research, because of her empirical research based on the systematic observation. Mahler and her colleagues used different methods such as participant and not participant observation with children such as participating and not participating observation with children, clinical interview and projective techniques with parents. In psychodynamic area, these criteria represent the basis for research work in the last years. The aim of the present work is a methodological reexamination of the original Mahler's data: thanks to Dr. Anni Bergman and the Mahler Research Foundation's collaboration, we tried to reorganize clinical data thought content analysis and quantitative statistics. This work let us to construct, starting from original data in paper, new indexes related to new theories, like the attachment one. This reexamination helped us to identify operational variables useful both in new research and in clinical work.

187 Depression Symptomatology and Maternal Attachment in Japanese Women During Pregnancy and Postpartum

*Hitoshi Kaneko, Haya Sechiyama, Yasuko Sasaki, Shiori Arai, Michie Ishihara, Chie Hatagaki, Eri Inagaki, Motoko Usui, Kikuko Miwa, Sachiko Kobayashi, Namiko Tanaka, Misuzu Mizoguchi, Kazuyo Naitou, Haruka Uesugi, Atsuo Itakura, Satomi Nmurase, Tatsuo Ujiie, Kenji Nomura, Shuji Honjo (Japan)*

The aim of this study was to examine the relationship between depression symptomatology and maternal attachment. The subjects answered questionnaires at three different periods. Three hundred and twenty-four pregnant women participated in a longitudinal study. A Self-rating Depression Scale (Zung-SDS), and the Edinburgh Postnatal Depression Scale (EPDS) were used. The Antenatal Maternal Attachment Scale, developed by us, was employed for assessing bonding between mother and fetus in early pregnancy. Maternal-Fetal Attachment Scale (MFAS) and the Postpartum Maternal Attachment Scale were also used. Moderate correlations were found between attachment scores and the SDS postpartum. Results suggest that maternal attachment score during pregnancy can predict depression symptomatology postpartum.

- 188 **Integrating Infant Mental Health Promotion into the Community Health Centre (Puskesmas) in Indonesia: A New Hope Toward a Better Future**  
*Wiguna Tjhin (Indonesia)*
- Based on The Indonesian National Mental Health vision (toward healthy Indonesia 2010 through comprehensive mental health efforts), the trend of mental health services in Indonesia alters from hospital base services to community base services nowadays. One of the points from the National Mental Health Policy is to strengthen the community mental health state based on the human life cycle and sociocultural background. From this point of view, The Community Mental Health Division-Indonesian Department of Health plan to develop an Infant Mental Health Promotion services which is integrated into the mother and child healthcare programs. The mother and child healthcare programs had already been run in the community health centre (puskesmas) as major programs since the beginning, but for a time being is only focus on physical wellbeing. The first step of this integration is developing a module on optimum infant parenting styles. This module consists of many kind of parenting styles, which are appropriate with all Indonesian culture. This parenting styles module also divides into 2 developmental stages (the first stage is for 0- 1.5 year-old infant, and the second stage is for 1.5- 3.0 year-old infant). The next step is educating parents in the community based on this module. Facing some difficulties in Indonesia nowadays, such as economic, political and social inadequacies, we hope that the outcome of this program will give a better development to our infants in the next future.
- 189 **Measuring Mother-Infant Interactions Using NCAST in Japanese and US Dyads: Differences and Similarities**  
*Taiko Hirose, Taeko Teramoto, Takahide Omori, Sakae Saitoh, Mayumi Hiramatsu, Izumi Takahashi, Motoko Okamitsu, Michiko Yamazaki, Mami Sonobe, Kumi Mikuni, Miho Kusanagi, Eri Shlnoki, Shigeko Hashimoto (Japan)*
- NCATS data collected in Japan and US were compared to examine differences and similarities in mother-infant interactions between the two countries. This study also examined reliability of the NCATS as a scale measuring Japanese mother-infant interactions. The Japanese sample consisted of 133 mothers and their 2, 3, 4, 13, or 36 month-old infants. The US sample consisted of 317 mothers with matching ages of infants. All data were cross-sectional. Japanese interactions were filmed at home and were scored from the videotapes. US interactions were observed and scored at home. Results showed that US mother's ages and education levels varied more than Japanese mothers did. The NCATS scores of US mothers tended to be higher than those of Japanese, but only one subscale score was significant. The scores of US infants were significantly lower than Japanese infant's scores. Alpha coefficients of KR20 for the Japanese scores were fairly reliable but not as much as the US scores. In conclusion, we felt the study needed to have larger sample sizes of the various developmental ages, and the results should have taken account of differences of observational methods (video vs. live) and of variances of maternal age and educational backgrounds of the two samples.
- 190 **Changes in Pre- and Postnatal Perceived Stress: Influences of Maternal Age and Father Involvement Among Low-Income Women**  
*Lauren R. Barton, Lee Anne Roman, Lorraine M. McKelvey, David W. Haley, Judith K. Lindsay, Joseph S. Moore (United States)*
- The objective of this study was to examine the influences of maternal age and father involvement on changes in perceived stress throughout pregnancy and the first six months after delivery. Secondary analyses were undertaken on a sample of 370 low-income women enrolled in the Grand Rapids Home Visiting Study. Perceived Stress Scale scores significantly changed across time demonstrating a gradual decrease throughout pregnancy, a marked drop six weeks after delivery, and a rise six months after delivery. An interaction was observed such that adult women who reported not having the father of the baby (FOB) present at delivery had identified

higher levels of perceived stress throughout pregnancy but similar levels after delivery compared to women who had the FOB present at delivery. However, regardless of FOB involvement at delivery, all adolescent participants had high levels of perceived stress at study enrollment that decreased throughout the course of pregnancy. Both adolescent groups reported similarly low levels of perceived stress 6 weeks after delivery, but at 6 months postnatally, perceived stress scores were significantly higher for adolescents who did not have the FOB present at delivery than among individuals who had fathers involved at delivery. This effect remained even after covarying out the amount of home visiting intervention each individual received. Findings are discussed with regard to the timing of supportive interventions and existing literature on perceived stress among pregnant and parenting women with low incomes.

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#### Prenatal and Postnatal Maternal Adjustment After Infertility

*Eren Berkenkotter (United States)*

This poster presents research findings about early maternal adjustment in previously infertile and never infertile first-time mothers of singletons. How new mothers experience their hopes and fears about their infants health and well-being is presented, highlighting differences found in the previously infertile women. Twenty previously infertile and 38 never infertile first-time mothers filled out questionnaires in their third trimester and at three months postpartum. Previously infertile women were similar to never infertile women in most domains of maternal adjustment. For the previously infertile group only, there was a significant association between less positive ideation about the fetus and maternal efforts to avoid of anxiety about fetal health/viability. During pregnancy, distancing from anxiety and idealistic fantasies about the baby s outcome may be common among previously infertile women. Postpartum, previously infertile women continued making significant efforts to avoid anxiety about infant health and SIDS, more so than the never infertile women. How all new mothers report their fears about their infant's health and well-being may be an important indicator of maternal well-being. For both groups prenatally and postpartum, there was a significant association between anxiety about the health of the fetus/infant and depressive affect. This suggests that pregnant and postpartum women with persistent fears about infant health and viability would benefit from extra support from healthcare providers, and should be screened for depression.

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#### First Mother-Infant Interaction Is Disrupted After Caesarean Section

*Heather Rowe, Jane Fisher (Australia)*

##### **Background and Objectives**

Rates of caesarean section are increasing, but there is little evidence regarding psychological consequences of operative delivery for infants or mother-infant relationships. This study investigated the effect of obstetric experience on first contact of mothers with newborns, and relationships with mothers' emotional wellbeing, infant sociability and temperament.

##### **Methodology**

A sociodemographically-representative sample of 203 first-time mothers recruited at four hospitals were interviewed in hospital and completed two standardized self-report psychometric mood questionnaires. Eighty one percent (163) were followed up 8 months later when they completed repeat self report mood questionnaires and a standardized infant temperament questionnaire.

##### **Results**

The First Contact Index (FCI) provides a measure of the first post-delivery mother-infant contact. Significant differences in FCI were found between three delivery groups ( $p < .001$ ) (spontaneous vaginal, instrumentally assisted and caesarean section) and four hospital groups ( $p < .001$ ), but a non-significant interaction effect ( $p = .554$ ). Poor first mother infant contact was associated with lowered maternal mood two days postpartum ( $r = -.279$ , 95% CI =  $-.41$  to  $-.16$ ), even within delivery groups, an association which remained at eight months postpartum ( $r = -$



.206, 95% CI = -.36 to -.03).

Poor quality first mother-infant contact was correlated with the mothers' ratings of their infants as more withdrawing ( $p=.041$ ), and, for the spontaneous vaginal delivery group, ratings of more difficult babies ( $p=.007$ ). There were no significant associations with mothers' ratings of infant sociability.

### **Conclusions**

Hospital practices associated with operative delivery affect the quality of early mother-infant contact, have persistent adverse maternal and infant correlates and are amenable to change.

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### **Motherhood Stories**

*Carol Gibb Harding, Arthur Safer (United States)*

The transformation to motherhood changes not only the daily lives and relationships of parents and children but also their life stories. How mothers are viewed by themselves, their families, and their cultures provides the context for human development. Motherhood stories across the lifespan (including stories from and about mothers) have been collected and analyzed as a way to examine an emergent cycle of motherhood. Although each motherhood experience is unique, this collection of stories allows general patterns to be detected and unique experiences to be placed in the social context of family and cultural development. In this poster presentation, motherhood stories collected over the last three years will be shared. In addition, patterns detected through thematic analysis will be used to present an emerging Cycle of Motherhood Transitions. Examples from representative motherhood stories will be used to describe patterns supported by related research literature.

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### **Validity of a New Meconium Assay to Detect Risk for Fetal Alcohol Syndrome**

*Joseph L. Jacobson, Sandra W. Jacobson, Cynthia F. Bearer, Dana Barr, Julie Croxford (United States), Anna-Susan Marais, Christopher D. Molteno, Denis L. Viljoen (South Africa)*

Fetal alcohol syndrome and related disorders are associated with a broad range of cognitive and behavioral deficits. Currently, there is no established biomarker to identify exposed newborns. Fatty acid ethyl esters (FAEEs) are nonoxidative metabolites of ethanol. FAEE concentrations in meconium have been reported to correlate with drinking during pregnancy, but the sensitivity of the assay used in that study was limited. This study assessed the utility of a meconium assay based on a more sensitive and specific methodology gas chromatography-tandem mass spectroscopy. Meconium samples were obtained from 27 infants from the Colored (mixed race) community in Cape Town, South Africa, who were enrolled in a longitudinal neurobehavioral study. Maternal alcohol use was ascertained prospectively during pregnancy. Ethyl oleate was the FAEE that correlated most strongly with maternal self-reported drinking, especially to amount ingested per drinking day. At a threshold of 3 drinks per occasion, the area under the ROC curve was 0.92. Using a cut-off of 32 ng/g, sensitivity was 84.2 and specificity 83.3, a marked improvement over the previous assay. Replication with a larger sample and with other ethnic groups is needed to ascertain the most reliable and useful cut-off. A valid meconium assay will facilitate delivery of targeted interventions for mothers and infants.

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### **Psychoanalytic Psychotherapy with a Three-Year-Old Girl Traumatized in Infancy by Neonatal Abstinence Syndrome and Being Parented by a Substance-Affected Mother**

*Nicola Lee Coombs (Australia)*

Babies born addicted to heroin are subjected to traumatic, intrusive bodily experiences and medical interventions. For some of these babies the trauma continues with the possibility of an unavailable, uncontaining attachment figure, distracted by the drug she is addicted to. This paper draws on psychoanalytic theory to develop a more in-depth understanding of an infant's experience of heroin withdrawal and the ongoing trauma of having a substance-affected parent. Daniel Stern's concept of "affect attunement" along with Wilfred Bion's maternal "container" and Melanie Klein's "projective identification" will be used to gain an understanding of

potentially pathological dyadic functioning when the primary caregiver is substance affected. Vignettes of a psychoanalytic psychotherapy of a three year-old girl are provided to gain an understanding of how this type of intervention positively affected her symptoms which were representative of infants born and raised in a substance-abusing environment.

196 The Relation of Prenatal Substance Exposure and Infant Performance to Later Cognitive Competence

*Vibeke Moe, Lars Smith, Kari Slinning (Norway)*

Forty substance exposed infants and 20 control infants were observed at several occasions in the first year of life, and again at 4 and 9. The children were foster placed at an early age. Gestational age (GA), parental SES, a cumulative abstinence/regulation dysfunction index (A/R DI), infant visual recognition memory (VRM) and Bayley performance served as first year predictor variables. Outcomes were measures at 4 years on the McCarthy, and at 9 on the WISC-R, the Wisconsin Card Sorting Test (WCST) and the Continuous Performance Test (CPT). At 9 the exposed children scored about a half SD below the mean on the WISC-R. SES bore a low relation to later intelligence, whereas GA was moderately related to later cognitive competence. The A/R DI bore a significant relation to McCarthy perceptual performance (PP) at 4, and to WISC-R IQ, as well as to errors of omissions assessed on the CPT at 9. VRM was related to McCarthy PP at 4 and to intellectual competence at 9. VRM bore no relations to the neuropsychological assessments at follow-up. The Bayley MDI at age 1 was related to later intellectual performance. Bayley performance was unrelated to the WCST and CPT at 9. The results suggested that the accumulation of biomedical risk factors associated with prenatal substance exposure was still a potential determinant of developmental problems up to age 9.

197 Methadone Maintenance and Mother-Infant Interaction at Six Months

*Tricia Ann Wouldes (New Zealand)*

Emotional expressivity and regulation was examined in 21 6-month old infants born to mothers on methadone maintenance and 39 non-opioid exposed infants and their mothers. Videotapes of emotional behaviour during Tronick's Face-to-face Still-face paradigm were coded blind using the Maternal Regulatory Scoring System and the Infant Regulatory Scoring System. Methadone infants spent significantly more time during the mildly stressful Still-face segment attempting to re-engage their mothers in social interaction than comparison infants (41.66 vs. 34.79). In contrast, non-opioid exposed infants spent a significantly greater percentage of time looking at proximal objects (33.53 vs. 23.02). Regression analyses revealed that rather than methadone exposure, a number of infant and maternal factors explained these outcomes. More emotional bids for interaction by methadone infants during the Still-face were linked to more emotional attempts to engage their mothers during the first segment of the Face-to-face paradigm and two maternal factors, the personality characteristic of Novelty Seeking, and a DSM-III-R diagnosis of amphetamine dependence  $F(3, 56) 7.44, p .001, R^2 .29$ . More time spent looking at proximal objects by the non-opioid exposed infants in the first segment and more maternal years of education were positively associated with the level of time spent looking at objects. Being born preterm and more maternal attempts at positive engagement during the first segment of the Still-face were negatively related to the time spent looking at proximal objects ( $F(4, 55) 8.48, p .001, R^2 .34$ ).

198 The Premature Baby's Behavior Development in the First Year of Life

*Elizabeth Batista Wiese (Netherlands), Daniel Mellier (France)*

Prematurity constitutes an exceptional situation for the children and their parents, as it implies too many vulnerability factors related to developmental difficulties. This longitudinal study investigated 21 premature babies, in France, using the Behavior Development Scale (Batista Pinto, Vilanova Vieira, 1997) during the first year of life. This scale considers the 64 significant behaviors of the first year, analyses the axial and appendicular, spontaneous and

stimulated, communicative and non-communicative behaviors, and indicates the rhythm of development of each behavior when it appears, normalizes (67) and stabilizes (90). We observed that in the premature babies: presented more behaviors at risk (38) than behaviors pathologies (14); the girls presented a statistical significant higher frequency of normalized and stabilized behaviors than the boys; the rhythm of the behavior development increased from the 3rd month; at the end of the first year there were 25 of non- acquisition from the total amount of behaviors analyzed; even when considered the corrected age, the group studied showed a retard in the acquisition of the stabilization of several behaviors, specially the Axial Spontaneous Non Communicative behaviors.

201 Children Born Preterm Are at Risk For Spatial Working Memory Deficits

*Stefano Vicari, Barbara Caravale, Giovanni Augusto Carlesimo (Italy)*

School age children and adolescents with history of prematurity have been shown to have specific cognitive disorders and, particularly, spatial memory deficits even in absence of major neurological disorders or global intellectual disabilities. These findings suggest that specific neuropsychological disorders may also be found in preterm subjects with low risk of developmental abnormalities. The aim of our study was to investigate spatial working memory abilities in pre-school children born preterm without evident brain disorders based on normal cerebral ultrasound findings and normal motor development. We evaluated 19 children born at a gestational age of 34 weeks or less in the same year (1998) and 19 typically developing children matched for IQ and chronological age. We investigated whether children at low risk for developmental disorders present spatial working memory difficulties early in life and whether memory deficits are a consequence of the attentional or perceptual disorders often reported in children with history of prematurity. Our results document that children born prematurely, without major neurological deficits and with a normal cognitive level, evaluated at three to four years, may have specific difficulty in sustained attention, visuo-spatial processing and spatial working memory. These findings suggest the possibility of detecting neuropsychological difficulties early in childhood even in preterm children at low risk and could lead to specific rehabilitative strategies to prevent learning and behavioral problem

202 Language Development of Very Low Birth Weight Infants (<1500g) at a Corrected Age of Three Years

*Daniela Roedder (Germany)*

Although improvements in medical care have reduced mortality in VLBW infants, several studies have shown a developmental delay in language expression for these infants. The aim of the study was to investigate receptive and expressive language development regarding the impact of biological and psychosocial risks at 3 years of age. 78 VLBW infants were examined with the "Sprachentwicklungstest f r zweij hrige Kinder" (SETK-2) and the "Reynell Developmental Language Scales III" (RDLS-III). Results showed that the mean scores for expressive language are below the average (T 50) in both tests. Regarding the severity of language delay, 25 (comprehension) up to 50 (expressive language) of the infants were significantly delayed compared to reference groups. The performance on language comprehension and expression was associated highly significantly with biological (p .001) but less with psychosocial risks. In conclusion one can say that VLBW preterm carry an increased risk for a developmental delay of language, especially language expression, and thus are at risk for later developmental problems. (Sponsored by DFG and Koeln-Fortune)

203 Creating Competence Under Stress: ResearchIng Parental Stress in a Dual Language Montessori Early Head Start Program

*Douglas Hinten Emch, Mary Ervollna, Tina Francis, Terry Hudgens, Keven Everhart, Robert N. Emde (United States)*

The objective for this study was to examine experiences of parenting stress in conditions of

poverty. Participants were forty low-income parents (1/3rd fathers) enrolled in a dual language Montessori Early Head Start program. The parenting stress index (PSI) short form, a 36 item standardized survey, was used. The PSI is a self-report instrument that measures parental distress, the parent-child dysfunctional interaction, and perceptions of a difficult child. An additional question regarding accessing mental health services was also included. Results were compared to a U.S. national database of 1500 parents involved in Early Head Start programs, which included the parental distress and the dysfunctional interaction sub-scales of the PSI. The results indicate that program parents felt more competent than the national sample in their parenting skills, rating themselves as "better than average" parents. The sub-scales were comparable between the two groups, with averages for the program parents of 59.3 percent and 40.9 percent on the parental distress and dysfunctional interaction sub-scales respectively. Results of the study were shared after completion, in anonymous fashion, with the program staff. Implications of a University-program partnership are described in which staff was able to use results to implement positive changes for families as well as to improve mental health services that foster parental competence and coping with stress.

- 204 The Place of the Baby, Growing Up in a World of Deprivation: Development and Intergenerational Transmission of Attachment in a Population of Extreme Poverty  
*Greet Geenen, Josef Corveleyn (Belgium)*

The ongoing study, conceived as multiple case design, explores intergenerational transmission of attachment in a Belgian sample living in extreme poverty for generations. Multi-problems of parents are transferred to children in an almost unbreakable chain. Although much research has documented the negative effects of poverty on psychological child development, little research has been done on psychological aspects of the intergenerational reiteration of problems, on which this project focuses on the basis of attachment theory and psychoanalysis. In poor samples, especially the baby is at risk. From early on, he is exposed to stressful events associated with a life in poverty, being totally at the mercy of caregivers who are living from one crisis to another. His psychological loneliness is often only late detected. Then much devastating effect has already taken place on personality development, in which the first 2 years play a crucial role. We visit poor infants aged 0-2 and their (grand)mothers at home several times. Research methodology consists of interviews (AAI, ORI), observations (AQS, video of free play and instruction, to score on EAS) and questionnaires (CBCL CTRF -5). Because of specific interest in mentalization as mediating factor in the intergenerational transmission of attachment, we especially focus on the place the baby has in the mind of the mother, by using RF scale on AAI and D-R scale on ORI. Results can guide prevention programs to break through the ongoing chain of multi-problems and give to the baby a place to develop freely.

- 205 Parents/Baby Psychotherapy with Asylum Seekers in the Netherlands  
*Elizabeth Batista Wiese (Netherlands)*

Parents/baby psychotherapy with asylum seekers in The Netherlands Elizabeth Batista Wiese Immigration became an important issue in Europe after the II World War but, in the last years, thousands of people sought refuge and protection in Europe. The Netherlands, sensible to this situation, is considered as a country that accepts multiculturalism as the ideal policy. Refugees come from a variety contexts, with different socio-economic, cultural and political backgrounds. A conservative estimation points about 4,000 ethno- cultural groups worldwide. Integration has to be understood as an interactive process of change that involves both refugees and people of the host society, considering: democratic participation, equal opportunities and rights, and the acceptance of cultural diversity in an atmosphere of mutual respect and tolerance. Considering the importance to give support to asylum seekers children and their families, the mental health care at Helaarhof, GGZ Den Bosch, in The Netherlands, includes parents/baby psychotherapy as one of the possible treatments offered to this population at risk. In this presentation we describe

the importance of parents/baby psychotherapy in the mental health care of this population, and discuss the relationship between the sort of trauma exposure, type and degree of the psychological distress of the parents and the implications to parents/baby interaction and to the behaviour and psychofunctional symptoms of the child. e.wiese@gzshertogenbosch.nl

206 9/11: The Effects of Terrorism on Children Less Than Age Six Years

*John Daniel Klinzel, Michael Cramer Thomasgard (United States)*

In the days following the 9/11 tragedy in NYC volunteer Disaster Childcare(DCC)workers provided care for the young children of families whose loved ones had died in the World Trade Center collapse. This pilot retrospective study surveyed 93 DCC workers in order to address three objectives: To what degree were criteria for Traumatic Stress Disorder (TSD) of the Diagnostic Criteria: 0-3 endorsed for such children; What patterns were evident in how parents/caregivers interacted with their children, and; What were the emotional/behavioral responses of the DCC providers Response rate was 71 . DCC workers cared for a mean of 45 children aged 0-3(Group A)and 56 aged 3-6(Group B. In Group A, 44 had no TSD symptoms, 25 had separation anxiety, 17 withdrawal or hypervigilance. In Group B, 46 had no symptoms, 22 hypervigilance, 15 separation anxiety and 10 startle response or withdrawal. Parental behaviors noted were Distress (74 ), Difficulty Separating(48 ), and Checking In to see if child safe(44 ). DCC Providers reported High Emotionality(28 ), need to Share Experiences(20 ) and Sleep Disturbance(13 ) upon return from NYC. Implications for future research and practice are discussed.

207 Growing up in Australia: The Longitudinal Study of Australian Children

*Graham Vimpani, Ann Sanson (Australia)*

Growing Up in Australia is a new national study of children's health, development and wellbeing. It will follow two nationally representative samples - 5,000 infants and 5,000 4 year olds - over the course of eight years. Adopting an ecological model of development, it aims to provide comprehensive data on all the important domains of a child's life their experiences within their families and communities, their physical and mental health, their child care experiences and the early years of their education. The sample will be selected from the Health Insurance Commission (HIC) Medicare database, the most comprehensive database of Australia's population, with clustered design based on postcodes. Funded by the Australian government through the Department of Family and Community Services, Growing Up in Australia represents a major investment in collecting longitudinal data with the explicit aim of informing policy and practice around early childhood health and development. It is being implemented by a consortium led by the Australian Institute of Family Studies and including researchers from nine other research institutions. This presentation will focus on the broad research questions to be addressed, especially those relating to influences on infants' and children's mental health. The presentation will also discuss the hard choices that need to be made in an omnibus study such as this between desirable and essential items for inclusion, including the debate around the collection of biomarkers of stress, such as salivary cortisol.

208 Parental Efficacy and School Readiness: What Are the Connections?

*Angela Nievar, Holly Brophy-Herb, Hiram E. Fitzgerald, Marissa Diener (United States)*

Variation in children's home experiences are likely to cause some children to be better prepared for the transition to school than others (Bradley Corwyn, 1999). Variation in parenting behaviors may be partially explained by Bandura's self-efficacy theory, which states that parents' beliefs about the connection between their efforts and the desired outcomes affect their motivation to act (Bandura, 1982). This study will examine the relations of parental efficacy to children's school readiness, mother-child attachment, parenting stress, and home environment, controlling for the type and amount of child care, preschool, or early intervention program. We

will also examine the validity of a measure of parental efficacy, the Parental Involvement and Efficacy measure (PIE). A factor analysis of the 18-item PIE yielded two scales of interest, school readiness (alpha .69) and efficacy (alpha .65). In a preliminary examination of the data, beta coefficients for maternal education (.25) and the school readiness factor (.23) indicated that higher levels of maternal education and a belief in the importance of school readiness were significantly related to positive home environments (r-sq .20, df 2, n 130).

- 211 The Use of Eroticised Transference and Countertransference in the Psychodynamic Treatment of a Seven and a Half-Year-Old Boy

*Jennifer Anne Carver (Australia)*

The concepts of eroticised transference and eroticised countertransference in child psychoanalytic psychotherapy have received little attention in the child psychoanalytic psychotherapy literature. An interest in exploring the meaning of these concepts grew from the author's experience of working long term within the psychoanalytic framework with a seven and a half year old boy. By utilising a single case study method, extrapolating from the adult psychoanalytic literature and analysing the key themes in three years therapy with this child, it was possible to link eroticised transference with pre-Oedipal sexual abuse and the development of perversion. Working with a child without involving the child's family in the therapy is controversial within the field of child psychiatry. Reasons for this are discussed. Liaison with the child's school therefore became the main and essential systemic link. Therapy enabled this child to relate to others as a whole person rather than as a part object and allowed him to get back on the track of more normal psychosexual development. Therapy may have prevented the development of further psychopathology such as paraphilias. Therapists engaged in this type of work should be aware that powerful sexual feelings could be evoked in them when working with a child with a perversion. This points to the need for both therapy and supervision for the therapist.

- 212 Gender Differences in Neonatal Behavior

*Carme Costas, Elisabet Boatella, Francesc Botet, Albat Fornieles, M. Lusia De Caceres (Spain)*

GENDER DIFFERENCES IN NEONATAL BEHAVIOR Costas, C., Boatella, E., Botet, F., Fornieles, A. De Caceres, M.L. Faculty of Psychology. Autonomous University of Barcelona, 08193 Bellaterra (Barcelona). Spain. c.costas.retemail.es Our purpose is to analyze the role played by the differences in the sexes (chromosomal, hormonal, etc.) on neonatal behavior. In this aspect, it is already known that the hormonal differences of both sexes are relevant in determining the sexual dimorphism in the encephalon; therefore, it is plausible to suppose that there are also differences on a behavioral level. Our study is based on a sample of 87 boys and 102 girls healthy full-term newborns. The evaluations were performed with a Neonatal Behavioral Assessment Scale, NBAS. This exam and all other examinations were conducted without the examiners knowing the objective of the study. We have found significant differences in 4 of the 34 behavioral items of the NBAS. According to these data, girls are more capable of directing their attention to human voices, and they have greater ability than boys of self-regulation, i.e., to control their own state so as to respond and protect themselves in the face of environmental stimulation. We consider that discovering the origin of the peculiarities of the reactional profiles of boys and girls can help parents, as well as early care professionals, to better understand development and, therefore, improve the measures of intervention.

- 213 Genes and Environment: Development and Anorexia Nervosa

*Fiona Wagg (Australia)*

Results of a literature review will be presented, identifying what is known about the role of genes, temperament, attachment and developmental experience in the emergence of anorexia

nervosa; and discussing changes in brain function, emotional expression, cognitive processing and attachment patterns in the course of illness. A model of anorexia nervosa, integrating neuropsychiatric and developmental perspectives is proposed. The model will be illustrated with examples from clinical work.

214 Bringing Clinical Best Practice into Communities with a Web-based State Practice Model

*Janet Elizabeth Wade, Kristina Hlndert (United States)*

This poster will present the result of an innovative, unfunded, community collaboration that developed a State Practice Model to bring clinical best practice into all communities in Utah. This community driven model was developed by over 200 stakeholders over a two-year period with the intent of creating a model that could be adopted by all those who impact the lives of children ages 0-5. The poster will describe how the model supports communities in using promotion, prevention, and intervention strategies whilst creating linkages between traditional service areas and roles. The poster will highlight the web-based resources developed to support the implementation of this practice model and the use of video conferencing to ensure representation from all areas of the state.

215 Primary Maternal Preoccupations

*Nic Morrey (Australia)*

This study attempts to illustrate, identify and summarize the complex nature of attachment between the mother and her infant via her thoughts, actions and representations. It investigates primary maternal preoccupations (Winnicott, 1956) categorised as excessive thoughts about the infant, her exclusive focus, affiliative behaviour, compulsive checking and level of anxiety. Findings are presented from a maternal attachment assessment measuring proximal (e.g., mother-infant interaction) distal predictors of attachment security (e.g., parental psychopathology) as well as maternal representations.

216 Totally Terrific Tidbits for Teachers of Tiny Tots: Using Knowledge of Developmental Milestones to Arrange Infant Environments, Plan Play Experiences and Enhance Learning Potential

*Louise H. Boothby (United States of America)*

Description: This presentation offers an opportunity to learn how to set up play experiences for infants and their caregivers in home and group settings through an understanding of developmental milestones. It would be beneficial to attendees who believe in the following assumptions: - Infants are Social Creatures Who Thrive on Interactions with Adults and Other Infants - Milestones of Growth and Development Are Useful for Planning Play Opportunities - Infants Learn Best Through Environments That Support Sensorimotor Experiences Summary of Content: This presentation offers attendees an opportunity to learn how to observe infants during sensorimotor (whole body) play experiences with significant adults and peer infants. Since knowledge of child development is the primary variable denoting quality when caring for infants and young children, an emphasis will be placed on infant milestones and their relationship to setting up optimal early learning environments. Infants need to be active participants in their play with their first teachers who understand their needs, respond quickly and react responsively. Format: - Introduce Anna Freud's Theory and Bronfenbrenner's Ecological Model - Illustrate Quality Infant Environments In Home Group Settings - Demonstrate Infant Developmental Milestones - Give Examples of Environmental Supports - Ideas to Support Early Literacy - Conversation Information Sharing with Presentation Attendees

217 Suck: Voices From the Interior - A Fine Art Exploration of the Parent-Infant Experience

*Sophia Xeros-Constantinides (Australia)*

SUCK: VOICES FROM THE INTERIOR A FINE ART EXPLORATION OF THE PARENT-INFANT EXPERIENCE. Xeros-Constantinides, S., Maroondah Hospital Child Adolescent

Mental Health Service, Ringwood East, Victoria, 3135, Australia. [rastru.unimelb.edu.au](http://rastru.unimelb.edu.au) This fine art exhibition has been curated for the 9th World Congress of WAIMH. The curator brings to the project a background in mental health, mother-infant work, and training in the visual arts. The proposed group exhibition comprises drawings, paintings, photographs, collages and installations created by established and emerging Melbourne artists. The show explores the early, significant relationship between parent and child. The title of the exhibition, Suck: voices from the interior, references the focus around the feeding relationship which governs early life and determines survival in babyhood and beyond. There are enormous changes occurring in technology and medicine that challenge the boundaries of family and self. This is reflected in much contemporary art-work, witnessed as a resurgence in representations of the self, the body and reproduction. Works by Mueck and others emphasise a relational component to identity and experience. This exhibition traverses such territory, and presents for Congress delegates a unique visual journey. Some works are literal in their message, showing pregnancy, birth, baby and feeding paraphernalia. Other works are more enigmatic or conceptual, referencing other dimensions of the experience, such as feeling-states, vulnerability and questions of identity, ambivalence and loss.

218 Early Development of Children with Down Syndrome

*Jun-ichi Ito (Japan)*

Nowadays, most of the children with Down syndrome are receiving early intervention in Japan. We studied the characteristics of the early motor and intellectual development of 82 children with Down syndrome. Congenital heart disease (CHD) or epilepsy has serious influence on their development. Crawling on their back or bottom shuffling causes the delay of walking start. The percentage of the children with such atypical infantile movements is high in children with CHD. According to the multiple regression studies concerning children without CHD, developmental milestone of the girls is faster than the boys. Not only motor development but also some environmental factors, such as maternal age or the existence of the elderly brothers and sisters, also have some impact on the intellectual development. Comparing with the Japanese reports of 30 years ago, we found that the motor development has accelerated statistically. We estimate that the early intervention and habilitation are important for the development of children with Down syndrome. Furthermore, they might have preferable consequence on their families.

218A Children Adopted from China: A Prospective Study of Their Development

*Nancy Cohen, Mirek Lojkasek, Mirella Pugliese, Zohreh Yaghoub Zadeh (Canada)*

The objective of this study was to examine the growth and development of infants adopted from China from their arrival to Canada to 6-, 12-, and 24 months post-arrival. Fifty infants adopted from China and 19 comparison infants were examined on measures of growth, cognitive, motor, language, and social-emotional development. Results indicated consistent gains for the adopted infants and their development at 12 months post-arrival was similar to that of Canadian comparison children on measures of cognitive and social development, and receptive language. However, the adopted infants continued to be smaller in height and head circumference and were less well developed in motor and expressive language skills than comparison children. Anecdotal report, but not questionnaire data, suggested that some of the adopted children continued to struggle with issues related to secure attachment. Although data suggest that children adopted from China make gains in their first year in Canada, nevertheless, for a small proportion of children delays persist in some areas as do signs of insecure attachment. Continuing to follow this sample is important, as it is essential to provide valid information for adoptive parents, agencies, and professionals. Understanding the growth and development of these children is also important for developmental science.

218B The Development of a Self-Report Scale of Parental Caregiving: An Attachment Perspective

*Andrew Stewart (Australia)*



Adult attachment and caregiving patterns are hypothesized to be linked through the same underlying mental representations of anxiety and avoidance, where caregiving representations are a mature transformation of one's attachment representation. While many self-report scales have been developed to assess individual differences in adult spousal attachment patterns, no such scales have been developed to assess adult caregiving patterns in parent-infant relationships. Further, infant attachment research that has examined caregiver factors has primarily focused on behavioral indices of caregiver sensitivity. The aim of this study is to develop and validate a self-report scale to measure the content domain of caregiving patterns in parent-infant relationships beyond the traditional focus on caregiver sensitivity. The development of a self-report scale of parental caregiving patterns will enable further examination of caregiver factors that influence the quality of infant attachment.

218C The Childhood Portrait, the Gaze & the Invitation of Memory in the Therapy Environment.

*Caroline Williams Mora (Australia)*

*The image that moves us all is that of the wondrous child, an entity as yet unrealized and unresolved.* When we look at a painted portrait our responses are activated by both the interpretation, and the image itself. We all have opinions about how a person looks and how a portrait interprets them. A portrait allows us to 'objectively' examine 'someone' with full permission. Children are intensely interested to see other children and images of other children. The childhood image of a known adult, a hospital staff member or someone famous and familiar in the lives of the children and their families, will invite recollection, memory and curiosity...memory and recollection from the adults...plus curiosity from the children...and identification for all parties. This memory affect can offer the parents a line of communication to their babies and toddlers via memory and the portrait. The children can see, recognize and identify with adults [staff members or T V actors, *names to be included later*] as children like themselves. They can respond to the paintings, as there is no taboo against staring at and examining a painted image. The painting is a safer visual channel of response and feeling. The visual then leads to the verbal. The painting are hung in the therapy area and are portable so that staff members can move them around - to the therapy room, waiting room/play area, etc. When children or parents respond the paintings can be used as aids in their therapy. Thus the families are included in the interaction. A 'comments' book can be kept as documentation of the responses to this approach. A brief survey of childhood portraiture from the antique to the present will introduce this study of a cross-disciplinary approach to visual aids in child therapy.

220 The 3 R's of Therapeutic Intervention

*Arnold Sameroff (United States)*

The transactional model has implications for the treatment of relationship problems, particularly for identifying targets and strategies of intervention. The nonlinear premise that continuity in individual behavior is a systems property rather than a characteristic of individuals provides a rationale for an expanded focus of intervention efforts. In the model there is an emphasis on the multidirectionality of change while pinpointing regulatory sources that mediate change. By examining the strengths and weaknesses of the childrearing system, categories of targets can be identified that minimize the necessary scope of the intervention while maximizing cost-efficiency. In some cases small alterations in child behavior may be all that is necessary to reestablish a well-regulated developmental system. In other cases, changes in the parents' perception of the child may be the most strategic intervention. In a third category are cases that require improvements in the parents' ability to take care of the child. These intervention categories have been labeled: remediation, redefinition, and reeducation, respectively, or the of intervention.

221 Interaction Guidance: Promoting and Nurturing the Caregiving Relationship

*Susan C. McDonough (United States)*

The Interaction Guidance (IG) therapeutic treatment model incorporates principles of a family system theory into a multigenerational transactional preventive intervention. The resulting approach focuses therapeutic treatment on the infant-caregiver relationship rather than either on the infant or the caregiver alone apart from the environmental context. Observable interactions between baby and caregiver serves as the early therapeutic focus and, as such, serve as the therapeutic port of entry. Caregiver interactions with the infant are understood both as reflection of family structure and caregiving nurturance and as a reflection of the caregivers and baby's representational world. The use of videotape in treatment allows for immediate feedback to the parent(s) or family regarding their own behavior and its effect on the infant's behavior. The Interaction Guidance treatment approach was created specifically to meet the needs of infants and their families who previously were not successfully engaged in mental health treatment or who refused treatment referral. Many of these families could be described as being "overburdened" by poverty, poor education, family mental illness, substance abuse, inadequate housing, large family size, lack of a parenting partner, or inadequate social support.

222 The Primary Triangle: Treating Infants in Their Families

*Elisabeth Fivaz-Depeursinge (Switzerland)*

This presentation will center on a new method of structured therapeutic assessment of family relationships based on a developmental systems approach. It evolved from a program of research on the development of triangular, namely three-person relationships between new parents and their first child. The project aimed in particular at designing a method of therapeutic assessment for families with parental psychopathology around birth and through early childhood. It was extended to systems consultations for therapists and other professionals working with infants suffering functional problems and their parents. Lately, the model was used in training professionals in a nation-wide early childhood psychiatry program in Israel.

223 Therapeutic Relationships in Infant Mental Health and the Concept of Leverage

*Robert N. Emde, Brian K. Wise (United States)*

All mental health interventions involve the effects of relationships on other relationships. This is so whether we are focusing on current relationships or on future relationships, and it is so whether we are focusing on behavior or on the representational world. Traditional psychotherapy is generally referred to as a relationship based form of intervention, meaning that the intervener and client establish a working relationship with a shared goal of greater understanding so that there can be less suffering and more behavior that is adaptive and satisfying. What is less often appreciated is that traditional individual psychotherapy involves a goal of having the working (i.e. therapeutic) relationship influence sets of other relationships. The other relationships are both represented and actual. Additionally, a goal is to influence the client's current world of everyday social relationships (so as to generate interactions that are more flexible and less self defeating). It is with these considerations that we have introduced the concept of leverage of identifying the best opportunities for engaging therapeutic or preventive change in a relationship that is embedded in a network of other relationships. In infant-parent psychotherapy the infant's rapid development acts as an enormous incentive for development in the parent, the parenting relationship and beyond.

224 Lessons from STEEP: Linking Theory, Research, and Practice

*Bryon Egeland, Martha Farrell Erickson (United States)*

In this presentation, drawing on 16 years of experience implementing STEEP, we discuss a preventive intervention program that reaches out to expectant parents and provides ongoing home visits and group support and education through the early years of the child's life. First we discuss the theory and research that guide the program, with an emphasis on attachment theory

and our own longitudinal findings regarding the developmental antecedents and consequences of good parent-infant relationships. Then we describe in detail the principles, goals and strategies that define the STEEPTM program. And finally, with an eye toward extending the application of this research, we discuss what we have learned about the critical ingredients and conditions for effective implementation of such a program.

226 Symposium 14: C1344 Identifying subtle Brain Changes in at-Risk Neonates and Relationships with Outcomes

*Carol Newnham (Australia)*

The three papers to be presented in this symposium will illustrate the extraordinary sophistication of current and still-developing Magnetic Resonance Imaging (MRI) and Advanced Electroencephalography (EEG) bedside techniques, and the ways in which these brain images can be analysed, understood and used to show how specific areas of the brain are developing or have experienced insult. We plan to investigate long-term outcomes of babies scanned in the neonatal period to identify the process, timing, outcomes, protective and risk factors associated with normal and abnormal perinatal brain development. The cutting-edge technologies and associated research to be described in this symposium have the potential to (i) identify abnormalities in brain structures at the earliest possible time, with a view to starting interventions while optimal development (and malleability) is still possible, and (ii) identify logical, rational interventions in terms of drug, medical technology and environmental adjustments, that will ameliorate or prevent abnormal brain development. Those who work with children at risk for, or currently experiencing, emotional, behavioural, social and cognitive difficulties will be interested in this highly technical area of investigation and intervention, aimed at early identification and/or reduction of their workloads.

228 The Relationship of Advanced EEG Measures to Brain Hemorrhage in the Premature Infant

*Connie Wong, Terrie Inder (Australia)*

Intraventricular haemorrhage (IVH) is a relatively common occurrence in very preterm infants. It is a factor which increases the risk of cognitive, motor and behavior problems in these babies. Cranial ultrasound is the imaging method currently used to detect IVH in infants in the Neonatal Intensive Care Unit, although its hit rate is not perfect. The aim of this study was to compare ultrasound measures with advanced electroencephalogram (EEG) as a means of identifying an alternative way to detect the presence and severity of IVH. Seventy-eight premature infants (median birth weight = 970 grams, SD=191 grams) who were born in 2001 and 2002 were routinely given an ultrasound within 72 hours, and at least 7, 14 and 42 days of birth. EEG recordings were taken on days 4, 7 and 28. Each recording lasted two hours. The signals were analyzed off-line using customized software. The results indicate that advanced EEG measures are not significantly altered in the presence of IVH as measured by ultrasound. However retrospective examinations of these images, after long-term follow-up of these children, may identify advanced EEG signal abnormalities in the children who subsequently develop problems that are consistent with the presence of IVH.

229 The Role of the Neuroendocrine System in Preterm Brain Development

*Rodney Hunt, Lex Doyle, Terrie Inder (Australia)*

There is increasing evidence that a number of hormones have a critical role in both structural and functional brain development. The placenta provides a rich source of these hormones until the time of delivery. For the very preterm infant, there may be a relative lack of such hormones until term corrected. The aim of this study was to describe the hormonal profiles for thyroxine, estradiol and progesterone in a cohort of infants born less than 30 weeks gestation. 100 such infants were recruited and blood collected weekly from birth until six weeks of age. We demonstrated a relative lack of these hormones in the preterm infant. Specifically, more than 80% of preterm infants experienced a transient decrease in thyroxine levels. Serum levels of the

sex steroids, estrogen and progesterone, fell dramatically within 24 hours of birth and remained extremely low for the first six weeks of life. The difference for preterm infants compared to fetuses of the same gestation was highly significant. Study infants had magnetic resonance brain imaging at term corrected. Post-acquisition analysis of these images allowed determination of volumes of various cerebral structures. Comparison of the brain structure was made with a group of term controls. Preterm infants had significantly smaller brain volumes than their term counterparts. Associations were sought between hormone levels and brain structure. We speculate that the relative deficiency of hormones in the preterm baby has an impact on postnatal brain development, and potentially on subsequent brain function.

230 The Baby as Subject: Clinical work with Infants and  
Parents at the Royal Children's Hospital, Australia  
*Frances Thomson-Salo*

This symposium will describe the guiding principles of the clinical work with infants and families that has been practiced at the Royal Children's Hospital, Melbourne for 20 years, and is the foundation of the work of its Infant Mental Health Program. Senior clinicians will present videotaped clips illustrating a spectrum of their work including infant-parent psychotherapy, both in-patient and outpatient. It is hoped to capture some of the moments of change in the therapeutic process and in discussion to understand better why we say what we do when we do, and what helps infants and their parents use what the clinician offers. This way of working has its roots in the need to find ways to help distressed infants who have been admitted to the hospital in a medical crisis, as well as their parents. The theoretical base can be traced to Winnicott, Fraiberg, and others. Playful engagement and psychotherapy directly with the infant in the context of work with the family and the broader system is seen as critical for the best outcome for the child (Paul, 2003). The clinician relates with intentionality to the infant and parents, seeing the infant as a subject. The clinician brings their playfulness, and integrative thinking, shaping their interventions for each infant-parent dyad. The following topics will be discussed: Taking account of the parents reflective function The timing of the intervention The therapeutic factors in successful interventions Is playful interaction what carries the moment of change

232 Intention Relating to the Infant as Subject in an Exploration of Not-Knowing  
*Ann Morgan (Australia)*

The clinician relates to the infant and his parents as an alive other in the sense described by Trevarthen and Anne Alvarez. Drawing on the comment of the psychoanalyst, O.H. D. Blomfield, that you look at an infant with already knowing eyes while knowing absolutely nothing about the infant in front of you, the presenter will describe how she came to feel that it was important that the infant is regarded as a subject in his own right, and not to be objectified. He therefore has an equal right with all other participants in the therapeutic process to be attended to fully. The presenter will also describe how she came to feel that a core principle of infant-parent psychotherapy is to be with the infant, preferably in the presence of the parents and as part of the work with the family. With the infant present, the work is focused more on the infant-parent relationship, rather than on the parent or the infant. The clinical work described will confirm the need to respect the infant even from a few weeks old within the therapeutic

233 Containment and Transformation Through Playfulness and Thoughtfulness  
*Campbell Paul (Australia)*

Holding the infant in therapy - holding him in our mind and speaking directly with him - is of critical importance in some infants' recovery. The clinician engaging the infant, even in a brief moment of enlivened play, when witnessed by his parents, can lead to a transformation in the way they experience him in their mind. For some parents, the infant may be seen as so damaged that the clinician's intervention can help the parent see their infant as alive and that

there is a point in hope for his survival. They can then feel that their pain and grief can be contained for their own sake and that of their infant. Here the clinician contains confusion and distress and in making sense out of these feelings, brings about a moment of transformation of the feelings, of understanding, of linking, of acceptance, of hope. There is then the possibility that the transformation similarly takes place in the parents' mind and in the infant's. The presenter will show a videotape of work with a 7- month old infant where there was at some level a degree of hate as he was a replacement child for a boy baby who had died. The enlivened play was intuitively shaped to what that infant needed at that moment in time and came out of a personal wellspring of spontaneity and care.

234 Creativity in the Clinician's Work Underpinned by Thoughtfulness

*Brigid Jordan, Michele Meehan (Australia)*

Sometimes the clinical work in the hospital places considerable pressures on clinicians to be responsive in terms of time "to be flexible enough to fit patients into an already very packed schedule and to work fast, sometimes in a very short space of time. Clinicians need to trust that they can think in a reflective enough manner in the heat of the moment and also continue to find thinking time subsequently. They need the flexibility to do this kind of work alongside out-patient work after the infant is discharged home. The presenters will describe a 13 month old infant with feeding difficulties whom they had seen in therapy with her mother since she was 3 weeks old. She had been resistant to taking oral food and then to progressing from naso-gastric feeding to self-feeding without the tube. One paediatrician was about to recommend the surgical intervention of a gastrostomy. In a creative attempt to respect the little girl's defences but help her find her pleasure the presenters decided to make an interpretation in play by taping a tube to a doll's face and offering the little girl the toy feeding bottle. She instantly understood that her need to be in control was respected and with pleasure she began to take some developmental steps forward. The mother is very grateful for this work which she feels prevented surgical intervention and wishes it to be more widely known.

236 Workshop 16: Florida's Infant Mental Health Strategic Plan: A Framework for Developing Services and Training Into a Variety of Contexts

*Mimi Graham, Barbara White, Anne E. Hogan, Sandra Adams, Linda Traum, Cindy S. Lederman, Joy D. Osofsky (United States)*

Florida has successfully developed a statewide plan for infusing infant mental health throughout programs for young children. This comprehensive view of promoting infant mental health addresses a variety of community contexts in which infant-adult relationships and caregiving settings are embedded. The multidisciplinary team of presenters will present various statewide efforts used to address practical application of core principles of infant mental health in childcare, child protection, healthcare, home visiting, and early intervention systems. This session describes Florida's infant mental health plan (prevention, screening, training, evidence-based practices, policies), the status of implementation, and the variety of trainings designed to incorporate basic concepts of infant mental health. Attendees should find practical value in this session for enhancing their effectiveness in reaching program goals for infant mental health by creating a supportive climate for the emotional development of babies and their families.

238 Prediction and Reconstruction of a Child's Developmental History

*Lynn Barnett (Great Britain)*

Detailed observation and filming of one child...

239 The Prince: A Computerized Clinical Chart for Infant Mental Health Units

*Miri Keren, Sam Tyano (Israel), E. Aidane, D. Rabain (France)*

The need for comparing clinical data for diagnoses and treatment issues in cross-cultural epidemiological studies is growing while infant mental health units multiply around the world.

Also there is an increasing need to show the content and the rationale of our therapeutic ongoing work to other professionals. We are also expected to show the efficacy of our clinical routine work. These various needs motivated us to develop a clinical computerized chart, potentially useful for collecting and comparing clinical data in Infant Mental Health Units. The rationale of this semi-structured software was to create a tool that is friendly, easy to use and flexible enough to allow units from different places to work in a standardized manner but at the same time to keep a potential space for adding “free text” and introducing changes. The rationale of its content was to reflect a multidisciplinary conceptualization of infant mental health in psychodynamic as well as in nosological terms. We suggest presenting it as a workshop where both the containers, i.e. the software, and the content of the chart will be illustrated by a clinical case.