Promise and Peril in Pregnancy

and Early Infancy-Relational

Foundations

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### Every child's birthright



\* Joy

\* Delight

 Secure relationships

 Opportunities to learn and grow in a safe environment

### Parenting as the Mechanism for **Childhood Adversity**

Adverse Childhood Experiences (ACE): • Emotional, physical or sexual abuse Domestic violence against the mother Household member with mental illness Household member with substance abuse Household member ever imprisoned

Predict 10 leading causes of adult

death/disability (ACE Study, Felitti et al. 1998)

Childhood Adversity Predicts Future Dysfunction

- Physical Illness
- Mental Illness
- School Failure
- Aggression
- Substance Abuse
- Criminal Behavior

 (Cook et al., 2003; Felitti et al., 1998; Pynoos et al., 1999)

#### The Birthright: Relationships that are Central to

#### Development,



 Each child deserves to be "Seen and Held" and to have caregivers who are crazy about him/her. Relationships are dynamic processes over time for

#### both promoting optimal development & healing

#### early adversity



### Pregnancy-The Prequel-No Ordinary Time – Relationships

### in the Making



# Fantasy of Love and New Beginnings



## **Realities of Pregnancy**



- Relationships are shifting
- Resources are needed
- Identify is confused
- Existing concerns
   like depression/anxiety/
   PTSD can be amplified

# Complex Processes Related to Relationships

- Pregnancy may awaken negative feelings about self and relationships that impact maternal identity
- Descriptions of relationships in pregnancy can predict security of attachment at the end of the first year of life. (Zeanah & Benoit)
- Relationship with mother particularly important in terms of identity consolidation

# Factors across cultures that increase risk for depression

- Past episodes of depression, anxiety,
- PTSD/trauma
- Family history of depression or other mood disorder
- Ambivalence about or unplanned pregnancy
- Pronounced fear of childbirth

- Low SES/chronic stressors
- Low social support or marital satisfaction
- Significant loss or life stress in the last year
- Infant temperament; health/obstetric problems; multiples
- Beck, 2001; Goldbort, 2006; Gorman et al., 2004; Zayas, et al.,2002

Higher Incidence of Depression & other Mental Health Concerns

 Low income mothers of young children, pregnant and parenting teens report depressive symptoms in the 40 – 60 % range

(Knitzer, et al, 2008)

23% of women with PPD had symptoms that began in pregnancy

Depressed mood in pregnancy associated with poor attendance to prenatal visits, substance abuse, low birth weight and pre-term delivery



## Early Relationships and Emotion Regulation



Experience of positive emotion helps infants to organize their experience

 Infant-caregiver face-toface interactions help baby learn to regulate emotions particularly in the context of face-to-face interactions

Cole, Michel & Teti, 1994

#### **Biology & Environment** Work together to shape the brain.



### Plasticity-The Good News

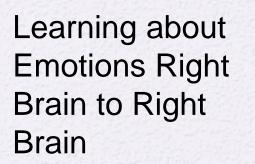
The brain's ability to change as a result of experience. Relationships are a series of experiences.



## The Bad News. Babies Can Suffer in Relationships and the

### Impact can Last..







## Affective Transmissions in Mutual Gaze Transactions

#### attunement

- reflecting internal state
- moment-to-moment matching of affective direction
- important for joint attention
- precursors of attachment
- Precursors to moral development

## Babies need presence to learn

 Patricia Kuhl, at the University of Washington, found babies had a unique ability to learn a foreign language

 But when the babies listened to language tapes, without an emotional connection, they treated it like a sound from a vacuum cleaner www.youtube.com/watch?v=G2XBIkHW954

### **Brain Development**

• Myelination of prefrontal cortex occurs with engagement in purposeful back and forth interaction

Neuroimaging shows emotionally meaningful learning interactions involve many more areas of the brain than circumscribed discrete skill-based exercises

# Infants can infer what others are thinking about

Andrew Meltzoff, at the University of Washington, studies how babies follow the gaze of adults to find out what they are thinking

- By 10 months, babies use gaze following to understand the minds of others
- Babies who were not good gaze followers by their first birthday, had less advanced language skills by age 2 21:24
   www.youtube.com/watch?v=AlY8DndJubo

## Parent Infant Interaction: Still Face Paradigm



- By 3 months, infants actively engaged in monitoring how people relate to them
- How they feel and what they will do next
- swww.youtube.com/w atch?v=Btg9PiTosZg

### Mirror Neurons

 http://www.youtube.com/watch?v=XzMqPYfe A-s

## **Co-Regulation**

#### Sense of shared experience

 Helps the child with feelings of being out of control or at the mercy of his own impulses

 Interpersonal contingency creates internal coherence and a sense of agency

## Quality of Mother-Infant Interaction

In the still face paradigm, infants of depressed mothers showed:

--less interest

--more anger and sadness

--greater tendency to fuss

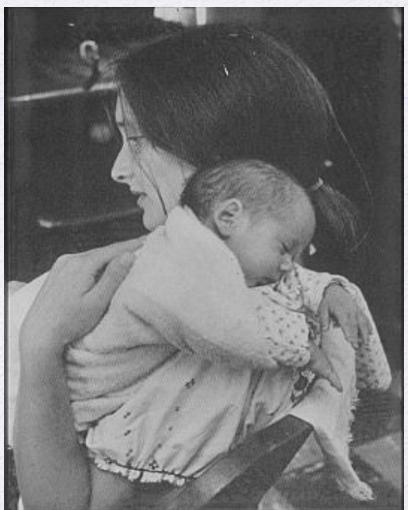
Depressed mothers, more than non-depressed mothers,

--perceived interactions more negatively

--showed more anger

### **Effects are Bi-Directional**

- Bi-Directional Effects in Depressed Mother-Infant Interactions
- Infant's subsequent distress and unresponsiveness are likely to maintain and perhaps increase the severity of the mother's depression



# What might we see when depression

#### is present ?

#### Mothers:

- Fewer overall interactions (disengagement)
- More matching of negative states than positive
- More anger
- Less positive interactions (affective flatness, irritability)
- Less consistency
- Decreased mutual cueing

#### Infants

- Fewer positive/ more negative facial expressions
- Fewer vocalizations
- More fussy and tense
- More gaze aversion (over time, infant learns to look away)



#### Maternal Mental Health and Child

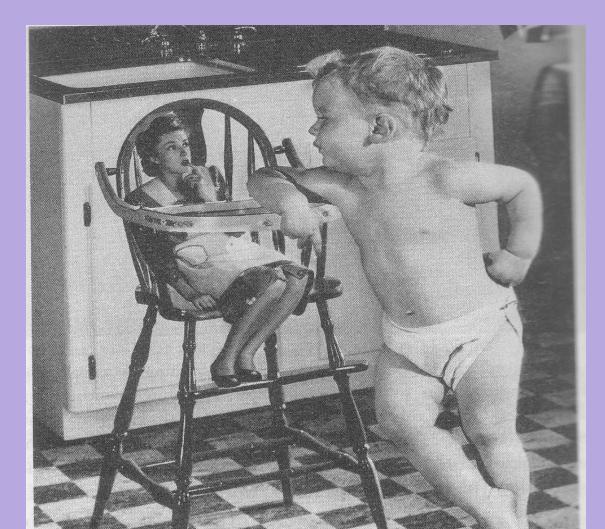
Maltreatment

 Mothers with depression and history of extensive childhood trauma reported more neglect (Banyard, Willliams, Siegel, 2003)

 Some studies show 2-3 fold increased risk of physical abuse, psychological aggression, and medical neglect (Chaffin, Kelleher Hollenberg, 1996; Windham et al, 1987; Weissman et al, 1987)

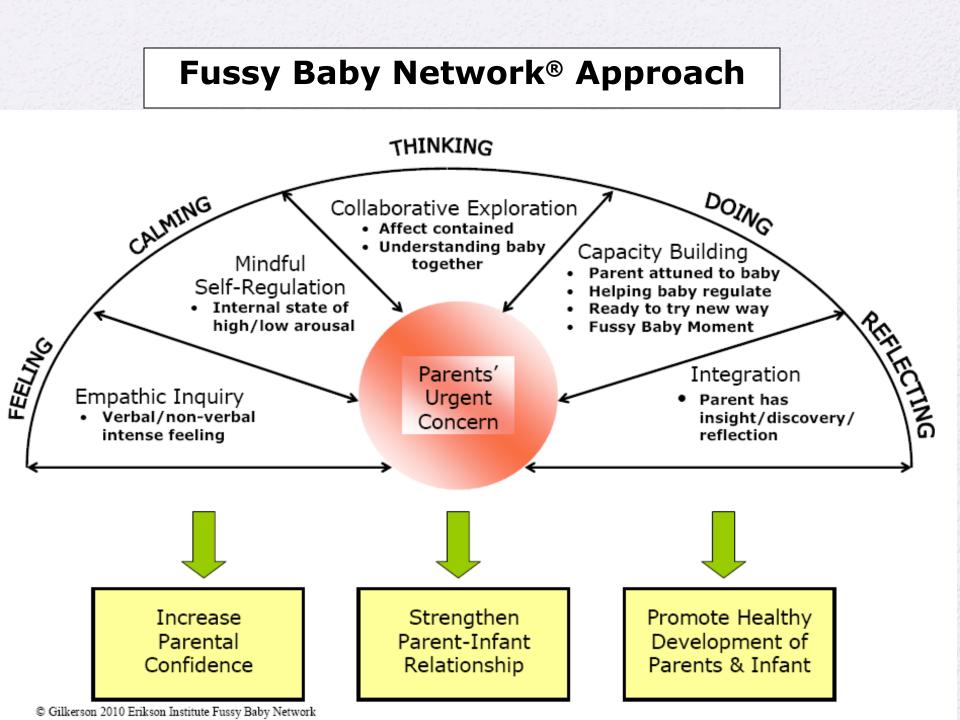
 Increase in work time and addition of intimate partner to home decreased aggression; exposure to partner violence increased physical assault and neglect; increased child behavior problems (Canron et al, 2009)

# Relationships with Babies can be Overwhelming to Parents

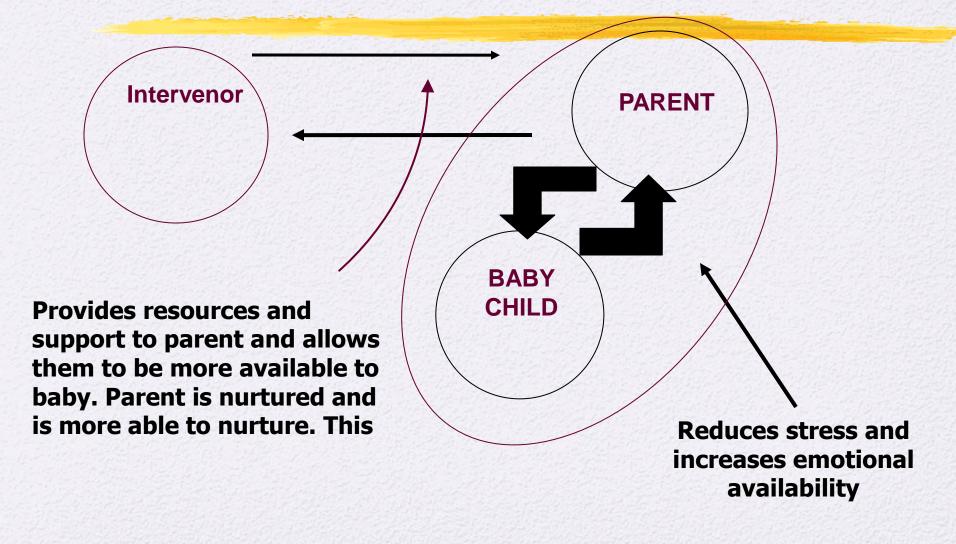




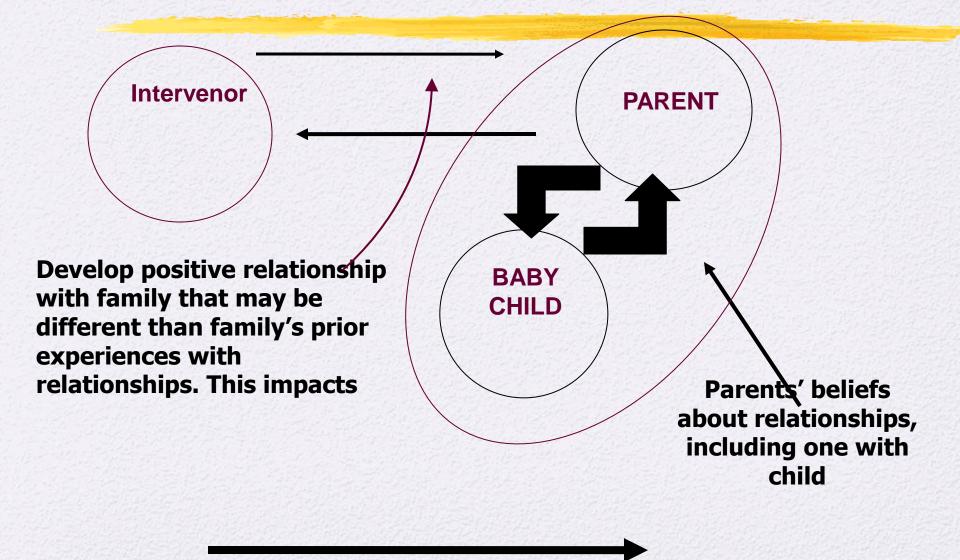
# SO, WHAT WORKS?? Holding a model in mind.



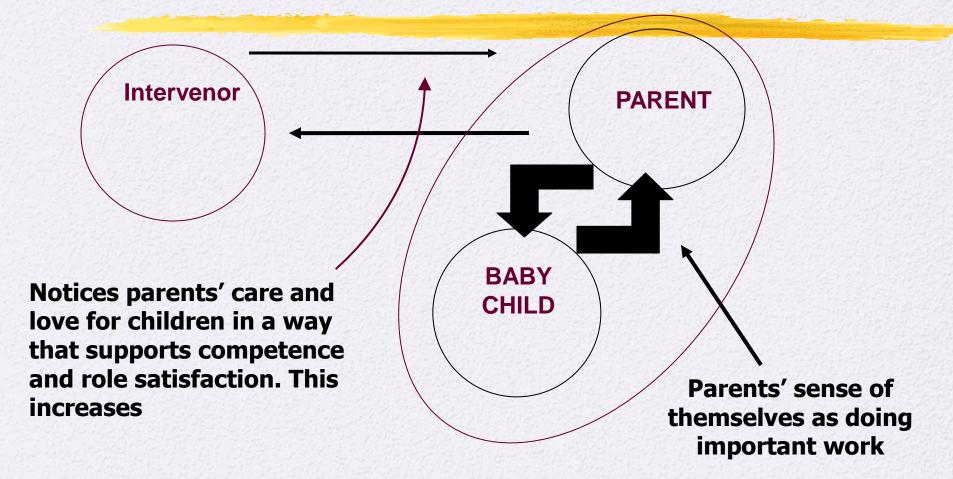
#### **One Way "Intervenor"-Family Interaction Impacts Parent-Child Relationship**



#### How Intervenor-Family Interaction Impacts Parent-Child Relationship



#### How Intervenor-Family Interaction Impacts Parent-Child Relationship



• How do you know something works?

• Why might certain practices work?

Outside vs. inside interventions

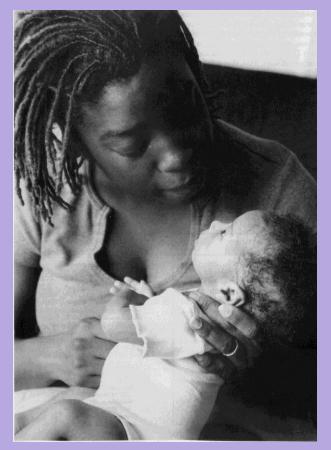
## Activating the Parent's Capacities to See and Attune

Move beyond words

Notice babies pace, body based cues, & responses

Learning to support parent follow the lead of the baby & not overwhelm with efforts to soothe

Learning to explore and wonder with the parent about the baby

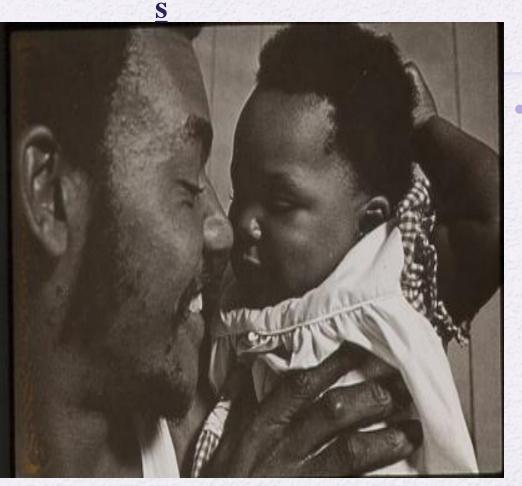


# Parent-Infant psychotherapy & related services

Dyadic parent-infant intervention

- Identifies and builds on strengths; explores past history; helps parent separate past from present, helps parent disentangle baby from distortions (Fraiberg, S)
- Goals
  - Increase attention to baby's nonverbal cues
  - Increase ability to respond appropriately to cues
  - Increase empathy with the child's experience
  - Decrease distorted perceptions of the child

# Fathers/partners are a critical part of services



•Work to promote father's engagement with baby and support of mother

Work on communication and problem-solving in their relationship
Pruett, Lamb, Cowan How Does a Relationship-Based Approach

Support Mental Health and Social Emotional

### Development?

- Builds positive relationships between caregivers and children to promote wellness and success. Focusing on affective right brain to right brain elements is critical.
- Relationship as a necessary vehicle and VALUE
   ADDED for many kinds of service delivery
- The belief that relationships with families can become a corrective emotional healing experience

#### Creation of a

#### **Community Holding Environment for**

### **Families**

A "way of being" that involves careful listening and thoughtful waiting, allowing the participants to discover solutions and explore concepts and perceptions without interruption.

Do unto to others as you would have others do unto others Community members who are more likely able to hold parent-child relationships.