



First Connections

...make all the difference

INFANT ATTACHMENT - WHAT PROFESSIONALS CAN DO

PROFESSIONALS CAN...

- recognize that an infant's attachment to his/her caregiver is of central importance, and bring an attachment focus to every meeting with parents.
 - Asking parents about the infant/caregiver relationship is as important as asking about an infant's eating and sleeping.
- take steps to improve the quality of infant/caregiver attachment relationships.
 - Depending on the nature of your contact with the mother and infant (e.g., medical doctor, public health nurse) you may have more or less time to focus on attachment. But with even a little time, you can make a start. The interventions described below include both basic considerations and more complex and lengthy interventions.
- continue to assess and ask about the quality of parent-child relationships as the child matures.

THREE IMPORTANT FACTORS, AND HOW TO INTERVENE...

1. Sensitivity of the primary caregiver (e.g., to perceive, interpret, and act on an infant's cues) is widely recognized as an important contributor to secure attachment. Caregivers can be helped to be more sensitive in the context of responding to infants' distress or, as a start, in the context of playing with the infant.

- Sensitivity to distress cues:¹

Notice crying

- Observe how the caregiver responds to infant's distress.
- Caregiver's attempts to comfort the infant can be positively acknowledged.
- Caregivers who do not try to comfort distressed infants, become annoyed at an infant's distress, or who seem uncomfortable holding their infant close to them may need help in responding more sensitively.

Interpret crying, other signs of distress

- Some parents may not know that even very young infants communicate distress through crying, looking away, tensing their bodies, etc. They may believe that "babies just cry for no reason, most of the time", or "s/he's just spoiled" or "trying to manipulate me" or "is angry with me".
- It is helpful to ask a caregiver questions about what she or he thinks the baby is feeling, why the baby might be upset, and/or how they interpret what their babies are feeling.

Respond in a loving way to distress

- Parents are reassured to know that they are doing something right when they try to comfort their distressed babies, even if the baby does not always calm down.
- Suggest specific actions that many infants find comforting (e.g., snuggling, rocking, soft talking, walking).

¹ This material is from *A Simple Gift: Comforting Your Baby. A Guide for Professionals*.

INFANT ATTACHMENT - WHAT PROFESSIONALS CAN DO

➤ Sensitivity while playing

- Parents and caregivers can learn useful things about responding sensitively to infants' needs during low-stress, play-time interactions.²
 - Caregivers who do not interact very much with their infants can be urged to try the following basic-level interactions. You might suggest that the caregiver try the following during your meeting with her or him:
 - position the infant so they can see each other.
 - make eye contact and smile whenever the infant looks at her or him.
 - make eye contact and vocalize when the infant makes eye contact and vocalizes (i.e., imitate the baby).
 - Some caregivers interact with their infants in a controlling manner. Describing the "Watch, Wait, and Wonder" technique may be helpful.³
 - Watch: caregiver places baby on floor (with toys if age-appropriate) and watches the baby
 - Wait: caregiver does not initiate interaction or try to make the baby do anything
 - Wonder: when the baby looks at the caregiver, the caregiver makes observations and responds with imitation of the baby's behaviour.

2. Primary caregiver's own childhood attachment history

- Problematic or abusive relationships with a caregiver's own caregivers in infancy and childhood may mean that the caregiver has little experience with the fostering of close relationships. She or he may not have learned how to parent in sensitive, loving ways.
- It may be useful to discuss a caregiver's childhood relationships, or to refer her or him to counselling specific to this purpose.
- Some research indicates that counselling can lead to increased stress in vulnerable clients and thus they may require additional supports. Further, short-term interventions that focus on behaviour (rather than on possible historic roots of the behaviour) may be as or more effective in fostering secure attachment as long term analytic approaches.⁴

3. Marital relationships

- Because conflictual and violent marital interactions are distressing and inconsistent with a safe family environment, they can impact on the development of secure attachment.
- Try to create an accepting environment for your clients to talk to you about violence and other conflict in their lives.
- Familiarize yourself with couples counselling resources in your community.

² See Dr. Anne Krupka's paper: "Promoting resilience through secure attachment: A brief intervention for adolescent mothers and their infants."

³ Muir, E. (1992). Watching, waiting, & wondering: Applying psychoanalytic principles to mother-infant intervention. *Infant Mental Health Journal*, 13, 319-328.

⁴ Based on their review of 16 intervention studies aimed at enhancing parental sensitivity and infant attachment security, van IJzendoorn, Juffer, & Duyvesteyn (1995, p. 244) concluded that: "Interventions are effective in enhancing maternal sensitivity to infant's attachment cues; ... Short-term interventions with a clear focus appear to be more effective than long-term broad-band interventions."