



Baby Love
Supporting Infant Security

**A Preventive
Attachment-focused Intervention
for Mothers and Babies**

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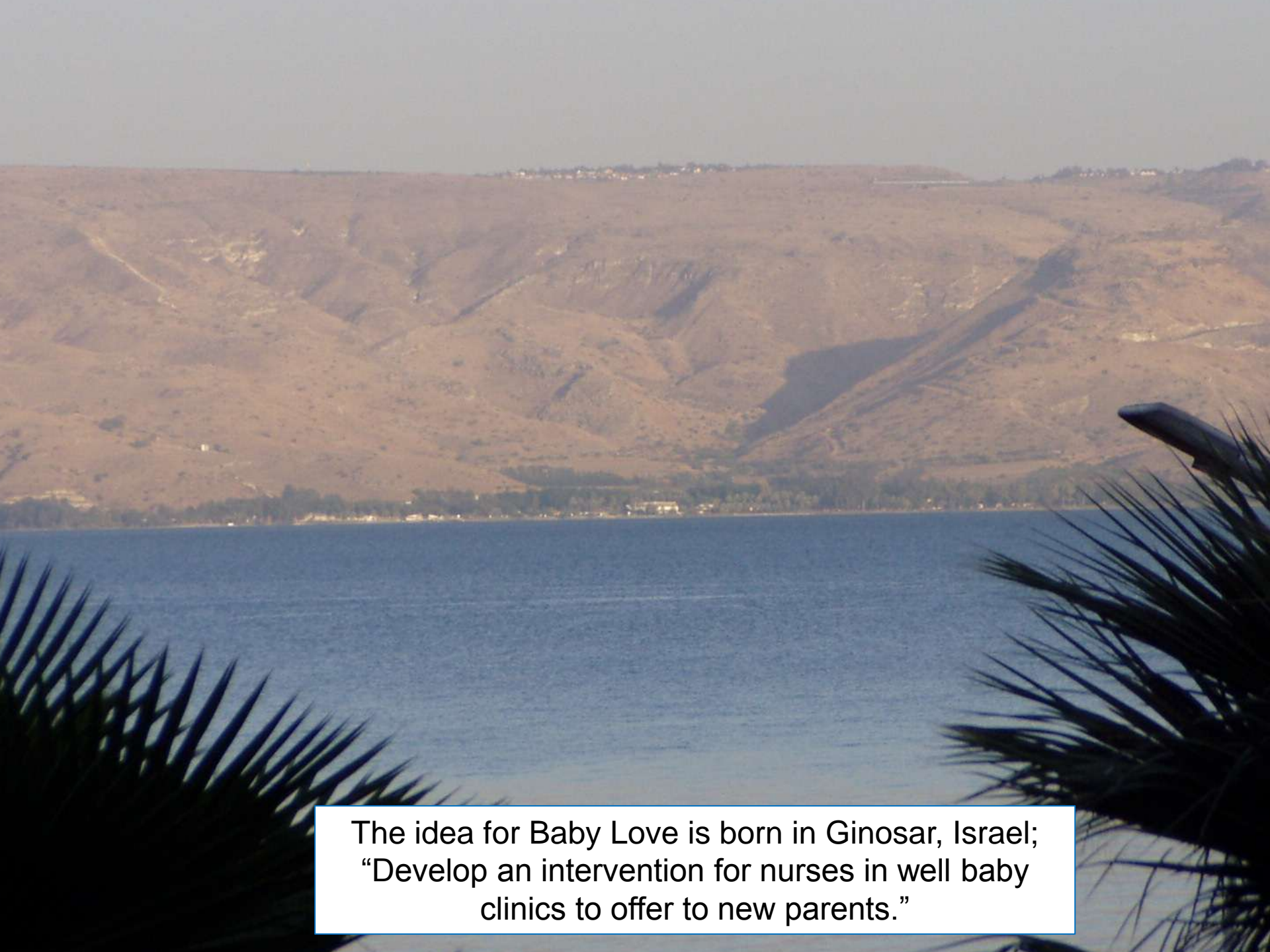
CACH
Health Canada FNIB
Kenora Chiefs Advisory
Save the Children Canada
Toronto Public Health
OEYC, BTC, Massey Centre



Northern Ontario First Nations

Eabametoong
Dalles
Grassy Narrows
Kenora
Rat Portage
Shoal Lake 39
Shoal Lake 40

Wash Bay
White Dog
White Fish Bay
Attawapiskat
Fort Albany
Kashechewan
Moose Factor



The idea for Baby Love is born in Ginosar, Israel;
“Develop an intervention for nurses in well baby
clinics to offer to new parents.”

Outline

- Background
- Integrating interventions and theories
- Teaching community leaders
- Research design and preliminary outcome findings
- Adaptations



Guiding Principles for Baby Love

- Focus on attachment
 - Preventive intervention
 - Young babies
 - High risk and not-at-risk populations
- Applicable (adaptable) across cultures
- Empirically supported interventions
- Easily exported
 - Nurses or other community based professionals
 - Brief training
 - Low tech/low cost
- Groups of parents



Integrating interventions and empirical findings



Attachment outcomes

NICHD 2006

- **Extreme Early Effects Model**
 - *Infant classifications predict outcomes*
- **The Mediating Experiences Model**
 - *Environmental continuity or changes in parenting quality predict child outcomes*
- **The Dynamic Interactive Model**
 - *Infant classification interacts with environment to predict outcomes*

Implications for Baby Love

- Focus on parenting quality from early age
- Integrate with later supports and interventions



Age of intervention

- Need baby for learning
- Greater efficacy in preventive interventions with babies older than 6 months (*Bakermans-Kranenburg et al, 2003*)
- Maternal sensitivity predicts security at 6 months vs. sensitivity at 15 months (*McElwain and Booth-LaForce, 2006*)
- **We work with caregivers and babies from 2-15 months**



Parental behaviours and attachment

- Sensitivity
 - Recognizing and responding contingently to infant signals of distress is associated with security (*Ainsworth et al 1978*)
- FR Behaviours
 - Parental behaviours that evoke fear, anxiety, confusion, (disorganized attachment) etc. in baby (*Lyons-Ruth et al, 2007*)
- Baby Love addresses both types of parental responses with babies
 - *Infant observation, reflective functioning, etc*
 - *Focus on anxiety, depression, anger etc.*

Culture and attachment

- Overall cross cultural support for normativeness and preference for security as well as for associations of sensitivity to security (e.g. van Ijzendoorn & Sagi, 1999; Posada, 2004)
- Need to understand more than just one relationship to understand attachment in different cultures (Hinde, 1991)
- **Adapt Baby Love with local leaders during training**



Intervention outcome data

- Efficacious interventions
(*Bakermans-Kranenburg et al, 2003*)
 - focused on parental behaviours
 - parental sensitivity
 - brief
- Baby Love
 - 12 sessions,
 - Teach and practice sensitivity
 - Caregiver FR behaviours
 - Focus on caregiver anxiety, depression, anger, violence



Knowledge is power

- Caregiver knowledge of attachment

(Hoffman et al, 2006)



Baby Love psychoeducational approaches –

- Attachment theory, Infant cognitive development, infant emotional development, etc.

Reflective functioning

- Reflective functioning is associated with secure attachment (*Fonagy & Target, 1997; Koren-Karie et al, 2002; Hoffman et al, 2006*)

Baby Love

- Infant observation
- Observing infants in groups
- Observation of parental states
- Mindfulness (*Kabat-Zinn, 1992*)
 - Mindfulness exercise



Attachment, Stress and Social Support



- Lower daily stress is associated with security (*Easterbrooks and Graham, 1999*)
- Baby Love uses Problem Solving Therapy to help mothers reduce stress (*Sahler et al, 2005; Nezu and Nezu, 2001; Kazdin, 2000*)
- Social support for mother is associated with security (*Huth-Bocks et al, 2004*)
 - Groups
 - Support social networking

Other evidence based interventions

- **Parent training** (e.g. Webster-Stratton, 2001)
 - Large empirical base
 - Teaching, rehearsal, homework
- **Group therapy** (Yalom, 1995)
 - Building networks of mothers who understand attachment
 - Building networks in the community

TRAINING LEADERS TO RUN BABY LOVE GROUPS



Training and adaptation of Baby Love

- Leaders –from the community and already engaged with mothers and young babies
 - Public Health Nurses; Prenatal group leaders; Social Workers; Psychologists; Psychiatrists; Paediatricians, Nurse Practitioners, Family home visitors; Parents ...
- Time:
 - Naïve to attachment and to working with groups – one week
 - Experienced with attachment and groups – two to three days
 - Adaptation of the intervention
- Supervision:
 - Once per week over the course of the group sessions live or by videoconference – preferably over the course of two sets of groups or two individual interventions
 - Adaptation of the intervention

Intake Interview

- Meet with groups of mothers and inform about Supporting Security
 - Leaders know the mothers from before
- Respond to questions
- Meet individually as requested
- Provide information about the group and begin education about attachment
- Establish an alliance with parent
 - Leaders' RF in practice

Goals for the Sessions

- Create a secure experience for the parents
- Engage with each other
- Teach attachment theory and normal development
 - **Babies have minds – they learn and communicate**
- Increase sensitivity (responsiveness) to baby signals
- Increase parental self awareness and reflective function
- Problem solving method

Session Format

- Each session includes:
 - Check-in (what's new)
 - Start with mindfulness exercise and discussion
 - Discussion of home activity
 - Teaching
 - Break with snack
 - Group activity: experiential exercise – (infant observation, role playing, floor play)
 - Assignment of next week's home activity
 - End with mindfulness exercise or baby songs

Session Topics 1 – 6:

Relating all topics to baby feeling secure

1. Attachment theory
2. What is baby feeling – emotional development
3. What is baby thinking – cognitive development
4. A problem-solving strategy
5. Communication with babies: what is on baby's radar?
6. Parental self regulation: coping with difficult feelings and thoughts evoked by baby

Session Topics 7 – 12: Relating all topics to baby feeling secure

7. Parental anxiety
8. Parental sadness and depression
9. Parental anger
10. Anger and violence in the family and the neighbourhood
11. Selecting alternate caregivers
12. Wrap-up and review

Infant Observation – Questions for Observers

- What is on this baby's mind?
- Observe:
 - baby's facial expression
 - where baby is looking
 - what baby is doing
 - how baby is holding his body, head, arms and legs
 - the sound of baby's voice
- What do these tell us about what the baby wants, what she is thinking and feeling?



Group Activity – Mindfulness

- Goal – To increase awareness of
 - self in the moment
 - influences on the self in the moment
 - self-other interactions and influences in the moment
- Suggested activity – 5-10 minutes at the start and at the end of each group meeting holding babies,
 - Focus on self and baby breathing,
 - Aware of self feelings,
 - Aware of distractions, etc.
 - Notice changes in baby as mother changes and v.v.

The Group Activity: Sessions 4 -11

Babies in babysitting:

- Role Play – members and/or leaders, pairing off; practice different challenging scenarios
 - e.g. crying baby, sick baby, depressed mother, drunken partner

Babies in the room:

- Leaders may do role play instructed by caregivers
- Floor play – leaders support and focus infant observation and “casual” conversations focused on teaching topics

(Teaching, Supporting, Reflective functioning, Problem solving, etc.)

Problem Solving IDEAS

- Identify the problem and causes of the problem
- **Define** your options
- **Evaluate** your options
- **Act**
- **See** if it worked

Sahler et al (2005)

The Home Activity

- Assignments that help parents practice teaching from the previous lesson
- Take-home prompts and lists to support the lesson
- Take-home sheets to describe their activity

(Leaders must be sensitive about members level of literacy)

RESEARCH

Preliminary outcomes RCT

	<u>Baseline</u>		<u>Post-treatment</u>	
	Control n=29	Intervention n=23	Control n=17	Intervention n=20
Attachment Knowledge Questionnaire	65.21 (8.31)	67.52 (8.12)	63.65 (9.36)	71.60 (8.60)*
Brief Symptom Inventory (BSI)	5.19 (3.85)	5.65 (4.62)	3.65 (4.20)	6.53 (3.56)
Social Provisions Scale (SPS)	85.46 (8.17)	85.74 (9.35)	86.94 (7.39)*	87.90 (8.48)
Parenting Stress Index (PSI)	66.79 (16.88)	63.74 (16.03)	64.82 (14.64)	61.15 (11.44)
Parent Development Interview (PDI)	3.6 (1.30)	4.33 (1.19)	4.21 (1.12)	4.71 (0.99)
Secure Base Script Assessments (SBSA) (A Baby's Morning, The Doctor's Office)	3.53 (0.88)	3.36 (.76)	3.34 (0.77)	3.51 (0.98)
Maternal Behavioral Q-Sort (MBQS)	0.39 (.50)	.33 (.38)	0.56 (.38)*	0.61 (0.25)**

* $p < .05$; ** $p < .01$

Note: small effect size (.04) vs. large (.16) for control vs. intervention group

Outcomes

- Baby Love retains participants significantly better than control intervention even though control has benefits for participants too.
- Baby Love significantly improves maternal knowledge and attitudes about attachment theory
- Baby Love is associated with large effect size change in maternal sensitivity

Adaptations

- Develop brief format – 6-7 group sessions
 - Leaders must be familiar with contents of 12 session version
 - Use posters and video clips to support delivery of Baby Love
- Develop 1:1 format for home visits or office visits
 - Techniques need to be adapted to 1:1 vs. group intervention
- Develop community education project
 - Use posters and video clips to support community education



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THE POSTERS

What is going on in my baby's mind?



When I watch my baby, I can learn what he is thinking and feeling.



When I understand what's on his mind, I can respond to help him feel secure.



When my baby feels secure, he is more likely to stay healthy and learn more easily.

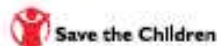
The more often I respond when he needs me, the more secure he feels.



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My baby does best when she trusts the world
is a safe space to play and love and learn.



I cannot spoil my baby by
picking her up when
she cries.



Each time I pick up my crying
baby, I teach her that I will
come when she needs me.



She learns to cry less and
trust more.

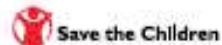
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I can help my baby feel secure.



Babies don't try to make us mad. I want to remember she is just upset.



My baby can feel when I am tired and stressed out. She may become upset too.



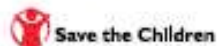
When I learn to handle my stress I feel better and my baby does too. I can turn to others for help when I need it.

The more often I respond when she needs me, the more secure she feels.



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How my feelings affect my baby.



When I feel frustrated or worried, my baby may feel anxious and insecure.



When I feel sad, my baby may feel alone and insecure.



When I do something about my negative feelings, I can help myself feel better and then my baby can feel more secure.

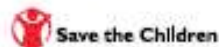
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I can't control everything, but I can make my baby feel secure.



When I feel angry, my baby may feel afraid and insecure.



When we argue or fight and I feel afraid, my baby may feel alone and afraid too.



I want to make my baby feel secure, even when things are difficult at home.

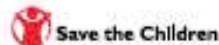
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Some things seem good right now but...



Drinking can confuse me and make me angry. That's not good for my baby.



Drugs can make me forget where I am. Sometimes I forget my baby is here too.



I don't want my baby to feel afraid of me or to feel I have forgotten him.

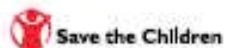
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Choosing the right caregiver for my baby.



My baby needs a safe clean place to play and learn. She needs to feel secure even when I am not there.



I decide who I can trust to keep my baby feeling safe and secure when I'm not there.



I want my baby to feel safe when I am away and secure that I am coming back.

The more often I respond when she needs me, the more secure she feels.



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