

Proposal Abstracts 303 – 448

303 Using Ecomaps to Explore the Sources of Social Support of Hispanic Fathers of Infants and Toddlers with Disabilities

Vivian Correa, Joyce Tardaguila-Harth, Peter Alter (United States)

This workshop session will examine the results of a study that explores the sources of support of Hispanic fathers of infant and toddlers with disabilities, providing insight on how they mobilize and manage resources to cope with their child's disability. The presenters will discuss how ECOMAPS, a family assessment method, can help early intervention professionals identify the sources of social support of families from culturally and linguistically diverse backgrounds and how to utilize those sources to promote positive family functioning. Hispanic fathers were found to use extended family members as their primary sources of support along with friends and co-workers. Little support was identified from professionals or organizations. At the end of the session, participants will be able to identify the sources of social support of Hispanic fathers of children with disabilities and will demonstrate knowledge on using ECOMAPS as a tool for assessing and expanding the sources of social support of families from diverse backgrounds.

304 Child Care or In-home Care for Infants? What Do We Know?

Margaret Sims (Australia)

In the western world we are faced with strong societal pressure that places the responsibility for the early years of a child's life with his/her mother. Research supports this focus, demonstrating, for example, that the attachment relationship between infants and their mothers is likely to be disrupted when the infant spends considerable time in the care of another person (Belsky, 1988; Sagi, Koren-Karie, Gini, Ziv, & Joels, 2002). Children in child care in America tend to demonstrate elevations in cortisol levels across the day, suggesting that the child care environment is less than optimal (Dettling, Gunnar, & Donzella, 1999). However, we also know that there are circumstances where infants' home environments are not ideal (perhaps when there exists physical or emotional abuse), and that attendance in a high quality programme can enhance children's outcomes (Peisner-Feinberg et al., 2000). This paper will set the scene for the research presented in the remainder of the symposium.

305 Using a Biomarker (Cortisol): To What Purpose?

Trevor Parry (Australia)

Activation of the HPA axis can be measured by the amount of cortisol present in the saliva. This is a particularly useful research tool as saliva is easy to capture, store, transport and analyse. Elevated levels of cortisol function to alert the body, increasing heart rate, blood pressure and general levels of watchfulness for example. Cortisol responses can be measured within 20 minutes of the body's exposure to a threat and thus can be used as an immediate measure of the impact of the environment. Infants in child care are thought to be particularly vulnerable to environmental stimuli and cortisol provides a tool that can be used to identify their biological response (and thus by implication the longer term impact). This paper describes the research undertaken in child care centres in Western Australia examining a range of aspects of quality service delivery and their impact on infants' cortisol levels. The links with stress and cortisol levels of both staff and parents will also be explored and the relationship between cortisol and secure attachment considered.

306 Caregivers and Quality

Andrew Guilfoyle (Australia)

Research reported above indicates the relationship dimensions of child care service delivery are particularly important in determining infant cortisol responses, and, by implication, longer term outcomes. However, in any relationship there are two people: the infant and the adult. Caregivers find themselves working in a profession that is undervalued, under paid and in working conditions that are particularly challenging. This is recognised as a problem in Australia and in many other countries around the world. Caregivers are the essential component of a child care environment. In

this paper two aims are achieved. The first identifies the relationship between caregiver levels of cortisol (stress), and conditions in which they operate (such as their level of training, experience, the number of children they work with). Second, the impact of levels of caregiver cortisol and the quality of the programme they deliver to children is analysed. If we want infants to have high quality experiences in child care settings we need to in the first instance provide appropriate support to the adults working in those environments.

307 What Does Good Enough Child Care look like for Infants?

Margaret Sims (Australia)

This brief presentation will pull together the various threads identified in the presentations and present an analysis of quality child care. What are the dimensions of child care that have the most impact on infants' cortisol levels (and thus by implication their longer term outcomes)? How do we support our child care services to continually improve their practice to ensure a positive outcome for all infants using child care services? What do we tell parents who are using or thinking of using child care for their babies? What are the implications of this for both policy and practice?

308 In Search of New Ways: Listening to the Child - Reflections on a Project of Supporting the Health of Children and Adolescents of Slums in Rio de Janeiro, Brazil

Angela M. Maggioli Rabello, Astrea da Gama e Silva, Flavia Averbug, Regina Celi Bastos Lima, Sandra Mara de Mello Lopes, Tereza Carsalade (Brazil)

This paper raises some reflections on a project of supporting to child and adolescent health, which is being realized since 2003, in Rio de Janeiro, Brazil. The central point is a radio program recorded and distributed by the community broadcasting. The objective of this program - Listening to the Child - is to spread and diffuse this care of listening to the children through themselves or their caregivers, in such a way that they can be best attended. The target people are the children that live in Rio de Janeiro slums under the impact of poverty. The questions to be debated in the program are brought by the community leaders, caregivers, in the slums where they live, of children and adolescents with ages from zero to 17, offering also assistance to their families. Groups of pregnant adolescents are attended by members of the program team in one of the slums and the questions so raised are also discussed in radio. This psychoanalysts team offers a sheltering space to the suffering caused by difficulties faced by those leaders at the management of problems founded in their taking care task. The radio program also diffuses information concerning to services that could be useful to find ways to solve such problems, characterizing the program as a link in the chain of the community and public resources. This experience creates a transitional space, bringing up the new and the hope which affords the possibility of changing in subjective realities and social identity.

309 Through the Looking Glass: A Partnership in Parenting Project

Pam Murphy, Sally Watson (Australia)

THROUGH THE LOOKING GLASS A PARTNERSHIP IN PARENTING PROJECT This workshop will build on a paper presented in a symposium which focused on the child care component of the Through the Looking GLass(TtLG) project. The workshop will give an overview of the TtLG project to workshop participants. The primary focus will be to provide an experiential learning opportunity for participants to practice and apply TtLG specific program activities that have been developed in the project to integrate attachment theory into practice for child care workers and parents. The goal of these activities is to provide another means of engaging parents to gain insight into their relationship with their child/ren in order to build more secure attachments with their child/ren. These activities have been developed to put attachment theory into practice for parents and to involve parents in a meaningful way in doing this. In using the Circle of Security graphic as a basis for understanding attachment theory in the group the activities have drawn on other creative ideas to support parents experience of attachment concepts.

310 Epidemiological Data on a Community-based Infant Unit in Paris

Didier Rabain, Elisabeth Aidane, Marcela Montes de Oca (France)

Epidemiological data are of major importance for knowledge, understanding and offering treatment

for psychopathological disorders in infants and toddlers development. At the Unite Petite Enfance et Parentalite Vivaldi, a part of the infant and adolescent psychiatry service of Professor Cohen at Salpêtrière Hospital in Paris, since one year we use the data base Prince that has been created and constructed by Dr Miri Keren and Professor Tyano in collaboration with the Vivaldi team, in order to be able to propose to our patients a therapeutical context adapted to their clinical situation. So we decide to realize an epidemiological study concerning our 0-1 population that was followed for one year (100 patients). With Prince we have a complete clinical view about this specific early baby development and the construction of parenthood. With our assessment procedures we have an clinical and epidemiological data concerning the baby, the parents and their interactions using the diagnostic classification 0-3. Moreover Prince provides complete informations about pregnancy, perinatal pediatric history, life events and past history of the family. And last but not least clinical data are also parental psychopathology and heredity transmission including a psychodynamic approach. Our goal in this study is to correlate perinatal factors and parental psychopathology with infant and interactions disorders.

311 Evaluation of Therapeutic Foster Care for Infants At-risk: Which Milestones?
Cathy Foures, Jean-Louis Nouvel, Martin Pavelka, Richard Pascal, Hana Rottman (France)

This workshop will first review the international literature on the effects of early professional and/or therapeutic foster care (as compared with other forms of care or custody) on various aspects of infant and child development (particularly in case of parental mental disorders). Then the presentation of a retrospective study, drawn from the records of several French Therapeutic Foster Care (TCF) units, will prepare the ground for a discussion on the most meaningful issues to be easily tested in order to define what could be, in France, a prospective evaluation process of this very specific practice. The hypotheses are that data on psychopathological and psychosomatic troubles in the infant, on attachment and separation disorders in the toddler and the child, as well as on the development of various psychodynamic and cognitive processes (symbolization, play, language, narrative skills...) in infancy, childhood, and adolescence, should systematically, lastingly, and coherently, be collected in order to assess the impact of TFC. Unfortunately, French practitioners presently lack the resource and validated tools for such an evaluation process. This workshop thus aims at providing both the presenters and the audience with the opportunity for international scientific exchanges on what should/ could be a meaningful evaluation of TFC for infants who are, in a context of disturbed parenthood and consecutive alterations of parent- child ties, at-risk for later psychopathology.

312 The I Feel Pictures: Methodological Considerations and Cross-cultural Evaluation
Jutta Raita-Hasu (Finland)

This presentation discusses firstly, the methodological aspects of the IFEEL (Infant Facial Expressions of Emotion) Pictures test (Emde et al., 1993) when using the method in a culture other than for which it was originally created. In our studies problems were encountered especially concerning the original lexicon and its translation into Finnish. In order to improve the validity of the lexicon and the scientific use of the imported method, dimensional studies of the IFEEL Pictures- method were conducted parallel to the categorical approach. Secondly, on the basis of 10710 IFEEL answers, collected from two different studies, Finnish caregivers' linguistic representations of infant facial expressions of emotion were examined. Furthermore, a Finnish judge of professionals categorized and two-dimensionally valued the emotion words used by Finnish caregivers in order to examine possible culture-related meanings of emotions and affects. Key words: emotion, infant, facial expressions, lexicon

313 Infant Mental Health Training Modules
Carrie Mori, Melissa Bandy, Johnna Anderson (United States)

INFANT MENTAL HEALTH TRAINING MODULES Mori, C.L., Bandy, M., and Anderson, J (Boise State University, 1910 University Dr., Boise, ID 83725-1725, cmori@boisestate.edu, United States) This workshop will present a five-part training module that is being used to educate childcare providers and early intervention service providers about infant mental health. Information in the modules had to be created in a manner that would result in the greatest amount of change in

perceptions, understanding, and practice while meeting the challenge of professionals with different levels of education, experience, and motivation. The modules provide a basic understanding of the critical components that impact the developing relationship between a parent and infant, and how to help a parent to maintain a positive relationship. Topics include: the state's system of care and definitions, child development, family, attachment, temperament, screening tools, and resources. In addition, this training module is connected to a statewide childcare training and education system, which links the childcare provider with ongoing mentoring. Discussions of how this training module is connected with the state's system of care, the plans for assessing competence, and future training modules will allow the audience to understand the scope of the entire system.

314 The Body Image and its Psychopathology in Tex Avery Cartoons

Marion Duguet, Franck Bonelli, Jean-Louis Goeb, Pierre Delion (France)

The psychoanalytic concept of body image takes its roots in the philosophical and neurophysiological study of the body. In filigree in Freud's thought, this concept is born with Schilder and has been developed by Lacan, Dolto, Pankow, Meltzer, Tustin and Haag describe its normal and pathological archaic shapes, within the psychoanalytic frame of containers, initiated by Winnicott and Bion. Tex Avery's cartoons are full of characters and objects evoking elementary shapes of the body image. Three levels of organization may be isolated: 1) the primitive sensorial experiences level, "sensory bombardment" with Ego dismantling; 2) the bi-dimensionality level, where flat beings adhere to (autistic) objects trying to avoid fall, parceling out, liquefaction; 3) the three-dimensionality level where the first envelopes, outlining an internal space, allow the exploration of the corporeal openings, the emergence of oral, anal, and genital impulses and projective identification. Tex Avery did not leave many elements to make us understand how he managed to give so accurate illustrations of these archaic experiences of the body. But one may see a clear affiliation of its work with the burlesque cinema and clowns. This cynical, absurd and transgressive humour, describes the body in its instinctual overflows and allows, by laughter, the share-out and the acceptance of common archaic body experiences. Tex Avery, in his frantic research of the comic effect, led burlesque art to the exploration of an originating body.

315 The Self-report FAQ shows Difficulties in Parents of Autistic Children

Laurence Robel (France)

Autism is characterized by impairments in communication and socialization and by the presence of circumscribed and stereotyped interest. Previous studies have shown that genetic mechanisms may indulge the vulnerability to autism. These mechanisms are complexes and may implicate the combination of several genes, in interaction with the environment. The genetic mechanism involved in the vulnerability to autism may also concern other pathologies and features which frequency is enhanced in families of autistic patients, such as language disorders or serial difficulties. In this study, we have used a new self report in order to identify endophenotypic traits in social, communication, rigidity and imagination in parents of autistic children. Twenty parents of autistic children were compared to twenty one controls. We show significant differences between the two groups of parents in the socialization domain, but not in the three other domains. Therefore, we think this self-report might be interesting in further clinical and genetical studies in autism.

316 The Effects of Responsive Teaching on Young Children with Autism/PDD and Children with other Developmental Disabilities

Gerald Mahoney, Frida Perales (United States)

This study investigated the hypothesis that Relationship Focused early intervention procedures promote the development of young children with autism/PDD by increasing children's use of pivotal developmental behavior. The sample included 20 children with autism/PDD and a matched sample of 30 children with other disabilities and their parents. The children were 28 months old at the onset of intervention. Their mean cognitive age was 14 months and language age was 12 months. All were offered weekly one hour intervention sessions over a 12 month time period. Children's cognitive, language and socio-emotional functioning were evaluated using standardized assessment procedures at the beginning and end of intervention. Pre and post- observations of parent-child interaction were also assessed. Results indicated that mothers made significant changes in their affect and responsiveness; while children made significant improvements in their pivotal

behavior. Changes in children's pivotal behavior were moderately correlated to changes in mothers' style of interaction ($r_s = .37$ to $.68$). On the average the entire sample of children attained greater than a 90% improvement in their rate of cognitive and language development. Only children with autism made significant improvements in their social emotional behavior. Changes in children's developmental functioning were moderately associated with improvements in their use of pivotal behavior.

317 Progression of Play in Non-autistic Autism Spectrum Disorders

Prahtiba N. Reebye, Atefeh Soltanifar, Annie Wolverton, Christopher Gibbins (Canada)

Background: Some literature exists about play behaviors in children with Autistic Disorder (AD), but there seems to be a relative paucity of literature on the play behaviors of children with Autistic Spectrum Disorder (ASD) who did not meet the criteria for AD. Objectives: 1. To evaluate Progression of play behaviors of Non-autistic ASD children. 2. To assess the correlations between the play behaviors of the child with ASD and the parent-child relationship. Method: Fourteen children with ASD using the DSM IV criteria were enrolled in the study after obtaining the informed consent and ethics approval. Children with a clear-cut diagnosis of AD and having known intellectual deficits were excluded. Parent-child play sessions were videotaped during structured and unstructured play in an initial and a follow up assessment after nineteen months. The videotapes were scored using a specific protocol prepared for the study. Results: Results indicate that the type of play produced by all children was generally consistent across time in spite of a nineteen month period of different interventions. Conclusion: Our study provides counterintuitive results in that children did not show improvement over time in their play progression from early manipulative and visuospatio-relational play to functional and symbolic play behaviors in spite of receiving multiple interventions. More research with a larger sample and longitudinal examination of play behaviors in children with ASD is urgently needed.

318 Child Psychiatric Day Ward for Autistic Children

Tuula Olkinuora, Anna-Kaarina Roto, Kaija Puura, Palvi Kaukonen (Finland)

The Child Psychiatric Day ward in Tampere University Hospital has developed its own treatment model for Autistic children with child psychiatric disorders as a secondary problem, and who have not been sufficiently helped in outpatient treatment. The day ward develops new ways and methods to treat and rehabilitate autistic children with difficult behavioral problems such as serious self-harm, problems in anger management, eating problems, sexualised behavior, and disturbing or interrupted school attendance. The two main aims of the treatment are 1. to understand autistic children's inner world and to help them to understand better their own thinking and acting. (Autistic thinking, Theory of Mind) 2. to better understand autistic children's situation related to their environment (family, day care, school, friends, relatives) and to create new methods for the children for coping in difficult situations. Some of the treatment principles are: individuality, family centered work, communality in ward, multidisciplinary team, structuring, visualisation, anticipation, and positive feedback. According to the multidisciplinary team members the violent situations in ward and holding treatment sessions have been reduced in last years. Parents feel that their problems have been understood and that they have got new methods how to raise their children. The main principles of the developing work and of the treatment model particularly relevant for small children and toddlers will be presented.

319 Regression versus No Regression in Autistic Disorder: Developmental Trajectories

Paola Bernabei, Antonella Cerquiglini, Flavia Cortesi, Caterina D'Ardia, Anna Volzone (Italy)

Developmental regression is a complex phenomenon, still not completely understood, which, according to different studies, occurs in 20% to 49% of the autistic population. The aim of this study was to assess possible differences in the development of regressed and nonregressed autistic preschoolers. For this purpose we studied longitudinally 40 autistic children (18 regressed and 22 nonregressed) aged 2 to 6 years. The following developmental areas were considered fundamental in the first years of life, and were assessed at ages 2, 3, 4, 5, and 6: receptive and expressive language, communicative and request modalities, play activities, and mental age. In general, children who regressed showed lower mean performances than those who did not regress and, in the

time intervals considered, nonregressed children improved their ratings in the above mentioned variables significantly more than regressed children.

320 Presentation of Preaut Research and Discussion of the First Results

Graciela Cullere Crespin, Marie-Christine Laznik, Jean-Louis Sarradet, Claude Bursztejn (France)

La recherche PREAUT se propose de valider à 4, 9, 12 et 24 mois des indicateurs des troubles précoces de la communication, simples à utiliser dans le cadre des examens pédiatriques habituels, afin d'évaluer les risques d'évolution vers l'autisme des cas dépistés. Il s'agit des signes PREAUT (M.C.Laznik et col.), à 4 et 9 mois, du QDC (C. Bursztejn et col.) à 12 mois, et du CHAT à 24 mois. Une étude pilote a été conduite de 2001 à 2004 sur une population d'environ 1800 enfants. Elle a confirmé la possibilité d'assurer le suivi et a évalué positivement la capacité des médecins à identifier les troubles décrits et leur fréquence. En Juillet 2005 a débuté la phase opérationnelle de la recherche, qui doit se dérouler sur 5 ans. Il s'agira, après une présentation détaillée de la méthodologie, des procédures d'inclusion et de suivi de la population étudiée, de discuter les différentes options retenues ainsi que les résultats obtenus au bout de la première année de fonctionnement.

321 The Importance of a Medical Genetics Evaluation in Pervasive Developmental Disorder

Mandy Barker, Armand Bottani (Switzerland)

Major efforts are deployed in the field of child psychiatry to diagnose children with developmental disorders as early as possible, as access to specialized and intensive treatment permits better outcome. However, even though parents commonly notice their child's developmental delay and/or unusual behaviours quite early on, many months usually occur before a consultation in a child psychiatric unit is undertaken. Parents need to be encouraged and rapidly referred to a centre where they can receive a specialized evaluation, a clear explanation and psychiatric diagnosis of their child's problem, as well as up-to-date information concerning the different therapies available to address their child's difficulties. It is essential when evaluating a child with a developmental delay to conduct a full medical work-up, comprising an examination by a paediatrician, a child psychiatrist, a neuropaediatrician and a clinical geneticist. Communication between these different specialists is of foremost importance for discussion of the child's diagnosis and future treatment plan, as well as the evaluation of the risk for further pregnancies. This poster illustrates the importance of the consultation in medical genetics. We discuss 2 children presenting with autistic symptoms, diagnosed with pervasive developmental disorder at about 2 years of age and then diagnosed with syndromes of genetic origin at age 5. We underline the importance of genetic evaluation as well as its advantages and disadvantages.

322 A Pilot Study to Establish the Feasibility of Parental Targeted Video Recording for Studies of Social Communication in Early Childhood

Philip Wilson, Christine Puckering, Nadja Reissland, Helen Marwick (Great Britain), Christopher Gillberg (Sweden), Alex McConnachie (Great Britain)

Video recording of parent-child interaction is often used in the clinical assessment of social communication and its disorders. Several aspects of recorded interaction correlate strongly with psychopathology in mothers and children. Recent work has demonstrated abnormalities of communication style among autistic children in home video tapes of their first and second birthday parties. Large community-based studies of parent-child interaction are needed, but they must be detailed enough to identify early indicators of psychopathology. Our feasibility study addresses this difficulty of scale. We shall offer parents a cheap video camera to record their interaction with babies at mealtimes or at play. The following questions are addressed: • What proportion of parents accepts the offer of home video recording and submits video records of a parent-child interaction? • How do families deal with a request for a home video-recording? • What proportion of video and audio records is adequate for analysis of social interaction, motor behaviour and voice? • What descriptive statistics characterise quantifiable social behaviours during feeding and play? • To what extent do these behavioural patterns persist when video observations are repeated, within and across play/mealtime contexts? • How reliable are assessments between and within observers and within

video clips? If this feasibility study succeeds, we aim to use archived recordings in nested case-control studies in a large birth cohort investigating the development of childhood psychopathology.

323 Over-sensitiveness of the Autistic Child to the Fluctuations of the Maternal Investment: A Predictive Sign of Good Evolution in the Autistic Spectrum?

Patrick Cauvin, Sophie Catala, Marie Delinger, Martine Myquel (France)

In case of tracked down autistic syndrome in babies, we find interest in the clinical use of the “distance in early relationship” we introduced in order to explore young babies capacities of the maternal psychic operation recognition based on affective process. John was tracked down as a baby with a light autistic syndrome (CARS-T) and presented an over-sensitiveness with the fluctuations of maternal investment. He takes actually care in our day hospital for young autists. Detected at the 2 years age from a lag in development with no language, relation disorders and communication troubles and because an increasing digression of maturity between him and its twin. During the first therapeutic consultations, he was described as an hypersensitive baby. He coiled up the mother arms, glancing to the clinician or expressing abrupt accesses of distress completely mobilizing the maternal attention. These catastrophic emotional movements occurred at the time when some of our questions seemed more to touch the mother, who tended then to move away from the child in thought. We made the assumption, this partial maternal investment withdrawal took then value of loss of support, for a baby moreover particularly attentive with the maternal psychic operation. Two years after, the autistic signs fade and a developmental trajectory is regained in spite of the persistence of an emotional vulnerability (dysharmonic syndrome). We discuss of the favorable predictive value of such emotional movements thus located in the first meetings with babies or very young children.

324 Social Nets as a Complementary Side of the Long-term Therapeutic Intervention in Developmental Disorders

Ana Ma Fabre-Y Del Rivero (Mexico)

It would be an issue to discuss and think together the number of children who arrive to search psychoanalytical help being most the of the youngest those who also suffer some organic syndrome associated to other severe mental problems; many of them kids from 3 to 6-7 years old come showing already a severe psychotic or autistic pathology, which may evolve toward chronic schizophrenic, perverse or manic-depressive adolescent or adult person. The author likes to illustrate the way he has been working with this kind of patients. Which has been working through several years in different modalities. Five times a week from the beginning and after, three to two times. Later, occasional follow up visits determined mainly by their anxiety or despair. Also, the idea that after several years of hard psychotherapy working and even in the cases of clinical improvement, the lack of familiar, labor or social bonds makes their future extremely difficult because there will be no bonds to hold their lives –parents getting old, dying, problems with siblings and their partners, etc- therefore these patients become a quite vulnerable population, and that’s a painful destiny for the patient and also a sad and disappointing one for the people who have been psychoanalytical trained to work with them. Therefore, our interest to share with you the idea about making the government people, the agencies involved in care giving related to this problematic items as well as the whole community making them sensitive about that problematic.

325 Family Errancy, Discontinuity in Primary Bonds and their Relationship with Pharmacodependency

Juana Ma. Borbolla-Parez (Mexico)

Through the presentation of the clinical work done with two pharmacodependent adolescents, the author pretends to discuss the relationship between the instability in the early bonds, the lack of sense of pertinency, the mild or major disorders in thought and language (idioms confusions) and the addictive trend. The author chooses those two patients -female and male- with marijuana addiction, to illustrate the incidence of a long-term therapeutic intervention in a better prognosis. Both of them began their psychoanalysis during the early adolescence and continued until the adult age.

326 Theoretical and Clinical Considerations about Long-term Work with Severe

Developmental Psychopathology (Autistic Spectrum Disorders)

Celia Delgado-Teijeiro (Mexico)

The author of this first paper pretends, on purpose of that long and labyrinthic trajectory (the second name of the association is Teseo(Theseus) the mythic hero who won the Minotaure and went out the Labyrinth, metaphorical way to think the madness and its principal personages), to reflect about the intense emotional groupal experience –including some kind of “ Staff Burn-out syndrome” and the “renewed sense of hope”, connecting that feeling’s route with the analysis of some of the nodal points that we permanently study and, too, re-found and develop from our own numerous casuistic:

- °The importance of the diagnostic formulation for preserve the place of the suffering subject and for outline an integral treatment.
- °Long-term evolution: - the therapeutical interventions required according to the clinical facts, no massivly imposed.
- The psychoanalytical psychotherapy for the subject and his-her family is, according to our experience, a necessary frame that brings long-term cohesion and holding .
- the use of medication only if necessary, always within a psychotherapeutical context.
- the sociocultural factors: learn and know about the local thinking and mythology around de mental illnes favours the communication and permits the creation and sustain of social bonds, that are the support of tertiary prevention.
- °Primary prevention: prenatal care, early deteccion and intervention on risk situations (maternal depression, deads, parental mental illnes, migration, etc.)

327 Relations to Objects and Object Relations: Bi-modal Developmental Group Therapy for Treating Disorders of Relating and Communicating

Rita Jacoby, Josette Ewert, Delphine Plumier, Marie-Jeanne Schon, Jean-Francois Vervier, Romy Weyrich (Luxembourg)

RELATIONS TO OBJECTS AND OBJECT RELATIONS : BI-MODAL DEVELOPMENTAL GROUP THERAPY FOR TREATING DISORDERS OF RELATING AND COMMUNICATING
Jacoby, R. ; Ewert, J; Plumier,D; Schon, M-J. ; Vervier, J-F.; Weyrich, R. (Luxembourg) Our approach to treating young children with disorders of relating and communicating combines two treatment modalities within a developmental group therapy setting. The first is object mediated, whereas the second builds on body and creative movement experiences. While objects provide a valuable support to symbolization and serve as transactional objects in social interactions, they may also act as a barrier to direct social relatedness. Conversely, in the absence of mediating objects, social interactions are stripped to their essence, highlighting the regulatory and communicational difficulties of these children. We will analyze how the two therapeutic modalities complement each other in addressing the core issues of children with disordres of relating and communicating. For this, we will present a developmental observation grid which grew out of the scale for assessing the functional emotional developmental level, while integrating issues specific to autistic spectrum disorders. Our theoretical considerations of the interrelationship between these elements lead us to reflect on the emergence of the child's capacity for self-regulation and mentalization that underpins social relatedness. Case examples and video taped extracts from the sessions will illustrate the material presented.

328 Evolution of the Treatment of a Group of Children with ASD with a Developmental Relationship Approach Based Model

Maria Teresa Sindelar (Switzerland), Annalisa Monti (Italy)

The aim of this article is to present a therapeutic intervention of a group of children diagnosed with PDD initiated in 2002 and actually continuing at USL11, Empoli,Italy. The work is based in the importance of intervention in early years of life with children with ASD, PDD, in order to modify as much as possible the dysfunction of the disorder and avoid its chronicity. This psycoeducational group is composed by 4 children that come to our service 2 days a week for 2 hours. The intervention is conducted by one educator and one psychologist Relationship approach and an approach based on individual differences in sensory processing and motor planning (DIR Model) are the principal tools taken into account in this intervention. The work describes the therapeutic approach and the modification o children from October 2002 to January 2005. All the children have been evaluated as ASD following DSM IV criteria. The children were 2 years, 8 months to 5 years . The aim of the educators was to activated and modulated join attention, regulation communication and imitation taking into account each personal profile in sensory processing and motor planning.

The educators work together with families and school trying to build a comprehensive and intense approach where parents work in an optimal alliance with the professional team. For evaluating the outcome. Cars Scale and FEAS were used and showed improvements in all children.

330 **Poster Workshop 5: Pre- and Peri-natal Influences on Risk Processes Is the Baby Mine or the Hospital's - Supporting the Early Relationship in Hospital Environment**
Inger Linnea Soderlund (Finland)

IS THE BABY MINE OR THE HOSPITAL'S - SUPPORTING THE EARLY RELATIONSHIP IN HOSPITAL ENVIRONMENT Söderlund I., Kurki P-L., Sarkkinen M., Petäjä J., Kanerva R. (Finland) In sick newborn infants, especially if premature the early relationship is in danger. We aim to alleviate this by immediate and frequent support. HUCH, Jorvi Hospital is a university affiliated areal hospital in the Helsinki capital area providing neonatal care for 3500 deliveries annually excluding intensive care. In 2004, 49 families with 60 babies were referred by neonatal ward to our childpsychiatric consultation team. Support was given as supervision to nurses and as direct psycho-social support to families. In supervising the nursing staff we support the nurses to observe early interaction and encourage them to actively intervene. Our main focus is on the dyad between the baby and the mother. Lack of objective measuring tools for actual impact is a limitation. Instead, we are analyzing the themes during the sessions. During the process the staff on ward has become more sensitive to both recognize and tackle the traumatizing experiences. In the direct contact between the baby-familyworker and the mother, mother's difficulties and disappointments about the shared care- giving predominate.

331 **Attachment Quality to Fathers in Preterm Infants at 12 Months of Age**
Ruediger Kissgen, Angela Kribs, Norbert Heinen, Bernhard Roth (Germany)

In contrast to infant-mother attachment quality of infant-father attachment in preterm infants is rarely in the focus of research. Since Easterbrooks (1989) study in the last 16 years only one other (Fava-Vizziello & Calvo, 1997) has been conducted to this subject. Considering the enormous improvements in neonatological care during the last decade this is surprising. Especially because fathers nowadays are more often actively involved in the caregiving of their preterm infants. Objective: The aims of T1 and T2 of the longitudinal study are (1) to analyse the distributions of attachment quality to father and to mother in preterm and full-term infants at 13 and 20 months of corrected age and (2) to investigate the similarity and differences in quality of attachments to father and to mother in these two samples. Methods Subjects: Thirty preterm and 30 full-term infants and their parents living in the Cologne county will be recruited (June 2005 - March 2006) from a Neonatal Intensive Care Unit (NICU), level III and Children's Hospitals. Preterm infants have to be very low birthweight (<1,500 grams), full-term infants must have at least 37 weeks gestation and appropriate size for gestational age. Procedures: (1) Nursery Neurobiological Risk Score (NBRIS) (2) Critical Risk Index for Babies (CRIB-Score) (3) Bayley Scales of Infant Development: BSID-II (Bayley, 1993) (4) Strange Situation (Ainsworth & Wittig, 1969) Results Results for T1 will completely be available until the end of May 2006.

332 **Disorganized Attachment Quality in Very Low Birthweight Preterm Infants and Postnatal Neurobiological Risk**
Karl Heinz Brisch (Germany)

Objective: In a longitudinal prospective study N=79 very low birthweight preterms (birthweight: M=943 grs, SD=284, weeks of gestation: M=27.6, SD=2.7) were followed up in their development. Methods: Neonatal risks were measured with the Nursery Neurobiologic Risk Score (NBRIS) (Brazy et al, 1991) scoring biological risk factors and complications arising from neonatal treatment. At 14 months (corrected for prematurity) attachment quality with mother was measured with the Strange Situation (Ainsworth et al., 1969). Results: Infants showed 60.3% secure, 23.5% insecure-avoidant, 2.9% insecure-ambivalent and 10.3% disorganized attachment quality with mother, 2.9% of infants could not be classified. The neonatal risk factors were significantly correlated with the attachment outcome. Especially attachment disorganization was significantly associated with periventricular leucomalacia due to intracerebral hemorrhage and with postnatal hypoglycemia, both risks contributing independently to disorganization. Discussion: Neonatal risk factors, both arising from prematurity and from complications of treatment, are valid predictors of neurological outcome.

Attachment quality could be more influenced by cerebral risk factors than by mother-infant interaction. Especially disorganized attachment behavior patterns could be triggered by special postnatal neurobiological risks that affect brain development. Minimizing the risks of neonatal treatment could be of benefit, both for the neurological and emotional development of these preterm infants.

333 Trauma of Pre-term Birth: Coping Processes, Mother-Child Relationship, and Early Regulatory/Developmental Tasks - A Prospective Study

Grazyna Kmita (Poland)

The aim of this prospective study was to analyze the relationship between coping processes of parents experiencing preterm birth of their child and the child's development regarded in terms of early regulatory tasks. The subjects were 30 children born before 37th gestational week, aged 0 to 3 and their parents. The study material comprised protocols of clinical interviews with parents, observation of child behavior in different contexts, analysis of mother-child interactions, and evaluation of child's development using both psychometric as well as functional approach. 15 mothers used "coping through distance" and 15- "coping through commitment" (the two patterns distinguished by L.Newman). Two measures of child developmental status were used: a specially computed index of "regulatory/ developmental competence" and a functional emotional developmental level (according to DC: 0-3). Perinatal experiences of the parents justified the notion of "trauma of preterm birth". The child's competencies versus difficulties in early regulatory tasks at the age of six months corrected age were best predicted by the mother's coping pattern and child's birth weight. There was a statistically significant relationship between mothers' affective attunement and child's functional emotional developmental level. A working model of a dynamic, complex and changing with time relationship between parental processes of coping with trauma of preterm birth and early development of their children is proposed.

334 Effects of Preterm Extruterine Visual Experience on the Developing Visual System: A Longitudinal Study of Shifts of Attention and Gaze in Early Infancy

Sabine Hunnius, Reint H. Geuze, Arend F. Bos, Mar J. Zweens (Netherlands)

Preterm infants are confronted with visual stimulation much earlier in their development than full-terms. Several studies on visual development support the notion that healthy, low-risk preterms benefit from this early visual experience. At the same time, it has been suggested that only early developing processes might be enhanced, while later maturing processes might not. This study investigates whether preterm infants' visual and attentional development is accelerated and whether different visual processes are affected differently. The performance of 10 low-risk preterm and 20 full-term infants on a gaze and attention shifting task was compared during the first 6 months post term. Simple gaze shifts and disengagement of attention were examined. Whereas the sensory and motor processes involved in simple gaze shifts are functional already at term age, the attentional processes requested for disengagement mature around 2 to 4 months post term. The study revealed an advantage in the preterm infants' performance: Until 16 weeks post term, they were faster in disengaging their attention, whereas no difference was found for simple gaze shifts. This finding is in contrast with earlier accounts that only early maturing visual processes might benefit from additional visual experience, while the later developing cortical functions might depend mainly on preprogrammed maturation processes. However, it is consistent with a number of findings on visual, motor and speech development, which have suggested accelerated cortical functioning in healthy preterm infants before.

335 Parenting Preterm Infants: Neonatal Risk, Maternal Social Isolation, and Depression

Jon-Paul Bianchi, Julie Poehlmann (United States)

Despite advances in medical interventions, neonatal health complications place preterm-low birthweight children at significant risk and care givers also experience challenges when caring for a preterm infant. The goal of this study was to investigate how neonatal health risks related to maternal depressive symptoms and feelings of parental stress and isolation in mothers of preterm low birthweight infants. Data were collected at NICU discharge and 4 months post-term on a subsample of families (N = 81) with preterm infants who were participating in a larger longitudinal study. Measures included an assessment of infant medical complications, the Center for

Epidemiological Studies-Depression, the Parenting Stress Index, and the Social Network interview. Preliminary multiple regression analyses suggested that mothers whose infants spent more days in the NICU reported that they gave up more of their life to meet their child's needs. and mothers of infants with lower 5 minute Apgar scores indicated that they were less interested in people than they used to be. In the interviews, mothers often expressed concerns about infant health being related to their own socially isolated behaviors. Preliminary findings also suggest that maternal feelings of isolation and role restriction were associated with maternal depressed mood at child birth and 4 months in mothers of preterm infants.

336 **Sleeping and Feeding Patterns of Premature and/or Sick Infants After Discharge from the Neonatal Intensive Care Unit and their Parents' Well-being**

Arna Skuladottir, Rakei Bjorg Jonsdottir, Solveig Kristjansdottir (Iceland)

The aim of this retrospective/ prospective study was to describe infants' sleeping and feeding patterns post-discharge from NICU. Participants were 109 parents (58 mothers and 51 fathers) having 62 infants. Data were collected by questionnaires and diaries. Results showed that 70,5% of infants with birth weight over 2500g were exclusively breastfed at discharge, compared to 31,3% low birth weight (LBW) infants. At 15 weeks of age 68% of infants with birth weight over 2500g were still exclusively breastfed compared to 44% of LBW infants. Results suggest a connection between weight and sleep at 15 weeks of aged. Heavier infants wake less often up during the night and sleep longer total night sleep. However, there was no connection between infant's birth weight and sleep pattern at that age. Results indicate that breastfeeding affects infants sleep pattern at 15 weeks of age as breastfeed infants wake up more often at nights. They are more likely to need assistance to fall asleep and to sleep in their parents' bed. Fathers of infants who are exclusively breastfeeding at 15 weeks of age are noticeably more tired and sleep worse than fathers of bottle-fed infants. This difference is not noticeable with the mothers. Results are being used in developing support to parents prior to discharge from the NICU.

337 **Sleeping and Feeding Rhythms of Premature Infants in Japan**

Kumi Mikuni, Taiko Hirose, Motoko Okamitsu, Sakae Saito, Masami Usui, Miho Kusanagi, Izumi Takahashi, Mayumi Hiramatsu, Taeko Teramoto, Takahide Omori (Japan)

The objective of this study was to examine the sleeping and feeding rhythms of premature infants. Subjects were twenty-nine premature dyads and 64 full- term dyads. The sleep activity record (SAR) developed by K. Barnard was used to measure sleeping and feeding rhythms. Study parameters were sleep duration, number of feedings, time of waking, time of sleeping, and number of crying. The investigated items were statistically analyzed. At the adjusted ages of 0, 6 and 20 weeks, the average duration of daytime sleep decreased significantly with age, but that of nighttime sleep showed no marked change. The number of nighttime feedings decreased significantly with age. The numbers of daytime and nighttime crying episodes decreased significantly with age. When compared to the full-term infants at the age of 12 weeks, premature infants at the ages of 6 and 20 weeks had more nighttime feedings later time of waking and earlier time of sleeping. Even for comparisons made with adjusted age, the results of the present study suggest that premature infants may take longer to establish a sleep/wake rhythm compared to full-term infants. Also, in terms of time of going to sleep, premature infants tended to stay awake later from an early age, showing that it will be necessary to support parents of premature infants so that premature infants can establish proper biological rhythms from an early age.

338 **Maternal Mental Representations in the Light of Prematurity: Contribution of Kangaroo Care**

Kelley Paula MacGregor, Nuno Miguel Reis, Pedro Caldeira da Silva (Portugal)

The purpose of this work is to analyse and understand the differences in maternal mental representations in mothers of premature, new-born babies who use the «kangaroo care» method in order to ascertain whether this method does in fact have any advantages with respect to the entire development of mother's identity. This paper includes a review of literature addressing psychological, relational and environmental aspects of prematurity, maternal mental representations and «kangaroo care». The instrument used to evaluate maternal representations was the Interview R («L' Entretien R»), originally developed by Stern and assistants in Geneva (Stern D.N., Robert-

prematurity on children's play narratives and elucidates children's own experiences of early separation.

342 Exploration Of A New Coding System For The Macarthur Narrative Story Stem Battery:

Antonia Glowacki, Peter Fonagy (Great Britain)

The MacArthur Story Stem Battery is a widely used projective doll-play measure and is most commonly used with preschool age children. This study explores the psychometric properties of a new coding system with children between 6 and 8 years. This psychoanalytically informed system captures processes associated with representational systems. The coding system consists of seventeen scales, including Process, Character Representation, and Content scales. In an initial reliability study, the MSSB was administered to a sample of 179 referred and non-referred children between the ages of 6 and 12 years. A study of the inter-rater reliability resulted in robust agreement between coders. The scales were stable at three-months, and less stable at one-year. Second, a study of the scales' predictive ability concerning psychopathology was completed with a sub-sample of 67 six to 8 year olds. Children exhibiting behavior problems produced narratives with less coherence, interpersonal themes, agentful thinking and mentalizing, when compared to non-clinical children. In addition, children with clinical scores, who nevertheless produce coherent and reflective narratives, are less likely to be referred for treatment. Children with clinical depression produced narratives with less mentalizing compared with non-clinical children. This study hopes to offer a clinically relevant system for use in longitudinal studies that bridge the gap between preschool age and middle childhood.

343 Changes Of Attachment To The Mother From Infancy To Childhood: Girls Are Less At Risk?

Ildiko Toth, Agnes Szollosi, Ildiko Danis (Hungary), Jonathan Michael Green (Great Britain), Judit Gervai (Hungary)

Longitudinal studies vary in findings on long-term stability of attachment patterns, even in low-social-risk samples. In the Budapest Family Study, 103 low-social-risk families with firstborn infants were followed from birth. We investigated the continuity of mother-child attachment using the Strange Situation Procedure at one year (N=103) and the Manchester Child Attachment Story Task (MCAST) at six years of age (N=84). In both assessments, attachment quality was classified as secure, avoidant, resistant, or disorganized. Distribution of attachment categories at age one year was similar to other non-clinical samples, though the rate of disorganization (21%) was at the high end. At six years, 36% showed disorganized attachment $\chi^2=8.28, p=0.016$; there was a strong sex effect for both secure/insecure ($\chi^2=6.45, p=0.011$) and organized/disorganized (under-represented among insecure (B=31, G=11) as well as disorganized (B=23, G=7) children. Stability of secure/insecure attachment from 1 to 6 years was significant for girls ($\kappa=0.32, p=0.05$), but not for boys ($\kappa=0.07, p=0.63$). Marginally significant continuity ($\kappa=0.17$) was found from 1 to 6 years for disorganized/non-disorganized attachment. Stability of secure/insecure and organized/disorganized was greater in the sub-sample of 71 stable, two-parent families ($\kappa=0.21, p<0.08$). In summary, stability of attachment in our sample was influenced both by child sex and parental separation. Firstborn girls were less at risk for unfavorable change in attachment from infancy to childhood.

344 Italian Validation Of The Manchester Child Attachment Task And Its Relationship With Aai, Sat, Temperamental Characteristics And Social Skills.

Maria Zaccagnino, Barbara Actis Perrinetti, Fabio Veglia (Italy)

We evaluated the relationship of the Manchester Child Attachment Story Task (Green et al., 2000) with parental Adult Attachment Interview, Separation Anxiety Test, Temperamental characteristics and social skills (Dodge, 1986). Our sample includes 44 normal children (51% boys, 49% girls) from 4.5 to 7.5 years (mean age 6.3) from some schools in northern Italy and their mothers. MCAST and SAT were administered in the school setting. The parents completed the Italian Temperament Questionnaire, 28 mothers consented to being interviewed with the AAI. Both the AAI and the MCAST interviews were double coded blind with consensus ratings made in difficult cases. Results: Despite a slight majority of secure girls, no gender effect or age effects were found

with regard to attachment classification. Our data show association between MCAST's classification and maternal AAI; most of all between disorganization in the MCAST and unresolved status in the AAI. As well, we found a significant association between four classifications on the MCAST and the SAT. Temperamental measures are not correlated with coding in the MCAST. Insecurity and disorganization on the MCAST are significantly associated with aggressive behaviors and passive attitudes within social problem-solving tasks. No association was found between attachment classification and competence in intentionality attribution (hostile versus non-hostile/ accidental) within social situations. Conclusion: Our results are similar to the findings of the UK MCAST validation (Green et al., 2000) and are very encouraging in respect to the validity of the MCAST.

345 Associations Between Triadic Family Relationship During Infancy And Children's Narrative Representations At Preschool Age

Kai von Klitzing, Stephanie Stadelmann, Agnes von Wyl, Sonja Perren (Switzerland)

This study examines associations between parental capacities for triadic (mother-father-child) relationships, and the representational and behavioral functioning of their offspring at preschool age. Forty-eight parental couples were given an intensive psychodynamic interview during their first pregnancy and one year after birth of their first child, to assess their subjective views of their parenthood and their relationships as threesomes (mother-father-child). The capacity for triadic relationships ("triadic capacity") was defined as the capacity of fathers and mothers to conceptualize their family relationships without excluding either themselves or their partners from the relationship with the infant. Four years later, the representational and behavioral functioning of their children were assessed in depth, using child narrative interviews (MSSB) and parental behavior ratings. The coherence of the children's narratives and the number of positive themes they expressed were significantly negatively correlated with the number of behavioral problems. In the longitudinal analyses, children of parents with high triadic capacities (assessed prenatally/at age one) told narratives with less denial of conflicts, more prosocial themes and less negative - aggressive themes (at preschool age). Based on these results, the significance of triadic relational family processes for the development of children's representational world and behavioral functioning is discussed.

346 Meanings Of Parental Divorce As Reflected In Correlates Of Children's Narrative Themes.

Inge Bretherton, Timothy Page (United States)

A selection of ten stems from the MacArthur Story Stem Battery and the Attachment Story Completion Task was administered to 71 4.5- to 5.0-year-old children (41 boys, 30 girls) whose mothers had been divorced for at least two years. The story task was adapted for children of divorce by presenting father and mother as living in two separate houses (represented by felt-squares). The stems themselves had no divorce content. Regression analyses showed that experiences in the postdivorce families are differentially reflected in boys' and girls' story completions. Whereas boys' father-child attachment and child-father empathy themes predicted positive interactions with preschool peers, boys' aggressive themes were unrelated to preschool behavior despite the fact that boys enacted such themes much more frequently than girls. In contrast, girls' father-child attachment story themes were highly predictive of behavioral problems in the preschool. In addition, girls' enactments of child-parent empathy, romantic and argumentative behavior between the parents, and father coming to the rescue of a helpless mother were predicted by maternal depression scores. Opposite associations of these story themes with maternal depressive symptoms for boys did not reach significance. On the basis of these and additional findings, we suspect that for girls, these story themes reflected worries about their parents' relationship and the father's role in the postdivorce family. We discuss the implications of our study in relation to clinical programs for children of divorce and their parents.

347 Profiles Of Story Telling With The Macarthur Story Stem Battery.

JoAnn Robinson, Monica Oxford, Mary Klute, Susan Spieker (United States)

In this paper we studied the patterns of narrative response in 600 low income five-year-olds whose families participated in the national study of Early Head Start. Prior to kindergarten entry, children were interviewed with the MacArthur Story Stem Battery and their responses were scored for

aggressive dysregulation, prosociality, avoidance/dissociation, conflict escalation, performance anxiety, and integration of emotion in coherent stories. Our approach is person-centered (using latent profile analysis) rather than variable-centered and looks for groupings of children who share similar response styles across several narrative dimensions. We found six patterns of response that highlight children's styles toward story-telling and examined how they differed on several measures of adjustment and school readiness. Of particular interest is a group of children who tell stories that are high in aggression, prosociality, and coherence in contrast to groups of children who are a) high on aggressive dysregulation and low on prosociality and coherence; and b) children who are low on aggressive dysregulation and high on prosociality and coherence. Differentiating this group of children allows us to parse out those aggressive children who are not necessarily at risk from those whose responses indicate greater vulnerability. Regarding the child's story productions from a holistic perspective will help move the usefulness of the story stem method out of the research lab and into the clinic.

348 Using the MacArthur Story Stem Battery to Understand Antisocial Children

Jonathan Hill, Nichaela Broyden, Gill Lancaster (Great Britain)

Antisocial children portray dysregulated aggression in their play and in their drawings, and they show evidence of insecure attachment. We investigated whether there were indications of both proneness to dysregulated aggression and one possible consequence of insecure attachment – low mentalisation – in referred antisocial boys using the MacArthur Story Stem Battery (MSSB). The sample comprised 66 boys aged 5.0 – 7.9 years, 41 referred with antisocial behaviour problems and 25 randomly selected from local schools. Antisocial boys had significantly higher mean scores reflecting dysregulated aggression only in response to conflictual story stems, and lower mean mentalisation scores only in response to distress stems. These differences remained after controlling for verbal IQ and story telling ability. In logistic regression entering binary aggression and mentalization variables in a stepwise procedure, high aggression to the conflict stem 'fight with a friend' (OR 7.65, $p = .010$) and low mentalization to the distress stem 'scary dog' (OR 6.77, $p = .015$) each made independent contributions to the prediction of group membership. High aggression or low mentalization was seen in 20% of control boys contrasted with 73% of the clinical group (OR 10.9, $p < .001$). We suggest that dysregulated aggression and low mentalisation interact to generate aggressive behaviours unmodified by reflectiveness or anxious inhibition. The findings illustrate the clinical potential of narrative techniques to assessing young antisocial children. We are evaluating a novel treatment based on these findings.

349 Clinical Use of MacArthur Story Stem Battery in Preschool Children with Sexual Abuse

Yee Jin Shin, Kyung Sook Lee, Joo Young Woo (Korean Republic (south))

Evaluating young children with sexual abuse has many legal and diagnostic challenges. Traditionally, evaluations of these children include parental reports, behavioral assessment, clinical interview, and projective testing. For legal purposes, the quality of a child's statement and evidence of psychological injuries related to sexual abuse are essential. Both are especially difficult for young children because of their limited capacity for self report and the dearth of psychometrically validated assessments. In the present investigation, we studied the usefulness of MacArthur Story Stem Battery (MSSB) as part of psychological evaluations for 25 preschool children with sexual abuse and made comparisons with same-age normal children ($n=20$) and children with other psychiatric problems ($n=20$). MSSB is part of the psychiatric evaluation of children with sexual abuse who visited the Sunflower Children's Center, a Korean treatment center for sexually abused children. Six of 13 administered stories were compared across groups because sexually abused children were distressed so much that they could not tolerate the full battery. Preliminary analysis of data showed that sexually abused children showed less affection, more avoidance strategies, more negative parental representation and were usually not able to find appropriate solutions in conflict situations, compared to normal children and children with other psychiatric problems. We will discuss the clinical usefulness of MSSB in evaluating and understanding both psychopathologies and mental representation of preschool children with sexual abuse.

350 Structured Diagnostic Interviews: Parent and Child Report in Preschoolers with

Manic-like Symptoms

Carol Beresford, JoAnn Robinson, John Holmberg (United States)

Excited behavior is a common feature of the young child. Preschool children, like older children, may present with manic-like symptoms that can be confused with ADHD symptoms. Controversy exists whether early childhood mania exists and can be reliability differentiated from normal excited behavior. We identified 34 preschool children aged 3.5 to 6 years; 22 with manic-like symptoms and 12 typically-developing children. We investigated the issue of a mania diagnosis with semi-structured DSM-IV diagnostic interviews with parents. Child-based information can be vital to the identification of certain psychiatric conditions; we used a structured interaction with children, the MacArthur Story Stem Battery (MSSB). All children with manic-like symptoms met DSM-IV symptom criteria for mood disorder including several with rapid cycling; most did not meet duration criteria for a diagnosis of mania following DSM-IV guidelines. The results showed that manic and manic-like symptoms occur more frequently in mood-disordered than typically-developing children. Based on MSSB data, the mood-disordered group, compared to typicals, manifested more violent and bizarre responses to certain emotional challenges in the story stems. Based on the above findings, it is suggested that careful DSM-IV diagnostic interviewing of parents and administration of the MSSB to children may be sensitive methods for characterization of mood disorders in very young children. Specificity of the findings to a true mania diagnosis has yet to be investigated, and will require both the addition of other clinical groups and long term follow-up.

351 Story Stem Assessments of the Effects of Maltreatment in Legal, Clinical, and Child Protection Work

Jill Hodges (Great Britain)

London's Great Ormond Street Children's Hospital has one of the few specialist multidisciplinary teams in the UK carrying out assessment of young maltreated children for the Courts. For over ten years we have routinely used the Story Stem Assessment Profile, (which incorporates a number of MSSB stems) as a key part of this assessment. Information about young children's own perceptions and expectations of relationships between family members is crucial for decisions about child protection, future family placement, possible rehabilitation, and contact. This poster focuses on the particular value of narrative assessments with this vulnerable population of children. It illustrates how the rating system provides an indication of the child's attachment relationships and a detailed picture of their mental representations of parent-child relationships, in a form useful for social work and legal practitioners as well as clinicians. The poster also reports studies of the narrative responses of clinical series of young children, assessed between the ages of four and eight, who suffered particular forms of maltreatment. These include sexual abuse, factitious or induced illness, and various forms of emotional abuse. Young maltreated children show global similarities in their narrative responses relative to nonmaltreated children, but it is possible to refine these findings to examine more specific sequelae. Particular themes and representations in children's narratives were identified which were associated with specific forms of maltreatment, refining the use of this instrument for clinical assessment.

352 Children's Play Narratives in Clinical Practice at a Child Psychiatric Family Ward

Palvi Kaukonen, Reija Latva, Raili Salmelin, Ilona Luoma (Finland)

The aim of presentation is to describe and evaluate the use of MacArthur Story Stem Battery (MSSB) as a part of clinical assessment process of young children at the child psychiatric family ward of the Tampere University Hospital and to compare the results of MSSB and other clinical assessment tools. The family ward is a day ward for infants and young children with their families. The three-week family inpatient program includes an intensive evaluation and treatment for psychiatric problems of the child and for serious concerns of parenting and psychosocial problems of the family. The evaluation of the child and family includes observation of the child - family interaction, interview of the family about the child's development and current concerns, and family therapeutic interviews. Child's individual evaluation includes clinical observation and interview, CBCL and TRF questionnaires, and MSSB. The sample described here includes narratives of 42 children treated during the time period January 2000 - June 2005. There were 26 boys (62%) and 16 girls (38%) in the sample. The mean age of the children was 6.1 years (SD 1.0, range 4.3 - 7.8). A total of 48 % of the children were under 6 years of age. The results of the MSSB will be compared

with the life events and family factors during the first three years of the child development as well as with other clinical assessment tools at the family ward. Advances and problems of the clinical use of MSSB will be discussed in this poster presentation.

353 Caregiver Traumatization and Young Children's Mental Representations of Self and Others

Daniel Schechter, Annette Zygmunt, JoAnn Robinson (United States)

Interpersonal violence (IV) perpetrated against women of childbearing age is a major public health problem in the U.S. The mechanisms by which the psychological impact of IV is transmitted across generations are unknown. This investigation studies impacts of maternal IV experiences and related posttraumatic stress disorder (PTSD) on young children's mental representations of self and other, one possible mechanisms of intergenerational transmission. We hypothesized that severity of IV-related PTSD would positively correlate to levels of dysregulated negative emotion and arousal, and negatively correlate to degree of coherence of traumatized mothers' children's play-narratives in response to a story-stem task. Participant mothers (n=24) were recruited from a referred sample in an inner-city Hispanic community two years prior to gathering child narratives, when children were ages 8-50 months. Maternal report and direct child observational measures (MacArthur Story Stem Battery: MSSB) were used. Mothers' experience of domestic violence, and as hypothesized, severity of her violence-related PTSD symptoms (number of symptoms) robustly predicted more dysregulated aggression, attentional bias to distress and danger, as well as more avoidance and withdrawal from conflict in the children's MSSB narratives. Severity of PTSD symptoms fell short of a significant negative correlation to narrative coherence at this level of analysis. See Table 1 below. Maternal violent experience and related symptoms during the child's early life adversely affect young children's mental representations of self and other.

354 Emotional Themes in Narratives of Depressed versus ADHD and Healthy Preschoolers

Andy Belden, Jill Sullivan, Joan Luby (United States)

Empirical data is now available demonstrating that depression can be identified in children as young as three years when age appropriate assessments of symptoms are done. In order to validate depressive disorders in preschool children it is necessary to identify child-focused assessment tools so that the emotional experiences and expressions of depression can be understood. In the current study, we examined whether depressed preschool children's (n = 74) emotions and themes during play were qualitatively different from children in healthy (n = 197) and ADHD comparison groups (n = 31). Using the MacArthur Story Stem Battery, we focused on stories that addressed themes of loss and sadness. We hypothesized that depressed preschoolers would express more emotionally negative themes (e.g., sadness, shame, and guilt) during their play and be observed using avoidant strategies more frequently than the healthy and ADHD comparison groups. We hypothesized the preschoolers in the depressed group would express more negatively oriented representations of their parents than children in the healthy group. Also, we expected that children in the ADHD group would express more controlling and harsh disciplinary representations of their parents than children in the control group. Investigating the question of whether depressed preschoolers experience and express more emotionally negative (e.g., guilt, shame, or self-exclusion) themes during play narrative formation would provide clinicians with additional systematic knowledge that might assist them in understanding and treating depression in preschool-age children.

355 How Preschool Children Deal with Hypothetical Conflicts: Associations between Avoidance and Emotional/Behavioral Problems

Stephanie Stadelmann, Agnes von Wyl, Sonja Perren, Kai von Klitzing (Switzerland)

The evaluation of children's narratives (e.g. elicited by story stem tasks) has shown to be useful in getting access to the way children internally deal with conflictual relational themes. A number of studies found associations between content themes and structure of children's narratives and children's emotional and behavioral problems. In particular, literature suggests that troubled children might modify or avoid presenting specific themes in narratives in order to regulate their negative emotions. Our study among 200 5-year-old children of a clinical and a community sample investigated the association between avoidance (denial and repetition of story stem themes) in play

narratives and children's emotional / behavioral problems. Children's play narratives were assessed by means of the MacArthur Story Stem Battery. A multi-informant-approach (parent, teacher, child) was employed to assess emotional / behavioral problems. Avoidance in narratives was significantly associated with children's emotional/behavioral problems. Children of the clinical sample showed more frequent repetition of story stem themes than children of the community sample. Children who showed repetition of an actual story stem theme demonstrated more behavioral problems. Girls who often avoided conflicts in their narratives showed more emotional problems. The significance of narrative avoidance for emotional/behavioral regulation will be discussed.

356 Meeting A Baby

Pedro Caldeira da Silva (Portugal)

The video presents a 25 minute session with a 4 month old baby abandoned in hospital for the previous 2 months. From gaze avoidance and apathy to mutual engagement and emotional sharing, the video presents a single-session intervention with a child psychiatrist in which a psychological reanimation takes place.

358 Pregnancy And Family History Of Suicide : Mental Health Considerations

Oguz Omay (France)

Several studies have shown the effects of perinatal death on subsequent pregnancies and underlined the complex relationship of the specific mindset of pregnancy and on-going mourning resulting from previous loss. Another particular situation arises when a woman whose parent had committed suicide becomes pregnant. Family history of suicide often goes unnoticed in the ordinary practice of obstetrics, even when it is recent. Greater attention to family history may be needed to encourage the mother to bring these experiences to the forefront and make it easier for her to come to terms with her loss. In France, consultations at the fourth month of pregnancy (systematic consultations recently proposed by the government) may offer a good opportunity to conduct such an interview within a general evaluation of the psychosocial context of pregnancy. An opportunity for a specific follow-up will arise once the family history of suicide is known. These women may be at greater risk of postpartum mood disorder (severe depression or puerperal psychosis, etc.). Moreover, the early mother-infant relationship is usually affected by any impairment of this mourning. Diagnosis of such a disorder must be early to provide timely treatment, pharmacologic and/or psychotherapy, when appropriate. Better still, a preventive approach through brief psychotherapy may help to guide the mother through the grief and give her an opportunity to come to terms with her family history in a way that is rarely possible at other times. These points will be illustrated with clinical cases.

359 Prevention And Care For Puerperal And Perinatal Psychological Disorders : Liaison Psychiatry In Maternity

Anne-Laure Sutter, Elisabeth Glatigny-Dallay, C. Quintric, M. Loustau, M.P. Padrosa, C. Soubielle, I. Lacaze, V. Schaeffer, J. Horovitz, R. Saura, D. Roux, Dominique Dallay, E. Toussaint, Helene Verdoux (France)

Liaison psychiatry in maternity wards is a necessary first step towards prevention and care in perinatal psychiatry. Liaison psychiatry has existed at the Bordeaux University Hospital Obstetrics Department, one of the largest in France, for the past ten years. The development of this specialty in our department, in collaboration with midwives, obstetricians, social workers, and the community, has made effective prevention possible and drastically reduced the number of very serious cases requiring urgent care. Multidisciplinary professional working-groups have been developed around two topics: one group focuses on the medico-psycho-social approach to women who are psychologically and/or socially very disadvantaged, and another group works on the management of perinatal bereavement. The development of these two groups and their clinical achievements will be presented and discussed.

360 Babies Admitted With Their Mother In Psychiatric Mother-baby Units (mbu) In France And Belgium. Results From National Data Collection (2002-2004)

Nine Glangeaud-Freudenthal, Anne-Laure Sutter, Veronique Lafont, Odile Cazas, Christine Rainelli, Rafaele Cammas, Marie-Agathe Zimmerman, Blanche Massari, Alain Debourg, Michel Maron, Francois Poinso, Sylvie Nezelof, Soulie Maryse, Corrine

Dumoutier, Clare Dakowski (France)

The aim of treatment in Mother Baby Units (MBU) is to treat the mother's disorder, facilitate and enhance a secure mother-baby attachment, promote the child's development, and when necessary for the child's safety, arrange separation from the mother and placement of the baby at discharge. We have collected data from MBUs in France (11 of the 17 MBUs) and Belgium (3 of the 4) about admission of women and their babies (less than 1 year old at admission) since January 1999. Analysis of data collected from January 2002 through December 2004 (N>400) has enabled us to detail models of risk factors related to admission outcomes (non-recovery of maternal mental health, disturbed mother-baby relationships, and impaired infant development). These results will be compared to previously published results of the data collected in 1999 and 2000 (178 cases, Glangeaud-Freudenthal N MC & the MBU-SMF working group, 2004; Mother-baby psychiatric units (MBUs): National data collection in France and in Belgium, 1999-2000; Archives of Women's Mental Health, 7, 59-64). We confirmed and supplemented previous risk factor models and observed some changes in clinical practices between these study periods

361 Perinatal Networks And Their Role In Mental Health Prevention

Catherine Isserlis, Maurice Toledano (France)

Care for and prevention of mental health disorders during pregnancy may be influenced by various factors including the structural reorganization of institutions offering care for very severe pathologies, changes in the distribution of patient-flow between hospital and community services, and reductions in the number of specialists. All of these are currently occurring in France, and management of community care programs must change concomitantly. A network called "Perinatal Community" in the town of Versailles focuses on care of the mother and baby dyad. The aim of this network is to improve early screening for psychological and emotional disorders and to set up programs to prevent mental illness. The interests and mental health care of the pregnant women is at the center of such a network, and within it, follow-up comes from community health professionals in liaison with the maternity ward, from community-based midwives (private or from mother and child protection unit) and, when needed, from mental health professionals (liaison psychiatry, perinatal psychiatric department, mental health centers) and social workers. Each of these professionals have a specific role to play and they may interact with one another. A network makes it possible to share information about women easily and quickly (history, family context, on-going care, needs, and problems to be solved) and to set up plans to meet her various needs. Such networks must meet and work on a regular basis if they are to solve problems quickly and effectively while focusing on the patient's needs.

364 Emotional Availability In Mothers With A History Of Abuse

E. Moehler (Germany), Z. Biringen (United States), C. Kaufmann, A. Wiebel, P. Parzer, F. Resch (Germany)

Emotional availability is a well established construct assessing the quality of the parent-child relationship. This study analyzed whether emotional availability may be altered by a mother's experiences of physical or sexual abuse during her upbringing. From October 2004, all women giving birth to a child in the cities of Heidelberg and Mannheim were contacted by mail and administered questionnaires regarding socioeconomic and medical data concerning the pre-, peri-, and postnatal periods, the Childhood Trauma Questionnaire, and the Parenting Stress Index. Women who reached a cut-off for sexual and/or physical abuse and whose children were term babies with APGAR-Scores > 7 were included in the study to form the index group. They were invited to the laboratory when their infants were 5 and 12 months. Emotional availability and the Bayley Mental, Motor, and Behavior Scales as well as maternal psychopathology were assessed on both occasions and compared with a control group of mother-infant pairs matched for infant age, gender, maternal education, and marital status. To be included in the control group, mothers had to have a score of 0 on the physical and sexual abuse scale. Preliminary analysis of data from a small subset of the sample indicates an association between maternal history of abuse and maternal postnatal depression with a possible impact of childhood abuse on emotional availability.

365 Cultural Differences In Emotional Availability And Parenting In Young Us Mothers

Jana Chaudhuri, A. Easterbrooks (United States)

The parenting literature demonstrates differences in parenting styles of families of various cultural origins (see Bornstein, 2002 for review); these differences appear in culturally diverse families across the U.S. Authoritative parenting, typified by warmth and autonomy granting is the most common parenting style for the majority of European-American families (Baumrind, 1991; Steinberg et al, 1994). Hispanic parents often place greater emphasis on obedience and "proper demeanor" and less on child autonomy (Harwood et al, 1999; Rogoff, 2003). The present study explores emotional availability in U.S. mothers representing three cultural groups: African-American, European-American, and Hispanic, and examines how differences in emotional availability can be explained by other parenting behaviors and attitudes. Three hundred and sixty-one young mothers (mean age=17) and their infants were visited in their homes. Interviews, standardized questionnaires, and observations of emotional availability were used to assess parenting behaviors and attitudes, mother's perceptions of her own caregivers' behaviors during childhood, and parenting goals. Hispanic mothers were consistently more intrusive during a teaching task than were European-American mothers. They also were more likely to want their children to "be respectful," while European-American mothers prized their children's "happiness." Additional analyses on parenting attitudes, goals, and childrearing history will be reported.

366 **Mother-child Emotional Availability In Cultural Ecological Developmental Perspective: Three Cultures, Two Regions, Two Ages, Two Genders**

Marc Bornstein, D. Leach, M. Heslington, M. Gini, J. Suwalsky, P. Venuti, S. de Falco, Z. Giusti, C. Zingman de Galperin (United States)

Emotional availability (EA) is a prominent index of mutual socioemotional adaptation in the parent-child dyad. This study employs a cross-national longitudinal framework and the Emotional Availability Scales (3rd edition) to examine cultural, regional, developmental, and gender differences in EA. Altogether 220 Argentine, Italian, and U.S. American rural and urban mothers and their 5- and 20-month-old daughters and sons took part in two home observations, one in infancy and one in toddlerhood. In terms of culture, Italian mothers and children scored higher than Argentine and U. S. Americans who scored equally on the maternal Sensitivity and Structuring and child Responsiveness and Involving EA Scales. In terms of region, urban mothers and children scored higher than rural on all four EA Scales. In terms of development, mothers and children did not change in level between 5 and 20 months on any of the scales, and they were moderately stable between 5 and 20 months on all scales of the EAS. In terms of gender, mothers of girls and girls scored higher than mothers of boys and boys on 3 of 4 EAS. Emotional availability is a critical aspect of the child-parent relationship, and understanding the effects of culture, region, development, and gender as they influence emotional availability enhances our understanding forces that shape the construct.

367 **Emotional Availability Intervention With Child Care Providers Of Infants And Toddlers: A Community Perspective**

Z. Biringen, J. Aberle, L. Al-Subhi, S. Altenhofen, S. Bennet-Shuck, E. Coker, A. Moorlag, A. Okuzawa, J. Wood (United States)

Close to 100 studies have implemented interventions to improve the attachment security between parents and infants, usually by improving the sensitivity in the parent-child relationship (Bakersman-Kranenberg, van Ijzendoorn, & Juffer, 2003). These interventions have been found to be generally successful in both the improvement of sensitivity and in changing insecure attachments to secure attachments. However, a growing percentage of children in the U.S. live in multiple caregiving environments, spending at least half their time in child care. Forty-five child care providers of infants/toddlers in center child care were enrolled in an EA Intervention (EAI; two 1? hours of group trainings on attachment and emotional availability, followed by 3-4 interactive coaching sessions right at the child care centers, using a newly developed EA checklist, in which discrete behaviors were outlined for each dimension. Project infants and providers were observed for pretest assessments of EA and of the Attachment Q-set, followed by the EAI, and then post-test of EA and the Attachment Q-Set. A comparison group matched to the intervention group on relevant demographic characteristics was also seen but not given the EAI. Preliminary analyses indicate a relation between the EAS and the Attachment Q-Set, further strengthening the connection between the two constructs. Preliminary analyses also indicate the effectiveness of EAI.

370 Theoretical Mechanisms Of Attachment And Addiction In Parenting: Implications For Intervention Development

Linda Mayes (United States)

Dr. Mayes will review the conceptual psychosocial and neurobiological mechanisms of attachment and addiction on which the new interventions are based. Attachment theory stresses caregivers' sensitivity to infants' behavioral cues of distress and views caregiver misconceptions of children's distress as a function of the caregivers' own distorted or denied affect related to their own early experience. The intergenerational transmission of representations characterized by denial or distortion is thought to be mediated by caregivers' difficulty recognizing intentionality underlying children's behavior (i.e., "reflective functioning" or RF). Without the capacity for RF, caregivers are expected to have difficulty making sense of or responding to children's behavior. The interventions in this symposium aim to "undo" mothers' affective distortion and denial at the representational level and improve their understanding of children's intentionality. These improvements are expected to increase maternal sensitivity to children's emotional cues during interactions. Many abused substances (e.g., cocaine, heroin) affect the dopaminergic pathways in the brain, areas associated with initiation of behavior, hedonic reward, and motivation. These central pathways are also thought to be critically involved in parents' capacities to invest caring for children. Drug abuse is thought to co-opt or "hijack" this endogenous value system. The treatment models presented here aim to help mothers invest in their children rather than substances and therefore "reset" the focus of the reward system.

371 Early Motherhood And Substance Dependency: Factors Related To Better Outcome Of Residential Treatment

Marjukka Pajulo, Mirjam Kalland (Finland)

Drs. Pajulo and Kalland will present an evaluation of a residential program in Finland for mother-infant pairs involving mothers who abuse alcohol and drugs. Housed in unique, home-like residential units, the program aims to intensively support both mothers' abstinence from drug and alcohol use and interactions with their infants. The enhancement of maternal reflective functioning (RF) - the capacity to adopt an intentional (versus behavioral) stance toward the infant - is a crucial aspect of the intervention. Central hypotheses are: 1) moderate-to-high postnatal maternal RF is associated with higher sensitivity and low RF is associated with unresponsive, intrusive, or hostile behavior in early mother-infant interactions; 2) effects of maternal psychiatric symptoms on maternal sensitivity are mediated by maternal RF; 3) the treatment intervention will enhance maternal RF; and 4) little or no effect by intervention on RF is associated with having a) more traumatic experiences in early childhood and b) longer substance abuse history. Thirty mother-infant pairs who entered treatment during pregnancy and stayed until at least four months postpartum are being assessed at one, three, and four months postpartum, at the end of the residential period, and at one and two years of the child's age. Assessments include videotaped interaction, semi-structured interviews used to assess maternal reflective functioning, questionnaires used to assess maternal psychosocial adjustment, and measures of infant development. Presenters will describe the program evaluation, present preliminary data, and discuss implications for future intervention development.

372 The Mothers And Toddlers Program For Women Enrolled In Outpatient Treatment For Drug And Alcohol Use

Nancy Suchman, Cindy DeCoste, Nicole Schmitt (United States)

The Mothers and Toddlers Program (MTP) is an adjunct intervention for women in outpatient treatment for drug/alcohol abuse caring for toddlers ages 18 to 36 months. MTP focuses on the mother-child relationship with specific emphasis on maternal reflective functioning (RF), the ability to recognize children's behavior as driven by intentional states. The MTP team is part of an outpatient clinical unit that provides treatment for drug/alcohol dependence, psychiatric disturbance, medical problems, and support for basic needs. Developmentally-appropriate day care is provided on site. Therapists meet individually with mothers each week to explore representations of children, cognitive and emotional states underlying children's behavior, and developmental themes using videotaped mother-child interactions and mothers' accounts of interactions during the week. Strong emphasis is placed on the team's efforts to maintain a strong alliance with mothers during their

recovery. In a randomized trial with 60 women, mothers' and toddlers' response to therapy will be compared with a cohort receiving behavioral parent training. Assessed outcomes include maternal RF, representations of the child, maternal sensitivity and emotional growth-fostering with toddlers, maternal psychosocial adjustment and drug use, and toddler's cue expressiveness, responsiveness, and use of mothers as a "secure base." Investigators will describe the intervention and study, report preliminary findings, and discuss implications for future intervention development.

375 Being a Single Mother

Christine Anzieu-Premmereur (American Samoa)

A woman in her forties decided to have children before menopause. Since she never had a regular relationship with a man, she chose IVF. She got twin boys, premature babies difficult to raise. She couldn't sleep alone and had them in her bed for the first 3 years. When the day care asked her for an early evaluation for one for the twins, she realized she needed help and she started psychotherapy, asking for advice, support as if the therapist could be her partner at raising the kids.

376 Childbirth And Mourning After The 9/11 World Trade Center Attack

Rita Reiswig (United States)

This presentation focuses on the on-going early intervention with women who were pregnant and widowed in the World Trade Center attack on September 11, 2001. These mothers found themselves in a complex juxtaposition, losing their husbands, and, in the midst of their grief, giving birth to a baby. How could this impossible mixture of experiences - the death of a spouse and the need to nurture a newborn - exist side by side? Each mother had several simultaneous, contradictory tasks. She had to nurture a newborn as she mourned her husband's loss, allowing him to die, but also retain his memory for herself and transmit that memory in some form to the child who had been born so the child would know something of its father. Most of the mothers in our project were high functioning and economically privileged with strong ties to extended family and friends, but the normal states of mind required for good-enough mothering were profoundly disrupted in the face of their trauma.

380 How Expressive Rhythm Shrinks And Expands Minds : Vocal Interaction Between Borderline Mothers And Their 3-month-old Infants

Maya Gratier, Anne Delavenne, Gisele Danon (France)

We will present data from a study of vocal rhythm coordination in mother-infant face-to-face interaction among a group of twelve women diagnosed with borderline personality disorder. High-quality audio recordings were made as part of a large-scale study carried out at a clinical research center in France (Dr. Danon). The clinical sample is compared with a nonpathological control sample. Audio recordings of "time 1" and "time 2" of the face-to-face still face paradigm were selected for analysis (four minutes per dyad). An acoustic analysis methodology provides a measure of the quality of rhythmic coordination. The method highlights the joint 'phrasing' of vocal expression by mother and infant. These musical-like phrases of vocal interaction may constitute important units for the dynamic co-construction of meaningful exchange. They also contain playful elements of variability, modulations of pitch and intensity. Our findings show that the vocal interactions of borderline mothers and their infants lack both the structure of flexible phrasing and the playful variability of other acoustic parameters. We suggest that this breakdown of the flow of dynamic communication impedes 'expanded dyadic consciousness' and contributes to reinforce the borderline mother's sense of personal exclusion and confusion. We also show that most infants of borderline mothers make efforts to improve the quality of vocal exchange with their mothers. There is thus an important role for therapeutic intervention focused on promoting and supporting the musical quality of these early interactions.

381 Dyadic Expansion Of Consciousness In A Therapeutic Context

Alexandra Harrison (United States)

This presentation describes how one analyst has made use of a developmental model of change - Tronick's dyadic expansion of consciousness model - in her clinical practice, and illustrates her use of the model with a clinical case. The dyadic expansion model of change emphasizes the moment to moment "local level" interactions in the analytic dyad. The detailed clinical information is taken

from videotapes of the analytic treatment of a five-year old boy. The clinical material is presented in the form of verbal transcriptions and descriptions of non-verbal interactions between analyst and child. Both the model of change and the technique build upon work by developmental researchers and thus show how advances in the field of infant observation research can supplement traditional analytic methods. The presentation will illustrate the analyst's technique from the point of view of the dyadic expansion model. According to this theoretical perspective, meaning is co-created between patient and analyst in a moment-to-moment, continually evolving process, in implicit as well as explicit ways. Videotapes demonstrate the communicative exchanges of affect and intention, as well as of symbolic meaning in the analytic process. In particular, the analyst's use of rhythmic repetition in her vocal turns and body movements, facilitates the "messy," unpredictable co-creative meaning-making. Videotapes from several different points in the first year of the analytic treatment will be used to illustrate the continual evolution of increasingly complex and coherent meaning in the interaction between the two analytic partners.

382 Interactive Regulation Of Affect In Postpartum Depressed Mothers

Corinna Reck, Ulrich Stefenelli, Thomas Fuchs (Germany), George Downing (France), Edward Tronick (United States)

This presentation will focus on the specific characteristics of interactions between borderline infants at three months of age and their mothers. The dysphoric impulsive borderline mothers alternate between the fear of being abandoned and the search for immediate and complete closeness. These mothers are in constant fear of being overwhelmed by feelings triggered by their infants' emotional needs. In an effort to keep their own emotions from overriding them, they establish patterns of intrusive, repetitive, non-contingent interactions. Study was conducted as part of a long-term prospective research of interactions during the first year of life using the Face-to-face Still Face Paradigm. Interactions were coded with MRSS and IRSS coding system. Results showed that if mothers were repetitively mismatching their infants behavior, they were globally less interactive than controls. These paradoxical results of too much (too intrusive) or too little (not many and all the same) interactions raise numerous questions. The infant reacts with emotional dysregulation and an increase of self-comforting and autonomous system behavior. However, during Still Face, he or she does not cease to search for maternal attention. How the drive to relate and to seek dyadic expansion is stronger for the infant than the disruptive link that it establishes will be discussed. We will also briefly present some possible directions for clinical intervention with borderline mothers and their infants.

383 Paradoxical Interactions Between Borderline Mothers And Their Infants

Gisele Danon, Rozenn Gaignic-Philippe, Marina Gianoli-Valente, Emmanuel Devouche, Maya Gratier, Annick Le Nestour-Crivilla (France)

This presentation will focus on the specific characteristics of interactions between borderline infants at three months of age and their mothers. The dysphoric impulsive borderline mothers alternate between the fear of being abandoned and the search for immediate and complete closeness. These mothers are in constant fear of being overwhelmed by feelings triggered by their infants' emotional needs. In an effort to keep their own emotions from overriding them, they establish patterns of intrusive, repetitive, non-contingent interactions. A study was conducted as part of a long-term prospective research of interactions during the first year of life using the Face-to-face Still Face Paradigm. Interactions were coded with the MRSS and IRSS coding system. Results showed that if mothers were repetitively mismatching their infants behavior, they were globally less interactive than controls. These paradoxical results of too much (too intrusive) or too little (not many and all the same) interactions raise numerous questions. The infant reacts with emotional dysregulation and an increase of self-comforting and autonomous system behavior. However, during Still Face he or she does not cease to search for maternal attention. How the drive to relate and to seek dyadic expansion is stronger for the infant than the disruptive link that it establishes will be discussed. We will also briefly present some possible directions for clinical intervention with borderline mothers and their infants.

386 Associated Factors Of Disturbances Of Attachment In Preschool Children Living In Foster Families

Mirjam Oosterman, Carlo Schuengel (Netherlands)

Foster children are at risk for disturbances of attachment due to experiences before and during foster care. We examined indicators of stability and quality of foster caregiving in relation to symptoms of disturbed attachment. The Disturbances of Attachment Interview (DAI; Smyke & Zeanah, 2002) was done with foster parents of 55 children (2.5-6.5 years). Children were observed in the foster family using the attachment Q-sort and in the strange situation. The foster parent reported on her own responsiveness to the child's distress on Stovall and Dozier's (2000) Parent Attachment Diary (PAD). DAI and PAD responses were coded independently by trained and reliable staff. Older children were more at risk for inhibited, disinhibited (trend) and secure base distortions (trend) than younger children, even when length of placement and total number of placements were taken into account. Correlations between the subscales disinhibited and indiscriminate behavior and the measure for responsiveness of the foster parent approached significance. These results will be discussed in relation to observed quality of attachment and sensitivity. The effect of age is consistent with a model of increasing maladaptation in children confronted with disruptions of caregiving. The results also suggest that developmental pathways of attachment may be affected by experiences within foster care. The DAI and PAD show promise as tools for further (longitudinal) study of these pathways.

387 How Do Co-constructed Narrative Measures In Maltreated And Non-maltreated Children Living In Stable Placements Relate To Socio-emotional Functioning? Results From The Infant Team Follow-up Study.

Neil Boris, Sherry Heller, Lara Robinson, Lisa Settles, Colleen Crittenden (United States)

Foster children are at risk for disturbances of attachment due to experiences before and during foster care. We followed a cohort of maltreated children (n=84) placed in foster care before 48 months of age until they were in a stable placement for at least one year. Each child was matched on age (average age 6.6 years), sex, and race with a community peer (n=84) and all children were assessed using a series of in-home measures including the Autobiographical Emotional Events Dialogue, a narrative measure co-constructed with the child's current primary caregiver. Child's report of socio-emotional functioning (using the Berkeley Puppet Interview) and parent and teacher reports of behavior were also gathered along with cognitive screens (K-BIT and Peabody Picture Vocabulary Test). Finally, an observational measure of the home environment (the HOME scale) was gathered. In this paper, we will present results on whether maltreated versus non-maltreated children differed in how they expressed dialogue about emotions with their caregivers and whether behavioral, cognitive, or home environmental variables moderated the relationship between maltreatment history, placement status and narrative dialogue.

388 Exploring Attachment Behavior Versus Non-attachment Behavior. Clinical Observations Of Children's Diverging Relationship-specific Behavioral Patterns With Significant Caregivers

J. Clasiën de Schipper (Netherlands), Robert S. Marvin (United States), Carlo Schuengel (Netherlands), William F. Whelan (United States)

A disorder of non-attachment is usually conceptualized as a child-bound disorder, implying a generalized problem in relating to important caregivers. Non-attachment to single but not all caregivers is a phenomenon, however, encountered with some frequency during clinical evaluations of children's attachment. These children present a unique opportunity to find behavioral patterns associated with the status of a relationship as an attachment relationship. In this study, reports on four clinically referred children (25-72 months), observed in the Strange Situation Procedure with each of two significant caregivers, will be used to make qualitative within-child and between-child comparisons of suspected attachment and non-attachment relationships. In the so-called non-attachment relationships, children did not show safe haven behavior towards their caregiver. Children sometimes showed very strong avoidant behavior. However, this avoidance was more derogatory than neutral, setting it apart from patterns of avoidance in typical samples. Specifically, these children made it explicitly clear, verbal or non-verbal, that the relationship was unimportant to them. Some children showed behavior in which no attachment patterns were evident, while in other relationships they showed clearly identifiable attachment patterns. The results indicate that a lack of clear attachment patterns in one specific relationship does not necessarily imply that the child is

disordered across relationships. Furthermore, our observations suggest a meaningful pattern of denial or derogation of attachment relationships in young, clinic referred children.

391 Working With Caregivers In The Orphanage. Transcultural Issues

Felipe Eugenio Lecannelier (Chile)

Countries deal differently with the problems caused by abandonment and neglect or abuse of babies. In many countries in Latin America, infants are placed in institutions. However, over the last few years, research with infants has shown the negative effects of prolonged periods of institutionalization. These negative effects are physical/ physiological, cognitive, social and emotional. The evidence has shown that although institutionalization does not doom infants to develop psychopathology, it leaves them in a state of high vulnerability. In Chile, over 90% of the infants who are going to be adopted, are placed first in institutions from birth until the moment of adoption. This is an additional risk factor for the child, together with the fact that adoptions tend to occur rather late, exposing the babies to considerable deprivation at the beginning of their life. Our project evaluated these infants and implemented an intervention with them. First, we assessed 76 institutionalized babies between three and seven months of age from several regions of Chile. We studied the infant's temperament, attachment behavior, presence of behavioral and emotional symptoms and psychomotor development. After this, we implemented a program described in a "manual for parental sensitivity" for the caregivers in the institutions. We also evaluated the effects of this intervention. This is the first study carried out in Chile using current evaluation parameters and with a representative sample of infants. We discuss the implications of institutional care and alternatives from a transcultural perspective.

392 Babies And Parents In Their Contexts And Cultures. Lessons From The Field

Marie Rose Moro, Felicia Heidenreich (France)

Two essential questions are examined: 1) What happens to the cultural practices and traditions after migration? 2) What is the impact of migration for parents and infants when the parents are in exile? We will present findings from the research group of the Ecole de Bobigny (Paris, France). Our findings underscore that in clinical work with those families, it is crucial to formulate and explore the cultural representations that parents have of their infants. This leads to a true therapeutic alliance. This is more likely to lead to a harmonious triadic interaction between parent, infant, and context. We examine several levels of interaction (including the behavioral, the affective, and the phantasmatic levels). The cultural level of interaction, that is, the interactions determined by cultural dictates and practices constitute the framework for all interactions and for the transmission of messages and behaviors. We show examples of our therapeutic work, which takes into account the individual-family and the cultural dimensions. Our model is the trans-cultural consultation. It involves various "geometrical parameters" (individual, group, therapists) offering mothers and infants consultation from a psychoanalytical point of view (Winnicott, Lebovici) with translators who speak the parents' mother tongue and therapists that are able to understand the cultural representations and their different polarities. It involves a therapeutic posture of respect and acceptance of differences.

393 The Healthy Immigrant Paradox. What Is The Cost Of Acculturation?

Martin Maldonado-Duran, Clara Aisenstein, Charles Millhuff (United States)

Increasingly, health professionals in developed countries interact in clinical work with immigrant families. They often impart advice and information on child-rearing practices and how to deal with common concerns in the perinatal period and early childhood. Immigrants often feel compelled to abandon traditional practices in order to acculturate. Multiple studies of an epidemiological nature point to the negative impact of acculturation in countries like the United States, Germany and others. This has been called the "immigrant paradox," i.e. despite conditions such as poverty and limited access to the health care system, less acculturated immigrants have better health indicators. In the perinatal period they consist of lower levels of depression, stress, and substance and alcohol abuse. Also, they have a lower rate of postpartum depression and of perinatal complications such as premature birth, small for gestational age infant, preeclampsia, etc. Children of less acculturated immigrants also tend to have better psychosocial adjustment (lower rates of depression, dissocial behavior). Less acculturated parents have healthier diets and feed a healthier diet to their child, have

higher rates of immunization and use of car-seats. With increasing acculturation, all these health indicators decline and resemble those of the host population. The lessons from this empirical evidence are explored, in terms of the protective effects of traditional child care practices and the corresponding higher risk of more "modern" child-rearing and maternal care strategies.

394 Workshop 19: Let's Read: A Universal Early Literacy Program to Enhance Attuned Parent/Child Communication, Strengthen Relationships, and Promote Healthy Development

Frank Oberklaid, Campbell Paul (Australia)

Encouraging nurturing and stimulating parent/child relationships is central to ensuring positive developmental outcomes for young children. Most programs target groups considered 'high risk' or where there is already evidence of dysfunction. A major challenge in service provision is to develop universal and population-based approaches to infant mental health promotion. Let's Read is an early literacy program which promotes reading aloud to young children, beginning in infancy. It is designed to enhance parent/child communication and promote language development by teaching parents to read to their child on a daily basis using recommended books appropriate to the child's age. Shared reading activity in infants and young children has been described as fundamentally a social process, and thus can be regarded as a tangible infant mental health promotion. It can be modelled and demonstrated by community based professionals that come into frequent contact with young children and their parents. Let's Read is evidence based (was developed following a review of the research literature), non-stigmatising (universal program), focuses on building relationships (parent/ infant as well as parent/professional), is quality focused (training program for professionals), and sustainable (uses the existing community based service infrastructure and builds community capacity). This workshop explores the rationale and theoretical basis for the intervention, and describes in detail the process of conceptualising, developing and implementing this large scale national initiative.

395 Workshop 20: Brazelton Examination with Blind Mothers: Using the NBAS Transcription Special Situation

Terry Berry Brazelton (United States), Daniel Stern, Nadia Bruschiweiller-Stern (Switzerland), Drina Candilis Huisman, Edith Thoueille, Michel Soule (France), Joshua Sparrow (United States), Martine Vermillard (France)

BRAZELTON EXAMINATION WITH BLIND MOTHERS: USING THE NBAS TRANSCRIPTIN SPECIAL SITUATION Senior author : Pr Michel SOULÉ - Association PHYMENTIN, 20 rue de Dantzig 75015 PARIS FRANCE Email : pr.soule@wanadoo.fr Terry Berry BRAZELTON, Joshua SPARROW (United States), Daniel STERN, Nadia BRUSHWEILLER STERN (Switzerland), Edith THOUÉILLE, Michel SOULÉ, Drina CANDILIS HUISMAN, Martine VERMILLARD (France) This workshop in French with text in English and with consecutive French –English translation will describe a particular use and adaptation of the NBAS examination with blind mothers and their newborns. The workshop will be chaired by Pr TB BRAZELTON. The team of the Well baby clinic at the Institut de Puériculture de Paris has been fully trained with the NBAS. This Well baby clinic has been working with blind mothers for long. This workshop will describe the adaptation of the NBAS to fit the situation of the mother infant interactional guidance with mothers having different levels of sight impairment. I Berry Brazelton and Josh Sparrow will describe the use of the NBAS in special situation. Drina Candilis Huisman will describe the particular situation of blind mothers. II Edith Thoueille and Martine Vermillard will describe the adaptation of the NBAS, through a video presentation .III Daniel Stern and Nadia Stern- Brushweiler, will discuss how this particular situation can help us understand the development of intersubjectivity, and highlight the normal process of development in mother infant relationships. The panel will help starting a discussion with the attendance.

396 Workshop 21: Strategies for Improving Orphanages

Christina Groark, Robert McCall (United States)

This workshop will consider a variety of issues pertaining to improving caregiving in orphanages to promote children's development and mental health. First, should we invest in improving orphanages, primarily in developing countries, or put our energies into developing foster care and

adoption? Second, are there people in positions of responsibility who recognize the need and are willing to improve the orphanages? Third, it helps to conduct a logic model procedure with all relevant stakeholders, considering what is needed for optimal development (e.g., reared in a family), what is lacking in the orphanages, and what could be done to correct the deficiencies and approach the ideal of family life? This discussion is likely to focus on smaller groups, fewer caregivers who are more consistent in the children's lives, and promoting better relationships between caregivers and children. A video showing orphanages in St. Petersburg, Russian Federation, before and after such changes will be shown and evidence that such changes can produce improvement in children's development will be presented. Then the workshop leaders, who are engaged in two such projects in different countries, will promote discussion of how these changes might be implemented with modest cost and maintained at no additional cost.

397 **Workshop 22: Treating Traumatic Stress across Generations: Working with Inner City Adolescent Mothers, their Babies, and their Mothers**

Talia Hatzor, Daniel Schechter (United States)

This workshop will describe 3 cases of parent- Infant psychotherapy involving single Hispanic teenage mothers, their infants, and their mothers who were referred to, assessed, and treated at the Infant Family Service at Columbia University Medical Center. We will consider both the difficulties and benefits of working with this challenging and complex population with attention to hypothesized mechanisms of intergenerational transmission of attachment and trauma, assessment of developmental and relational psychopathology, and psychotherapeutic technique. We will address issues of sensitivity to the families' culture and struggles with acculturation in an urban American inner-city. Two of the mothers and infants participated in a videotaped research protocol that was designed to investigate the effects of maternal violence-related posttraumatic stress disorder on maternal perception, interactive behavior, and physiology. We will therefore be able to consider with the audience these cases in the context of empirical research and the psychotherapeutic services offered to them, along with the integration of research findings and clinical treatment.

398 **Workshop 23: The Family Alliance Assessment Scale, An Instrument to Assess Family Interactions**

Chloe Lavanchy, Myriam Cuennet, France Frascarolo, Nicolas Favez (Switzerland)

This workshop presents an assessment instrument of family interactions, useful to clinicians as well as researchers: the Family Alliance Assessment Scale (FAAS). It allows an evaluation of the family alliance, that is the degree of coordination partners reach in working together towards implementing a task like the Lausanne Trilogic Play. In this task, researchers ask the family to play together, structuring their game in four parts: first, one parent plays with the infant and the other one is observer participant; second, parents switch roles; third, the three partners play together; last, the parents interact whilst the baby is observer participant. The non verbal behaviours are taken into account in the macro-coding FAAS. On the one hand, the FAAS defines three family alliances: the cooperative alliance (functional alliance), the competitive alliance and the disordered alliance (problematic alliances). On the other hand, the family interactions are assessed according to eleven dimensions, like for example readiness to interact, gaze orientation, co-parenting and roles organization. These dimensions give us indicators of weaknesses as well as strengths and resources of the family. In this workshop, LTP tapes will be used to give examples of assessment. Then, the usefulness of the FAAS in others situations than the LTP paradigm will be discussed.

399 **Workshop 19: Communicative Musicality and Premature Infants**

Hisako Watanabe (Japan), Stephen Malloch (Australia), Colwyn Trevarthen (Great Britain), Takeshi Horiuchi, Toyoko Watanabe (Japan)

This workshop consists of two parts: part A) Theory of communicative musicality (CM) and part B) Practice including its applications in the study of interactions with premature infants, and in their care. A) CM consists of pulse (rhythm), quality (form of a gesture as it changes through time) and narrative (combination of pulse and quality) in expressive action. It is the human skill of sharing narratives of feeling in companionship, present from birth, and underlying all forms of shared human expressive communication, carried by both bodily and vocal gesture. CM is particularly

evident in sympathetic adult communication with infants, where words cannot carry meaning, and the adult must meet the infant on the common ground of emotions and purposes conveyed between them by gestures of communication. On the evidence of sensitively made recordings in optimal conditions, this co-created action can arise in intimacy between an affectionate or caring adult and a premature infant, just as in a full-term baby. In spite of their special needs, premature infants can, we propose, participate in and benefit from CM. B) Premature infants (born 32 to 34 weeks of gestation) were videotaped at around 36 to 39 weeks of gestation in 3 NICU & neonatal units in Japan. Spectrographic analysis revealed softer and subtler sounds in the premature infant compared to the full-term infant. The mother responded at an interval of 0.65 to 0.8 seconds, creating a harmonious interplay like a duet in pianissimo.

400 **Becoming A Partner - The Baby's Bathing Time: Initiative, Communication, and Mutuality in a Body Care Situation in the Second Semester of Life**

Julianna Vamos (France)

The idea is to see the baby's body care as an occasion to build up a profound relationship and a partnership between him and his caretaker. Following the first film concerning children aged from 0 to 6 months – “The Baby's Time: bathing and caring. Solicitude, empathy, and acquired gestures” shown in Amsterdam in 2002, we carry on studying “the art of caring” practiced at the Pikler Institute in Budapest. In the second semester, the baby's motor experiences become more varied, his interests are widening, and he shows more and more personal initiative and will. Now, he knows the bath ritual very well, he can anticipate and prepare himself. If his self-initiated motor development is respected, the baby is actively and takestake part in the care. Sometimes, he can also be interested in something else, he initiates plays and even tries to tease the adult. This film shows how the adult can take into account these contributions, sometimes impulsive emotional movements of the child and transforming it into a mutual pleasure whilst bathing. This didactic film is intended for caretakers in any field of infant care, and those involved in young children's care. It is also intended for paediatricians and paediatric nurses in training, but anyone who has the opportunity to bathe a baby may be inspired.

401 **Respectful Approach to a Reserved Baby: Preverbal Psychic and Body Activity: 18 Minutes in Tamara's Life**

Anne Vasseur (France)

In this film conference, Myriam David, a child psychiatrist (Winner of 2002 Waimh Lebovici Prize) presents her approach to the early preverbal mental process by studying in detail a caring situation with a 3-and a half month- -old Tamara , placed in a residential nursery at the Pikler Institute. The nurse is mindful of the child's sensations and movements, she takes care of Tamara's body delicately, and tries to make contact with this reserved baby. Tamara's often nearly imperceptible movements and expressions indicate her continuous psychic activity. The study underlines how, in the absence of verbal language, Tamara's psychic activity filters into her sensorimotor abilities, creates, uses, guides and accompanies the slight movements that her level of development allows. This activity enables her to make contact with the nurse and progressively, step by step, working on differentiating herself from the other. At that stage of her development and history, Tamara shows and teaches us the ways she uses to undertake and pursue personal experiences. These experiences participate in the elaboration of her Self, in the dawning of her relationship with the nurse as well as in the regulation of the “unimaginable” emotions that arise at that time. Her psychic and sensorimotor activities work as allies, the two “emanating from” and activating each other.

402 **Interfaces between Attachment and Intersubjectivity in a Clinical Mother-infant Dyad**
Dieter Buergin (Switzerland), George Downing (France), Ute Ziegenhain (Germany)

403 **Maternal Insightfulness into the emotional experience of the child: Its significance for children's development in normative and high-risk conditions**

David Oppenheim (Israel)

404 **A Family Perspective in Interaction Guidance**

Monica Hedenbro (Sweden)

- 405 Relationship Based Early Intervention: Home and Community Based Approaches**
Hiram Fitzgerald (United States)
- 406 The infant reveals family trauma: Transgenerational transmission of conflicts in infant -parent therapy**
Hisako Watenabe (Japan)
- 408 Attachment Disorders in Family and Social Context**
Charles Zeanah (United States)
- 410 Adolescent Pregnancy, Attachment Style And Depression**
Barbara Figueiredo (Portugal), Antonia Bifulco (Great Britain), Alexandra Pacheco, Raquel Costa (Portugal)
The aim of this study was to compare the experience of pregnancy in teenage years and adulthood and to examine insecure attachment style as a risk factor for depression during pregnancy. The Attachment Style Interview (ASI, Bifulco et al, 2002) and the Edinburgh Postnatal Depression Scale (EPDS, Cox et al, 1987) were administered to 66 adolescents and 64 adults. Pregnant teenagers were found to be over three times more likely to have an insecure attachment style than adults (20% vs. 6%, $p < .02$). Logistic regression showed that highly Enmeshed style, poor partner support and separation from parents in childhood provided the best model for depression. Age at pregnancy did not add to the final model. Insecure attachment style should be addressed in prevention and intervention strategies, namely with teenager mothers.
- 411 Pregnant Adolescents' Identity: Development Process And Family Influence**
Margarida Abreu, Jose Azevedo, Paul Constanca (Portugal)
The aims of this study were: i) To characterize pregnant adolescent's social-economical and demographic profile; ii) To explore how pregnant adolescents configure their identity and the more predominant identity status among them; iii) To study the patterns of interaction inside adolescent's families and how they are associated with the process of identity formation. We studied 209 pregnant adolescents and 131 families. Data were collected by Pregnancy Research Questionnaire (PRQ) (Schaefer & Manheimer, 1960), Ego Identity Process Questionnaire (EIPQ) (Balistreri et al., 1995), Family Environmental Scale, Form R (FES) (Moos & Moos, 1986) and a semi-structure interview. Adolescent's relatives (N=131) also completed the Family Environmental Scale and were interviewed. Most pregnant teen were 17 years old (48.3%), less than 9th grade (56%), were unemployed (52.2%), and married or living with her partner (51.2%). Concerning identity status, participants were classified in four groups: foreclosure (58.9%), diffusion (28.2%), achievement (8.1%), and moratorium (4.8%). Pearson correlation coefficients were conducted to examine relations between PRQ subscales and EIPQ dimensions. One-way ANOVA test was used to compare mean scores of the subscales of FES in each of the sub-groups (identity statuses). We found significant differences among groups (Identity Status) for Cohesion; Expressiveness; Conflict and Organization. By adopting an ecological perspective, the interrelated systems in which pregnancy occurs are examined.
- 412 Social Support, Maternal Attachment State Of Mind, And Attachment Security In Infants Of Portuguese Adolescent Mothers**
Ines Jongenelen, Isabel Soares (Portugal), Karin Grossmann (Germany), Carla Martins (Portugal)
Traditionally, adolescent motherhood is considered a risk situation with adverse consequences for adolescent mothers and their offspring. Recently, the literature about the topic has been emphasizing the multiple developmental pathways in adolescent motherhood. Within Bowlby's attachment theory, a longitudinal study was conducted with forty adolescent mothers and their infants, assessed during pregnancy and during the first year of life. Several measures were used including the Adult Attachment Interview (pregnancy) the Social Support Questionnaire (pregnancy and 12th month), the Neonatal Inventory (pregnancy and 1st month), and the Strange Situation (12th month). Results show that: a) no statistically significant pattern of intergenerational transmission of attachment from mother to infant was found; b) a substantial number of infants

were classified as secure to the mother at one year of age; c) the social support perceived by adolescents during pregnancy predicts infant's attachment organization. These results sustain an ecological view of mother-infant attachment, where the contextual matrix - in which the mother-infant relationship is embedded - may illuminate our understanding about the intergenerational histories of attachment in adolescent motherhood.

413 Relational Factors Associated With Adolescent Pregnancy In Adolescents Of Low Socio-economic Status: A Cross-sectional Comparative Study

Ana Isabel Pereira, Cristina Canavarro, A. Pedrosa, M. Cardoso, Denise Mendonca (Portugal)

This study aims to explore multiple relational factors belonging to different contexts - family, relationships outside the family, school - that promote vulnerabilities and protection for early pregnancy in a potential risk group of Portuguese adolescents, adolescents from low-socio-economic status. Two groups of young women: pregnant (n=57) and without a pregnancy history (n=81), aged 14 through 18 years, comprised the convenience sample population. Results suggest that several variables, belonging to different contexts - family, relationships outside the family and peer relations - are important predictors of pregnancy status. Lower levels of mother's overprotection and father's emotional support, presence of early pregnancy in the adolescent's mother, lower level of emotional proximity to peer relations and higher number of school failures are significantly and positively associated with adolescent pregnancy. These results suggest that for the prevention of teenage pregnancy the interventions need to be aimed at broader systems (family, school, social support systems) and risk contexts rather than the exclusive focus on the individual (e.g. sex education).

416 Long Term Follow Up Study From Preschool Age To Adulthood : Impact On 20 Cases Of Early Treatments At The Jardin D'enfants Therapeutique

Dora Knauer (Switzerland)

Our day center is specialized for families and children presenting relational disabilities or delayed developments, and not progressing sufficiently with ambulatory consultations. In addition to the educative treatment, children can take benefit from speech and psychomotor therapies and from psychodynamic psychotherapies. Parents are sustained by psychodynamic or behavioral guidance. Our study concerns 20 cases treated as young children and examined until 20 years later. Population is divided in two diagnostic groups, Relation and Communication Troubles or Affective Troubles (CD:0-3). From the beginning, these two groups show different evolution, with more psychopathologic continuity for cases with more important impairments. Long term results confirm the relevance of early and long term treatments, given the evolution observed between adolescence and adulthood. This study bring us to reflect on psychopathological effects of potentially pathogenic or protective factors, and we have tried to relate traumatic life events, diagnostic evolutions, and presence of treatments after the day center. We will discuss issues and connections between early attachment disorders and importance of development difficulties of these high risk children, and possibly protective effects of therapeutic work, according to life quality reached at adult age for each patient. Our 20 cases have been followed at different stages of life (early childhood, latency age, adolescence, and young adulthood). Results reveal a highly instructive vision on efficiency and limits of our therapeutic efforts, initiated early in life.

417 Parent-child Treatments Throughout Pre-school And School Years

Marilisa Martelli, C. Bacchi, L. Benini, C. Barbieri, A. Cassetti, S. Impagliazzo, P. Siboni, C. Gentili (Italy)

The clinical evolution of a group of preschool infants treated with their parents is presented. A sample of 77 children has been selected among a population of 560 infants age 0 to 5, consulting the Early Childhood Clinic Center of Bologna. Different types of therapy were suggested: 53 preferred psychodynamic therapy, 17 choose cognitive-behavioral therapy, and 7 systemic therapy. This study aims to evaluate treatment indications and therapeutic factors. Evolution is assessed throughout infant symptoms, parent-child relationship features and results in the long term. Evaluations are accomplished at preschool, school, and preadolescent age. Clinical observation pursues a particular protocol devised in our Clinic Center, with specific devices for different

aspects: the child examination (symptoms, growth, emotional functioning); the relation with each parent; the parenting investigation (representations, psychological functioning); the stressful and the protecting factors analysis. Multiaxial classification: DC:0-3 is used for primary infants diagnosis while ICD 10 is used for older children. Appropriate therapy has been chosen on many different parameters: growth profile of every single child, parenthood functioning features and characteristics of specific parent-child relationship. Results of this study have been analyzed comparing data collected before, at the end and after treatments, through a longitudinal perspective. Outcomes of the study show an improvement in child's condition as well as parent-child relationship at the end of therapy, in the brief and long term.

418 Therapeutic Factors In Brief Parents-infant Psychotherapies

Sandra Rusconi Serpa, Christiane Robert-Tissot, Dora Knauer, Remy Barbe, Francisco Palacio Espasa (Switzerland)

Two studies on outcome and therapeutic processes in brief parent-infant psychotherapies were successively conducted with families and very young children consulting for functional disorders (age: 8-20 months / N=40) and behavior problems (age: 18-36 months / N=40). In previous analyses comparing the two groups (functional disorders versus behavior problems), we found that the group treated for functional disorders was characterized by a better outcome in therapy and a lower proportion of drop-outs than the group treated for behavior problems. The therapeutic processes were also investigated with several variables, such as therapeutic alliance, empathy, and identification of therapeutic focus, evaluated by parents and by therapist who completed questionnaires after each session of the treatment. Therapeutic alliance was defined in a restrictive way as patient's active collaboration during treatment and was identified as a necessary context for elaboration and identification of therapeutic focus, allowing an agreement between the therapist and the patient on a "common theory" of the problems addressed in therapy. The objective of this presentation is to compare the completers and non-completers of the two different groups on different aspects of therapeutic processes (for example therapeutic alliance, pretransference, parents' access to internal world, parents' insight, and therapist's ability to identify a therapeutic focus), in order to identify the relevant therapeutic factors in parent-infant brief psychotherapies. Based on the findings, we will propose hypotheses on the way to prevent treatment drop out.

419 Early Intervention And Dyadic And Triadic Arrangements

Grazia Maria Fava Vizziello, G. Simonelli, T. Baisini, F. de Palo (Italy)

Reviewing the tapes of ten short interventions started between ten months and 24 months of age, we chose some meaningful "now moments," either because parents had pointed them out or because we judged them especially interesting. Parents were self-referring to our service of "transition to parenthood and children development," most of them for speech delay or for being reassured that "everything was going well," especially when birth was difficult and the child underwent early hospitalization in NICU. At the moment of fixing the first visit, we let them choose who would come: we reviewed the tapes together at the end in most cases. Only two mothers came alone, one with a child born at 380g and one that was trying to have the child recognized by the father. Otherwise, both parents and the child were present, except in a situation where we never saw the child. We considered: the discrepancies between what we consider therapeutic and what parents consider helpful, with special attention to: 1) the main caregiver chosen by the child and the dyadic and triadic arrangements that needed target interventions; 2) the reduced parental availability because of triadic incestual-depressive transaction with or without incest suspicions and the level and quality of possible help; 3) the presence/absence of each parent; and 4) the difference between the explicit and deeper motivation to treatment. We studied proxemic, microactions; change from implicit to explicit knowledge, change in parents' emotional availability, change in couple and triadic situation, and relationship with the therapists as well as our way of intervention.

422 Parent-infant Psychotherapy With A Mother And Her Infant Born Of Rape

Amanda Jones (Great Britain)

In the presentation I will show how a young, deeply traumatized asylum-seeking mother used a psychodynamic, systemically sensitive, parent-infant intervention, to accept and gradually love her seventeen month old, first-born son. He was conceived during a seven month period of

imprisonment, during which his mother described repeated experiences of interrogation and gang-rape. She had no way of imagining that her son had been through these experiences with her, especially when in utero. Once born, he was faced with a clinically depressed mother with severe post-traumatic stress disorder. It made sense that he could only communicate via extreme violence. Together we started to understand the landscape of their internal worlds, and the complex unconscious defensive processes each used to navigate these turbulent terrains. I give particular attention to the mother's recourse to primitive defensive processes to manage being near to her baby, and how her use of such strategies meant he remained perpetually entrapped in a paranoid way of functioning. There were also more archaic experiences of loss in the mother's history which were buried but potent. In the twice weekly therapy, I occasionally filmed mother and son for three minutes (and have her permission to show video clips). The following week, I would invite her to free associate to what she saw. I suggest this facilitated her movement from experiencing Daniel as a terrifyingly destructive penis, to being able to imagine that he too had been raped in utero, which led to a change in the physical intimacy between them.

423 Working With A Sick Baby, Born Of A Rape

Campbell Paul (Australia)

This paper will form a bridge between the other two panelists' contributions. In the case of a sick baby in hospital to be discussed, her history raised questions about rape across the generations, rape in the context of relationships and whether a spectrum could be considered, as well as questions about self representation and identity. The baby's mother was still partnered with the baby's father who was reported to have raped her. This mother was herself a product of rape and it is important to have ways to understand this. She was a girl whose identity was in a sense destroyed at the moment of conception by her father who destroyed her mother's autonomy. Was that of the yet-to-be born infant therefore also destroyed? Does this lead to the baby's self being fragile from the beginning and the only way for this mother to shore up her sense of self is by attaching to someone similar to her father? What are the representations? Does she remember or not remember? We can speculate what the representation may mean, and what the real identity of the baby is. Who does the mother see when she looks at her baby - the baby's father or her own father or her self? Does a history like this predispose to identity diffusion or strength? Her baby is hypervigilant and precocious, which are fragile ways of coping.

424 Child Of Hope: Attachment And Trauma In Infancy

Astrid Berg (South Africa)

The brutal rape of a nine month old infant in December 2000 made headlines internationally. Although not the first and not the last infant to be raped, Baby Tshepang became a symbol for the suffering of these youngest members of our society. While much has been published about her from a medical and social perspective, the emotional impact and sequelae of this particular infant and the role of the mother and foster-family that cared for her, have to date not been documented. Baby Tshepang received excellent medical care at the Red Cross Children's Hospital. However, in pursuit of her physical safety and healing, her emotional needs were threatened to be pushed into the background. The assessment of whom the infant was attached to, and the quality of this attachment was as important as the physical care she received. Symptoms of Traumatic Stress Disorder were evident in her behavior confirming the finding that if trauma occurs during the earliest, pre-verbal phases of infancy, the memory is stored and acted-out on a somatic level. The symptoms continued to remain present for the subsequent two years, after which they gradually and spontaneously subsided. Baby Tshepang did not receive individual psychotherapy. However, she and her foster family have been followed-up at regular intervals. Reports to the relevant social agencies were important in order to ensure continuity of care. The attention given to her attachment figures, particularly their continued presence in her life was the essential factor contributing to her recovery.

427 Infant Care In England: Mothers' Aspirations And Experiences, Satisfaction And Concerns

Penelope Leach, Sara Phillips (Great Britain)

Employment of women while their children are infants has increased in the United Kingdom in the last decade. This longitudinal English study examined the relationships between the beliefs and

actions of 1,201 parents concerning non-maternal child care in the first year of life, and parents' contemporaneous feelings based on qualitative interviews with mothers using non-maternal care before their infants were seven months old. Relationships were explored between child care ideals, attitudinal, sociodemographic and psychological characteristics of mothers at three months, and their actual child care experiences at 10 months. Predictors of child care use, satisfaction with non-maternal care and confidence in the relationship and communication with caregivers were examined. Realizing ideals predicted more hours of child care use, though not greater satisfaction with it. Mothers with the infant's father or grandparent as caregiver and mothers with more progressive attitudes to child rearing and to maternal employment were more satisfied. Higher SES mothers and those using nurseries/centers were less satisfied. Relationships with caregivers were poorer for those who believed that maternal employment may have more negative consequences for children. During open-ended interviews with working mothers when their infants were six months old, concerns expressed by mothers included the importance of open communication with caregivers, their desire to keep control over infants' daily lives and upbringing, anxiety lest they lose their prime role as mothers, and worries about infants' physical safety and cognitive stimulation.

428 The Relationship Between Maternal Postnatal Depression And Children's Language Development

Alan Stein, Sara Phillips (Great Britain)

Objectives: Examine whether postnatal depression is associated with adverse effects on children's language development and whether other maternal factors in the first year of life influence language outcome. Design: Nine-hundred, ninety-nine mothers and infants assessed in the postnatal year were followed up at 36 months with standardized assessments of child language, mother-infant interaction and maternal psychological functioning. Results: Postnatal depression measured at 10 months (but not at three months) was inversely associated with language development at 36 months adjusting for a wide range of factors. Income, class and an older maternal age as well as gender of child (female) were associated with better language scores. Maternal cognitive stimulation at 10 months but not maternal responsiveness, was independently associated with higher language scores. Concurrent maternal responsiveness was also associated with outcome. Conclusions: This study found a moderate relationship between postnatal depression and poorer language development at 36 months, taking account of a range of potential confounders. Cognitive stimulation provided by the mother in the first year of life (which was associated with postnatal depression) had a significant effect on children's subsequent language. This suggests that early intervention programs for mothers with postnatal depression and their infants may benefit from the addition of a component which involves helping the mother to stimulate her child's cognitive development.

429 Offering Support To Vulnerable Families Expecting A New Baby: Take-up And Impact

Jacqueline Barnes, Rob Senior, Kristen MacPherson (Great Britain)

This study investigates families with a new baby, screened to identify families with vulnerability, identifying those who do not take up the offer of home visiting support from a community volunteer and examining the impact of the support over the first year. Those referred but not receiving support were more socially, educationally and economically disadvantaged, living in more disadvantaged neighborhoods. They reported changing their mind, wanting to cope without help, and in some cases feeling that the support offered did not meet their specific needs. Those who received support were more likely to have larger families, no local support network, or had family members with health or mental health problems. Those who were supported were compared to a control group identified by the same screening instrument but in areas where the support was not available. Those receiving support had lower levels of family stress and less of an increase in maternal depression than families in the control areas. Policy implications include offering support to new parents thought to be vulnerable within a statutory framework, with sufficient infrastructure and resources to conduct outreach work. Research implications include making a concerted effort to find out about families who decide not to take part in service evaluation studies, or who drop out after initial agreement.

430 Effects Of A Pre-school Programme On Children At Risk Of Educational

Underachievement

Maria Evangelou (Great Britain)

The Birth to School Study (BTSS) (1998-2005) is a longitudinal evaluation of the Peers Early Education Partnership (PEEP), a birth to five intervention that aims to improve the life chances of children from disadvantaged areas in Oxford by raising their educational achievement. PEEP's aims and practice are centered not on the children themselves but on the relationship between adults and children, which it considers to be at the heart of learning. The main focus of the study, which utilized a quasi-experimental design, was to establish whether the PEEP program had any effects on literacy, numeracy and social-emotional development for children who lived in the PEEP catchment area, compared with a matched group of children from a comparison area. In addition, a number of parental outcomes were explored. A total of 600 families participated in the study. The longitudinal nature of the study afforded the opportunity to explore the value-added element of belonging to the PEEP community. Propensity Score Matching (PSM) was the analytical strategy employed to match the groups. It is considered the best non-experimental method to achieve the matching of samples that are based on many variables. The variables used in the matching were collected at the birth interview and included maternal, child and family characteristics. The findings have demonstrated that PEEP is a successful program in supporting parents and enhancing the literacy development and self-esteem of children at risk of low educational achievement.

433 Does Maternal Traumatization Impact Heart Rate Reactivity In Response To Separation Distress?

Daniel Schechter, Michael Myers, Mark Davies, Randall Marshall, Kimberly Trabka, Jaime McCaw, Michael Liebowitz (United States)

Objective: To test the hypothesis that maternal psychobiological dysregulation in the wake of violent trauma inhibits a mother's capacity to respond sensitively to routine child distress, such as that during separation. Method: Sample: Fifty-five inner-city dyads composed of mothers ages 19-45 years and their children ages 12-48 months participated: 60% of participants were single-mothers on or eligible for public assistance, and over 80% were Dominican-Hispanic. Procedure: Mothers who screened into the study completed two videotaped visits: 1) a clinical interview covering maternal perception (Working Model of the Child Interview by Zeanah and Benoit, 1995), life events history (Traumatic Life Events Questionnaire), and trauma-associated psychopathology (Clinician Assisted PTSD Scale); and, 2) a parent-child observed interaction visit including a Modified Crowell Procedure including separation-reunion (Zeanah et al., 2000). During this Parent-child interaction, electrophysiologic measurements were done on mothers including heart rate variability. Data analysis featured bivariate correlations and repeated-measure ANOVAs. Results: Heart rate variability was negatively and significantly correlated with number of violent events experienced and/or witnessed by mother ($r = -.25$, $p < .10$), as well as related PTSD symptoms during the separation period ($r = -.27$, $p < .05$). Conclusion: Greater exposure to violence and more severe related PTSD renders mothers less able to regulate their own physiologic responses during separation from their very young children. Clinical implications are discussed.

434 Secondary Preventive Intervention In Adolescent Mothers And Their Newborn Infants

Ute Ziegenhain, Sandra Simo, Elisabeth Libal, Barbel Derksen, Ruth Dreiserner (Germany)

Objective: The study investigates the effects of attachment-based intervention on maternal sensitive behavior in the high-risk group of teenage-mothers. Additionally, maternal attachment representation is conceived as a moderator variable. Sample: Thirty adolescents (14 to 20) from child welfare institutions were recruited when pregnant. Method: Twenty-one teenage-mothers received attachment-based and video-based intervention. They were compared to nine mothers with treatment as usual (child welfare support, counseling). The interventions repeatedly took place during the infants' first three months. Three months after the interventions ended, both groups were evaluated (Ainsworth sensitivity scale, Crittenden Care-Index) that includes both quality of maternal and infant behavior, and the Adult Attachment Interview. Results: Maternal sensitive behavior of the intervention group eventually improved compared to the group with treatment as usual. Quality of the mothers' mental representation (coherency) influenced their sensitive behavior

during the interventions, and up to three months later. In addition, preliminary results reveal that infants in the intervention group were more cooperative than infants in the treatment-as-usual group. Conclusions: Attachment based intervention seems to promote early infant-parent relationships. However, the effect of the intervention is significantly influenced by maternal representations. The success of interventions can be enhanced by systematically integrating the knowledge about maternal representation in the therapeutical work with parents.

435 Prematurity, Maternal Stress And Mother-child Interactions

Carole Muller-Nix, Margarita Forcada-Guex, Blaise Pierrehumbert, Lyne Jaunin, Ayala Borghini, Francois Ansermet (Switzerland)

Objective: Studies show that premature birth can affect the quality of parent-child interaction, without a clear understanding of the mechanism. This study explores the relations between mother-infant interactive behaviors and maternal post-traumatic stress as well as infant's perinatal risk factors. Methods: Mother-child interactions are explored at six and 18 months of corrected age, with 47 preterm (GA<34 weeks) and 25 full term infants. The Perinatal Risk Inventory (PERI) differentiates low risk (LR) from high risk (HR) infants. The Perinatal Posttraumatic Stress Questionnaire (PPQ) evaluates maternal stress: low stress (LS) versus high-stress (HS). Maternal and infant interactive behaviors are explored during free play and coded with the Care Index. Results: At six months, mothers of HR premature infants and HS mothers are less sensitive and more controlling than the full term mothers. However, maternal interactional characteristics are more related to PPQ than to PERI. At 18 months, the preterm infant behavior appears significantly different between groups according to the PPQ variable only. Preterm infants show significantly more compulsive-compliant behavior with HS mothers and more passive behavior with LS mothers than full-terms infants. Conclusion: Maternal Post Traumatic Stress appears to have stronger influence than the infant's health status on the mother-child quality of interaction in the perinatal period. The infant's interactional behavioral characteristics at 18 months could be understood has a long lasting influence of maternal posttraumatic stress.

436 Age At Adoption And Adoptive Parental Care As Key Determinants Of Socio-emotional Development Of Internationally Adopted Children

Rejean Tessier, George M. Tarabulsy, Ellen Moss (Canada)

Every year, approximately 2,000 children of international origin are adopted by Canadian parents. The principal objective of this study is to examine the key determinants of the social and emotional development of internationally adopted children. Design: The study is a longitudinal, study where a group of 63 adopted children coming from abroad (Asian countries) had been paired to a normative group of 27 non-adopted children living in the same geographical area. They had been tested two times, three months (T1) and 15 months (T2) after arrival. Measures: Direct observations (12 hours) had been performed in the home by observers, and four tasks were performed in the lab: the Attachment Q-set, the Strange Situation procedure, and the Mullen Scales of Early Learning (cognitive functioning). Moreover, a clinical interview with parents (the Diagnostic Classification procedure (DC: 0-3) has been used regarding the infant behaviors as indicators of Reactive Attachment Disorder (RAD) and dysregulation of emotions. Results: The RAD ratio varies accordingly to the age at adoption (< 8mo=0% vs > 8mo= 14.5%) and to the time spent since adoption in the adopted group (T1=8,5% vs T2=2,8%). The same results had been observed in the case of dysfunctional regulation of emotions (early adopted (<8mo)=4.4% vs late (>8 mo)=27,0%, and T1=31.4% vs T2=14.3%). The lower ratio of disturbance at T2 is partly explained by the quality of adoptive parental care observed at home at three months after adoption. Discussion illustrates the protective impact of adoptive parents' caring behaviors.

439 Moving Away From The Traditional Nicu Towards The Early Developmental Care Nicu.

Dominique Haumont, Marie-Paule Durieux, Roberta Ciardelli, Gwenda Delanghe, Druart Delphine, Marie-Paule Durieux, Emmanuelle Lempereur, Christiane Raspe, Inge van Herreweghe, Anne van Vaerenbergh (Belgium)

Perinatal mortality in very low birth weight infants has dramatically decreased during the last decades. However, 15-25% of these infants will later show neurodevelopmental impairment. The

aim of implementing developmental care is to create an intervention program designed to provide support for optimal neurobehavioral development. This approach utilizes a range of medical and nursing interventions that aim to decrease the stress of preterm neonates in NICUs. The Neonatal Individualized Developmental Care Assessment Program (NIDCAP) is an integrated form of developmental care. Published data on the impact of NIDCAP is promising. NIDCAP addresses many aspects of what the preterm infant is experiencing. Reading the preterm infant's behavior and responding to the baby's stress signals, respecting sleep organization, diminishing pain, providing appropriate light and sound environment, and restoring the child-parent relationship are some of the factors that have an impact on outcome and which are addressed intensively when implementing the sophisticated and complex NIDCAP approach. In our setting we have reinforced this approach, including in the staff a Brazelton trained child psychiatrist and a developmental psychologist. Changing the traditional NICU towards an EDC NICU includes, most importantly, training nursing and medical staff and investing in their quality; keeping parents in proximity to the infants and supporting them psychologically. Proposed new NICUs will even have single rooms for infants. Developmental care could prove to be the most important recent step in improving outcome in extremely preterm neonates.

440 Clinical Use Of Brazelton's Neonatal Behavioral Assessment Scale In A Neonatal Center For Early Detection Of Difficulties In Parent Infant Relationship

Marie-Paule Durieux, Emmanuelle Lempereur, Claire Devriendt, Druart Delphine, Dominique Haumont (Belgium)

Included in the global care setting for premature babies and their parents in our Neonatal Center, Brazelton's testing is performed on all infants at term age, in the presence of their parents. We would like to focus our presentation on "difficult" testing situations, when the orientation tests show problematic contact and relationship avoidance. In these situations, which often are stressful for the examiner himself, Brazelton's testing appears to be a very useful tool. It allows the detection of early relationship difficulties between parents and baby, which had not been remarked by the team during the stay at the neonatal center despite close observation of the caregivers. These are usually situations where the parents had been very present and concerned in the neonatal center, being apparently available for their baby. The difficulties first come to light during the testing interaction with the examiner in the presence of the parents. At this moment, the parents are anxious and sometimes shocked, but also relieved because words can finally express the difficulties they had more or less consciously perceived but tried to deny, maintaining an unrecognized stressful situation. The discussion of these "difficult" testing situations allows the examiner to try to understand with the parents the underlying problem. These early relationship difficulties can have different complex origins, in which the mental functioning of the parents, the family history, and of the neuromotor equipment of the baby are in dynamic interaction. Several clinical situations will be proposed to illustrate some of these configurations.

441 The Premature Baby And His Psychic Development : Benefits Of The Nidcap Program

Emmanuelle Lempereur, Druart Delphine, Marie-Paule Durieux, Anne van Vaerenbergh, Roberta Ciardelli, Gwenda Delanghe, Inge van Herreweghe, Dominique Haumont (Belgium)

Very low birth weight infants are at risk for developmental impairment, including motor, mental, language, interactive, and social aspects. Environment and family structure appear to be major determinants. The NIDCAP program is one of the strategies implemented in the NICU of the CHU Saint-Pierre Hospital (Brussels, Belgium). Different studies done in the United States and in Europe have shown that the NIDCAP program has a positive influence on different spheres of the baby's development, even in the long term (better performances in terms of physiological stability, motor development, mental development, and interactive performances). The different studies are based on the observation of physiological parameters and the child's results on standardized development scales, at different ages. Regarding developmental and psychoanalytic concepts, we would like to understand why and how the NIDCAP program, at the crossroads of the somatic and the psychological, is able to help the premature baby hospitalized in an intensive care unit to construct the basis of his identity and the quality of his early relationships, despite the potentially stressful

environment in which he is plunged at his birth.

442 The Neonatal Behavioural Assessment Scale And The Examiner Counter Transference.

Claire Devriendt, Marie-Paule Durieux (Belgium)

The Clinical Neonatal Behavioral Assessment Scale (NBAS, T.B.Brazelton), which assesses the newborn's sensitive abilities and behavioral competencies, is used in a positive way in the presence of the parents. My purpose is to develop another aspect of the NBAS: my personal counter transference participation during the NBAS, its positive aspects, and its associated difficulties. I think that our psychic functioning influences the way to assess a baby and, conversely, that we can be very emotionally touched or disorganized during or after an NBAS. It seems very important for me to consider these feelings, affects, thoughts, and dreams because they tell us something about the baby too. I suggest that our NBAS would become richer if we combined the usual results of the scale with our personal counter transference aspects. It appears easy if the NBAS produces in our mind good feelings and sweet memories, but the assessment can get more complicated or can induce stressful psychic consequences. We do not come through the scale with a "lovely" representation of the baby or its parents or their new relationship but more with the feeling that we have to work with our negative counter transference material to improve a difficult situation with or around the baby. I propose to give some examples of clinical cases in which I was emotionally disorganized and I will try to analyze these situations between the baby, the parents, and me from a psychoanalytic point of view.

444 Implications Arising From The Prenatal Diagnosis Of A Serious Cardiac Abnormality
Jennifer Re, Samuel Menahem, Campbell Paul, Margaret Charlton, James Grimwade (Australia)

This paper will focus on the emotional experience of parents and infant when there is a diagnosis of a serious cardiac abnormality. Advances in ultrasound now allow for accurate diagnoses of major cardiac abnormality by 16 to 18 weeks. Parent's experience when pre-natally diagnosed compared with those who receive a diagnosis post-natally will be explored. Parents in the first group not only need to come to terms with their grief and disappointment of having an abnormal infant with a life-threatening anomaly, they also need to decide within a relatively short period of time whether to continue with the pregnancy, trying to understand the nature of the abnormality and its potential implications for the infant, child, adolescent, and even adult. Forewarning and the possibility of adjusting to and planning to continue the pregnancy or not is denied the second group. Attachment research suggests that mothers who received prenatal counseling will experience less emotional distress and less parenting stress and will be more emotionally available to their babies than will mothers whose infants received postnatal diagnosis. Therefore, there may also be a higher incidence of secure attachment styles in the parent-infant dyads of the first group and the infants may show fewer symptoms of withdrawal. The infants' experience will be explored using ADBB (Guideney,2001), the parents' mental representations of their infant and their emotional availability. Several vignettes will be presented.

445 Advances In The Diagnosis, Medical And Surgical Management Of Congenital Heart Disease Improves Infant Outcome And Development

Charles Kleinman (United States)

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446 The Impact Of Infant Cardiac Surgery On Parents And Their Relationship With Their Infant One Month After Discharge From Hospital

Candice Franich-Ray, Brigid Jordan, Samuel Menahem, Abudullah Al-farqani, Vicki Anderson, Elisabeth Northam, Andrew Cochrane (Australia)

Over the last two decades, there have been substantial advances in the management of congenital heart disease. Less attention however has been paid to the impact on the parents and their relationship with their infants who undergo early cardiac surgery. In this study, both parents complete questionnaires and attend an interview with their infant one month after discharge from the hospital. Questionnaires include the Edinburgh Post Natal Depression Scale (Cox, Holden &

Sagovsky, 1989), Post Natal Attachment Scale (Condon, Corkindale & Carolyn, 1998), Experience of Motherhood Questionnaire (Astbury, 1984), and the Forsyth Child Vulnerability Scale (Forsyth, Horwitz, Leventhal, Burger & Leaf, 1996). The interview explores parents' perceptions of how the surgery, illness, and hospitalization have impacted their infant and their relationship with their infant. To date, 44 consecutive families (out of a planned cohort of 100) whose infant had cardiac surgery by three months of age have been enrolled in the study. Data collection will be completed by January 2006 and thus the findings ready for presentation in July. Preliminary findings suggest that parents are very responsive to their infant's distress, have a strong sense of being "lucky" that their infant is alive, and value the time they spend with their infant. Although they want to give their infant a "normal" upbringing, they struggle with feeling a greater need to protect them and continue to see their infant as vulnerable. Some parents describe re-appraising their relationship with their other children in light of the "near loss" of their sick infant.

447 **Counselling Parents Of Infants With Congenital Heart Disease**
Samuel Menahem (Australia)

There is a commonly held view that a "bad heart kills." The diagnosis of a serious congenital heart disease, whether prenatally or in the newborn, precipitates a crisis for the affected parents. The emotional turmoil the parents experience is conceptualized in the grieving process. In that setting, the parents still need to understand the nature of the abnormality, its outcomes, and the risks associated with interventions whether by cardiac catheterization or surgery. If the diagnosis is made before 22 weeks gestation (at least in Melbourne), the parents have the option to decide whether to continue with the pregnancy. Being mindful of the distress experienced by the parents, the counseling need be couched in simple terms, highlighting function and quality of life issues and potential short and long term outcomes. The parents often describe themselves as in a state of "shock," unable to absorb the information being provided, necessitating early follow up interviews. A non-judgmental and non-directive approach is required, actively listening to what the parents say. It is essential that the parents' ego strengths remain intact so that they can participate in the decision-making process. Information collated from cohorts of parents where a prenatal or postnatal diagnosis has been made, will be presented in support of the above approach but with suggestions for improvement. Counseling in such settings is difficult both for the parents and clinician, but may yet achieve its goals.

448 **Ethical Considerations Arising From The Prenatal Diagnosis Of A Serious Cardiac Abnormality**

Lynn Gillam, Samuel Menahem (Australia)

Fetal echocardiography allows for accurate diagnosis of major heart abnormalities by 16-18 weeks gestation. Parents have the option of termination of pregnancy. What are the obligations of the clinician in this situation? Should information only be provided or is there a role for advising or directing the parents about termination? Two divergent examples are provided for discussion. Mrs A., aged 40 years, was noted at 18 and 20 week scans to have a fetus with a complete atrio-ventricular septal defect. The fetus also had a Danny Walker cyst. There was thickened nuchal fold and echogenic bowel, all suggesting a chromosomal abnormality. Despite the poor outlook, Mrs A. declined amniocentesis and the pregnancy continued. Mrs B., aged 34 years, was noted at 18 and 20 week scans to have a fetus with mild thickening of the walls of both the right and left ventricles. The flow patterns appeared normal. Despite a probable good outlook, the parents requested another scan at 22 weeks to get further prognostic information and allow them to consider termination. While non-directive counselling is the norm, is that appropriate for all situations? Should one strongly influence Mrs A. to have an amniocentesis to confirm probable Trisomy thereby allowing her to make a more informed decision? How reassuring can the clinician be to Mrs B.? If termination is sought, should one counsel against that? The relevant clinical and ethical considerations are discussed, highlighting the difficulties counselling parents in a setting of incomplete information and acute emotional distress.