

Demystifying Infant Mental Health: What the Primary Care Provider Needs to Know

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ABSTRACT

Infant mental health is an interdisciplinary professional field of inquiry, practice, and policy that is concerned with alleviating suffering and enhancing the social and emotional competence of young children. The focus of this field of practice is supporting the relationships between infants and toddlers and their primary caregivers to ensure healthy social and emotional development. Notably, the connection between early life experiences and lifelong health has been well established in the scientific literature. Without appropriate regulation from a supportive caregiver, exposure to extreme stressors in early childhood can result in wide-ranging physiological disruptions, including alterations to the developing brain and immune, metabolic, and cardiovascular systems. As part of this interdisciplinary team, pediatric primary care clinicians are in a unique position to incorporate infant mental health practice tenets during their frequent office visits with infants and toddlers. This article provides pediatric primary care clinicians with an overview of infant mental health practice and suggestions for the conscious promotion of positive early relationships as an integral component of well-child care. *J Pediatr Health Care.* (2016) 30, 38–48.

KEY WORDS

Infants, mental health, attachment, behavior/behavioral problems

Everything begins in the beginning.

—Layli Maparyan

The term *infant mental health* encompasses the full continuum of health promotion, prevention, and intervention that addresses the social and emotional health

of infants and toddlers (Zeanah, Stafford, Nagle, & Rice, 2005). Infants and very young children experience stress, and it is both the caregiving relationship and environment that shape not only physical and cognitive development, but just as importantly, the child's *emotional* development (Shonkoff, Lippitt, & Cavanaugh, 2000). In this article we define infant mental health (IMH), discuss the origins of the IMH field and the primary tenets of IMH practice, describe resources and interventions designed to promote IMH, and advocate for the conscious promotion of positive early relationships as an integral component of well-child care.

DEFINITION OF INFANT MENTAL HEALTH

Zero to Three, a national organization dedicated to research, policy, and practice efforts on behalf of infants, toddlers, and families, defines IMH as young children's capacity to experience, regulate, and express emotions, form close and secure relationships, and explore the environment (*Zero to Three*, 2001). These capacities are best accomplished within a caregiving environment encompassing family, community, and cultural expectations, and they are the cornerstone of healthy social and emotional development (*Zero to Three*, 2001). Notably, the discipline of IMH considers "infancy" as a developmental stage beginning prenatally and ending at age 3 years, in contrast to the pediatric health care definition of birth to 1 year (Zeanah, 2009). Given the vital importance of both the prenatal and postnatal environment, advocates in the field of IMH maintain that the promotion of mental health in young children must begin much earlier than birth (Champagne, 2010; Zeanah et al., 2005). Additionally, the first 3 years of the human lifespan mark a critical time for rapid brain growth and development (Schore, 2005). During this time children are scheduled for multiple well-child examinations, which provide opportunities for pediatric primary care providers (PCPs) to promote IMH, because they are often the first port of entry for an infant and family into a system of care (Zeanah, 2009).

THE ORIGINS OF INFANT MENTAL HEALTH

In the mid twentieth century, a growing interest in child development and the role of early childhood experiences sparked a large body of research, providing the foundation for what is now considered the field of IMH. Anna Freud had a major influence on this movement, extending classic psychoanalytic theory to include the influence of psychological, social, and emotional development during childhood (Freud, 1965). The developmental psychologist Erikson complimented Freud's work, theorizing that healthy development across childhood occurs within the context of healthy family relationships and cultural contexts (Erikson, 1950). During this time, the field was also

greatly influenced by Bowlby's (1958; 1969) pioneering work on attachment theory, which promoted an understanding that primary caregiving relationships lay the foundation for social and emotional development. Attachment theory was later expanded by Ainsworth, who noted that sensitive and consistent caregivers had securely attached relationships with their infants, whereas less sensitive, inconsistent, and unavailable mothers had attachment relationships that were insecure (Ainsworth & Bell, 1970). Donald Winnicott, a pediatrician and psychoanalyst, also described the importance of maternal caregiving behavior. Winnicott specifically described "holding" the child, both physically and within the mind, as an essential component of maternal care that serves to facilitate the development of early emotional capacities (Winnicott, 1960).

The term "infant mental health" was first coined by Selma Fraiberg in the 1970s, as she and her colleagues developed an innovative approach to working with families through observations of the mother and infant and their interaction with one another (Fraiberg, Adelson, & Shapiro, 1975; Shapiro, Fraiberg, & Adelson, 1976). With a focus on strengthening relationships between parents and children in vulnerable families, the approach developed in Fraiberg's Child Development Project continues to influence modern IMH models of prevention, assessment, and treatment (Shapiro, 2009). In the seminal paper *Ghosts in the Nursery*, Fraiberg, Adelson, and Shapiro (1975) explored the intergenerational transmission of attachment disorders and described the influence of past family trauma (or "ghosts") on current parenting behaviors. Based on this concept, Lieberman developed child-parent psychotherapy, a psychoanalytic approach to treating disturbed infant-parent dyads within the context of the primary attachment relationship (Lieberman, Van Horn, & Ippen, 2005). Furthermore, Lieberman and colleagues described *Angels in the Nursery*, encouraging the use of positive caregiving experiences to help parents overcome past trauma (Lieberman, Padrón, Van Horn, & Harris, 2005).

Many contemporary scholars have continued to develop and expand upon the field of IMH. Stern, for example, brought attention to the challenges and experiences of transitioning to motherhood, termed the "motherhood constellation" (Stern, 2006). Zeanah has also been very influential, editing the *Handbook of Infant Mental Health*, as well as proposing a means for diagnosing and categorizing attachment disorders (Boris & Zeanah, 1999; Zeanah et al., 1997). Fonagy and colleagues have described the role of reflective functioning, or the ability to recognize the mental states of one's self and others, as instrumental to development in early childhood. Parental reflective functioning refers to a parent's ability to recognize her own mental states, as well as the mental states of her

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