

Infant Mental Health Journal Volume 37, Supplement 1

Program Abstracts

Guest Editors:

WAIMH Program Committee

Campbell Paul (chair), Australia
Miri Keren, Israel
Kaija Puura, Finland
David Oppenheim, Israel
Mark Tomlinson, South Africa

Copy Production Editor: Infant Mental Health Journal Office

Paul Spicer, PhD
University of Oklahoma, USA

Conference Coordinators

Guarant

**World Association for Infant Mental Health
15th World Congress
May 29-June 2, 2016
Prague, Czech Republic**

© Michigan Association for Infant Mental Health

From the Editors:

The abstracts in this special supplement to the Infant Mental Health Journal (IMHJ) are organized to match the Program Book distributed at the 15th World Congress of the World Association for Infant Mental Health. Abstracts were copy edited at the IMHJ Editorial office. Where abstract language seemed confusing, the copy editors attempted to capture the spirit of the written text to make it more readable to the audience. Errors that may have occurred are the responsibility of the copy editors, not the authors. Where abstracts are not presented, they were not supplied.

necessity to enhance the access to all information and services for people who are physically disabled and who want to become parents.

Aims of the Study: We know that early childhood services access is important for every new parent. Considering the specific limitations associated with physical impairment, one can assume that disabled parents may have more needs, in terms of social and parental support. However, most of the services seem to be poorly suitable for these parents. In order to adapt public health services to parents with physical disabilities and their children in Canada, Switzerland and France, a better understanding of these parents' situation was required. Most of the scientific literature targets the impact of the parents' physical condition on children, but little is known about the parents' access to information and services. This is the objective of our critical study, which constitutes a first step within a broader research program.

Material and Methods: A literature review on healthcare accessibility for parents living with physical disabilities was performed in order to identify the knowledge on physically disabled parents' needs and services adaptation. The preliminary results underline the absence of these parents in this kind of programs.

Results and conclusion: Examination of the literature review and previous results will be available in early 2016 and will be presented during the conference. These results will drive a discussion among the community on the scientific, methodological, professional and political implications of the services adaptation.

Impact of prematurity on early child cognitive development

Paolini, C.I.^{1,2}, Oiberman, A.J.^{1,2}

¹ *Perinatal Psychology, Interdisciplinary Center of Research in Psychology, Mathematics and Experimental - National Council of Scientific and Technical Research (CIIPME-CONICET), Ciudad Autónoma de Buenos Aires, Argentina;* ² *Perinatal Psychology, Faculty of Psychology. University of Buenos Aires., Ciudad Autónoma de Buenos Aires, Argentina*

Objectives: The aim of this research is to contribute to the understanding of the consequences of prematurity on cognitive development, in early childhood. Study the prevalence of cognitive developmental difficulties in preterm infants. Identify risk factors. And compare cognitive development of preterm children with those born at term.

Methods: Cross-sectional descriptive study design. Argentine scale of sensory motor intelligence (EAIS) was administered to assess cognitive development. Frequency of cognitive delay, neonatal and sociodemographic risk factors were studied, using multivariate regression models, adjusting for confounders. The risk of cognitive difficulties by degree of prematurity, compared with term infants was calculated.

Results: A total of 232 preterm and 214 term infants, were evaluated. The frequency of cognitive impairments in premature is significantly higher than in term infants. The risk of delay in cognitive development increases with decreasing Gestational age [GA]. Late preterm infants also are at higher risk of cognitive delay than those born at term. Cognitive difficulties tend to increase as the child grows. The motor area was the most committed psychomotor area. The evaluated correlation between both cognitive and psychomotor areas was moderate. Gestational age, birth weight [BW], intrauterine growth retardation [IUGR] and neonatal complications are risk factors for early cognitive development. The paternal education is associated with cognitive development.

Conclusions: prematurity produces impact on cognitive development that can be detected in early childhood. Cognitive difficulties would be more apparent after the first year of life. The difficulties are greater with decreasing GA, BW, IUGR and with neonatal complications, without neglecting the importance of monitoring also late preterm. Motor development condition the cognitive development, however, there may be cognitive difficulties, without motor delays. We

highlight the importance of parental education and job, as mediators of family socioeconomic status and its influence on development in preterm children during first infancy.

Maternal psychological distress, parent-infant interaction and infant social-emotional development following very preterm birth

Pace, C.C.¹, Spittle, A.J.^{1,2,3}, Treyvaud, K.^{1,2,4}, Davis, P.G.^{2,4}, Northam, E.A.⁵, Lee, K.J.^{1,4}, Eeles, E.L.¹, Doyle, L.W.^{1,2,4}, Anderson, P.J.^{1,2,2}

¹ *Victorian Infant Brain Studies, Murdoch Childrens Research Institute, Melbourne, Australia;*

² *Newborn Research, Royal Womens Hospital, Melbourne, Australia;* ³ *Department of Physiotherapy, University of Melbourne, Melbourne, Australia;* ⁴ *Department of Paediatrics, University of Melbourne, Melbourne, Australia;* ⁵ *Psychology Service, Royal Childrens Hospital, Melbourne, Australia*

Introduction: Very preterm (VPT) birth is associated with increased maternal psychological distress, sub-optimal parent-infant interaction, and infant social-emotional difficulties. However, longitudinal research examining maternal psychological distress profiles in infancy and how this influences later maternal sensitivity and child outcomes is limited.

Aims of the study

1. To describe the trajectory of psychological distress (depression and anxiety) in mothers of VPT infants between birth and 12 months corrected age.
2. To investigate how this distress influenced parent-infant interaction and infant social-emotional development at 12 months corrected age.

Material and methods: 113 mothers of 149 infants (84 singletons, 65 multiples) born <30 weeks gestational age were recruited from the neonatal intensive care unit of the Royal Women's Hospital, Melbourne, Australia. Maternal symptoms of depression and anxiety were measured at several key time points using the Centre for Epidemiological Studies Depression Scale and the Hospital Anxiety and Depression Scale. At 12 months corrected age, mothers and infants participated in the Emotional Availability Scales, an observational assessment of parent-infant interaction, and the Infant-Toddler Social and Emotional Assessment was used to assess infant social-emotional development.

Results: Symptoms of depression and anxiety in mothers were initially high (43% and 46% above clinical thresholds respectively at 2 weeks post birth), and reduced in severity over time (both $p < .01$). Early maternal psychological distress predicted later lower maternal sensitivity and poorer child social-emotional development e.g. more depressive symptoms in the newborn period predicted lower child social-emotional competence at 12 months (regression coefficient, $-.65$; 95% CI, $-1, -.3$; $p < .001$).

Conclusions: Mothers of VPT infants are at high risk of psychological distress, both during the early hospitalization period and after discharge home, although symptoms do improve over time. The level and chronicity of distress impacts upon maternal sensitivity and infant social-emotional development, suggesting early intervention may be helpful.

Salience Processing and Psychopathology in Preterm Born Adults

Kroll, J., Brittain, P., Tseng, C.-E. J., Karolis, V., Froudish-Walsh, S., Nosarti, C.
Psychosis Studies, King's College London, London, United Kingdom

Background: Neonatal brain injury, often associated with very preterm birth, may be a risk factor for neurodevelopment and psychiatric outcomes. Due to its site and extent, early brain injury (e.g. periventricular hemorrhage, PVH), may impact the structural and functional integrity of the brain including key areas associated with salience processing and psychopathology. This study seeks