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Behavioural and Affective Precursors to Disorganized Attachment in the Still-face Procedure at 4-months

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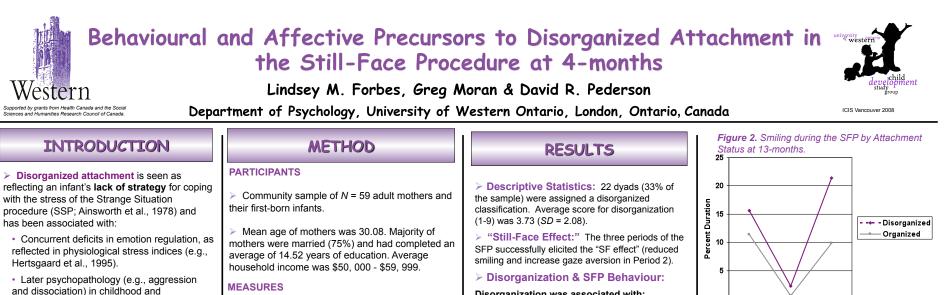
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adolescence (van IJzendoorn et al., 1999).

> The SSP, administered with 12- to 18-monthold infants, typically is the 1st assessment of the attachment relationship.

> Affective and behavioural precursors to disorganized attachment have yet to be elucidated.

The Still-Face Procedure (SFP; Tronick et al., 1978) offers an age-appropriate procedure to explore the *emerging* attachment relationship.

•A single study by Koós & Gergely (2001) provided evidence that precursors to disorganized attachment can be observed at 6.5 months in the SFP.

 The present study sought to replicate this initial study.

PRESENT STUDY

> We explored whether disorganization in the SSP at 13-months could be predicted from infant affect and behaviour in the SFP at 4months.

> We hypothesized that infants in disorganized relationships would have the most difficulty regulating their affect and behaviour in the SFP.

> Infants in disorganized relationships were expected to display greater negativity (e.g., crying, negative vocalizations, stress indicators such as spitting up) throughout the SFP, compared to those in organized relationships.

Still-Face Procedure (SFP; Tronick et al.,

1978): Consists of 3 60-second periods of faceto-face interaction without touch.

- Period 1: Normal face-to-face interaction
- · Period 2: Still-face episode (mother asked to "act like a statue" and adopt a neutral expression)
- Period 3: Normal face-to-face interaction
 - · The Infant Regulatory Scoring System (IRSS, Weinberg & Tronick, 1990) was used to code aspects of infant behaviour during all periods.
 - Interrater reliability on 23 cases ranged from .75 - .99 (ICC).

> Strange Situation Procedure (SSP: Ainsworth et al., 1978: Main & Solomon, 1990)

- · Standard laboratory assessment of the attachment relationship
- · Sufficient interrater reliability found for disorganized classification (Kappa = .83, p<. 001), and level of disorganization (ICC = .96).

PROCEDURE

Mothers and infants participated in the SFP during a 2-hour home visit at 4-months.

> Dyads visited university laboratory at 13-months and participated in the SSP.

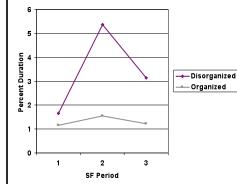
>Coding was later completed by independent coders upon review of videotaped interaction.

Disorganization was associated with:

1) Distancing/Escape behaviour (e.g., arching, turning away) in Period 2, r = .28, p <.05. and Period 3. r = .30. p <.05.

Greater increase in distancing/escape behaviour across the SFP vs. those in organized relationships, F(2, 114) = 2.67, p = .07 (see Figure 1).

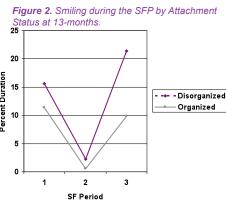
Figure 1. Distancing/Escape Behaviour in the SFP by Attachment Status at 13-months.



2) Increased smiling across the SFP vs. those in organized relationships, F(1, 57) =4.39, p < .05 (see Figure 2).

A smaller latency to smile in Period 3 (M

- = 20.80, SD = 20.98), F(1, 56) = 4.66.
- p<.05. vs. those in organized relationships
- (M = 4.93, SD = 24.98).



 Contrary to prediction, disorganization was not associated with increased infant negativity in the SFP (e.g., crying, negative vocalizations).

CONCLUSIONS

> The present results suggest that behavioural and affective precursors to disorganization can be identified in the SFP at 4-months.

Disorganized attachment was differentially associated with greater (1) distancing/ escape behaviour and (2) smiling in the SFP, but not with increased negative affect.

Results are consistent with Koós & Gergely (2001) who found disorganization was associated with increased positive affect across the SFP.

> The SFP appears to be a fruitful avenue for evaluating the mechanisms of emerging attachment relationships, during the period of Attachment-inthe-Making.

> The combination of distancing/escape behaviour and smiling at 4-months may be early expressions of the contradictory behaviours (e.g., proximityseeking and avoidance) expressed by infants in the SSP by the end of the first year.

> It is hoped that identifying such precursors will be beneficial for early intervention to be implemented for dyads at risk for disorganization.