

Maternal Traits Associated with Poor Mother-Infant Attachment and Poor Mental Health of the Child Later in Life

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Abstract

Across all cultures parenting is the foundation of early life. Recent research has further shown that the relationship between a mother and her offspring in early infancy forms a basic foundation for the future development of the child and can predict whether the child will experience mental distress in later years. This brief review summarized the risk factors including physical health, mental health, and age of the mother that could instill the long term impact to the child's mental health later in life.

Keywords: Mother infant relationship; Maternal traits; Early infant development; Adult mental health; Risk factors

Short Communication

Across all cultures parenting is the foundation of early life. Via this domain adult mental health comes into direct contact with infant development. Beginning in pregnancy, parenting consists of many conscious and unconscious processes, which have recently been shown to significantly affect a child's development [1]. It has been proven that those infant who have to expose to high levels of stress in early days postnatal are more likely to have neurodevelopmental delay in infants, behavioral problems and some levels of autism spectrum in children. These mental disorders in turn will develop to several psychiatric illnesses in adulthood including depression, anxiety, autism, and Post-Traumatic Stress Disorder (PTSD) [2]. A longitudinal study performed in 2002 shown that those who receive more effective care in infancy, meaning greater maternal empathy, consistency, control, thoughtfulness, affection, and management of aggression will have better psychological defense mechanisms as adults [3].

Recent research has further shown that the relationship between a mother and her offspring in early infancy forms a basic foundation for the future development of the child and can predict whether the child will experience mental distress in later years [4,5]. Furthermore, a positive and nurturing environment beginning in the very first year of life is essential for children to build secure attachment bonds with his or her parents or primary caregivers [6-9]. Research from the National Academy of Sciences has shown that children with well-developed social and cognitive skills are more likely to be successful and require less resources and social support from intervention services. On the other hand, there is also increasing interest in the role of maternal issues during the perinatal period and the potential negative impact such forces may have on the mother-infant relationship as well as on the future development of the child.

Many maternal conditions during the perinatal period have been determined to act as risk factors for the later disruption of the mother-child bond, impairment of the child's emotional and social development, and the decline in mental health of the child in later years. According to the literature, maternal psychopathology is the risk factor most likely to degrade the mother-child bond [10-12]. Gratz et al. suggested that parental mental health generally influences the child's functional and emotional development. In a separate study, children of mothers with borderline personality disorder were shown to have a particularly high risk of experiencing emotional dysfunction and emotional regulation difficulties [13]. Postpartum depression, for example, has long been seen as an independent risk factor for poor attachment in infancy and poor outcomes in general for both mothers and their children [1,14,15]. The data further shows that mothers who have histories of childhood abuse or neglect are more likely to have postpartum depression and difficulties with mother-infant bonding as early as six months postpartum. Thus psychological illness becomes a self-perpetuating phenomenon, passed from one generation to the next. These mothers were also found to be more likely to withdraw from parenting, demonstrate more frequent hostile behaviors, and administer physical punishments to their offspring, further impairing the bond between mothers and their babies [16]. Furthermore, children of mothers who have postpartum depression show intellectual problems and require special education methods. This was illustrated in the research of Hay et al. in 2001, in which 132 children at 11 year old, who are the offspring of postnatal depressed mothers, are assessed both IQ score and other learning difficulties. These children have significantly lower Full scale IQ score and also lower scores in each section of the scale. In addition, they have difficulties in concentration and reasoning thinking, meaning they need more support and special teaching and learning methods to catch up their peers [17].

The second important risk factor is maternal adolescence. Adolescent mothers show less sensitivity to their children's needs and tend to have less empathy for their children. Several studies have reported higher rates of psychiatric disorders in adolescent mothers

compared to adult mothers, namely postpartum depression, PTSD, and substance abuse. Thus adolescent mothers may also display more aggressive behavior towards their offspring. As a consequence, child abuse and child neglect, leading to attachment insecurity, are recorded at higher levels in these families. Children of adolescent mothers are also at increased risk of disorganized development and disturbed mother-child interactions; they therefore require more support when they grow up [18]. Further, prior research has shown that external and environmental factors can increase the already high burden on teen mothers, namely marital status, social and economic circumstances, educational, and cognitive ability. A more recent study demonstrated that in dysfunctional families, both mothers and their children are likely to experience psychological disorders, and children are likely to experience adverse developmental outcomes [19].

Maternal substance abuse is a third important risk factor that likely plays a negative role in maternal-infant attachment and the later development of the child [20]. Women with substance-abuse issues are

twice as likely to neglect their children's needs [21]. However, less is known about how smoking during pregnancy affects the later bonding between a mother and her child. In a study published in the *Maternal Child Health Journal* in 2014, the authors used the self-reported Maternal-Fetal Attachment Scale to survey fifty-eight pregnant smokers. The results suggested that mothers with high levels of nicotine in their saliva at 30 weeks gestation and at one day postpartum are significantly more likely to score worse on the Maternal-Fetal Attachment Scale. In 2015, another study compared the Maternal-Fetal Attachment Scale scores of 156 pregnant non-smokers, pregnant former smokers, and pregnant current smokers. The results suggested that women who have a greater desire to maintain their personal health and the health of their fetus have higher rates of quitting smoking during pregnancy. These two preliminary studies provide context for future intervention programs in high-risk pregnant women in Table 1 [22].

Risk factors of impaired mother-infant bond	Studies	Comments
Maternal psychological disorders	Maternal attachment state of mind moderates the impact of postnatal depression on infant attachment. The impact of maternal psychopathology on child-mother attachment. Adolescent mothers: support needs, resources, and support-education interventions.	Chronically depressed mothers have worse secured attachment with their infants. Maternal chronic or current severe psychopathology, insecure or unresolved attachment are associated with insecure or disorganized infant attachments.
Maternal adolescence	A mother-child intervention program in adolescent mothers and their children to improve maternal sensitivity, child responsiveness and child development (the TeeMo study): study protocol for a randomized controlled trial. Attachment theory and maternal drug addiction: the contribution to parenting interventions.	Children of adolescent mothers are at risk of disorganized development, inadequate mother-child attachment and they need more planned interventions when grow up Adolescent mothers are more likely to have maltreat their children with neglect and abuse behaviors. Maternal addiction represents a high risk for diminished child's socioemotional development and secure attachment.
Maternal substance-abused	The mothers and toddlers program, an attachment-based parenting in intervention for substance-using women: Results at 6-week follow-up in a randomized clinical pilot.	Substance abusing mothers are less responsive to their children, more aggressive and easily to have neglect behaviours to their children.

Table 1: These two preliminary studies provide context for future intervention programs in high-risk pregnant women.

All of these issues have been intensively researched in recent decades so as to promote the mental health and well-being of both mothers and infants. However, further research is required to help mold efficacious intervention and prevention programs.

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