



Transition times.

Supporting the child and adolescent's transitions in Pediatric condition

2nd S.I.P.Ped. International Conference

November 7 - 9, 2019

Palermo, Sicily, Villa Magnisi, Ordine dei Medici Chirurghi e Odontoiatri



9 NOVEMBRE 2019

Workshop

“L’Accompagnamento nelle transizioni evolutive in condizioni pediatriche: il ruolo della Sanità, della Famiglia e della Scuola”

The follow-up

Supporting the premature infants and their families in the first year of life

Fiorella Monti, Francesca Agostini, Erica Neri

Psychology Department, Bologna University



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Before 37 gestational weeks

(Beck et al., 2010; WHO, 2012)



RISK FACTORS

Infant ☐ survival and impaired developmental outcomes

Parent ☐ traumatic event, which might compromise the emerging parent-child relationship and parenting

Severity of Preterm Birth

Risk Factors

Neonatal complications (Miceli et al. 2000)

Low gestational age (Sansavini et al., 2015)

Low birth weight (Agostini, et al., 2014; Morales, et al., 2013)



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Premature Parents



Gap between maternal and paternal representations and reality

**Fear and Anxiety, Hope vs. Grief,
Feeling of failure, powerlessness,
helplessness**

**AFTER HOSPITAL DISCHARGE
Sense of isolation, withdrawal
Sense of loss of protection**



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Due to neuropsychological immaturity,
infant interactive patterns are characterized by
passivity, poor attention and alertness

Neonates with birth weight
<1500 g (**Very Low Birth**
Weight-VLBW)

Neonates with birth weight
<1000 g (**Extremely Low**
Birth Weight-ELBW)



Difficulties in interactive patterns



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Maternal interactive patterns characterized by:

- > high frequency of stimulation
- > tendency to anticipate baby's signals
- > intrusiveness and poor sensitivity

More **“active”** patterns might be **adaptive** in these contexts, compensating for the weakness of interactive signals shown by preterm babies





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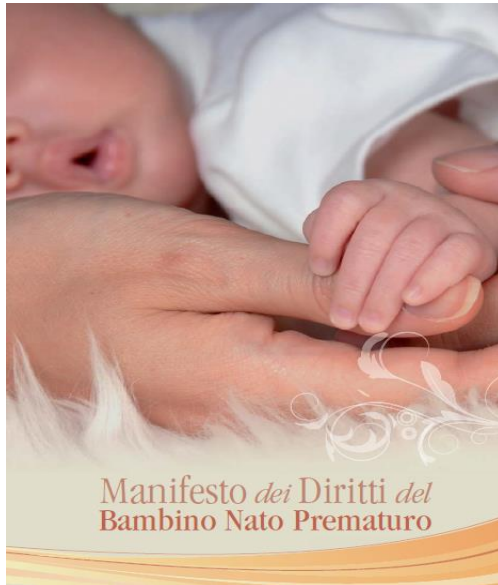
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Article 8th

The preterm infant has the right to receive continuous care after the hospital discharge, through a plan of personal assistance shared with his/her parents. This plan should involve all the local competencies and should include, after the discharge, an appropriate multidisciplinary follow-up planned by the team of health professionals that took care of the baby after the birth.



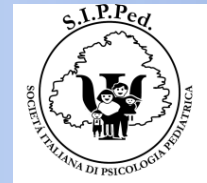
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Neurodevelopmental Follow-Up

Psychodevelopmental Follow-Up



**TIN-TIP,
Hospital Bufalini,
Ausl Romagna**

SERVIZIO SANITARIO REGIONALE
EMILIA-ROMAGNA
Azienda Unità Sanitaria Locale della Romagna



**Lab. Psychodynamic
Development
"Anna Martini,"
Department of
Psychology**





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Child-Adult Relationship Experimental Index CARE-Index (Crittenden, 2007)

Parent interactive pattern

- 1) Sensitive
- 2) Controlling
- 3) Unresponsive

Infant interactive pattern

- 1) Cooperative
- 2) Compulsive-Compliant
- 3) Difficult
- 4) Passive

Interactive Behaviors

- 1) Facial expression
- 2) Verbal expression
- 3) Position
- 4) Affection
- 5) Turn taking
- 6) Control
- 7) Choice of activity





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Griffiths Mental Development Scales (GMDS, Griffiths, 1996)

For the assessment of psychomotor and relational development in children 0-2 years





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RESEARCH QUESTIONS

**Investigate the effect of the severity of preterm
birth (e.g. birth weight)**

Mother- and father-infant interactions

- **Parent-infant relationship**

Longitudinal perspective

***Recent studies on parent-infant interactions
and infant development according to
severity of prematurity***

RESULTS





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Infant Behavior and Development 37 (2014) 86-93

Early interactive behaviours in preterm infants and their mothers: Influences of maternal depressive symptomatology and neonatal birth weight

Francesca Agostini, Erica Neri, Sara Dellabartola, Augusto Biasini, Fiorella Monti

Department of Psychology, University of Bologna, Bologna, Italy

Paediatric and Neonatal Intensive Care Unit, Bufalini Hospital, Cesena, Italy

The study evaluated the quality of preterm infant–mother interactions, considering severity of birth weight (ELBW and VLBW) and maternal depression, compared to full term babies. 69 preterm infants (29 ELBW and 40 VLBW) and 80 full-term (FT) infants and their mothers were recruited. At 3 months of corrected age, the quality of mother–infant interaction was evaluated through Global Rating Scales; moreover, infant level of development and maternal depression were assessed through Griffith Development Mental Scales and Edinburgh Postnatal Depression Scale. Results showed adequate sensitivity in preterm infants' mothers and higher involvement with their infants, compared to full term mothers, but ELBW ones exhibited an intrusive interactive pattern and a higher prevalence of depressive symptoms. The study underlined the relevance of paying special attention to both ELBW infants and their mothers, in order to support the parenting role and the co-construction of early interactions.



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Mother-preterm infant interactions at 3 months of corrected age: influence of maternal depression, anxiety and neonatal birth weight

Erica Neri^{1}, Francesca Agostini¹, Paola Salvatori¹, Augusto Biasini² and Fiorella Monti¹*

¹ Department of Psychology, University of Bologna, Bologna, Italy, ² Paediatric and Neonatal Intensive Care Unit, Bufalini Hospital, Cesena, Italy



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*Maternal depression and anxiety represent risk factors for the quality of early mother-preterm infant interactions, especially in the case of preterm birth. Despite the presence of many studies on this topic, the **comorbidity of depressive and anxious symptoms has not been sufficiently investigated**, as well as their relationship with the severity of prematurity and the quality of early interactions. The Aim of this study was to evaluate the quality of early mother-infant interactions and the prevalence of maternal depression and anxiety **comparing dyads of extremely low birth weight (ELBW) and very low birth weight (VLBW) preterm infants with full-term ones. Seventy seven preterm infants (32 ELBW; 45 VLBW) and 120 full term (FT) infants and their mothers were recruited.** At 3 months of corrected age, 5 min of mother-infant interactions were recorded and later coded through the Global Ratings Scales. Mothers completed the Edinburgh Postnatal Depression Scale and Penn State Worry Questionnaire. Infant levels of development were assessed through the Griffiths Mental Development Scales. A relation emerged among the severity of prematurity, depression, anxiety, and the quality of interactions. When compared with the FT group, **the ELBW interactions were characterized by high maternal intrusiveness and low remoteness, while the VLBW dyads showed high levels of maternal sensitivity and infant communication.** Depression was related to maternal remoteness and negative affective state, anxiety to low sensitivity, while infant interactive behaviors were impaired only in case of comorbidity. **ELBW's mothers showed the highest prevalence of depressive and anxious symptoms**; moreover, only in FT dyads, low maternal sensitivity, negative affective state and minor infant communication were associated to the presence of anxious symptoms. The results confirmed the impact of prematurity on mother-infant interactions and on maternal affective state. Early diagnosis can help to plan supportive interventions.*



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Frontiers in Psychology, 2015

Pattern of mother-child feeding interactions in preterm and term dyads at 18 and 24 months

Paola Salvatori, Federica Andrei, Erica Neri, Ilaria Chirico and Elena Trombini

Department of Psychology, University of Bologna, Italy

The present research study aims to look at the longitudinal patterns of mother-toddler feeding interactions, comparing preterm and full term dyads. To this end, a multi-method approach was used to collect data from 27 preterm to 20 full-term toddlers and their mothers. For each dyad, mother-child interactions were observed during the snack time at 18 and 24 months of age and then assessed through the Italian version of the Feeding Scale. Higher scores on the scale indicate a less healthy pattern of interaction. Additionally, at both points in time, mothers completed the *BDI-II* questionnaire as a screen for maternal depression and the child's developmental stage was assessed using the Griffiths Scales. Our results show that preterm dyads report overall higher levels of maternal negative affection, interactional conflicts, and less dyadic reciprocity during the meal compared to full-term dyads. Additionally, longitudinal data show that dyadic conflict decreases in both groups, whereas the child's food refusal behaviors increase in the preterm group from 18 to 24 months. No differences were reported for both the *BDI-II* and the child's development for the two groups. The results reveal that regardless of maternal depression and the child's developmental stage, the two groups show different trajectories in the pattern of feeding interactions during the transition to self-feeding, at 18 and 24 months, with overall less positive interactions in preterm mother-child dyads



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Frontiers in Psychology, 2016

Mother-Toddler Play Interaction in Extremely, Very Low Birth Weight, and Full-Term Children: A Longitudinal Study

Paola Salvatori, Erica Neri, Ilaria Chirico, Federica Andrei, Francesca Agostini and Elena Trombini

Department of Psychology, University of Bologna, Italy

The main objective of this study was to explore the quality of mother-toddler interactions during play, using a longitudinal research design, as well as taking into account the effect of birth weight. 16 Extremely Low Birth Weight (ELBW), 24 Very Low Birth Weight (VLBW), 25 full-term children, and their mothers were recruited for the present study. **Mother-child dyads were evaluated at 18, 24, and 30 months of child age.** Ten minutes of mother-child play interaction were recorded and later coded according to **the Emotional Availability Scales (EAS).** Furthermore, the child's level of development was assessed through the Griffiths Scale, and its contribution controlled for. **ELBW dyads showed an overall lower level of emotional availability, compared to VLBW and full-term dyads,** but no main effect of birth weight was found on specific EA dimensions. Moreover, a significant effect of child age emerged. Overall scores, and Child Responsiveness and Involvement scores improved over time, independently of birth weight. Lastly, a significant effect of the interaction between birth weight and child age was found. **Between 18 and 30 months, the overall quality of the interaction significantly increased in ELBW and VLBW dyads.** Additionally, between 18 and 30 months, VLBW children significantly improved their responsiveness, while their mothers' sensitivity, structuring, and non-intrusive behaviors improved. In contrast, no change emerged in full-term dyads, although scores were consistently higher than those of the other groups. Birth weight affects the quality of mother-toddler interactions.

Monitoring the relational patterns of preterm dyads during toddlerhood is important, especially in the case of ELBW children.



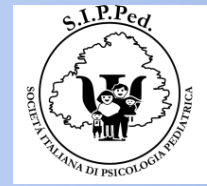
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Short communication

Mother- and father-infant interactions at 3 months of corrected age: The effect of severity of preterm birth



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^d Paediatric and Neonatal Intensive Care Unit, Bufalini Hospital, Cesena, Italy

3 months CA

- 23 ELBW infants
- 69 VLBW infants
- 54 mothers
- 38 fathers
- No control group

Both mothers and fathers showed **similar levels of sensitivity** (results are in line with literature).

Severity of prematurity did not influence mother and father's interactive behaviours

When low in sensitivity, mothers appeared more **controlling** than fathers, while fathers appeared more **unresponsive** and withdrawn, regardless of the infant's level of prematurity. Infants were **more passive** when interacting with the fathers.



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Reading Tales to Preterm Infants in NICU

Neri Erica*, Minelli Marianna*, Marcello Stella**, Biasini Augusto**, Monti Fiorella*, Francesca Agostini*

*Department of Psychology, University of Bologna, Italy

**Paediatric and Neonatal Intensive Care Unit, Bufalini Hospital, Cesena, Italy

Aim of the study was to evaluate the possible advantages of **reading to preterm neonates during their stay in NICU on their later language development**. The influence of parental nationality was also controlled. 100 families of preterm infants were recruited for the study. 88 parents spoke fluently Italian language, 12 other language. A picture coloured book in family's native language was given to 46 newborn's parents (Intervention Group-IG) on admission in NICU telling them to read to their neonate as often as possible. The book was left to the family on discharge home. At 12, 18 and 24 months of infant corrected age, we compared the level of infant hearing and language development, assessed by Griffiths Mental Development Scale, of IG babies with those of 54 infants (Control Group-CG) recruited before the beginning of the intervention. **Reading intervention and Italian nationality were significantly associated to higher Hearing and Language quotients**. In CG, mean scores significantly decreased from 12 to 18 months and 24 months, and from 18 months to 24 months, while no difference among moments of assessment emerged for IG infants. Moreover, Italian babies obtained higher mean scores at 24 months than foreign ones, but not at 12 and 18 months. **Reading in NICU is a factors that positively influences the parents infants relationship and neonates' language development.**



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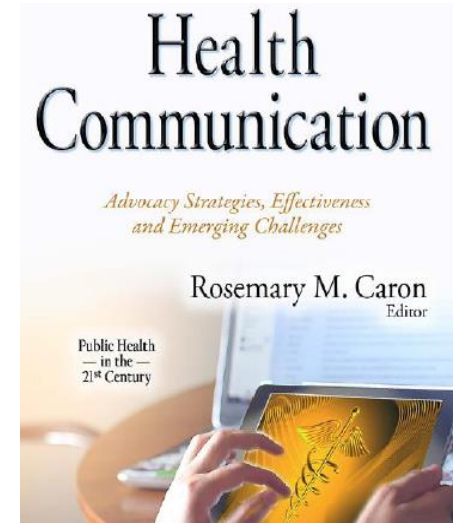
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TALE READING TO PREMATURE BABIES IN NEONATAL INTENSIVE CARE UNIT IS A FURTHER STEP UP IN CARING FOR THEM: TWO YEARS LATER RESULTS.

A. Biasini^{1*}, *F. Monti*², *F. Fiuzzi*¹, *M. Stella*¹, *M.C. China*¹, *E. Neri*²

- 1 Pediatric and Neonatal Intensive Care Unit M.Bufalini Hospital Cesena
- 2 Department of Psychology, University of Bologna



This attitude to keeping in touch with the baby through telling a story, has been confirmed also many months after the discharge home with possible benefits on learning language [20] and relationship between parents and their child [21]

May tale reading to premature babies improve their language development?



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No health without perinatal mental health

The Lancet Vol 384, November 15, 2014

