

Disrupted Maternal Representations: Prenatal to Postnatal Stability in Relation to Maternal Interpersonal Trauma

The grant (\$4,012) that I was graciously awarded by the Evaluation of Research Proposals and Results Subcommittee (CERP) of the International Psychoanalytic Association in October 2011 had two primary aims. The first aim was to investigate the relationship between maternal experiences of childhood and adulthood interpersonal trauma and disrupted prenatal maternal representations of the child (as assessed by the Working Model of the Child Interview [WMCI] and the new WMCI-Disrupted coding scheme) within a sample of 120 primarily low-income, highly traumatized women who participated in a longitudinal study (*The Parenting Project*, PI = Alissa Huth-Bocks, PhD). The second aim was to investigate the (in)stability of disrupted maternal representations of the child from pregnancy to 2 years postpartum in relation to the (in)stability of maternal interpersonal trauma experiences. Additionally, exploratory analyses were planned to investigate whether the subtypes of disrupted maternal representations of the child vary by type of childhood or adulthood interpersonal trauma experienced. Identifying prevalence of disrupted maternal representations of the child in a high-risk sample was also an intention of the research study, as this has not been done before in the literature.

Significant progress has been made on the research project thus far. The first aim has been achieved. Coding of 120 prenatal WMCI using the new WMCI-Disrupted coding scheme was completed in April 2013, along with establishing adequate inter-rater reliability on the sample with Diane Benoit, MD, FRCPC, the developer of the coding system. With the completion of this part of the project, the first main hypothesis of the study (i.e., greater severity of maternal childhood or adulthood interpersonal trauma will be associated with greater disrupted prenatal maternal representations of the child) was investigated. Preliminary analyses using Pearson correlations revealed that severity of mothers' experiences of childhood maltreatment, but not severity of their exposure to intimate partner violence during childhood nor severity of their experiences of partner violence during pregnancy, was significantly associated with the degree of disruption in their prenatal maternal representations of the child ($r = .19, p < .05$). This finding was presented as part of a symposium on Disrupted Maternal Representations of the Child at the 2013 Society for Research in Child Development (SRCD) biennial meeting.

Furthermore, with these coded data, proposed exploratory analyses were able to be investigated. First, the prevalence of disrupted maternal representations of the child in this high-risk sample during pregnancy was found to be 83%; this is the highest reported rate for WMCI-Disruption in the literature to date. Next, for women classified as Disrupted, the subtype of disruption (i.e., Helpless-Fearful, Intrusive-Self-Referential, or Mixed) was not found to differ significantly by type of childhood or adulthood interpersonal trauma experienced. This may be a result of 74% of the women who were classified as Disrupted falling into the Mixed subtype. This finding provides more information about disruption within a high-risk sample.

Additional analyses, outside of the proposed analyses for the research project, have also been investigated. Preliminary findings from these analyses indicated that mothers' current PTSD symptoms during pregnancy, but not her current anxiety or depressive symptoms, were found to be significantly associated with degree of disruption ($r = .32, p < .01$). Moreover, degree of disruption in prenatal maternal representations of the child was found to be significantly associated with infant attachment security as rated by research assistants ($r = -.23, p$

< .05) and with infant social-emotional problems reported by the mother ($r = .22, p < .05$) at 1 year of age. These preliminary findings were also presented during the SRCD symposium mentioned above. Last, the association between prenatal degree of disruption and infant attachment security at 1 year of age was found to be moderated by the quality of the home environment ($\beta = .27, p < .01$) and mothers' perceived romantic relationship quality ($\beta = -.24, p < .05$), both measured at 1 year postpartum. More specifically, high quality home environment and perceived high romantic relationship quality served as protective factors against the impact of maternal disruption on infant attachment security. This last finding was presented at the Michigan Association for Infant Mental Health biennial conference in May 2013.

The second aim of the project is still in progress. Transcribing the 90, 2-year WMCI began in January 2012. It is anticipated that transcribing these interviews will be complete by the end of August 2013. This aspect of the research project has taken longer than originally anticipated due to the interviews requiring more time to transcribe as a result of various recording factors that have made transcription difficult, additional time being spent on making sure that the transcripts are as accurate as possible (the transcripts are checked three times before being finalized) since this can influence coding accuracy, and the interviews being longer and more detailed than the prenatal WMCI. Additionally, due to receiving only partial funds to primarily support aim one of the research project, this aspect of the research project is being completed primarily through volunteer hours contributed by undergraduate and graduate students. As a result, time contributions toward transcribing have varied over time and from student to student. Since these 2-year WMCI cannot be coded (and it's these codes that will allow the second hypothesis to be tested) until transcripts have been finalized, it is only in the coming weeks and months that coding these interviews will begin (2-year WMCI will be coded in an ongoing manner as transcripts are finalized). It is anticipated that coding of the 2-year WMCI will be complete by January 2014. Once coding is complete, analyses associated with aim two of the research project will be completed.

Although aim one of the research project is complete and interesting preliminary findings have resulted, no manuscripts have been submitted for publication yet (although several presentations have been completed, as noted above). Results associated with aim one also form the basis of my dissertation project, which is in progress. When my dissertation has been successfully defended, then it is anticipated that at least two publications will result from these findings. When aim two is completed, at least one more publication will be pursued. Copies of these publications will be provided to the International Psychoanalytic Association. Additionally, I served as a WMCI-Disrupted reliability coder on a sample of Dr. Benoit's data (the developer of the WMCI-Disrupted coding system). Dr. Benoit subsequently included me as a co-author on her paper presentation at SRCD that focused on convergent and predictive evidence of the WMCI-Disrupted classification, and we have discussed my serving as a co-author in the future on a publication using her dataset.