



Working Model of the Child Interview: Clinical Applications

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Objectives

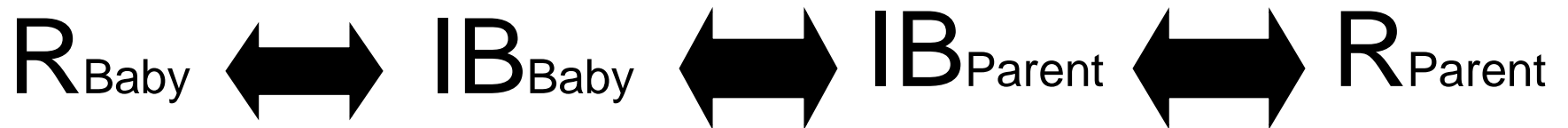
- Describe a relationship framework relevant to clinical assessment and interventions
- Briefly discuss examples of procedures designed to assess relationships
- Present overview of WMCI and discuss clinical vignettes utilizing the interview



Relationships Have Internal and External Components

- External component of the relationship is recurrent patterns of *behavioral interaction*.
- Internal component of the relationship is recurrent patterns of subjective experience or *internal representation*.
- Evidence abounds that each of these has important effects on infant behavior and psychopathology.

Components of Infant-Parent Relationship





Relationship Domains

Parent

- Emotional Availability
- Warmth/Empathy/Nurturance
- Provision of Comfort
- Protection

Child

- Emotion Regulation
- Security/Trust
- Comfort Seeking
- Vigilance/Self-Protection



Relationship Domains (cont.)

Parent

- Play
- Teaching
- Structure/
Instrumental Care/
Routines
- Limit-Setting/
Discipline

Child

- Play
- Learning/Mastery/
Curiosity
- Self-Regulation/
Routines
- Self-Control



Assessing Infant-Caregiver Relationships

One Approach

- Internal Component

- Working Model of the Child Interview

- External Component

- Crowell Procedure



Assessing Infant-Caregiver Relationships

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Crowell Procedure

- Clinic-based assessment
- Requires 30-45 minutes
- Combination of more and less structured activities
- Videotaped for later review
- Limited constraints on behavior
- Clinically useful and formally codeable



Crowell Procedure Episodes

- Free Play
- Clean-Up
- Bubbles
- Structured Teaching Tasks (2-4)
- Separation
- Reunion

Crowell Relationship Assessment

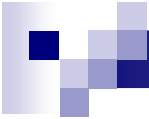
Adult Caregiver Component	Child Component	Most Relevant Crowell Episodes
Emotional availability	Emotion Regulation	All episodes
Warmth/Empathy/ Nurturance	Security and trust	All episodes
Protection	Self-Protection	All episodes potentially relevant
Response to comfort	Comfort seeking	Especially separation/reunion
Teaching	Learning/curiosity/ mastery	Teaching tasks
Play	Play	Free Play
Discipline/Limit setting	Self-control	Transitions between episodes
Instrumental care/ Routines/Structure	Self-regulation	None



Assessing Infant-Caregiver Relationships

One Approach

- Internal Component
 - Working Model of the Child Interview



Parents' Prenatal Perception of Infant Temperament


■ Mothers

□ Activity	0.74**
□ Rhythmicity	0.43*
□ Adaptability	0.47*
□ Intensity	-0.01
□ Mood	0.16
□ Distractibility	0.21

■ Fathers

□ Activity	0.25
□ Rhythmicity	0.37*
□ Adaptability	0.26
□ Intensity	0.06
□ Mood	0.37*
□ Distractibility	0.46*

34 weeks gestation to one month postnatal



Parents' Prenatal Perception of Infant Temperament

- Replicated at 6 months with original sample
- Replicated with adolescent mother sample
- Replicated with middle class sample using different instrument



Describe your impression of your baby's personality now...

- Mother A

- Prenatal

I feel this is a very, very emotional and intense child--very active. Very verbal and very intense. I'll know when it's upset and when it's happy. I cried when something beautiful happened at work. I was sure the baby cried too. The baby kicked and kicked. It felt what I was feeling.



Describe your impression of your baby's personality now...

- Mother A

- Postnatal

- Definitely not quiet. He's got a mind of his own. He's very alert. If he had his way, he wouldn't sleep all day. He likes to stay up and observe things. Likes human contact, likes a lot of love.



Describe your impression of your baby's personality now...

- Father B

- Prenatal

- Quiet, genuinely warm. Sensitive. Given to deep emotional feelings. More of a quiet kind of child. Reflective.



Describe your impression of your baby's personality now...

- Father B

- Postnatal

- Alert--he observes things. Not high strung. Sensitive. Kind of an observing baby. A happy baby. Dependent.



Describe your impression of your baby's personality now...

- Mother C (Adolescent)

- Prenatal

He's smart--he kicks back when I punch him. He's stubborn--he'll be like a pest, a little brat, bugging everybody. Probably a little spoiled. I think he'll be the shy type until he knows the person. When he's around people he doesn't know he'll be quiet.



Describe your impression of your baby's personality now...

- Mother C

- Postnatal

He's spoiled--he always ends up getting what he wants. I try to discipline him and tell him, "No!" I try to let him cry himself to sleep. He's really stubborn. He's real alert and he's strong. He's playful and stubborn. He's a lot like his father, who's also real stubborn--always has to get his way.



Adult Attachment Interview

- Systematic interview about adult's childhood relationship experiences
 - based upon Tulving's theory of episodic and semantic levels of memory
 - 5 adjectives
- Qualitative features of narrative
 - coherence, idealization



Adult Attachment Interview

- Grice's maxims of narrative discourse:
 - Be truthful
 - Be relevant
 - Be succinct
 - Be clear



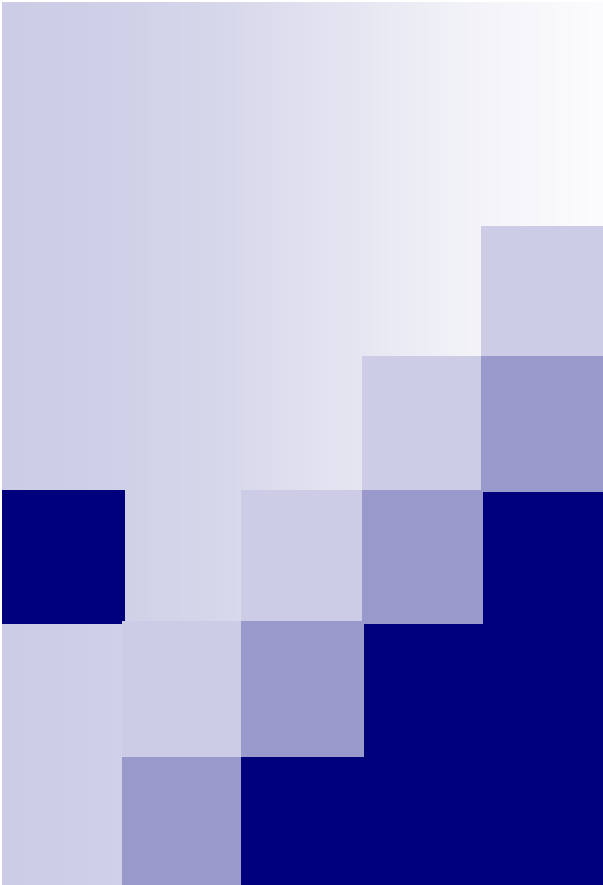
Representation

- Memory
- Generalized event representation
- Representations of interactions that have been generalized
- Internal working models




Internal working models

- Provide rules by which a person perceives self and others and responds to others in relationships.
 - Which information is attended to
 - How information is perceived
 - Affects engendered by perceptions
 - Memories evoked
 - Responses elicited

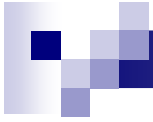


Working Model of the Child Interview



Working Model of the Child Interview (WMCI)

- Semi-structured; about one hour
- Designed to elicit narrative accounts of child and caregiver's relationship with the child
- May be audiotaped or videotaped for coding purposes



WMCI

- Content
- Qualitative features
- Affective tone
- Typology



WMCI Content

- Development
- Personality
- Reminders
- Uniqueness
- Difficult Behaviors
- Relationship
- Upset
- Favorite Story
- Setbacks
- Worry
- Favorite Age
- Future Memories




WMCI Qualitative Features

- Richness of perceptions
- Coherence
- Intensity of involvement
- Openness to change
- Acceptance
- Caregiving sensitivity
- Infant difficulty
- Irrational fear of loss



WMCI Affective Tones

- Joy
- Pride
- Sadness
- Disappointment
- Fear
- Guilt
- Shame
- Anger
- Indifference



WMCI Typology

- **Balanced**

- full

- restricted

- strained

- **Disengaged**

- impoverished

- suppressed

- **Distorted**

- bewildered/confused

- distracted

- self-involved

- role-reversed



WMCI Assumptions

- Narrative patterns can be elicited from semi-structured interview
- Qualitative narrative features reveal individual differences in important aspects of underlying internal representations
- Organization of narrative patterns reveal differences in underlying internal representations and defensive styles



Balanced Narratives

- Convey a reasonably full, rich and differentiated impression of who the child is
- Child is noticed and valued as an individual
- Relationship is important to caregiver and to child's development
- Strengths and weaknesses are acknowledged directly
- Empathic appreciation for child's experience
- Emotionally well-integrated



Disengaged Narratives

- Characterized by emotional distance or aloofness (indifference is elevated)
- Descriptions are pat, generic, unelaborated
- Tendency to normalize (e.g., “normal” or “regular” child)
- Overly cognitive or poverty of detail
- Little flexibility or sense of discovery
- Lack of engrossment in relationship



Distorted Narratives

- Internally inconsistent or incoherent
- Engrossment but without convincing connection to child
- Unable to focus incisively on topic of child
- Unsuccessful struggle to feel close to child
- Striking examples of insensitivity



Selected Research Findings



Mothers' WMCI and Infant SSP

	Sample	n	Concordance
Zeanah et al. (1994)	Middle class (New England)	45	69%
Benoit et al. (1997)	Middle class (Canadian)	78	73%
Cox et al. (2000)	Middle class Preterm Infants	49	70%



Mothers' Prenatal Representations of their Infants and Infant Attachment Classifications (Canadian Middle Class Sample)

	Disengaged	Balanced	Distorted
Avoidant	3	2	1
Secure	6	50	9
Resistant	1	3	10

Agreement = 74%, chance = 54%, kappa = 0.44, $\chi^2 = 30.89$, $p < .001$

Benoit, Parker & Zeanah (1997)



Stability from 6 to 18 months

- 76% stable overall
- 72% parents of full term infants stable
- 76% parents of preterm infants
- Greatest stability in balanced group

Borghini et al., 2006



Mothers' Representations of their Infants (Clinical vs. Non-Clinical)

	Disengaged	Balanced	Distorted
Clinical	27	5	22
Non-Clinical	15	17	13

$\chi^2 = 11.57, p < .003$

Benoit, Zeanah, Parker, Nicholson & Coolbear
(1997)