



**Intergenerational pathways toward infant attachment disorganisation: New Australian evidence**

**Jennifer McIntosh & Craig Olsson**  
With the ATP-G3 MAC Lab & ATP Consortium



**Generation 3**  
Australian Temperament Project

Australian Temperament Project,  
ATP-G3 Melbourne Attachment & Caregiving Lab  
Melbourne Children's Hospital, Murdoch Children's Research Institute  
Deakin University Centre for Social & Early Emotional Development

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**The ATP-G3 team**

**Director ATP-G3 study**

- Craig Olsson



**ATP cohort and CATI management**

- Primrose Letcher, Sophie Barker

**Director ATP-G3MAC Lab**

- Jennifer McIntosh

**Management attachment data collection**

- Evelyn Tan, Jessica Opie

**Attachment and Caregiving Coding**

- Rebecca Knapp, Evelyn Tan, Jessica Opie, Anna Booth, Sharyn Bant, Marief McClure, all current and past members of the ATP-G3 MAC Lab

**Data Analyses and Meta-analytic research**

- Christopher Greenwood, Alexandra Schnabel, George Youssef, Jessica Opie, Emily Kothe

**Epigenetic studies**

- Joanne Ryan, Catherine Maud

**Clinical case analyses**

- Eliza Hartley, Caitlin Bishop, Genevieve Le Bas, Alexandra Schnabel, Claire Lubotsky, Nicola Read

The ATP-G3 CATI team & the ATP Consortium

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Among the determinants of social and emotional development, family trauma and related disturbances of care in the neonatal through pre-school period rank highly.

Both are heavily associated with infant attachment disorganization.

Without question....




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Infant attachment disorganisation is associated with *significant* developmental deviations

**In infancy**  
Neuro-biological, epigenetic and molecular variations

**In later childhood**  
Poor social-emotional & relational competence

**In adulthood**  
Far higher prevalence personality disorders  
Stress related effects on health

(Beenev et al., 2017 ; Carlson, 1998; Forbes, 2009; van Ijzendoorn, Schuengel, & Bakermans-Kranenburg, 1999; Weinfield, Whaley, & Egeland, 2004)

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### Disorganised attachment

Behavioural incoherence in the infant, in interaction with a caregiver, during moments of key need

- bizarre or inexplicable behaviours under the circumstances.

These behaviours impede the achievement of the very thing they need: *protection from threat and fear*.

Thought to represent the subjective experience of **"fear without solution"**.




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### Genesis in the disorganised caregiving system


Parents "unresolved/disorganised" state of mind re loss/abuse

- Interference from enduring frightening emotion or ideation

Marked by interactions that are

- punitive, hostile, confrontational, controlling,
- submissive or constrictive, timid, dissociated
- disruptive, conflict laden, or anomalous
- disengaged, passive, role-reversed
- frightening/threatening, frightened

And by subjective experiences of helplessness and/or hostility



(Britner, Marvin & Pianta, 2005; George and Solomon 2008/2011, Hesse & Main, 1999, 2000, 2006; Humber & Moss, 2005; Lyons-Ruth, Volling, Meinick, & Atwood, 2005; Macfie et al 2008; Main and Hesse 1990; van Ijzendoorn, 1995)

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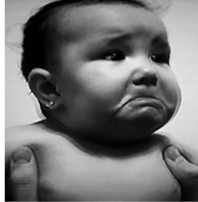
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Disorganised attachment in the general population vs clinical samples



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Today:

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  - a) The Australian Temperament Project (ATP) Generation 3 Study
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4. Toward disorganisation in Generation 3: 35-year case studies from the ATP-G3
5. Universal detection of, and response to, early relational disorganisation
  - a) The MERTIL project

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### The Australian Temperament Project

Since 1983, the ATP has tracked the social and emotional development of over 2000 young Australians and their families

- From infancy to adulthood
- Across 35 years (16 Waves)

<http://www.aifs.gov.au/atp/>







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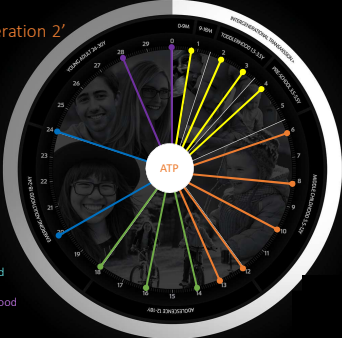
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### Australian Temperament Project

35 year/16 waves of data on 'Generation 2'

Gen 1 & 2	Age	Stage
1983 Wave 1	4-8mths	Early Childhood
1984 Wave 2	1-2yrs	
1985 Wave 3	2-3yrs	
1986 Wave 4	3-4yrs	
1988 Wave 5	5-6yrs	Middle Childhood
1990 Wave 6	7-8yrs	
1992 Wave 7	9-10yrs	
1994 Wave 8	11-12yrs	
1995 Wave 9	12-13yrs	
1996 Wave 10	13-14yrs	Adolescence
1998 Wave 11	15-16yrs	
2000 Wave 12	17-18yrs	
2002 Wave 13	19-20yrs	Emerging Adulthood
2006 Wave 14	23-24yrs	
2010 Wave 15	27-28yrs	Adulthood/Parenthood
2016 Wave 16	33-34yrs	




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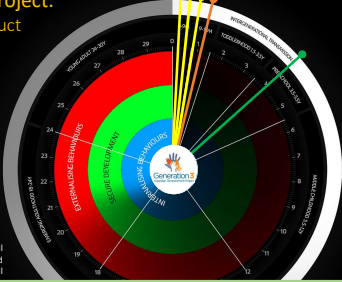

### Generation 3 and the ATP-G3 project.

Attachment as the organising construct

Wave	Age	Stage	Funding
Wave 1	32wks	Pregnancy	ARC
Wave 2	0	Birth	
Wave 3	8wks	Infant	
Wave 4	1yrs	Infant	ARC
Wave 5	4yrs	Pre-School	NHMRC

**Embedded studies:**  
Fetal Neurosonography, then AAI at 24 months.  
Epigenetic change

ARC: Australian Research Council  
NHMRC: National Health and Medical Research Council


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**Our homes:** Royal Children's Hospital & Deakin University

**Our lab work**

- Running SSP assessments at 1 & 4 and the AAI
- Gaining reliabilities in gold standard methods
  - (each 200-450 hours of study)
- Micro-coding of attachment and caregiving
- Maintaining External reliability: Judith Solomon, Bob Marvin



**Our teaching**

- Providing training in attachment and caregiving assessment
- Extensions into translational work
- First Australian Infant Attachment Reliability Program – 2019

The MAC Clinic - 2019

**The ATP-G3 Melbourne Attachment & Caregiving Lab**

Director Prof Jennifer McIntosh  
Managers Evelyn Tan and Jessica Opie

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MAC Lab Patrons  
Sir Richard and Lady Xenia Bowlby



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The MAC Lab....What's in a name?



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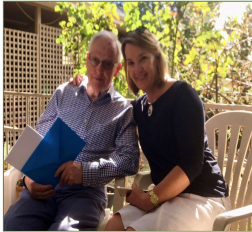
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### The MAC Lab....What's in a name?



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### Attachment

A unique **emotional** bond between infant and care-giver, powered by a bio-behavioural system

### Why attachment?

Evolved with the *express* purpose of

- protecting the infant from *fear* or threat – real or perceived.
- regulating stress
- promoting joy, delight & exploration

Bowlby (1969/1982) Ainsworth (1978)



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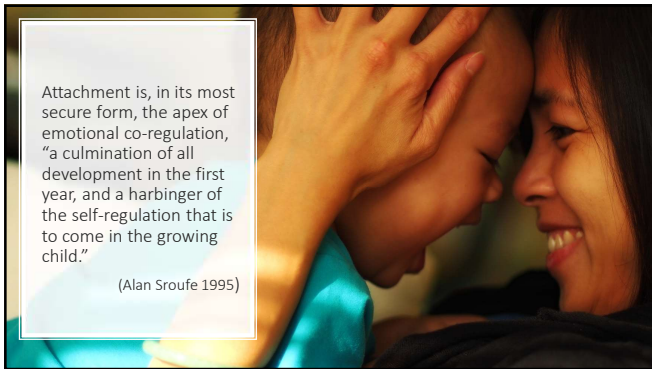
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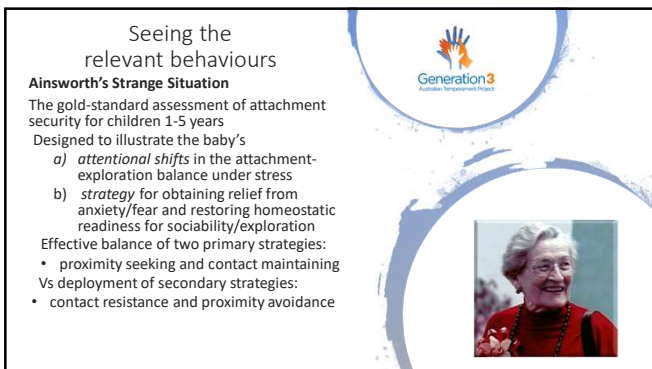
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The Infant Strange Situation Procedure (Ainsworth)  
Episode 1: Parent and Baby, Free Play (3 minutes)



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Episode 2: Stranger enters, with no interaction for 1 minute...



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Episode 3: Then Stranger interacts with parent and then with baby (2 minutes)



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Episode 4: Parent leaves and baby is alone with Stranger (up to 3 minutes)



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Episode 5: Reunion 1 (3 minutes)



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Episode 6: Parent leaves again



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Episode 7: Stranger returns, comforts, plays (up to 3 minutes)



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Episode 8: 2<sup>nd</sup> Reunion (3 minutes)



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**SECURITY**  
(from the Latin, se-cur, without worry, care, concern)

- Feelings of being free from harm, not apprehensive about danger (Bowlby, 1975)
- A full range of difficult emotions are felt, held and dealt with, within a securely held environment
- Less susceptible to chronic or intense anxiety and fear
- Sets up confident expectation in relationships
- Significant life-course advantages of a secure start to attachment life.

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The white and the black tear.  
The affective world, in effective balance



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Organised secure use of primary strategies...



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Insecure behavioural strategies

Insecure but organised strategies are conditioned, presumably as an evolutionary function of natural selection (Main, 1990)

They are either:

- Organised (Avoidant, Resistant)
- Disorganised



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### Attachment Avoidance

Highly adaptive to care in a restricted emotional range

**Involves**

- Delayed greeting, disinterest- ignoring
- Avoiding shared gaze, not sharing emotions
- Little "interactive spark"
- Tracking the caregiver from a distance
- Minimising display of negative emotion
- Masking their need




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### Attachment Resistance

Highly adaptive to unpredictable or 'timid' care

**Involves**

- Seeking while resisting comfort
- Amplifying need
- Lower play/exploratory competence
- Upset, subtle anger
- The carer can't miss the signal.




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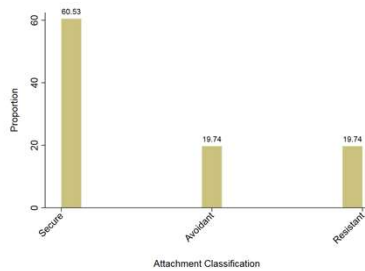
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### Organised attachment: Proportions in the ATP-G3

N=228 mother-infant dyads




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### Disorganised attachment

Recall the purpose of the attachment system.

What happens if, in their peak moment of need, the caregiver is both their only source of safety and a threat...

The baby experiences:

**Unresolvable confusion  
or  
Fear without solution...**

The baby is lost in an approach-avoid conflict



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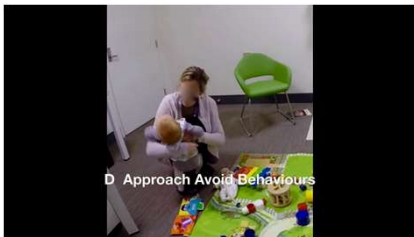
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### Approach/Avoid confusion



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### Disorganisation – what the baby is telling us

The infant has not been able to develop a clear, efficient way of getting relief from threat and fear from the parent. The usual strategies don't work.

Instead, we see the baby doing 'odd' things when they are in need, like.....

- Not seeking the parent out when they are afraid
- Stuffing in their emotions
- Showing fear of the parent
- Seeming confused/dazed when the parent comes to help

Photo courtesy E.Waters 2012 johnbowly.com



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### The Infant D Indices

- I. Sequential Display of Contradictory Behavior Patterns
- II. Simultaneous Display of Contradictory Behavior Patterns
- III. Attachment Behavior Directed Away from Parent
- IV. Resistance or Anger Directed Away from Parent or Constricted
- V. Anomalous Behaviors or Postures
- VI. Freezing, Stilling, and Slowed Movements and Expressions
- VII. Direct Indices of Fear or Apprehension Regarding the Parent
- VIII. Direct Indices of Confusion or Disorientation on Reunion




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### D Scale (Solomon 2013)

- 1. No signs of disorganization/disorientation.
- 3. Slight signs of disorientation.
- 5. Moderate indices not sufficient for D class  
Cut point for a Classification of Disorganised Attachment = 5.5
- 7. Definite D attachment status: not extreme.
- 9. Definite D attachment status: extreme




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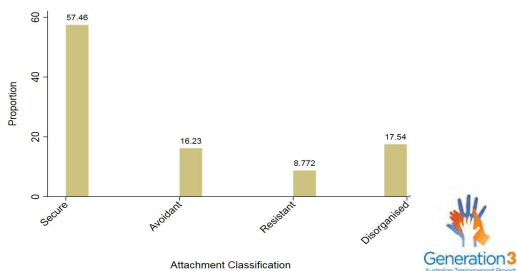
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### 4-way attachment proportions in the ATP-G3 N=228 mother-infant dyads




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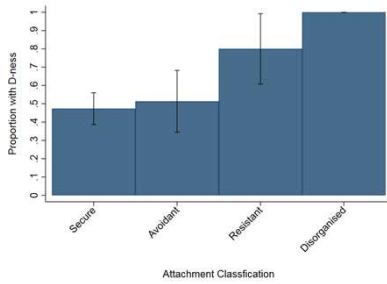
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And then there's "D-ness".

Mean scores

Secure	1.91
Avoidant	2.28
Resistant	3.13
Disorganised	6.44




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### Attachment Continuity and Transition Across Early Childhood: A Meta-Analysis

Jessica E. Opie, Jennifer E. McIntosh, Timothy B. Esler, Carol George, Allan Schore, Emily J. Kothe, Evelyn S. Tan, Chris Greenwood, Craig A. Olsson (under review)

- Collated 24 studies (N = 3422)
- Attachment test-retest spanned two+ major developmental periods:
- Infancy (12-20 months)
- Toddlerhood (21-35 months)
- Pre-school (36-53 months)
- School entry (54-75 months)




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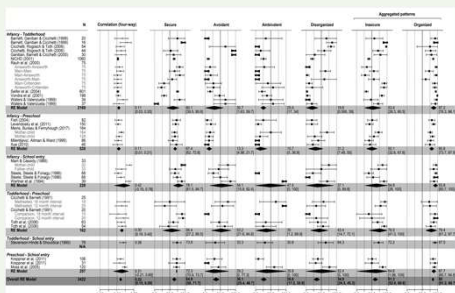
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Opie et al. 2018




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**The good news, and the bad...**

High stability of attachment security: 2 in 3

- Suggests security is the normative homeostatic state.

Attachment disorganisation stability: 1 in 3

- Rates of attachment disorganisation *increase* from infancy to school entry
  - What leads to D pathways?



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### Beyond Fear and the Adult Attachment Interview: Longitudinal Predictors of Attachment Disorganisation. A Systematic Review and Meta-Analysis

Schnabel, Youssef, McIntosh 2018 (In Prep)



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**Where does D come from?  
Meta-Analytic and Systematic Results**

**Meta-analytic Results**

Variable	N effects (N)	r (95% CI)	p
Low income	2 (125)	.28 (.11, .43)	<.01
Maternal sensitivity	7 (590)	-.25 (-.35, -.13)	<.01
Maternal intrusiveness	2 (305)	.31 (.19, .42)	<.001
Perinatal loss	2 (126)	.26 (.09, .42)	<.01
Maternal metacognition	3 (329)	-.23 (-.33, -.12)	<.0001
Infant sex <sup>a</sup> (Boys)	4 (328)	.26 (.16, .36)	<.0001

NS: Parenting beliefs and attitudes; lifetime maternal psych problem; negative maternal personality traits; pre- or post-natal depression; neonatal behaviour; infant temperament; premature birth/VLBW

**Systematic Review Results**

1. Adolescent mothers; Single parenthood; Lower education
2. Less effective social support networks
3. Elevated PTSD symptoms; Paranoia during pregnancy
4. Low reflective functioning re trauma
5. Pre-natal methadone use
6. Parenting stress; Marital conflict/violence
7. Distressed crying & mother's attitude to crying
8. Infant wariness of novelty and fearful faces
9. NICU placement at birth
10. Less time breastfeeding

We applied these to the ATP dataset...

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Risks and protective off-sets in the Pre-conception and perinatal windows.  
Significant findings for D scale and D classification.  
ATP-G3 Study

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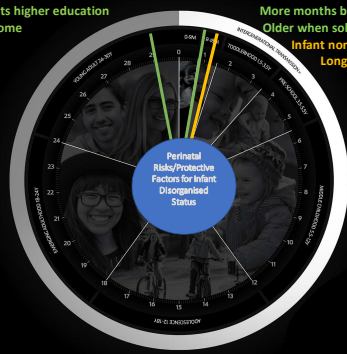
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Parents higher education & income

More months breastfeeding; Older when solids introduced

Infant non-rhythmic temperament  
Longer hours non-parent care  
Low sensitivity\*\*\*




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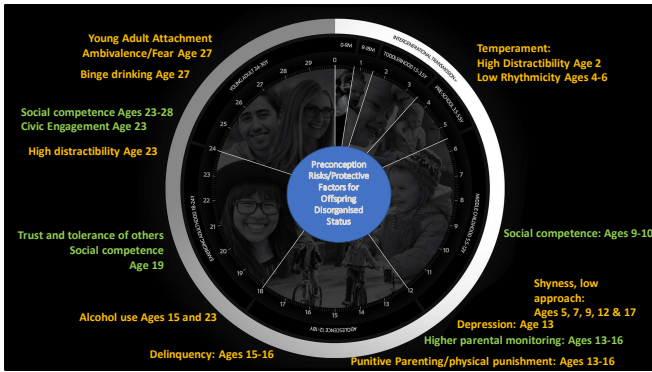
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Where does disorganising care come from?

Studies in the ATP-G3 MAC Lab

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**Maternal Behaviour Q-Sort**

- A 25 item tool to guide your observations of parent sensitivity. (Just as good with Dads)
- Score of -1 to +1 = correlation with the "perfectly sensitive parent"
- MBQS and infant attachment disorganization.  $R = -0.57$

Generation3  
Australian Temperament Project

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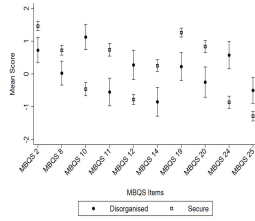
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ATP-G3 Findings: Caregiving behaviours distinguishing Disorganised from Secure attachment relationships

#	Caregiving Behaviour : MBQS Items	OR
02	Does not closely monitor Bs activities and affect state	2.1
08	Does not attend or respond to Bs distress and non-distress signals when talking with S	2.17
10	Non-synchronous Interactions: the timing of Ps responses, initiatives are out of phase with Bs behaviour	3.18
11	Interactions do not revolve around Bs tempo and current state and P does not follow B's lead and interests	2.26
12	Misses slow down or back off signals from B	2.39
14	Unrealistic expectations of Bs self-control of affect—does not scaffold, support or gently re-direct B when needed	2.35
19	Poor awareness of and response to Bs positive and negative signals	2.62
20	Does not build on the focus of Bs attention	2.01
24	Display of affect is not congruent with Bs display of affect (e.g. smiles when B is distressed)	2.63
25	Actively opposes B's wishes or interferes with activity, including B's proximity seeking	2.05




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Mistimed play .....




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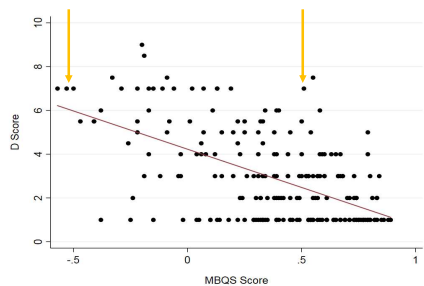
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The lower the sensitivity, the higher the "D-ness"




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Different forms of disorganising care?



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<b>ATP-G3 MAC Lab Studies of Disorganisation</b>  <b>Deakin University Clinical Doctoral Students</b>	<b>Grounded theory study</b> (Hartley, Bishop, McIntosh) Identified 400 key variables across 35 years to explore pathways to D
	<b>Ethics &amp; Confidentiality</b> (Letcher, Barker) Ethics approval, Consent Obtained All identifying information altered, and cases merged
	<b>Data extraction</b> (Le Bas and Greenwood)
	<b>Case Studies</b> (Hartley, Bishop, Le Bas, Schnabel, Lubotzky, Read) • For G3 children with Disorganised attachment classification by 1 and/or 4 years, what is the intergenerational story?

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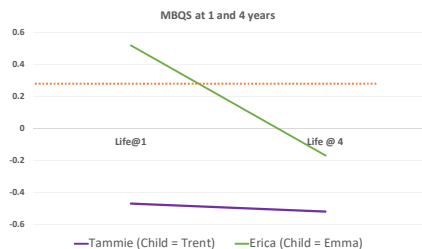
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Tammie & Trent and Erica & Emma:  
Two pathways across 32 years toward offspring disorganisation




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**Pathway 1**  
Intergenerational trauma: The double black tear

- Generation 1: Julie (grandmother)
- Generation 2: Tammie (mum)
- Generation 3: Trent (child)




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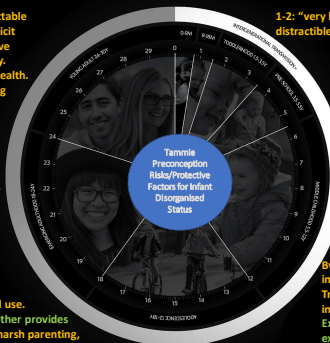
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27-29: Binge drinking, 'regrettable sexual encounters', regular illicit drug use. Moderate depressive symptoms and severe anxiety. Unwanted pregnancy. Poor health. High EPNDS. Separated during pregnancy. Unsupported.

23-24: Completed year 11. TAFE Diploma. Fearful romantic attachment style.

15-16: Ongoing alcohol use. Frequently bullied. Mother provides practical support, but harsh parenting, physical punishment. Delinquency.



1-2: "very hyperactive", "intense", "easily distractible". Excessive crying. Difficult.

6-7: Parents separate. No further contact with father.

9-10: Teacher reports: hyperactive, distractible, hostile aggressive and anxious/fearful. Frequent shifts of housing, schools. G1 unemployment.

By age 13: Conduct problems impulsive. Depression. Bullied. Tried alcohol and drugs, caused injury to others. Extraversion and openness to experience.

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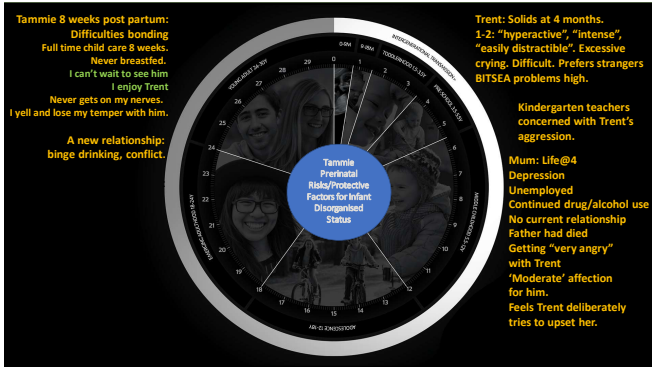
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**Infant SSP: Separation and Reunion Behaviours**

Dys-synchrony and multiple indices of disorganized response.

**Attachment classification: D**


D score is 8.5 Many indices of direct apprehension.

**MBQS score is -0.47**

Dys-synchronous affect throughout. Hostile controlling interactions.

**Attachment classification: D/IO**

**MBQS score is -0.52**

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**Pathway 2**  
Recent stress and the double white tear.

- **Generation 1:** Betty (grandmother)
- **Generation 2:** Erica (mum)
- **Generation 3:** Emma (child)




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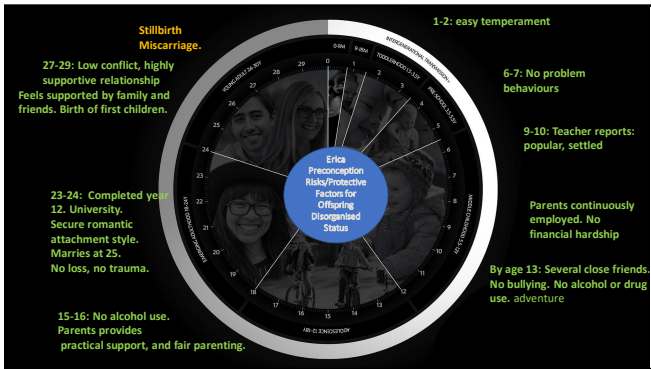
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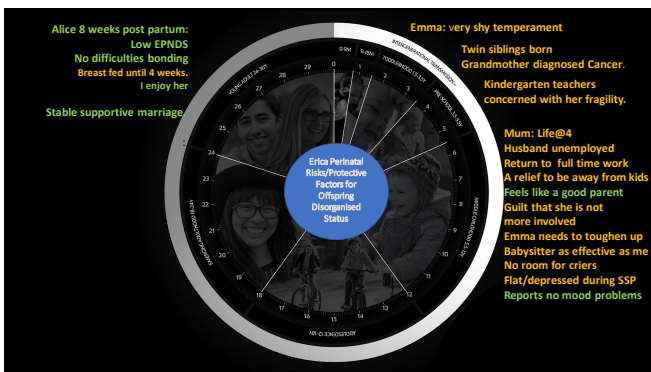
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Infant SSP	Pre-school SSP
<p><b>Emma on First Separation:</b> Secure and organized pattern of behaviour on reunion Attachment Classification: Secure (B4) D scale = 3</p> <p><b>MBQS = 0.52</b></p> 	<p>Dys-synchronous affect throughout Attachment classification: D/IO MBQS score is -0.17</p> 

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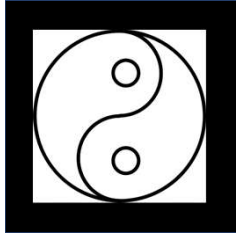
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### The confusion of the double white tear



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### Distinguishing forms of disorganising "fear"

#### I am afraid of what I feel, *even though* you are here

You were loved, and you love me

- I am not afraid of you, *but...*
- Something is *interfering* with your caregiving
- I am afraid of *what I feel* in this moment, because
  - I am confused by you
  - I feel alone in your presence
  - I cannot regulate this stress state alone

#### The background

- Rushed and working under a stress pile up.
- Your history prepared you for "the white tear", and not "the black tear"

I am left with *unresolvable confusion* when I am in need, and my attachment behaviours show it.



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### The chaos of the double black tear



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### Distinguishing forms of disorganising “fear”

#### I am afraid of what I feel, *because you are here*

You were loved *and* hurt by those who loved you

- You love me, and yet when I am highly vulnerable, and in great need you may hurt me, physically or emotionally

The background:

Your history only prepared you for “the black tear”

You have been frightened by parenting me

I am left in a state of *unresolvable fear*, and my attachment behaviours show it

Continuously disorganised across early childhood =  
*A stable sense of chaos.*




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### Now:

1. Australian intergenerational attachment research
  - a) The Australian Temperament Project (ATP) Generation 3 Study
  - b) ATP-G3 MAC Lab (Melbourne Attachment and Caregiving Lab)
2. Attachment security and disorganisation
  - a) Calibrating to early relational security
  - b) Calibrating to early relational confusion, or trauma
  - c) Calibrating to disorganising caregiving
3. Lifecourse pathways toward infant disorganisation
  - a) New meta-analytic findings
  - b) New ATP-G3 findings
  - c) Variations with disorganisation type and etiology
4. Toward disorganisation in Generation 3: 35 year case studies from the ATP-G3
5. **Universal detection of and response to early relational disorganisation**
  - a) **The MERTIL project**

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### The big ticket items in the prevention of disorganized attachments

- Nurturing the developing care-giver
- Promoting affective balance: “the zone of proximal development”
- Earliest detection of overwhelmed and overwhelming caregiving
- Earliest response to trauma
- Attention to the triad




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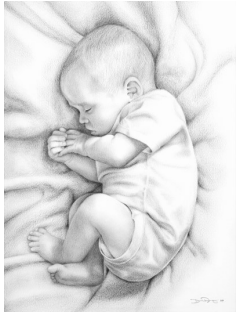
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A program of training and support for the 1500 strong MCH frontline  
 A warm, full, multi-layered learning experience

- Online learning
- In-person skills training
- Resources




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Who is Mertil?

Professors Jennifer McIntosh & Louise Newman,  
 The Department of Education and Training, and the MERTIL Team





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MERTIL is all about:

**Building skills in observing and understanding**

- the parent-infant relationship and disruptions in emotional interaction in everyday settings
- parent capacities, anxieties and their impact on infant care
- risks for development

**Tailoring responses and referrals that support parents**

- to develop their understanding of their infant's needs
- respond sensitively to emotional communication
- feel more confident in their role of attachment figure

[www.mertil.net.au](http://www.mertil.net.au) 

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**Online Chapters & In-person Skills Training**

1. Infant trauma: a relational, developmental and humanising framework
2. Attachment development and the transmission of caregiving trauma
3. Recognising caregiver trauma
4. Recognising neonate and infant attachment trauma
5. Recognising pre-school trauma
6. Creating supportive conversations for a shared recognition of risk
7. First responses to trauma on the MCHN frontlines
8. Enhanced responses to trauma (Enhanced/Coordinators)

Response to complex scenarios: skills training

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**MERTIL'S LIBRARY**

- Resources Factsheets
- Articles
- Podcasts
- Links
- Networks
- Associations
- Conferences
- ... & Recipes

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**Beyond post-partum intervention**

- Mobilising for prevention in the general population through merging of public health and clinical perspectives
- Comprehensive monitoring projects: Deakin University Centre for Social and Early Emotional Development




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