

# Parent-Infant Psychotherapy for High-Risk Mothers May Be Better than No Treatment, But No Better than Alternative Treatments



*PIP is a potentially effective method of improving the attachment status of infants of mothers experiencing adversity*

#### **What is the aim of this review?**

This Campbell systematic review compares the effectiveness of Parent-Infant Psychotherapy (PIP) in improving the mental health of parents, the parent-infant relationship and infant emotional wellbeing with that of no treatment, treatment as usual and alternative treatments. The review summarises findings from eight randomised controlled trials (RCTs), with a total of 846 participants.

**Parent-infant Psychotherapy (PIP) for parents experiencing adversity, may improve the attachment of infants compared to no treatment, but there is no evidence that PIP has an impact on any other outcomes (e.g. parental mental health). PIP does not appear to be more effective than alternative treatments in improving maternal or infant mental health.**

#### **What did the review study?**

Parent-infant psychotherapy (PIP) aims to address infant problems such as emotional, behavioural, eating and sleeping disorders. It also aims to address problems in the parents' relationship with an infant, such as bonding difficulties or low sensitivity. It targets the relationship between the infant and his or her parent, and psychotherapists using this psychodynamic approach deliver it jointly to both the parent and the infant, typically in weekly meetings over the course of five to twenty weeks.

This review examines if using PIP with mothers experiencing adversity is effective in improving maternal and infant mental health and the mother-infant relationship. The review also assesses the effectiveness of PIP for a mother's ability to care for her baby, and for infant stress and development.

#### **What studies are included?**

The studies included in this review compare the effects of PIP programmes with a control group that received no treatment, treatment-as-usual, or an alternative treatment, such as interaction guidance, psychoeducation, counselling or cognitive behavioural therapy.

Eight randomised controlled trials studies are included, with a total of 846 parents with infants aged up to 2 years. Four studies compare PIP to no treatment or treatment-as-usual, and four to alternative treatments. Three of these studies were conducted in the USA, and one each in Canada, Switzerland and Sweden. The included studies were based on samples that included



### How up-to-date is this review?

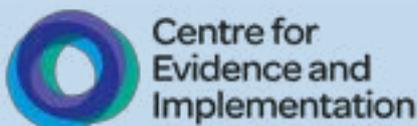
The review authors searched for studies published until January 2014. This Campbell Systematic Review was published on 2 March 2015.

### What is the Campbell Collaboration?

The Campbell Collaboration is an international, voluntary, non-profit research network that publishes systematic reviews. We summarise and evaluate the quality of evidence about programmes in the social and behavioural sciences. Our aim is to help people make better choices and better policy decisions.

### About this summary

This summary was prepared by Bianca Albers (Centre for Evidence and Implementation, Save the Children Australia) based on the Campbell Systematic Review 2015:6 'Parent Infant Psychotherapy for Improving Parental and Infant Mental Health: A Systematic Review' by Jane Barlow, Cathy Bennett, Nick Midgley, Soili K. Larkin, and Yinghui Wei (DOI: 10.4073/csr.2015.6). Anne Mellbye (R-BUP) designed the summary, which was edited and produced by Tanya Kristiansen (Campbell Collaboration).



mothers only, all of whom experienced mental health problems, domestic abuse or substance dependency, and some of whom were also in prison.

### Is PIP effective for high-risk populations?

Compared with no treatment or treatment-as-usual, PIP participants show an increase in the number of infants securely attached; fewer infants with an avoidant or disorganised attachment style; and more infants moving from insecure to secure attachment. This was maintained at follow up.

PIP is neither more nor less effective than no treatment or treatment-as-usual in improving maternal mental health, and reflective functioning; infant stress and development; or the quality of the mother-infant interaction.

### Does PIP have any adverse effects?

Few adverse effects were identified in the included studies. One study showed that infants whose mothers received PIP stayed in the same attachment category or showed a less secure attachment.

### What was the quality of the evidence?

The quality of the evidence of studies included in this review is weak. Only a few studies were included and these were based on small sample sizes, and several methodological biases were detected. Results, should therefore, be interpreted with caution.

### What do the findings in this review mean?

PIP is a potentially effective method of improving the attachment status of infants of mothers experiencing adversity, but there is no evidence to support its use to improve other aspects of the relationship or parental functioning, nor to support the use of PIP over other treatment approaches. This evidence should be treated with caution due to methodological problems.

Further high-quality and rigorous research is needed to assess the effectiveness of PIP compared with other models, such as interaction guidance. Further research is also needed to establish the impact of PIP on other potentially important outcomes such as parental mental health and reflective functioning.