The Evidence Base for Psychoanalytic and Psychodynamic Interventions with Children Under 5 Years of Age and Their Caregivers: A Systematic Review and Meta-Analysis

EXECUTIVE SUMMARY

Michelle Sleed, Elizabeth Li, Isabella Vainieri, Nick Midgley
Forward

The Association of Child Psychotherapists welcomes the publication of the systematic review and meta-analysis. It provides an important step forward in the development of knowledge in this field. We hope that, by increasing awareness that effective interventions lead to real change, improvements can be made to the funding and provision of services in the crucial early months and years of life.

A continuum of early years support, from universal provisions to specialist services, is necessary to meet the needs of all families with young children, identifying issues as they arise and intervening in a timely way. The evidence-based psychoanalytic and psychodynamic interventions included in this review have been implemented in a broad variety of settings and for a broad range of problems and as such have real-world applications. The families who participated in the interventions were ethnically and socially diverse. They clearly demonstrate the ways in which young children and their caregivers can be supported to build resilience and develop core skills enabling a more positive developmental trajectory.

This report provides increased confidence that psychoanalytic and psychodynamic interventions for children under five years of age and their caregivers can be effective in improving outcomes. Increasingly, these approaches should be included in front-line services, delivered by Child and Adolescent Psychotherapists and other professionals.

Becky Saunders and Silvina Diaz-Bonino

Leads of the ACP 0-3 and Perinatal Clinical Network

On behalf of the Association of Child Psychotherapists, childpsychotherapy.org.uk
Background and rationale

It is well known that the first years of life are critical for shaping a range of biopsychosocial outcomes throughout the lifespan. Effective early interventions have the potential to offset the negative outcomes associated with adversity in this critical period of development.

Psychoanalytic theorists were the pioneers who drove the contemporary recognition of the importance of early experiences for later development, and there is a long history of developments of psychoanalytic and psychodynamic therapeutic interventions for infants, young children and their caregivers.

While the evidence-base for a broad range of psychodynamic or psychoanalytic interventions available to children under five and their caregivers is now quite substantial, there is still a lack of research evaluating the effectiveness of such interventions.

Aim and research questions

The aim of this work is to systematically review, synthesise, and critically appraise evidence for the efficacy and/or effectiveness of psychoanalytic and psychodynamic interventions for children under five years of age and their caregivers.

Our primary review question was: To what extent are psychoanalytic and psychodynamic interventions effective/efficacious in the prevention and treatment of mental health difficulties in children under 5 years of age and their caregivers?

Our secondary review questions were: What models of psychoanalytic or psychodynamic oriented intervention or specific programmes are available for children under 5 years of age and their caregivers? What are the populations and presenting difficulties that these interventions target? What is the quality of research done in this area?
Methods

A systematic review was conducted in which ten electronic databases (CINAHL, EMBASE, PsychInfo, Scopus, Web of Science, MEDLINE, PubMed, Science Citation Index, Sociological Abstracts, and The Cochrane Library) were searched for studies published between 1990 and 30 September 2021. A total of 77 eligible studies were identified, and data extracted.

Data were synthesised using meta-analysis using a random effects model (rma.uni function of the metafor package in R with the method set to ‘REML’). The effect sizes of each eligible study were combined to assess post-intervention effects on different intervention outcomes in meta-analyses. Only case-control studies using similar populations as cases and controls were included in the meta-analyses, while studies without a control group, and those that reported pre- and post-intervention data only were excluded from the meta-analysis to avoid biased outcomes (Cuijpers et al., 2017).

In all cases a critical appraisal of each included study was undertaken, focusing on potential sources of bias in the design and conduct of the study, and in this way the quality of evidence was taken into consideration when reporting overall findings.

Key findings

Interventions

- The interventions included in the review fell into three broad categories:
  - contemporary psychodynamic, mentalization-based interventions
  - psychodynamically-informed attachment-based interventions
  - Dyadic (or triadic) psychoanalytic and psychodynamic psychotherapies

- In all interventions, the relational world of the infant is prioritised and the focus of the work is on strengthening the infant’s early relationships with significant others.

- The caregivers’ and therapists’ capacity to observe and make sense of the infant’s psychological experiences is central to most interventions.
Most interventions emphasise the importance of intergenerational patterns of parenting. The caregivers’ past experiences play an important role in their relationship with their infant.

Most interventions were focused on mothers and infants. Fathers were sometimes included with mothers, but no intervention focused solely on fathers and infants.

About 12% of the interventions started in pregnancy, supporting the parent-infant relationships from the very beginning and through the transition to parenthood.

Most families receiving these interventions had complex needs and were experiencing multiple psychological and social stresses.

Many interventions were transdiagnostic and could be delivered to families experiencing different sorts of presenting problems (e.g. parental mental health difficulties, substance misuse, chronic poverty and social exclusion, maltreatment, community and domestic violence and trauma).

The models of interventions were flexible and have been adapted to be delivered in different ways to make them accessible (for example, time-limited abbreviations of intensive interventions, interventions delivered in family’s homes or other residential settings, interventions imbedded in wider programmes of practical support and psychoeducation).

The interventions were provided to families from a diverse range of ethnic and socioeconomic backgrounds, although most of the research was conducted in North America and Europe.

**Outcomes**

The most frequently measured outcomes were:

- parent-infant interaction,
- parental reflective functioning,
- parental depression,
- infant development,
- infant social/emotional/behavioural functioning,
- infant attachment
The studies showed that the changes from pre- to post-intervention were mostly positive (70-80% of the time for all outcomes).

No harmful outcomes were reported.

The meta-analysis of controlled studies found significant effects compared to control interventions on:

- Parental Reflective Functioning (95%CI -0.68 to -0.06, p = 0.02; I² = 82%)
- Maternal depression (95%CI 0.13 to 0.45, p<0.000; I² = 44%)
- Infant behaviour (95%CI 0.00 to 0.43, p=0.04; I² = 35%)
- Infant attachment (95%CI -0.95 to -0.19, p<0.00; I² = 49%)

No significant differences between psychodynamic interventions and control interventions were found on parental stress, and parent-infant interactions.

Although many of the individual studies were underpowered (did not have a sufficiently large enough sample size to pick up on meaningful changes), the meta-analysis did show promising treatment outcomes for these interventions.

Further good quality controlled studies are needed.

Conclusions

In this systematic review we identified 77 studies, comprising 5,660 caregivers as participants, most of whom were mothers. Most interventions were delivered for children aged under three, in a wide range of settings using different formats. The interventions were mostly transdiagnostic and could be delivered to a broad range of families, especially those with complex psychological and social difficulties.

The results of the meta-analyses showed that psychodynamic and psychoanalytic interventions can help young children and their caregivers in preventing mental health difficulties by supporting improvements in parental reflective functioning, parental depression, infant behaviours and attachment.