

Mothers' responses to babies' crying: Benefiting from and getting over childhood experiences

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Credit: Anna Langova/public domain

Research has told us that infants whose mothers respond quickly, consistently, and warmly when they cry have healthier emotional development than infants whose mothers are less sensitive to their cries. A new study has found that mothers whose childhood experiences with caregivers was positive and those who have come to terms with negative



experiences are more infant-oriented when they see videos of babies crying and respond more sensitively to their own babies' cries.

The study, by researchers at the University of North Carolina at Greensboro, with input from colleagues at Fuller Theological Seminary and Hebrew University of Jerusalem, appears in the journal *Child Development*. The researchers sought to identify characteristics that differentiate between mothers who behave sensitively when their <u>infants</u> cry and mothers who don't.

"Responding sensitively to infant crying is a difficult yet important task," notes Esther M. Leerkes, professor of human development and family studies at the University of North Carolina at Greensboro, who led the study. "Some mothers may need help controlling their own distress and interpreting babies' crying as an attempt to communicate need or discomfort. Home visiting programs or parenting classes that help parents become more aware of stress and teach ways to reduce it, as well as individualized parent education efforts, may help build these skills."

Mothers who experienced depression or had difficulty controlling their emotions responded to videos of babies crying by focusing on themselves rather than seeing the needs of the distressed babies as the priority. Mothers whose physical stress was poorly controlled (measured, for example, by skin conductance—how much sweat was on their skin in response to the stress—and rapid heart rate) in response to the videos were also more likely to focus on themselves and responded more negatively to the videos (they perceived crying as a nuisance or manipulation). In addition, mothers who responded more negatively and focused more on themselves prenatally were less sensitive to their own infants when the babies were 6 months old.

The researchers observed 259 first-time mothers from a range of racial



and socioeconomic backgrounds who were followed from pregnancy until their babies were 6 months old. Expectant mothers filled out questionnaires about their personalities and emotional characteristics, and they were interviewed about their childhood experiences with their parents or caregivers, including how those experiences affected them over time. Next, the expectant mothers watched short videos of four crying babies. Their skin conductance and heart rate were measured while they watched to determine how their bodies reacted physiologically when exposed to the crying.

After watching the videos, the mothers answered questions to determine how they thought and felt about the crying. They were considered to be infant-oriented in their thinking about crying if they could accurately identify infant distress, reported feeling empathy for the infants, thought the infants were crying because they needed care, and believed crying is how babies communicate. Mothers were considered mother-oriented in their thinking about crying if they believed crying was a nuisance and thought the <u>babies</u> in the video were crying to be manipulative. Months later, 211 of the original 259 mothers and their 6-month-olds were videotaped together during three activities.

The study also found that what predicted how mothers thought, felt, and behaved in response to infant <u>crying</u> didn't differ by race. "This adds to evidence supporting the universality of the processes that promote <u>mothers</u>' sensitivity to distress," notes Leerkes.

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