SPECIAL EDUCATION

Promoting Positive Attachment in Infants

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There's no doubt that attachment plays an integral role in a young infant's development. An infant's initial and primary task is to ensure that his or her needs will be met by crying and displaying a variety of nonverbal signals. It is important that those attempts to connect are met with warm, authentic responses from a parent or caregiver. When infants have ample opportunities to build attachment with a genuine, responsive caregiver, they develop a positive sense of self, of others, and of the world around them.

Attachment continues to build with consistent caregivers through interactions that include eye contact, physical contact, body language, conversation, responses to verbal and nonverbal attempts to communicate, and genuine responses to a child's needs. Attachment occurs seemingly naturally as warm, attentive caregivers respond to the contagious coos and giggles of a young infant. But what to do when this doesn't seem to occur so naturally?

Attachment is important for every child, and sometimes we need to make modifications based on a child's temperament, physical or cognitive limitations, or specific diagnosis of special needs to help this attachment develop. We may also need to give extra attention to modeling supportive adult-child interactions to parents who are struggling with attachment issues themselves. Below are some strategies you can use with all babies to ensure that they have an opportunity to be successful in building strong and supportive attachment relationships.

Read the baby's cues. Giggling, smiling, making eye contact, or focusing on a person or object are all ways that babies indicate that they are comfortable and engaged in an activity or interaction. When babies cry, turn away, squirm, arch their back, or push away, it can indicate that they are bored, overstimulated or uncomfortable. It is



important to read these nonverbal indications from the baby to learn how he or she likes to be held and engaged with, and what kinds of stimulation are too much or too little. Be certain to respond to every cue, not just signals of distress. For example, pick up and soothe a crying baby, but also play peek-a-boo, talk with, or smile back at a cooing baby.

Make adjustments. Part of responding to a baby's cues that he or she is uncomfortable is making changes to the baby's surroundings. For example, a lot of bonding can occur while an adult is holding a baby, but you might have a baby who is uncomfortable being held due to sensitivity to touch, sensitivity to pressure, the necessity of braces or a helmet, or discomfort in various positions. One accommodation you could make in this case would be to lie next to the baby on the floor rather than holding her close. This would allow you to be on her level (making eye contact), see things from her perspec-

tive, and engage in talking, cooing, and babbling while respecting her personal preference about being held.

Assign caregivers based on the child's temperament and individual needs/preferences. Every baby has a unique temperament as well as different needs and preferences; looking for and supporting individual differences can quickly strengthen a relationship and make a baby feel comfortable. Spending a few days getting to know a new child before placing him or her with a long-term caregiver can really help in overcoming attachment barriers. Look for clues that the child seeks out a particular caregiver — indicating that the caregiver's manner and style is compatible with that child — and then be conscious of how to schedule shifts and breaks so you can ensure that the preferred caregiver is present for dropoff, pickup, and other crucial parts of the day.

Support relationships on an individual basis. As child care workers, we provide care in a group setting; however, extended time in a group can be overwhelming and overstimulating to children — so it's important to capitalize on one-on-one opportunities. Routine bodily care times and mealtimes are one of the most important opportunities for interacting and building trust. Other possible times for individual bonding include at the beginning of the day, while children are arriving gradually; while some children are sleeping; or at the end of the day when children are getting picked up gradually.

Communicate observations with parents and guardians.

Even at their young age, infants give us many clues about what they are experiencing, feeling, and perceiving. Be sure to share that information with the other important people in the child's life. Sometimes comparing notes by talking to parents about the preferences and behaviors of their infants at home is the key to finding just the right way to support a child who is struggling to develop an attachment to a caregiver.

In one circumstance, a child struggled for months to connect to her caregiver until her doctor discovered that she had very poor eyesight and needed glasses. It seemed like a small change, but once she had the glasses she could finally see her caregiver, connect a face to a voice, and visually find her caregiver when he was moving around the room. When children appear to have deficiencies or delays, it's important to voice your concerns to parents so problems can be addressed early on and diagnosis can be determined early so the children can receive the proper tools, support, and assistance.

Be on the child's level — and not just physically. Play the way babies play. Be silly, make faces, laugh, giggle, and coo. See the world the way a baby sees the world — on the floor and with heartfelt curiosity. When you participate as a partner in an infant's play, the child learns to trust — which then allows him or her to be excited about exploring with you.

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As adults, we know that life doesn't always happen the way we expect it to. Sometimes children don't develop as we expect them to, sometimes they do, and sometimes we as caregivers are met with circumstances we haven't encountered before. Whatever the case, be genuine, be authentic, be warm, and be caring. Be a caregiver who takes the time to get to know each child individually and supports the development of attachment and trust as building blocks for each child's future relationships and sense of self.