Assessment of Maternal Attributions of Infant’s Hostile Intent and Its Use in Child Maltreatment Prevention/Intervention Efforts

Cognitive models of aggression propose that when an individual attributes hostile intent to another person’s behavior, these attributions increase the likelihood of aggression toward that person. This proposition has been supported by a large body of literature. Similar speculations are found in cognitive behavioral models of child physical abuse. Specifically, these models propose that, when parents make attributions of hostile intent with respect to their children’s behavior, they are more likely to use harsh parenting practices and are at increased risk for physically abusing their children. As expected, studies have found that, in the general population, parents’ child-related attributions of hostile intent are associated with harsh discipline practices. Furthermore, research has found that these high-risk parents and physically abusive parents, relative to comparison parents, make more attributions of hostile intent with respect to their children’s behavior.

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In this issue of JAMA Pediatrics, Berlin et al describe a study that was designed to investigate the extent to which mothers’ prenatal self-reported hostile attributions about infants are related to self-reported use of harsh parenting behaviors. Moreover, to our knowledge, this is the first study that has attempted to extend this line of research by demonstrating an association between mothers’ prenatal child-related attributions and their future likelihood of child maltreatment (defined as alleged or substantiated abuse or neglect).

Indeed, Berlin et al found an association between a brief measure (developed for their study) of maternal attributions and subsequent child maltreatment, leading them to suggest that practitioners should evaluate maternal attributions using their scale (ie, the Infant Intentionality Questionnaire). However, when considering the use of this questionnaire, professionals should be aware that this 8-item assessment tool includes questions about both hostile infant attributions (4 questions) and positive infant attributions (4 questions). Furthermore, as Berlin et al point out, the total questionnaire score is an index of the mother’s attributions of “negative intentions” relative to their total attributions of “negative intentionally + positive intentionality.” As described by Berlin et al, the final scoring algorithm of their scale is rather complex. Although their final scoring algorithm results in a total score of 5 (a score that optimally predicts child maltreatment) for mothers who attribute only hostile intent to infants with a frequency of “always,” it should be noted that a total score of 5 can be achieved in a variety of other ways. For example, if a mother indicates a “never” response on all 8 items on the Infant Intentionality Questionnaire, using the online scoring available at the time this editorial was written, the total score also is 5. Thus, when a score of 5 is obtained, users do not know if the score was produced by negative infant-related attributions or if the mother simply attributed no intentionally (negative or positive) to infants.

The authors’ choice of a scoring algorithm that results in a maximum score of 5 when hostile attributions are present and when no attributions of intentionality are present has implications for understanding some of the results of their study. For example, although Berlin et al did not report information about the type of child maltreatment alleged or substantiated, if their sample of maltreatment cases paralleled national statistics, the majority (about 70%) of their child maltreatment cases would have been child neglect. To the extent that this was true, it could explain why their measure of self-reported harsh discipline did not predict future child maltreatment—because harsh discipline does not always occur in child neglect cases as it typically does when child physical abuse occurs. Furthermore, with respect to their measure, if a substantial number of the total scores of 5 were due to mothers endorsing neither hostile intent nor positive intent attributions, then the lack of attributions about infants (suggesting little involvement with their infant, which may be indicative of child neglect) might have contributed to the association between their measure of maternal attributions of intentionality to infant behavior and future child maltreatment.

Careful consideration of what is measured by the Infant Intentionality Questionnaire and what a total score of 5 actually represents also is important for clinical reasons because, when a score of 5 is obtained (unless individual items are inspected), practitioners do not know if the intervention focus needs to be on changing attributions of hostile intent or if the focus can simply be on helping the parent develop a clearer understanding of intentionality as it relates to young children. This distinction is important because the authors indicate that, if a high score is obtained on their questionnaire, “[a] brief reframing or more intensive parenting intervention addressing such topics as typical infant behavior and nonphysical discipline” should be considered. However, if the hostile attributions are related to parents’ schemata (ie, beliefs) about children, then educational approaches alone may have a limited effect because parents who have preexisting negative child-related schema may view the child-related information (eg, negative or positive child intent) provided by an educational program as inconsistent with their views. Because individuals expect consistency between their beliefs and their
environment, an unexpected concatenation of beliefs and stimuli (which could occur when an educational approach emphasizing benign or positive child intentions is used to treat parents with negative child-related beliefs) can produce parental efforts to resolve the discrepancy. This phenomenon has been described as “motivated reasoning,” which involves individuals seeking information that conforms to (or confirms) what they believe and discarding or ignoring inconsistent data, a phenomenon that has been reported in numerous studies.

Furthermore, the tendency to seek data or to make interpretations of data in a manner that confirms existing schemata, which is called “confirmation bias,” in some cases can result in an unwanted strengthening of original beliefs, which is referred to as “attitude polarization.” Outside of the child maltreatment literature, such outcomes have been reported following persuasive arguments and after nonpersuasive “factual” (educational) information has been presented. To the extent that the former phenomenon occurs, educational efforts might be ineffective, and to the extent that the latter phenomenon occurs, an educational intervention could result in an unwanted strengthening of the beliefs on which the hostile attribution bias is based. In contrast, if the parent endorses neither negative nor positive child-related attributions, then an educational approach might be relatively more effective.

If educational approaches are used to change maternal schema thought to drive hostile attributions, they might be enhanced by drawing from existing techniques used to change implicit attitudes. For example, applications of “evaluative conditioning,” the most commonly used method to change implicit attitudes, could be pursued. In addition, Davies has demonstrated the utility of having individuals provide counterarguments to their preexisting beliefs in order to change existing schemata. Based on an entity theory of personality, Yeager et al found that changing implicit beliefs about the malleability of personality traits was associated with a reduction in attributions of hostile intent.

In summary, we believe that the assessment of hostile intent as a risk factor for child maltreatment is an important endeavor. With respect to the use of the Infant Intentionality Questionnaire, we believe that the inventory merits further development, with perhaps a scoring algorithm that allows for a clearer differentiation of hostile and positive child-related attributions. In addition to advancing our ability to assess maternal attributions of hostile intent for children’s behaviors, there remains a need for additional research on the methods that might have the greatest efficacy in changing maternal belief-based attributions, especially hostile attributions related to children’s behaviors.

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REFERENCES


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