Resource friendly interventions that foster maternal–infant attachment in high-risk infants: a systematic review
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**Background:** Mothers with low socioeconomic backgrounds who give birth to preterm infants are at a greater risk for experiencing a disturbance in the bonding process. Compromised maternal–infant bonding has been shown to negatively affect both the infant and the mother short- and long-term, making it crucial to construct an intervention that is effective and practical.

**Objective:** The goal of this systematic review of the literature was to examine the efficacy and resources of various evidence-based interventions to foster attachment between mothers and their preterm infants.

**Methods:** Data from randomized or quasi-randomized controlled trials of parenting interventions that focused on mothers of preterm infants and reported mother–infant relationship quality outcomes were pooled and assessed. Articles were selected after meeting inclusion criteria from the following databases: CINAHL, PubMed, Web of Science, and PsycINFO. The quality of the different trials was evaluated using the Physiotherapy Evidence Database (PEDro) scale. Resources for each trial were compared in five categories.

**Results:** A total of 13 studies met the inclusion criteria. Five studies found improvement in the quality of mother–infant attachment. Two of the studies that showed improvement also required fewer resources, making them economically reasonable.
**Conclusion:** Interventions to improve attachment between mother and preterm infant that are also resource conscious should focus on mother–infant contact. Longer, more intense interventions with multiple posthospitalization sessions did not seem to improve attachment between mother and preterm infant. An approach focusing on hands-on care between the mother and the infant requiring fewer follow-up visits from health professionals after discharge would be most advantageous for high-risk groups.