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**Title:** Copenhagen Infant Mental Health Project (CIMHP 2015-2017): Effects of Infant Mental Health Screening and Indicated Prevention Approaches – Evidence from a Randomized Control Study.

This paper presents the newly started Copenhagen Infant Mental Health Project (CIMHP 2015-2017): Effects of Infant Mental Health Screening and Indicated Prevention Approaches – Evidence from a Randomized Control Study. The project includes a two year screening period for infant mental health risks, where an estimated 9,000 mothers will be screened for maternal postpartum depression using Edinburgh Postnatal Depression Scale (EPDS) and 9,000 infants will be screened for infant social withdrawal using Alarm Distress Baby Scale (ADBB) during the infants first year of life. 340 families identified to be at risk in the screening procedures are offered Circle of Security-Parenting (COS-P) ($N=157$) or Care as Usual (CAU) ($N=157$). Primary outcome measures will be measured when the child is 12-16 months and include maternal sensitivity, parental reflective functioning, attachment status of the child, child cognitive development and parental report of child social emotional functioning.

**Title:** Effects of Infant Mental Health Screening and COS-P – Evidence from a Danish RCT Study.

**Aims:** One in five Danish families is at risk of inadequate parenting resources and child neglect. The indicated preventive group program *Circle of Security – Parenting* (COS-P) focus on enhancing parental sensitivity and secure attachment and show promising results. We aim to test the feasibility of an infant mental health screening and indicated prevention system and its capacity to (1) detect children at risk of longer term mental health adversaries and (2) alter these risks in a cost effective way in a general population.

**Method:** Over a 20 month period 9,000 infants in Copenhagen will be screened (at 2, 4 and 8 months) using a standardized screening instrument (ADBB) in detecting social withdrawal and 16,000 mothers will be screened (at 2 months) with the Edinburg Postnatal Depression Scale (EPDS). A sample of 326 eligible parent(s) will enter into a clinical, randomized controlled trial to test the efficacy of the COS-P program compared to TAU, in preventing mental health adversities and enhancing attachment security and wellbeing. Primary outcomes will be measured at follow-up at 14 months and include child attachment (SSP), parental reflective functioning (PRFQ-1), child social emotional (ASQ-SE) and cognitive development (Bayley III) and quality of parent-child interaction (CIB).

**Discussion:** If the screening and indicated prevention program COS-P results in better child attachment status, parental reflective functioning, child socioemotional and cognitive development and quality of parent-child interaction better than TAU, this will represent a notable advance to initiating this system as a better infant mental health strategy in Denmark. Conversely, if this system is similar or inferior to the current system, this is also important knowledge in regard to preventing infant mental health risks in a cost effective way in a general population.

**Keywords:**

Infant mental health screening, Circle of security - parenting, randomized controlled trial,