Abstract
Joint attention is often referred to as a triadic relation between self, other and object. Young children with autism show deficiencies in the use of joint attention behaviors. Individual differences may be expected, and they may be determined by the children’s cognitive development or the characteristics of the relationship of the child with the caregiver. Although most joint attention skills develop under the age of three, most studies of joint attention in children with autism involved children older than 3 years of age, due to difficulties in diagnosing autism under this age. In this study we investigated joint attention behaviors of 78 young children (mean age 25.7 months, SD 6.1) with autism spectrum disorders (n=20), other developmental delays (n=18), and typically developing children (n=40). Following the pertinent literature and confirmed by factor analysis, two types of joint attention behaviors were distinguished, Basic Joint Attention (BJA) and Associated Joint Attention (AJA). We found that cognitive delays and autistic symptoms - but not attachment insecurity or disorganization - were related to less joint attention. Already at the age of 2 years, children with more autistic symptoms show less joint attention, even after controlling for developmental level.


Abstract
The link between deprivation and trauma during earliest childhood and psychosocial functioning and health in later life was investigated in a group of child Holocaust survivors. In a nonconvenience sample 203 survivors, born between 1935 and 1944, completed questionnaires on Holocaust survival experience and several inventories on current health, depression, posttraumatic stress, loneliness, and attachment style. Quality of postwar care arrangements and current physical health independently predicted lack of well-being in old age. Loss of parents during the persecution, year of birth of the survivors (being born before or during the war), and memories of the Holocaust did not significantly affect present well-being. Lack of adequate care after the end of World War II is associated with lower well-being of the youngest Holocaust child survivors, even after an intervening period of 60 years. Our study validates Keilson’s (1992) concept of “sequential traumatization,” and points to the importance of aftertrauma care in decreasing the impact of early childhood trauma.


Abstract
This study investigated the interaction of child temperament and maternal discipline in the prediction of externalizing problems in early childhood.
Interaction effects were evaluated in a sample of 227 one- to three-year-old children with relatively high externalizing problems scores on the Child Behavior Checklist/11⁄2–5. Child temperament was reported by the mothers, maternal discipline was observed in a laboratory session, and child outcome measures included both mother-reported externalizing problems and observed physical aggression. Results indicate that children with difficult temperaments are more susceptible to negative discipline (i.e., they showed more externalizing problems) as well as more susceptible to positive discipline (i.e., they showed fewer externalizing problems and less physical aggression), as compared with children with relatively easy temperaments. These findings provide empirical evidence for the differential susceptibility hypothesis and suggest directions for enhancing the effectiveness of interventions aimed at reducing early childhood externalizing problems.


Abstract
This study on sensitivity and attachment included 55 toddlers and their parents. Samples included children with autism spectrum disorder (ASD), mental retardation, language delay, and typical development. Children were diagnosed at 4 years of age. Two years before diagnosis, attachment was assessed with the Strange Situation procedure, and parental sensitivity and child involvement during free play were assessed with the Emotional Availability Scale. Parents of children with ASD were equally sensitive as parents of children without ASD, but their children showed more attachment disorganization and less child involvement. More sensitive parents had more secure children, but only in the group without ASD. Less severe autistic symptoms in the social domain predicted more attachment security. Autism challenges the validity of attachment theory.


Abstract
Attachment was assessed in toddlers with Autistic Disorder (n = 20), Pervasive Developmental Disorder (n = 14), Mental Retardation (n = 12), Language Development Disorder (n = 16), and anon-clinical comparison group (n = 18), using the Strange Situation Procedure (SSP). Children in the clinical groups were more often disorganized and less often securely attached. Severity of autism was associated with more attachment insecurity, and lower developmental level increased the chance for disorganized attachment. Attachment disorganization was related to increased heart rate during the SSP. Controlling for basal cortisol and developmental level, more autistic symptoms predicted lower cortisol responses to the SSP. The findings support the importance of disorganized attachment for children with autism.

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This study on sensitivity and attachment included 55 toddlers and their parents. Samples included children with autism spectrum disorder (ASD), mental retardation, language delay, and typical development. Children were diagnosed at 4 years of age. Two years before diagnosis, attachment was assessed with the Strange Situation procedure, and parental sensitivity and child involvement during free play were assessed with the Emotional Availability Scale. Parents of children with ASD were equally sensitive as parents of children without ASD, but their children showed more attachment disorganization and less child involvement. More sensitive parents had more secure children, but only in the group without ASD. Less severe autistic symptoms in the social domain predicted more attachment security. Autism challenges the validity of attachment theory.


Abstract
Children with Autism Spectrum Disorder (ASD) have severe and pervasive impairments in the development of social interaction, which may affect the attachment relationship with their parents and may have an impact on parenting. In the current investigation 89 families with young children (mean age 26.5 months) were involved, who were diagnosed as ASD, mentally retarded (MR), or language delayed (LD), or part of a non-clinical comparison group. Attachment security was observed with the Brief Attachment Screening Questionnaire, and several parental self-report questionnaires assessed the parenting style, parental efficacy, parental experiences of daily hassles, social support, and psychological problems. Children with ASD were rated as less secure compared to the other clinical and normal comparison groups. Parents of non-clinical children reported higher levels of authoritative parenting than parents in the ASD group and in the total clinical group, and they also received less social support. Parents of children with ASD coped remarkably well with the challenges of raising a child with ASD.


Abstract
This study investigates young children's fright reactions induced by television. The central question concerns the degree to which the impact can be predicted by temperamental fearfulness and the quality of the parent–child relationship. Using a procedure for recording simultaneously skin conductance (SCL) and heart rate variability (RMSSD), 78 3- and 4-year-olds were shown two brief TV film episodes (one fear-inducing and one emotionally neutral). The children responded to fear-inducing film stimuli with an increase in SCL-reactivity and a decrease in RMSSD-reactivity. Furthermore, temperamentally more fearful children showed most electrodermal reactivity when their relationship with the parent was less harmonious. More fearful children were more susceptible to the quality of the
relationship with their parent, which provides support for the differential susceptibility hypothesis.


**Abstract**
This meta-analysis of 172 studies (N = 2,263 anxious, N = 1,768 nonanxious) examined the boundary conditions of threat-related attentional biases in anxiety. Overall, the results show that the bias is reliably demonstrated with different experimental paradigms and under a variety of experimental conditions, but that it is only an effect size of d = 0.45. Although processes requiring conscious perception of threat contribute to the bias, a significant bias is also observed with stimuli outside awareness. The bias is of comparable magnitude across different types of anxious populations (individuals with different clinical disorders, high-anxious nonclinical individuals, anxious children and adults) and is not observed in nonanxious individuals. Empirical and clinical implications as well as future directions for research are discussed.


**Abstract**
Are serious growth delays caused by malnutrition and neglect permanent or reversible? The effects of institutionalization and international adoption on children’s physical growth are estimated with meta-analysis. Studies with sufficient data to compute differences between adoptees and the reference population (33 papers with 122 study outcomes) were collected through Web of Science, ERIC (Education Resource Information Center), PsycINFO (Psychological Literature), and Medline (U.S. National Library of Medicine) (1956–2006). The influence of pre- and postadoption care on height, weight, and head circumference was tested. Effect sizes (d) and confidence intervals (CIs) around the point estimate for the growth lag indices were computed. The more time spent in institutional care, the more the children lagged behind in physical growth (d = 1.71, 95% CI: 0.82–2.60, n = 893). At adoptive placement, the children showed large delays in height, weight, and head circumference (d = -2.39 to -2.60; n = 1331–3753). Although after adoption, they showed almost complete catch-up of height (d = -0.57, 95% CI: -0.87 to -0.27, n = 3437 adoptees) and weight (d = -0.72, 95% CI: -1.04 to -0.39, n = 3259 adoptees), catch-up of head circumference seemed slower and remained incomplete (d = -1.56, 95% CI: -2.27 to -0.85, n = 527). Later age at arrival was related to less complete catch-up of height and weight. International adoption leads to substantial catch-up of height and weight but not of head circumference, demonstrating differential plasticity of children’s physical growth.

Abstract
Do adopted children show lower self-esteem than nonadopted peers, and do transracial adoptees show lower self-esteem than same-race adoptees? Adopted children are hypothesized to be at risk of low self-esteem. They may suffer from the consequences of neglect, abuse, and malnutrition in institutions before adoption. They have to cope with their adoptive status, which often includes difficulties associated with the lack of resemblance to their adoptive parents. Additionally, transracial and international adoptees may feel less integrated into their family, resulting in low self-esteem. In a series of meta-analyses, the authors found, however, no difference in self-esteem between adoptees (N = 10,977) and nonadopted comparisons (N = 33,862) across 88 studies. This was equally true for international, domestic, and transracial adoptees. Across 18 studies including 2,198 adoptees, no differences in self-esteem were found between transracial and same-race adoptees. In contrast, in a small set of 3 studies (N = 300), adoptees showed higher levels of self-esteem than nonadopted, institutionalized children. The authors’ findings may be explained by adoptees’ resilience to overcome early adversity, supported by the large investment of adoptive families. Adoption can be seen as an effective intervention, leading to normative self-esteem.