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## PERCEIVED INFANT DIFFICULT TEMPERAMENT AND MOTHERS PSYCHOLOGICAL DISTRESS

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**Introduction:** A perceived difficult infant temperament has been associated to mothers depressive mood (Beck, 1996; McGrath *et al.*, 2008).

**Objective:** To identify infant difficult temperament dimensions associated to mothers psychological distress.

**Methods:** 103 mothers (M= 31.9 years, SD=4.10; 68% married, 71.7% *primiparae*) filled in the difficult infant temperament questionnaire (DITQ; Macedo *et al.*, 2011), two items of the Brief infant sleep questionnaire (number of infant night wakings, duration of infants wakefulness during the night; Sadeh, 2004), the Beck depression inventory-II (BDI-II; Beck *et al.*, 1996; Coelho *et al.*, 2002) and the Postpartum depression screening scale (PDSS; Beck and Gable, 2000; Pereira *et al.*, 2010) when their babies were 3 months of age. DITQ factor analysis with varimax rotation and reliability analyses suggested 2 temperament dimensions: emotional difficulties (irritable baby, cries excessively, difficult to calm down), F1; sleeping problems (baby who has sleeping problems, gives bad nights, has difficulties falling asleep), F2.

**Results:** DITQ-F1, DITQ-F2 and infants number of night wakings were positively and significantly associated with BDI-II/PDSS total scores. Infants eating problems were not associated with BDI-II or PDSS values. Controlling for mothers severe depressive mood, regression analysis revealed that DITQ F2 was the variable that explained BDI-II total score ( $R^2$ =.081; p=.011). PDSS total score was predicted by DITQ F2 ( $R^2$ =.050; p=.030) and number of infant night wakings ( $R^2$ =.074; p=.010).

**Conclusion:** Infants sleeping problems and infants number of night wakings contribute to mothers psychological distress in postpartum.

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