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**MATERNAL DEPRESSIVE SYMPTOMS AND EARLY DYADIC INTERACTIONS**

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**Introduction.** Maternal depressive risk has been linked to several dysfunctional outcomes. Empirical data indicate that the lack of adequate maternal responses over feeding may affect the quality of the early eating habits of the baby. Such a conclusion, however, is mainly based on cross-sectional research, which does not allow to establish causality.

**Aims.** The aim of the study was to explore in a longitudinal way the link between pre-partum depression and subsequent mother-child feeding interactions.

**Method.** Participants were 64 women who voluntarily agreed to take part in the study. During their 3<sup>rd</sup> trimester of pregnancy, all completed a number of self-report instruments, including the CES–Depression scale (CES-D) and Multidimensional Scale for Perceived Social Support (MSPSS). Seven months after the delivery, mother-child dyads were videotaped during a meal session, and the Feeding Observational Scale (FS) was used so as to rate the quality of the feeding interactions.

**Results.** During pregnancy, the CES-D negatively correlated with the MSPSS,  $r = -.32$ ,  $p = .01$ . For three of the FS scales, the quality of the dyadic feeding interactions at seven months of age of the baby was significantly predicted by the CES-D,  $\beta \geq .30$ ,  $p < .05$ , but not by the MSPSS. In contrast, one of the FS scales was significantly predicted only by the MSPSS,  $\beta = -.29$ ,  $p < .05$ , but not by the CES-D.

**Conclusion.** Clinical screening during pregnancy may help preventing the establishment of early dysfunctional eating behaviors, by identifying early risk factors for dysfunctional feeding interactions.