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ABSTRACT

This study examined the relationship between maternal personality factors, as measured by the Minnesota Multiphasic Personality Inventory (MMPI) and the development of the attachment relationship. The subjects were 45 firstborn 12-month-olds and their mothers. The sample was preponderantly white, middle class, and married. Mothers completed the Depression, Psychopathic Deviate, and Introversion scales of the MMPI and participated in the Ainsworth Strange Situation with their infants. The attachment behaviors of infants were classified as secure (B), insecure-avoidant (A), insecure-ambivalent/resistant (C), or disorganized/disoriented (D). The insecure classifications were collapsed so that attachment was analyzed using only the secure versus insecure dimensions. Findings revealed that mothers of infants classified as secure had higher mean scores than mothers of insecure infants on the scale of Psychopathic Deviate and lower mean scores on the Introversion scale, with no significant difference on the Depression Scale. No mothers scored in the clinical range, and the mean scores did not suggest any psychopathology. Mothers of secure infants admitted to more family problems and described themselves as less introverted than mothers of insecure infants. Mothers of insecure infants showed more denial and increased introversion in comparison to mothers of secure infants. (KDFB)

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Maternal Personality Characteristics on the MMPI and Infant Attachment
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Considerable research exists supporting the role of maternal characteristics such as sensitivity, responsiveness, and appropriately stimulating play on the early attachment behavior of the infant. Furthermore, maternal depression appears to be a significant factor in that relationship because it may influence the mother's psychological availability to the child and her interaction patterns. Less is known of the influence of other maternal personality variables in influencing infant attachment. Investigated in this study was the relationship between maternal personality factors, as measured by the Minnesota Multiphasic Inventory, and the development of the attachment relationship.

Method

Subjects

Subjects were 45 firstborn 12 month old infants (24 boys, 21 girls) and their mothers. The sample was composed of preponderantly white (91%), middle class (Hollingshead four-factor index $M = 54.80$, $SD = 7.95$), married (98%) women.

Procedures and Measures

All mothers were asked to complete the Minnesota Multiphasic Inventory (MMPI). Scales assumed to relate to dimensions of personality that might be important for infant attachment were selected. These scales were Depression (D), Psychopathic Deviate (Pd), and Introversion (Si). Scores on the Depression Scale have been shown to be sensitive reflections of depressed mood. The Psychopathic Deviate Scale contains a number of items related to acceptance-rejection and independence-overprotection in the individual's family of origin and to problems with authority. The Introversion Scale is characterized by the individual's tendency to withdraw from social contacts and to feel insecure or anxious.

Mothers and infants participated in the Ainsworth Strange Situation. The attachment behavior of sample infants was coded according to whether the infant exhibited behavior classified as: secure (B), insecure-avoidant (A), insecure-ambivalent/resistant (C) or disorganized/disoriented (D). Insecure attachment classifications were collapsed so that attachment was analyzed using only the secure versus insecure classifications.

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Results

In order to examine the relation of maternal personality to infant attachment, the standard scores on the three scales assumed to be associated with infant attachment behavior were analyzed using t-tests with attachment classification as the independent variable and personality measures as the independent variables. Mothers of infants classified as secure had higher mean scores than mothers of infants classified as insecure on the scale of Psychopathic Deviance (57.20, SD = 8.43 and 51.60, SD = 6.48, $t(43) = 2.26$, $p < .05$) and lower mean scores on the Introversion Scale (50.03, SD = 7.39 and 55.34, SD = 8.72, $t(43) = 2.10$, $p < .05$). There were no significant differences found on the Depression Scale between mothers of secure versus insecure infants. No mother in either group scored in the clinical range and the mean scores of around 50 obtained by sample mothers were neither too high nor too low to suggest psychopathology. Nevertheless, mothers of secure infants admitted to significantly more family problems and described themselves as less introverted than mothers of insecure infants. In contrast, mothers of insecure infants evidenced more denial and increased introversion.

Discussion

Significant relations between maternal personality and infant attachment were found in this study. Infants who were classified as secure tended to have mothers who were more willing to admit to family problems, particularly in family of origin, and who perceived themselves as more extroverted. Mothers of infants classified as insecure admitted to fewer family problems and described themselves as more introverted. The results of this study are consistent with Main's speculation that mothers of insecure infants often lack memory for unpleasant childhood experiences and idealize their parents. In contrast, mothers of secure infants demonstrate an ability to tolerate and integrate negative affective appraisals into organized responses.

The finding that mothers of insecure infants exhibit more introversion is intriguing given that individuals scoring high on this scale are often described as conservative and self-depreciatory. Low scorers describe themselves as self-confident, independent, cheerful, adaptable, and affectionate. All of these characteristics may be important for fostering

security in the infant. Mothers who are comfortable and secure in the own relationships with others and who are reasonably self-confident may engender these qualities in their offspring; alternatively, mothers who are less outgoing and somewhat self-depreciatory may have more trouble instilling feelings of security in their infants.

Failure to find significant differences in the relationship between attachment and maternal depression was surprising given the evidence for such an effect in clinically depressed populations. This finding suggests that maternal depression must be significant in order for it to have an impact on the infant at one year. Furthermore, whereas defensiveness and introversion may represent more enduring maternal personality characteristics, depressed mood may be a more transient and reflect higher levels of concomitant environmental stressors.

Additionally, the mother's own assessment of her perceived mood state has not been found to relate to the infant's attachment behavior. Thus, the low level of psychopathology in our sample and the self-assessment format of the MMPI may have precluded finding significant differences.



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