Prolonged Breastfeeding and Family Dynamics: An Empirical Research

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Abstract: Several studies indicate that prolonged breastfeeding is associated with a tendency to idealize motherhood, with maternal symbiotic tendencies to defer normal separation process and with a dysfunction of the couple relationship. This empirical study aims to understand the psychological reasons underlying the decision to prolong breastfeeding beyond 12 to 18 months of the child and also to investigate, according to a systemic perspective, as this practice is inserted into the broader context of family dynamics. In particular, it seemed interesting to us to test empirically the hypothesis that a condition of prolonged breastfeeding could be indicative of specific styles of family functioning.

Keywords: breastfeeding, family dynamics, couple's relationship, distress.

1. INTRODUCTION

The transition to parenthood is generally considered a key transition in the life cycle of the family, as it requires the whole family system to field its own resources to meet the new challenges related to child care (McGoldrick, Heiman, Carter, 1995). The entrance of a new generation requires, in fact, a new distribution of the roles and the tasks of all the family members and a process of readjustment of relations and of roles, both marital and intergenerational. In particular, the birth of the first child requires a redefinition of the pair bond, not only in terms of organizational (eg. the division of housework, leisure management, reorganization of work outside the home) but also relational roles: spouses must renegotiate their relationship to include the aspects of parenting (Ahlborg, T., Strandmark, M. 2001) changing their patterns of communication and the methods of managing existing diverging attitudes. The effects caused by the birth of children on the couple's relationship were studied empirically especially through the analysis of the marital satisfaction (Belsky, 1985). Since the eighties many studies have found an association between the presence of children and the deterioration in the quality of the marriage of their parents (especially in the children's early years), which is expressed in a significant decline in marital satisfaction (Belsky, Pensky, 1988; Belsky, J., Lang, M., Rovine, M. 1985; Cowan and Cowan, 1992). In particular, these studies have found that the transition to parenthood seems most likely to affect the lives of wives who report in general higher levels of dissatisfaction (Belsky and Pensky, 1988; Schulz, M.S., Cowan, M.S, Cowan, C.O, Brennan, R.T., 2004). The process of the roles (La Rossa, R., La Rossa, M., 1981) becoming traditional was then considered one of the factors particularly influential on the decline in marital satisfaction after the child birth. The deterioration of the marital satisfaction tends to be connected with an increase of the conflict in the relationship between the bride and the bridegroom, with an increase in the divergence of the way of thinking about marriage and a decrease of paternal involvement (or an increase of maternal involvement) in child care (Levy-Shiff, 1994). An analysis conducted by Olson (Olson, McCubbin et al. 1986) on non-clinical families in order to examine the stresses and the levels of family well-being during the life cycle, highlighted in couples with children, both preschool and school kids, higher levels of distress within the family as compared with what occurs to couples without children or families at the stage of "the empty nest". Feldman (1971) observed an inverse relationship between the levels of satisfaction and the level of separation of roles in the relationship. He makes a distinction between 'cohesive' couples that share many interests and draw a high satisfaction from sharing them and those 'differently endowed' who derive satisfaction mainly from activities and relationships outside of marriage. Assuming that in time children increase the need for cooperation and mutual involvement, the author found in differently endowed couples higher levels of

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satisfaction after the birth of children differently from what happens to the 'differently endowed' parenting couples who can create a crisis of differentiation, increased segregation of roles and then a perception of greater dissatisfaction by the married couples. Other authors highlight the difficulty of the "fusional" couples (characterized by the absence of boundaries between the two partners and the lack of awareness and tolerance of their separateness) in establishing, after the child's birth, a new balance for the couple that is based on the recognition of the child as a diversity entering into their living world. For these couples the child cannot be accepted except in the case of a breaking off of the married couple and the creation of a new pair of a "fusional" parent-child couple (Malagoli Togliatti, Lubrano Lavadera, 2002). Minuchin (1974) underlines the need (especially after the birth of a child) of the presence of a sub-type of marriage of a special sort and with clear boundaries allowing the child to interact with both parents and excluding him, at the same time, from the peculiar functioning of the couple. When children are very young, the mother-children subsystem may tend however to a sort of an entangled relationship while their father may play a detached role with them. It can also happen that their mother and the child can be so entangled as to make the father "peripheral ".Recent studies highlight the possibility of changes in the dynamics of relationships in families in which the mothers practice prolonged breastfeeding; this practice would be associated with a marginal condition of the father, who is a spectator of the close relationship between mother and son, and a dysfunction of the couple relationship (Coslovi, Celestini, Fornarola et al., 1999). Some authors suggest symbiotic tendencies in the mothers who choose to continue breastfeeding beyond 12 to 18 months of the child and other contributions (Farneti, Monti, 1998; Molinari, L., Speltini, G., 1998) focus on the consequences of this practice: a lasting breastfeeding activity means being available to the child for a long time, sacrificing their activity in the world of work, becoming completely "nurturing mothers" and spending less space and time to the life of the couple. Some authors have also found a relationship between prolonged breastfeeding and the reduction of excitement for a sexual activity (Ahlborg, Dahlof, Hallberg, 2005). In line with such reports in literature, it can be assumed that in families in which breastfeeding is extended there is little differentiation between the members of the couple and symbiotic cohesive tendencies particularly present in mothers. In these families prolonged breastfeeding would tend to defer the separation process between mother and child and to disguise a latent marital dissatisfaction of wives. It is 'possible that these couples poorly differentiated have not been able to deal with the change related to the transition to parenthood in an adaptive way, reorganizing themselves in new roles and integrated functions and adjusting the distances; in the search for a new balance, these families would still move chaotically in relationship models poorly defined and integrated.

2. МЕТНОD

The research design used in the following study is based on the not equivalent control group, as the subjects are not randomly assigned to the two groups, but based on existing features. The independent variable considered is the presence / absence in the family of a child breastfed beyond 15 months. The independent variable considered is the function of the couple. In this study, for the collection of the data a self-report test was used FACES III, which was administered to both members of the couple in a joint situation. The scores thus obtained were analyzed by calculating descriptive statistics such as mean and standard deviation. The central hypothesis of the Circumflex Model contrasts balanced families and the extreme ones and identifies 16 different types of family functioning for which, for the analysis of the data collected with the Faces III, recourse was made to a comparison between the number of cases that fall into the various categories. Preliminarily, it was therefore necessary to know the frequency with which the individual scores are presented in each of the 16 cells of the model and for this purpose contingency tables have been established by defining for Cohesion and Adaptability four different levels based on the cutting points provided by the manual of Faces III. Since from Faces III scores on a scale reports are obtained for the dimensions considered (real cohesion, ideal cohesion , real adaptability, ideal adaptability and family satisfaction) reports could be applied on a scale and also parametric statistics such as analysis of variance to compare values of the averages of two or more levels of a factor or independent variable. In this study to evaluate the differences between the averages of the two groups (experimental and control group) and then between the averages of the two sexes in each group in the expected dimensions of the model a one way ANOVA was carried out. To verify the possible co-variation between the dimensions specified in the model and sociodemographic aspects such as the duration of marriage and age of the children, a correlative analysis was also conducted by making use of the coefficient r of Pearson.

2.1. Sample

The following study was attended by 45 couples with young children for a total of 90 subjects. They have been selected and included in the experimental group families in which there was a child at least 15 months still breastfed by the mother at the time of the survey (22 pairs), while the control group was made up of families with children who had been weaned within the first year of life (23 pairs). The families come from different Italian regions. Both samples were matched by age, sex and level of education and socio-economic, but are not equivalent samples since the subjects are not randomly assigned to two research groups but have been assigned on the basis of pre-existing characteristics (the presence / absence of breastfeeding beyond 15 months). The age in the total sample is between 26 and 46; the average age of the mothers in the experimental group was 33.3 years, while that of fathers is 35.8 years; always in this group the average age of children was 27.7 months. In the control group mothers have an average age of 31.3 years, 34.5 years for fathers and children 24.4 months. All couples are regularly married; the average duration of marriage for couples of the experimental group is 6.4 years, while those for the control group is 5 years. The level of education of the total sample is distributed among four categories of educational qualifications; on the whole, the families have an average level of education: only 1.11% of the subjects stopped to compulsory schooling compared with 45.5% who had got a high school diploma. Only 20 out of 90 subjects have a have a degree.

2.2. Instruments

The research design involves the use of a test to investigate the functioning of the couple: the *Family* Adaptability and Cohesion Evaluation Scales (FACES III, 1985). It is a self-report instrument framed in the theoretical framework of the Olson's Circumflex Model (Olson, Russel Sprenkle, 1983) and was developed by Olson and co-workers to measure both the "normal" and "problematic" family functioning by evaluating adaptability and family cohesion; this model offers the possibility that, in both clinical and research, to develop a classification of families in 16 specific types of functioning, related in turn to the three major ranks : "balanced", "intermediate" "extreme". The FACES III instrument is offered in both the real (real family) and in the ideal version (ideal family) and can be administered either alone or with a couple in a joint situation. The discrepancy between the scores of the ideal and real version of the instrument achieves a measure of marital and family satisfaction. The subjects are asked what they deem appropriate (to describe their couple) in the statements contained in the self-report, because they could graduate them in five modes of response (from almost never to almost always). The task is characterized as self-reflective and presupposes an identity couple. Of the twenty items that make up the scale, ten measure the degree of Cohesion and ten measure the level of Adaptability . The Cohesion factor is divided into aspects of mutual support, the sense of unity and emotional closeness, cooperation, friendships and common interests, to the sense and the value of being a "couple". The adaptability factor concerns aspects of negotiation of problems, tolerance of differences, alternation of leadership, commitments and domestic responsibilities, the flexibility of the rules of the relationship. The sum of the raw scores expressed on each item provides a final score of cohesion and one of Adaptability, both for the real version and the ideal one. The discrepancy between the real family and the ideal family provides a direct measure of the family dissatisfaction that is an indirect measure (inverse) of family satisfaction. The reliability, internal consistency and test-retest reliability of the test were considered "generally good" and its validity is very satisfactory (Olson, 1986).

3. RESULTS

The analysis of data obtained by the FACES III was carried out on the entire sample by calculating the averages and standard deviations of the scores obtained from 90 subjects in various dimensions. Based on the data in the tables it is possible to detect some differences between the average scores of the two groups in the dimensions considered: in the dimension of Real Cohesion women in the experimental group obtained higher mean scores (Men M = 38.86, SD = 7,542; Women M = 40, SD = 5.855) than men in the same group. In the dimension Adaptability (F = 1.803; NS) control group has a higher average score (EG M = 33.16 DS 6.637, DS 5.742; CG M = 34.91) than the experimental group. Taking into account the differences between husbands and wives within each group seems interesting to note, in the experimental group, the difference in the average score of discrepancy (or family Satisfaction) between men and women (men M = 6.18 DS 15,423; women M = 10.45 DS

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13.476) which shows a tendency of women in the experimental group to be more dissatisfied than men. The subsequent phase of analysis of the data obtained with the FACES III is based on the premise of a substantial and direct connection between this instrument and the Circumflex Model (Figure. 1), both based on the same dimensions, Cohesion and Adaptability. At the center of this connection the hypothesis is placed that there is a curvilinear relationship between Cohesion, Adaptability and Family Functioning. It is assumed, therefore, a better functioning of the families balanced, the central four types of the model, compared to the types that have extreme mode of functioning for both dimensions. Given this hypothesis you can carry out double analysis on scores (averages) and on the categories of functioning and the type of relationship (frequencies). Olson (1986) recommends as the appropriate chi-square statistic, but to make such an analysis requires a good numerosity within each category studied and for this reason this work has not been possible to carry out in this research. Given these premises, according to the cutting points suggested by Olson, were categorized the scores obtained by the subjects in the two dimensions and starting from those we proceeded to discriminate the types of functioning of the couple and the level of satisfaction in the couple. By examining the data available from the table 1 and 2 on the type of couple's functioning it is possible to highlight that the distribution of frequencies in the extreme typology within the experimental group was higher than that of control. The couples in the experimental group that fall in category "extreme" in fact represent 27.2% of the total of this group, while this percentage decreases to 13% in the control group. Still in the experimental group the percentage of "balanced" couples is found to be to 4.5% compared with a 12.9% of pairs of the control group falling under the same category. The frequency distribution of the type "intermediate" is more homogeneous in the two groups (68.1% in the experimental group and 73.9% in control group). The histogram in Figure 2 briefly illustrate the qualitative differences between the two groups emerged so far described. As regards the subdivision more analytical in 16 types of family functioning resulting from the intersection of the two main dimensions predicted by the Circumflex Model (Cohesion and Adaptability), it is observed once again, between the two groups taken into consideration, a difference in the distribution of frequencies of the various types of family functioning. Is interesting to note the absence, in the control group, of couples that are placed on the side of the disengagement; within the experimental group, however, this typology is variously represented and in the complex reaches a frequency of 22.7%. In the experimental group the typology enmeshed / chaotic has a stronger presence, reaching a rate of 18.2% versus 13% observed in couples in the control group. Considered the experimental group and the control group, there is a statistically significant differences for some of the expected dimensions of the model of family functioning. It is possible to analyze in detail the results of the comparison between the means of the experimental group and control: in the dimension of the Real Cohesion we can note a statistically significant difference between the average scores of the two groups (F = 4.780; p < 0.031) with an average score higher in the control group (M = 42.00) DS 4.222) compared to the experimental group (M = 39.43 DS 6.697). The difference between the Scores of Discrepancy (or Family Satisfaction) between the two groups considered reaching statistical significance (F = 5.121; p < 0.026) and observing the medium is detected an Average score of discrepancy higher in couples in the experimental group (M = 8, 32 SD = 14.475) compared to controls (M = 2, 37 SD = 10.184) which, according to the model, would denote a level of marital dissatisfaction highest in the pairs of the experimental group. Comparisons between the average scores of men and women (within each group) in the various dimensions highlight a statistically significant difference in the experimental group, between the average scores in the dimension of Ideal adaptability (F = 0.047; p < 0.047) presenting women of this group a higher average score (M = 40.68, SD = 5.037) than men (M = 36.50: DS = 8.146). The correlational analysis carried out in order to verify the possible relationship between the dimensions specified in the model and socio-demographic aspects such as the duration of marriage and age of the children, gave the following results: in the experimental group emerges a linear negative relationship between the scores of Family Satisfaction and children's age (r = -0.462), which reveals a decrease in family satisfaction with increasing age of the children. In the control group, instead, there was a statistically significant relationship between the duration of the marriage and the Family Satisfaction score (r = 0.44), indicating that increasing the length of the marriage at the same time increases marital satisfaction. From a descriptive point of view, we can note in the experimental group also a relationship (r = 0.342, NS) between duration of marriage and the scores in Family Satisfaction suggesting a decrease in marital satisfaction with increasing duration of marriage.

4. FIGURES AND TABLES

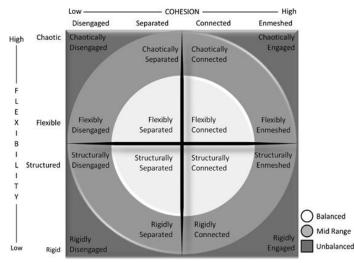


Fig1. Circumplex Model: couple and family map

Table1. Mean Scores in experimental group and control group in the dimensions Cohesion and Adaptability

Group	Role in the couple		Mean	Std. Deviation
Experimental	Husbands	Real Cohesion	38,86	7,542
		Ideal Cohesion	41,50	6,545
		Real Adaptability	32,95	6,814
		Ideal Adaptability	36,50	8,146
	Wives	Real Cohesion	40,00	5,855
		Ideal Cohesion	43,14	5,111
		Real Adaptability	33,36	6,608
		Ideal Adaptability	40,68	8,146
Control	Husband	Real Cohesion	41,52	4,166
		Ideal Cohesion	41,70	5,049
		Real Adaptability	35,04	5,904
		Ideal Adaptability	35,78	6,715
	Wives	Real Cohesion	42,48	4,316
		Ideal Cohesion	43,35	6,110
		Real Adaptability	34,78	5,705
		Ideal Adaptability	37,74	7,306

Table2. Typology of functioning in the two groups.

Group	Family Typology	Frequencies	Percentual
Experimental	Extreme	6	27,2
	Intermediate	15	68,1
	Balanced	1	4,5
Control	Extreme	3	13,0
	Intermediate	17	73,9
	Balanced	3	12,9

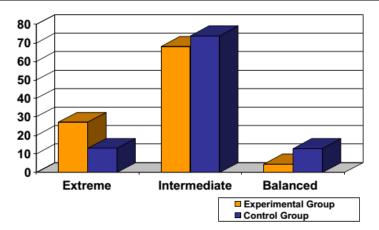


Fig2. Percentual of the three typology of family (extreme, intermediate, balanced) in the two groups

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ANOVA Table									
		Sum of Squares	df	Mean Square	F	Sig.			
Real Cohesion* Gruppo	Between Groups (Combined)	148,327	1	148,327	4,780	,031			
	Within Groups	2730,795	88	31,032					
	Total	2879,122	89						
Real Adaptability	Between Groups (Combined)	69,184	1	69,184	1,803	,183			
	Within Groups	3377,539	88	38,381					
	Total	3446,722	89						
Ideal Cohesion*	Between Groups (Combined)	,932	1	,932	,028	,867			
	Within Groups	2891,024	88	32,853					
	Total	2891,956	89						
Ideal Adaptability*	Between Groups (Combined)	75,316	1	75,316	1,531	,219			
	Within Groups	4329,006	88	49,193					
	Total	4404,322	89						
Score o of discrepance	Between Groups (Combined)	795,793	1	795,793	5,121	,026			
	Within Groups	13676,263	88	155,412					
	Total	14472,056	89						
Family Satisfaction	Between Groups (Combined)	795,793	1	795,793	5,121	,026			
	Within Groups	13676,263	88	155,412					
	Total	14472,056	89						
Distance from the centre	Between Groups (Combined)	62,652	1	62,652	1,824	,180			
	Within Groups	3022,437	88	34,346					
Of model	Total	3085,089	89						

5. CONCLUSION

The aims of this study were to compare, with regard to some crucial dimensions of family functioning, the perceptions of couples where mothers prolonged breastfeeding beyond 15 months with those of couples in which the mothers had instead weaned the child within a year of the child's life. Attention has been focused on some variables considered in the Model of Family functioning proposed by Olson, fundamental indicators of quality of pair bonding: Family Satisfaction, Family Cohesion and Adaptability. As assumed in the extreme area of Circumflex Model we have found more families with prolonged breastfeeding mothers (27.2%) than families where the child had been regularly weaned (13%). Conversely, in the balanced area of the model we find more couples with son regularly weaned (12.9%) that couples with prolonged breastfeeding mothers (4.5%). A fundamental hypothesis derived from the model is that balanced couples have a better functioning of Extreme one; this hypothesis, then verified empirically, is based on the assumption that extreme families in both dimensions tend to have more difficulty functioning during the life cycle. The findings from our study related to family modeling, even if it requires more empirical support, highlight in families with prolonged breastfeeding mothers a greater tendency to be located at the ends of the axes and then to have more difficulty adapting to the different circumstances of their life cycle. These families have a combination of low / high Cohesion with low / high Adaptability. In particular, it seems possible to assume that couples in the experimental group placed in the extreme typology enmeshed / chaotic (18.2%) presenting a little differentiation between the spouses and symbiotic cohesive tendencies that would also extend to the child and that would justify the use of prolonged breastfeeding. These couples "chaotic" along the adaptability dimension also could have managed with difficulty the transition to parenthood linked with the individual and relational changes occurring; the prolongation of breastfeeding could play in these families the function to defer the separation process and the new changes that weaning and the empowerment of the child determine both within the mother-son dyad and in the couple. For couples in the group with prolonged breastfeeding mothers which fall along the end of the disengagement (22.7%) we can instead imagine a situation of emotional distance before or after the birth of the child and an inability of spouses to contact one another for help or comfort in times of stress or discomfort. The presence of the child and the necessary investment of time and energy that his care giving implies might have led to or further increased the distance between the spouses, pushing the mother for greater involvement in the parental role that could be expressed in the practice of prolonged breastfeeding. There is now a wide consensus that the presence of children (especially a few years) to be associated with a deterioration in the quality of marriage, which is expressed in a worsening of marital satisfaction in many new parents (Belsky, Pensky, 1988; Kelly Belsky, 1994; Belsky, Spanier, Ruins 1983; Cowan, Cowan, 2000; etc.); this decrease of marital satisfaction also tends to be correlated with an increase of conflict in the relationship of the spouses, with an increase of divergence on how to conceive their marriage and a decrease of paternal involvement (or an increase of maternal involvement) in the care of the child (Levy-Shiff, 1994). Based on the data provided by the literature, it has been hypothesized that couples in which the child is breast-fed for a prolonged period of time could be more sensitive to

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stress caused by changes in the marital relationship that the birth and care of the child involved. The analysis of the data showed, in fact, levels of marital dissatisfaction significantly higher in couples in the group with prolonged breastfeeding mothers compared to control; it was also confirmed, according to a large part of the literature (and Pensky Belsky, 1988; Cowan and Cowan, 2000; etc) that women show, at this stage of the life cycle, lower levels of marital satisfaction than men; the difference between husbands and wives is more pronounced, although not statistically significant, in the group with prolonged breastfeeding mothers compared with the control group. We can assume that mothers who experiment higher levels of dissatisfaction in the relationship with the spouse, resulting from the perception of an emotional distance with partners or by an inability of the spouses to keep feeding and of the symbiotic relationship with the child that it implies. In the case of couples characterized by the absence of boundaries and the lack of awareness and tolerance of separateness (enmeshed) in fact the child will not be accepted unless in the presence of a fracture in the married couple to recreate a new fusional parent-child pair (Malagoli Togliatti, Lubrano Lavadera, 2002). While thus prolonged breastfeeding proposes that dimension of fusion again, which was always present and desired in these couples, on the side of the relationship, this practice could consolidate marital dissatisfaction and conflict between spouses. You may also think that in the couple of experimental group which fall on the side of the disengagement that conflict is more latent and exacerbated. The members of these families would show, in breastfeeding could be considered as a "strategy", practiced by these mothers to make up for the emotional void and a lack of empathy and responsiveness of the partner. It 'also interesting to note how men and women in the experimental group differ significantly in mean scores of Ideal Adaptability. This dimension refers to the «ability of a family or couple to change their power structures, the roles, the relational rules in response to situations of development and stress» (Olson, McCubbin, 1983, p.62). The transition to parenthood is generally considered one of the most stressful events that people have to deal with (Coffman et al., 1991; Coffman, Levitt, Guachi-Franco, 1993; Hopkins, Marcus Campbell, 1984; etc.) and the process of "traditionalisation" of the roles (La Rossa, 1981) that follows this transition is considered a factor affecting the decline in marital satisfaction. The discrepancy between men and women in the dimension Ideal Adaptability would seem to indicate a latent discomfort in prolonged breastfeeding women regarding the division of roles and functions and the structuring of new kinds of relationship between the couple. We can assume that prolonged breastfeeding mothers wish more emotional closeness with the spouse, a more attentive and responsive attitude of the partner with respect to the new needs of the mother-child and a greater involvement in the care of his son. These desires, especially with regard to the pairs of experimental sample resulted disengaged, tend not to find expression and acceptance and to exacerbate the latent conflict between spouses. Tendencies to the denial of the conflict, the refusal to recognize the discomfort and non-sharing of experience in this typology of families could also have had an impact also on the identification itself of this typology in our study. The percentage of families positioned in the extreme area of the model may have been also underestimated due to the social desirability factor. The results of the correlational analysis are in line with the data and the hyphotesis considered so far. Couples with prolonged breastfeeding mothers experience indeed less marital satisfaction with increasing age of the children. In couples with children regularly weaned it is observed as increasing duration of marriage at the same time increases marital satisfaction. These couples probably have managed to overcome more adaptive the transition to parenthood, have better handled the changes in the marital relationship that the birth and baby care implies and after weaning of the little they have been able to recreate a dynamic balance based on the flexibility of the roles and the functions, interchange and communication.

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