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Less adaptive coping strategies and feelings of shame characterize infertile couples, especially the male partners. However, no differences emerged on emotion dysregulation. Future studies with a larger sample are needed to confirm and deepen the role of emotion dysregulation in infertile couples.

PARENTAL PRENATAL ATTACHMENT: THE ROLE OF INDIVIDUAL AND RELATIONAL VARIABLES

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Mothers and fathers interact differently with the developing fetus but evidence for these differences is contradictory (Ustunsoz et al, 2010). It's important to recognise the factors influencing Parental Fetal Attachment because of the effects on the development of the infant. We aimed to shed light on the role of key individual and relational variables on the development of maternal (MFA) compared to paternal fetal-attachment (PFA). 80 couples (16-37 weeks of gestation) participated in the study: 97.5% common-law spouses/married; 89% expecting their first child. The average age was: 34,54 years (SD=4.36) for women, 36.78 years (SD=4.95) for men. Each partner completed a battery comprising socio-demographic information and measures of prenatal attachment (MAAS/ PAAS, Condon, 1993; PAI, Müller, 1993), romantic attachment (ECR-R, Fraley et al, 2000), dyadic adjustment (DAS, Spanier, 1976), parental caregiving (PBI, Parker et al, 1979), social support (MSPSS, Zimet et al, 1988). MFA>PFA ($t=4.46$, $df=153$, $p=.00$). Nulliparous women scored significantly higher ($F=5.22$, $p=.02$) than multiparous counterparts in prenatal attachment. MFA and PFA scores decreased with increasing age of expecting parents ($r=-.27$ and $r=-.30$; $p<.05$, respectively). PFA increased with increasing of care in paternal caregiving style ($r=.25$; $p=.05$) and dyadic adjustment ($r=.35$; $p=.01$), while decreased with increasing attachment-related avoidance ($r=-.24$; $p=.05$). MFA increased with increasing of social support ($r=.35$; $p=.01$). Romantic attachment style influenced dyadic adjustment for both women and men: the

DAS scores of Secure individuals were significantly higher than those of Insecure individuals (women: $t=2.16$, $df=74$, $p=.03$; men: $t=3.81$, $df=74$, $p=.00$). These results emphasise the importance of evaluating the pregnant woman and her partner together when assessing attachment to the fetus for the psychosocial development of the child and to increase the harmony of the couple.

**ADOPTIVE PARENTING IN ADOLESCENCE:
CHILDREN'S ATTACHMENT REPRESENTATIONS AND
EMOTION AND BEHAVIOR PROBLEMS REPORTED BY THEIR
MOTHERS**

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Adoptive parents often face particular challenges related to the characteristics of children put up for adoption, such as older age at placement, severely negative pre-adoption experiences, social/emotional/behavioral and attachment-related problems. Moreover adolescence of late-adoptees can become an exhausting and struggling life cycle stage in adoptive families. This study is aimed at testing whether late-adopted with secure and coherent attachment representations will be assessed as having less emotion and behavior problems by their adoptive mothers. Our pilot-study involved 75 participants: 30 adoptive mothers and their 45 late-adopted adolescents (age range: 12-16), who were placed after 4 years. Attachment representations of adopted adolescents were assessed by the *Friend and Family Interview* (FFI), while adoptive mothers' evaluation of their children emotional and behavioral problems was measured by the *Child Behavior Checklist* (CBCL, 6-18). The distribution of late-adopted adolescents' attachment representations by the FFI was: 66% secure, 27% dismissing and 7% preoccupied. None of them was classified as disorganized. At the global level, less than 10% ($n=4$) of the late-adopted