

Attachment and Depression Across the Transition to Parenthood

Social Policy Implications

Jeffrey A. Simpson, W. Steven Rholes, and Sandra Shallcross

The transition to parenthood is one of the happiest, most stressful, and most life-altering events that most people ever experience (Cowan & Cowan, 2000; Heinicke, 1995). For many partners, having a child predicts eventual declines in marital quality (Belsky, Lang, & Rovine, 1985; Cowan, Cowan, Heming, Coysh, Curtis-Boles, & Boles, 1985) and personal well-being (Alexander, Feeney, Hohaus, & Noller, 2001; Feeney, Hohaus, Noller, & Alexander, 2001; Simpson, Rholes, Campbell, Tran, & Wilson, 2003). Some partners, however, report no declines or actual improvements (Cowan & Cowan, 2000; Tucker & Aron, 1993). Thus, individuals differ in how well they weather the trials and tribulations of having a first baby. Who are the more “vulnerable” individuals? What has happened or is happening in their personal lives and relationships that might explain these negative outcomes? And how can answers to these questions inform policy making to improve the health and well-being of new parents going through transition to parenthood?

For the past decade, we have studied how couples navigate the opening months of the transition to parenthood. Guided by attachment theory (Bowlby, 1969, 1973, 1980), we have adopted a diathesis-stress approach to understanding how and why certain people who encounter specific *stressors* experience increases in depressive symptoms across the transition. Our research has focused on the first 6 months of the transition when the stress of being a new parent is strong and chronic, the novelty of this new life role has begun to

