

# Is infant crying in the ear of the beholder?

Examining the relationship between mothers' perceptions of daily infant crying and maternal depression

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#### Accessing daily activity



Motion, physiology

### Contraction of the second second

#### Continuous audio





#### **Accessing daily activity**





Mood, social support, self-competence, stress, depression, anxiety



#### **Accessing daily activity**





Mood, social support, self-competence, stress, depression, anxiety



#### **Mother-infant dynamics**

- Synchrony
- Play
- Patterns of interaction
- Maternal response to distress
- Maternal sensitivity

Do moms with depression exhibit less physiological synchrony with their infants?

Is there a relationship between mother and infant sleep and their patterns of interaction?

Individual differences in mother's sensitivity to infant distress?





### **Objectives**

- Infants of mothers with depression cry more than infants of mothers without depression (Milgrom, 1995; de Werth et al., 2003; Van der Wal et al., 2007; Field et al., 2007)
- Mothers with depression report more negative behaviors in their children compared to teachers or clinicians (Mcgrath, Records, & Rice, 2008; Briggs-Gowan et al., 2003)

Do mothers with more depressive symptoms have infants that cry more, or do mothers with more depressive symptoms over-report their infant's crying?

## Participants N = 42

Infant Age (weeks)	20.7 (11.5)
Male	52%
Maternal Age (years)	31.2 (4.2)
Race Caucasian More than one	59% 34%
Education Graduate School College High School	47% 37% 16%
Employment Full time Not out of home	44% 42%





#### Measures

- Edinburgh Postnatal Depression Scale (EPDS)
- LENA audio recorder worn in vest for 23.5 (1.7) hours
- Infant crying per day

**Parent-reported:** average of estimated minutes crying per day for the past 3 days

**Audio-detected:** within the same week, minutes crying per day normalized to 24 hours for all participants

- Automatically extracted from LENA software (0.37 kappa, 0.52 correlation; >80% reliable coders)
- Kernel density estimation using 'cry' and 'vocalization' features from LENA (0.49 kappa, 0.85 correlation; >80% reliable coders)



#### **Measures**

- Edinburgh Postnatal Depression Scale (EPDS)
- LENA audio recorder worn in vest for 23.5 (1.7) hours
- Infant crying per day **Difference Score:**

Parent-reported<br/>mins crying/dayAudio-detected<br/>mins crying/day



#### **Difference Score x EPDS**



#### **Multilevel Modeling**



**Positive Affect (PA)**: 45% variance is within participants; 55% between participants



**Negative Affect (NA):** 43% variance is within participants; 57% between participants

- Objective infant crying (time-locked to EMA responses throughout the day)
- Objective hours of mother and infant sleep last night
- Subjective social support mother received today



#### Infant crying time-locked to EMAs

	Occasion level		<i>p</i> -value
	Crying past 10 minutes	-0.0017	0.222
	Crying past 30 minutes	-0.0574	0.0785
	Crying past 1 hour	-0.0247	0.215
Posi tive	Crying past 3 hours	0.0050	0.568
Affe ct	Person level		
or	Degree of crying past 10 minutes	-0.6096	0.0514
	Degree of crying past 30 minutes	-0.0452	0.797
	Degree of crying past 1 hour	-0.0794	0.568
	Degree of crying past 3 hours	-0.1069	0.19





#### Hours of sleep last night

Dee	Occasion level		<i>p</i> -value
	Mother sleep quality	0.1522	0.0033
itive	Infant sleep quality	0.05756	0.0461
Affe ct	Person level		
	Mother sleep quality	-0.07057	0.397
	Infant sleep quality	0.08950	0.282





#### Hours of sleep last night

Pos itive Affe ct	Occasion level		<i>p</i> -value
	Mother sleep quality	0.1522	0.0033
	Infant sleep quality	0.05756	0.0461
	Person level		
	Mother sleep quality	-0.07057	0.397
	Infant sleep quality	0.08950	0.282
Ne gati ve Affe ct	Occasion level		
	Mother sleep quality	-0.13124	0.00487
	Infant sleep quality	-0.02319	0.37
	Person level		
	Mother sleep quality	-0.02491	0.8473
	Infant sleep quality	-0.2176	0.0848





#### **Social support today**

Pos itive Affe ct	Occasion level		<i>p</i> -value
	Social support	0.0945	< 0.001
	Person level		
	Social support	0.2345	0.0304



Social support (Occasion level)



### **Social support today**

Pos itive Affe ct	Occasion level		<i>p</i> -value
	Social support	0.0945	< 0.001
	Person level		
	Social support	0.2345	0.0304
Ne gati ve Affe ct	Occasion level		
	Social support	-0.0677	< 0.001
	Person level		
	Social support	-0.1824	0.11



Social support (Occasion level)



#### **Discussion**

- Mothers with more depressive symptoms are not systematically biased in their over- or under-reporting of their infant's crying
- More crying 10 minutes before an EMA reduces PA (between), but not for crying 30 minutes, 1 hour, or 3 hours prior to an EMA
- More mother and infant sleep improve PA (within)
- More mother sleep reduces NA (within)
- More social support improves PA (between/within) and reduces NA (within)
- Methodological considerations
  - Timescales
  - State vs Trait
  - Contextual input is critical



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### **Questions?**

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#### extra slides



#### **Results**





#### Age x LENA minutes crying per day



Age (weeks)

## Age x Parent-reported minutes crying per day

**TEXAS** 



Age (weeks)



#### **EMA Anxiety x Diff Score**



#### 

# Difference scores (parent-reported - LENA minutes crying per day)

Difference Score (15 min bins)



#### TEXAS

## Between-day crying variability (in minutes) for participants with multiple 24h recordings













#### **PSS-4 Stress x Diff Score**





#### **Parenting Self-Efficacy x Diff Score**





#### **Social Support x Diff Score**





#### PA x Diff Score





#### NA x Diff Score





#### **PSQI Sleep Quality x Diff Score**





#### **PSQI Sleep Quality x Infant Age (weeks)**

