

ADULT ROMANTIC ATTACHMENT AND RELATIONAL CORRELATES IN MOTHERS AND PARENTAL DYADS RAISING YOUNG CHILDREN: VALIDATION, SHORT FORM DEVELOPMENT AND APPLICATIONS OF THE HUNGARIAN ECR-R

PhD thesis

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1. INTRODUCTION

1.1. Attachment Theory

Attachment theory has become one of the most influential frameworks for understanding socio-emotional development, affect regulation, interpersonal functioning, and psychopathology across the lifespan. Originally developed by John Bowlby (1969/1982), attachment theory integrates insights from ethology, developmental psychology, psychoanalysis, learning theory, and systems theory. Bowlby proposed that humans possess an innate biobehavioral attachment system that motivates proximity-seeking toward significant others in times of distress, and enables exploration when a secure bond is established.

Early attachment experiences with caregivers are internalized as internal working models that guide expectations about the self and others in emotionally meaningful relationships (Bowlby, 1973). When caregivers are responsive and predictable, secure attachment develops, allowing the individual to use attachment figures as a safe haven and secure base. In contrast, inconsistent, rejecting, or intrusive caregiving gives rise to secondary attachment strategies: deactivation of the attachment system (attachment avoidance) or hyperactivation (attachment anxiety). These strategies shape emotional regulation and interpersonal behavior throughout the lifespan.

Although attachment theory originally focused on infant–caregiver relationships, research since the mid-1980s has extended the framework to adult romantic relationships (Hazan & Shaver, 1987). In adulthood, attachment representations are expressed in symmetrical relationships and are commonly conceptualized along two dimensions: *avoidance*, reflecting discomfort with closeness and dependence, and *anxiety*, reflecting fear of abandonment and excessive need for reassurance.

1.2. The Transition to Parenthood and Early Parenthood

This dissertation investigates relational functioning in the early childrearing stage of the family life cycle from an inherently systemic and attachment-oriented perspective. The preparation and adjustment to the accommodation of children is a major developmental milestone and the second stage in the life of a family (Duvall, 1957). It is considered as part of the transition to parenthood (TtP), a period of heightened vulnerability for romantic relationships during which attachment representations are activated due to chronic stress and the reactivation of childhood caregiving memories.

From a systemic perspective, the TtP involves a transformation of the family from a dyadic to a triadic system, requiring substantial reorganization of roles, boundaries, and interaction patterns. According to family systems theory (Minuchin, 1974; Cowan & Cowan, 2012), changes in one domain of family functioning reverberate throughout the system, and the family must establish a new equilibrium through second-order change.

Longitudinal studies consistently show a decline in relationship satisfaction following the birth of the first child. However, this decline is not uniform: while many couples show resilience or recovery, a minority experience sharp deterioration. Attachment insecurity has been associated with steeper declines in satisfaction, and more broadly with creating vulnerabilities that undermine a couple's ability to adapt to both individual and relational stressors (Kluwer, 2010).

This dissertation focuses on four major interpersonal domains of relational functioning during the early childrearing stage of the TtP—coparenting, partner support, satisfaction with workload distribution, and couple conflict—examining their relationships with attachment dimensions.

1.3. Dyadic Dynamics

Attachment theory emphasizes that relationship outcomes are shaped by both partners. Attachment dimensions may already play a role in partner choice. It appears that individuals prefer partners with similar or more secure attachment orientations (Strauss et al., 2012). Systems theory and dyadic attachment research suggest that partners' attachment orientations interact to influence relational functioning. Specific attachment pairings (e.g., anxious-anxious, secure-anxious, etc.) show distinct dynamics; however, the impact of attachment similarity versus dissimilarity on relationship functioning is still unclear, given the limited number of studies and mixed findings.

1.4. Interventions

Preventive and therapeutic interventions during the TtP increasingly emphasize couple-based approaches. While most psychoeducational programs focus on communication and parenting skills, attachment-based interventions are less common. Emotionally Focused Therapy (EFT) and EFT-based relationship enhancement programs, such as Hold Me Tight®, directly target attachment processes by facilitating corrective emotional experiences and promoting secure bonding. EFT has demonstrated efficacy in reducing attachment insecurity and improving relationship satisfaction, although its application to early parenthood remains limited.

1.5. Measurement

The empirical assessment of adult romantic attachment is predominantly based on self-report measures. The Experiences in Close Relationships-Revised (ECR-R; Fraley, 2000) is one of the most widely used instruments, assessing attachment avoidance and anxiety on two continuous dimensions, with strong psychometric properties. There is also a growing number of short forms of the ECR-R that have been developed to facilitate large-scale research and clinical applications.

2. OBJECTIVES

The primary aim of this dissertation is to demonstrate the significance and utility of the validated Hungarian version of the self-report Experiences in Close Relationships—Revised questionnaire (ECR-R-HU) and its short form (ECR-R-HU-SF)—for assessing adult romantic attachment representations. They are not only valuable instruments in attachment research, but are also practical tools for screening and evaluating therapeutic outcomes in clinical practice with individuals and couples across the life course. This dissertation places special emphasis on mothers and parents raising young children.

To achieve this, the dissertation is structured around four core objectives:

- 1) ***Validation and development of tools for measuring adult romantic attachment:*** The ECR-R-HU and the ECR-R-HU-SF (Dupont et al., 2022, 2024; 2025).
- 2) ***Relational correlates and modeling:*** The uniqueness of this dissertation is that it presents its applied use on a large sociodemographically diverse sample of mothers. It aims to identify four attachment profile groups of mothers based on the continuous ECR-R-HU-SF subscale 75th percentile thresholds: (1) relatively secure (2) predominantly anxious, (3) predominantly avoidant, and (4) predominantly disorganized. These groups are then compared across several relational correlates (partner support, felt security, relationship satisfaction, satisfaction with distribution of workload, coparenting), relationship instability and conflict behavior. It also aims to develop a comprehensive structural equation model of relational functioning during this sensitive life stage, in which ECR-R-HU-SF subscales are drivers of relationship instability.
- 3) ***Dyadic analysis of parents:*** The focus finally shifts to a dyadic subsample of parents with young children, investigating attachment pairings in enduring romantic parental relationships, as part of a pilot study. It explores the relational correlates, conflict behavior and relationship instability of mothers and fathers in different combinations of attachment pairings.

Clinical implications: Drawing on empirical findings, the dissertation also aims to formulate practical recommendations for clinicians and researchers. It outlines how the ECR-R-HU-SF can inform clinical assessment and guide therapeutic interventions.

3. METHODS

The dissertation includes two large adult samples that were used for tool development and the applications of the ECR-R-HU-SF presented in Figure 1.

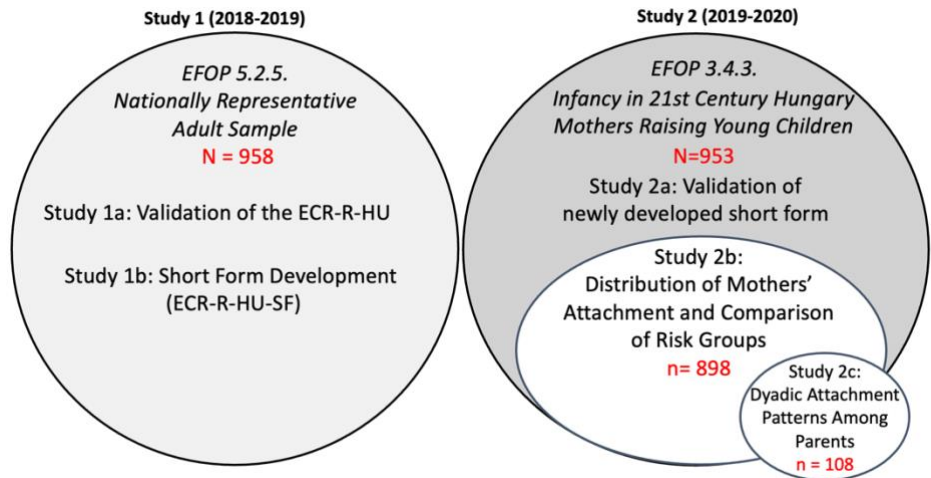


Figure 1.
Studies and Samples Included in the Dissertation

3.1. Validation and Short Form Development (Studies 1a, 1b, 2a)

Measures: ECR-R-HU (Dupont et al., 2022, 2024; 2025; Gervai et al. 2018, 2019), a 36-item self-report questionnaire assessing attachment-related Avoidance and Anxiety. Additional measures included for measuring convergent validity: psychological well-being (WHO-5), perceived stress (PSS-4), depressive symptoms (DS1K), and family functioning (Family Assessment Device).

3.2. Mothers and Parents of Young Children (Studies 2b–2c)

The main empirical phase of the dissertation was conducted within the framework of the national survey *Infancy in 21st Century Hungary*. The project provided a large, sociodemographically diverse sample of families raising children aged 3–36 months.

Measures: Romantic adult attachment was measured with the ECR-R-HU-SF and demonstrated good internal consistency across samples. Additional measures included several indicators of relational functioning (felt partnership security, perceived partner support, satisfaction with workload distribution, coparenting, relationship satisfaction, conflict (frequency and conflict resolution strategies), and relationship instability (perceived likelihood of separation or divorce).

A composite latent construct of relationship quality was created based on five indicators: relationship satisfaction, perceived support, felt security, workload satisfaction, and coparenting. Principal axis factor analyses supported a one-factor solution across maternal and dyadic samples, with acceptable internal consistency.

Sociodemographic background variables included age, education, type of residence, financial situation, number of children, partnership status, and relationship duration. A cumulative sociodemographic risk index was calculated based on maternal age, education, residence, number of children, and financial difficulties.

3.3. Statistical Analyses

For validation of the ECR-R-HU (**Study 1a**), confirmatory factor analyses (CFA) were conducted to test the original two-factor structure of the ECR-R-HU. Several competing models were evaluated, and method factors were included to control for method effects related to reversed items. Model fit was assessed using standard indices (χ^2/df , RMSEA, CFI, TLI, NFI). Internal consistency was evaluated using Cronbach's alpha, and non-parametric tests were applied to test reliability due to non-normal distributions.

For short form development (ECR-R-HU-SF; **Study 1b**), principal component analysis was used for item reduction on half of the sample, followed by CFA on the second half to confirm the two-factor structure. Internal consistency was assessed using Cronbach's alpha and McDonald's omega. The resulting ECR-R-HU-SF was validated on an independent sample of mothers raising young children within the framework of the *Infancy in 21st Century Hungary* (**Study 2a**). The same statistical methods were used for validation as in Study 1a.

Study 2b examined associations between attachment, relational functioning, and relationship instability among mothers. *Non-parametric tests* were applied due to non-normal distributions, (Spearman correlations, Mann–Whitney U tests, and Kruskal–Wallis tests). *Cut-off points at the 75th percentile* were used to distinguish four attachment groups (secure, anxious, avoidant, disorganized). *Structural equation models* (SEM) were developed to test theory-driven

models of direct and indirect associations between attachment, conflict behavior, relationship quality, and instability. Effect sizes were calculated using ε^2 and $r (Z / \sqrt{N})$, and interpretation was based on conventional benchmarks.

Study 2c investigated *dyadic attachment patterns*. Hierarchical cluster analysis (Ward's method) followed by K-means clustering identified six distinct attachment constellations based on mothers' and fathers' Avoidance and Anxiety scores. Non-parametric tests were applied due to non-normal distributions to the full dyadic sample and for comparisons across clusters (Spearman rank-order correlations, Mann Whitney and Kruskal–Wallis tests with Bonferroni correction, and Wilcoxon signed-rank tests). Effect sizes were calculated using ε^2 and $r (Z / \sqrt{N})$, and interpretation was based on conventional benchmarks.

4. RESULTS

Only the most important results are presented in this booklet. For a detailed overview of all findings, please refer to the cited publications and the full dissertation.

4.1. Validation and short form development (Studies 1a–2a)

4.1.1 Study 1a: Validation of the ECR-R-HU

The original avoidance and anxiety dimensions of the ECR-R emerged only when reversed-item method factors and residual correlations were incorporated into the confirmatory factor analysis (CFA). The Avoidance and Anxiety subscales of the ECR-R-HU demonstrated high internal consistency and satisfactory temporal stability across a four-month period. Neither subscale showed significant associations with age, gender, or type of residence; however, participants involved in a romantic relationship reported significantly lower scores on both dimensions. As expected, both subscales were significantly correlated with indicators of family functioning difficulties, perceived stress, depressive symptoms, and well-being. Overall, these findings support the ECR-R-HU as a reliable and valid instrument for assessment (Dupont, 2022).

4.1.2. Study 1b: Development of the short form measure: ECR-R-HU-SF

Analyses were conducted on two randomly split subsamples ($n = 477$ and 481) in accordance with methodological guidelines. Item selection integrated statistical criteria and expert judgment to ensure content coverage and minimize redundancy. The ECR-R-HU was reduced to eight items (4 Avoidance, 4 Anxiety). The original two-factor structure of the measure was preserved, and

the resulting subscales demonstrated very good reliability and showed strong correlations with their respective full-length counterparts. Temporal stability was also high. Both subscales correlated systematically and moderately in the expected directions with all the measures of the related constructs, confirming convergent validity (Dupont, 2024).

4.1.3. Study 2a: Validation of the short form on an independent sample of mothers

The original two factor structure of the ECR-R-HU-SF was tested and confirmed. Both subscales showed very good reliability. Compared to the nationally representative sample of Study 1b, the mean scores of both subscales were slightly lower in early motherhood (.24 (9%) lower for Avoidance and .56 (21%) lower for Anxiety). As expected, there was a moderate correlation between the two subscales. In line with Study 1, single mothers scored significantly higher on both Avoidance and Anxiety. Convergent validity was confirmed as related constructs showed moderate associations in the expected directions (Dupont, 2024).

4.1. Risk Thresholds

Percentile-based thresholds (75th and 90th percentiles) were established for both subscales in both the long (ECR-R-HU) and short versions (ECR-R-HU-SF). Individuals above both risk thresholds reported significantly lower levels of well-being, and higher levels of perceived stress, depressive mood and family functioning problems, supporting its clinical utility (see Table 8; Dupont, 2025).

Because risk thresholds were lower among mothers raising young children (Study 2b) than in the general adult sample, attachment profile groups were defined using Study 2b-specific 75th percentile cut-offs.

Table 8

Cut-Off Scores Based on the 75th Percentiles for ECR-R-HU-SF Subscales Across Studies

	Avoidance 75th %	Anxiety 75th %	N
Hungarian representative adult sample (Study 1b)	3.75	3.81	958
Sociodemographically diverse sample of mothers (Study 2a)	3.25	3.00	953
Mothers in a relationship & cohabiting with the child's father (Study 2b)	3.00	2.75	898

4.2. Application: Mothers Raising Young Children (Study 2b)

4.3.1. Descriptive Statistics and Sociodemographic Background Data

Avoidance and Anxiety scores were non-normally distributed and showed a strong positive skew. Relational functioning indicators were similarly non-normally distributed and mean scores indicated high outcomes in this maternal sample. Several sociodemographic background variables showed significant associations with the two attachment-related subscales. Mothers in their 20s showed significantly higher Anxiety scores than mothers in their 30s. Mothers with lower educational attainment and mothers with financial difficulties reported significantly higher scores on both Avoidance and Anxiety. Mothers living in the capital city of Budapest reported lower scores on both subscales compared to mothers in other types of residence. There were no statistically significant differences in attachment dimensions according to partnership status. The demographic risk index was weakly but significantly correlated with both Avoidance and Anxiety. Overall, these findings support the expectation that attachment insecurity in early parenthood is meaningfully intertwined socioeconomic vulnerability.

4.3.2. Attachment Risk Groups Based on the 75th Percentile and Relational Correlates

Four attachment-based risk groups were distinguished among mothers based on the 75th-percentile cut-off scores of Avoidance and Anxiety: Secure, Avoidant, Anxious, and Disorganized. These groups are interpreted as trends or characteristics and by no means as a classification system as in the SSP (Strange Situation Procedure) or the AAI (Adult Attachment Interview). See Figure 2 for the distribution.

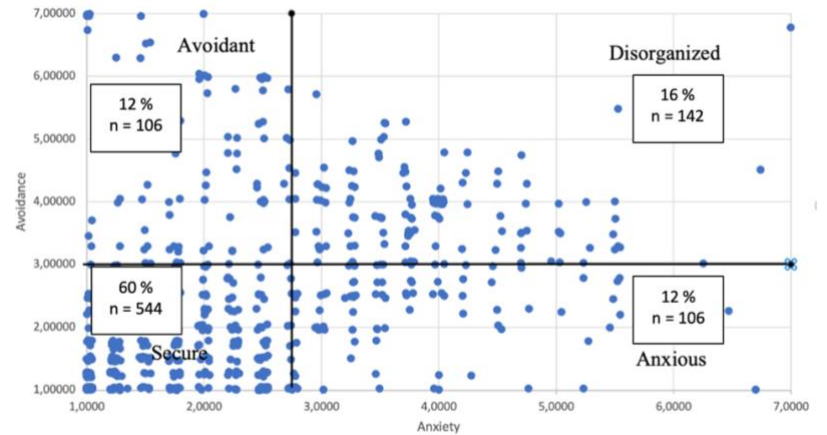


Figure 2

The Distribution of Attachment Representations on Continuous ECR-R-HU-SF Subscales With 75th Percentile Risk Thresholds

Main results concerning comparisons between different attachment profiles of mothers across relational correlates:

- **Secure mothers** reported significantly higher relationship satisfaction, satisfaction with workload distribution, coparenting, relationship quality, more constructive conflict, and engaged significantly less in attacking conflict resolution and escalation to physical violence compared with the three other risk groups (Avoidant, Anxious, Disorganized).
- **Disorganized mothers** showed the most consistently adverse pattern. Across most domains of relational functioning. They also showed the highest levels of destructive conflict, including the highest escalation to physical violence.
- **Avoidant and anxious mothers** fell between secure and disorganized profiles. A key distinction emerged in perceived relationship stability: avoidant mothers perceived their relationships as relatively stable (similar to secure mothers), whereas anxious mothers reported significantly higher relationship instability. In conflict behavior, anxious mothers reported lower constructive conflict and higher avoidant and attacking conflict resolution than avoidant mothers. Their escalation to physical violence was elevated relative to the secure and avoidant groups but still lower than the disorganized group.

4.3.3. Adult attachment as a predictor of relationship instability

A structural equation model was developed to test whether conflict behavior and relationship quality functioned as mediators between attachment dimensions and relationship instability. The final model demonstrated improved and acceptable fit and supported the central hypothesis: Avoidance and Anxiety were drivers of relationship instability primarily through indirect pathways. While direct paths from attachment to instability were significant, indirect effects via the mediators (conflict resolution, relationship quality) were stronger.

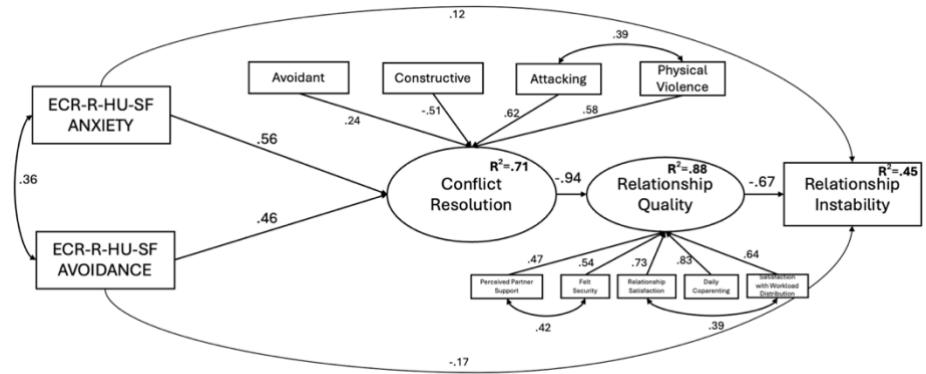


Figure 3

Attachment Dimensions as Predictors of Relationship Instability: The Mediating Roles of Conflict Resolution and Relationship Quality

4.4 Application: A Pilot Study of Parental Dyads (Study 2c)

Descriptives and comparisons of mothers and fathers: Descriptive statistics were aligned with results in Study 2b. Mothers and fathers did not differ significantly on the attachment dimensions, although there was a slight trend for mothers to have higher mean Anxiety scores and lower mean Avoidance scores. Overall perceptions of the relationship were highly similar, with only a small difference in felt safety.

4.4.1. Dyadic attachment pairings

Cluster analyses identified six attachment constellations: (1) disorganized–disorganized, (2) secure mother–avoidant father, (3) avoidant–avoidant, (4) secure–secure, (5) anxious mother–secure father, and (6) secure mother–anxious father. Cluster means in insecure clusters consistently exceeded the 75th percentile thresholds, while still reflecting in mean scores that these clusters were derived from continuous dimensions rather than rigid categories.

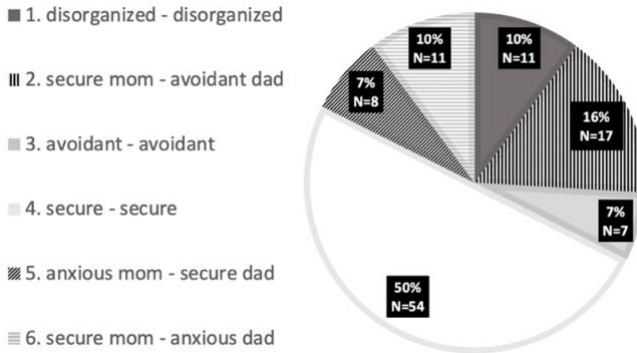
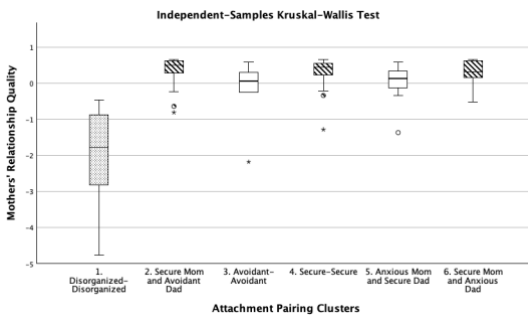


Figure 4
Distribution of Dyadic Clusters

4.4.2. *Relational functioning across attachment pairings*

Across both mothers’ and fathers’ reports, the most robust finding was that **disorganized–disorganized pairings showed the poorest relational outcomes**. Mothers in this cluster reported consistently lower support, safety, satisfaction, workload satisfaction, coparenting, relationship quality, and higher instability. They also reported the highest escalation to physical violence. In contrast, **secure–secure** couples tended to show the strongest functioning, including higher coparenting and lower instability. Conflict frequency showed a relative similarity across attachment pairings.



Note. Cluster 1 scored significantly lower on Relationship Quality than Clusters 2, 4, and 6.

Figure 5
Mothers’ Overall Relationship Quality Across Different Attachment Pairings

Asymmetrical pairings yielded a more nuanced picture. Secure mothers paired with avoidant fathers generally reported relatively good relational functioning, and notably better outcomes than the disorganized–disorganized cluster. Fathers paired with anxious mothers or those who were themselves anxious within a secure–anxious constellation displayed weaker outcomes on select indicators (e.g., lower workload satisfaction or higher attacking conflict).

5. CONCLUSIONS

The following conclusions also draw on additional associations and findings that are not presented in this booklet but are discussed in detail in the dissertation.

1. This dissertation provides a comprehensive translational contribution by validating the Hungarian version of the Experiences in Close Relationships–Revised (ECR-R-HU) and developing its short form (ECR-R-HU-SF) in a large, nationally representative adult sample and a sociodemographically diverse sample of mothers raising young children.
2. The ECR-R-HU demonstrated strong psychometric properties, including high reliability, adequate temporal stability, and good convergent validity, supporting its suitability for assessing adult romantic attachment in Hungarian populations.
3. The ECR-R-HU-SF retained the original two-factor structure (Avoidance and Anxiety) and showed excellent reliability and strong convergence with the full version, confirming that it captures core attachment constructs despite its brevity.
4. The identification of empirically derived risk thresholds for both the general adult population and mothers raising young children represents a novel methodological contribution, enabling clinically meaningful differentiation between low- and high-risk attachment profiles.
5. Sociodemographic risk factors (e.g., age, education, financial strain) were weakly but consistently associated with higher attachment insecurity, indicating that attachment representations are embedded within broader ecological and socioeconomic contexts.
6. Attachment security was consistently associated with the most adaptive relational functioning, including higher relationship quality, constructive conflict resolution, and greater relationship stability.

7. Mothers scoring high on both Avoidance and Anxiety (disorganized profile) constituted the highest-risk group, reporting markedly poorer relational outcomes and higher levels of destructive conflict and instability.
8. Structural equation modelling demonstrated that attachment dimensions predict relationship instability primarily indirectly via conflict resolution styles and relationship quality, highlighting the central role of relational processes.
9. A proposed Systemic Dynamic Attachment Diathesis–Stress Process Model integrates attachment theory with systemic perspectives, offering a comprehensive framework for understanding relational functioning during early parenthood.
10. In the dyadic pilot study, secure–secure attachment pairings were most prevalent and associated with the best relational outcomes, whereas disorganized–disorganized pairings represented the highest-risk constellation.
11. Secure partners showed selective buffering effects in secure–insecure pairings, though this effect was weaker for anxious partners than for avoidant partners.
12. Overall, the findings support a dimensional, systemic conceptualization of adult attachment and demonstrate the clinical relevance of attachment representations for understanding relational functioning and instability during the transition to parenthood.

6. CLINICAL IMPLICATIONS

1. The ECR-R-HU-SF offers a brief, psychometrically sound tool for assessing romantic attachment in clinical practice.
2. The empirically derived risk thresholds based on nationally representative data provide practical reference points for identifying clients at elevated vulnerability in relational functioning and well-being.
3. Separate, lower risk thresholds for mothers raising young children may improve sensitivity in this life phase, creating opportunities for clinicians to screen for vulnerability in perinatal settings and early parenthood. This may facilitate timely orientation toward attachment-focused therapy or prevention programs (e.g., Hold Me Tight® / Taking Root), particularly for couples in medium- to high-risk constellations.
4. Clients scoring high on both attachment dimensions (Avoidance and Anxiety) represent a distinct high-risk profile, suggesting the value of early, targeted intervention to prevent escalation of relational distress during a sensitive developmental period.

5. At the dyadic level, disorganized–disorganized attachment pairings may represent particularly maladaptive constellations, warranting careful case formulation and increased clinical vigilance.
6. Given the elevated risk of escalation to physical violence in high-risk profiles, systematic screening for intimate partner violence should be incorporated when clinically indicated.
7. Findings indicate that attachment insecurity predicts relationship instability primarily via conflict resolution styles and relationship quality, supporting interventions that focus on reshaping interactional patterns rather than reducing conflict frequency per se.
8. As attachment insecurity appears to be a main driver of relationship instability, attachment-focused couple approaches (e.g., Emotionally Focused Therapy) are well positioned to address relational difficulties by directly targeting attachment processes.
9. Clinicians should assess the function and context of withdrawal during conflict: withdrawal may reflect attachment avoidance, but it may also occur in highly anxious clients due to threat appraisal and affective overload; thus, behavioral patterns should not be mapped onto attachment strategies without contextual assessment.
10. In dyads where both partners show elevated Avoidance and Anxiety, interactional cycles may be more complex and roles (pursuer/withdrawer) may shift rapidly; explicitly tracking moment-to-moment shifts and slowing the therapeutic pace may help in tracking the cycle and promote felt safety.
11. Clinically, it may be helpful to normalize the frequency of conflict as a common feature of early parenthood while centering work on constructive conflict processes, core attachment needs, and the cultivation of a secure relational “safe haven”.

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