

Maternal and paternal antenatal attachment scales: Scoring guidance

The MAAS and PAAS are used to assess maternal/paternal antenatal bonding to the unborn baby.

The MAAS scale includes 19 items and the PAAS 16 items which focus on feelings, attitudes and behaviours towards the foetus with responses recorded on a 5 point Likert Scale. Many of the questions require the respondent to select their answer based on their experience in the previous two weeks.

Reverse Scoring

Some questions are scored from 1 to 5 and others are scored from 5 to 1 (reverse scored).

Questions that should be reverse scored (5 to 1) are:

MAAS

1 3 5 6 7 9 10 12 15 16 18

PAAS

1 3 5 7 8 15

MAAS scoring

The highest score is 95 and the lowest 19.

To obtain a **total attachment score** add all scores together.

Two sub scores can be obtained also:

- > quality of attachment
- > time spent in attachment mode (or intensity of preoccupation)

To score **quality of attachment**, add together items 3 6 9 10 11 12 13 15 16 19

To score **time spent in attachment mode**, add together items 1 2 4 5 8 14 17 18

Scoring is 1 (low attachment) to 5 (high attachment). Item 7 does not load on either factor strongly enough for inclusion on subscales. It is only included in the global attachment score.

PASS Scoring

The highest score is 80 and the lowest 16.

To obtain a **total attachment score** add all scores together.

Two sub scores can be obtained also:

- > quality of attachment
- > time spent in attachment mode (or intensity of preoccupation)

To score **quality of attachment**, add together items 1 2 3 7 9 11 12 16

To score **time spent in attachment mode**, add together items 4 5 8 10 14 15

Scoring is 1 (low attachment) to 5 (high attachment)

Items 6 and 13 do not load on either factor strongly enough for inclusion on subscales, and are only included in the total attachment score.

Reference: Condon J, Corkindale C, Boyce P. and Gamble E. (2013). A longitudinal study of father-to-infant attachment: antecedents and correlates. *Journal of reproductive and infant psychology*, 31, pp. 15-30.