



book of abstracts

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and traced existing strategies of reading and their relationship with the level of cognitive functioning of children. The dynamics of development of reading technical skills are mostly studied using children reading in different languages, but there is a lack of studies, which analyze reading in Russian on early stages of development of this skill. The objectives of our study were to assess the differences in eye movements for silent reading in Russian for students in the second and third grades. In a total 78 second grade students and 66 third grade students participated in the study. We recorded eye-movements of children during they read sentences from a corpus specifically developed for reading studies in the Russian language. In addition we assessed their reading skill by independent test ("Reading of regular and irregular words") and their cognitive abilities by neuropsychological battery. The primary general analyses of eye movements

showed that eye movements during reading do not differ in second and third grades due to the variability of state of reading skill. We separated children with relatively good development of reading skills in both grades. The comparison of these groups showed that third-graders make fewer fixations when reading, and the total fixation duration is significantly less compared to second-graders. The results allow to conclude that development of the skill leads to optimization of eye movements from second to third grade. The comparison of eye-tracking data showed that number and duration of fixations strongly correlate with the productivity and speed of reading of both regular and irregular words. In addition we reveal the correlation between characteristics of eye movements and state of executive functions, functions of visuo-spatial information processing and functions of regulation of activation.

DYADIC COPING AND PSYCHOLOGICAL WELL-BEING IN THE DYAD OF PARTNERS WITH DISABILITIES

Natalya Shipova

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The study was supported by RFBR, project 18-313-00243 The stressfulness of life in marriage today raises the issue of couple coping. The framework of my research in dyadic coping is grounded in the works of G. Bodenmann, T.L. Kryukova, E.V. Kuftyak. To study dyadic coping in the dyad of partners with disabilities. Test scales, projective techniques, interview(s). Target group: 15 couples, where one of the partners has a disability (mainly disorders of the musculoskeletal system), while the other is disability-free (M = 36.5 years old). Delegated coping is salient in couples with typical development, rather than among partners with disabilities (U = 23.5; p = 0.045). Significant differences have also been found on the health status scale: there is a high degree of satisfaction (U = 29 with p = 0.047) among partners with regulatory development (M = 15.89; SD = 2.67) compared with disabled partners (M = 15, 89; SD

= 2.67). The cohesion of a couple for partners with disabilities is determined by communication under stress (R = 0.95; R2 = 0.89, β = 0.44; p = 0.002) and personal delegated coping (R = 0.95; R2 = 0.89, β = 0.73; p = 0.00004). Adaptability of the dyad depends on communicative input of partners in stressed condition (R = 0.79; R2 = 0.63, β = 0.79; p = 0.001). At the same time, for partners with typical development, cohesiveness of the couple is affected by the negative coping of one of the partners (R = 0.94; R2 = 0.87, β = 0.86; p = 0.01), total dyadic coping (R = 0.94; R2 = 0.87, β = -1.36; p = 0.006) and its estimate (R = 0.94; R2 = 0.87, β = 2.13; p = 0.002). Thus, cohesion and adaptation of the dyad are regulated by a variety of strategies of dyadic coping. There also seem to be significant differences in the preferences of dyadic coping strategies in couples with one disabled partner.

fundamental personality traits, character traits, intelligence, cognitive styles, motivation, value, spiritual abilities, and personality values (81 indicators). Statistical processing techniques of empirical data included descriptive statistics; principal component analysis (PCA, Varimax; scree plot), hierarchical cluster analysis (Ward's method, Euclidean distances), one-way ANOVA (Scheffe post hoc test). PCA allowed us to reduce 81 variables into 4 main components explaining 38.4% of the variance of the primary scales. The first factor characterizes the spiritual and value component of the individuality, the second factor reflects the emotional component, the third factor unites the intellectual and motor activity, the fourth factor – the communicative activity. Based on HCA, we identified four groups of respondents that differ in these integral

indicators. The significance of group differences was confirmed (ANOVA). The first type included non-adaptive respondents with low hardiness and motivation that tend to seek social support in difficult life situations. The second type unites persons with more expressed psychotic traits, excitability, low level of meaningfulness of life, intelligence, and value of family and profession. When they face the problem they ignore it. The third type is represented by emotional, stuck respondents, who prefer shutting other people out in difficult life situation. The fourth type covers active respondents with a high level of hardiness, spirituality, meaningfulness and value of life. They try to work hard and solve any problem. The study was supported by RSF grant (project № 18-18-00386), Institute of Psychology RAS.

DYADIC COPING AND PSYCHOLOGICAL WELL-BEING IN THE DYAD OF PARTNERS WITH DISABILITIES

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The stressfulness of the modern world raises the question of coping in a pair. The understanding of dyadic coping is based on the research of G. Bodenmann, T.L. Kryukova, E.V. Kuftyak. Objective: to study dyadic coping in the dyad of partners with disabilities. Methods included test scales, projective techniques, interviews. The sample consisted of 15 pairs, where one of the partners has a disability (mainly disorders of the musculoskeletal system), and the second – the normative development ($M = 36.5$ years). Main results: delegated coping is more pronounced in the group of partners with typical development than among partners with disabilities ($U = 23.5$; $p = 0.045$). Significant differences were also found on the health status scale: there is a high degree of satisfaction ($U = 29$ with $p = 0.047$) among partners with regulatory development ($M = 15.89$; $SD = 2.67$) compared with disabled partners ($M = 15, 89$; $SD = 2.67$). The cohesion of a couple for partners with disabilities is determined by

communication during stress ($R = 0.95$; $R^2 = 0.89$, $\beta = 0.44$; $p = 0.002$) and own delegated coping ($R = 0.95$; $R^2 = 0.89$, $\beta = 0.73$; $p = 0.00004$). The adaptation of the dyad is influenced by the communication of partners during stress ($R = 0.79$; $R^2 = 0.63$, $\beta = 0.79$; $p = 0.001$). At the same time, for partners with a typical development, cohesiveness of the couple is affected by negative coping of the partner ($R = 0.94$; $R^2 = 0.87$, $\beta = 0.86$; $p = 0.01$), total dyadic coping ($R = 0.94$; $R^2 = 0.87$, $\beta = -1.36$; $p = 0.006$) and its estimate ($R = 0.94$; $R^2 = 0.87$, $\beta = 2.13$; $p = 0.002$). Thus, cohesion and adaptation of the dyad are influenced by different strategies of dyadic coping, and there are also significant differences in the preferences of dyadic coping strategies depending on the presence of disability among partners. We assume different roles and styles of coping partners in a relationship depending on the state of health.