Maternal Emotion Regulation and Infant Negative Affect: Direct and Indirect Links through Maternal Internalizing Problems

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Background
• Elevated negative affectivity in childhood is associated with increased risk for internalizing8 and externalizing problems3, as well as poor academic2 and social adjustment1.
• Negative affect generally stabilizes around age two7, highlighting the importance of early influences.8
• Previous work has identified a variety of factors that influence children’s early negative affectivity, including maternal psychopathology8, and negative parenting.1
• Little work has investigated the potential influence of maternal emotion regulation on infant negative affect.4
• Difficulties with emotion regulation, or the processes employed to influence the experience and expression of emotions4 have been linked to internalizing disorders8.
  • Suppression (inhibition of emotional expression) predicts more negative emotion while reappraisal (changed cognitions to alter emotional experience) predicts greater positive emotion.9
• Given this evidence, maternal ER may be directly influencing infant NA, or its effects may be mediated by maternal internalizing problems.7
• The current study examines the direct and indirect effects of specific maternal emotion regulation strategies on infant negative affect, through maternal internalizing problems.

Hypotheses
• Lower use of reappraisal and higher use of suppression were expected to predict higher maternal internalizing problems.4
• Greater maternal internalizing problems were expected to predict higher infant negative affect.4
• Lower maternal reappraisal and higher maternal suppression were expected to predict higher infant negative affect either directly or indirectly through maternal internalizing problems.

Participants
• Mothers (N=84) from a rural community participated with their healthy, full-term infants.
• Maternal ethnicity: 70.2% Caucasian, 13.1% Latina, 10.7% African-American, 6% other
• Mothers mean age: 27.67 years (SD = 6.66)
• Mean income-to-needs ratio of 2.44 (SD = 1.92)
• Infants: 58.3% female, 41.7% male

Measures
• Emotion Regulation Questionnaire10 (ERQ)
• Reappraisal and suppression subscales
• Maternal Internalizing Composite:
  • Beck Anxiety Inventory11 (BAI)
  • Beck Depression Inventory-II12 (BDI-II)
• Infant Behavior Questionnaire-Revised13 (IBQ-R)
• Negative affect subscale
• Cumulative Risk Index
  • One point for each of the following criteria: past or current maternal major depressive episode maternal education less than high school, teen motherhood (17-19 years), single parenthood, and household income at or below poverty threshold.

Procedure
• Mothers completed the ERQ four months postpartum. Past or current major depressive episode was assessed in a structured clinical interview.
• At 6 and 8 months, mothers completed the BAI, BDI, & IBQ-R.
• Primary regression analyses were conducted in EQS 6.11
  • Indirect effects estimated using effects decomposition feature
  • Maximum likelihood estimation used to model missing data (10%).
  • Covariates: gender, cumulative risk & 4 month infant NA.

Results
• Higher maternal reappraisal predicted lower infant NA (β = .56, z = 2.32, p < .05), lower maternal suppression did not significantly predict infant NA (β = -.07, z = -.31, p > .05).
• Lower maternal reappraisal (β = -.29, z = 2.44, p < .05) and higher maternal suppression (β = .23, z = 2.83, p < .05) predicted higher maternal internalizing.
• Higher maternal internalizing predicted higher infant NA (β = .86, z = 3.74, p < .05).

Figure 1: Indirect effects of Maternal Emotion Regulation Strategies on Infant Negative Affect through Maternal Internalizing. Direct effects, with maternal internalizing in the model, are above the line, the indirect effects are below the line.

Conclusions
• Findings support the importance of maternal emotion regulation in the emergence of infant negative affect, indirectly through maternal internalizing difficulties.
• These results suggest that maternal emotion regulation will be an important factor to consider in future research on maternal influences in early childhood.
• This study did not distinguish between maternal depression and maternal anxiety. Future studies should consider differential interactions between emotion regulation and maternal anxiety and depression in predicting infant negative affect.
• Finally, these results indicate that parenting interventions targeting maternal emotion regulation may help increase child outcomes.

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