Infant Positive and Negative Affect as Contributors to Maternal Parenting Self-Efficacy

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Introduction

• Maternal parenting self-efficacy (MSE) is a mother’s feelings regarding her effectiveness as a caregiver.
• Higher MSE has been linked with better toddler functioning and compliance with caregivers, which suggests that understanding contributors to MSE has implications for children’s well-being.
• Studies have identified some factors that contribute to lower or higher MSE:
  - Maternal depression
  - Maternal social support
  - Prior caregiving experience
  - Child difficult temperament

• Although some contributors to MSE have been examined, other potential contributors, such as specific aspects of infant temperament (e.g., positive and negative emotionality) and maternal emotion regulation, have not been commonly examined.
• The current investigation examines the relationship between aspects of infant temperament and maternal characteristics and MSE.

Participants

• 84 mothers and their 4-month-old infants participated.
• Mean maternal age was 27.6 years (SD = 6.66); maternal educational attainment ranged between 9 and 20 years (M 14.53, SD = 2.78).
• Maternal caregivers reported diverse ethnic (34% ethnic minority) and socio-demographic (19.3% below poverty) backgrounds.

Measures & Procedure

• Maternal Self-Efficacy Scale (MSES)1
• Maternal DERS2
• Maternal dyadic adjustment (DAS)3
• Revised Dyadic Adjustment Scale (R-DAS)4
• Difficulties with Emotion Regulation Scale (DERS)5
• Total Score
• Cumulative Risk

• Given links between aspects of maternal self-regulation and parenting6, it was anticipated that more maternal difficulties with emotion regulation would contribute to lower MSE after accounting for cumulative risk and infant gender.
• Infant temperament was expected to account for MSE beyond the influence of cumulative risk, infant gender, maternal problematic emotion regulation, and maternal dyadic adjustment.
• More infant positive emotionality (PE) and better emotion regulation (O/R) was expected to contribute to higher MSE.
• Higher infant negative emotionality (NE) was predicted to contribute to lower MSE.

Results

Table 1. Zero-Order Associations between Variables

<table>
<thead>
<tr>
<th>Variable</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
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</thead>
<tbody>
<tr>
<td>1. Cum. Risk</td>
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<td>--</td>
<td>--</td>
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<tr>
<td>2. Infant Gender</td>
<td>.06</td>
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<td>--</td>
<td>--</td>
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<td>--</td>
</tr>
<tr>
<td>3. Mat. DERS</td>
<td>.04</td>
<td>.11</td>
<td>--</td>
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<td>--</td>
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<tr>
<td>4. Mat. Dyadic Adjustment</td>
<td>-.08</td>
<td>-.05</td>
<td>-.36**</td>
<td>--</td>
<td>--</td>
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<tr>
<td>5. Infant PE</td>
<td>-.13</td>
<td>-.23</td>
<td>-.11</td>
<td>.11</td>
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</tr>
<tr>
<td>6. Infant NE</td>
<td>.04</td>
<td>.13</td>
<td>.15</td>
<td>-.40**</td>
<td>.27*</td>
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<td>--</td>
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<tr>
<td>7. Infant O/R</td>
<td>-.10</td>
<td>-.02</td>
<td>-.01</td>
<td>.05</td>
<td>.18</td>
<td>-.11</td>
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*p < .05; **p < .01

Table 2. Predictors of Maternal Self-Efficacy

<table>
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<th>Step</th>
<th>Predictor</th>
<th>ΔR²</th>
<th>β</th>
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<td>Step 1</td>
<td>Cumulative Risk</td>
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<tr>
<td>Step 2</td>
<td>Infant Gender</td>
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<td>.01</td>
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<tr>
<td></td>
<td>Maternal Difficulties with Emotion Regulation</td>
<td>.02**</td>
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<tr>
<td></td>
<td>Dyadic Adjustment</td>
<td>.02**</td>
<td>.28</td>
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<tr>
<td>Step 3</td>
<td>Infant Positive Emotionality</td>
<td>.17**</td>
<td>.34**</td>
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<tr>
<td></td>
<td>Infant Negative Emotionality</td>
<td>.18</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>Infant Regulatory Capacity/Orientation</td>
<td>.10</td>
<td>--</td>
</tr>
</tbody>
</table>

*p < .10, **p < .05

Discussion

• All anticipated associations were significant and in the expected direction; however, after controlling for covariates and maternal difficulties with emotion regulation and dyadic adjustment, only infant PE remained a significant predictor of MSE with infant NE emerging as a trend level effect.
• Given that infant PE predicted MSE, it may be beneficial for parent-infant interventions to teach parenting behaviors associated with increased PE (e.g., initiating joint attention).
• Findings in the current study suggest that targeting improvements in emotion regulation among mothers reporting lower parenting self-efficacy, through the use of therapeutic techniques such as Dialectical Behavior therapy, may enhance parent-infant interventions.
• Future research should consider including other variables associated with MSE, such as parenting behavior that may mediate associations between emotion regulation difficulties, infant PE, and MSE.
• Additional work can extend the current investigation by using a longitudinal design and by not relying solely upon maternal report measures for all constructs.

References

1. All the authors contributed to the study. The manuscript was written on behalf of all authors by David J. Bridgett. All authors reviewed the manuscript. The journal is responsible for the final decision. It is protected by the copyright of the publisher. All rights reserved. The版权归Bridgett, David J. & Schubert, Holly. (2018). Infant positive and negative affect as contributors to maternal parenting self-efficacy. J of Mar & Fam Therapy. 26(3), 263-272. doi:10.1177/1089906018802186

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3. Given that infant PE predicted MSE, it may be beneficial for parent-infant interventions to teach parenting behaviors associated with increased PE (e.g., initiating joint attention).

4. Findings in the current study suggest that targeting improvements in emotion regulation among mothers reporting lower parenting self-efficacy, through the use of therapeutic techniques such as Dialectical Behavior therapy, may enhance parent-infant interventions.

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