Maternal beliefs about caregiving efficacy and parental influence as protective factors in the relation between maternal depression and parenting behavior

Parents play a crucial role in the lives of their children. Positive parenting, characterized by sensitivity, warmth, and support, has many beneficial effects for children (Ainsworth, 1979; Feldman et al., 2011; Tamis-LeMonda et al., 2004). However, some parents face mental health and other challenges that make it difficult to provide sensitive and warm parenting. It is estimated that depression will touch the lives of 14.8 million people in the United States (National Institute of Mental Health, 2011). Since many people affected by depression have children, it is important to understand how depression influences parenting behavior. In fact, between 10-15% of mothers experience depression, and the rates are even higher among low-income mothers with young children (Letourneau, Tramonte, & Willms, 2013). Although the negative effects of depression on parenting behavior are clear, what is less understood is how some parents are able to provide effective caregiving for their young children while managing symptoms of depression.

There are many factors that promote positive parenting, and maternal beliefs about being a parent may be a relevant protective factor in this process. Specifically, a mother’s sense of confidence and competence regarding her parenting ability (i.e., caregiving efficacy), as well as her belief that she has an impact on her child’s behavior and development (i.e., parental influence) may affect parenting behaviors in meaningful ways, even among mothers with depression. Therefore, it is important to better understand how factors, such as caregiving efficacy and parental influence contribute to the variability in parenting practices among mothers with depression.
Previous research has shown that high caregiving efficacy leads to better infant and child outcomes, including infant soothability and positive behavior, and child self-regulation, compliance, and affection (Jones & Prinz 2004; Weaver et al., 2008). In addition, mothers who report high parental influence feel empowered to manage their child’s behaviors, even challenging ones (Evans et al., 2012). More research is needed, however, to examine the relations among maternal depressive symptoms, caregiving efficacy, parental influence, and parenting practices.

The present study grows out of a larger intervention for low-income mothers of preschoolers and will examine whether parenting beliefs influence the relation between maternal depressive symptoms and parenting quality. Families were recruited from two Head Start centers, and 124 mothers participated in the study. Mothers completed a set of questionnaires assessing demographic information, depressive symptoms, caregiving efficacy, parental influence, and parenting practices. We expect that (1) maternal depressive symptoms will be negatively related to parenting quality; (2) maternal caregiving efficacy will be positively related to parenting quality; (3) maternal beliefs about parental influence will be positively related to parenting quality; and (4) maternal depressive symptoms and parenting beliefs will interact to influence parenting quality. Specifically, we expect that high caregiving efficacy and high parental influence will serve as protective factors against the negative effects of depression. By exploring the relations among maternal depression, parenting beliefs, and parenting quality, it is hoped that this study will refine targets of intervention and improve the well-being of young children and families.