
RESEARCH-TO-PRACTICE SUMMARY

The Role of Inconsistent Discipline and Parental Involvement on Female Caregivers' Internalizing Symptoms and Externalizing Behaviors among Preschool-aged Children

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This article summarizes the findings and implication of an empirical study that assessed the mediating role of parenting techniques on the relation between primary female caregivers' internalizing (i.e., anxiety and depression) symptoms and child externalizing behavior (i.e., hyperactivity, aggression, attention problems) among preschoolers.

Early identification of child externalizing behaviors is imperative, as these behaviors and associated disorders are common behavioral challenges for educational providers. The importance of attending to these behaviors early may prevent the later influence this psychopathology has at an individual, family, school, and societal level. In addition, addressing this issue within a preschool population is particularly appropriate, given that early prevention efforts tend to show more benefits than targeting adolescents presenting with behavior problems (Lochman & Wells, 2003). The current study focused on the relations between preschool externalizing behaviors, parenting techniques, and caregivers' internalizing symptoms.

Recent research has focused on parental characteristics that relate to child behavior problems, much of which was based on the seminal work of Gerald Patterson and colleagues' theory of the coercive family process (Patterson et al., 1992). Adaptive parenting techniques, such as parental involvement, monitoring of activities, and the use of praise and positive reinforcement, have demonstrated a positive association with appropriate preschool behavior. Particularly, parental involvement has been shown to mediate the relation between economic hardship and childhood externalizing behaviors both during the preschool years (Trentacosta et al., 2008) as well as elementary years (Bolger, Patterson, Thompson, & Kupersmidt, 1995).

In addition to adaptive parenting strategies, certain discipline techniques (e.g., harsh or corporal punishment, coercion techniques) as well as parental inconsistency of adaptive techniques, have demonstrated associations with preschool aggression (Brook, Zheng, Whiteman, & Brook, 2001) and preschool conduct problems (Webster-Stratton & Hammond, 1998). These findings have also been shown for school-aged children yielding additional support for the importance of early intervention. Specifically, discipline strategies, of physical punishment and punitive verbal reasoning were related to increased delinquency and physical aggression across ages (Loeber et al., 1998; Stormshak et al., 2000). Inconsistent discipline has been linked to a higher frequency of disruptive behavior, attention problems, and conduct problems in school-aged children, including community, at-risk, and clinical samples (Barry, Dunlap, Lochman, & Wells, 2009; Shelton et al., 1996; Sutton, Cowen, Crean, & Wyman, 1999).

In addition to parenting techniques, psychological distress of the parent has shown a direct association with child behavior problems beginning in the preschool years (Harden et al., 2000). Studies of Head Start families have reported moderate maternal depressive symptoms as well as a relation to the conduct disturbance in the child (Webster-Stratton & Hammond, 1998). This is congruent with findings in school-aged children (Chronis, et al., 2007).

Several studies have begun to highlight the mediating role of parenting techniques on the relation between maternal internalizing symptoms and child externalizing behaviors in school-aged samples, with few studies focusing on preschool populations. To date, two studies have demonstrated higher levels of maternal anger and depression predicting harsh and inconsistent parenting and demonstrated a cumulative risk for preschool attention difficulties and behavioral dysregulation when considering maternal warmth, responsiveness, and depressive symptoms.

Given the potential negative outcomes associated with early externalizing behavior, as well as the possibility of a positive impact of early intervention, further research to help identify possible points of intervention is essential. Understanding the mediational role that parenting techniques may play in the relation between caregiver risk factors and child outcomes is pivotal because parenting practices are amendable to treatment. The current study examined the associations among primary female caregivers' internalizing symptoms, parenting techniques, and child externalizing behaviors in a Head Start sample.

SUMMARY OF METHODS

Participants were 153 primary female parents/caregivers and their child, who was enrolled in one of three rural Head Start programs. Within the total sample, 89.5% of participants were mothers, 8.5% were grandmothers, and 2.0% were other female caregivers. Children were 43.8% female. Parent-reported child ethnicities were 55.6% African American, 19.6% Caucasian, 18.3% Hispanic/Latino, and 5.9% reported other ethnicity. When appropriate, contact with the participants and questionnaires were in Spanish. Current measures for the study included the Alabama Parenting Questionnaire (Frick, 1991; Shelton et al., 1996), Brief Symptom Inventory (Derogatis, 1993), Behavior Assessment System for Children – 2, Parent Rating Scale (Reynolds & Kamphaus, 2004), and a demographic questionnaire.

MAJOR FINDINGS

All analyses controlled for gender and SES. The current study evaluated the relation of primary female caregivers' internalizing symptoms (Anxiety and Depression composite) and parenting techniques on child externalizing behaviors (hyperactivity, aggression, attention problems). As a whole, the parenting techniques were significant predictors of preschool aggression, hyperactivity, and attention problems. Upon further inspection of the unique contribution of each specific technique, two were found to be significantly related. Inconsistent discipline was significantly related to all three behavioral concerns, whereas parental involvement was significantly related to child hyperactivity and attention problems.

With respect to mediational analyses, inconsistent discipline was a partial mediator of the relation between caregiver internalizing symptoms and child hyperactivity and aggression. This finding suggests that female caregivers with higher levels of internalizing symptoms are less consistent in their use of discipline practices and that this inconsistency, in part, accounts for higher levels of hyperactivity and aggression among their children.

Whereas all three of the child behaviors are considered externalizing behaviors, the findings for attention problems were distinct from hyperactivity and aggression. Parental involvement was the strongest predictor of child attention problems and was supported as a partial mediator in the relation between caregiver internalizing symptoms and child attention problems. These findings suggest that female caregivers with higher levels of internalizing symptoms self-report to be less involved, and this limitation in parental involvement, in part, accounts for higher levels of attention problems among their children.

IMPLICATION FOR PRACTICE

The results of the current study support previous research and current recommendations in child psychology which support parent training in behavior management techniques for children displaying oppositional, defiant, aggressive, early ADHD symptomatology, and non-compliant behaviors. Parenting programs such as, Parent Child Interaction Therapy (Eyberg & Boggs, 1998) and Russell Barkley's (1997) manual of treating defiant children suggest the incorporation of parenting techniques, such as parental involvement, positive parenting, consistent discipline, and use of time out or privilege revocation in place of corporal punishment. One area of consideration for professionals utilizing behavior modification would be to incorporate themes of consistency very early in the therapeutic intervention. Also, the idea of ongoing, formal assessment of parenting skills in home visits is included as a goal of the Parent, Family, and Community Engagement (PFCE) initiative (Administration for Children and Families, 2012). The results of the current study support the idea that, in addition to assessing child behavior, having a baseline measure of parenting techniques or observational information regarding parenting practices could be valuable information clinically to demonstrate empirical change in a program and impact the child's behavior.

Educational professionals often provide a model of structure, limit setting, and empathy to which parents can observe and children can respond. The results of the current study suggest that finding ways to incorporate a parent in the classroom may offer a minimum of two potential benefits. First, a child experiences the parent involved in classroom activity, which is a direct experience of parental involvement. Second, a parent experiences the teacher modeling praise

and limit setting/consequences and the effects of these two interventions. A parent's experiential learning may provide for a possible transition of these skills to the home environment.

Whereas the role of the parent in the classroom may vary greatly on the current classroom activity, a parent may be given the task of observing appropriate behavior and giving teacher-guided feedback to students. In addition, parents may be provided with teacher-guided prompts to engage in conversation with students and practice various positive responses to model parental involvement. Also, to aid with parental practice of consistency, parents may be given one guideline to reinforce during the classroom activity. Practice with praise, distraction techniques, and limit setting for that guideline could be modeled by teacher and practiced by the parent. Finally, praise to parents, by teachers, on these specific skills, would not only continue to model the skill to the parent but also provide encouragement and self-efficacy to parents.

The PFCE and other programs in Head Start have encouraged unique avenues of participation for parents unable to volunteer in the classroom. Policy Councils and Parent Committee Meetings offer one avenue for parents to impart change in the governance of Head Start and their centers. These opportunities, which may be scheduled outside of traditional work hours, empower parents as an advocate, not only for their own child, but also for their center. Given the positive association between empowerment and decreased depressive symptoms, the role of governance in Head Start may directly reduce symptoms of depression in parents participating. Additional benefits may include preparation for the role of parent as advocate for their child during the transition to elementary school (parental involvement) as well as the increased knowledge of the Head Start standards and guidelines may provide additional ideas and ways to change practices in their own home.

The results of the current study also suggest that caregiver mental health may be just as important as the child's mental health for children presenting with high levels of aggression, attention problems, and hyperactivity. Formal education, provided by a professional, regarding the relation of a caregiver's mental health on the child's mental health would be important for parents, who often are the primary participants in behavior modification within the home setting.

Thus, several options are available to professionals in early intervention to address the impact of parental symptomatology based on this study's findings. First, this study provides preliminary evidence to support that current empirically supported methods for behavioral modification of externalizing behavior (e.g., Barkley, 1997; Eyberg & Boggs, 1998; Webster-Stratton, 1998) may also contribute to decreased self-report of depression in caregivers. Second, modifying existing treatments to include parental self-care and/or brief therapeutic intervention to target depressive symptomatology in caregivers may also provide additional impact in the reduction of externalizing behavior. Third, additional individual therapy referrals for a caregiver or information on community programs to support parents may also help to decrease their own mood symptoms, thus impacting the child's behavior.

The results of the current study help to better understand the relation between parent and child behavior, specifically the environmental influences on the child such as parenting techniques and caregiver distress. Further knowledge of the variables that impact the families of young children is essential to our understanding of children's social and academic success.

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