

Parent Self-Regulation, Parenting Quality, and Child Behavioral Outcomes in Homeless Families

Alyssa Palmer
2017 Translation Research Summer Fellowship
Institute for Translation Research in Children's Mental Health (ITR)

First-Year Graduate Student
Institute of Child Development
Phone: 412 – 720 – 1552
Email: palme719@umn.edu
Academic Advisors: Ann Masten and Daniel Berry
ITR Faculty Project Advisor: Daniel Berry
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1. Background. Give a brief overview of the research project. Specify if it is a new research proposal or involves secondary data analysis.

The goals of the proposed project are to determine (1) whether parent adversity is related to parent cognitive emotion regulation and parenting quality in families experiencing homelessness, (2) whether parent cognitive emotion regulation moderates the relationships between adversity and observed parenting quality, and (3) whether the aforementioned associations impact child functioning in addition to the predicted direct influences of parent emotion regulation. This project involves secondary data analysis and behavioral coding of parent child interactions. The sample includes 105 caregivers and their 4- to 7- year old children who were recruited over a summer from two urban homeless shelters for a study on parenting and school readiness.

Parent affect is associated with parenting practices such that negative affect is related to hostile parenting, and positive affect is related to supportive parenting¹¹. However, the study of specific parent regulatory mechanisms and its association with parenting practices is not well studied. This is particularly true for high risk populations, such as homeless families. Parents completed questionnaires about their lifetime adversity and cognitive emotion regulation methods. The cognitive emotion regulation questionnaire³ aims to understand coping styles in emotionally eliciting circumstances. Typically, positive refocusing and positive reappraisal are considered adaptive forms of regulation while self-blame, rumination, and catastrophizing are maladaptive. Resilient functioning after experiences of adversity is associated with more adaptive coping methods⁹.

Parent early adverse experiences are related to parenting quality, such that parents who experienced more adversity demonstrate harsher parenting techniques¹⁰. However, it is clear that adversity does not guarantee lower parenting quality. Cognitive emotion regulation may act as a protective factor for developing effective parenting practices. High parenting quality is one of the most pervasive protective factors for children who are experiencing adversity⁸. Additional work suggests that children model their own regulation after how their parents deal with emotion¹. Parenting quality will be evaluated behaviorally via the Family Interaction Tasks coding system developed at the Oregon Social Learning Center². Measurements of child functioning will be taken from parent and teacher reports on the emotion regulation checklist¹³ and the strengths and difficulties questionnaire⁶. I will fit a taxonomy of covariance structure model to test the theoretical model in Figure 1.

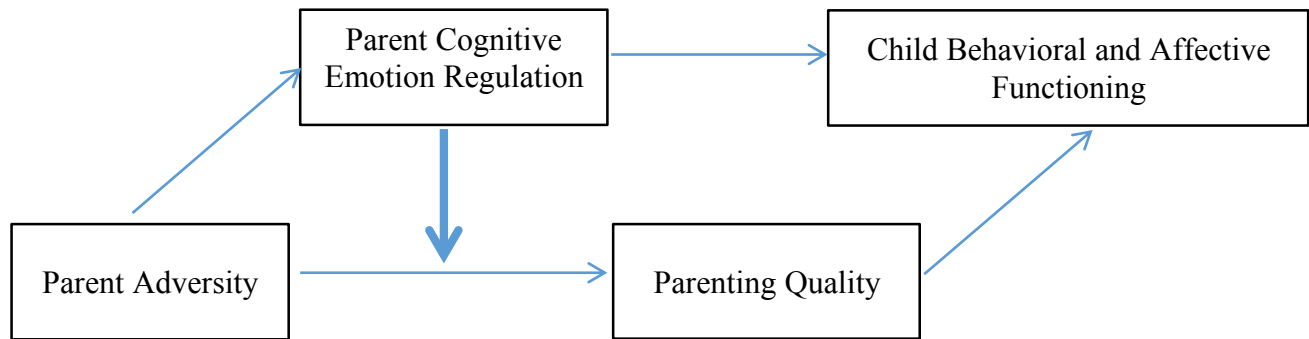


Figure 1. Conceptual model where the bolded arrow demonstrates the moderated mediations I am interested in exploring for this study.

2. Explain how the project contributes to the body of knowledge on translational research in the use evidence-based prevention interventions.

Evidence indicates that positive parent child relationships and high-quality parenting (i.e. problem solving skills, positive involvement, skill encouragement, and low coercive discipline) promote competence in children experiencing adversity⁴. Parents who have difficulty regulating their own emotions - like those currently experiencing homelessness who have previous experiences of adversity - may have a harder time participating in these practices^{7, 10}. Currently, the most effective mechanism for supporting parenting in these contexts is still unclear. I will fill this gap by unpacking a potentially vital mechanism which highlights the importance parent self-regulatory skills and their impact on parenting quality as well as child functioning. Integrating parent self-regulation skills into parenting interventions for other populations facing life challenges has been successful (e.g. ADAPT⁵). My findings will inform subsequent parenting interventions for parents staying in homeless shelters who are struggling with self-regulation in a parenting context.

3. Describe the anticipated outcome of the project (e.g. article, conference presentation, grant application).

The project is intended to culminate in a manuscript to submit for publication and a conference presentation. Moreover, the findings will provide critical groundwork for a planned extension and future grant application aimed at understanding parent self-regulation (behavioral and physiological) during evocative parenting interactions in homeless families.

4. Describe the mentoring relationship that will take place between you and your ITR faculty project advisor endorsing this proposal. If the advisor is not an ITR faculty member, please state the qualifications of the advisor to supervise translational/prevention-related research.

My co-advisors, Dr. Daniel Berry and Dr. Ann Masten, will provide valuable guidance to ensure that this project is completed successfully and with the goal of

informing translational as well as prevention oriented efforts for families experiencing homelessness. Dr. Berry is an ITR faculty member with experience in translational research in low income populations, and the types of quantitative methods my research questions will require (e.g., covariance structure modeling). Dr. Masten, although not an explicit ITR faculty member, has decades of experience working on translational and prevention oriented efforts within Minnesota homeless populations. We believe that it is critical to understand what effects parenting quality in these populations since parenting plays a central role in promoting resilience in children. Children who experience homelessness are at exceptionally high risk for behavioral, psychological, and health related issues¹². Although behaviorally oriented parenting interventions have been effective in promoting positive parent-child relationships and resilient child functioning, it is essential to explore what key factors may help or hinder these efforts. Dr. Berry's and Dr. Masten's expertise combined with my goal of finding ways to promote resilient functioning among these families will assure that this study is a valuable contribution to the field of translational and prevention research.