



Children's resilience in the presence of mothers' depressive symptoms: Examining regulatory processes related to active agency[☆]



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ABSTRACT

The current study examined the proposal that children's processes related to their active and controlled engagement with the environment, their active agency, are critical in promoting their resilience at first grade in the presence of mothers' cumulative depressive symptoms. Using a large sample from the NICHD Study of Early Child Care, the current study demonstrated that: (1) previously found associations between children's individual (i.e., intelligence, low difficult temperament) and environmental (i.e., maternal sensitivity, child care quality) characteristics and their resilience in the presence of mothers' depressive symptoms are partially attributed to their competent functioning in effortful control, self-assertion, and mastery motivation. Effortful control was the most consistent independent predictor of resilience across four developmental outcomes. (2) These agentic processes promoted these children's resilience via additive main effects rather than interactive effects. Findings from both the mediating and moderating analytic approaches converged in terms of underscoring the importance of the agentic system in promoting child resilience in the presence of mothers' depressive symptoms.

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1. Introduction

Despite a plethora of developmental problems among children whose mothers have depressive symptoms (Cummings & Davies, 1994; Downey & Coyne, 1990; Goodman & Gotlib, 1999; Goodman et al., 2011), some of these children appear to develop normally (Compas, Langrock, Keller, Merchant, & Copeland, 2002; Hammen, 2003; Radke-Yarrow & Sherman, 1990). Such resilience seems to be due to individual and environmental characteristics that include children's intelligence, low-irritable temperament, and high quality caregiving environments (Campbell et al., 2004; Garber & Little, 1999; Mezulis, Hyde, & Clark, 2004; Radke-Yarrow & Brown, 1993; Silk, Shaw, Forbes, Lane, & Kovacs, 2006). Yet why these variables predict resilience and what regulatory processes in children mediate their impact is largely unknown. Based on an agentic approach to development (Bandura, 1989), the present study examined the proposal that processes related to children's active and controlled engagement with the environment, their active agency, are critical. Three agentic processes – self-assertion, effortful control, and mastery motivation – were evaluated as potential mechanisms responsible for the impact of individual and environmental characteristics on children's resilience in the presence of mothers' depressive symptoms.

1.1. Children's resilience to mothers' depressive symptoms

Given the expected developmental risks children face when their mothers are high in depressive symptoms (Goodman et al., 2011; NICHD, 1999), why do some children still manifest competence without developing psychological problems or psychopathology (Compas et al., 2002; Hammen, 1991; Luthar, 2003)? Research examining resilience among those children have demonstrated several child individual and environmental characteristics as promising predictors of their resilience in the presence of mothers' depressive symptoms.

1.1.1. Children's individual characteristics

Individual characteristics are thought to promote competence among children who are at developmental risks due to their mothers' depressive symptoms because these characteristics promote their resourceful adaptation to stressful environment (Hammen, 1991). Two such characteristics have been identified. The first is children's temperament. Compared with non-resilient children, resilient children are characterized as less shy, less easily embarrassed, and more socially engaging in temperament (Radke-Yarrow & Brown, 1993; Radke-Yarrow & Sherman, 1990). When children are low in difficult temperament, mothers' depressive symptoms are less likely to be associated with children's behavioral problems, low social competence, unresponsive behavior, and separation distress (Dix & Yan, 2013). The second is child intelligence. Among 5-, 6-, and 10-year-old children of depressed mothers, resilient children have higher IQs than non-resilient children (Radke-Yarrow & Brown, 1993; Radke-Yarrow & Sherman, 1990). Children's problem solving skills, one important facet of intelligence,

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have also been shown to facilitate children's coping with maternal depression (Compas et al., 2002).

1.1.2. Family environment

One prominent resilient factor in the family environment is effective parenting. It has been associated with children's resilience in the presence of mothers' depressive symptoms. Compared with non-resilient children, resilient children receive more sensitive parenting from their depressed mothers (Radke-Yarrow & Brown, 1993). When mothers are high in depressive symptoms, maternal warmth, supportiveness, low intrusiveness, and low negativity minimizes the detrimental impact of their depressive symptoms on children (Campbell et al., 2004; Goodman, Adamson, Riniti, & Cole, 1994; Goodman et al., 2011; Masten et al., 1999; Wang & Dix, 2013).

1.1.3. Childcare environments

Another promising extra-familial environment that may promote children's resilience in the presence of mothers' depressive symptoms is high-quality childcare. High-quality childcare features high sensitivity to children's individual needs, positive affect while interacting with children, and a warm classroom atmosphere (Howes, 2000; Phillips, McCartney, & Scarr, 1987; Burchinal, Roberts, & Riggins, 2000). Although to our knowledge no studies have examined explicitly whether childcare center or school environments ameliorate the negative impact of maternal depression, there is evidence from studies of children living in high contextual risk families that supports this proposal. High quality schooling and school-based supportive ties have been shown to buffer the child from the risks of problematic family environments and close the developmental gap between at-risk children and their low-risk peers (Dubois, Felner, Brand, Adam, & Evans, 1992; Hamre & Pianta, 2005).

1.2. Regulatory processes in the development of resilience

The evidence above suggests that children's resilience in the presence of mothers' depressive symptoms may be dependent on a variety of influences from children's individual and environmental characteristics. Yet to date, much of the research has been descriptive in laying out individual and environmental factors, leaving the proximal regulatory processes unspecified. The notion of regulatory processes as the underlying mechanisms of resilience is in line with prior attempts to address the role of the "fundamental adaptive processes" in human resilience (Cicchetti & Rogosch, 1997; Masten, 2007; Masten & Tellegen, 2012; Radke-Yarrow & Brown, 1993). There has been consensus that competent development is robust in the presence of adversity as long as children's fundamental adaptive processes are maintained (Masten, 2011, 2007; Masten & Coatsworth, 1998). However, even though the importance of fundamental adaptation processes has been proposed repeatedly in resilience research, what specific proximal – motivational, cognitive, and emotional – processes regulate resilience have not been well examined empirically. The current study endeavored to fill this gap and specifically focused on children's agentic regulatory processes.

1.3. Regulatory processes related to children's active agency

Processes related to children's active and controlled engagement with the environment, their active agency, may promote children's resilience in the presence of mothers' depressive symptoms. This proposal is drawn from the agentic theory of human development (Bandura, 1989, 2006) and self-determination theory (Deci & Ryan, 1985, 2002; Ryan, 1993). Both theories assume that individuals are active agents and they are concerned with the degree to which individuals' behaviors are self-motivated or self-determined. Attributes pertinent to these agentic processes might be crucial, counteracting the negative impact of aversive environments (Cicchetti & Rogosch, 1997; Radke-Yarrow &

Brown, 1993). In the current study, three aspects of agentic processes – autonomy/self-assertion, effortful control, and mastery motivation – were examined.

1.3.1. Autonomy/self-assertion

Autonomy is fundamental to growth, development, and personal well-being (Deci & Ryan, 1985, 1995, 2002; Ryan, 1993). Self-assertion is the form of autonomy examined in the current study. Autonomy or self-assertion is low among children of depressed mothers. Mothers' depressive symptoms create harsh, intrusive, and unresponsive parenting environments (Lovejoy, Graczyk, O'Hare, & Neuman, 2000) in which children cannot control the outcomes they receive or elicit support for their needs. In turn, they inhibit active and assertive social engagement with their depressed mothers (Dix & Buck, 2011), display low self-assertion (i.e., low active resistance) and none of the age-related increase in self-assertion that occur for other children (Dix, Stewart, Gershoff, & Day, 2007). However, when children develop autonomy and self-assertion despite mothers' depressive symptoms, they have relatively positive perceptions of themselves, tend to reach out to others, and draw out support from their depressed parents (Radke-Yarrow & Brown, 1993).

1.3.2. Effortful control

Effortful control refers to individual's efficiency of executive attention, including the ability to inhibit a dominant response to perform a subdominant response to plan and detect errors (Eisenberg, Spinrad, & Eggum, 2010; Liew, 2012; Rothbart & Bates, 2006). For children at risks for developing mood disorders, such as children of depressed mothers (Goodman & Gotlib, 1999; Goodman et al., 2011), effortful control and self-regulation might be critical in reducing internalizing problems or mood disorders (Eisenberg et al., 2009; Luthar, Cicchetti, & Becker, 2000). When stress is high, children high in effortful control are able to shift their attention as needed, use cognitive distraction as a coping strategy, regulate the tendency to react negatively to stressful stimuli, and use focused attention to assist their planning behaviors (Eisenberg et al., 2009). For children of depressed mothers, given that their effortful control (or self-regulation in a broad sense) might be undermined (Gartstein & Fagot, 2003; Goodman & Gotlib, 1999; Lengua, Honorado, & Bush, 2007), the development or maintenance of effortful control may promote their resilience in the presence of adversities other than mothers' depressive symptoms (Eisenberg et al., 2003, 2004).

1.3.3. Mastery motivation

Mastery motivation is a critical component of children's emerging agency and competence (Bandura, 1989; Masten & Coatsworth, 1998; Ryan & Deci, 2000). It is children's experience of interest, enjoyment, focused attention, and persistence in manipulating and engaging tasks even in the face of challenge (MacTurk & Morgan, 1995; Messer, 1993). Research on child resilience has documented that constructs related to mastery motivation (e.g., achievement motivation, mastery-oriented behaviors, and intrinsic motivation) promote children's resilience (Langrock, Compas, Keller, Merchant, & Copeland, 2002; Radke-Yarrow & Brown, 1993). When coping with the stressful environment, mastery-related motivation and behaviors are more stable predictors of resilience than are other predictors (e.g., agreeableness, being lovable). This is thought to occur because children high in mastery motivation can shift their attention from the daily stress in the family environment to engaging in problem-solving strategies and solutions, mastery-related activities, and achieving mastery goals (Langrock et al., 2002; Radke-Yarrow & Brown, 1993). In the current study, the relations between children's mastery motivation and their resilience in the presence of mothers' depressive symptoms were examined.

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