

## Article

# Maternal Parenting Practices and Psychosocial Adjustment of Primary School Children

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**Abstract:** This study was aimed at evaluating the associations between maternal parenting practices (positive, negative/inconsistent, and punitive), children's difficulties (such as conduct problems, emotional symptoms, peer problems, and hyperactivity), and prosocial behaviors. Participants were 131 Italian mothers of primary school children; mothers were aged between 26 and 52 years ( $M = 38.38$ ,  $SD = 5.46$ ); children (54% girls) were aged between 6 and 10 years ( $M = 7.15$ ,  $SD = 0.98$ ). Mothers completed two scales assessing their parenting practices and their children's psychosocial adjustment. A path analysis was run to test the hypothesized model. The results showed the following: (a) maternal positive parenting was negatively and significantly related to children's conduct problems and hyperactivity, and positively and significantly to children's prosocial behavior; (b) maternal negative/inconsistent parenting was positively and significantly related to children's conduct problems, emotional symptoms, and hyperactivity; (c) maternal punitive parenting was positively and significantly related to children's conduct problems and emotional symptoms. Moreover, the results showed that, according to the mothers' perceptions, boys tended to exhibit higher levels of hyperactivity and peer problems and lower levels of prosocial behaviors than girls. Overall, this study highlights the unique role of different maternal parenting practices in the psychosocial adjustment of primary school children.

**Keywords:** parenting; conduct problems; peer problems; prosociality; children's adjustment; primary school



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## 1. Introduction

Children's psychosocial adjustment refers to their ability to adapt and respond positively to environmental demands, as well as to operate efficiently within the context in which they live. In particular, it encompasses effective functioning across multiple dimensions of children's lives, including the ability to regulate their own emotions and behaviors, as well as the capacity to build positive relationships (Achenbach and Rescorla 2000; Madariaga et al. 2014). Positive adjustment is exemplified through the exhibition of prosocial behaviors, denoting a child's adeptness in undertaking actions that yield benefits for others. These actions encompass acts of assistance, collaboration, and sharing, all stemming from the child's

possession of an empathetic and supportive disposition (Brownell et al. 2009; Dunfield and Kuhlmeier 2013; Eisenberg 2003). Instead, the emergence of externalizing problems in children, such as aggression, inattention, and hyperactivity, is a marker of negative adjustment, which is often connected to severe negative outcomes in the long term (Campbell et al. 2000). For instance, children reporting conduct problems and aggression have been found to have difficulties in interacting with their peers (Haas et al. 2018; Laird et al. 2001). Children's poor adjustment can also manifest through the presence of internalizing symptoms, such as emotional difficulties, anxiety, depression, or social withdrawal (Achenbach and Rescorla 2001). To note, emotional regulation is strongly correlated with adjustment as it enables children to effectively navigate a variety of social situations, both positive and conflictual (Cole et al. 2009; Eisenberg et al. 2010; Lewis et al. 2010).

With regard to maladjustment problems, it should be noted that they emerge more critically in school age, negatively impacting children's experience within the school context (van Lier et al. 2012). In particular, they seem to prevent children from developing positive relationships with others (Barker et al. 2008; Cook et al. 2010; Fanti and Henrich 2010) and to compromise their academic achievement (Van der Ende et al. 2016). This could lead children to experience feelings of vulnerability, guilt, or isolation (Cole et al. 2001), ultimately increasing the risk of the emergence of a psychopathological condition (Danneel et al. 2019).

It is, therefore, evident how important it is to promote a good adjustment among children, especially those of school age, to enhance their well-being and to avoid risk conditions (Domitrovich et al. 2017) through the development of adequate social and emotional competencies (Hoffman 2000; van der Storm et al. 2022). The literature contains extensive studies on factors that can promote children's adjustment, making it clear that parenting plays a fundamental role in this process (Garcia et al. 2020; Grusec and Davidov 2010; Sanders and Mazzucchelli 2017; Steinberg and Silk 2002).

### 1.1. Maternal Parenting Practices and Children's Psychosocial Adjustment

Parents play a vital role in children's development (Bornstein et al. 2018; Laible et al. 2017), and research has identified some parenting practices and examined their impact on children's social-emotional development (Bauer et al. 2021; Okorn et al. 2022; Speyer et al. 2022), especially maternal parenting practices. Such specific focus on maternal parenting might be attributed to the fact that, even in contemporary societies, in spite of societal changes, mothers continue to occupy a central role in the rearing of children compared to fathers (Greene and Grimsley 1990; Noller and Callan 1990). This trend is particularly pronounced in Italy where mothers are still seen as the fulcrum within families (Rosnati 1996; Scabini 2000). Due to the multifaceted responsibilities shouldered by Italian mothers, the present study, like others in this field, investigated maternal parenting practices and their role in children's adjustment.

Maternal parenting practices refer to specific behaviors exhibited by mothers in the care of their children, which seem to have a direct effect on children's adjustment (Raya et al. 2013; Yaffe 2023; Salavera et al. 2022). They are generally divided into three broad categories: *positive*, *negative/inconsistent*, and *punitive parenting*. Maternal positive parenting is characterized by constructive interactions with children; its key attributes are warmth, supportiveness, autonomy support, and responsiveness to offspring's feelings and needs (Bornstein et al. 2018). Maternal negative/inconsistent parenting is characterized by the lack of consistency in educational practices with parents exhibiting contradictory behaviors, such as threatening punishment that is not actually carried out, disregarding children's needs (Benedetto and Ingrassia 2014), or displaying less responsiveness in caregiving (Ward and Lee 2020). Maternal punitive parenting entails behaviors which are based on verbal and physical hostilities (Zubizarreta et al. 2019).

Research has evidenced that positive parenting is associated with children's development of a better ability to recognize and control their own emotions and behaviors (Baker 2018; Fainsilber Katz et al. 2016), and it promotes children's prosocial skills (Bagán et al.

2019; Sanders 2012). Positive parenting is, thus, associated with better children's adjustment and psychological well-being (Parent et al. 2016). Conversely, punitive, hostile, or rejecting parenting practices tend to negatively impact the quality of children's lives (Chang et al. 2003); they also tend to be related to social isolation or bullying perpetration (Hong et al. 2017). In addition, they tend to increase the risk of developing internalizing and externalizing problems (Flouri et al. 2017; Zubizarreta et al. 2019). Similarly, negative/inconsistent parenting is correlated with children's maladjustment, in terms of problematic behaviors and peer rejection (Mak et al. 2020).

Overall, it becomes clear how fundamental it is, also for the design of prevention or intervention programs, to investigate the association between maternal parenting practices and children's psychosocial adjustment, particularly primary school children. However, this relation is an understudied topic, which warrants further exploration.

### 1.2. Gender Differences in Children's Psychosocial Adjustment and Relationships with Parents

Several studies have shown gender differences in children's psychosocial adjustment. It has been evidenced that girls tend to have better perception and recognition of emotional expressions compared to boys (Boyatzis et al. 1993; Piqueras et al. 2019). Regarding emotional problems, studies have consistently reported that girls exhibit higher levels of internalizing disorders, such as anxiety and depression, manifested through self-dissatisfaction, shyness, and heightened feelings of sadness, distress, or shame (e.g., Del Barrio and Carrasco 2016; García-Olcina et al. 2014; Losada et al. 2017). With regard to externalizing behavioral problems, such as aggression, disruptive behaviors, or conduct problems, it seems that they are much more common among males (Bierman and Sasser 2014; Dishion and Patterson 2006; Olivier et al. 2018; Srinath et al. 2005). On the contrary, it has emerged that girls exhibit higher levels of empathic concern and prosocial behavior than boys (Longobardi et al. 2019; Lonigro et al. 2014; Van der Graaff et al. 2018).

It has also been demonstrated that experiencing peer problems, such as victimization, has a stronger impact on emotional difficulties in girls, and that the conjunction of victimization and parental rejection exacerbates behavioral difficulties among girls (Havewala and Wang 2021). A recent study has also revealed that shy children have more difficulties in their peer relationships when their bonds with their parents are highly conflictual, and that parental support conditions the association between shyness and peer interactions only among girls (Bullock et al. 2022).

Furthermore, it has also been found that parents may adopt different parenting practices according to their children's gender (Garside and Klimes-Dougan 2002). For instance, it has emerged that some parents treat daughters differently than sons in terms of parental control (Endendijk et al. 2016). Parents tend to use corporal punishment more with male children (Tamis-LeMonda et al. 2009; Kochanska et al. 2009) and tend to adopt more autonomy-supportive attitudes with girls (Mandara et al. 2012). Considering these findings, it seemed useful to explore the role played by gender in maternal parenting practices and children's psychosocial adjustment.

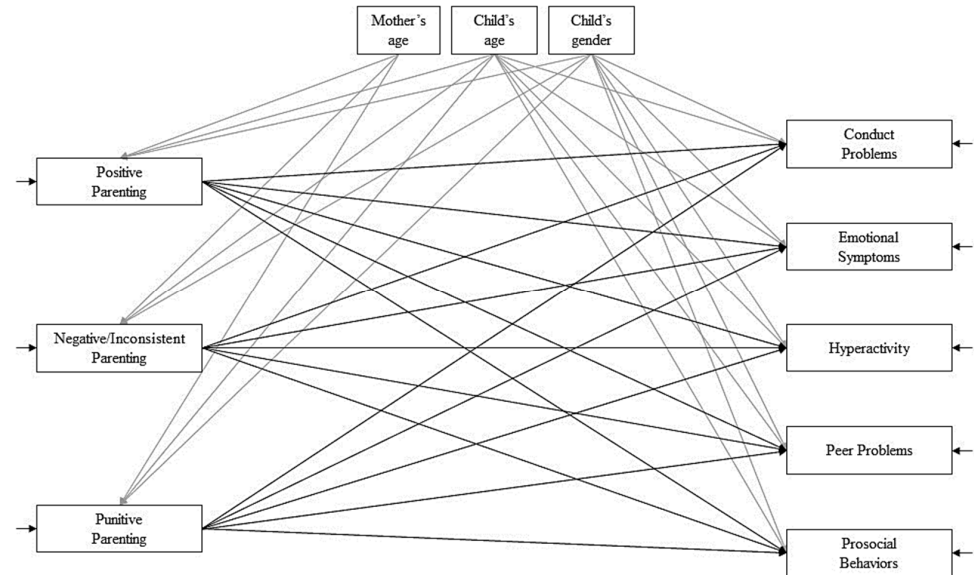
### 1.3. The Present Study

Maternal parenting practices have generally been found to have a strong impact on children's psychosocial adjustment (Cucinella et al. 2022), but the role that different maternal parenting styles might play on children's outcomes is still unclear. In order to fill this gap, the general purpose of the current study was to investigate the associations between positive, punitive, and negative/inconsistent maternal parenting practices and the psychosocial adjustment of Italian primary school-aged children.

In light of the above-mentioned empirical findings, maternal positive parenting was expected to be negatively related to conduct problems, emotional symptoms, peer problems, and hyperactivity, but expected to be positively related to prosocial behavior. It was also surmised that maternal negative/inconsistent parenting would have a positive association with conduct problems, emotional symptoms, peer problems, and hyperactivity, but a

negative association with prosocial behavior. Finally, it was hypothesized that maternal punitive parenting would be positively related to conduct problems, emotional symptoms, peer problems, and hyperactivity, but negatively related to prosocial behavior.

The hypothesized model is reported in Figure 1. In order to control for any effects of the child’s gender, child’s age, and mother’s age, they were assumed as covariates in the model.



**Figure 1.** Hypothesized model of the relations among maternal parenting practices and children’s psychosocial adjustment. For clarity purposes, the correlations between parenting dimensions and those between the child’s adjustment dimensions are not reported. Grey lines refer to the effects of covariates on study variables.

**2. Results**

*2.1. Preliminary Analyses*

Mean, standard deviation, skewness, and kurtosis of study variables, and Pearson correlation coefficients, are displayed in Table 1. The data had a normal univariate distribution, with skewness and kurtosis values being approximately in the range of  $-1.0$  and  $+1.0$  (Muthén and Kaplan 1985), with the only exception of positive parenting and peer problems that were moderately skewed (Lei and Lomax 2005).

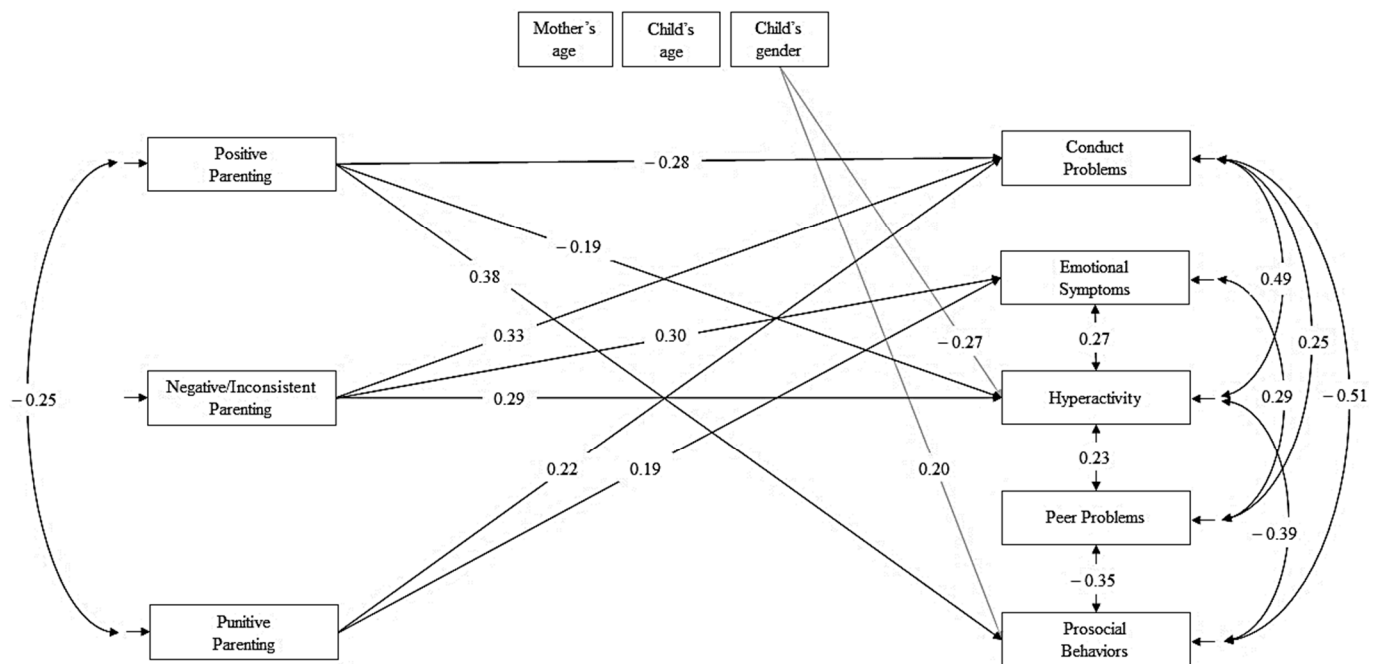
**Table 1.** Mean, standard deviation, skewness, kurtosis, and Pearson correlation coefficients of study variables.

	1	2	3	4	5	6	7	8	9	10
1. Positive Parenting	-									
2. Negative/Inconsistent Parenting	-0.070	-								
3. Punitive Parenting	-0.251 **	0.150	-							
4. Conduct Problems	-0.362 ***	0.387 ***	0.352 ***	-						
5. Emotional Symptoms	-0.233 **	0.321 ***	0.262 **	0.269 **	-					
6. Hyperactivity	-0.265 **	0.293 ***	0.252 **	0.587 ***	0.389 ***	-				
7. Peer Problems	-0.139	0.165	0.167	0.314 ***	0.353 ***	0.326 ***	-			
8. Prosocial Behavior	0.426 ***	-0.126	-0.232 **	-0.588 ***	-0.149	-0.505 ***	-0.407 ***	-		
9. Child’s Age	-0.045	-0.114	-0.103	-0.075	0.091	-0.033	0.002	0.034	-	
10. Mother’s Age	-0.123	-0.051	0.023	0.096	-0.150	-0.008	-0.027	-0.245 **	0.125	-
Mean	4.474	2.466	1.882	1.654	1.611	2.241	1.650	3.999	7.094	38.385
Standard Deviation	0.425	0.656	0.595	0.567	0.568	0.902	0.606	0.866	0.974	5.456
Skewness	-1.262	-0.051	0.827	1.197	1.342	0.637	1.486	-0.775	0.379	0.017
Kurtosis	2.810	0.304	0.416	1.176	1.555	-0.095	2.831	0.012	-0.714	-0.405

\*\*  $p \leq 0.01$ ; \*\*\*  $p \leq 0.001$ . Positive parenting was negatively and significantly related to punitive parenting and problematic behaviors (with the exception of peer problems) but positively and significantly related to prosocial behavior. Negative/inconsistent parenting was positively and significantly related to problematic behaviors (with the exception of peer problems). Punitive parenting was positively and significantly related to problematic behaviors (with the exception of peer problems) but negatively and significantly related to prosocial behavior.

## 2.2. Model of Relations among Maternal Parenting Practices and Children's Psychosocial Adjustment

The hypothesized model had a good fit to the model:  $SB\chi^2 = 13.61$ ,  $df = 7$ ,  $p = 0.06$ ,  $CFI = 0.972$ ,  $RMSEA = 0.085$  (90% C.I. = 0.000, 0.152),  $SRMR = 0.038$ . The standardized solution is shown in Figure 2. The results showed that positive parenting was negatively and significantly related to conduct problems and hyperactivity but positively and significantly related to prosocial behavior. Negative/inconsistent parenting was positively and significantly related to conduct problems, emotional symptoms, and hyperactivity. Punitive parenting was positively and significantly related to conduct problems and emotional symptoms.



**Figure 2.** Statistical model of the relations among maternal parenting practices and children's psychosocial adjustment. Standardized solution. For clarity purposes, not significant parameter estimates (with  $p > 0.05$ ) are not reported. Grey lines refer to the effects of covariates on study variables.

## 3. Discussion

The current study was aimed at investigating the associations between maternal parenting practices and children's psychosocial adjustment. In particular, it examined the associations of positive, punitive, and negative/inconsistent maternal parenting with conduct problems, emotional symptoms, peer problems, hyperactivity, and prosocial behaviors in primary school children. The results for each of them are presented and discussed separately below.

The hypothesis that positive parenting would be negatively related to children's conduct problems, emotional symptoms, peer problems, and hyperactivity but positively related to their prosocial behaviors was only partially supported. Indeed, the current findings showed that maternal positive parenting was negatively and significantly related only to conduct problems and hyperactivity in children, and that it was positively and significantly related to prosocial behavior among children. The results also evidenced that mothers who reported warm and supportive parenting tend to perceive their children as more prosocial and less problematic from a behavioral point of view. These findings, in part, are consistent with the literature highlighting how maternal positive parenting is related to optimal psychosocial adjustment in children (Sanders and Mazzucchelli 2017). This could be argued that children with responsive and sensitive mothers are likely to benefit from such positive models and, thus, are more likely to report better social, emotional, and behavioral outcomes (Ward and Lee 2020).



The hypothesis that negative/inconsistent parenting would be positively related to children's conduct problems, emotional symptoms, peer problems, and hyperactivity but negatively associated with their prosocial behaviors was only partially confirmed. Indeed, results revealed that negative/inconsistent parenting was positively and significantly related only to children's conduct problems, emotional symptoms, and hyperactivity. In particular, it seems that mothers who exhibit contradictory behaviors in their parenting tend to perceive that their children have greater conduct problems, emotional symptoms, and attention difficulties. These findings are consistent with those of previous studies that highlighted the negative consequences of such parenting practice on children's adjustment and well-being (Mak et al. 2020; Parent et al. 2016).

Also, the third hypothesis—that punitive parenting would be positively related to children's conduct problems, emotional symptoms, peer problems, and hyperactivity but negatively associated with their prosocial behaviors—was only partially supported. Current findings evidenced that punitive parenting was positively and significantly related only to conduct problems and emotional symptoms. These findings are partially in line with previous studies (Pinquart 2017; Zubizarreta et al. 2019).

It is interesting to note that no significant association resulted between maternal parenting practices and peer problems. Globally, these results show that children's conduct problems, their difficulties in attention and concentration, and in managing emotionally stressful situations, represent the aspects of psychosocial adjustment (as investigated in this study) of primary school children more closely related to dysfunctional maternal parenting practices. It would seem that the impact that such maternal parenting practices have on children's adjustment remains limited to the family environment, not invading the world of peer interactions. In fact, almost all the items of subscales used in the study to assess these dimensions are based on the adult-child relationship.

Furthermore, this study highlighted a negative correlation between mothers' age and children's tendency to prosocially behave. Differences in cultural background and values system between older and younger generations of mothers might explain such trend. It might be possible that younger mothers give more relevance to the promotion of prosocial competencies in their children, such as perspective taking and others-oriented behaviors. This relation should be further explored.

Finally, no significant gender differences in children's psychosocial adjustment were found, with the only exception of hyperactivity and prosocial behavior. Particularly, mothers tended to perceive girls as more prosocial and less hyperactive than boys.

The results of this research should be interpreted in light of some limitations. Firstly, the sample was small and mostly composed of Italian mothers from an urban community. Future studies should include larger and ethnically different samples which might allow for cross-cultural comparison. Secondly, internal reliability of some scales was not optimal in the study, even though the measures used were well-established scales. Thirdly, only maternal perceptions were considered to detect the psychosocial adjustment of children. Although mothers might have a valuable point of view on their children's behavior, future research should involve other relevant informants, such as fathers, teachers, peers, and siblings, to get a more nuanced picture of children's psychosocial adjustment. Finally, the cross-sectional design of this study impeded establishing the direction of the associations between maternal parenting practices and children's psychosocial adjustment, which might also be bidirectional. Thus, future studies should opt for a longitudinal design as it might help shed light on temporal order and causality among studied variables.

## 4. Materials and Methods

### 4.1. Participants

Participants were 131 mothers of primary school children, aged from 26 to 52 years ( $M = 38.38$ ,  $SD = 5.46$ ). They provided demographic information about themselves and their family. Most of the participants (93%) were Italian; 94% of mothers were married or cohabiting, while 6% of them were separated, divorced, or widowed. As touching

participants' education, 9% of mothers had the lowest level of education (primary school), 42% had the middle level of education (middle school), 21% had the high school level of education, 21% had the highest level of education (university), and 7% had no qualification. Regarding occupational status, 62% of mothers were unemployed (they were housewives), whereas 38% had work. Children (46% boys) for whom they responded were between 6 and 10 years of age ( $M = 7.15$ ,  $SD = 0.98$ ) and were attending a primary school in Palermo (Southern Italy).

#### 4.2. Procedure

A convenience sample was recruited for the research. Mothers were selected for participation from the primary schools attended by their children. Participants who expressed interest were provided with detailed information regarding the research objectives. Involvement in the study was entirely voluntary, and those who chose to participate were individually provided with the questionnaires by their children's teachers. The questionnaires were completed at home.

The present study followed the ethical standards of the 1964 Helsinki Declaration and its later amendments or comparable. Participants were informed that they could withdraw at any time and that their privacy and anonymity were guaranteed. The research obtained the authorization of the local ethics committee.

#### 4.3. Measures

**Children's psychosocial adjustment.** Mothers were administered the Strengths and Difficulties Questionnaire (SDQ; Goodman 1997; Italian validation by Marzocchi et al. 2002). For the current study, 22 items of the original scale were used. These items were articulated in 5 subscales assessing the presence of (a) *Conduct Problems* (5 items, e.g., "Often has temper tantrums or hot tempers"); (b) *Emotional Symptoms* (5 items, e.g., "Many worries, often seems worried"); (c) *Hyperactivity* (3 items, e.g., "Restless, overactive, cannot stay still for long"); (d) *Peer Problems* (5 items, e.g., "Rather solitary, tends to play alone"); (e) *Prosocial Behaviors* (4 items, e.g., "Considerate of other people's feelings"). Mothers rated their answers by using a 5-point Likert scale, ranging from 1 (Not true) to 5 (Always true). In the present study, the scale had adequate to good internal reliability: Cronbach's alpha values ranged from 0.54 (Emotional Symptoms subscale) to 0.75 (Prosocial Behaviors subscale).

**Maternal parenting practices.** A scale from the Alabama Parenting Questionnaire—Preschool Revision (APQ-PR; Clerkin et al. 2007; Italian adaptation by Benedetto and Ingrassia 2014) was adopted. This scale consists of 16 items divided in 3 subscales: (a) *Positive Parenting*, which evaluates parents' encouraging behaviors, positive reinforcement, and appropriate physical interactions with their children (7 items, e.g., "Let your child know when he/she is doing something well"); (b) *Negative/Inconsistent Parenting*, which evaluates the lack of consistency in educational practices (5 items, e.g., "You threaten to punish your child and then you actually don't do it"); (c) *Punitive Parenting*, which evaluates the use of corporal punishment when the child behaves inappropriately (4 items, e.g., "Spank your child when he/she has done something wrong"). Mothers rated their answers by using a 5-point Likert scale, ranging from 1 (Never) to 5 (Always). In the present study, the scale had adequate to good internal reliability: Cronbach's alpha values ranged from 0.58 (Punitive Parenting subscale) to 0.66 (Positive Parenting subscale).

#### 4.4. Plan of Data Analysis

First, descriptive statistics of the study variables were calculated. Specifically, means, standard deviations, skewness, and kurtosis were computed. Afterward, Pearson correlation coefficients were computed, which allowed us to evaluate the bivariate associations of the study variables. Finally, in order to test the hypothesized model, a path analysis was run using *Mplus 7* (Muthén and Muthén 2012). Since the variables exhibited a multivariate non-normal distribution (normalized Mardia's coefficient = 21.01,  $p < 0.001$ ), the robust Maximum Likelihood (MLR) estimation method was used which adjusts standard errors of

parameter estimates and chi-square statistics ( $SB\chi^2$ ) to account for non-normality (Satorra and Bentler 1994).

The model fit was assessed using a range of goodness-of-fit statistics and an evaluation of the appropriateness of the model parameters. The  $\chi^2$  statistic was used to assess the sample, as well as an implied mean and covariance matrix with a good-fitting model indicated by a non-significant result. Moreover, well-known goodness-of-fit indices and their associated cut-offs were used to evaluate model fit (e.g., Kline 2015): Comparative Fit Index (CFI)  $\geq 0.90$  for acceptable and  $\geq 0.95$  for good fit, Root Mean Square Error of Approximation (RMSEA)  $\leq 0.08$  for acceptable and  $\leq 0.05$  for good fit, and Standardized Root Mean Squared Residuals (SRMR)  $\leq 0.10$  for acceptable and  $\leq 0.05$  for good fit.

## 5. Conclusions

Despite these deficiencies, the current study provides empirical support to the hypotheses that maternal parenting practices are associated with some dimensions of psychosocial adjustment of primary school children. In line with Social Learning Theory (Bandura 1973; Masud et al. 2019), this work highlighted that mothers are taken as models by their children, who learn their behaviors by imitating such relevant socializing agents. Consequently, maternal positive parenting is likely to be associated with children's high levels of prosocial behaviors and low levels of conduct problems, whereas harsh discipline and negative parenting are likely to be associated with high rates of conduct problems.

The current findings have useful practical implications. In detail, they suggest that interventions, like parent training programs, should support mothers in the exercise of their parenthood, make them aware of the potential impact of their behaviors and affections on the adjustment of their children, and help them to improve the practices which they adopt in their parenting role and to learn new ones. In doing so, such programs might increase mothers' sense of effectiveness as parents, as well as their confidence in their own abilities, and might stimulate them to build more appropriate interactions with their children. Also, these parent-training programs could promote a positive psychosocial adjustment in school-aged children by fostering the development of adequate social and emotional competencies and mitigating the risk of occurrence of emotional-behavioral difficulties.

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**Institutional Review Board Statement:** The study was conducted in accordance with the Declaration of Helsinki and approved by the Institutional Review Board (or Ethics Committee) of NAME OF INSTITUTE blinded for review (protocol code, 76/2022; date of approval, 31 March 2022).

**Informed Consent Statement:** Informed consent was obtained from all participants involved in the study.

**Data Availability Statement:** All data sets are available upon request from the corresponding author.

**Conflicts of Interest:** The authors declare no conflicts of interest.

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