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Social Interaction and Development Lab: Parenting and Trajectories of Self Development in Brazil

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Parenting and self development

How do we develop our sense of self? What are the biological and cultural factors that form the basis of that process? Does it matter that we live in different contexts? What is the role of parenting in this process? These are some of the questions that our research team has been addressing, focusing on Brazilian contexts.

Keller (2007) discusses typical ontogenetic trajectories for the development of self that lead to different orientations in accordance with the importance attributed to the dimensions of separation and relationship as highlighted by Kağitçibaşı (2007). These orientations are defined as independent, interdependent and autonomous-relational self, and are derived from different models of parental contact/care for their children. Many studies in literature argue that we have to consider those interactional aspects that are valued more highly in a specific cultural context, tending to produce more autonomy or more relatedness. H. Keller and Ç. Kağitçibaşı, among others, have conducted important work in this area (i.e. Keller, 2007, 2012; Kağitçibaşı, 2007, 2012) and although their models present some differences, we can say they agree that autonomous values are predominant in urban Western contexts while relational values are most prevalent in rural and small villages, and in traditional societies. The literature derived from these models has indicated that parents’ educational level is also an important variable positively related to emphasis on autonomy.

Studying parenting and self development in Brazil

In an effort to contribute to the literature on the dynamics of autonomy and relatedness in developmental contexts, and
trajectories of development of the self, several studies have been conducted by a national Brazilian network of researchers. In a recent paper (Seidl-de-Moura, Carvalho & Vieira, submitted), we have discussed data from studies that focused on: mothers’ socialization goals, beliefs about practices, “narrative envelope” or speech to their babies and ideas about their children (17 to 22 months old), and children’s development (self-recognition and self-regulation in toddlers). Different methods were used and 16 different contexts were studied. Since Brazil is the largest South American country and exemplifies the “Majority World” (Kağıtçibaşı, 2007), the studies presented may contribute to the literature on the nature of parental belief systems. In general, we have observed that both autonomy and relatedness are valued by Brazilian mothers in their conception of their children, their narrative style, their socialization goals, and their practices. Based on empirical evidence, we can argue that the developmental trajectory of autonomous-related selves depends somewhat on social privilege. This is corroborated by our results in a study with children focused on self-recognition and self-regulation (Seidl-de-Moura et al., 2012). However, we can observe that this model cannot be considered as presenting a fixed or unique form. It shows variations based on sociodemographic and cultural variables. One important example of these variables is parental educational level.

Brazil is mostly influenced by Latin Catholic values that may favor a culture of relatedness, but it has a high urbanization trajectory, that may be promoting changes toward sharing the values of other Western urban societies, such as the importance of self-sufficiency. Brazil’s 190,732,694 inhabitants live mostly in urban centers (84%) (Brazil, 2012), an increase from an index of 44.7% in the 1960s.

The country has an index of income concentration (Gini) of 53.9. Brazilian HDI (.638) has been growing equally in three dimensions: health, education and income. Three main populations constitute the Brazilian people: the Portuguese colonizers, the native people from different ethnic groups, and Africans from various regions brought as slaves until the end of the 19th century. Several groups of immigrants from all continents were later integrated, forming a diverse society. The influences of those groups vary differentially across the country.

The five geographic regions have diverse ecological characteristics and a variety of socioeconomic and cultural profiles. Social differences can be identified between regions, urban and rural populations and social classes; but, due mainly to urbanization and television, some relative homogeneity in cultural models can be identified, tending to minimize the differences related to living conditions. The predominant form of family organization is the nuclear family. Although he mother is usually the main caretaker, there is an increasing participation of women in the work force. Alternatives to the exclusive care of children by the mother include grandmothers, nannies (in the middle and high classes), and day-care centers.

Based on the results of our previous studies, we decided to investigate, in an ongoing project, some aspects of the developmental trajectory we had identified (favoring the development of autonomous related selves) within the city of Rio de Janeiro, conducting two major studies.

Study 1 examined families composed of fathers; mothers; sons or daughters (18 to 25 years old); and one of the grandparents. We chose this age range because young people live at home with their parents until this time, and even later. Kağıtçibaşı’s (2007) scales (interdependency, autonomy and related autonomy) translated, adapted and validated to our population, are being used. As our previous studies were of mothers and small children, we expanded the age range and included fathers and grandparents. The aim of this study is to analyze family characteristics related to sociodemographic factors, and the transmission of autonomy and interdependency values across generations.

The participants so far comprise 60 families. Fathers’ age range is from 37 to 74 years (M = 52.4) and the majority of them have completed the undergraduate educational level (38.3%) or the high school level (20%). Mothers’ educational level is distributed between 33.3% for the undergraduate level, 18.3% for high school and 18.3% for the graduate level. Their age varies from 35 to 61 years (M = 49.47). The mean age of sons and daughters is 21.05 years, with 24 males and 36 females. Most of the mothers have an incomplete undergraduate (56.7%) or high school (18.3%) education level.

Preliminary results confirm the general tendency of previous Brazilian research: the valuing of related autonomy. Paired-sample t tests show that the highest score of mothers, fathers and their children is in the related autonomous self scale. Correlations between fathers’ and mothers’ results and the sons’ and daughters’ scores in the inventories indicate an ongoing correlation between their reported values, even when the children are adolescents and young adults. Father: Father interdependency x Child interdependency (r = -.27); Father related autonomy x Child related autonomy (r = .33). Mother: Mother autonomy x Child autonomy (r = .24); Mother autonomy x Child related autonomy (r = .33). These results provide some data about developmental trajectories beyond infancy and on the generational aspects of value transmission. We still have investigated few families with grandparents, so comparisons between the three generations have not been completed yet.

Study 2 aims to verify parenting values among different young children’s caretakers. We considered the mothers of babies who are less than 12 months old and the second main caretaker of the child (grandmother, nanny or day-care center teacher), with 20 pairs of each combination. They were interviewed using five pictures representing Keller’s (2007) parental care systems (primary care, body contact, body stimulation, object stimulation and face-to-face interaction) [See figure 1]. They were asked to put the pictures in order of importance and to talk freely about each. They also filled out Kağıtçibaşı’s scales. Infants’ average age was eight months, with 58.6% girls and 41.4% boys. Mothers’ mean age was 32 years, and most had a university education. They spent 11 hours/day, on average, with their babies. The other caretakers were 45 years old, on average; and had both incomplete and complete high school educational levels. They took care of the babies 10 hours/day, on average.

Mean scores of related autonomy were the highest for all the four groups. The two parental systems portrayed that were chosen most frequently were body contact and face-to-face interaction. This indicates (Keller, 2007) that they prioritize equally systems that value autonomy (face-
to-face interaction) and interdependence (body contact), a trajectory that may foster the development of autonomy-related selves. These results are interesting if we consider the difference between generations (mothers and grandmothers) and educational levels (mothers and nannies). We were also surprised at the congruence of values between the mothers and the daycare center workers. We expected that autonomy would be most valued in this group.

The analyses of the caretakers’ discourse about each picture also showed interesting aspects. Body Contact elicited the most congruent discourses, with the participants talking about the same themes: the importance of touch, safety/security, warmth and affection. Regarding the face-to-face pictures, all types of caregivers showed appreciation of verbal communication, the recognition of the mother by the child, and the primacy of affection. Mothers and grandmothers associate these images with calm/tranquility and the maternal role. Mothers and nannies talked about play linked to face-to-face interaction; and mothers and caregivers from day-care centers mentioned shared attention.

Caretakers’ answers on a questionnaire focusing on beliefs about the development of children’s capacities to express emotions show that 58.6% of the mothers think that children must learn to control their emotions in the first three years of life (characteristic of societies that value relation more than autonomy), but only 36.2% of the other caretakers think the same way. All participants agree that it is important for a child to smile, from around two months, and that smiles arise from emotional expression. The other caretakers believe that emotional expression begins, in general, later than the ages reported by mothers. Joy was the emotion that was expected the earliest (by mothers and caretakers); they believed anger and disgust are expressed later (the three are considered basic emotions, innate).

Final considerations

The two studies included here report some findings on parenting and the dimensions of autonomy and interdependence in Brazilian samples of parents and other caretakers. They complement previous investigations done by colleagues in our research network. The inclusion of parents of adolescents and young adults in study 1 contributes to understanding the developmental trajectories beyond infancy. Study 2 deals with the fact that small children in Brazil are cared for not only by mothers but also by second caretakers, mainly grandmothers, nannies or daycare center educators. If we are interested in parenting and developmental trajectories in cultural contexts, we have to consider diverse caretakers and their values and also different moments of ontogeny. Further studies (especially in Majority World countries) are needed to understand parenting in different contexts, the dynamic of autonomy and interdependency and the development of the self.

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Note

1. For more detailed information about our research group, our publications and projects, our website at www.desin.org can be visited.

References


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Enhancing Positive Parenting among Women with an Intense Fear of Childbirth

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About ten percent of pregnant women suffer from an intense fear of childbirth which may lead to difficulties in the mother-infant relationship and impede positive early parenting (Rouhe, Salmela-Aro, Halmesmäki & Saisto, 2009). Concomitantly, we have recently found that women with fear of childbirth have significantly more mental health problems (54%) for five to 12 years before and after their pregnancy, whereas 33% of the nonfearful cohort have similar issues (Rouhe, Salmela-Aro, Gissler, Halmesmäki & Saisto, 2011). Accordingly, there is a need to take intensive fear towards childbirth seriously. Based on these insights, we created an intervention program aiming to promote a successful transition to parenthood among women with intensive fear towards childbirth. The aim of our randomized controlled trial intervention was to promote preparedness for the transition to parenthood and enhance positive parenting among nulliparous pregnant women with trepidation regarding delivery (Salmela-Aro et al., 2011).

In the context of the life-span model of motivation (Salmela-Aro, 2009), life management during key life transitions such as the transition to parenthood can be improved by through the cognitive-motivational construct of preparedness, which has three main foci: specific self-efficacy, a social support component, and inoculation against possible setbacks. Consequently, preparedness is a goal-oriented state of readiness to respond to possible uncertain outcomes (Sweeney, Carroll & Shepperd, 2006).

We hypothesized that if women are well prepared in advance, they can face the possible setbacks that are frequently encountered during the transition to motherhood with confidence in their emotional and practical skills. Inoculation against setbacks was assumed to be the key underlying preventive dimension preparing women and promoting their resilience. We then assumed that increasing preparedness towards the transition to motherhood would promote the skills of positive early parenting and motherhood as the distal goal of the intervention.

Our study is called the LINNEA intervention study. Between October 2007 and August 2009, a total of 12,000 questionnaires were distributed to consecutive and unselected Finnish- and Swedish-speaking pregnant women who participated in routine ultrasound screening at the gestational age of 11-13 weeks in the maternity clinics in the