



MATERNAL DEPRESSION AND PARENTING BEHAVIOR: A META-ANALYTIC REVIEW

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ABSTRACT. *The results of 46 observational studies were analyzed to assess the strength of the association between depression and parenting behavior and to identify variables that moderated the effects. The association between depression and parenting was manifest most strongly for negative maternal behavior and was evident to a somewhat lesser degree in disengagement from the child. The association between depression and positive maternal behavior was relatively weak, albeit significant. Effects for negative maternal behavior were moderated by timing of the depression: Current depression was associated with the largest effects. However, residual effects of prior depression were apparent for all behaviors. Socioeconomic status, child age, and methodological variables moderated the effects for positive behavior: Effects were strongest for studies of disadvantaged women and mothers of infants. Studies using diagnostic interviews and self-report measures yielded similar effects, suggesting that deficits are not specific to depressive disorder. Research is needed to identify factors that affect the magnitude of parenting deficits among women who are experiencing depression and other psychological difficulties.* © 2000 Elsevier Science Ltd.

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DEPRESSION IS A common psychological disorder among mothers of young children, with prevalence rates ranging from 8 to 12% (O'Hara, 1986; Weissman, Leaf, & Bruce, 1987). The experience of living with a depressed mother has serious consequences for many children and increases their risk for a number of developmental and adjustment problems (Downey & Coyne, 1990). Specifically, the children of depressed mothers are at increased risk for a variety of psychiatric problems, including depression and behavioral disturbances, and they also have social and achievement deficits (Anderson & Hammen, 1993; Billings & Moos, 1983; Goodman, Brogan,

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Lynch, & Fielding, 1993; Hammen *et al.*, 1987b). Because depression is both a prevalent disorder among mothers, and one that is associated with significant psychosocial risk for children, it is important to understand the mechanisms through which maternal depression contributes to current and future child adjustment problems (Rutter, 1990).

Possible causal relationships between maternal depression and child adjustment problems include genetic transmission, observational learning resulting from exposure to depressive symptoms, and impaired parenting (Downey & Coyne, 1990). Family and twin studies provide evidence to support the role of genetics in the transmission of child and adolescent affective disorders (O'Connor, McGuire, Reiss, Hetherington, & Plomin, 1998; Pike & Plomin, 1996; Puig-Antich *et al.*, 1989; Thapar & McGuffin, 1996; Weissman, Leckman, Merikangas, Gammon, & Prusoff, 1984; Weissman, Warner, Wichramaratne, & Prusoff, 1988); however, it is likely that family interpersonal environment contributes to both affective disorders and other childhood difficulties (Downey & Coyne, 1990; Pike & Plomin, 1996; Thapar & McGuffin, 1996). For example, it has been suggested that depressed mothers' use of coercive techniques for managing child behavior may contribute to the development of conduct and behavior problems (Downey & Coyne, 1990). Another suggested mechanism for the development of child behavior problems focuses on insecure attachment that could be a sequela of maternal insensitivity to the child's needs (Lyons-Ruth, Zoll, Connell, & Grunebaum, 1986).

It is important to note, however, that the association between depression and child adjustment problems may not be causal. Child behavior problems could, for example, contribute to the development of maternal depression. It is also possible that a third variable is causally related to both maternal depression and child adjustment problems. Rutter (1990), in his commentary of the effects of depression on children, noted there are a number of associated features of depression that may account for the relationship between maternal depression and childhood difficulties. These include substance abuse, personality disorders, and marital discord.

THE PARENTING BEHAVIORS OF DEPRESSED MOTHERS

Early work investigating the parenting difficulties of depressed parents relied on self-report and demonstrated that depressed mothers perceived more difficulty in the parenting role than nondepressed mothers (Weissman & Paykel, 1974; Weissman, Paykel, & Klerman, 1972). In these studies, depressed women reported "diminished emotional involvement, impaired communication, disaffection, [and] increased hostility and resentment" (Weissman *et al.*, 1972, p. 98). The strong association between depression and self-reported parenting offered one explanation for the adjustment problems experienced by children of depressed parents and provided the impetus for subsequent observational studies that objectively assessed the quantity and quality of parent-child interactions in families with a depressed mother. Observational studies have documented numerous parenting difficulties among depressed mothers including increased hostility, higher rates of negative interactions (Goodman & Brumley, 1990; Gordon *et al.*, 1989; Lovejoy, 1991), and impatient use of directives in guiding child behavior (Forehand, Lautenschlager, Faust, & Graziano, 1986). In other studies depressed mothers have been found to be less responsive to child behavior, to communicate less effectively, to demonstrate lower synchrony with their infants, and to

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