

Maternal Expectations for Adolescence: Emotion Regulation, Parenting, and Child Internalizing Symptoms

Abstract

Emotion regulation (ER) difficulties may underlie adolescent internalizing symptoms. Mothers socialize children's ER, and maternal cognitions related to ER development may shape parenting. Despite mothers' importance, maternal expectations for adolescent ER remain unclear. This study utilized a sequential explanatory mixed methods design with participant selection to uncover and characterize typologies of maternal expectations for adolescent ER. Mothers of an oldest child 8-10 ($n=199$; $M_{age} = 36$, $SD = 6.29$; 68.5% White) completed online measures about expectations for internalized dysregulation and positive ER in their child's adolescence. Mothers also completed measures of ER-related parenting, child ER, and child internalizing symptoms. Latent profile analysis revealed three subsets of maternal expectations for adolescent ER. Profile 1 (neutral; 7%) was characterized by maternal expectations of low internalized dysregulation and low positive ER. Profile 2 (optimistic; 50%) was characterized by maternal expectations of average internalized dysregulation and very high positive ER. Profile 3 (balanced; 43%) was characterized by maternal expectations of high internalized dysregulation and average-high positive ER. Mothers in profile 1 (neutral) were more likely to report worse child anger ER and higher child anxiety symptoms than mothers in profile 2 (optimistic). However, mothers in profile 1 (neutral) were also more likely to report higher levels of ER-related supportive parenting and child sadness ER than mothers in profile 2 (optimistic). Mothers in profile 3 (balanced) were more likely to report higher child anxiety symptoms and higher child sadness ER than mothers in profile 2 (optimistic). Qualitative interviews ($n=5$ from profile 1, $n=4$ from profile 3) were coded. Profile 2 (optimistic) and profile 3 (balanced) were further differentiated by emergent ER-related parenting themes. Mothers in profile 2 endorsed anticipated flexibility in ER-related parenting in relation to changes in perceived child need, as

well as maternal reflexivity in how their emotions impacted their ER-related parenting. Mothers in profile 3 described a managerial style of ER-related parenting and juxtaposed their child's ER development with their childhood ER. Qualitative results confirmed profile distinctiveness and provided contextualized information. Mixed methodological findings extended theoretical models supporting the role of maternal cognitions for parenting and child ER.