



Links Between Maternal Depressive Symptoms, Maternal Empathy, and Responses to Children's Negative Emotions

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BACKGROUND

- The link between maternal depressive symptoms and negative socio-emotional child outcomes is well supported (Connell & Goodman, 2002; Ditttrich et al., 2020; Goodman et al., 2011).
- Adults diagnosed with clinical depression are generally less empathic and display a limited capacity for perspective taking (Schreiter et al., 2013), and mothers who display depressive symptoms tend to show less empathic understanding toward their children (Coyne et al., 2006).
- Prior research has not extensively examined the links between maternal empathy or maternal mental health and mothers' responses to children's distress.
- The current study examines the indirect association between maternal depressive symptoms and responses to children's negative emotions, through the mediator of maternal empathy.

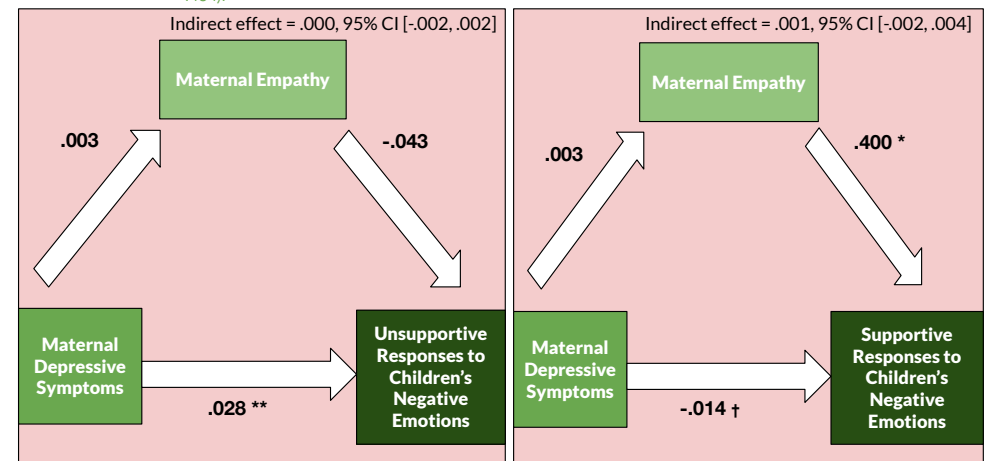
HYPOTHESIS: We hypothesize that mothers' empathy will mediate the relation between maternal depressive symptoms and responses to children's negative emotions, such that greater depressive symptoms will predict less empathy, which, in turn, will predict more unsupportive and fewer supportive responses to children's negative emotions.

METHOD

- Participants: ($N = 80$) were mothers (47.6% white, 21.0% African American, 6.7% Asian/Pacific Islander, 10.5% Hispanic, 14.3% other and missing) and their children (M age = 4.5 years; 40.0% male, 49.5% female, 10.5% missing).
- T1 lab
 - Maternal Depressive Symptoms:** Mothers completed Beck's Depression Inventory (BDI-II; Beck et al., 1961). This scale consists of 21 items where participants are asked to rate depressive symptoms on a 4-pt scale.
 - Sample Item: Sadness
0 = I do not feel sad → 3 = I am so sad or unhappy that I can't stand it.
 - Maternal Empathy:** Mothers also completed the Interpersonal Reactivity Index (IRI; Davis, 1980). This scale consists of 21 items where participants are asked to rate feelings of empathy for their child in distress on a 5-pt scale.
 - Sample Item: I often have tender, concerned feelings for my child when (s)he is going through a rough time.
1 = Does NOT describe me well → 5 = Describes me very well
- T2 lab (~2wks later)
 - Responses to children's negative emotions:** Mothers completed the Coping with Toddler's Negative Emotion Scale (CTNES; Spinrad et al., 2004). This questionnaire consists of 82 items where participants are asked to rate their likelihood of exhibiting a response pertaining to their child's negative emotions on 7-pt scale.
 - Sample Item: If my child becomes angry because s(he) wants to play outside and cannot because s(he) is sick, I would feel upset myself.
1=Very Unlikely → 4=Medium → 7=Very Likely
- Data Analysis Plan:** Use SPSS to regress supportive and unsupportive maternal responses to children's distress (and their subscales) on maternal depressive symptoms, along with covariates (child age and gender), both controlling and not controlling for maternal empathy.

RESULTS

- The **indirect effects** of maternal depressive symptoms on unsupportive responses (indirect effect = 0.000, 95% CI [-.002, .002]) and supportive responses (indirect effect = 0.001, 95% CI [-.002, .004]) through maternal empathy were **not significant**.
- There was a **significant positive direct effect** of maternal depressive symptoms on unsupportive responses ($b = .028, p = .002^{**}$).
 - Unsupportive subscales:** There were **significant positive direct effects** of maternal depressive symptoms on maternal distress ($b = .033, p = .005^{**}$), and punitive responses ($b = .033, p = .008^{**}$) but not on maternal minimizing responses ($b = .017, p = .195$).
- There was a **marginally significant direct effect** of maternal depressive symptoms on supportive responses ($b = -.014, p = .089^{\dagger}$).
 - Supportive subscales:** There was a **marginally significant direct effect** of maternal depressive symptoms on problem-focused reactions ($b = -.01, p = .096^{\dagger}$), but not on expressive encouragement ($b = -.024, p = .142$), or emotion-focused reactions ($b = -.007, p = .434$).



Path values indicate unstandardized beta-weights; $^{\dagger}p < .10$, $^{*}p < .05$, $^{**}p < .01$

DISCUSSION

- Results do not support the mediational role of empathy in the maternal depressive symptoms on maternal responses to children's negative emotions pathway.
- Mothers with depressive symptoms are more likely to respond unsupportively to children's negative emotions, exhibiting distress and punitive responses. They are marginally less likely to respond supportively to children's negative emotions, exhibiting fewer problem-focused reactions.
- Mothers with more empathy exhibit more problem-focused reactions, greater distress, and slightly fewer minimizing responses in response to negative emotions.
- These findings suggest that parenting interventions targeting mothers with elevated depressive symptoms should aim to enhance maternal empathy to decrease unsupportive responses and increase supportive responses to children's negative emotions.