A Modern Analysis of the Frequency of Baumrind's Parenting Style

Aimee Saffo
Lindenwood University

Jaidenlynn Rogers
Lindenwood University

Follow this and additional works at: https://digitalcommons.lindenwood.edu/psych_journals

Part of the Psychology Commons

A Modern Analysis of the Frequency of Baumrind's Parenting Style

Aimee Saffo and Jaidelynn Rogers[9]

This research project explored Baumrind's parenting styles - authoritarian, authoritative, permissive, and neglectful - within our sample population. The primary investigators used a survey method to collect data and determine the frequency of each parenting style by scoring the participant's answers about perceived emotional warmth and control in childhood. The results were compared to the perceived age, gender, and socioeconomic status of the participant's primary caregiver as well as to the participant's age and gender to determine if there is a significant relationship. This study can help to understand what factors affect parenting styles used within society.

In 1966, Baumrind created the Pillar theory which discussed parenting styles. The parenting styles identified were authoritarian, authoritative, permissive, and neglectful. According to Baumrind's parenting styles (as cited in Health, 2018), an authoritarian parent is high in control and low in emotional responsiveness; authoritative parents are high in control and high in emotional responsiveness; permissive/indulgent parents are low in control and high in emotional responsiveness; uninvolved/neglectful parents are low in control and low in emotional responsiveness. While this theory is widely accepted in the field, it is not currently known which parenting styles are used or how frequently they are used within the general population today. This study seeks to determine which parenting styles are used and by what percentage of the population. We are using our data to determine if there is a correlation between the age, gender, sexual orientation, or socioeconomic status (SES) of a parent and the parenting styles they use.

Words that are used to label experiences can influence how people perceive those experiences and remember them (Brown, Holden, & Ashraf, 2018). Even changing the words

[9]Aimee Saffo, Department of Psychology, Lindenwood University; Jaidelynn Rogers, Department of Psychology, Lindenwood University. Correspondence regarding this paper should be addressed to Aimee Saffo or Jaidelynn Rogers, Department of Psychology, Lindenwood University, St. Charles, MO 63303. Email: AJS861@lindenwood.edu, JKR567@lindenwood.edu

only slightly can have an impact on how the experience is remembered. Brown et al. (2018) conducted a study that explored how labeling parental disciplinary actions to a child's misbehavior can impact how it is perceived. Corporal punishment (CP) is defined as using physical punishment with the intention of causing pain (Brown et al., 2018). The researchers had three hypotheses regarding parental status, behavior resulting from intentions, and the relationship among three rating dimensions.

In this study, there were two groups: parents and non-parents who were undergraduate students. There was a total of 481 parents and 191 nonparents. In order for the parents to be eligible for the study, they had to have at least one child who was between 2 and 6 years old (Brown et al., 2018). A pilot study was used that incorporated eight misbehavior scripts. The researchers also used five corporal terms: spank, slap, swat, hit, and beat, as well as, three non-corporal terms such as yell, ignore, and reason with (Brown et al., 2018). After each script was given, a sentence described the parental response. All of the scripts were about a 5-year-old boy and his mother's response. All participants took the survey online. Each participant was given one set of the scripts and made three ratings on a Likert-scale. They rated how common the mother's response was, how acceptable it was, and how effective it was (Brown et al., 2018). The nonparental participants' survey took about 10 min and these participants received extra credit. The parent participants' survey lasted about 20 min and these participants received one dollar of compensation (Brown et al., 2018).

The results of the study showed that the first hypothesis regarding parental status was partially supported. The researchers predicted that the disciplinary responses would be rated more commonly by parents than those who were not parents. There were no statistically significant differences between parents and nonparents for the acceptable or effective ratings, but parents viewed physical punishment as more common than non-parents (Brown et al., 2018). The

second hypothesis regarded the differences of a pattern between the corporal terms and their

consistency. This hypothesis was supported by the data. The term "slap" was rated the highest

among all of the corporal terms. The third hypothesis regarded the relations between common,

acceptable, and effective ratings. Brown et al. (2018) found that effective and acceptable ratings

related more closely to each other than they did to common ratings. Some limitations in this

study were that the nonparent participants were mainly female and from one university. In

addition, the parent participants were more highly educated than the general public (Brown et al.,

2018). The study did not give out definitions of the corporal terms, but this was

intentional. However, each participant could view each term differently. The scripts that were

used for the survey only used boys who were 5 years old and female parents for the response.

Tagliabue et al. (2016) conducted a study on cross-cultural and cross-parental roles using

the Parenting Styles and Dimensions Questionnaire (PSDQ). Their goal was to see the

differences in the authoritative, authoritarian, and permissive parenting styles across countries

and parental roles (Tagliabue et al., 2016). There were 805 participants in total: 225 Greek, 301

Italian, and 279 Swedish. These participants responded to a questionnaire asking about their

parents' parenting behaviors during their childhood. The participants were between the ages of

16 and 19 years old and were recruited through convenience sampling from high

schools (Tagliabue et al., 2016). Like the United States, Greece and Italy had to have the parents

provide written consent for their children to participate in the study. In Sweden on the other

hand, the parents are not required to give written consent when their child is at least 15 years

old (Tagliabue et al., 2016). There were multiple questionnaires that the participants had to

answer. There was the socio-demographic characteristics, the PSDQ, a self-esteem scale, and a

youth self-report scale. The demographic characteristics consisted of gender, age, nationality,

schools, and education of their fathers and mothers. The PSDQ was a retrospective version and it

assessed the participants' perceptions of their parents' practices during their childhood. It consisted of questions regarding authoritative, authoritarian, and permissive parenting styles, and the participants rated the items on a 5-point Likert-scale. The self-esteem scale consisted of 10 items and were rated using a 4-point Likert scale. The youth self-report scale measured internalizing behavior such as being anxious or depressed, as well as externalizing behavior such as rule-breaking behavior (Tagliabue et al., 2016).

Tagliabue et al. (2016) showed that the meaning of authoritative and authoritarian parenting styles was the same across countries as well as parental roles. They also found that both authoritative and authoritarian styles were related because they were invariant across countries and parental roles. The results shared that mothers were perceived to be more authoritative than fathers. Another limitation was a lack of representation of the samples (Tagliabue et al., 2016).

In another study, Barajas-Gonzalez and Brooks-Gunn (2014) looked at how income impacts families. They did this by looking at the neighborhoods that the families lived in. There were two theories that were used in this study: the family stress model and the social disorganization theory. The family stress model suggests that the psychological stress that comes with financial stress can strain family relations. The social disorganization theory suggests that neighborhoods with a high proportion of poor residents are disadvantaged compared to other neighborhoods (Barajas-Gonzalez & Brooks-Gunn, 2014). They also looked at the parental report of fear and if it relates to harsh parenting. This study used a diverse sample ($N = 2,132$) that included families who identified as Mexican American, African American, and Europe American and all had children between the ages of 5 and 16 (Barajas-Gonzalez & Brooks-Gunn, 2014). These participants participated in the Project of Human Development in Chicago Neighborhoods (PHDCN).

This study was conducted through interviews and self-report questionnaires. Demographic questions were asked regarding race, income, birth country, and marital status. Other questionnaires asked about health and behavioral indicators. These questions were answered based on the mother's report (Barajas-Gonzalez & Brooks-Gunn, 2014). Some other measures that were asked of the participants were an income-to-needs ratio, maternal self-reported depressive symptoms, fear for safety, family conflict, harsh parenting, and neighborhood disorder (Barajas-Gonzalez & Brooks-Gunn, 2014).

The results showed that there were no statistically significant differences in any age of the children of all genders across the different ethnic subgroups. About half of the families consisted of both biological parents being married to each other and almost half of the participants did not graduate from high school (Barajas-Gonzalez & Brooks-Gunn, 2014). They found that families of adolescents had high mean income-to-needs ratio, greater fear for safety, and greater harsh parenting compared to families with young children (Barajas-Gonzalez & Brooks-Gunn, 2014). Lower income-to-needs ratio was significantly related with more family conflict which was then related to more harsh parenting. Barajas-Gonzalez and Brooks-Gunn (2014) hypothesized that the family stress model would be more prominent with families of adolescents due to the thought of adolescents spending more time in their neighborhoods, but the data did not support the hypothesis. Mothers who lived in neighborhoods rated higher in disorder reported that they were more fearful, experience greater family conflict, and display harsher parenting toward their children (Barajas-Gonzalez & Brooks-Gunn, 2014).

How a caregiver engages with children plays a major role for the development of self-regulation. Zeytinoglu, Calkins, Swingler, and Leerkes (2017) conducted a study that examined how maternal effortful control can lead to self-regulation, executive functioning, and behavioral regulation of a child. Self-regulation refers to the ability to regulate emotional and cognitive

behavior (Zeytinoglu et al., 2017). Executive functioning refers to the forms of attentional and

cognitive processes, including three core functions: working memory, inhibitory control, and

cognitive flexibility. Behavioral regulation refers to the use of thought processes to guide

a person's behavior and focused on attention control, work habits, and discipline/persistence

(Zeytinoglu et al., 2017).

There were a total of 278 children, primary caregivers, and teachers who participated in

this study. Out of the primary caregivers, 96% were mothers, and of those mothers, 61% had a 4-

year college degree or had completed higher levels of education (Zeytinoglu et al., 2017). The

participants were recruited through daycare centers, libraries, and local establishments. The study

was conducted in a lab, where the children completed tasks and the primary caregivers

completed questionnaires. The teachers that participated were sent a link to complete surveys

online. There were many measures that were taken account for: demographics, maternal effortful

control, maternal emotional support, among others. The teacher-reports measured attention

control, work habits, and discipline/persistence (Zeytinoglu et al., 2017). The researchers also

found that caregivers who are emotionally supportive could be an external regulator of their

children's emotions and behaviors.

Parents' behaviors contribute to many things in regard to their children, externalizing

behavior being one of them. Pinquart (2017) conducted a study on how parental behaviors and

parenting styles related to externalizing problems. His research question was focused on how

parental warmth, behavioral control, and types of parenting styles (authoritative, authoritarian,

neglectful, and permissive) relate to externalizing problems, harsh control, and psychological

control (Pinquart, 2017).

He found that the effects of parenting can differ between each child because some

children differ with how they receive their parents' influence. This can be due to the fact of their

genes, temperament, or environments (Pinquart, 2017). The results show that parents tend to

increase their harsh and psychological control when responding to externalizing problems,

or possibly raising their tolerance for deviant behavior. It was also found that parents decrease

desirable and increase undesirable forms of parenting when it comes to externalizing problems

(Pinquart, 2017). During adolescence, externalizing problems become more evident, which leads

to those adolescents to evaluate their parent's behaviors more critically. Pinquart (2017) found

from the reports of the parents and the children that both mothers and fathers tend to show

similar parenting behaviors.

Goldberg (2007) pioneered the world of lesbian, gay, bisexual, and transgender (LGBT)

research in regard to parenting by publishing a qualitative study about the experiences of

children raised in an LGBT household. For the purpose of this study, the adult had to have a

parent who identified as LGBT while they were under the age of 18. The reason this research

was so moving is because it was the first of its kind. While LGBT families have been around for

decades, it has only been in the last 10 years that research has included or focused on this sexual

minority group. Goldberg (2007) focused on the ways in which children raised by one or more

LGBT parent perceived their childhoods to be different than those raised in a household with a

parent or parents who identified as heterosexual. The research questions aimed to determine the

origin of participants' self-identity, the participants' views on constructs such as gender and

sexual orientation, and the role of gender in the participants' childhood.

In order to conduct such sensitive research, Goldberg (2007) utilized telephone

interviews as a means of data collection. To collect a sample from a broader scope of land,

Goldberg advertised using electronic newsletters, LGBT activism websites, and through

numerous nationally recognized LGBT organizations. Participants ranged from 19 to 50 years

old and included 36 participants who identified as female and 10 participants who identified as

male.

Not surprisingly, Goldberg (2007) found that being raised by a parent or parents who

identified as LGBT made much less of a difference to the participants than did the

socioeconomic status (SES) of their family, or traumatic events within their childhood such as

parental divorce/separation or death. The results of her study indicated that participants who had

been raised by LGBT parents considered themselves in majority to be more open minded,

liberal, non-judgmental, and unbiased (Goldberg, 2007). It was also identified that these

participants relocated to primarily liberal communities and often made statements referring to

gender and sexuality as a conceptual spectrum. On a not-so-positive note, participants often had

difficulties with trust (probably stemming from a parent coming-out during their childhood), felt

pressure to self-identify as heterosexual, and often felt they had to be defensive of their parents

or the LGBT community as a whole.

Joubert-Pienaar (2014) conducted a study that focused exclusively on lesbian parent

families (family that included one or more parent who identified as lesbian). The study focused

on exploring the experiences of children raised in a lesbian parent household and determining the

parenting styles most frequently used within the population. A case study design was used to

analyze four families with children ages 4-12; the data were collected using questionnaires,

worksheets, and case studies. The study combined snowball and non-probability sampling

methods to recruit participants (Joubert-Pienaar, 2014).

Additionally, Joubert-Pienaar (2014) found that a theme of his research was that lesbian

families were warm, involved, and tolerant in regard to parenting. He also found that lesbian

families discussed the idea of rules, values, and norms frequently, which most closely relates to

the authoritative parenting style. Most surprisingly, like Goldberg he found that

sexual orientation of a primary caregiver was much less important than the functionality of the family unit (Joubert-Pienaar, 2014).

Building on the idea of family structure, Hoffman (1997) created a research project based on the influence of grandparents on children, specifically in relation to grandparents who raised their grandchildren either on a full-time or part-time basis. The research indicated that with growing cultural change, the structure of families is often changing rapidly as well. Due to this, it is important to identify those common family structures within our culture and conduct research on them to determine if there are correlations with these family structures and other cultural changes (Hoffman, 1997).

Hoffman (1997) found that over 3.6% of Caucasian children, 6% of Latino children, and 12% of African American children live with a grandparent who is their primary caregiver. Because the data was over 20 years old, it is possible that these numbers have either significantly increased or decreased. However, it is important to still consider these findings as the number of children who had lived with a grandparent raised over 40% in the decade between 1980 and 1990 (Hoffman, 1997).

To continue, Hoffman's research (1997) primarily focused on the reasons for which grandparents were continuing to take on the primary responsibility of caring for their grandchildren. He also wanted to compare the grandparents' parenting styles between the way they had raised their children and then their grandchildren decades later. Hoffman determined a few possible societal implications that could have led to this societal change including but not limited to: increased life expectancy, more access to healthcare, prevalence of drug abuse, mandated reporting of child neglect/abuse, higher divorce rates, prevalence of teen pregnancy, and increased poverty within emerging adults, (Hoffman, 1997).

A study conducted by Pritchard-Boone (2007) focused on Baumrind's parenting styles and the frequencies to which the parenting styles were used across generations. The study claims that studying generational differences is one of the best ways to track societal changes and environmental influences (Pritchard-Boone, 2007). In all, it is important to understand that the parenting style with which a child is raised can determine the life experiences and attributions of that child throughout childhood and adulthood.

Pritchard-Boone (2007) also found that parenting styles correlate with personality development and self-concept. He suggested that supportive parenting, such as authoritative, is predictive of positive social behavior and low levels of aggression. In all, he found that authoritative parenting styles predicted positive psychosocial outcomes and less behavioral problems, particularly in adolescents, as well as better academic performance in certain subpopulations (Pritchard-Boone, 2007).

To continue, Godel (2006) conducted research on families, particularly looking at SES within a family dynamic and the effects of poverty. The study indicated that the socioeconomic status of a parent can greatly determine the way in which the parent creates a relationship with their child or children (Godel, 2006). Godel (2006) attributed these behavioral changes to both excess financial stress and overworking, which was defined as working more than 40 hours per week.

Through his research, Godel (2006) found that parents who self-identified as being of high socioeconomic status also stated that they had more time to spend with their children and were able to provide socio-emotional support, such as reading, playing games, and conversing with their children on a daily basis. Godel defined low socioeconomic groups as families that earned $25,000 or less per year; middle socioeconomic families earning between $26,000-$60,000 per year; and high socioeconomic families earning more than $61,000 per year (Godel,

2006). This classification causes a limitation within itself as Godel (2006) did not account for those families that made between $25,001-$25,999 or $60,001-$60,999 per year.

To conclude, Godel (2006) found that specific factors - SES, ethnicity, age of parents, and parental culture - all influenced the parenting style(s) that a parent or family chose to utilize. For this reason, it is important to understand influences on families within a societal viewpoint. Understanding family dynamics and societal factors that affect them can help to combat negative effects on children (Godel, 2006).

As the primary investigators of this study, we are interested in determining the frequency and correlates of Baumrind's parenting styles (1996) within the sample population in regard to emotional responsiveness and control. According to Baumrind (1966), the four parenting styles are authoritarian, authoritative, indulgent, and neglectful. Authoritarian parents are characterized as high in control and low in emotional responsiveness. Authoritative parents are characterized as high in control and high in emotional responsiveness. Indulgent parents are characterized as low in control and high in emotional responsiveness. Neglectful parents are characterized as low in control and low in emotional responsiveness.

While previous research has determined why parenting styles are important, how they influence children, and characteristics to determine a parents' parenting style, our study instead focuses on the frequency of each parenting style within our current society. It also focuses on how each parenting style is related to the participants' and participants' primary caregivers' demographic information.

Based on previous research findings, we asked questions regarding SES and relationship to the participant (biological, adoptive, foster, etc.), along with other basic demographic questions. We also asked basic demographic questions about the participants' primary caregiver, including but not limited to: perceived sexuality, gender, and age. Our

research focus was to determine if there is a relationship between self-reported parenting style and the primary caregivers' age, sexuality, gender, or SES. We were also interested in finding out which parenting styles are used most frequently in our sample. In order to accomplish these goals, we created an online survey.

Method

Participants

Participants were recruited through our (the primary investigators') social media outlets via Facebook, Instagram, Snapchat, and Twitter. The sample therefore was a sample of convenience and has limited generalizability. There were 116 participants that completed this study, but we decided to omit data from 4 participants who did not follow instructions and thus presented information for more than one primary caregiver. With our total of 112 participants, 21 stated their gender as male, and 91 stated their gender as female.

With that being said, of the 112 participants, 18 said that their primary caregiver was male, and 94 said that their primary caregiver was female. Of those primary caregivers, 94.6% were the biological parent of the participant. There was one participant who stated their primary caregiver as a step-parent, one participant stated their primary caregiver as an adoptive parent, and four participants who stated their primary caregiver as another relative that was not their biological parent. As for age of participant, there was a wide variety of age representation in the survey results. Participants ages 18-29 made up 34.8% of the sample. Additionally, no compensation was provided.

For our study, it was most important to determine the demographic characteristics of the participants' parents. We did so by asking participants demographic questions in the survey centered around their primary caregiver, or the person with whom they identify as their most influential parent. We asked the participants basic demographic questions about themselves and

their primary caregivers, including but not limited to: age, age of primary caregiver at participant's birth, gender, gender of primary caregiver (PC), sexuality of PC, and yearly income of PC.

Materials

The survey that was given to the participants was created using Qualtrics - an online survey generating system - and was available to participants online only. In order to access Qualtrics, we used two Macbook computers as well as wireless internet provided by Lindenwood University. In order for participants to access the survey they had to use some form of electronic device, such as a cell-phone, desktop computer, or laptop computer, as well as the internet in some form. An informed consent statement, an electronic consent statement, and a feedback/thank you letter were included as the first, second, and last question of the survey respectively. Demographic questions about the participant and the participant's primary caregiver are asked. Questions from the demandingness and responsiveness psychtest were also used, see Appendix A for details (Paulson, 1994).

Procedure

Participants were given an informed consent letter as the first item on the survey, as well as an electronic consent statement as the second item on the survey. Participants were then given the operational definition of a primary caregiver which was referred to in our survey as a primary caregiver is defined in this study as the person who was primarily responsible for you as a child, and who provided you with the basic necessities of life, such as food, water, and shelter. Participants were then asked to answer basic demographic questions about their self-determined primary caregiver. After, participants were asked to reflect back on their childhood and answer a series of questions about perceived parental warmth, control, and punishment styles. It is important that these demographic questions are thought of as perceptions, due to the fact that

participants answered these questions for their primary caregivers. At the conclusion of the

survey, the participant was given an online feedback letter that included our contact information

and faculty supervisor's contact information. To view the survey - which includes the informed

consent letter, electronic consent statement, and feedback letter/thank you statement - please

refer to Appendix A.

Results

Our central idea was to determine what the frequency of Baumrind's four parenting styles

were in our sample population. After coding the participant's answers, we found that 5 primary

caregivers were authoritarian, 45 primary caregivers were authoritative, 55 primary caregivers

were permissive, and 7 primary caregivers were neglectful. Furthermore, we sought to determine

if the sexuality of the participant's primary caregiver related to the primary caregiver's parenting

style. We wanted to look at the breakdown of parenting styles within our sample and compared

them to the sexuality of the primary caregiver as told by the participant but because 100% of the

primary caregivers were described as heterosexual, we were not able to conclude any results.

Additionally, we wanted to know if the gender of the participant's primary caregiver related to

the primary caregiver's parenting style. In order to do this, we compared the gender of the

primary caregivers to the parenting styles within our sample by conducting a chi square analysis.

We found that there was no significant relationship, $\chi^2(15, N = 112) = 8.583, p = .898)$.

Next, we wanted to know if the age of the participant's primary caregiver (on the date of

the participant's birth) related to the primary caregiver's parenting style. In order to do this, we

conducted a chi square analysis comparing the nominal variables of age of primary caregiver (we

had six age brackets: 18-29, 30-39, 40-49, 50-59, 60-69, and 70+) and parenting style. We did

not find a significant relationship, $\chi^2(3, N = 112) = 4.778, p = .823)$. In addition, we were

interested in determining if the primary caregiver's income range (during the participant's

childhood) related to the primary caregiver's parenting style. We conducted another chi square analysis and found no significant relationship, χ^2(6, N =112) = 8.456, p = .206). We were also interested in determining if there was a correlation between the participant's gender and their primary caregiver's parenting style, so we conducted a chi square analysis but found no significant relationship, χ^2(3, N =112) = 4.778, p = .189). To continue, we were interested in finding out if there is a correlation between the primary caregiver's parenting style and their generation (based upon the primary caregiver's age). In order to do so we conducted a chi square but found no significant relationship, χ^2(3, N =112) = 11.901, p = .453).

Discussion

Our results revealed that the majority (45 and 55 respectively) of the primary caregivers in our sample used authoritative and permissive parenting styles, while only a few (5 and 7 respectively) used authoritarian and neglectful parenting styles. Unfortunately, there are minimal studies from the last 10 years that give an accurate representation of the frequency of parenting styles within the population in order to compare our findings.

An interesting finding was that about 95% of the primary caregivers were a biological parent in relation to the participant. Unfortunately, we did not find any significant relationships between the variables of age, gender, or socioeconomic status of the primary caregiver and parenting style. We did not find a significant relationship between age and gender of the participant and primary caregiver either. Based on results, we were not able to conduct a chi square to determine if there was a relationship between sexuality of the primary caregiver and parenting style.

Our results did not coincide with past research on the topic of parenting styles. While Godel (2006) found that those with higher socioeconomic statuses were frequently authoritative, we did not find a significant relationship. Also, while Hoffman (1996) found that the older the

parent the more likely they were to score high in emotional responsiveness and high in control (authoritative), we did not find any significant relationship between age and parenting style.

Based on these results, we may conclude that one limitation of our study may be that our sample was not representative of the overall population. We believe that using the participants' perceptions to determine their primary caregiver's parenting style may be a biased way to collect that information. A participant's primary caregiver may perceive his or her own parenting style as being different from how it is perceived by the participant. Due to the nature of our survey, participants may have also misunderstood what the question is asking in regard to who their primary caregiver is, which can cause misleading data.

Future research could interview families in person to determine the primary caregiver and the participants' perceptions. This could help combat bias. Additionally, interviewing in person could help cut down on any misunderstanding that the participant has about the questions asked and therefore result in the collection of more accurate data. In order to collect representative data, it is important that participants be recruited across the country and through different outlets.

While it may be easy to misunderstand the implications of our study, it is important to remember why this is important. The more that we can understand about what influences parents use of certain parenting styles, the more that we can target those parents who may use parenting styles that can be harmful to their children, such as extreme authoritarian styles or neglectful styles. Helping to push parents toward authoritative parenting styles can not only help to raise emotionally regulated, mentally healthy children, but can help create healthy families who communicate with, respect, and love one another. Generationally we have seen that authoritarian parenting styles are becoming less common- which is good- but permissive parenting styles are becoming more popular. This trend can cause major problems, like increase

in teen pregnancy, teen STI/STD rates, and teen drug use. Children who are raised by extreme authoritarian and neglectful parents are also at increased risk of developing a mental health disorder such as depression and anxiety. In order to protect our children and raise mentally healthy adults, we need to be aware of the current trends in our population.

That being said, it is majorly important to continue this research to determine factors that do in fact correlate with parenting styles. This may help us pinpoint the families that need additional services by pediatricians and OBGYNs. It may also help to give teachers an understanding of those parents who may be using detrimental parenting styles so that they can educate and intervene when necessary. The more that we know about this topic, the better equipped we can be to help.

References

Barajas-Gonzalez, R. G., & Brooks-Gunn, J. (2014). Income, neighborhood stressors, and harsh parenting: Test of moderation by ethnicity, age, and gender. *Journal of Family Psychology*, *28*(6), 855-866. doi: 10.1037/a0038242

Baumrind, D. (1966). Effects of authoritative parental control on child behavior. *Child Development, 37*(4), 887-907. doi: 10.2307/1126611

Brown, A. S., Holden, G. W., & Ashraf, R. (2018). Spank, slap, or hit? How labels alter perceptions of child discipline. *Psychology of Violence*, *8*(1), 1-9. doi: 10.1037/vio0000080

Gerlsma, C., Arrindell, W. A., van der Veen, N., & Emmelkamp, P. G. (1991). Egna minnen beträffande uppfostran--adolescent version [Measurement instrument]. *Psyctests*, doi: 10.1037/t26719

Godel, E. (2006). *Relationship between parenting and discipline styles and socioeconomic status* (Doctoral dissertation). Available from ProQuest Dissertations & Theses A & I. (Order No. 1431791).

Goldberg, A. E. (2007). (How) Does it make a difference? Perspectives of adults with lesbian, gay, and bisexual parents. *American Journal of Orthopsychiatry*, *77*(1), 550–562. doi: 10.1037/0002-9432.77.4.550

Heath, P. (2018). *Parent-child relations: Context, research, and application.* New York: Pearson.

Hoffman, N. J. (1997). *Grandparents raising grandchildren: A comparison of parenting styles in different time periods* (Order No. 9728418). Available from ProQuest Dissertations & Theses A & I. (304336241). Retrieved from http://ezproxy.lindenwood.edu:2048/login?url=https://search.proquest.com/docview/304336241?accountid=12104

Joubert-Pienaar, H. (2014). *Parenting styles in lesbian parent families* (Order No. 1594588). Available from ProQuest Dissertations & Theses A & I. (1703998616). Retrieved from http://ezproxy.lindenwood.edu:2048/login?url=https://search.proquest.com/docview/1703998616?accountid=12104

Paulson, S. E. (1994). Demandingness and responsiveness scales [Measurement instrument]. *Psyctests*, doi: 10.1037/t17173

Pinquart, M. (2017). Associations of parenting dimensions and styles with externalizing problems of children and adolescents: An updated meta-analysis. *Developmental Psychology, 53*(5), 873-932. doi: 10.1037/dev0000295

Pritchard-Boone, A. (2007). *The relation between parenting styles and attributional styles across generations* (Order No. 3300866). Available from ProQuest Dissertations & Theses A & I. (304827205). Retrieved from http://ezproxy.lindenwood.edu:2048/login?url=https://search.proquest.com/docview/3048 27205?accountid=12104

Tagliabue, S., Olivari, M. G., Wahn, E. H., Maridaki-Kassotaki, K., Antonopoulou, K., & Confalonieri, E. (2016). Retrospective paternal and maternal parenting styles in Greece, Italy, and Sweden: Invariance, validity, and level differences in the PSDQ. *European Journal of Psychological Assessment*, doi: 10.1027/1015-5759/a000355

Zeytinoglu, S., Calkins, S. D., Swingler, M. M., & Leerkes, E. M. (2017). Pathways from maternal effortful control to child self-regulation: The role of maternal emotional support. *Journal of Family Psychology*, *31*(2), 170-180. doi: 10.1037/fam0000271

Appendix A

A Modern Analysis of the Frequency of Baumrind's Parenting Styles
Q1 You are being asked to participate in a survey conducted by Aimee Saffo
and Jaidelynn Rogers at Lindenwood University. This study seeks to determine the frequency of
Baumrind's parenting styles (authoritative, authoritarian, permissive, and neglectful) within the
sample population. It will take approximately 10 minutes to complete this survey. Your
participation is voluntary. You may choose not to participate or withdraw at any time by simply
not completing the survey or closing the browser window. You may also skip any questions that
make you uncomfortable. That being said, answering as many questions as possible will help the
investigators to collect complete data.

No excess risk is anticipated. If you find that taking the survey causes you emotional distress
and you would like assistance, please contact the Lindenwood Student Counseling and Resource
Center at 636-949-4889. If you are not with Lindenwood you would like assistance, please text
741741 to converse with a trained crisis counselor.

We will not collect any secure information, such as birth dates or social security numbers. This
survey is completely anonymous. There are no direct benefits to participating in this study.
However, your participation is an opportunity to contribute to psychological science. There is a
chance the data from this survey could be presented at a psychological conference or published
in an academic journal.

WHO CAN I CONTACT WITH QUESTIONS
If you have concerns or complaints about this project, please use the following contact
information: Aimee Saffo (Primary Investigator) at AJS861@lindenwood.edu
or Jaidelynn Rogers (Primary Investigator) at jkr567@lindenwood.edu or Dr. Nohara-LeClair
(Faculty Supervisor) at mnohara-leclair@lindenwood.edu. If you have any concerns about the
project that should be addressed with someone outside of the research team, you may contact Mr.
Michael Leary (Director - Institutional Review Board) at 636-949-4730 or
mleary@lindenwood.edu.

○   I choose to participate

○   I choose not to participate

Q2 ELECTRONIC CONSENT: Please select your choice below
Choosing to participate indicates that
• You have read and understood the above
• You voluntarily agree to participate
• You are at least 18 years of age.

○   I meet the above criteria and I choose to participate

○   I meet the above criteria and I choose not to participate

○   I do not meet the above criteria

Q3 First, we will ask some simple demographic questions about your primary caregiver. A primary caregiver is defined in this study as the person who was primarily responsible for you as a child, and who provided you with the basic necessities of life, such as food, water, and shelter. Please keep in mind that families are unique and vary from person to person. We hope that you choose to provide information about the primary caregiver that you have the strongest relationship with and lived with the most frequently, biological or otherwise.

Q4 How do you describe your primary caregiver in relation to you?

○   Biological parent

○   Step-parent

○   Adoptive parent

○   Foster parent

○   Other relative that is not your biological parent

○   Other _____

Q5 How old was your primary caregiver when you were born?

○   10-19 years

○   20-29 years

○   30-39 years

○   40-49 years

○   50-59 years

○   60 years or older

Q6 What is the gender of your primary caregiver?

○   Male

○   Female

○   Transgender

○   Other _____

Q7 What is the sexual orientation of your primary caregiver?

○   Heterosexual

○   Homosexual

○   Bisexual

○   Pansexual

○   Other _____

Q8 Please estimate your primary caregiver's yearly income range when you were 10 years old.
Note: This should be reflective of only your primary caregiver's income - not household income.

○ $0-$29,999 a year

○ $30,000-$59,999 a year

○ $60,000-$99,999 a year

○ $100,000-$149,999 a year

○ $150,000-$349,999 a year

○ $350,000+ a year

Q9 Please read the following statements and choose the best answer from the choices below.

	Never	Rarely	Frequently	Always
My primary caregiver kissed or hugged me often.	○	○	○	○
My primary caregiver told me that they loved me frequently.	○	○	○	○
My primary caregiver attended important events in my life.	○	○	○	○
My primary caregiver was interested in my grades.	○	○	○	○
My primary caregiver encouraged me to try my best.	○	○	○	○
My primary caregiver asked about my day.	○	○	○	○

Q10 Please read the following statements and choose "Agree" or "Disagree" below.

Please choose one choice below.

	Agree	Disagree
I would consider my primary caregiver to have been strict.	○	○
My primary caregiver wanted to know where I was at all times.	○	○
My primary caregiver had unfair rules about what I wore.	○	○
My primary caregiver would say, "...because I said so."	○	○

My primary caregiver grounded me often.	○	○
My primary caregiver did not give me my privacy.	○	○

Q11 Please read the following statements and choose the best answer from the choices below.

	Never	Rarely	Frequently	Always
My primary caregiver interfered in my relationships or friendships.	○	○	○	○
My primary caregiver expected me to be #1 in anything that I did.	○	○	○	○
My primary caregiver made decisions about what I was allowed and not allowed to do.	○	○	○	○
My primary caregiver chose which activities I could be involved in.	○	○	○	○
My primary caregiver took away my possessions (phone, car) as leverage.	○	○	○	○
My primary caregiver set a strict curfew.	○	○	○	○

Q12 Please read the following statements and choose "Agree" or "Disagree" below.
Please choose one of the choices below.

	Agree	Disagree
My primary caregiver encouraged me to talk about my feelings.	○	○
My primary caregiver praised me for doing something well.	○	○
My primary caregiver enjoyed spending time with me.	○	○
My primary caregiver liked me for me and did not encourage me to change myself.	○	○
My primary caregiver did not call me names, like lazy or stupid.	○	○
My primary caregiver often asked me how I was doing.	○	○

Q13 For this question, please answer in regards to yourself. What gender do you identify with?

○   Male

○   Female

○   Transgender

○   Other _____

Q14 **For this question, please answer in regard to yourself. What age group describes you best?

○   18-29 years

○   30-39 years

○   40-49 years

○   50-59 years

○   60 years or older

Q15 Thank you for taking the time to complete this survey for our class project at Lindenwood University. We are interested in analyzing an adult's perspective on his or her childhood and primary caregiver, specifically looking at the variables of emotional responsiveness and control. If you found that taking the survey caused you emotional distress and you would like assistance, please contact the Lindenwood Student Counseling and Resource Center at 636-949-4889. If you are not affiliated with Lindenwood University and you would like assistance, please text 741741 to converse with a trained crisis counselor. If you would like to see the results of our survey after May 15th, 2018, please feel free to contact a member of the research team using the contact information below. Again, thank you very much for your time and effort!

Principal Investigators:
Aimee Saffo
(314) 799-4570
AJS861@lindenwood.edu

Jaidelynn Rogers
(618) 946-4629
JKR567@lindenwood.edu

Faculty Supervisor:
Dr. Nohara-LeClair
mnohara-leclair@lindenwood.edu

Presence of Daily Routine on Frequency of Bizarre Dreams, and Online Study

Kevin McGowan[10]

In the hopes to further our body of knowledge on the effects of daily routines on dream content, my study aimed to measure both bizarre content in dreams and the routineness of participants' day prior to dreaming. The method I am using to distinguish bizarre dreams from usual dreams was developed by Revonsou and Samilvalli (1995). Following this method, I first identified dream elements by categorized them into 14 categories; and then scored those dream elements for their bizarreness according to four types of bizarreness (Non-bizarre, Incongruous, Vague, or Discontinuous). I hypothesized that bizarre dreams would occur more frequently after a non-routine day than after a routine day. The results of my study were inconclusive due to a lack of participation. I received six dream submissions that all occurred after routine days, and zero dreams that occurred after non-routine days. I was able to perform the content analysis on the six submitted dreams, I identified 204 dream elements, categorize these elements into 12 of the 14 categories, and found that after participants had a routine day (31.86% of all elements were Incongruous, Vague, or Discontinuous; 68.14% were Non-bizarre). I also identified the most common content categories for all three bizarre types (31.25% of Incongruous bizarre elements were actions, 25% of vague bizarre elements were actions and 25% were events, and 23.53% of discontinuous bizarre elements were actions and 23.53% were places).

The idea behind this study came from my observation that my most bizarre dreams occurred after extraordinary days rather than after routine and usual days. After subsequent research, I was unable to find any past studies that looked into the events of a day as a whole before a recalled dream, then reflected on dream content, let alone bizarre dream content. I have developed this observation into my present research idea, where the purpose of my study was to determine if bizarre dreams occur more frequently after a routine day or after an extraordinary/unusual day. My hypothesis was that bizarre dreams would occur more frequently

[10]Kevin McGowan, Department of Psychology, Lindenwood University. Correspondence concerning this article should be addressed to Kevin McGowan, Department of Psychology, Lindenwood Univeristy, 209 South Kingshighway, MO 63301.
Contact: kwm635@lindenwood.edu