

Maternal Gatekeeping 1

Maternal Gatekeeping: Do They See It The Way We Do?

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Research on the importance of father-child relationships has increased because prior research has indicated that father engagement has a positive influence on the child's social, behavioral, and psychological outcomes from infancy to adolescence (Pruett, Pruett, & Wong, 2009; Sarkadi, Kristiansson, Oberklaid, & Bremberg, 2007). Higher levels of father engagement in child care have also produced positive effects on self-esteem in children and on the quality of the marital relationship (Pruett et al., 2009; Sarkadi et al., 2007). These discoveries have drawn attention to the external factors that encourage or discourage the father's level of involvement in childrearing. Fathers are more likely to be positively engaged with their children when they have few symptoms of poor mental health, are securely attached to their own parents, communicate effectively with the child's mother, and have more social support (Pruett et al., 2009). Research shows that one of the most significant influences on paternal quantity and quality of involvement in childrearing is the mother's beliefs and behavior toward the father (Allen & Hawkins, 1999). The mother often acts as a 'gatekeeper' by controlling the father's interaction with the child. Mothers may resist increased father involvement by attempting to exclude the father from child care, or support increased father involvement by encouraging fathers to become engaged in child care (Fagan & Barnett, 2003; Puhlman & Pasley, 2010). Specifically, maternal gatekeeping behavior is a set of conscious or unconscious behaviors the mother engages in that either support or discourage the father's relationship with the child.

Gender Roles at the Transition to Parenthood

The notion of maternal gatekeeping is deeply embedded in gender roles, which take on special significance at the transition to parenthood. In the first year of the infant's life, mothers conveniently draw on traditional gender norms to negotiate home care for their children, while

fathers are faced with strong societal norms and expectations forcing them to think of leave-taking as more of a “privilege” than an “obligation” (McKay & Doucet, 2010). Another realm of family life where traditional gender roles are magnified is the division of housework and childcare. Even though women’s participation in the labor force has increased considerably, women still do most of the housework and childcare (Poortman & Van Der Lippe, 2009). In a study of 732 couples, researchers examined whether women’s attitudes toward cleaning, cooking, and child care were more positive than men’s attitudes and whether these gendered attitudes were associated with the actual division of housework and child care (Poortman & Van Der Lippe, 2009). The results indicated that women enjoyed and felt more responsible for these household tasks than men. Women with more positive attitudes towards housework typically contributed greater amounts of time to actually completing household tasks. It is believed that women are less able to avoid household labor than men because they generally earn less than men and therefore have less power. Gendered attitudes toward household division of labor continue to contribute to our knowledge of gender inequalities in the home (Poortman & Van Der Lippe, 2009).

Gatekeeping and Father Involvement

In 1999, Allen and Hawkins were the first researchers to look at specific gatekeeping beliefs and behaviors of mothers that may limit fathers’ amount of participation in family work. They conceptualized three intertwined dimensions of maternal gatekeeping: differentiated family roles, maternal identity confirmation, and standards and responsibility (Allen & Hawkins, 1999). Differentiated family roles relate to the mother’s strong set of beliefs about mothering and fathering roles, especially the mother’s belief that she is primarily responsible for family work. Maternal identity confirmation relates to the mother’s desire for an external validation of the

maternal role. Standards and responsibility relates to the mother's resistance to relinquish her responsibility for domestic labor by taking charge of tasks, doing chores alone, and redoing tasks to a higher standard (Allen & Hawkins, 1999). In a study of 622 dual-earner mothers who were married and had at least one child living at home, Allen and Hawkins tested their three-fold conceptualization of maternal gatekeeping—differentiated family roles, maternal identity confirmation, and standards and responsibility—and discovered that the validity of their model received modest empirical support. They found that mothers higher on one dimension of gatekeeping were generally higher on the other two and that this “triple combination” created a reliable group of gatekeepers who did more domestic labor and had less equitable family arrangements (Allen & Hawkins, 1999).

Fagan and Barnett (2003) defined maternal gatekeeping as mothers' preferences for carrying out various child care tasks rather than permitting the father or father figure to carry out the tasks. In their study of 30 families receiving in-home child welfare services and 72 families known to undergraduate students of a human behavior course, Fagan and Barnett explored the relationship between mothers' attitudes about the importance of the father role, mothers' perceptions of paternal competence, gatekeeping behavior, and amount of father involvement (2003). Their findings of a significant negative relationship between maternal gatekeeping and father involvement are consistent with previous studies (Allen & Hawkins, 1999). Mothers were also found to play an important role in determining how much time fathers spend with their children through their perception of the father's competence. Consistent with previous research, fathers who are more competent parents may be more motivated to spend time interacting with their children because they find the involvement rewarding. It could be that when mothers think dads are incompetent, they are more likely to “close the gate” and thus fathers are less involved

(Fagan & Barnett, 2003). These findings suggest that the mother's perception of the father's competence plays a significant role in determining how much time fathers spend with their children.

To expand on previous research, Schoppe-Sullivan, Brown, Cannon, Mangelsdorf, and Sokolowski defined maternal gatekeeping as consisting of both critical and encouraging behaviors engaged by mothers with the goal of regulating fathering behaviors (2008). Researchers recruited 97 families that were expecting a child from childbirth education classes, flyers posted at local businesses, and through word of mouth. Data were collected during the third trimester of pregnancy and 3.5 months after the birth of the child. During the prebirth stage of the study, researchers assessed expectant parents' beliefs about the paternal role, and at 3.5 months postpartum parents were asked to complete a questionnaire that asked fathers and mothers to report on maternal gatekeeping behavior (Schoppe-Sullivan et al., 2008). Results showed that maternal encouragement was a strong predictor of fathers' relative involvement in child care and that it mediated the relationship between coparenting quality and reported relative father involvement. Researchers also discovered that fathers' beliefs about fathers' roles were associated with higher levels of observed involvement when the mother engaged in low levels of criticism. In addition to this discovery, coparenting relationship quality was found to be associated with the father's observed involvement and competence only when mothers gave high levels of encouragement. The results of this study continue to support the concept of the mother affecting father involvement by acting as a gatekeeper (Schoppe-Sullivan et al., 2008).

The level of father involvement in a child's early life is related to fathers' perceptions of parenting skills (Barry, Smith, Deutsch, & Perry-Jenkins, 2011). A recent study examined the relationship between fathers' perceived parenting skills and actual level of involvement over the

transition to parenthood. Findings showed that early perceived skills were important to actual level of involvement. When mothers increased their hours of working outside the home, fathers were able to increase their involvement and skill with their child—especially in working class couples, where many couples work alternate shifts (Barry et al., 2011). Maternal gatekeeping had a negative relationship with level of father involvement only when mothers were home full-time with the baby. It is likely that mothers did not engage in gatekeeping behavior when the baby was one year old because they perceived fathers to be more competent in their abilities with the baby. Also, when parents worked opposite shifts, fathers had less exposure to maternal gatekeeping behavior (Barry et al., 2011).

In a study exploring predictors of father involvement during the first year of parenthood, researchers found that a variety of factors influence father involvement in dual-earner, working-class families. Mothers' work hours and shift time were two characteristics that were central predictors of father involvement. Researchers found that parents who work opposite shifts are better able to share childcare responsibilities (Meteyer & Perry-Jenkins, 2010). Findings also indicated that the more hours mothers worked, the more highly involved fathers were in childcare, suggesting that when mothers work more hours they are more willing to accept the father's help. Maternal gatekeeping was a significant predictor of father involvement at one year postpartum. The negative control gatekeepers engage in allows mothers to maintain a sense of "primacy" as mothers (Meteyer & Perry-Jenkins, 2010).

Predictors of Gatekeeping

Once it was established that mothers affect the level of father engagement, further research was done by Gaunt to examine the mother's gatekeeping tendencies as predictors of gatekeeping behavior (2008). Gaunt defined maternal gatekeeping as mothers' preferences and

attempts to inhibit fathers' participation in family work. The goal of her study was to explore the background and psychological correlates of maternal gatekeeping. Some psychological correlates of gatekeeping are *power and self-esteem*, or the mother's reluctance to share control over the home because this may be her only source of authority, *affirmation of gendered self*, or the belief that women and men perform different tasks to affirm and reproduce their gendered selves, and *validation of maternal identity*, which is the suggestion that doing family work is a way for mothers to prove to themselves that they are good mothers (Gaunt, 2008). In a sample of 209 Israeli couples, Gaunt measured self-esteem, feminine gender orientation, maternal identity, background variables, involvement in child care, and mothers' tendency for gatekeeping as predictors of actual maternal gatekeeping behavior. Mothers high on gatekeeping were characterized by low self-esteem, a strong feminine gender orientation, and a prominent maternal identity. Gaunt also found that the stronger the mother's religiosity, the fewer her work hours, the less importance she attached to her work, and the lower her income and education level, the more she tended to resist father's participation in family work (2008).

Recently, Kulik and Tsoref (2010) have continued to expand on the little knowledge we have about predictors of maternal gatekeeping. Kulik and Tsoref described maternal gatekeeping by comparing the home and family to a maternal garden that has a wall built around it with a latched gate, which will ensure that the mother maintains her designated role as caregiver. They describe maternal gatekeeping as being affected by two conflicting forces: mothers who welcome help from their children's father to help make life easier and mothers who have difficulty giving up their traditional maternal role, and consciously or unconsciously prevent their children's father from being engaged with the children (Kulik & Tsoref, 2010). In a study consisting of 88 married Israeli women with at least one child between the ages of two

and six, these researchers examined the contribution of maternal characteristics as predictors of mothers' reports of gatekeeping. They also examined how maternal gatekeeping is affected by the background characteristics of the father and children and the social characteristics of the couple (Kulik & Tsoref, 2010). Results showed that the mother's gender role ideology contributed most significantly to explaining maternal gatekeeping. Gender role ideology is a system of beliefs, feelings and needs that distinguish men from women and represents what individuals view as masculine and feminine roles, so mothers with strong traditional gender role beliefs were likely to be high on maternal gatekeeping (Kulik & Tsoref, 2010). The mother's satisfaction with her husband's involvement in child care was also found to be significantly correlated with maternal gatekeeping. The happier the mother was with her husband's engagement with the children, the more confidence she had in his ability to care for the children, and the higher her tendency to let him engage in child care (Kulik & Tsoref, 2010).

To investigate maternal regulation of father involvement in the context of family interaction, Cannon et al. included observations of maternal gatekeeping behavior, which no prior published studies had included. Cannon et al. defined maternal gatekeeping as the extent to which mothers are supportive of (observed gate opening) or resistant to (observed gate closing) increased paternal involvement. In Cannon et al.'s longitudinal study of 97 families, they investigated maternal regulation of father involvement when the mother, father, and infant were present together at 3.5 months postpartum. First, couples were given an infant jungle gym and were instructed to "play together with your baby as you normally would" for 5 minutes. Second, couples were given a "onesie" and were asked to change the infant into the onesie cooperatively (Cannon et al., 2008). Researchers also examined associations between parental personal characteristics, measured during the third trimester of pregnancy, and maternal gatekeeping.

Researchers assessed idealization of parents, beliefs about the roles of fathers, and parent personality as predictors of gatekeeping. Results showed parent negative emotionality (e.g. anxiety, depression) as a risk factor for greater maternal negative control and lower facilitation, especially when combined with less progressive beliefs toward parental roles.

Contextual Factors

Parental Leave. The period of time in which mothers and fathers are transitioning to their new roles as parents is a time when traditional gender roles are magnified (Doucet, 2009). The early phase of an infant's life is a fundamentally different experience for the mother than it is for the father. Not only does the mother's body physiologically change during pregnancy, but many researchers have noted that immediately after a woman knows she is pregnant, she enters "into an embodied world of pregnancy and the social networks and institutional environments surrounding and regulating embodied pregnancy" (Doucet, 2009, p. 84). While little research is documented about the experience of men during the advent of pregnancy, it is believed that their experience is remarkably more ambivalent. Women are immersed in pregnancy as their body changes, while men have a much more 'disembodied' experience—lacking any biological response (Doucet, 2009).

Because a woman's pregnancy has "anchored" her to the baby, the father-child relationship in the early months of a newborn's life is critical (Doucet, 2009). Mothers may feel like they have a "head start" because they have experienced pregnancy, birthing, and breastfeeding. This initial bond between the mother and the infant could influence mothers to feel as though they have some kind of special parenting expertise, opening up the possibility for them to fall into a gatekeeping role. Because mothers have an innate bond with their infants at birth, it is critical for fathers to begin building a bond with the infant as early as possible. This is

one of the reasons why parental leave is critical in helping fathers create a bond with their infants in the first weeks of life (Doucet, 2009).

Canada's Employment Insurance Act of 2001 provides parental leave for about a year. Fifteen weeks are reserved for mothers as maternity benefits, and either fathers or mothers can use the other thirty-five weeks (Doucet, 2009). Quebec established the Quebec Parental Insurance Plan (QPIP) in 2006, including 3 to 5 weeks of non-transferable paternity leave (McKay & Doucet, 2010). Most fathers took a short leave with the mother, immediately after the infant's birth. Fathers who took longer leaves usually did so only when the mothers were not eligible for benefits (McKay & Doucet, 2010). In making the decision about who would take the *transferable* leave, fathers deferred judgment to mothers. This gave the mother ownership over what is actually shared leave benefit entitlement (McKay & Doucet, 2010). Often paternity leave that "doesn't take away" from the mother was strongly supported by Quebec fathers. Many fathers felt a strong "moral" commitment to the belief that good fathers are not supposed to take away mothers' leave time. I hypothesized that the longer the mother's parental leave, the more likely she will be to gate close.

Cesarean Section. While no study has examined the correlation between whether a mother had a cesarean section and the extent to which gatekeeping takes place, a 1981 study examined the relationship between father-involvement in families where the mother had a cesarean section (Rodholm). The results of this study showed that father involvement at 5 months postpartum was greater in families where the father had an extended period of contact with the infant immediately following birth (Rodholm, 1981). Because there is a recovery period associated with a cesarean section, it is likely that the father of a cesarean sectioned baby will be more involved in the baby's early life compared to the father of a naturally birthed baby. Thus, I

hypothesized that a mother who had a cesarean section will be less likely to gate close due to the initial involvement of the father in the baby's life.

The Proposed Study

The central goal of this study was to examine the associations between mothers' reports of maternal gatekeeping behavior and actual observations of maternal gatekeeping in family interactions including mother, father, and infant. The study also considered predictors of observed maternal gatekeeping behavior, and compared the predictors of observed gatekeeping behavior to predictors of self-reported gatekeeping behavior. It is important to include observations of gatekeeping behavior because prior research indicates that observations and self-reports of gatekeeping behavior might not always match (Lorenz et al., 2007). The discrepancy between self-reports and observations of gatekeeping might be because people behave differently in various contexts or because of a social desirability bias (Lorenz et al., 2007). Specifically, this study addressed the following questions: (1) Are parents' perceptions of maternal gatekeeping behavior consistent with observations of maternal gatekeeping? (2) What are the parent characteristics that predict observed maternal gatekeeping? (3) Are the predictors of observed and self-reported maternal gatekeeping similar? It was hypothesized that there will be positive correlations between parents' reports of maternal gatekeeping behavior and actual observations of mothers' behavior. With respect to the second question, I examined contextual factors: length of parental leave and whether or not the mother had a caesarean section. I hypothesized that the longer the mother's parental leave, the more likely she would be to gate close. I also hypothesized that if the mother had a caesarean section, she would be more likely to open the gate to the father. I also examined two classes of predictors of maternal gatekeeping: mothers' psychological well-being, and parents' gender role beliefs. To examine mothers' psychological

well-being as a predictor of gatekeeping, I assessed mothers' level of depression, overall perfectionism, satisfaction with life, and anxiety level. To examine parents' gender role beliefs, I assessed whether the parent has a traditional or progressive view of parenting; I also assessed the parents' levels of benevolent and hostile sexism. I hypothesized that the stronger the mother's desire is to be a perfect parent, the more she will engage in gate closing, or inhibitory maternal gatekeeping behavior, and the less she will engage in gate opening. While no researcher has specifically examined the correlation between a mother's desire to be a perfect parent and her level of inhibitory maternal gatekeeping, previous research (Allen & Hawkins, 1999) has shown that a mother who scores high on the standards and responsibility measure of maternal gatekeeping is reluctant to relinquish her responsibility for domestic labor by taking charge of tasks, doing chores alone, and redoing tasks to a higher standard. Secondly, I hypothesized that the higher the mother's level of depression, lower her satisfaction with life, and higher her anxiety level, the more likely she would be to engage in gate closing or inhibitory maternal gatekeeping behavior and the less she will engage in gate opening. This hypothesis is consistent with previous research (Gaunt, 2008). I also hypothesized that the more progressive the parents' views of parenting, the less likely the mother would be to engage in maternal gatekeeping behavior. Previous research has shown that mothers with strong traditional gender role beliefs are likely to be high on maternal gatekeeping (Kulik & Tsoref, 2010).

Almost all of the previous research on maternal gatekeeping has utilized different measures of maternal gatekeeping—mainly self-reports—and has made no attempt to validate these measures. The present study, however, obtains observations of maternal gatekeeping behavior from actual mother-father-infant interaction episodes, in addition to self-reports of

gatekeeping behavior. Thus, this will be the first study to compare observations and self-reports of gatekeeping and examine predictors of both.

Methods

Participants

Participants were 182 dual-earner married (86%) and cohabiting (14%) couples recruited to partake in a longitudinal study of first-time parents (New Parents Project). All participating expectant parents were required to (1) (a) be married, or (b) cohabiting for at least 3 months and living together all or most of the time; (2) be at least 18 years of age; (3) be expecting their first child; (4) be the biological parents of the child they were expecting; (5) be able to read and speak English; (6) be currently employed full-time and both expecting to work at least part-time after their infant's birth; and (7) be planning to stay in the Central Ohio area for at least one year. Participants were recruited using an array of methods intended to create a diverse sample. Study participants were mainly recruited through childbirth education classes, recruitment flyers posted at OBGYN clinics, and newspaper advertisements. Then, by using a "snowball" approach, couples who agreed to participate were asked to provide contact information for any other couples they knew who would be interested in participating in the study.

Procedure

The research was conducted in four phases from October 2008 through October 2010. Phase 1 of the study occurred during the third trimester of pregnancy. Couples were asked to independently complete a series of questionnaires and time diaries. In their homes, expectant parents participated in individual interviews and two videotaped interaction tasks. Phase 2 of the study occurred at three months postpartum. Couples were required to complete questionnaires and time diaries independently. Two weeks later, researchers visited couples at home for 1 hour.

The couples were videotaped while discussing a relationship issue, playing individually with the infant for 5 minutes, and participating in interactions together with their infant. Phase 3 of the study occurred at six months postpartum. Data at 6 months postpartum were collected through surveys and time diaries mailed home. Then, a 30-minute individual phone interview was conducted to check the information provided on the paper time diaries. Phase 4 of the study occurred at nine months postpartum. Parents were again asked to complete surveys and time diaries mailed to their homes. Parents and their infants visited the Center of Science and Industry (COSI) for 1.5 hours. During this time they were videotaped while discussing a relationship issue, playing individually with the infant for 10 minutes, and participating in two interactions together with their infant for 10 minutes. Parents were also individually interviewed about their paper time diaries.

My study focuses on Phase 1 and Phase 4. In Phase 1 of the study, I am looking closely at the predictors of gatekeeping: mothers' psychological well-being and parents' gender role beliefs. In Phase 4 of the study, I am looking closely at observations of gatekeeping: gate closing and gate opening. At this time, data from 150 families on observations of maternal gatekeeping at Phase 4 are available. I will also use self-reports of gatekeeping behavior collected at Phase 4.

Measures

Contextual Factors. To assess parental leave as a predictor of gatekeeping, I examined the length of the mother's leave. At 9 months postpartum, mothers were asked to report the length of their leave (from x to y) or whether their leave was ongoing. To assess whether the mother's form of birth predicts gatekeeping behavior, I examined whether or not the mother had a caesarean section. At 3 months postpartum, mothers were asked, "Was your baby born through

vaginal delivery or cesarean section (c-section)?" 70% of mothers reported having had a vaginal delivery and 30% of mothers reported having had a cesarean section.

Mothers' Psychological Well-Being. To assess the mothers' psychological well-being as a predictor of gatekeeping, I examined the mothers' desire to be a perfect parent. During Phase 1 of the study, expectant mothers completed a subset of 12 items from the Multidimensional Parenting Perfectionism Questionnaire (Snell, Overbey, & Brewer, 2005), on which respondents rate themselves on a scale of 0 to 4 (0 = not at all characteristic of me; 4 = very characteristic of me) on the extent to which they have extremely high standards for parenting and excessive motivation to be a perfect parent (e.g., "I always pressure myself to be the best parent in the world").

I also examined the mothers' overall well-being. During the third trimester of pregnancy, expectant mothers completed the 16-item *Well-Being Questionnaire*, which combines three valid and reliable measures into one self-report questionnaire. It uses *The Satisfaction with Life Survey* (SLWS; Pavot & Diener, 1993), which assesses the respondent's satisfaction with their life (e.g., "If I could live my life over, I would change almost nothing") using 5 items rated on a 7-point scale (1 = strongly disagree; 7 = strongly agree). The *Well-Being Questionnaire* also uses a short version of the *Center for Epidemiologic Studies Depression Scale* (CES-D; Radloff, 1977), which is designed to measure depressive symptoms (e.g., "In the past week I felt that people disliked me") using 5 items and a 4-point scale (0 = rarely or none of the time; 3 = most or all of the time). The final measure used in the *Well-Being Questionnaire* was the 6-item version of the *Spielberger State-Trait Anxiety Inventory* (STAI; Marteau & Bekker, 1992), which measures anxiety (e.g., "I am tense") on a 4-point scale (1 = not at all; 4 = very much).

Parents' Gender Role Beliefs. To assess mothers' gender role beliefs before the birth of their children, expectant parents completed a 29-item questionnaire that measures beliefs about parent roles and includes 26 items from the *Beliefs Concerning the Parental Role Scale* (Bonney & Kelley, 1996). Respondents rate their level of agreement (1 = disagree strongly; 5 = agree strongly) with the items regarding the role of the mother and father (e.g., "Responsibility for the discipline of the children should be equally divided between the mother and the father"). Also included in this questionnaire are three items from the *Survey of First-Time Mothers* (Beitel & Parke, 1998). These items measure respondents' agreement with statements about fathers' and mothers' natural abilities to nurture. Expectant parents also were assessed on their sexist beliefs. They completed the 22-item *Ambivalent Sexism Inventory* (Glick & Fiske, 1996), which measures respondent agreement (0 = disagree strongly; 5 = agree strongly) with 11 Hostile Sexism items (i.e., "women seek to gain power by getting control over men"), and 11 Benevolent Sexism items (i.e., "women should be cherished and protected by men"), and has shown reliability and validity (Glick et al., 2000).

Maternal Gatekeeping. At 9 months postpartum, observations of maternal gatekeeping behavior were obtained from the mother-father-infant interaction episodes. In these episodes, parents were first given a novel toy (jack-in-the-box) and asked to introduce the new toy to their children together. The introduction of this toy placed the child in an uncertain situation that could elicit maternal gatekeeping behavior. Second, parents were given another toy (pop-up toy) and asked to play together as they normally would for an additional 5 minutes.

Maternal gate closing is defined as any attempt to limit the father's interaction with the baby. For example, a mother may show her expertise in performing a certain task, lack confidence in the father's parenting, or try to control all interaction with the child. Mothers are

rated on a scale (1= No negative control; 5= Very high negative control) for their overall negative control (gate closing). The rating is based on both verbal and nonverbal behavior during the episode and the intent of the message given.

Maternal gate opening is defined as the mother's effort to support or encourage the father's interaction with the baby. For example, a mother may give compliments, positive instruction, or help make time with the baby easier and more enjoyable for the father. Mothers are rated on a scale (1= No facilitation; 5= Very high facilitation) for their overall level of gate opening. This rating is based on a clear observation that the mother is promoting interaction with no negative edge to minimize the father or discourage interaction.

My coding partner and I refined the manual for coding these interactions for gatekeeping behavior in Summer 2011. Then we started coding. We overlapped on a randomly selected 57% of the episodes, and used episodes we both coded to establish interrater reliability. Our reliability (gamma statistics) in the Jack-in-the-box episode was .78 for maternal gate closing and .86 for maternal gate opening. Our reliability in the pop-up toy episode was .93 for maternal gate closing and .91 for maternal gate opening.

Self-reports of maternal gatekeeping were obtained using the Parental Gatekeeping *Inventory* (VanEgeren, 2000), which asks parents to report the frequency (1 = never, 6 = several times per day) with which mothers gate close (i.e., "looks exasperated and rolls her eyes") or gate open (i.e., "tells you how happy you make your child"). The scale consisted of 8 gate closing items and 9 gate opening items, in which the mother rated her own behavior and the father rated mothers' behavior. Schoppe-Sullivan et al. (2008) provided preliminary evidence for the reliability and validity of this measure.

Results

Associations Between Observations and Self-Reports

Descriptive statistics and intercorrelations were computed for observed and self-reported maternal gate closing and gate opening (see Table 1). On average, mothers were low on all measures of gate closing. Mothers were also relatively low on observed gate opening, but parents reported somewhat greater levels of maternal gate opening. There was a statistically significant positive association ($r = .222, p < .05$) between observed gate closing in the Jack-in-the-box episode and mothers' reports of gate closing. Also, mothers who were observed to open the gate less often reported engaging in statistically significantly higher levels of gate opening behavior ($r = -.173, p < .05$).

Observed gate closing and gate opening behavior were consistent across observational episodes. Observed gate closing behavior in the Jack-in-the-box episode was significantly associated ($r = .439, p < .01$) with observed gate closing behavior in the pop-up toy episode. This indicates that as we observed higher levels of gate closing in the Jack-in-the-box episode, we also observed higher levels of gate-closing in the pop-up toy episode. Observed gate opening behavior in the Jack-in-the-box episode was also significantly associated ($r = .229, p < .05$) with observed gate opening behavior in the pop-up toy episode. This indicates that as we observed higher levels of gate opening behavior in the Jack-in-the-box episode, we also observed higher levels of gate opening in the pop-up toy episode.

Self-reports of gate closing and gate opening behavior were consistent among both parents. When mothers reported themselves higher on gate closing, there was a positive, statistically significant association ($r = .321, p < .01$) with fathers' reports of maternal gate closing and a statistically significant negative association ($r = -.179, p < .05$) with fathers'

reports of maternal gate opening. This indicates that as mothers reported themselves higher on gate closing, fathers also reported mothers higher on gate closing and lower on gate opening. When mothers reported themselves higher on gate opening, there was a positive, statistically significant association ($r = .255, p < .01$) with fathers' reports of maternal gate opening. This indicates that as mothers reported themselves higher on gate opening, fathers also reported mothers higher on gate opening.

Associations Between Maternal Psychological Well-Being and Maternal Gatekeeping

Correlations were computed between psychological well-being and observed and self-reported maternal gate closing and gate opening (see Table 2). There was a statistically significant association between maternal overall parenting perfectionism and mothers' self-reported gate closing ($r = .188, p < .05$) and fathers' reported maternal gate closing ($r = .237, p < .01$). This indicates that as mothers scored higher on their overall level of perfectionism, fathers and mothers reported higher levels of maternal gate closing. Overall parenting perfectionism was also negatively associated ($r = -.174, p < .05$) with observed gate closing in the pop-up toy episode. This indicates that as mothers rated themselves higher on perfectionism, they were observed to engage in less gate closing behavior. There was also a statistically significant correlation ($r = .273, p < .01$) between maternal depression and mothers' self-reported gate closing. This shows that as levels of maternal depression increased, mothers reported themselves higher on gate closing behavior. There was a statistically significant negative correlation ($r = -.267, p < .01$) between maternal life satisfaction and mothers' self-reported gate closing. This indicates that as mothers rated themselves higher on levels of life satisfaction, they reported themselves lower on gate closing. There was a positive statistically significant association ($r = .172, p < .05$) between maternal life satisfaction and mothers' self-reported gate opening. This

indicates that as levels of maternal life satisfaction increased, levels of mothers' self-reported gate opening also increased. Maternal life satisfaction also had a statistically significant association ($r = .198, p < .05$) with fathers' reports of maternal gate opening. This indicates that the higher mothers' level of life satisfaction, the more fathers reported maternal gate opening.

Associations Between Mothers' and Fathers' Gender Role Beliefs and Maternal Gatekeeping

Correlations were also computed for gender role beliefs and observed and self-reported maternal gate closing and gate opening (see Table 3). There was a statistically significant negative association ($r = -.170, p < .05$) between progressive maternal beliefs and mothers' self-reported gate opening. This indicates that as mothers' level of progressive beliefs increased, there was a decrease in the level of mothers' self-reported gate opening. There was a statistically significant negative association ($r = -.181, p < .05$) between progressive paternal beliefs and observed gate opening in the Jack-in-the-box episode. This indicates that as fathers had more progressive gender role beliefs, mothers were observed to open the gate less in the Jack-in-the-box episode. There was a positive association ($r = .190, p < .05$) between maternal natural superiority and fathers' reports of maternal gate closing. This indicates that as mothers more strongly believed in the natural superiority of women as parents, fathers reported higher levels of gate closing. There was a positive association ($r = .202, p < .05$) between paternal natural superiority beliefs and fathers' reports of maternal gate closing. This indicates that as fathers believed in the natural superiority of women as parents, fathers also reported higher levels of maternal gate closing. There was a positive association ($r = .186, p < .05$) between maternal benevolent sexism and mothers' self-reported gate closing. This indicates that as mothers believed in higher levels of benevolent sexism, they reported higher levels of gate closing. There

was also a positive association ($r = .193, p < .05$) between maternal hostile sexism and observed gate closing in the Jack-in-the-box episode. This means that as mothers reported higher levels of hostile sexism beliefs, they were observed to engage in higher levels of gate closing in the Jack-in-the-box episode. Paternal benevolent sexism was positively associated ($r = .170, p < .05$) with fathers' reports of maternal gate closing. This indicates that as fathers reported higher levels of benevolent sexism beliefs, fathers also reported higher levels of maternal gate closing. There was a positive correlation ($r = .240, p < .01$) between paternal hostile sexism beliefs and fathers' reports of maternal gate closing. This indicates that as fathers reported higher levels of hostile sexism beliefs, they also reported maternal gate closing at higher levels.

Contextual Factors and Maternal Gatekeeping

Because many mothers had similar lengths of leave, six categories were created to analyze the association between parental leave and gatekeeping. The first category of mothers had no leave or minimal leave; the second category had 2-6 weeks leave; the third category had 7-11 weeks leave; the fourth category had 12 weeks leave; the fifth category had 13-24 weeks leave; the sixth category had ongoing leave. With respect to maternal leave, there were no significant associations between length of maternal leave and observed or self-reported maternal gate closing and gate opening. In addition, with respect to the mode of birth, there were no significant differences observed.

Discussion

The purpose of this study was to examine the extent to which there was an association between observations of maternal gatekeeping in a controlled environment of mother, father, and infant triadic play and mothers' and fathers' reports of maternal gatekeeping behavior. This

study also assessed predictors of observed and self-reported gatekeeping behavior and compared them.

Similarities Between Self-Reports and Observations

Results indicated a modest association between observations and self-reports of gatekeeping behavior. When mothers were observed to close the gate more to fathers during the Jack-in-the-box episode, mothers also reported more gate closing behavior. Consistencies between observed and self-reported gatekeeping behavior indicate that self-reports are an accurate measure of gate closing behavior to some extent. However, in the Jack-in-the-box episode, when mothers were rarely observed to gate open, they actually felt like they opened the gate more often. This finding exemplifies the complicated nature of observed gate opening. It is likely different from the everyday types of gate opening mothers are thinking about when answering items on the questionnaire (i.e., “Tell other people about what a good parent he is at a time when he can hear you”). Prior research indicates that observations are more likely to be similar to self-reports if the behaviors measured by self-reports are likely to occur in the observations (Lorenz et al., 2007). The behaviors measured by self-reports and observations are more similar for gate closing than gate opening. It is likely that mothers who report themselves higher on gate opening behavior open the gate to fathers more often in daily interactions than in the controlled lab environment.

Consistency in Gatekeeping Behavior across Contexts and Reporters

Also, observations of gate closing and observations of gate opening in the Jack-in-the-box episode were respectively associated with observations of gate closing and gate opening in the pop-up toy episode. This indicates that observations of gatekeeping behavior were consistent across episodes. Moreover, as mothers reported higher levels of gate closing, fathers also

reported higher levels of maternal gate closing and less gate opening. When mothers reported higher levels of gate opening, fathers also reported higher levels of maternal gate opening. This indicates an association between fathers' self-reported maternal gatekeeping behavior and mothers' own reports of gatekeeping. Thus, gatekeeping showed consistency across contexts and reporters.

Predictors of Observed Gatekeeping

Results also indicated significant predictors of observed gatekeeping behavior. The higher mothers reported themselves on overall perfectionism, the less they were observed to engage in gate closing behavior in the pop-up toy episode. It is possible that the more a mother desires perfection, the less she wants to try to control the father because she thinks, ideally, he should be equally involved in the interaction. Perhaps the mother controls her natural desire for perfection and tries not to engage in controlling behavior as a way of conforming to her perception of societal norms. The more progressive fathers' beliefs about parent and gender roles were, the less mothers were seen to engage in gate opening. Fathers who have progressive beliefs likely feel competent in their abilities to parent and initiate involvement without maternal encouragement. The stronger mothers' hostile sexism beliefs, the more they were seen to engage in gate closing behavior in the Jack-in-the-box episode. Hostile sexism beliefs are generally associated with distinct gender role beliefs. Mothers who have more hostile sexism beliefs likely have strong beliefs about the mothering role and feel reluctant to relinquish their sense of familial responsibility. This is consistent with prior research, which has indicated that mothers who score higher on gatekeeping have difficulty sharing family matters and obtain their identity from the mothering role (Allen & Hawkins, 1999).

Predictors of Self-Reported Gatekeeping

Mothers who reported themselves higher on gate closing behavior reported themselves higher on perfectionism, depression, and benevolent sexism but lower on life satisfaction. While mothers who reported themselves higher on parenting perfectionism were observed to engage in less gate closing behavior, they reported themselves to engage in higher levels of gate closing. There was also a positive association between maternal reports of parenting perfectionism and paternal reports of maternal gate closing. This illustrates the complex nature of parenting perfectionism. It is possible that mothers higher on parenting perfectionism were performing for the camera and making a concerted effort to not engage in gate closing behavior because of a social desirability bias, whereas in real, day-to-day life they were actually engaging in gate closing behavior. Mothers higher on depression reported themselves higher on gate closing. Depressed mothers are likely to view themselves negatively and probably felt a stronger sense of parental inadequacy than non-depressed mothers, and thus, perceive their behavior more negatively. Mothers who scored higher on life satisfaction reported less gate closing and more gate opening; fathers also reported greater maternal gate opening when mothers reported greater life satisfaction. Mothers who are more satisfied with life are probably less critical of the father and spend more time enjoying the family interaction. Mothers higher on benevolent sexism reported more gate closing behavior. By nature, sexism implies a disparity between maternal and paternal roles. Sexist mothers are probably more likely to identify with the traditional maternal role of caregiver and, thus, feel as though they have a more effective parenting strategy than the father. If the mother feels like she has a more effective parenting strategy than the father, then she is more likely to correct and criticize the father's behavior. The higher mothers reported themselves on progressive maternal beliefs, the less gate opening mothers reported themselves performing. Perhaps the more progressive the mother's beliefs, the more she thinks

parenting should be shared equally between partners, and the less she feels the need to encourage father involvement. This finding is similar to my finding that observations of maternal gate opening were less when fathers reported more progressive beliefs.

The higher mothers and fathers reported themselves on natural superiority, the more mothers reported closing the gate to fathers. When both partners view the mother as the superior parent, it is probable that the mother's judgment will prevail in all child-rearing situations. The greater fathers' benevolent and hostile sexism beliefs, the greater he reported maternal gate closing. Perhaps when fathers hold more sexist beliefs they feel a lack of competence in their ability to parent and perceive the mother's efforts as controlling and condescending.

Jack-in-the-box versus Pop-up Toy

The Jack-in-the-box toy elicited more variability in gatekeeping behavior than the pop-up toy. The Jack-in-the-box was perhaps a better toy for gauging the mother's response because it was a novel toy. During the interaction, many families commented that they did not own a Jack-in-the-box, while most had a pop-up toy. Jack-in-the-box toys also have more of an element of fear than pop-up toys. The parents might be more likely to take different approaches with the child when introducing the child to a novel, fear-inducing stimulus, thus eliciting more gatekeeping behavior. Another reason why we did not see as much gatekeeping behavior in the pop-up toy episode could be because it was the last interaction task. It is likely that families were exhausted or less engaged in the interaction.

Contextual Factors: C-Section and Parental Leave

Significant associations were not found between the length of the mother's leave and the level of gatekeeping she demonstrated. Future research should examine paternal leave as well as maternal leave as predictors of gatekeeping. There were also no significant associations between

whether the mother had a c-section or vaginal delivery and her gatekeeping. It is possible that no significant associations were found between c-section and gatekeeping behavior because of the lack of diversity in our sample. Perhaps if we had a more representative sample of parents, we would see more associations between method of birth and level of gatekeeping. This could also be a possible reason for the lack of associations between parental leave and gatekeeping.

Because our sample consisted of relatively progressive, middle class families parental leave might not have had a strong influence on gatekeeping—especially since many of the mothers were back at work at 9 months postpartum.

Strengths and Limitations

Strengths of this study should be noted. The biggest strength of this study was its use of self-reported and observational data on gatekeeping. The interrater reliability of the videotaped observations was relatively high. No prior study has examined the relationship between observations and self-reports of gatekeeping behavior. Because maternal gatekeeping is a relatively new construct and much of the existing knowledge of gatekeeping behavior relies solely on self-reports, it is important to validate our measures of gatekeeping by examining if we see gate closing and gate opening in the observed triadic interactions. The study also had a relatively large sample size of couples. Another strength of this study was its examination of predictors of observed and self-reported gatekeeping behavior. The more knowledge we have about the antecedents of gate closing behavior, the more likely we will be to prevent this behavior from occurring.

This study also had limitations. Self-reports of gatekeeping behavior are subject to self-serving biases, in which mothers tend to attribute positive behavior to their own efforts and negative behavior to external influences (i.e., father, environment, etc.). Self-reports of

gatekeeping are also sensitive to a social desirability bias, in which mothers feel compelled to respond to questionnaire items in a way that will be viewed favorably by society. The generalizability of this study is limited due to the sociodemographic characteristics of the participants. Another limitation of the study was participant attrition. Attrition at Phase 4 made the sample smaller and may have biased the study further towards high functioning families with low levels of gate closing behavior.

Future Directions

Future comparisons of observed and self-reported behaviors should be used to assess the extent to which self-reports are an accurate measure of behavior and whether self-reports or observations of maternal gatekeeping are better predictors of father involvement. Prior research has indicated differences in gatekeeping across various contexts (Cannon et al, 2008); thus, in the future, gatekeeping behavior should be examined in a multitude of contexts (e.g., play versus caregiving). Triadic interactions from The New Parents Project at 3 months postpartum remain to be coded and analyzed. Because these interactions take place in the home, it will be interesting to see how the home environment impacts gatekeeping. We should also replicate this study using a more diverse population.

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Table 1: Intercorrelations and Descriptive Statistics for Gate Closing and Gate Opening in Mothers

	1.	2.	3.	4.	5.	6.	7.	8.	<i>M</i>	<i>SD</i>
1. Observed Gate Closing Jack		.029	.439**	-.093	.222*	.020	.104	-.166	1.81	1.00
2. Observed Gate Opening Jack			.011	.229**	.054	-.173*	.151	.022	1.69	.79
3. Observed Gate Closing Pop				-.071	.141	-.017	.031	-.075	1.52	.80
4. Observed Gate Opening Pop					-.056	.056	-.073	.091	1.55	.850
5. Mothers' Self-Reported Gate Closing						.010	.321**	-.179*	2.30	.81
6. Mothers' Self-Reported Gate Opening							-.049	.255**	4.13	.85
7. Fathers' Reports of Maternal Gate Closing								-.129	2.27	.81
8. Fathers' Reports of Maternal Gate Opening									3.85	.99

* $p < .05$ ** $p < .01$

"Jack" = Jack-in-the-Box Toy; "Pop" = Pop-up Toy

Table 2: Correlations for Psychological Well-Being and Observed/Self-Reported Gate Closing and Gate Opening in Mothers

	Observed Gate Closing Jack	Observed Gate Opening Jack	Observed Gate Closing Pop	Observed Gate Opening Pop	Mothers' Self- Reported Gate Closing	Mothers' Self- Reported Gate Opening	Fathers' Reports of Maternal Gate Closing	Fathers' Reports of Maternal Gate Opening
Parenting Perfectionism	-.033	.163	-.174*	.003	.188*	-.022	.237**	-.069
Depression	.125	-.007	.154	.005	.273**	-.072	.099	-.068
Life Satisfaction	-.075	-.031	-.115	.090	-.267**	.172*	-.084	.198*
Anxiety	.049	-.013	.164	-.008	.151	-.057	.045	.040

*p<.05**p<.01

"Jack" = Jack-in-the-Box Toy; "Pop" = Pop-up Toy

Table 3: Correlations for Gender Role Beliefs/Sexism and Observed/Self-Reported Gate Closing and Gate Opening in Mothers

	Observed Gate Closing Jack	Observed Gate Opening Jack	Observed Gate Closing Pop	Observed Gate Opening Pop	Mothers' Self- Reported Gate Closing	Mothers' Self- Reported Gate Opening	Fathers' Reports of Maternal Gate Closing	Fathers' Reports of Maternal Gate Opening
Progressive Maternal Beliefs	.071	-.045	-.007	-.079	.010	-.170*	.048	-.031
Progressive Paternal Beliefs	-.034	-.181*	-.152	-.042	-.011	-.087	-.120	.076
Maternal Natural Superiority	-.100	.066	-.171	-.022	.103	.146	.190*	-.060
Paternal Natural Superiority	-.033	.092	-.141	.075	-.049	.119	.202*	-.010
Maternal Benevolent Sexism	.017	.047	.013	-.050	.186*	.096	.146	-.071
Maternal Hostile Sexism	.193*	-.008	.154	-.171	.110	.098	.069	-.083
Paternal Benevolent Sexism	-.021	.167	.064	-.071	.129	.161	.170*	-.016
Paternal Hostile Sexism	.086	.103	.140	-.153	.067	.099	.240**	-.118

*p<.05**p<.01

"Jack" = Jack-in-the-Box Toy; "Pop" = Pop-up Toy

Parental Regulation Inventory (Van Egeren, 2000) – Mother’s Version [bold = gate opening; underline = gate closing]

How often do **YOU** do the following things to encourage your baby’s father to be involved in child care and with your baby, including feeding, play, and emotional support?

How often do <u>YOU</u> :		Never					Several times a day
		1	2	3	4	5	6
1.	Tell your baby’s father to do a child care task (“Go wash Tyler’s face.”)	1	2	3	4	5	6
2.	Ask your baby’s father politely to help (“Can you wash Tyler’s face please?”)	1	2	3	4	5	6
3.	Compliment your baby’s father (“You’re able to calm Tyler down better than I can.”)	1	2	3	4	5	6
4.	Invite your baby’s father to help (“Wouldn’t you like to read to Tyler?”)	1	2	3	4	5	6
5.	Refuse to do it yourself (“I’m not giving Tyler a bath, it’s your turn.”)	1	2	3	4	5	6
6.	Give your baby’s father a serious look that means, “You need to deal with Tyler <u>now!</u> ”	1	2	3	4	5	6
7.	Let your baby’s father know you appreciate his contributions (“It really helps when you take Tyler with you.”)	1	2	3	4	5	6
8.	Give your baby’s father an irritated or exasperated look	1	2	3	4	5	6
9.	Hint that work needs to be done (“Boy, Tyler sure is dirty!”)	1	2	3	4	5	6
10.	Wait until your baby’s father does child care tasks on his own	1	2	3	4	5	6
11.	Leave the house so your baby’s father doesn’t have a choice	1	2	3	4	5	6
12.	Ask your baby’s father for help by “talking through” the baby (“Daddy help me, I’ve got a stinky diaper!”)	1	2	3	4	5	6
13.	Tell your baby’s father what a good parent he is	1	2	3	4	5	6
14.	Ask for your baby’s father’s opinion (“Do you think Tyler should wear a sweater today?”)	1	2	3	4	5	6
15.	Tell other people about what a good parent he is at a time when he can hear you	1	2	3	4	5	6
16.	Tell your baby’s father how happy he makes your baby (“Tyler really loves to play with you.”)	1	2	3	4	5	6
17.	Encourage your baby’s father to spend time alone with your baby	1	2	3	4	5	6

18. Arrange activities for your baby's father and child to do together 1 2 3 4 5 6

When your baby's father does something that **YOU** don't approve of regarding child care or with your baby, how often do you do the following things?

	How often do YOU :					
	Never					Every time
19. <u>Tell your baby's father the right way to handle the situation</u> (<u>"You need to leave him alone till he calms down."</u>)	1	2	3	4	5	6
20. <u>Show your baby's father that you are angry or irritated</u>	1	2	3	4	5	6
21. Keep quiet, let him handle it anyway	1	2	3	4	5	6
22. <u>Tell your baby's father what you think he did wrong</u> (<u>"The bath water is too hot, you'll burn him."</u>)	1	2	3	4	5	6
23. Explain your concerns to your baby's father (<u>"I'm worried because Tyler might hurt himself if you do that."</u>)	1	2	3	4	5	6
24. Try to discuss your feelings about what you don't like with your baby's father	1	2	3	4	5	6
25. <u>Criticize your baby's father</u> (<u>"Can't you see Tyler doesn't want to do that?"</u>)	1	2	3	4	5	6
26. Ask your baby's father if he would like your help	1	2	3	4	5	6
27. <u>Look exasperated and roll your eyes</u>	1	2	3	4	5	6
28. Tell your baby's father how you have learned to handle similar situations	1	2	3	4	5	6
29. <u>Tell other people about the things you don't like</u> (<u>"He puts winter clothes on him and it's 70 degrees out!"</u>)	1	2	3	4	5	6
30. <u>Take over and do it your own way</u>	1	2	3	4	5	6
31. Let your baby's father make his own mistakes	1	2	3	4	5	6
32. Instruct your baby's father (<u>"Tyler likes to be wrapped tight in his blanket."</u>)	1	2	3	4	5	6
33. Not mention anything, but redo things after your baby's father is gone	1	2	3	4	5	6
34. <u>Tell your baby's father what he did wrong by "talking through" the baby</u> (<u>"Daddy made your bath too hot, huh?"</u>)	1	2	3	4	5	6

35. Let him do it his own way

1

2

3

4

5

6

Parental Regulation Inventory (Van Egeren, 2000) – Father’s Version [bold = gate opening; underline = gate closing]

How often does **YOUR BABY’S MOTHER** do the following things to encourage you to be involved in child care and with your baby, including feeding, play, and emotional support?

How often does <u>YOUR BABY’S MOTHER</u> :		Never					Several times a day
		1	2	3	4	5	6
1.	Tell you to do a child care task ("Go wash Tyler’s face.")	1	2	3	4	5	6
2.	Ask you politely to help ("Can you wash Tyler’s face please?")	1	2	3	4	5	6
3.	Compliment you ("You’re able to calm Tyler down better than I can.")	1	2	3	4	5	6
4.	Invite you to help ("Wouldn’t you like to read to Tyler?")	1	2	3	4	5	6
5.	Refuse to do it herself ("I’m not giving Tyler a bath, it’s your turn.")	1	2	3	4	5	6
6.	Give you a serious look that means, "You need to deal with Tyler <u>now!</u> "	1	2	3	4	5	6
7.	Let you know she appreciates your contributions ("It really helps when you take Tyler with you.")	1	2	3	4	5	6
8.	Give you an irritated or exasperated look	1	2	3	4	5	6
9.	Hint that work needs to be done ("Boy, Tyler sure is dirty!")	1	2	3	4	5	6
10.	Wait until you do child care tasks on your own	1	2	3	4	5	6
11.	Leave the house so you don’t have a choice	1	2	3	4	5	6
12.	Ask you for help by "talking through" the baby ("Daddy help me, I’ve got a stinky diaper!")	1	2	3	4	5	6
13.	Tell you what a good parent you are	1	2	3	4	5	6
14.	Ask for your opinion ("Do you think Tyler should wear a sweater today?")	1	2	3	4	5	6
15.	Tell other people about what a good parent you are at a time when you can hear her	1	2	3	4	5	6
16.	Tell you how happy you make your baby ("Tyler really loves to play with you.")	1	2	3	4	5	6
17.	Encourage you to spend time alone with your baby	1	2	3	4	5	6

18. Arrange activities for you and your child to do together 1 2 3 4 5 6

When you do something that **YOUR BABY'S MOTHER** doesn't approve of regarding child care or with your baby, how often does she do the following things?

	How often does <u>YOUR BABY'S MOTHER</u> :					
	Never					Every time
19. <u>Tell you the right way to handle the situation</u> (“You need to leave him alone till he calms down.”)	1	2	3	4	5	6
20. <u>Show you that she is angry or irritated</u>	1	2	3	4	5	6
21. Keep quiet, let you handle it anyway	1	2	3	4	5	6
22. <u>Tell you what she thinks you did wrong</u> (“The bath water is too hot, you'll burn him.”)	1	2	3	4	5	6
23. Explain her concerns to you (“I'm worried because Tyler might hurt himself if you do that.”)	1	2	3	4	5	6
24. Try to discuss her feelings about it with you	1	2	3	4	5	6
25. <u>Criticize you</u> (“Can't you see Tyler doesn't want to do that?”)	1	2	3	4	5	6
26. Ask if you would like her help	1	2	3	4	5	6
27. <u>Look exasperated and roll her eyes</u>	1	2	3	4	5	6
28. Tell you how she has learned to handle similar situations	1	2	3	4	5	6
29. <u>Tell other people about the things she doesn't like</u> (“He puts winter clothes on him and it's 70 degrees out!”)	1	2	3	4	5	6
30. <u>Take over and do it her own way</u>	1	2	3	4	5	6
31. Let you make your own mistakes	1	2	3	4	5	6
32. Instruct you (“Tyler likes to be wrapped tight in his blanket.”)	1	2	3	4	5	6
33. Not mention anything, but redo things after you are gone	1	2	3	4	5	6
34. <u>Tell you what you did wrong by “talking through” the baby</u> (“Daddy made your bath too hot, huh?”)	1	2	3	4	5	6
35. Let you do it your own way	1	2	3	4	5	6

Maternal Gatekeeping Scales

Negative Control: The mother is rated on this scale for her overall negative control, based on both her verbal and nonverbal behavior during the episode as well as the intent of the message given. Negative control can be defined as any attempt/behavior to limit the father's interaction with the baby. ***A mother may demonstrate her expertise in performing a certain task, assert lack of confidence in the father's abilities, or attempt to control all interaction with the child – she appears intent on limiting the father's interactions.***

(5) Very High Negative Control: Very intense negative controlling behaviors are seen. Moreover, no effort is made to disguise this behavior. This may be seen in a comment such as “You're not doing it right, this is how you're supposed to do it!” or the mother taking control (negatively, not in a supportive fashion) of a task that the father is trying to do (2 clear comments; often accompanied by subtle comments/expressions).

(4) High Negative Control: Several moderate intensity gestures or comments might be made throughout the entire episode, or one very dramatic example of negative controlling behavior may be noted. These expressions may also be accompanied by nonverbal or subtle indications of disapproval, such as shaking her head or rolling her eyes (1 clear comment and other subtle comments/expressions).

(3) Moderate Negative Control: Some moderate negative controlling behavior is directly expressed over the course of the episode. The behavior, however, is relatively low in intensity. The mother may assert comments that reveal her better knowledge of parenting by instructing how to perform a task “properly”. The mother may express these controlling thoughts and comments through the baby, such as, “Daddy, don't call me that” or “Daddy, I don't like that noise” (1 clear comment).

(2) Low Negative Control: Only mild negative controlling behavior is seen in this episode. The behavior is very subtle and is alluded to in a mild gesture, facial expression, or comment (very mild, questionable behavior).

(1) No Negative Control: No negative controlling behaviors (nothing even subtle) are exhibited over the course of the episode.

Facilitation: On this scale, mothers will be rated for their overall positive support of the fathers' interactions with the child. Facilitation is defined as a mother's efforts to support and encourage the father's participation with the baby. This may be seen in compliments, positive instruction, or helping to make time with the baby more easy and enjoyable for the father.

(5) Very High Facilitation: Very intense facilitation of the mother is demonstrated dramatically throughout the entire episode. The mother's primary goal seems to be promoting interaction with the father. Several moderately intense behaviors or comments may be seen over the episode. The mother may make comments through the baby such as, “It's so fun to be with Daddy,” or “Daddy does such a good job of undressing me”.

(4) High Facilitation: Fairly strong facilitation is seen in the episode. Although facilitation is not seen throughout the entire task, the mother's behaviors or comments seem to be directed towards encouraging the father's participation with the baby. The mother's tone must clearly be positive, and not sound the least bit critical or condescending.

(3) Moderate Facilitation: Some moderate facilitation is noted over the episode, even though this behavior tends to be more subtle and low in intensity. This could be one direct comment or a few indirect comments. A score of (3) could include one fairly strong positive comment or multiple low level positive compliments.

(2) Low Facilitation: Some mild facilitation is seen. The mother may come to the father's aid in playing with the baby. Slight acknowledgements of the father may be made through an indirect comment, but not more than once. Comments such as "Look at Daddy!" may be used. Facilitation is more than likely nonverbal.

(1) No Facilitation: No facilitation is made by the mother over the course of the episode.

Multidimensional Parenting Perfectionism
Questionnaire (Snell, Overbey, & Brewer, 2005)

	Not at all characteristic of me	1	2	Somewhat Characteristic of me	3	4	Very Characteristic of me	5
1. I set very high standards for myself as a parent.	1		2		3		4	5
2. Only if I am a “perfect” parent will society consider me to be a good parent	1		2		3		4	5
3. I expect my partner to always be a top-notch and competent parent.	1		2		3		4	5
4. I must always be a successful parent.	1		2		3		4	5
5. My partner should never let me down when it comes to being a parent.	1		2		3		4	5
6. One of my goals is to be a “perfect” parent.	1		2		3		4	5
7. Most people expect me to always be an excellent parent.	1		2		3		4	5
8. I always pressure myself to be the best parent in the world.	1		2		3		4	5
9. In order for people to accept me, I have to be the greatest parent in the world.	1		2		3		4	5
10. I will appreciate my partner, but only if she/he is a perfect parent.	1		2		3		4	5
11. Most people expect me to be perfectionistic when it comes to being a parent.	1		2		3		4	5
12. I expect my partner to try to be perfectionistic when it comes to parenting behavior.	1		2		3		4	5

Well-Being Questionnaire

Please circle the number that most closely resembles the way you feel. Be open and honest in your responses.

	Strongly disagree	Disagree	Slightly disagree	Neither agree or disagree	Slightly agree	Agree	Strongly agree
1. In most ways my life is close to my ideal.	1	2	3	4	5	6	7
2. The conditions of my life are excellent.	1	2	3	4	5	6	7
3. I am satisfied with my life.	1	2	3	4	5	6	7
4. So far I have gotten the important things I want in life.	1	2	3	4	5	6	7
5. If I could live my life over, I would change almost nothing.	1	2	3	4	5	6	7
In the past WEEK:							
	Rarely or none of the time (< 1 day)	Some or a little of the time (1-2 days)	Occasionally or a moderate amount of the time (3-4 days)	Most or all of the time (5-7 days)			
6. I felt depressed.	0	1	2	3			
7. I had crying spells.	0	1	2	3			
8. I felt hopeful about the future.	0	1	2	3			
9. I was happy.	0	1	2	3			
10. I felt that people disliked me.	0	1	2	3			
Right now, at this MOMENT:							
	Not at all	Somewhat	Moderately	Very Much			
11. I feel calm.	1	2	3	4			
12. I am tense.	1	2	3	4			
13. I feel upset.	1	2	3	4			
14. I am relaxed.	1	2	3	4			
15. I feel content.	1	2	3	4			
16. I am worried.	1	2	3	4			

Beliefs Concerning the Parental Role Scale (Bonney & Kelley, 1996), items 1-26; items 27-29 are from the Survey of First-Time Mothers (Beitel & Parke, 1998) and assess “Natural Instinct”

Please indicate the degree to which you agree or disagree with the following statements by circling the appropriate number.

	Disagree strongly	Disagree mildly	Neither	Agree mildly	Agree strongly
1. A father should pursue the career of his choice even if it cuts into the time he has to spend with his family.	1	2	3	4	5
2. Responsibility for the discipline of the children should be equally divided between the mother and the father.	1	2	3	4	5
3. It is more important for a mother rather than a father to stay home with an ill child.	1	2	3	4	5
4. Men should share with child care such as bathing, feeding, and dressing the child.	1	2	3	4	5
5. The mother and father should equally share in toilet training.	1	2	3	4	5
6. It is mainly the mother’s responsibility to make sure that the children get ready for daycare/school in the mornings.	1	2	3	4	5
7. In general, the father should have more authority than the mother in deciding what extra-curricular activities are appropriate for the child.	1	2	3	4	5
8. It’s better for women with children not to work outside the home if they don’t have to financially.	1	2	3	4	5
9. Fathers should attend birthing classes with their pregnant wives (partners).	1	2	3	4	5
10. Divorced men should share joint custody of their children.	1	2	3	4	5
11. Fathers should participate in the delivery (birth) of their children.	1	2	3	4	5
12. Mothers should be more involved than fathers in the physical care of the children (e.g., dressing, feeding, bathing).	1	2	3	4	5
13. Fathers should attend parent-teacher conferences.	1	2	3	4	5
14. A father’s primary responsibility is to financially provide for his children.	1	2	3	4	5

	Disagree strongly	Disagree mildly	Neither	Agree mildly	Agree strongly
15. It is important for a father to spend quality time (one to one) with his children every day.	1	2	3	4	5
16. Fathers should attend prenatal doctor's visits with his partner (wife) (e.g., ultrasound appointment).	1	2	3	4	5
17. Fathers should take the majority of responsibility for setting limits and disciplining children.	1	2	3	4	5
18. A father should be emotionally involved with his children (e.g., nurturant, supportive, understanding).	1	2	3	4	5
19. It is mainly the mother's responsibility to change diapers.	1	2	3	4	5
20. It is equally as important for a father to provide financial, physical, and emotional care to his children.	1	2	3	4	5
21. Mothers and fathers should share equally with the late night feedings during infancy.	1	2	3	4	5
21. It is mainly the mother's responsibility to toilet train the children.	1	2	3	4	5
23. Mothers and fathers should equally share the responsibility of taking care of a sick child in the middle of the night.	1	2	3	4	5
24. When a child becomes ill at daycare/school it is primarily the mother's responsibility to leave work or make arrangements for the child.	1	2	3	4	5
25. A mother should pursue the career of her choice even if it cuts into the time she has to spend with her family.	1	2	3	4	5
26. It is more important for a father to have a successful career than it is to have a family that is closely knit.	1	2	3	4	5
27. Mothers are instinctively better caretakers than fathers.	1	2	3	4	5
28. Fathers have to learn what mothers are able to do naturally in terms of child care.	1	2	3	4	5
29. Mothers are naturally more sensitive to a baby's feelings than fathers are.	1	2	3	4	5

Ambivalent Sexism Inventory (Glick & Fiske, 1996)

[bold = benevolent sexism; underline = hostile sexism]

Please indicate the degree to which you agree or disagree with each statement by circling the appropriate number:

	Disagree strongly	Disagree somewhat	Disagree slightly	Agree slightly	Agree somewhat	Agree strongly
1. No matter how accomplished he is, a man is not truly complete as a person unless he has the love of a woman.	0	1	2	3	4	5
2. <u>Many women are actually seeking special favors, such as hiring policies that favor them over men, under the guise of asking for "equality."</u>	0	1	2	3	4	5
3. In a disaster, women ought to be rescued before men.	0	1	2	3	4	5
4. <u>Most women interpret innocent remarks or acts as being sexist.</u>	0	1	2	3	4	5
5. <u>Women are too easily offended.</u>	0	1	2	3	4	5
6. People are not truly happy in life without being romantically involved with a member of the other sex.	0	1	2	3	4	5
7. <u>Feminists are seeking for women to have more power than men.</u>	0	1	2	3	4	5
8. Many women have a quality of purity that few men possess.	0	1	2	3	4	5
9. Women should be cherished and protected by men.	0	1	2	3	4	5
10. <u>Most women fail to appreciate fully all that men do for them.</u>	0	1	2	3	4	5
11. <u>Women seek to gain power by getting control over men.</u>	0	1	2	3	4	5
12. Every man ought to have a woman whom he adores.	0	1	2	3	4	5

	0	1	2	3	4	5
	Disagree strongly	Disagree somewhat	Disagree slightly	Agree slightly	Agree somewhat	Agree strongly
13. Men are incomplete without women.	0	1	2	3	4	5
<u>14. Women exaggerate problems they have at work.</u>	0	1	2	3	4	5
<u>15. Once a woman gets a man to commit to her, she usually tries to put him on a tight leash.</u>	0	1	2	3	4	5
<u>16. When women lose to men in a fair competition, they typically complain about being discriminated against.</u>	0	1	2	3	4	5
17. A good woman should be set on a pedestal by her man.	0	1	2	3	4	5
<u>18. Many women get a kick out of teasing men by seeming sexually available and then refusing male advances.</u>	0	1	2	3	4	5
19. Women, compared to men, tend to have a superior moral sensibility.	0	1	2	3	4	5
20. Men should be willing to sacrifice their own well-being in order to provide financially for the women in their lives.	0	1	2	3	4	5
<u>21. Feminists are making unreasonable demands of men.</u>	0	1	2	3	4	5
22. Women, compared to men, tend to have a more refined sense of culture and good taste.	0	1	2	3	4	5

Contextual Factors (Demographic Questionnaire)

27. Was your baby born through vaginal delivery or cesarean section (c-section)?

18. How long was/is your leave of absence from work?

- a. No leave
- b. ____ days ____ weeks
- c. Ongoing

If your leave is ongoing, when do you plan to return to work? _____