Parenting and child mental health: a cross-cultural perspective

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In its most general instrumental sense, parenting consists of care of the young in preparing them to manage the tasks of life. Parents provide childhood experiences and populate the environments that guide children's development and so contribute to child mental health. Parenting is expressed in cognitions and practices. However, parents do not parent, and children do not grow up, in isolation, but in multiple contexts, and one notable context of parenting and child mental health is culture. Every culture is characterized, and distinguished from other cultures, by deep-rooted and widely acknowledged ideas about how one needs to feel, think, and act as an adequately functioning member of the culture. Insofar as parents subscribe to particular conventions of a culture, they likely follow prevailing "cultural scripts" in childrearing. Broadening our definition, it is therefore the continuing task of parents also to enculturate children by preparing them for the physical, psychosocial, and educational situations that are characteristic of their specific culture. Cross-cultural comparisons show that virtually all aspects of parenting children are informed by culture: culture influences when and how parents care for children, what parents expect of children, and which behaviors parents appreciate, emphasize and reward or discourage and punish. Thus, cultural norms become manifest in the mental health of children through parenting. Furthermore, variations in what is normative in different cultures challenge our assumptions about what is universal and inform our understanding of how parent-child relationships unfold in ways both culturally universal and specific. This essay concerns the contributions of culture to parenting and child mental health. No study of a single society can address this broad issue. It is possible, however, to learn lessons about parenting and child mental health from the study of different societies.

Key words: Culture, parenting, beliefs, behaviors, methodology, psychiatry, social policy

Parenting contributes in central ways to the course and outcome of child development (1-3). Parental caregiving plays influential parts in children's mental health because it regulates the majority of child-environment interactions and helps to shape children's adaptation. During early childhood, more than 100 billion neurons develop and connect to configure brain networks through interactions of genetics, environment, and experience (4). Parenting plays key parts in this process and so shapes mental and physical health, behavior and academic skills, and even labor market participation over the life course (5,6). But parenting itself is shaped and afforded meaning by culture (7).

Just as cultural variation clearly dictates the language children eventually speak, cultural variation exerts significant and differential influences over mental, emotional, and social development of children. Every culture is characterized, and distinguished from other cultures, by deep-rooted and widely acknowledged ideas about how one needs to feel, think, and act as a functioning member of the culture. These beliefs and behaviors shape how parents rear their offspring. Culture helps to construct parents and parenting, just as culture helps to define mental health. Culture is also maintained and transmitted by influencing parental cognitions that in turn shape parenting practices (7,8). Whether culturally universal or specific, controls are in place to ensure that each new generation acquires culturally appropriate and normative patterns of beliefs and behaviors.

In this article, I describe the intersection between parenting and culture, and its significance to child mental health.

PARENTING AND CULTURE

In its most general instrumental sense, parenting consists of care of the young in preparing them to manage the tasks of life. Parents provide childhood experiences and populate the environments that guide children's development. Biological parents contribute directly to the genetic makeup of their children, and biological and social parents alike directly construct children's experiences.

In the minds of most observers, mothers are unique, the role of mother universal, and motherhood unequivocally principal to child development (9), even if historically fathers' social and legal claims and responsibilities on children were pre-eminent (10). Cross-cultural surveys attest to the primacy of maternal caregiving (11,12). On average, mothers spend between 65 and 80 percent more time than fathers do in direct one-to-one interaction with young children (13). Fathers may withdraw from their children when they are unhappily married; mothers typically never do (14).

Fathers are neither inept nor uninterested in child caregiving, of course. Mothers and fathers tend to divide the labor of caregiving and engage children emphasizing different types of interactions, mothers providing direct care and fathers serving as playmates and supports (9,15). Research involving both traditional (16) and non-traditional (father primary caregiver) families (17) shows that parental gender exerts a greater influence than parental role or employment status. Western industrialized nations have witnessed increases in the amount of time fathers spend with their children; in reality, however, most fathers are still primarily helpers (18).

Notably, different cultures sometimes distribute the responsibilities of parenting in different ways. In most, mother is the principal caregiver; in others, multiple caregiving may be the norm. Thus, in some cultures children spend much or even most of their time with significant other caregivers, including siblings, non-parental relatives, or non-familial adults. Various modes of child caregiving, like nurturance, social interaction, and didactics, are distributed across diverse members of a group.

Parenting is expressed in cognitions and practices. Parents' beliefs – their ideas, knowledge, values, goals, and attitudes – hold a consistently popular place in the study of parenting and child mental health (19-21). Parental beliefs serve many functions; they generate and shape parental behaviors, mediate the effectiveness of parenting, and help to organize parenting (22,23). More salient in the phenomenology of the child are parents' practices – the actual experiences parents provide children. Most of young children's worldly experience stems directly from interactions they have within the family. Parenting cognitions and attainment of parenting goals are achieved through parenting practices.

Human beings do not grow up, and adults do not parent, in isolation, but in multiple contexts (24), and one notable context of parenting and child mental health is culture. Paradoxically, culture is notoriously difficult to define. Some have considered it a complex of variables (25-27), whereas for others culture constitutes learned meanings and shared information transmitted from one generation to the next, that is "... as set of control mechanisms – plans, recipes, rules, instructions ... – for the governing of behavior" (28). Culture, therefore, consists of distinctive patterns of norms, ideas, values, conventions, behaviors, and symbolic representations about life that are commonly held by a collection of people, persist over time, guide and regulate daily living, and constitute valued competencies that are communicated to new members of the group.

Each society prescribes certain characteristics that its members are expected to possess or act on, and proscribes others they must not do, if they are to function adequately and normally as members of that society. Some prescriptions and proscriptions may be universal and cross cultures; an example might be the requirement for parents (or specified parent surrogates) to nurture and protect children (2). Other standards and values vary greatly from one culture to another; an example might be whether and how to discipline children (29).

Parental caregiving blends intuition and tuition. Parents sometimes act on their intuitions about caregiving. For example, almost everywhere parents speak to their infants even though they know that babies cannot yet understand language. However, parents also acquire understandings of what it is to parent effectively by living in a culture: generational, social, and media images of parenting, children, and family life play significant roles in helping people form their parenting cognitions and guide their parenting practices. Parents in different cultures receive many differ-ent kinds of guidance about how to rear children properly, whether in the form of books of advice, suggestions from family and friends, or direct training by example. Insofar as parents belong to a culture and subscribe to particular conventions of that culture, they likely follow prevailing "cultural scripts" in childrearing.

Variations in culture make for subtle as well as manifest, but always impressive and meaningful, differences in patterns of parenting and child mental health. Cross-cultural comparisons show that virtually all aspects of parenting children are informed by culture. For example, mothers in rural Thailand do not know that their newborns can see, and often during the day they swaddle infants on their backs in a fabric hammock that allows the baby only a narrow slit view of ceiling or sky (30). New mothers from Australia and Lebanon living in Australia expect very different timetables of child development, and their culture shapes mothers' expectations much more than other factors, such as experiences observing their own children or directly comparing their children to other children (31).

Culture pervasively influences when and how parents care for children, the extent to which parents permit children freedom to explore, how nurturant or restrictive parents are, which behaviors parents emphasize, and so forth. Japan and the United States maintain reasonably similar levels of modernity and living standards and both are highly child-centered societies, but the two differ in terms of childrearing (32-34). Japanese mothers expect early mastery of emotional maturity, self-control, and social courtesy in their children, whereas American mothers expect early mastery of verbal competence and self-actualization in theirs. American mothers promote autonomy and organize social interactions with their children so as to foster physical and verbal assertiveness and independence. By contrast, Japanese mothers organize social interactions with children so as to consolidate and strengthen closeness and dependency within the dyad, and they tend to indulge young children. These contrasting styles are evident in mother-infant interactions as early as 5 months (35).

Parents normally caregive faithful to indigenous cultural belief systems and prevailing cultural behavior patterns. Indeed, culturally constructed attitudes can be so powerful that parents are known to act on them, setting aside what their senses might tell them about their own children. For example, parents in Samoa think that all young children have an angry and willful character, and, independent of what children might actually say, parents consensually report that their children's first word is "tae" – Samoan for "shit" (36).

Importantly, culture-specific patterns of childrearing can be expected to adapt to each specific society's setting and needs. What parenting is and how it works reflect cultural context. Parenting is a principal reason why individuals in different cultures are who they are and often differ so from one another. Central to a concept of culture, therefore, is

the expectation that different cultural groups possess distinct beliefs and behave in unique ways with respect to their parenting.

Parents in different cultures typically harbor different beliefs about their parenting as well as about children (19,37). In a study in seven cultures (Argentina, Belgium, France, Israel, Italy, Japan, and the United States), mothers evaluated their competence, satisfaction, investment, and role balance in parenting and attributed their successes and failures in parenting to ability, effort, mood, parenting task difficulty, or child behavior (38). Systematic country differences for both self-evaluations and attributions emerged that were interpretable in terms of cultural orientations. For example, Argentine mothers rated themselves relatively low in parental competence and satisfaction and blamed parenting failures on their lack of ability. Their insecurity about mothering appeared to be consistent with the relative lack of social supports, particularly help and advice about childrearing available to them. By contrast, Belgian mothers rated themselves as highly satisfied with their caregiving, which might be expected in light of Belgium's strong childcare supports provided to parents (e.g., periodicals, consultancies, home visits, health care information workshops, and parenting demonstration classes).

Culture-based expectations about developmental norms and milestones (when a child is expected to achieve a particular developmental skill, for example) in turn affect parents' appraisals of their child's development. Hopkins and Westra (39,40) surveyed English, Jamaican, and Indian mothers living in the same city and found that Jamaican mothers expected their children to sit and to walk earlier, whereas Indian mothers expected their children to crawl later. In each case, children's actual attainment of developmental milestones accorded with their mothers' expectations.

Parents' beliefs have power. Parents in most societies speak to babies and rightly see them as comprehending interactive partners long before infants produce language, but parents in some societies think that it is nonsensical to talk to infants before children themselves are capable of speech and so do not speak to them (36). Parents in some societies think of young children as interactive partners and play with them, whereas parents in other societies think that such behavior is pointless (41). Indeed, cultural differences in some parenting beliefs appear to persist even among people born and reared in one culture who then relocate to another culture with different childrearing norms. Pachter and Dworkin (42) asked mothers from minority (Puerto Rican, African American, West Indian/Caribbean) and majority (US European American) cultural groups about normal ages of attainment of typical developmental milestones during the first 3 years of life: differences emerged among ethnic groups for more than one-third of developmental milestones assessed. Cognitions of the majority group are therefore not always readily adopted, and culturally significant parenting beliefs and norms often also resist change (43). In the United States, Japanese immigrant mothers' cognitions tend to be similar to those of Japanese mothers or intermediate between Japanese and US mothers; however, South American immigrant mothers' parenting cognitions more closely resemble those of US European American than South American mothers (44). Different immigrant groups adopt and retain specific cognitions and practices differently (45).

Although much theoretical and empirical emphasis is now placed on cross-cultural differences, many developmental milestones, parenting strategies, and family processes are likely to be similar across cultures. Evolutionary thinking appeals to the species-common genome, and the shared biological heritage of some psychological processes presupposes their universality (46) as do shared historical and economic forces (47). Thus, some demands on parents are common. For example, parents in all societies must nurture and protect their young (2), and at the end of the day all parents must help children meet similar developmental tasks, and all parents (presumably) wish physical health, social adjustment, educational achievement, and economic security for their children, however these successes may be instantiated in a particular culture.

Furthermore, the mechanisms through which parents likely influence children are universal. For example, social learning theorists have identified the pervasive roles that conditioning and modeling play as children acquire associations that subsequently form the basis for their culturally constructed selves. By watching or listening to others who are already embedded in the culture, children come to think and act like them. Attachment theorists propose that children everywhere develop internal working models of social relationships through interactions with their primary caregivers and that these models shape children's future social relationships with others (48). Moreover, social and economic development and information globalization present parents today in different cultural groups with many (increasingly) similar socialization issues and challenges (e.g., Internet safety).

Whether culturally common parenting patterns reflect factors indigenous to children and their biology, biological bases of caregiving, the historical convergence of parenting styles, shared economic or ecological factors, or the increasing prevalence of migration or dissemination via mass media is difficult, if not impossible, to determine. Modernity has witnessed a worldwide pattern of change toward urbanization, media homogeneity, and Westernization that cumulatively contributes to dissolution of traditional cultural patterns. In the end, different peoples (presumably) wish to promote similar general competencies in their young and some do so in qualitatively and quantitatively similar ways.

When different parenting cognitions or practices connote different meanings or serve different functions in different settings, this provides evidence for cultural specificity. For example, mothers in China and India use authoritative

(high warmth, high control) and authoritarian (low warmth, high control) parenting practices, respectively, in ways that relate to differences in their goals of social and emotional development in their children (49). Initiation rites deemed harmless to children in some cultures may be judged abusive in others.

Unsurprisingly, the determinist arguments marshaled by culture-specifists resemble those invoked by culture-universalists. Adults in different cultures could parent differently because of their biological characteristics, for example, their differential threshold sensitivities or attention to child signals. Certain culturally specific biological characteristics of children, such as constitutionally based temperament, could promote culture-specific parental attitudes and/or activities. Finally, ecological or economic conditions specific to a given cultural setting might promote parental beliefs and behaviors indigenous to that culture, ones evolved differentially to optimize adjustment and adaptation of offspring to the circumstances of the local situation.

PARENTING, CULTURE AND CHILD MENTAL HEALTH

In what may be called the "standard model", expectations regarding what is culturally acceptable and what is not shape parents' caregiving cognitions, that in turn shape their childrearing practices and, ultimately, children's experiences and development. Thus, cultural norms become manifest in mentally healthy children through parenting. For example, US European American mothers of 1-year-olds encourage the development of individual child autonomy, whereas Puerto Rican mothers focus on maternal-child interdependence and connectedness (50). These cultural differences are embedded in caregivers' behaviors, with US European American mothers using suggestions and other indirect means of structuring their children's behavior, and Puerto Rican mothers using more direct means of structuring, such as commands, physical positioning, and restraints. Consider child behavioral inhibition, Chinese and Canadian parents' responses to this behavioral constellation, and children's further development. Both cultures have inhibited children, but traditional Chinese mothers have more warm and accepting attitudes, whereas Canadian mothers are more punitive. In school, shy and sensitive Chinese children do better academically and are rated more positively by their teachers and peers, in contrast to shy Canadian children who fare worse (51,52). Of course, beliefs do not always map to behaviors directly, but the two coexist in complex ways, and cultural meaning assigned to each is critical.

It is imperative to learn more about culture and parenting, so that scientists, educators, and practitioners can effectively enhance child mental health. Insofar as (some) systematic relations are established in a culture between how people parent and how children develop, the possibili-ty exists for identifying some "best practices" in how to promote positive parenting and positive child mental health. Some parental practices are perceived as offensive in some cultures, but in others the same behaviors are thought to be benign to children's adjustment. For example, parenting practices in some cultural contexts include folk remedies, which are meant to help children recover from illness, but leave burns or other marks in the process (53,54). These parenting practices become problematic only when parents use them outside of their normative context (e.g., after immigrating to another culture where these behaviors conflict with mainstream cultural definitions of child maltreatment) (55). Legal cases involving such scenarios sometimes invoke cultural evidence (56): one judge dismissed a case in which a mother made small cuts on the cheeks of her two sons to signify that the boys had been initiated into her native tribe (57). Ear piercing illustrates a parenting practice that is normative in one culture (the United States) and that may physically hurt children in the short-term and permanently alter their appearance; nevertheless, parenting that countenances ear piercing is not defined as abusive, and there is no presumption that it has long-term negative effects on children's mental health. Contrariwise, some parenting practices may be detrimental to children even if they are sanctioned by the cultural group. Female circumcision is widely criticized as being abusive and having long-term negative effects on female health, despite its normativeness in certain cultural contexts (57,58). The global community has increasingly taken a stand that children have particular rights regardless of their culture and that it is sometimes necessary to intervene with parents to prevent serious harm. In 1990, the United Nations Convention on the Rights of the Child (CRC) placed the protection of children's rights at the forefront of the international community. The CRC exemplifies how the global community adopts positions that are meant to shape parenting worldwide.

Consistent parenting beliefs and behaviors help to promote children's mental health around culturally acceptable norms. Thematicity (the repetition of the same cultural idea across mechanisms and contexts) has special importance in culture as an organizer of behavior (59). So, for example, in the United States personal choice is closely bound up with how individuals think of themselves and make sense of their lives. Personal choice is built firmly on principles of liberty and freedom and is a persistent and significant psychological construct in the literature on US parenting and child mental health (60).

What is normative in a society matters. For example, the cultural climate in which child discipline occurs is as important as discipline per se in predicting mental health of children (61). In an empirical test of the role of cultural normativeness on parent-child relationships, the moderation link between mothers' use of physical discipline and children's adjustment was studied in six countries (62). Children's more frequently experiencing physical discipline was associated with anxiety, and more frequent use of

corporal punishment related to adult violence and endorsement of violence (63). However, countries differed in their reported normativeness of physical discipline and in the way that physical discipline related to children's adjustment. Children's perceived normativeness of physical discipline moderated the association between experiencing physical discipline and child anxiety and aggression. Children who perceived the use of physical discipline as being culturally normative expressed higher levels of aggression, regardless of whether they personally experienced high or low levels of physical discipline. More frequent use of physical discipline was less strongly associated with adverse child outcomes in contexts of greater perceived cultural normativeness. In short, the association between mothers' use of physical discipline and child mental health was moderated by the cultural normativeness of physical discipline.

US European American parents of adolescents are more likely to engage in authoritative parenting that emphasizes the growth of separation and autonomy within a supportive and responsive relationship, whereas Latin American, African American, and Asian American parents tend to engage in authoritarian parenting, with its greater emphasis on obedience and conformity (64). US American children are encouraged to discuss their own feelings and those of others as a way of increasing their understanding of emotion and ability to regulate it; Chinese families encourage attunement to the feelings of others, but restraint in the expression of own feelings, as key to group harmony (65). Chinese parents remind children of their past transgressions using story-telling, for example, to teach social norms and behavioral standards and to engender a sense of shame over bad behavior. In contrast, American parents avoid stories of transgression so as not to damage their children's self-esteem (66,67).

Some parenting-child mental health relations regularly recur even across very different cultures. When a particular parenting cognition or practice connotes the same meaning and serves the same function in different cultures, it likely constitutes a cultural universal. Parental psychological control of adolescents appears to have negative correlates across a wide variety of cultural contexts. In a study of 11 countries, including at least one each from Africa, Asia, Europe, the Middle East, North America, and South America, virtual unanimity was observed in the direction and significance of associations of parental monitoring with less, and psychological control with more, adolescent antisocial behavior (68).

However, the same parenting cognition or practice can also assume different meanings or functions in different cultural contexts. For example, in some cultures mutual eye contact sets the stage for interpersonal communication and social interaction (69), but in others mutual eye contact signals disrespect and aggression (70,71). Different meanings attached to particular behaviors can cause adjustment problems for children whose parents expect them to behave in one way that is encouraged at home (e.g.,

avoiding eye contact to show deference and respect) when children find themselves in contexts where adults attach different (sometimes negative) meanings to the same behavior (e.g., appearing disrespectful and unengaged with a teacher at school).

Conversely, different parenting cognitions and practices may connote the same meaning or serve the same function in different cultural contexts. In some cultural groups parents show affection predominately through their tone of voice, whereas in others parents demonstrate affection physically. These different displays serve the same function of making children feel loved, valued, and approved of by parents in their respective cultures. Interrelatedness and autonomy are important in all cultures, but the ways in which parents foster them in children vary as a function of the values and goals that exist in particular cultures (72,73). US American infants use mothers as a secure base from which to explore the world, and Japanese infants enjoy their mothers' indulgence of their needs (74). In essence, wholesome relationships are central in both cultures, but they assume different forms as a function of contrasting cultural emphases on individuation and accommodation. An authoritative parenting style leads to positive mental health outcomes for US European American children, but an authoritarian parenting style leads to positive outcomes for African American children (75).

The specificity and generality of parenting, and relations between parents and their children's mental health, are advantageously assessed through cultural research because neither parenting nor children's development occurs in a vacuum: both emerge and grow in a medium of culture. Variations in what is normative in different cultures challenge our assumptions about what is universal and inform our understanding of how parent-child relationships unfold in ways both culturally universal and specific.

CONCLUSIONS

Culture influences some parenting cognitions and practices and, in turn, child mental health from a very early age, through such pervasive factors as what parents expect of children, when and how parents care for children, and which behaviors parents appreciate, emphasize, and reward. Parents are influenced by conventionalized images of what is and what ought to be proper childrearing, and so they (even unconsciously) seek to implement an agendum derived from concepts that characterize their culture-specific milieu.

It is the continuing task of parents to caregive as well as to enculturate children by preparing them for the physical, psychosocial, and educational situations that are characteristic of their specific culture. For this reason, many social theorists have asserted that the family generally, and the parent-child relationship specifically, constitute the effective crucible for the early (and perhaps eventual) development of the individual and the continuity of culture.

Every culture promotes unique ways of adapting to the stringencies of its requirements, ecology, and environment and has developed traditions to achieve the common goals of childrearing. As a consequence, even in the face of some shared goals, parenting children varies dramatically across cultures. The cultural contexts of parenthood and childhood are therefore of increasing interest to world psychiatry.

That said, after approximately a century of psychological study, with considerable attention paid to parenting and child mental health, still too little is known about the beliefs and behaviors, life circumstances and experiences, of children or their parents in non-Western cultures. In the past, scholars have tended to generalize from person- or situation-specific behaviors to species-general conclusions without paying adequate attention to circumstances and limitations imposed by culture. A pervading critique is that, traditionally, research in this field has tended to describe constructs, structures, functions, and processes in accordance with ideals appropriate to Western, educated, industrialized, rich, and democratic societies (76-78). For example, Patel and Sumathipala (79) surveyed leading psychiatry journals and found that only "6% of the literature [was] published from regions of the world that account for over 90% of global population". A central limitation related to culture has impeded comprehensive understanding of parenting and child mental health. This limitation has led to many critiques of single-culture perspectives and motivated consistent calls for more cross-cultural study (77,79,80). Thus, researchers increasingly recognize the need to expand the scope of parenting inquiry to include more culturally diverse samples. Heeding these calls is important to avoid misperceptions of universality as well as biases of monocultural study.

There is, therefore, definite need and significance for cultural approaches to parenting and child mental health. Descriptively they are invaluable for revealing the full range of human parenting and child mental health. Study across cultures also furnishes a check against ethnocentrism. Acceptance of findings from any one culture as "normative" is too narrow in scope, and ready generalizations from them to parents and children at large are uncritical. Comparison across cultures is also valuable because it augments an understanding of the processes through which biological variables fuse with environmental variables and experiences in development. Awareness of alternative modes of development enhances understanding of the nature of human variation. From early roots in ethnographic work, studies of culture and parenting have grown to occupy an increasingly important position in developmental thinking. We need more detailed and systematic data on cultural beliefs, behaviors, and the settings of parent and child development.

The long-standing issues found at the intersection of parenting, child mental health, and culture are the following. What are the universals of child care and child development in our species? How do parents organize the effective environments of childhood? What are the contributions of culture to parenting, child mental health, and parent-child relationships? No study of a single society can answer these broad questions. It is possible, however, to learn lessons from the study of different societies that may offer partial answers.

Overall, perhaps the most important single thing that a parent does for a child is determine the culture into which that child is born (81). The cultural study of parenting and child mental health is beneficially understood in a framework of necessary versus desirable demands. A necessary demand is that parents and children communicate with one another. Normal interaction and children's wholesome mental health depend on it. Not unexpectedly, communication appears to be a universal aspect of parenting and child development. A desirable demand is that parents and children communicate in certain ways adapted and faithful to their culture.

The cultural perspective reveals the ideals and norms of the society and how they are instantiated; the parental perspective defines beliefs and behaviors that characterize childcare; and the child perspective assesses the impact of culture and caregiving on the development of mental health.

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