THE RELATIONSHIP BETWEEN HELICOPTER PARENTING AND SOCIAL

EMOTIONAL LEARNING (SEL)

by

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THESIS

Presented to the Faculty of

The University of Houston-Clear Lake

In Partial Fulfillment

Of the Requirements

For the Degree

MASTER OF ARTS

in Clinical Psychology

THE UNIVERSITY OF HOUSTON-CLEAR LAKE

MAY, 2018

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ABSTRACT

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Parenting styles play a vital role in children's development. Research suggests an

overinvolved parenting style (helicopter parenting) is negatively associated with

children's overall well-being. Parenting style has important implications for the

development of children's social and emotional learning (SEL). However, there is no

clear indication of the association between helicopter parenting and SEL abilities in

children. Therefore, the objective of this paper was to examine the relationship between

helicopter parenting and SEL in children ages 6 to 11. A correlational design assessed the

relationship between helicopter parenting and SEL. Results indicated a negative

correlation between helicopter parenting and SEL in children ages 6 to 11. This suggests

that as helicopter parenting increases, SEL decreases. More research is needed to evaluate

how targeted behavioral parent training can affect helicopter parenting behaviors.

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CHAPTER I: REVIEW OF THE LITERATURE

Parenting style plays an important role in the child's academic achievement (Spera, 2005) and social emotional development (Zarra-Nezhad, Aunola, Kiuru, Mullola, & Moazami-Goodarzi, 2015). Parental involvement in child monitoring is related to academic achievement and educational accomplishment (Spera, 2005). This is specifically true when parents are part of and involved in their children's education and extracurricular school activities (Spera, 2005). Parenting behaviors and parenting style also play a vital role in social emotional development in childhood. Research suggests that warm and affective parenting and behavioral control are associated with decreased depressive symptoms and problem behaviors in children, while high psychological control is related to increased depressive symptoms, anxiety, and distress in children and adolescents (Zarra-Nezhad, Aunola, Kiuru, Mullola, & Moazami-Goodarzi, 2015).

Parenting Styles

Baumrind (1971; 1991; 2005) was the first to study parenting styles and laid the foundation for future parenting research. She found that parenting styles can be described across two dimensions, demandingness and responsiveness. Demandingness indicates the degree to which parents show supervision, and use of developmentally appropriate limit-setting. Responsiveness indicates the degree to which parents show involvement, acceptance and warmth. These two dimensions are described further by four parenting styles, which include: authoritative parenting, authoritarian parenting, permissive parenting, and neglectful parenting (Aunola, Stattin, & Nurmi, 2000; Baumrind, 2005).

Authoritative parents are controlling but not restrictive, have high involvement and communication, trust their child, and encourage autonomy (Aunola, Stattin, & Nurmi, 2000; Baumrind, 2005). Authoritative parenting is related to increased levels of school achievement in adolescents (Kordi & Baharudin, 2010; Spera, 2005; Steinberg, Elmen, & Mounts, 1989; Steinberg, Lamborn, Dornbusch, & Darling, 1992). In addition, authoritative parenting is associated with high levels of motivation, competency, mastery, and self-efficacy (Turner, Chandler, & Heffer, 2009). Research suggests that the authoritative parenting style is related to the child's higher level of school achievement (Spera, 2005). Authoritative parenting is also associated with the child's ability to apply adaptive and task-oriented strategies in achievement situations. The authoritative parenting style of positive support increases the child's autonomous behavior, self-regulation, independency, intrinsic motivation, active problem solving, self-control, self-enhancement, and self-esteem (Aunola, Stattin, & Nurmi, 2000).

In contrast, authoritarian parents are demanding but not responsive. Authoritarian parents have a low level of trust and communication with their child and are very strict and controlling (Aunola, Stattin, & Nurmi, 2000; Baumrind, 2005). Authoritarian parenting is negatively associated with academic achievement in all countries, except for Hong Kong. In Hong Kong, authoritarian parenting is positively associated with academic achievement (Spera, 2005). Additionally, authoritarian parenting is associated with high levels of children's passivity, task-avoidant behaviors, and an absence of self-enhancing acknowledgements (Aunola, Stattin, & Nurmi, 2000).

Permissive parents are responsive but refrain from effective limit-setting

practices. Permissive parents are warm, accepting, and child-centered and allow their child to behave autonomously, whether mature or not (Aunola, Stattin, & Nurmi, 2000; Baumrind, 2005). Permissive parenting is associated with decreased self-reliance and self-control, and lower competence in preschool children (Dornbusch, Ritter, Leiderman, Roberts, & Fraleigh, 1987; Spera, 2005; Williams, Degnan, Perez-Edgar, Henderson, Rubin, Pine, Steinberg, & Fox, 2009).

Neglectful parents are neither demanding nor responsive. Neglectful parents do not support child self-regulation and do not manage or observe their child's behavior. Neglectful parents lack involvement and control. Neglectful parenting is related to underachievement and difficulties in academic achievement in children and adolescents (Aunola, Stattin, & Nurmi, 2000; Baumrind, 2005).

Helicopter Parenting

In 2011, LeMoyne and Buchanan proposed helicopter parenting, as a new dimension within parenting styles. Helicopter parenting is the over participation or overinvolvement of parents in the lives of their children. Parents high in helicopter parenting tend to overparent and micromanage their child's life. Theory related to this parenting style suggests that parents high in the helicopter parenting style experience extreme fear of separation from their child when their child is distancing from them to become independent and autonomous or leaves home to go to college (LeMoyne & Buchanan, 2011; Soenens, Vansteenkiste, Duriez, & Goossens, 2006). Additionally, parents with a helicopter style tend to think that they themselves and teachers have more responsibility over the child's homework (Locke, Kavanagh, & Campbell, 2016). Parents

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high on the helicopter parenting style feel that teachers partially perform their responsibility in reviewing their child's homework (Locke, Kavanagh, & Campbell, 2016). As a result, parents high in helicopter parenting may do the child's homework for them, potentially causing impairment in the child's emotional regulation and resilience (Locke, Kavanagh, & Campbell, 2016). While the parenting styles of Baumrind (1971; 1991; 2005) can be either demanding or responsive, helicopter parenting is only responsive (LeMoyne & Buchanan, 2011).

There is no research that has looked at the association between helicopter parenting and the child's social emotional learning development. Research indicates that helicopter parenting is a more responsive, than demanding parenting style and has negative effects in the child's life (LeMoyne & Buchanan, 2011). Further, Padilla-Walker and Nelson (2012) have proposed that helicopter parenting is not a new dimension of parenting, but a new and unique representation of the basic dimensions and patterns of parenting (responsiveness/involvement, control, and autonomy granting). Further, Padilla-Walker and Nelson (2012) suggest that helicopter parenting is unique in the manner in which it prioritizes the dimensions of parenting (high involvement, low autonomy granting, presence of emotional support in the relationship). This may indicate that helicopter parenting falls under one of Baumrind's (1971; 1991; 2005) four parenting styles. Since helicopter parenting is considered to be higher on responsiveness and lower on demandingness, it may best fall under Baumrind's permissive parenting style, which is also high on responsiveness, and low on demandingness (Aunola, Stattin, & Nurmi, 2000; Baumrind, 2005; LeMoyne & Buchanan, 2011).

Helicopter parenting has negative effects in the child's life (LeMoyne & Buchanan, 2011). Van Ingen, Freiheit, Steinfeldt, Moore, Wimer, Knutt, Scapinello, and Roberts (2015) have suggested that helicopter parenting causes children to be alienated and detached from peers potentially hindering the child's social and emotional development. In addition, helicopter parenting also causes the child to become dependent on others, have symptoms of social anxiety, and feel entitled (Locke, Kavanagh, & Campbell, 2016; Segrin, Woszidlo, Givertz, Bauer, & Taylor Murphy, 2012). Helicopter parenting constrains the child from developing the skills and abilities needed to be fully independent, limiting the child from taking on adult roles (Padilla-Walker & Nelson, 2012). Higher helicopter parenting style is associated with decreased overall well-being, higher number of prescriptions for anxiety or depression (especially females), difficulties in interpersonal relationships, lower self-efficacy, and little to no likelihood of achieving independence to solve their own problems (Bradley-Geist & Olson-Buchanan, 2014; LeMoyne & Buchanan, 2011; Schiffrin, Liss, Miles-McLean, Geary, Erchull, & Tashner, 2013). Further, helicopter parenting is hypothesized to have negative associations with psychological well-being because children may feel they are not allowed their basic psychological needs for autonomy and competence (Schiffrin, Liss, Miles-McLean, Geary, Erchull, & Tashner, 2013).

Research by Segrin, Givertz, Swaitkowski, and Montgomery (2015) indicates that helicopter parenting is significantly related to relationship problems. Helicopter parenting takes place in a criticized family environment. A more criticized family environment involves the parents having a more critical, rather than a favorable, positive, and

supportive approach towards the child. In a criticized family environment, there are less positive parent-child interactions, and more conditional parenting. This means that parents only provide attention to the child when the child acts and behaves in a manner in which the parents want (Segrin, Givertz, Swaitkowski, & Montgomery, 2015). This can eventually lead to negative interpersonal relationships and the lack of social problem solving skills in adults (Segrin, Givertz, Swaitkowski, & Montgomery, 2015).

The Effects of Helicopter Parenting on College Students

The construct of helicopter parenting originated from research conducted on college students. Helicopter parenting has negative consequences at the college student level too. However, because the students are in college, there is not enough information on the parenting styles that their parents used when they were growing up. Yet, research shows that parents engaging in helicopter parenting when their child is an adult in college relates to lower quality parent-child communication and decreased life satisfaction and family satisfaction. Helicopter parenting is not related to any socially adaptive traits in young adult children (Schiffrin, Liss, Miles-McLean, Geary, Erchull, & Tashner, 2013; Segrin, Woszidlo, Givertz, Bauer, & Taylor Murphy, 2012). Helicopter parenting is associated with low self-efficacy, separation from peers, and the absence of trust among peers (van Ingen, Freiheit, Steinfeldt, Moore, Wimer, Knutt, Scapinello, & Roberts, 2015). College students who perceived their parents to be high in helicopter parenting had low general self-efficacy and poor peer attachment, indicating low levels of relationships skills (van Ingen, Freiheit, Steinfeldt, Moore, Wimer, Knutt, Scapinello, & Roberts, 2015). Specifically, college students with the perception of overbearing mothers

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had difficulty trusting their peers and felt isolated from their peers, while college students with the perception of overbearing fathers had poor communication with their peers (van Ingen, Freiheit, Steinfeldt, Moore, Wimer, Knutt, Scapinello, & Roberts, 2015). However, social self-efficacy is not associated with helicopter parenting.

Social Emotional Learning

Outside of these negative effects, helicopter parenting may also affect social emotional leaning (SEL) development. According to the Collaborative for Academic, Social, and Emotional Learning (CASEL) (CASEL, n.d.; Durlak, Domitrovich, Weissberg, & Gullotta, 2015), social emotional learning (SEL) is the method through which children and adults learn and use knowledge, attitudes, and skills required to understand and manage emotions, set and attain positive goals, feel and show empathy for others, establish and sustain positive relationships, and make responsible decisions (Schonfeld, Adams, Fredstrom, Weissberg, Gilman, Voyce, Tomlin, & Speese-Linehan, 2015). Social emotional learning includes five main components. The five core competencies of SEL are self-management, self-awareness, social awareness, relationship skills, and responsible decision-making (Zaff, Aasland, McDermott, Carvalho, Joseph & Pufall Jones, 2016). Self-management is the ability to regulate one's behaviors, thoughts, and emotions in various situations. Self-awareness is the ability to identify how one's own thoughts and emotions influence their behavior. Social awareness is the ability to understand others' perspectives and empathize with them, despite their culture and background. Relationship skills are the ability to develop and sustain healthy and rewarding relationships with different people. Responsible decision-making is the ability

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to make productive decisions about one's behavior and social interactions while keeping in mind ethical standards, safety, and social norms (CASEL, n.d.; Durlak, Domitrovich, Weissberg, & Gullotta, 2015; Elias, Zins, & Weissberg, 2000). However, to date no study has looked at the relationship between helicopter paring and social emotional learning.

While there is no research on the relationship between helicopter parenting and social emotional learning, research indicates that parental warmth or responsiveness is positively associated with children's knowledge of emotions and higher emotional intelligence (Alegre, 2011). Parental monitoring is positively correlated to higher emotional intelligence. Punitive parenting (negative sanctions such as yelling, spanking, or withholding privileges or negative parental demandingness is associated with lower levels of emotional understanding and regulation (Alegre, 2011; Fletcher, Walls, Cook, Madison, & Bridges, 2008). Further while no research has examined the relationship between parenting styles and children's overall social emotional learning, research has examined the associations between parenting styles and each of the five components of social emotional learning in children.

The self-management or self-regulation of children involves three important dimensions. These dimensions include: emotion regulation, behavioral regulation, and susceptibility to peer influence (Grolnick & Farkas, 2002). Emotion regulation research suggests that the children who have a responsive parent that adapts their parenting interventions to the child's needs and models nonintrusive regulatory strategies have high self-regulation (Grolnick & Farkas, 2002). Behavioral regulation research suggests that children whose parents are involved in their lives, provide rules and guidelines, and

promote individuality have compliant children that also have increased self-regulation (Grolnick & Farkas, 2002). Susceptibility to peer influence research suggests that children who have supportive parents that encourage autonomy and parents that monitor their children and have a close and involved relationship with them have increased self-regulation (Grolnick & Farkas, 2002).

Research on parenting styles suggests that authoritative parenting provides the best foundation for children's relationship skills, including: peer competence, social-behavioral skills, and confidence (Ladd & Pettit, 2002). Parenting styles are models from which children learn about relationships skills and interactions. Children's experience with parent's warmth and responsiveness in the parent-child interaction impact the degree to which children establish healthy and rewarding relationships and emotional connections with others (Ladd & Pettit, 2002). Children who experience coercive, dominating, and low responsiveness parent-child relationships, show aggression towards their peers. Children whose parents are controlling, intrusive, or overprotective mistreat and victimize their peers (Ladd & Pettit, 2002). Children's ability to establish and maintain relationships has been associated with secure, responsive, nonintrusive, and playful parent-child relationships (Ladd & Pettit, 2002). Difficulties in peer relationships have been associated with asynchronous, harsh, stressful, and disoriented parent-child and parent-parent relationships. Additionally, stressors like unemployment, marital discord, divorce, and unemployment increase the likelihood of children's difficulty in establishing and maintaining relationships (Ladd & Pettit, 2002).

When looking at responsible decision making behaviors in adolescent, research

suggests that there is a significant main effect of parenting style on adolescent smoking behavior (Radziszewska, Richardson, Dent, & Flay, 1996). Smoking behaviors are not significantly different for adolescents who have authoritative, authoritarian, and permissive parents. However, adolescents who have neglectful parents are more likely to engage in smoking behaviors (Radziszewska, Richardson, Dent, & Flay, 1996). Contrarily, in another study looking at adolescent sexual risk taking behavior and parenting styles research suggests that adolescents with fathers who were high in the authoritarian parenting style had an increased risk of partaking in risky or delinquent behaviors than children with fathers who were high in the authoritative parenting style (Bronte-Tinkew, Moore, & Carrano, 2006).

Research suggests that some maternal parenting styles impact children's abilities to be self-aware or self-conscious (Uji, Kitamura, & Nagata, 2009). Children with mothers who were indifferent or rejected them have higher levels of shame. On the contrary, children with overprotective parents have increased detachment and externalization. Self-consciousness is not affected in children with caring mothers who allowed them independence and autonomy (Uji, Kitamura, & Nagata, 2009). Another study suggests that negative parenting behaviors, including: indifference, rejection, and abandonment by parents is associated with children's increased experiences of self-conscious emotions (Muris & Meesters, 2014). This association is higher in the case of negative parenting behaviors and shame. Additionally, this study suggests that the authoritarian parenting style is also associated with increased self-awareness in children, especially in regards to shame (Muris & Meesters, 2014).

Results from a study that looked at the association between social awareness, social competence, parenting styles, and externalizing behaviors in children suggests that warm and harsh parenting styles have different outcomes in regards to children's externalizing behaviors, social awareness, and social competence (Laible, Carlo, Torquati, & Ontai, 2004). Parents' use of warm parenting techniques, includes modeling empathy, affection, affiliation, and reparation. Warm parenting is associated with higher levels of social competence and healthy externalizing behaviors (Laible, Carlo, Torquati, & Ontai, 2004). Parents' use of harsh parenting techniques includes aggressive resolutions to manage conflict in relationships. Harsh parenting is associated with children having more externalizing problems, especially in the classroom. This suggests that parenting styles play an important role on the child's social awareness (Laible, Carlo, Torquati, & Ontai, 2004).

There is a gap that exists in the literature regarding the relationship between helicopter parenting and overall social-emotional learning in children ages 6 to 11. Therefore, for the purpose of this study, we will examine the relationship between helicopter parenting and children's SEL. More specifically, we will evaluate how social emotional learning in children is affected by helicopter parenting. We will assess this by having parents complete an online survey asking about their parenting style and their child's social emotional development, based on questions from the five components of SEL. Based on previous research, we will examine the relationship of helicopter parenting with youths' social emotional learning development.

Research Questions and Hypotheses

1. What is the relationship between helicopter parenting and overall social-emotional learning for children ages 6-11?

    H_1: There will be a significant negative correlation between helicopter parenting and overall social-emotional learning in children ages 6 to 11.

2. What is the relationship between helicopter parenting and self-awareness?

    H_1: There will be a significant negative correlation between helicopter parenting and self-awareness in children ages 6 to 11.

3. What is the relationship between helicopter parenting and self-management?

    H_1: There will be a significant negative correlation between helicopter parenting and self-management in children ages 6 to 11.

4. What is the relationship between helicopter parenting and social awareness?

    H_1: There will be a significant negative correlation between helicopter parenting and social awareness in children ages 6 to 11.

5. What is the relationship between helicopter parenting and relationship skills?

    H_1: There will be a significant negative correlation between helicopter parenting and relationship skills in children ages 6 to 11.

6. What is the relationship between helicopter parenting and responsible decision making skills?

    H_1: There will be a significant negative correlation between helicopter parenting and decision making skills in children ages 6 to 11.

CHAPTER II: METHODOLOGY

Participants

Participants were recruited through Amazon Mechanical Turk (MTurk), snowball sampling, and social media (e.g., Facebook and Reddit). Participants were at least 18 years old and a parent or guardian of at least one child between the ages of 6 to 11 years. MTurk participants received $0.01 for filling out the prescreener and $0.25 for participating and filling out the entire survey. Those who participated through social media were entered into a raffle for the opportunity to earn one of two $25 gift cards.

Materials

This study was part of a larger study that examined the differences in the relationship between helicopter parenting and parental accommodations in children ages 4 to 11 whom presented with clinical diagnoses. For the purpose of this current study, the materials included a Demographic Questionnaire, the Locke Parenting Scale (LPS; Locke, Kavanagh, & Campbell, 2015), and the Social Emotional Learning Skills Inventory Parent Report – Ages 6-11 (SELSI P 6-11; Schanding, 2017).

Demographic Questionnaire

The demographic form collected information on the participant's ethnicity, age, biological sex, and gender, relationship to child, and level of education. Participants were also asked about the child's age and gender.

Locke Parenting Scale (LPS)

The Locke Parenting Scale was used to measure parents' self-reported beliefs, attitudes, and behaviors, which may contribute to helicopter parenting (Locke, Kavanagh,

& Campbell, 2016). There are 8 items on the LPS that measure two scales (Befriending and Ensuring Constant Happiness) using a 5-point Likert scale ranging from 1 (strongly agree) to 5 (strongly disagree). These two factors are highly associated with helicopter parenting (Locke, 2014). Befriending is when the parent desires to be a friend of their child and ensuring constant happiness is when the parent desires to keep their child happy and seeks to have their child be her/his friend (Locke, 2014). Ensuring happiness is the constant effort to keep their child happy and away from any difficulty. These items were reversed score, so that the higher numbers suggest stronger agreement with helicopter parenting behaviors (Locke, Kavanagh, & Campbell, 2016). The LPS has high reliability over a 16-19-month test-retest interval (r = .77), and an internal consistency of α = .73 for the total scale (Locke, Kavanagh, & Campbell, 2016).

Social Emotional Learning Skills Inventory Parent 6-11 (SELSI P 6-11)

The SELSI P 6-11 is a parent-report measure for children ages 6-11 that measured the five core areas of social and emotional learning (SEL) as identified by the Collaborative for Academic, Social, and Emotional Learning (CASEL, n.d.; Schanding, 2017). The five core areas of SEL are self-awareness (SFA), self-management (SMG), social awareness (SOC), relationship skills (REL), responsible decision making (RDM), which all combine to yield a Total SEL score (CASEL, n.d.; Schanding, 2017). There are 58 items on the SELSI that use a 4-point Likert scale ranging from 1 (never) to 4 (almost always) (Schanding, 2017). For the current data set, all of the theoretically derived SELSI scales demonstrated adequate reliability: 1) SFA, α = .877; 2) SMG, α = .868; 3) SOC, α = .920; 4) REL, α = .908; 5) RDM, α = .878; 6) Total SEL score, α = .975.

Procedures

An a priori power analysis was conducted using the software package G*Power (Faul, Erdfelder, Buchner, & Lang, 2009). A total sample size of 150 would be needed to detect a small to moderate effect size (r = .20) with 80% power using a correlation with an alpha level set at .05.

Data collection began after approval from the University of Houston – Clear Lake's Committee for the Protection of Human Subjects (CPHS). Participants were recruited through MTurk, snowball sampling through email, and posting details about the study on social media sites like Facebook and Reddit. Participation was voluntary. Participants had the right to decline to participate and/or withdraw at any time during participation. Participants completed an online pre-screening question identifying whether they had any children between the ages of 6 to 11 years. If participants did not qualify for the study, the online survey ended after this question. For individuals who did qualify for the study, they were linked to the online consent form. MTurk presented a description of the survey procedures to the participants, before they selected the Qualtrics link. Once participants clicked on the Qualtrics link, they were asked to read and acknowledge that they understood the informed consent form and agreed to participate. Once they agreed to participate, participants were asked to complete the online survey. If participants had more than one child, they were asked to think about the child whose first initial is closest to the beginning of the alphabet. Then, they were asked to think about only this one identified child while completing the online survey. Lastly, participants were asked where they heard about this study. The online survey took approximately 30

minutes to complete. After sufficient data was collected for one year, data was downloaded from the secure Qualtrics website and analyzed.

Data Analysis

All data were entered into and analyzed using Statistical Package for the Social Sciences (SPSS) version 25. Descriptive analyses were used to describe the participants in our study. Descriptive analyses were used to examine the characteristics of this sample to the population and provide the frequency for the mean data of participants' and their children's demographic information (ethnicity, age, and gender). For the purpose of this study, a correlational design was used. Specifically, a parametric test, the Pearson correlation coefficient, was used to determine the relationship between helicopter parenting and social-emotional learning for children between the ages of 6 to 11 years. A Pearson's r provided the strength and direction of the relationship between helicopter parenting and social-emotional learning.

CHAPTER III: RESULTS

Demographics

Table 1 shows the descriptive statistics of the parent/guardian participants, including frequency and percent of responses to the demographic questionnaire. Table 2 shows the descriptive statistics of the child participants, including frequency and percent of responses to the demographic questionnaire. A total of 233 parents/guardians participated in this study. Data were reviewed to examine any outliers or missing data.

Relationship between Helicopter Parenting and Social-Emotional Learning

The mean scores for helicopter parenting, the SELSI, and the subscales of the SELSI are reported in Table 3. Further, the relationship between helicopter parenting and the total SELSI scores and the subscales of the SELSI are reported in Table 4. There was a small effect ($r = -0.158$, $p < .01$, with an R^2 of 0.025) in the relationship between helicopter parenting and the total scores on the SELSI.

Further, there was a significant negative relationship between helicopter parenting and self-awareness ($r = -0.184$, $p < .01$, with an R^2 of 0.034), social awareness ($r = -0.129$, $p < .05$, with an R^2 of 0.017), relationship skills for children ($r = -0.159$, $p < .01$, with an R^2 of 0.025), and responsible decision-making for children ($r = -0.147$, $p < .05$, with an R^2 of 0.022). We did not find a statistically significant relationship between helicopter parenting and self-management ($r = -0.106$, $p = 0.053$, with an R^2 of 0.011).

Table 1

Descriptive Statistics For Parent/Guardian Participants

Factor	Frequency	Percent
Biological Sex		
Male	35	15%
Female	198	85%
Gender		
Male	33	14.20%
Female	199	85.40%
Other	1	0.40%
Ethnicity		
Black (African American, Caribbean)	24	10.30%
Latino	10	4.30%
Caucasian (White, Not of Latino or Asian descent)	181	77.70%
Asian	7	3%
Native American	1	0.40%
Arab	1	0.40%
Bi-Racial	7	3%
Other	2	0.90%
Age		
18-24	2	0.90%
24-34	82	35.20%
35-44	117	50.20%
45-54	32	13.70%

Table 2

Descriptive Statistics For Children

Factor	Frequency	Percent
Biological Sex		
Male	112	48.10%
Female	121	51.90%
Gender		
Male	116	49.80%
Female	117	50.20%
Ethnicity		
Black (African American, Caribbean)	22	9.40%
Latino	11	4.70%
Caucasian (White, Not of Latino or Asian descent)	166	71.20%
Asian	5	2.10%
Native American	2	0.90%
Bi-Racial	24	10.30%
Other	3	1.30%
Age		
6	48	20.60%
7	38	16.30%
8	37	15.90%
9	35	15.00%
10	42	18.00%
11	33	14.20%

Table 3

Mean and Standard Deviation of Helicopter Parenting, Social-Emotional Learning, and the Five Components of Social-Emotional Learning

Measure	M	SD
Helicopter Parenting	18.83	5. 41
Overall Social-Emotional Learning	176.62	30.12
Self-Awareness	30.60	5.63
Self-Management	24.80	5.32
Social Awareness	36.59	7.31
Relationship Skills	51.24	8.39
Responsible Decision Making	33.40	5.91

Table 4

Correlations Between Helicopter Parenting, Social-Emotional Learning, and the Five Components of Social-Emotional Learning

Measure	Pearson Correlation Coefficients (Helicopter Parenting)
Helicopter Parenting	-
Overall Social-Emotional Learning	-0.158*
Self-Awareness	-0.184**
Self-Management	-0.106
Social Awareness	-0.129*
Relationship Skills	-0.159**
Responsible Decision Making	-0.147*

Note. *p < .05. ** p < .01.

CHAPTER IV: DISCUSSION

In this study, we examined the relationship between helicopter parenting and social-emotional learning skills in children ages 6 to 11. Previous research indicates that helicopter parenting is associated with negative relationship skills, specifically separation from peers, poor peer relationships, and low trust among peers, and lower levels of emotional awareness and regulation (Alegre, 2011; Fletcher, Walls, Cook, Madison, & Bridges, 2008; van Ingen, Freiheit, Steinfeldt, Moore, Wimer, Knutt, Scapinello, & Roberts, 2015); however, no research has looked at the association between helicopter parenting and overall social-emotional learning or the five components of social-emotional learning (self-awareness, self-management, social awareness, relationship skills, and responsible decision-making). This study fills the gap that exists in the literature regarding the relationship between helicopter parenting and overall social-emotional learning in children ages 6 to 11, indicating that helicopter parenting is negatively associated with children's social-emotional learning.

Based on the current data, there was a significant negative correlation between helicopter parenting and overall social-emotional learning for children ages 6 to 11, which supported the first hypothesis. This means that as parents endorsed higher ratings on the helicopter parenting scale (LPS), their reported ratings of their children's social emotional learning decreased. Furthermore, we also found a significant negative correlation between helicopter parenting for four of the five core social-emotional learning competencies. We found a significant negative relationship between helicopter parenting and self-awareness, social awareness, relationship skills, and responsible

decision-making. This means that as helicopter parenting increased, children's self-awareness, social awareness, relationship skills, and responsible decision-making abilities, individually, decreased. We did not find a statistically significant relationship between helicopter parenting and self-management. This was an interesting finding, because self-awareness was negatively associated with helicopter parenting, and self-awareness is related to a person recognizing information about themselves and managing themselves (Goleman, 2001). Additionally, self-management entails children regulating their own emotions, thoughts, and behaviors in various situations, which is not measured by the Locke Parenting Scale. The Locke Parenting Scale focuses on measuring Befriending and Ensuring Constant Happiness. It does not measure parent's interference on, involvement with, or assistance with children related tasks. Hence, we were unable to measure whether parents were completing tasks for their children or whether children were able to self-manage by starting and completing tasks by themselves. It is recommended that the relationship between helicopter parenting and self-management be further explored in adolescents to determine if helicopter parenting impacts adolescents' self-management skills. Adolescents would be expected to exhibit more skills in the area of self-management developmentally and have more age appropriate autonomy than younger children.

According to our results, helicopter parenting was associated with decreased overall social emotional learning skills in children ages 6 to 11. This means that children of parents higher in the helicopter parenting style are unable to use the attitudes, knowledge, and skills that are required to manage and understand emotions, set and attain

positive goals, show and feel empathy for others, establish and maintain positive relationships, and make responsible decisions (CASEL, n.d.; Durlak, Domitrovich, Weissberg, & Gullotta, 2015; Schonfeld, Adams, Fredstrom, Weissberg, Gilman, Voyce, Tomlin, & Speese-Linehan, 2015). This may be because these children are used to having their overinvolved parents manage everything in their lives for them, hence, they lack or have reduced opportunities to learn and practice social emotional learning skills. The decrease in overall social emotional learning may be a barrier in the development of friendships and intimate relationships, making and achieving future goals, and making knowledgeable and appropriate decisions. The results of this study may relate to the results of the studies mentioned above on the effects of helicopter parenting in college students, suggesting that helicopter parenting may affect children's future functioning. Specifically, research suggests that college students who perceived their parents to be higher in the helicopter parenting style had decreased self-efficacy, increased separation from peers, and absence of trust among peers (van Ingen, Freiheit, Steinfeldt, Moore, Wimer, Knutt, Scapinello, & Roberts, 2015). Children with low self-efficacy may be less able to make future goals for themselves. Additionally, they may feel incapable of achieving any future goals they do make, such as finishing college. Decreased self-efficacy may also not allow for children to make responsible decisions about the future. Further, children of parents high in helicopter parenting may not be able to develop friendships or intimate relationships in the future because of their increased separation from peers and lack of trust among peers. Hence, helicopter parenting may affect children's future functioning, specifically their social emotional functioning.

Helicopter parenting was also associated with decreased self-awareness, social awareness, relationship skills, and responsible decision-making in children ages 6 to 11. Decreased self-awareness may lead to the inability of children to identify themselves as independent individuals who have strengths and weaknesses. They may only be able to identify themselves as part of their parents and not as a separate individual. This may lead to difficulties in setting personal and individual goals and fulfilling them. This may also reduce the chance of children getting through college and achieving a future professional career, as they may not be able to set or achieve this goal. They may view their parent's involvement as intrusive and this may lead to feelings of low self-efficacy, which may hinder their abilities (van Ingen, Freiheit, Steinfeldt, Moore, Wimer, Knutt, Scapinello, & Roberts, 2015).

Decreased social awareness can lead to low school performance, loneliness, decreased friendships, and lack of trust (van Ingen, Freiheit, Steinfeldt, Moore, Wimer, Knutt, Scapinello, & Roberts, 2015). In addition, social awareness is important to understand others' perspectives and empathize with them. In order to communicate with people, it is important that an individual is socially aware of other people's needs and wants. When one responds to the needs and feelings of others, they gain people's trust. Social awareness is essential in any relationship, whether it is a personal or professional relationship. Children with parents high in helicopter parenting may not have developed strategies for communicating, interacting, or empathizing with others. They may have lacked friendships and lived in a world that only involved their parents. Similarly, a decrease in relationship skills may be the result of having overinvolved parents that do

not allow children the space, time, or autonomy to develop age appropriate relationships skills. Children with parents higher in the helicopter parenting style may be unable to develop and maintain healthy and rewarding relationships with different people, hence, they may be unable to interact with others or have social, professional, and intimate relationships. These children may be more socially awkward in social gatherings and may have a hard time meeting new people and making new friends (CASEL, n.d.; Durlak, Domitrovich, Weissberg, & Gullotta, 2015; Elias, Zins, & Weissberg, 2000). They may not be given the opportunity to interact with others from their parents and learn to pick up social cues or learn from how peers their age interact. Their feelings of diminished ability may also lead to social anxiety and avoidance of social interactions, leading to isolation and/or depression, which is indicated in the research reviewed above (Zarra-Nezhad, Aunola, Kiuru, Mullola, & Moazami-Goodarzi, 2015).

In examining the current data, helicopter parenting was associated with decreased responsible decision-making or the ability to make productive decisions about one's behavior and social interactions when considering one's safety, the law, and social norms. Children with parents high in helicopter parenting may be unable to make simple decisions in adulthood, because of the lack of autonomy and independence given to them as children by their parents. Parents higher in the helicopter parenting style may not allow children to have a say in decisions as a child, which does not allow for prosocial modeling and reinforcement or appropriate decision-making, and may relate to making irresponsible and risky decisions when given the opportunities to finally make decisions. Making irresponsible decisions can lead to the child being embarrassed by society, being

in danger, or in trouble with the law. Similarly, Erik Erikson's second stage of the psychosocial development theory focuses on the child's will. Specifically, it looks as the whether the child has developed autonomy versus shame and doubt. A balance is required from the parent, where they must not do everything for the child, but also let the child learn from his or her mistakes without criticizing them. The aim of this stage is for the child to develop self-control without losing their self-esteem. Success by the child in this stage leads to the virtue of will. Parents high in helicopter parenting may not allow their child to have autonomy, hence the child may have shame and doubt themselves, lacking the virtue of will (Erikson & Erikson, 1998).

While the current data provide a better understanding of the phenomenon of helicopter parenting and its relationship with social emotional learning, there are a few limitations that should be noted. One possible limitation is that the majority of the participants in this study were Caucasian, so the results of this study may not be generalizable to the all ethnicities of the population. A larger sample size, more representative of the composition of the United States, would make the sample of this study more generalizable. A second possible limitation is that helicopter parenting is still a less studied phenomenon that fits well within pop-psychology, rather than within traditional psychology. Additionally, helicopter parenting is not well-defined within the peer-reviewed literature, hence the lack of research on helicopter parenting may lead to our limited knowledge of helicopter parenting and its constructs.

A third possible limitation is that only one parent/guardian reported his/her own parenting behaviors. Parents/guardians may parent differently and hence it may be better

to get self-reports on the helicopter parenting and the social emotional learning measure from not just one, but both parents/guardians. In addition, the parent reporting his/her own parenting behaviors may be biased in their reporting, and may portray their parenting style to be more favorable when filling out the measure. It may be best to have the child fill out the helicopter parenting measure and the social emotional learning measure as well, to reduce any biased reporting.

A fourth possible limitation is that this study did not incorporate longitudinal methods to assess trends or trajectories in development. Conducting a longitudinal study would have allowed for us to measure the differences in helicopter parenting and social emotional learning skills at multiple time points and developmental milestones of the child's life and further identify how the two are associated. Additionally a longitudinal study may provide us with information regarding the age at which these behaviors stop being helpful, and rather become harmful in children. A longitudinal study would also have allowed us to examine the long-term effects of helicopter parenting on social emotional learning skills. A last possible limitation is that this is the first time the Social Emotional Learning Skills Inventory was used. As a new measure it needs further validation. It specifically needs validation related to criterion and construct validity. Nevertheless, this study should be considered a pilot study to determine the reliability of the Social Emotional Learning Skills Inventory for future research studies.

Future studies should also consider the relationship between helicopter parenting, social emotional learning, and different variables, including: culture, differences in age range, and differences in self-report measures by both parents. First, future studies should

collect data internationally to determine whether helicopter parenting is associated with social-emotional learning in children internationally or just in the United States of America. Culture plays an important role in parenting. In some cultures and countries, helicopter parenting may be an appropriate and acceptable dimension. It may not be negatively associated with social emotional learning, but rather positively associated with it in children. Second, it would be worthwhile to also look at additional age ranges (e.g., preschool, adolescent) and the relationship between helicopter parenting and SEL skills. Lastly, future studies should also compare reports by both parents on helicopter parenting and social-emotional learning skills to get a more accurate picture on how helicopter parenting relates to social-emotional learning.

Future studies should also consider comparing helicopter parenting to traditional conceptions of parenting styles - authoritative parenting, authoritarian parenting, permissive parenting, and neglectful parenting - to examine how the styles are related to social-emotional learning skills. As mentioned earlier, while research suggests that helicopter parenting is a more responsive, rather than a demanding parenting style (LeMoyne & Buchanan, 2011); no research has compared helicopter parenting to the four traditional parenting styles. Furthermore, while it is identified that helicopter parenting is not a new dimension of parenting, but rather it is a new representation of the basic dimensions and patterns of parenting (Padilla-Walker & Nelson, 2012), doing this research may help identify how helicopter parenting relates similarly or differently to the social emotional skills displayed by children who have been parented from the principles of one of the other four traditional parenting styles (authoritative parenting, authoritarian

parenting, permissive parenting, and neglectful parenting). While helicopter parenting

may fall under one of Baumrind's (1971; 1991; 2005) four parenting styles, specifically

the permissive parenting style, which is also high on responsiveness, and low on

demandingness, no research has looked at the relationship between social emotional

learning in children and the four traditional parenting styles. Future research should look

at the relationship between helicopter parenting and the permissive parenting style as well

as parenting behaviors and how the outcomes of these two parenting patterns are similar

and different in relation to SEL skills. Further, the relationship between the four

parenting styles, helicopter parenting, and social emotional skills in children should be

further examined (Aunola, Stattin, & Nurmi, 2000; Baumrind, 2005; LeMoyne &

Buchanan, 2011).

Furthermore, future studies should look at ways in which to overcome the

negative relationships between helicopter parenting and SEL skills. One way to do this

may be by studying what parenting behaviors can be targeted by behavioral parent

training to reduce helicopter parenting. Specifically during behavioral parenting training,

psychoeducation can be provided to parents who are high on the helicopter parenting

style on how their accommodations may be hampering their child's growth. It may also

be helpful to provide them with other parenting strategies to use to help build their child's

healthy independence. By educating and providing parents with skills such as child-

directed play or special time from behavioral parent training, where the child has age

appropriate control for a limited amount of time each day, a decrease in helicopter

parenting behaviors may be seen. Further, an increase in social emotional learning,

specifically in self-management, self-awareness, and relationship skills may also be seen. This may indicate that behavioral parent training may be a good intervention for children who have parents higher in the helicopter parenting style and decreased social emotional learning.

Children are dependent on their parents for everything, especially their physical and psychological development. As suggested by research, parenting behaviors in early childhood have been associated with later child outcomes. Parenting plays a very important role in children's development. Specifically, parenting influences the development of children's social and emotional learning. Parents model appropriate attitudes, skills, emotions, and behaviors for their children to learn and develop. Additionally, parenting behaviors influence children's cognitive development, behavior, self-esteem, and school success in different ways. While there is much research on Baumrind's four parenting styles: authoritative parenting, authoritarian parenting, permissive parenting, and neglectful parenting, there is very limited research on helicopter parenting. Further research needs to be conducted on the relationship between helicopter parenting and the development of social emotional learning in young children.

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APPENDICES

Helicopter Parenting Measures

Q1 Welcome! We are seeking your participation in a research project investigating effects of parenting styles on children's behaviors. The study will take you about 30 minutes to complete, so please only begin the questionnaire if you are able to commit that amount of time. Additionally, participants must be a parent or primary caregiver of at least one child between the age of 4 to 11 years. Thank you for considering participating in our study. Informed Consent You are being asked to participate in the research project described below. Your participation in this study is entirely voluntary and you may refuse to participate, or you may decide to stop your participation at any time. Should you refuse to participate in the study or should you withdraw your consent and stop participation in the study, your decision will involve no penalty or loss of benefits to which you may be otherwise entitled. You are being asked to read the information below carefully, and ask questions about anything you don't understand before deciding whether or not to participate. Title: Effects of Parenting Styles on Children Student Investigator(s): Laurel Casillas Faculty Sponsor: Sara Elkins, Ph.D., Thomas Schanding, Ph.D., Mary Short, Ph.D. Purpose of the Study The purpose of this research is to explore the relationship between parental styles and children's behaviors. PROCEDURES The participant will take a Qualtrics survey online. An informed consent will first be presented in the questionnaire, and once approved, the participant will continue to complete the questionnaire. EXPECTED DURATION The total anticipated time commitment will be approximately 30 minutes. RISKS OF PARTICIPATION There are no anticipated risks

associated with participation in this study. BENEFITS TO THE SUBJECT Participants

will either receive a payment of $0.25 for participating or be entered into a raffle for a

$25 Amazon gift card. Aside from this, there is no direct benefit received from your

participation, but helping research the relationship of parenting styles and children's

behaviors. CONFIDENTIALITY OF RECORDS Every effort will be made to maintain

the confidentiality of your study records. For online participation, your confidentiality

will be kept to the degree permitted by the technology being used. No guarantees can be

made regarding the interception of data via the Internet or email. However, the data will

be collected using Qualtrics, a survey management system that encrypts participant

information to attempt to reduce potential breaches of electronic information. The data

collected from the study will be used for educational and publication purposes, however,

you will not be identified by name. Internet administration will be set so that computer IP

address logs will be deleted. Deidentified data will be provided to Judith Y. Locke, Ph.D.,

in order to aid in validation of a newly developed parenting measure. Participant's data

for this research project will be maintained and safeguarded on a password-protected

database by the faculty investigators for a minimum of three years after completion of the

study. After that time, the participant's documentation may be destroyed. FINANCIAL

COMPENSATION Participants will either receive a payment of $0.25 for participating

or be entered into a raffle for a $25 Amazon gift card. CONTACT INFORMATION FOR

QUESTIONS OR PROBLEMS If you have additional questions during the course of this

study about the research or any related problem, you may contact the Student

Investigator, Laurel Casillas, by email at {XXXXXXXX@UHCL.edu}. The Faculty

Sponsors, Sara Elkins, Ph.D. {XXXXXX@UHCL.edu}, Thomas Schanding Ph.D.

{XXXXXXXXXX@UHCL.edu}, and Mary Short, Ph.D. {XXXXXXX@UHCL.edu},

may be contacted by email. Your voluntary participation in this research project is

indicated by agreeing to the informed consent and completing this survey, and you may

cease your participation at any time by closing your browser. Such participation does not

release the investigator(s), institution(s), sponsor(s) or granting agency(ies) from their

professional and ethical responsibility to you. THE UNIVERSITY OF HOUSTON-

CLEAR LAKE (UHCL) COMMITTEE FOR PROTECTION OF HUMAN SUBJECTS

HAS REVIEWED AND APPROVED THIS PROJECT. ANY QUESTIONS

REGARDING YOUR RIGHTS AS A RESEARCH SUBJECT MAY BE ADDRESSED

TO THE UHCL COMMITTEE FOR THE PROTECTION OF HUMAN SUBJECTS

(XXX-XXX-XXXX). ALL RESEARCH PROJECTS THAT ARE CARRIED OUT BY

INVESTIGATORS AT UHCL ARE GOVERNED BY REQUIREMENTS OF THE

UNIVERSITY AND THE FEDERAL GOVERNMENT. (FEDERALWIDE

ASSURANCE # FWA00004068)

Q2 I have read and understand the above form. I consent to participating in the described

research. (If you do not consent, do not complete the study. Simply close the browser.)

○ I am not eligible to consent to participate. (1)

○ By marking here, I confirm that I consent to participate, that I am at least 18 years of

age, and a parent of at least one 4-11 year old child. If you are under 18, you are not

able to provide consent, and thus, you may not participate in the study. (2)

If I am not eligible to consent... Is Selected, Then Skip To End of Survey

Q3 Instructions: If you have more than one child, please answer the following questions in regards to the child, between the age of 4 - 11, whose first initial appears first in alphabetical order. Please read the following questions and mark the appropriate response. Select only one response. For some questions, you will be asked to supply specific information. This form has been coded with an identification number to ensure that all answers will be kept anonymous.

Q4 Please indicate your relationship to child

○ Biological Parent (1)

○ Adoptive Parent (2)

○ Step Parent (3)

○ Legal Guardian (4)

○ Custodial Grandparent (5)

○ Other (Please specify) (6) _____

Q5 Please identify your ethnicity

○ Black (African American, Caribbean) (1)

○ Latino (2)

○ Caucasian (White, Not of Latino or Asian descent) (3)

○ Asian (4)

○ Native American (5)

○ Arab (6)

○ Bi-Racial (7)

○ Other (Please specify) (8) _____

Q6 Please identify your child's ethnicity

○ Black (African American, Caribbean) (1)

○ Latino (2)

○ Caucasian (White, Not of Latino or Asian descent) (3)

○ Asian (4)

○ Native American (5)

○ Arab (6)

○ Bi-Racial (7)

○ Other (Please specify) (8) _____

Q7 Your Gender:

○ Male (1)

○ Female (2)

○ Transgender (Male to Female) (3)

○ Transgender (Female to Male) (4)

○ Other (5) _____

Q8 Child's Gender:

○ Male (1)

○ Female (2)

○ Transgender (Male to Female) (3)

○ Transgender (Female to Male) (4)

○ Other (5) _____

Q9 Your biological sex:

○ Male (1)

○ Female (2)

○ Other (3) _____

Q10 Child's biological sex:

○ Male (1)

○ Female (2)

○ Other (3) _____

Q11 Your age:

○ 18 - 24 (1)

○ 24 - 34 (2)

○ 35 - 44 (3)

○ 45 - 54 (4)

○ 55 - 54 (5)

○ 65+ (6)

Q12 Your child's Age:

○ 4 (1)

○ 5 (2)

○ 6 (3)

○ 7 (4)

○ 8 (5)

○ 9 (6)

○ 10 (7)

○ 11 (18)

Q13 Is English your first language?

○ Yes (1)

○ No (2)

Q14 Does your child have any diagnoses?

○ Yes (1)

○ No (2)

Q15 Select the diagnoses your child has received.

❑ Attention-Deficit/Hyperactivity Disorder (ADHD) (1)

❑ Learning Disability (e.g. Reading, Math, Written Expression, etc.) (2)

❑ Anxiety (3)

❑ Depression (4)

❑ Bipolar (5)

❑ Other (6) _____

Q16 What type of medications (if any) does your child take? Check all the apply.

❑ None (1)

❑ Stimulant/Typical ADHD Medications (Ritalin, Adderall, Daytrana, Concerta, Metadate, Focalin, etc.) (2)

❑ Atypical ADHD Medications (Straterra, Clonidine) (3)

❑ Anti-Depressant (Zoloft, Prozac, Wellbutrin, etc.) (4)

❑ Other (Please specify) (5) _____

Q17 How many people are living in your home at present (including yourself)?

○ 1 (1)

○ 2 (2)

○ 3 (3)

○ 4 (4)

○ 5+ (5)

Q18 How many children do you have (total)?

○ 1 (1)

○ 2 (2)

○ 3 (3)

○ 4 (4)

○ 5+ (5)

If 2 Is Selected, Then Skip To Your current marital status?

Q19 If you have more than 1 child, what number is the child in the sibling order?

Q20 What are their ages?

Q21 Your current marital status?

○ Never Married (1)

○ Married (2)

○ Divorced / Separated (3)

○ Other (Please specify) (4) _____

Q22 What is your highest level of education?

○ Less than High School (1)

○ High School Diploma (2)

○ Specialized Trade/Technical Degree (3)

○ Undergraduate University Degree (4)

○ Masters Degree (5)

○ Doctorate or Professional Degree (6)

Q23 Highest education level of spouse?

○ Less than High School (1)

○ High School Diploma (2)

○ Specialized Trade/Technical Degree (3)

○ Undergraduate University Degree (4)

○ Masters Degree (5)

○ Doctorate or Professional Degree (6)

○ Not Applicable (7)

Q24 Please estimate your annual household income:

○ Less than $20,000 per year (1)

○ $20,000 to $40,000 per year (2)

○ $41,000 to $60,000 per year (3)

○ $61,000 to $80,000 per year (4)

○ Over $80,000 per year (5)

Q25 Do you (or your partner) have any current or past mental health needs/concerns?

(Ex: ADHD, Depression, Anxiety Disorder, Learning Disorder)

○ Yes (1)

○ No (2)

If Do you (or your partner) have any current or past mental health needs/concerns? (Ex: ADHD, Depression, Anxiety Disorder, Learning Disorder) Yes Is Selected

○   If yes, describe (3) _____

Q26 Which type of classes does your child receive?

○ My child receives all classes in general education (does not qualify for Special Education). (1)

○ My child receives instruction in all general education classes, but has accommodations through a 504 plan. (2)

○ My child is in all general education classes, with accommodations through Special Education. (May receive Speech Therapy services; student has an Individualized Education Program [IEP].) (3)

○ My child receives instruction in some general education classes and some in a separate special education classroom (inclusion; child has an Individualized Education Program). (4)

○ My child receives instruction in a fully self-contained special education classroom the majority of the day (Child has an Individualized Education Program). (5)

○ My child receives some instruction in gifted and talented education. (6)

○ My child does not currently receive instruction. (7)

Q27 Has your child ever repeated a grade?

○ Yes (1)

○ No (2)

Q28 Does your child have any current medical needs?

○ Yes (1)

○ No (2)

○   If yes, describe accommodations below: (3) _____

Q29 Has your child ever received any mental health services (at school or elsewhere)?

○ Yes (1)

○ No (2)

Q30 If yes, how long did your child receive these services?

Q31 If yes, what kind(s) of services? Check all that apply.

❑ Individual Therapy (1)

❑ Group Therapy (2)

❑ Family Therapy (3)

❑ School Counseling/Clinical Intervention (4)

❑ Home-based Counseling (5)

❑ Diagnostic Evaluation (6)

❑ Medication Support (7)

❑ Not Applicable (8)

❑ Other (Please specify) (9) _____

Q32 Where did you hear about this study?

○ Amazon Mechanical Turk (1)

○ Emailed link from a contact/Facebook (3)

○ Other (Please specify) (4) _____

Display This Question:

    If Where did you hear about this study? Amazon Mechanical Turk Is Selected

Q33 Please enter your Amazon Mechanical Turk Worker ID below:

Social Emotional Learning Skills Inventory Parent Report – Ages 6-11

Display This Question:

    If Your child's Age: != 4

    And Your child's Age: != 5

Q66 **Instructions:** This form contains phrases that describe skills of children and

adolescents. Please read each phrase and select the response that describes how this child

has behaved recently (in the past months [30 days]).

 Select **Never** if the behavior **never** occurs.

Select **Sometimes** if the behavior **sometimes** occurs.

Select **Often** if the behavior **often** occurs.

Select **Almost Always** if the behavior **almost always** occurs.

Please select an answer choice for every item. If you don't know or are unsure of your response to an item, give your best estimate. A "Never" response does not mean that the child "never" engages in a behavior, only that you have no knowledge of it occurring.

	Never (1)	Sometimes (2)	Often (3)	Almost Always (4)
Able to recognize when she/he feels happy and excited. (1)	○	○	○	○
Overreacts to stressful situations. (2)	○	○	○	○
Can accurately tell the thoughts and feelings of someone else. (3)	○	○	○	○
Makes friends easily. (4)	○	○	○	○

Follows the rules at home. (5)	○	○	○	○
Able to recognize when she/he feels sad and nervous. (6)	○	○	○	○
Is overly emotional. (7)	○	○	○	○
Responds appropriately to the feelings of another person. (8)	○	○	○	○
Gets along well with peers. (9)	○	○	○	○
Asks others for help in solving problems. (10)	○	○	○	○
Able to recognize when	○	○	○	○

she/he feels frustrated, angry, and afraid. (11)				
Manages stress effectively. (12)	○	○	○	○
Exhibits a sense of right and wrong consistent with family expectations. (13)	○	○	○	○
Gets along well with adults. (14)	○	○	○	○
Thinks through the consequences of her/his actions when making a decision. (15)	○	○	○	○
Accurately	○	○	○	○

describes how she/he is feeling (using a variety of emotions). (16)				
Motivates herself/himself to complete tasks. (17)	○	○	○	○
Asks others about their thoughts or experiences. (18)	○	○	○	○
Shares with others. (19)	○	○	○	○
Chooses to follow the rules when at home. (20)	○	○	○	○

Display This Question:

Q67

	Never (1)	Sometimes (2)	Often (3)	Almost Always (4)
Has confidence in her/his abilities. (1)	○	○	○	○
Sets and works to achieve personal goals. (2)	○	○	○	○
Demonstrates an understanding of the thoughts and feelings of someone else. (3)	○	○	○	○
Offers to help someone. (4)	○	○	○	○
Bullies others.	○	○	○	○

(5) Recognizes her/his own weaknesses or challenges. (6)	○	○	○	○
Sets and works to achieve academic goals. (7)	○	○	○	○
Follows rules and expectations at home. (8)	○	○	○	○
Listens when others speak. (9)	○	○	○	○
Calls others mean names. (10)	○	○	○	○
Demonstrates an accurate sense of confidence in herself/himself.	○	○	○	○

(11)				
Has good self-control. (12)	○	○	○	○
Understands the value of rules and expectations at home. (13)	○	○	○	○
Can solve a problem with another person appropriately. (14)	○	○	○	○
Makes good decisions. (15)	○	○	○	○
Recognizes that her/his thoughts and feelings are connected to her/his behavior. (16)	○	○	○	○
Copes well	○	○	○	○

when faced with a tough situation. (17)				
Uses resources at home to support her/his academic or personal needs. (18)	○	○	○	○
Asks for help from others. (19)	○	○	○	○
Tells the truth, even when she/he will get in trouble. (20)	○	○	○	○

Q68

	Never (1)	Sometimes (2)	Often (3)	Almost Always (4)

Says positive things about the future. (1)	○	○	○	○
Acts without thinking. (2)	○	○	○	○
Recognizes when another person does something nice for someone. (3)	○	○	○	○
Gives in to peer pressure. (4)	○	○	○	○
Works for a "win-win" situation for everyone. (5)	○	○	○	○
Looks forward to being at home with family. (6)	○	○	○	○
Recognizes when another person does something mean to someone. (7)	○	○	○	○
Cooperates with adult requests. (8)	○	○	○	○
Can discuss the "pros" and "cons" of a decision. (9)	○	○	○	○
Treats others as she/he	○	○	○	○

wants to be treated. (10)				
Compliments/congratulates others. (11)	○	○	○	○
Gives good suggestions to solve problems. (12)	○	○	○	○
Respects other people's differences. (13)	○	○	○	○
Forgives others. (14)	○	○	○	○
Compromises with others. (15)	○	○	○	○
Has at least one adult she/he trusts at home. (16)	○	○	○	○
Has a peer group (three or more) of friends. (17)	○	○	○	○
Has at least one peer as a friend. (18)	○	○	○	○

Q70 Thank you for completing this survey!　　Please copy the following survey code, and paste it into the appropriate box on Amazon Mechanical Turk:　Behavior　　If you have any further questions regarding this study, please contact the study student investigator, Laurel Casillas, at XXXXXXXX@uhcl.edu.

NOTE: Permission was granted by Dr. Judith Locke (author) to utilize the Locke

Parenting Scale for this study; however, the author did not agree to allow the

reproduction of this scale in the thesis manuscript. The author of the Social-Emotional

Learning Skills Inventory, Dr. Thomas Schanding, has allowed the reproduction of the

scale for this thesis manuscript, but does not grant further reproduction or use of this

scale without permission. He also retains all copyrights to the instrument.