

Relationship Between Parental Regulatory Focus Care and Child-Care Attitudes in the Colombian Caribbean

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Abstract: The parental regulatory focus theory (RFT) suggests that parents or caregivers engage in two broad types of behaviors with their children: *promotion focus*, which involves promoting positive behaviors, and *prevention focus*, which involves avoiding negative consequences. The aim of this study is to establish the relationship between attitudes towards childcare and the parental regulatory focus in a sample of caregivers from the Caribbean region of Colombia. The results showed that both the promotion and the prevention focus were related to more positive attitudes towards childcare. It was also possible to identify that those who show a higher degree of presence of both caregiving's regulatory foci have a more positive attitude towards childcare than those who only favor one of the focuses.

Keywords: attitude, childcare, parental regulatory focus, childhood, caregivers

Relação entre o Foco Regulatório Parental e as Atitudes de Cuidado Infantil no Caribe Colombiano

Resumo: A teoria do foco regulatório parental (RFT) sugere que os pais ou cuidadores adotam dois tipos amplos de comportamentos com seus filhos. Alguns buscam um *foco de promoção*, que envolve incentivar comportamentos positivos, enquanto outros buscam um *foco de prevenção*, evitando ou prevenindo consequências negativas. O objetivo deste estudo é estabelecer a relação entre as atitudes em relação ao cuidado infantil e o foco regulatório parental em uma amostra da cuidadores da região do Caribe colombiano. Os resultados mostraram que tanto o foco de promoção quanto o de prevenção estavam relacionados a atitudes mais positivas em relação à creche. Também foi possível identificar que aqueles que mostram um grau mais alto de presença de ambos os focos regulatórios de cuidado têm uma atitude mais positiva em relação à creche do que aqueles que favorecem apenas um dos focos.

Palavras-chave: atitude, cuidado infantil, foco regulatório dos pais, infância, cuidadores

Relación entre Enfoque Regulatorio Parental y las Actitudes de Cuidado Infantil en el Caribe Colombiano

Resumen: La teoría del enfoque regulatorio parental (RFT) sugiere que los padres o cuidadores adoptan dos tipos amplos de comportamientos con sus hijos. Algunos buscan un *enfoque de promoción*, que implica fortalecer comportamientos positivos, mientras que otros buscan un *enfoque de prevención*, evitando o previniendo consecuencias negativas. El objetivo de este estudio es establecer la relación entre las actitudes hacia el cuidado infantil y el enfoque regulatorio parental en una muestra de cuidadores de la Region Caribe colombiana. Los resultados mostraron que tanto el enfoque de promoción como el de prevención se relacionaron con actitudes más positivas hacia el cuidado infantil. También se pudo identificar que quienes muestran un mayor grado de presencia de ambos enfoques regulatorios de cuidado tienen una actitud más positiva hacia el cuidado infantil que quienes solo favorecen uno de los enfoques.

Palabras claves: Actitud, cuidado infantil, enfoque regulatorio parental, infancia, cuidadores

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How caregivers care for their children can have both a protective and a risky impact on the infant's physical and mental development (Skovgaard et al., 2022). Specifically, we speak of caregiving practices when we refer to the actions performed by caregivers to promote healthy growth, as well as to direct and ground the basis of identity and social belonging of minors (Organización de los Estados Iberoamericanos [OEI], 2018). Precisely, these practices play a fundamental role in early childhood, as this is a critical period for human development (Crouch et al., 2022).

However, these practices refer to behaviors performed by the caregiver, and these are guided by the attitudes that the caregiver has towards a given behavior or practice, as stated in the theory of planned behavior in its first determinant, the attitude towards the behavior refers to the degree to which a person has a favorable or unfavorable evaluation or assessment of the behavior in question (Ajzen, 1991; Fishbein & Ajzen, 1975). Thus, the attitudes assumed by caregivers towards childcare represent a fundamental element to ensure a good development of affection, autonomy, etc. (Vega-Lara & Ramírez-Giraldo, 2020).

Both the caregiver's attitudes and care practices are part of everyday life in the context in which the child develops, and they are susceptible to the child's living conditions. Precisely, empirical evidence shows that they are transmitted from one generation to the next and that the variables of social and educational conditions, age, and access to quality health services have a significant influence on the continuation of these practices (Brondani et al., 2018; Dulal et al., 2022). In this sense, Cuartas (2022) found that, the higher the level of schooling and economic income of the mother, the higher the maternal participation in stimulation activities towards her children, as well as the higher the children's attendance to early education programs, and the lower the use of physical punishment as a method of discipline.

Another individual variable that influences child development is the caregiver's regulatory focus, which some studies show to be related to parenting styles (Chen et al., 2022). The regulatory focus theory explains that the cognitive tendencies and motivational orientations that people use are either promotion or prevention oriented (Higgins, 1997). The former, the promotion focus, refers to a positive outcome motivation and a marked tendency to seek opportunities for progress and achievement, while the latter, prevention, relates to a motivation to fulfill obligations and responsibilities, and a tendency to avoid negative outcomes and adopt avoidance strategies (Gao et al., 2023; Gómez et al., 2013).

Evidence suggests that the regulatory focus provides insight into the parenting strategies adopted by parents (Chen et al., 2022; Zhou et al., 2022). Chen et al. (2022) found that authoritative parents tend to be oriented toward promotion and prevention in parenting. That is, they tend to adopt strategies that respond to both approaches.

On the other hand, authoritarian parents are only oriented towards the prevention approach, i.e., they tend to control their children, use punitive strategies, and promote avoidance behaviors.

Zhou et al. (2022) explain that, in the promotion-oriented parental regulatory focus, parents encourage their children to attain happiness, self-esteem, self-confidence, autonomy, aspiration, achievement, and the realization of individual activities; while in the prevention-oriented parental focus, parents promote safety, responsibility, and risk avoidance in their children. These findings show that, just as the regulatory focus correlates with parenting style, it could also be related to caregiving practices.

While regulatory focus has been widely studied in relation to personality (Liu & Yao, 2019), life satisfaction (Wu & Chen, 2021), and psychopathology (Wolfin et al., 2018), research on its connection to childcare attitudes remains scarce. This is particularly relevant because parental motivation in childcare plays a fundamental role in children's learning, well-being, and psychosocial adjustment (Varas & Borsa, 2019; Zhou et al., 2022).

Furthermore, despite the increasing adaptation of regulatory focus theory in parenting studies (van Aar et al., 2021; Zhou et al., 2022), existing research has focused primarily on Asian and North American samples, highlighting the need for studies in Latin American contexts. Given that caregiving practices and parental attitudes are deeply influenced by sociocultural and economic conditions, it is essential to explore these relationships in Colombia, particularly in the Caribbean region, where socio-economic disparities and access to childcare resources may shape caregiving attitudes in distinct ways.

Accordingly, the aim of this study is to establish the relationship between attitudes towards childcare and the parental regulatory focus in a sample of Colombian caregivers from the Caribbean region of Colombia.

Method

Participants

The participants were 588 caregivers of preschool children ($M_{\text{months}}=29.74$, $SD_{\text{Months}}=15.16$) attending Child Development Centers in rural (91.39%) and urban areas of the Atlántico department, Colombia, specifically in municipalities such as Luruaco, Manatí, Repelón y Santa Lucia. The caregivers reported ages between 18 and 81 years old ($M=30$, $SD=8.80$), and were mostly the mothers of the registered children (85.24%), who had mostly secondary education, and who at the time of the study exercised some type of informal economic activity (25.64%) or were engaged in domestic work (68.84%). The income level of most of the caregivers was low (86.90%) and medium (10.54%). 13.26% of participants identified themselves as members of a Colombian ethnic minority, and 49.66%

were part of an extended family, 37.41% made up nuclear families (Departamento Nacional de Planeación, 2015).

Instruments

Sociodemographic Questionnaire. It allowed us to characterize the participants by means of open and closed question items in which we sought to know the age of the child in their care, the age of the caregiver, gender ('Male', 'Female', 'Other'), educational level ('Elementary', 'High school', 'Technical-technological', 'Undergraduate', 'Postgraduate'), occupation ('Studying', 'Domestic activities', 'Working'), socioeconomic level ('Low', 'Medium', 'High'), housing context ('Rural', 'Urban'), type of family structure ('Extended', 'Single-parent', 'Nuclear', 'Reconstituted'), and identification with a Colombian ethnic minority ('Yes', 'No').

Parental Regulatory Focus Scale (Zhou et al., 2022). It is a 5-level Likert-type scale (1 = 'Strongly Disagree', 5 = 'Strongly Agree'), consisting of 16 items that include ratings approaching promotion (e.g., 'try new activities', 'pursue what you want in life') and prevention (e.g., 'avoid risky situations', 'be careful and be vigilant') in parenting. The scale was translated into Spanish using back-translation and expert triangulation by bilingual psychologists, ensuring conceptual and linguistic equivalence. The reliability of the instrument was assessed in this sample, showing high internal consistency ($\alpha_{\text{prevention}} = .90$, $\alpha_{\text{promotion}} = .87$).

Attitudes Towards Childcare

The childcare attitudes questionnaire is a five-level Likert-type scale (1 = 'Strongly Disagree', 5 = 'Strongly Agree') consisting of 35 items that include ratings of different childcare patterns. In this study, the number of items comprising the subscales of the Amar Amar et al. (2016) instrument, designed to measure childcare behaviors, were adapted and reduced. Considering that this study is part of an intervention project on attitudes towards childcare, it was necessary to adapt the items so that they measure attitudes and not specific behaviors. The new version of the instrument was reviewed by expert judges, and the reliability of each subscale was evaluated. The attitude questionnaire measures caregivers' ratings of different dimensions of childcare, including caring for cognitive abilities ($\alpha = .90$; 'Reading stories or stories to the child'), feeding ($\alpha = .82$; 'Having the parent find a way for the child to eat'), sleep ($\alpha = .79$; 'Accompanying a child that wakes up early'), health ($\alpha = .93$; 'Up-to-date vaccinations'), emotions ($\alpha = .71$; 'That the parents know when the child is sad'), the ethical dimension ($\alpha = .82$; 'That the family has clear rules'), and transcendence ($\alpha = .91$; 'That when they grow up, they strive to achieve their goals') (see instrument at <https://osf.io/ktd4s/>). For the reader's clarity, the ethical dimension refers to the capacity to be and act freely, respecting the ordinances that make possible the benefit of citizenship, while transcendence is

related to the capacity for freedom, the development of emancipatory potential, and the search for the common good (Amar Amar et al., 2016).

Procedure

Data collection. This research corresponds to the baseline analysis of a psychosocial intervention project on childcare practices in Atlántico Department, Colombia. In this study, adults over 18 years of age, who were primary caregivers of children linked to child development centers in the department, were contacted through district agencies. Those who decided to participate in the study were asked to answer the printed forms. Trained professionals administered the surveys in groups ranging from 10 to 20 people, during the months of August and September 2022.

Data analysis. In the first instance, missing values were imputed using the Predictive Mean Matching method implemented in the 'mice' package (van Buuren & Groothuis-Oudshoorn, 2011) in R. This procedure was independently performed for each of the scales. However, in the classification of caregivers into regulatory focus groups, missing data in the relevant classification variables resulted in 8 participants not being assigned to any group, leading to a total of 580 classified caregivers out of 588. These missing cases were not systematically biased and did not affect the overall findings.

Next, the Cronbach's Alpha of the scales were computed for the sample of this study, using the package 'psych', and confidence intervals were calculated using the 0.25 and 97.5 percentiles via bootstrapping from 1,000 random subsamples. Descriptive analyses of the variables (means and standard deviations) were conducted. The relationships between variables were evaluated from multiple linear regression models in which the effects of income level, education, and age of the caregiver were controlled. The type I probability error for the statistical tests was set at 5%.

Ethical Considerations

Caregivers signed an informed consent form, which explained the voluntary nature of participation, study objectives, and data confidentiality. The study was reviewed and approved by an ethics research committee (affiliation blinded for peer review) in accordance with the Declaration of Helsinki (2013) ethical guidelines.

Results

Descriptive analyses of the caregiving attitudes questionnaire show that caregivers obtained higher scores in the transcendence, ($M = 4.62$, $SD = 0.50$); health, ($M = 4.59$, $SD = 0.51$); ethics, ($M = 4.51$, $SD = 0.49$); and emotional ($M = 4.44$, $SD = 0.51$), dimensions, followed by sleep, ($M = 4.44$,

$SD = 0.57$); cognitive, ($M = 4.41$, $SD = 0.51$); and, finally, feeding, ($M = 3.98$, $SD = 0.60$), dimensions. Regarding the regulatory focus scales, similar results were found for the promotion, ($M = 4.36$, $SD = 0.53$); and prevention, ($M = 4.42$, $SD = 0.52$), dimensions. The absolute range of the scales is 1-5, so the caregivers' scores are high, except for the feeding dimension.

The results showed that having a preventive focus in parenting is associated with having positive attitudes toward caring for cognitive skills ($\beta = .327$, 95% CI [.228, .426]); social-emotional care ($\beta = .444$ [.339, .548]; ethical development care, $\beta = .445$ [.354, .536]; transcendence, $\beta = .452$ [.349, .556]; sleep care, $\beta = .404$ [.284, .524]; as well as health, $\beta = .396$ [.299, .493]; and nutrition, $\beta = .243$ [.087, .399]. Likewise, caregivers with a promotion-oriented parenting focus showed high scores on the cognitive caregiving, $\beta = .368$, CI95% [.271, .464]; socioemotional, $\beta = .234$ [.132, .337]; ethical, $\beta = .251$ [.162, .340]; transcendence, $\beta = .187$ [.085, .288]; sleep, $\beta = .326$ [.208, .444]; and health, $\beta = .299$ [.204,

.394] dimensions. No significant relationship was found between the promotion focus regarding parenting with attitudes toward child feeding, $\beta = .073$ [-0.079, .225].

Considering that the two parental regulatory focus are positively related to attitudes towards caregiving, caregivers were classified into four groups (higher orientation to both, $n = 254$), mainly prevention-oriented ($n = 39$), mainly promotion-oriented ($n = 36$), and low orientation to both ($n = 251$), to determine whether belonging to each of these groups is particularly related to caregiving attitudes (see Figure 1). Regression analyses showed that those parents who were highly oriented to the prevention focus were statistically like those who were highly oriented to the promotion focus. Also, parents presenting both parental focus had higher scores than parents who leaned toward only one parental regulatory approach. Standardized betas of the caregiver groups also showed that there was no difference in attitude towards feeding care among caregivers who leaned toward -at least- one regulatory focus (see Figure 2).

Figure 1

Parenting focus regulatory classification.

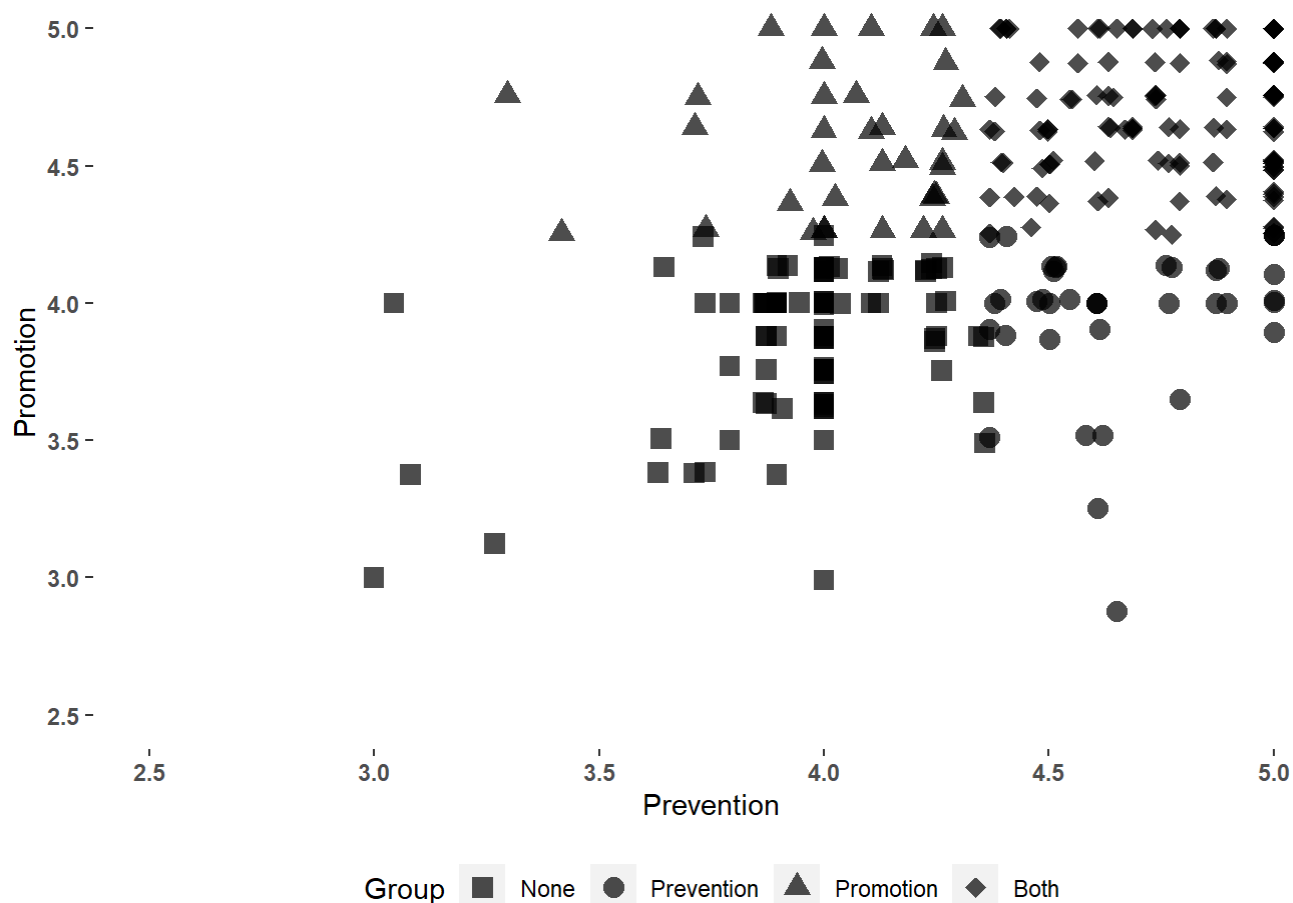
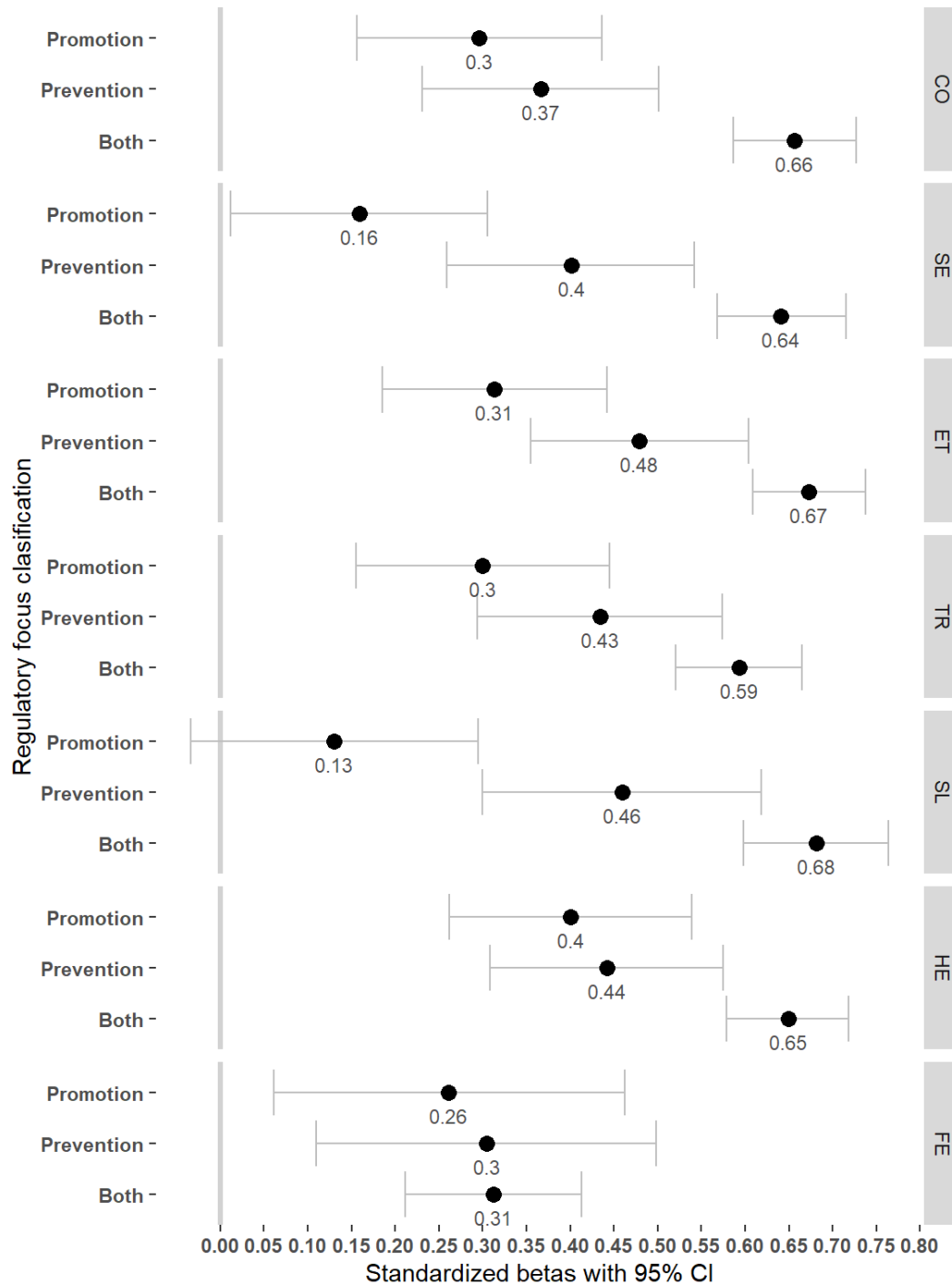


Figure 2

Regression betas of regulatory focus groups according to childcare attitudes.



For regression analysis participants lower in promotion and prevention regulatory focus were the comparison group. CO = cognitive, SE = socio-emotional, ET = ethical, TR = transcendence, SL = sleep, HE = health and FE = Feeding.

Discussion

This study aimed to establish the relationship between attitudes towards childcare and the parental regulatory focus,

in a sample of Colombian caregivers, in accordance with the findings of previous studies (Chen et al., 2022; van Aar et al., 2021). In this research, the parental regulatory focus was found to be related to attitudes towards childcare. Both

regulatory foci were related to a more positive attitude towards childcare in the different assessed dimensions, which shows that prevention and promotion in parenting are not mutually exclusive, but are related to each other, and would be part of the same global domain of care in line with what has been reported by Keller (2008) and Zhou et al. (2022).

The results did not yield a significant relationship between the parenting promotion focus with attitudes towards infant feeding care, so the influence of other variables could be examined, as cultural and socioeconomic characteristics in the groups may influence the caregiver's feeding patterns towards the infant (Nieri et al., 2022). For example, Lidgate et al., (2018) point out that the food that caregivers provides to their children is closely related to the economic resources they have, and this availability of resources largely determines the attitudes and strategies towards this dimension of caregiving.

When the participants were classified according to their regulatory focus orientation, the majority of caregivers leaned towards either both or neither, with a small group leaning only towards one or the other. This finding supports what the theory suggests by considering that both foci constitute global-level constructs that are theoretically independent dimensions, but that are related to each other (Zhou et al., 2022). Likewise, caregivers with high orientation to both foci showed more positive attitudes in cognitive, socioemotional, ethical, and health care than caregivers in whom only one focus prevailed, which coincides with previous studies that established that children of parents who have tendencies towards both promotion and prevention are better adapted to a variety of daily life situations (Keller, 2008; Zhou et al., 2022). These findings indicate that opting for prevention and promotion strategies would positively effect childcare practices, whereas not having a tendency toward either focus could result in negative effects.

Based on the literature, intervention strategies on childcare should consider that individuals have a propensity towards both foci. Still, the socialization processes they go through can accentuate the tendencies towards one focus, the other one, or both, and, thus, influence the possibilities of these being sustained over time (Chen et al., 2022; Craciun, 2018). In that sense, as noted by Zhou et al. (2022), researchers and practitioners can use the parenting regulatory focus to help caregivers understand how their motivations are related to specific parenting behaviors.

Finally, the results of this study may be influenced by gender factors, parenting regulatory focus can vary based on the expectations and gender roles that caregivers have internalized. In this research, the majority of participants were women, reflecting the fact that, in many contexts, the role of primary caregiver often falls on them, likely due to the socialization into traditional gender norms. Previous studies suggest that people's motivational orientation, or their preferences regarding how to behave, can be shaped by gender and, possibly, by how they are socialized based on it (Gutermuth & Hamstra, 2024). Future studies could explore in depth how these gender differences and socialization influence the adoption of prevention and promotion focus in parenting,

and whether this relationship holds when there is an equitable participation of male and female caregivers.

To conclude, this research supports the idea that parental regulatory foci are associated with positive attitudes toward childcare across several dimensions. These findings suggest that both foci are not mutually exclusive but instead work together within a broader caregiving framework, allowing parents to adopt more comprehensive attitudes and practices. However, the promotion focus did not show a significant relationship with attitudes toward infant feeding care, indicating that additional factors, such as cultural and socioeconomic context, may shape caregivers' feeding patterns.

On the other hand, most caregivers in the sample inclined towards both foci or neither, rather than favoring only one. Caregivers with a high orientation toward prevention and promotion showed more positive attitudes in cognitive, socio-emotional, ethical, and health-related aspects of care than those with a single focus. This supports the idea that a dual orientation can help children adapt better to daily situations.

The outcomes highlight the importance of considering regulatory foci in developing childcare intervention strategies. Socialization processes may strengthen tendencies toward one or both foci, impacting the consistency of these behaviors over time. This creates an opportunity for both researchers and practitioners to use parental regulatory focus as a tool to help caregivers understand the link between their motivations and parenting behaviors.

This study represents a first approach to understanding the relationship between the parental regulatory focus and attitudes towards childcare. Its findings provide strong support for the proposed hypotheses, although some limitations should be kept in mind. First, the reported evidence is based on self-report measures, which could be susceptible to response biases, as participants might answer in ways they perceive to be socially desirable or aligned with their subjective views on caregiving. Additionally, the sample, composed primarily of mothers from vulnerable communities, may limit the generalizability of the findings to other familial or socioeconomic contexts. Future research could enhance representativeness by incorporating more diverse samples in terms of socioeconomic and family composition. It is also recommended that future research use complementary methods, such as direct observations or in-depth interviews, to help mitigate response biases and provide a more comprehensive view of parental regulatory focus. Finally, as this study had a cross-sectional design, it is not possible to establish any kind of causality between the studied variables. It is recommended that future research use experimental designs in which the observed effects of the promotion and prevention foci in childcare guidelines are directly evaluated.

Data Availability

All data that supports the findings of this study are included in this manuscript or in supplementary material: <https://osf.io/gsq5n/overview>

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