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The Mother Domain: A Mediated Model of Maternal Gatekeepers and Depressed Fathers

Among Newlyweds with Children

Clare R. Thomas

A thesis submitted to the faculty of
Brigham Young University
in partial fulfillment of the requirements for the degree of

Master of Science

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ABSTRACT

The Mother Domain: A Mediated Model of Maternal Gatekeepers and Depressed Fathers Among Newlyweds with Children

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Master of Science

Paternal depression is an understudied topic and research connecting it to maternal gatekeeping is still in its infancy. Research has found that the marriage relationship can be associated with both depression and maternal gatekeeping. This study focuses on how these three areas are related. A subsample of the CREATE project was used including 216 couples, or 432 married parents. Two separate SEM mediational models were tested to examine father depression as a predictor of maternal gatekeeping, with marital instability as the mediator in one model and partner connectedness as the mediator in the other model. Both parent reports were used for maternal gatekeeping, marital instability, and partner connectedness. According to results, no direct association between father depression and maternal gatekeeping was found. Marital instability did not act as an effective mediator between father depression and maternal gatekeeping. However, mother reports of partner connectedness did have significant indirect effects on father depression and maternal gatekeeping. Implications suggest that therapists and researchers should examine father depression from a more wholistic family perspective. Future research should include longitudinal analyses to better understand the nature of the relationship between father depression and maternal gatekeeping.

Keywords: depression, fatherhood, partner connectedness, marital stability, maternal gatekeeping

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The Mother Domain: A Mediated Model of Maternal Gatekeepers and Depressed Fathers
Among Newlyweds with Children

Mental health is an important aspect of the marriage relationship (Aggarwal, Kataria, & Prasad, 2017), the parent-child relationship (Shafer, Fielding, & Wendt, 2017), and child development (Tsypes, Burkhouse, & Gibb, 2016). Research has shown that father depression often has adverse effects on marital relationships (Trump, Lamson, Lewis, & Muse, 2015), father-child relationships (Bronte-Tinkew, Moore, Matthews, & Carrano, 2007), and child outcomes (Shafer et al., 2017). Associations between mental health and individual and dyadic features of the family system demonstrate how the family system is influenced by each member within the family unit (Bowen, 1974). For example, in a marriage with children, each parent can influence the way the other parent thinks and behaves through their own attitudes and behaviors, creating a cyclical relationship. In this context, a father's behaviors from his depression could result in decreased marital quality, which could, in turn, encourage a mother to limit or control the father's interactions with their children.

Maternal gatekeeping taps into this idea; in an attempt to gain control within the family system, some mothers become gatekeepers to the home permitting or denying a father's access to children and household (Allen & Hawkins, 1999). Gatekeeping is more likely to occur when the mother perceives a less stable romantic relationship between parents (Schoppe-Sullivan, Altenburger, Lee, Bower, & Kamp-Dush, 2015). As a result of gate-closing behaviors, fathers experience a decrease in self-efficacy (Schoppe-Sullivan et al., 2015) and involvement with their children (Dyer, Day, & Harper, 2014). Thus, it is possible that father depression could trigger negative attitudes and behaviors toward not only a marriage, but also parenting behaviors, particularly for mothers (Thomas & Holmes, forthcoming).

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Because of the interdependent nature of a family system, a father's emotional state can influence other subsystems within the family (Holmes, Sasaki, & Hazen, 2013). This type of interdependence is often called spillover or crossover, implying that a specific aspect of one partner's life can spill into another aspect of his/her life, or cross over into aspects of their partner's life. Spillover is considered a within-person experience, while crossover is interpersonal (Brough & Westman, 2018). In this context, spillover would be evidenced when a depressed father's behaviors change how he perceives family processes, such as feeling that his spouse is more likely to gatekeep him when he acts a certain way. Using this same example, crossover would be seen when the mother changes her parenting behaviors because of the father's depressive symptoms. However, few studies include gatekeeping reports from both mother and fathers. Without multiple partner reports, crossover effects cannot be explored.

One important interpersonal process that deserves more attention in the gatekeeping literature is the how a father's depressive symptoms may crossover into his partner's parenting and his partner's perceptions of marriage. For example, research has found that depressed men who strongly adhere to masculine norms are more likely to express externalizing behaviors, such as increased aggression, alcoholism, and drug use (Magovcevic & Addis, 2008). Symptoms of depression can also include internalizing symptoms such as feelings of worthlessness and hopelessness (Radloff, 1977). Each of these pathways of depression could cross over into the marriage relationship and influence the stability or connectedness of that partnership. In this crossover model, maternal gatekeeping behaviors could represent a mother's attempt to cope with, control, or perhaps even protect a child from the father's behaviors (Thomas & Holmes, forthcoming). When researchers understand the intrapersonal and interpersonal

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processes that impact maternal gatekeeping and father depression in the family system, they can better understand the effects on children, parent-child relationships, and marital relationships

In my proposed model, marital instability and partner connectedness mediate the association between paternal depression and maternal gatekeeping. This study expands the current gatekeeping literature by using a family systems approach that includes both mothers' and fathers' perspectives (e.g. spillover and crossover) and assesses individual (e.g. father's depressive symptoms) and dyadic factors (e.g. marital instability, connectedness) as correlates of gatekeeping in a nationally representative sample of married U.S. parents.

Review of Literature

Maternal Gatekeeping

Maternal gatekeeping is conceptually defined by a mother's inclusion or exclusion of the father in childrearing and household responsibilities (Allen & Hawkins, 1999). There are two distinct gatekeeping behaviors that can occur within families; one is gate-closing, and the other is gate-opening. Whether the mother is opening or closing the gate, she maintains control over the father's interactions within the home. When gate-opening occurs, the mother invites the father to enter into her sphere; this is evidenced by inviting him to spend time with their children or to help around the house (Schoppe-Sullivan et al., 2015). A mother who is a gate-closer blocks the father from interacting with their children and will often correct him when he performs household chores (Zvara, Schoppe-Sullivan, & Kamp-Dush, 2013). When such gate-closing occurs in the home, there is a permeating feeling that the mother is the person who does everything right in the house, from cleaning, to nurturing and caring for the children. Often if the mother perpetuates this perspective, her assumption is that the father does not know how to clean or manage feminine-typed household tasks, that he is not nurturing, and he does not care for the

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children in the “right” way (Allen & Hawkins, 1999). Gatekeeping does not exist in every home, but where it is present the mother’s behavior can influence the entire family system (Holmes, Dunn, Dyer, & Day, 2013).

Current Predictors of Maternal Gatekeeping

One predictor that has been well established in the gatekeeping literature is the relationship between the parents (Schoppe-Sullivan et al., 2015; Stevenson et al., 2014). Research has found that mothers are more likely to “close the gate” when they sense that their romantic relationship is less stable (Schoppe-Sullivan et al., 2015), when they experience marital problems (Stevenson et al., 2014), when father’s experience higher levels of work-family conflict (Pedersen & Kilzer, 2014), and when mothers have higher personal standards and responsibilities than the father with regard to childrearing (Holmes, Dunn et al., 2013). Father depression has been linked to increased marital problems (Wittenborn, Culpepper, & Liu, 2012); thus, the status of the marriage relationship could explain the connection that might exist between father depression and maternal gatekeeping. In this context, it is possible that when fathers are depressed, these symptoms can cross over to their partner and influence their partner’s approach to the co-parenting relationship in order to manage what is happening with the father (Goodman, Lusby, Thompson, Newport, & Stowe, 2014; Turney & Hardie, 2018). Thus, the mental health of fathers can crossover and affect family functioning.

A family systems orientation to maternal gatekeeping suggests that fathers also contribute to these gatekeeping processes. One specific gatekeeping context that deserves more attention is a father’s mental health. Research has connected father depression to marital quality (Trump et al., 2015), but very little has been done to connect father depression to maternal gatekeeping.

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Depression in Men as a Potential Predictor of Gate-Closing

According to family systems theory, each individual member of the family contributes uniquely to the overall system (Minuchin, 1985). This encourages scholars to examine the family as a whole and to recognize that a father who has depression will not only influence himself but will also influence the entire system's ability to function. All behaviors have consequences that then affect the subsystems within a family.

Depression is associated with behaviors that have negative outcomes and therefore can be detrimental to the family system. For example, depression can have lasting, negative effects on multiple family relationships, including negatively influencing child development (Tsypes et al., 2016), as well as father engagement (Bronte-Tinkew et al., 2007), and increasing marital distress (Wittenborn et al., 2012). Depression affects attitudes (Kállay, Dégi, & Vincze, 2007), and behaviors (Miller et al., 2017), which can in turn influence other characteristics of a person (Cuijpers et al., 2017). These negative behavioral effects of father depression could potentially lead to maternal gatekeeping. It is possible that many of these negative associations are not only due to the depressive symptoms as a crossover, but also as spillover. In other words, the depression could influence the father's own perceptions of his marriage and relationships which would then influence how he perceives family processes, such as maternal gatekeeping.

Depression has been notoriously under-diagnosed for men in general (Kilmartin, 2005); although men are more likely to die by suicide (Centers for Disease Control and Prevention, 2011), they still are far less likely to receive a diagnosis of depression (Kilmartin, 2005). Often, men are less likely to seek help (Berger, Addis, Green, Mackowiak, & Goldberg, 2013), and less likely to be properly diagnosed by regular clinical methods (Cochran & Rabinowitz, 2000). When help is not received for mental health, it can often lead to crossover in negative parenting

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behaviors (Shafer et al., 2017) and increased stress on the marital relationship (Turney & Hardie, 2018).

Although gatekeeping has traditionally been viewed for its negative influence on father involvement, it is important to acknowledge recent research exploring how gate-closing can be a protective factor for children in certain contexts. Research has shown that fathers who exhibit harsh, intrusive parenting patterns can create more negative outcomes for children unless they are “gatekept” by the mother (Zvara, Mills-Koonce, & Cox, 2017). Thus, gatekeeping could actually produce positive outcomes for children when fathering behaviors associated with depression are destructive.

Current research has found that that father depression is associated with maternal gate-closing behaviors (Thomas & Holmes, forthcoming). However, there are other subsystems that must be included in analyzing depression and gatekeeping in order to more fully understand this association.

Marital Instability and Partner Connectedness as Potential Mediators Between Depression and Gate-closing

In a family systems framework, it is possible that individual characteristics, such as a father’s depression, may impact couple-level processes in the parental marriage. Researchers have shown that when one member of the couple experiences depression, marital satisfaction (Aggarwal et al., 2017), and relationship quality (Trump et al., 2015) decrease. Because the status of the romantic relationship between parents can be even more influential in maternal gatekeeping behaviors than the stability of the parent-child relationship (Schoppe-Sullivan et al., 2015), it is possible that features of the marriage mediate associations between depression and maternal gatekeeping.

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Two important features of marriage relationships are marital instability and partner connectedness; I focus first on the research literature for marital instability. Marital instability has been linked to increased gatekeeping behaviors (Schoppe-Sullivan et al., 2015) and male depression (Wittenborn et al., 2012). Mothers who gatekeep are more inclined to be controlling in their family system (Moore, 2012). Because a decrease in marital quality could make mothers feel less secure, they may respond to this instability by seeking greater control in other areas of family relationships, such as gatekeeping their home and children. However, with couples who are recently married after cohabitation, it could be that the length of their marriage does not allow for variability in marital stability (Rosenfeld & Roesler, 2019), leading to a homogenized group of stable partners and little evidence for maternal gatekeeping.

Gatekeeping in the face of marital instability may also represent a mother's attempt to protect her children from the potential failing of her marriage (Zvara et al., 2017). If a mother perceives greater marital instability due to her spouse's depression, she may enact gatekeeping behaviors. Thus, marital instability may serve as a mediating pathway between paternal depression and gatekeeping.

Partner connectedness is a second important feature of marital quality. While partner connectedness may result from many features of the marriage relationship, I focus this paper on relationship communication (Busby, Holman, & Taniguchi, 2001), admiration, and teamwork (Hawkins, Fowers, Carroll, & Yang, 2007) because these are fundamental to emotional intimacy and emotional understanding in marriage. Emotional understanding can be difficult when mental health is involved, but deep understanding could potentially act as a protective factor against negative outcomes of father depression. When admiration and respect are expressed in relationships, the mutual trust and security in a marriage is enhanced (Mikulincer & Shaver,

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2016). Communication, admiration, and teamwork imply an honest, emotional connectedness between both parents that may foster a goal-directed partnership and buffer negative outcomes from father depression while also removing the mother's need to be in control. When fathers with depression experience more or less gatekeeping behaviors, it could be due to the level of connectedness with their partner, thus, connectedness mediates the relationship between father depression and maternal gatekeeping.

These areas of the marital relationship likely also tap into the under- and over-functioning of parents, implying that increased marital stability and partner connectedness will lead to less maternal gatekeeping when parental functioning is more equally balanced. However, in relationships where depression is present, it is less likely to find equal functioning and more likely to find a lack of marital stability and connectedness, often because of crossover effects. Depression in one parent can lead to an "under-functioning" of that parent within the family system and an "over-functioning" of the other parent in order to maintain balance in the system (Bowen, 1974). The over-functioning could be captured through maternal gatekeeping; it could be the result of partners attempting to maintain equilibrium in the family system by taking control of the subsystems in the family (Holmes, Sasaki et al., 2013), which would consequently result in decreased marital functioning.

Current Study

For this study, I will use a mediational model to examine the relationship between paternal depression and maternal gatekeeping. I hypothesize that paternal depression will be positively associated with maternal gate-closing. I also hypothesize that marital instability will act as a mediator of this association, increasing the likelihood of maternal gatekeeping reports. Lastly, I hypothesize that partner connectedness will act as another mediator of this association,

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decreasing the likelihood of gate-closing. I will be examining aspects of spillover by examining father reports across all variables, as well as aspects of crossover by using maternal reports of their marriage and her own gatekeeping behaviors.

This study expands on the current gatekeeping literature in 3 key ways: 1) I use a large national data set, 2) I use both mother and father reports of maternal gatekeeping, and 3) I use an exploration of couple-level and individual level processes within the family system that may additively and interactively contribute to or reduce maternal gatekeeping.

Methods

Procedure and Sample

Participants for this study are a subsample of respondents in the Couple Relationships and Transition Experiences (CREATE) study. The CREATE study is a nationally representative survey of newly married young couples. The study was approved by all appropriate IRB bodies. Participants for the study were recruited using a two-stage cluster stratification sample design, with the first stage involving a random sample of counties, and the second involving a random sample of recent marriages within those selected counties. Effects of clustering data on the analyses are addressed in the analysis plan. Counties were selected based on a probability proportion to size (PPS) design. Selection was based on county population size, marriage, divorce, and poverty rates, and the racial-ethnic distribution of the county. The number of marriages selected per county ranged from 40 to 280, depending on these five characteristics. This design yielded a sampling frame of 11,960 marriages across 239 counties. Ten counties did not have at least 40 marriages during the sampling period, leaving the final sampling frame at 11,889 marriages.

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In the second stage, marriage record information was used, with assistance from publicly available databases, to locate couples and invite them to participate. To be included in the sample, respondents had to (a) be married and selected into the sample frame (since some marriage applicants did not end up marrying), (b) have at least one partner between 18 and 36 years of age at the start of the study, (c) be a first marriage for at least one of the partners in the dyad, and (d) be living within the U.S. The majority of couples in the study were married during 2014 (90%), with the remainder in 2013 (4%) and 2015 (6%).

Based on the Dillman survey method, potential participants were first contacted by mailed letters that contained a \$2.00 bill with an invitation to participate and instructions on how to enroll in the study (Dillman, Smyth, & Christian, 2008). For those that did not respond to the initial invitation, follow-up postal mailings, E-mail invitations, and phone calls were made. As is common with online surveys, participants were asked to read and then acknowledge consent to participate in the study. Participating couples were given a \$50.00 Visa gift card upon completion of the survey.

Among the 11,889 couples contacted, 8140 declined participation by either not answering or responding, and 1,220 did not meet inclusion criteria. A total of 2,187 marriages were recruited into the study, drawing a raw response rate of 18.24%. After dropping ineligible couples, the adjusted response rate was 20.50%. Of the 2,187 marriages, data from both members of the dyad were received in 1,889 (86%) cases, and data from one member of the dyad were received in the remaining 298 (14%) cases (see CREATE Principal Investigators, 2018 for more details about the sample and procedures).

Sample. Only 233 couples in Wave 2 of the CREATE study had children; after cleaning the data, the total sample included 216 couples (19.7% of the overall CREATE sample). Because

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this was a subsample of CREATE, the data were weighted to be nationally representative. Of the married couples with children, there were 432 participants. Of the women, 66% were White, 14% were Latina, 9% were Black, and the remaining 11% identified as either multiracial or another race. Ages ranged from 18 to 47 with the average around 28 years old. Most of the women were in their first marriage (87%), with a few in their second or third marriage (13%). For education, 65% reported having received an associate degree or high school education, 24% reported some college or a bachelor's degree, and 11% reported having an advanced degree. Of the men, 64% were White, 14% were Latino, 12% were Black, and the remainder identified as either multiracial or another race. Ages ranged from 19 to 56 with the average around 30 years old. Most of the men were in their first marriage (84%), with a few in their second or higher marriage (16%). For education, 70% reported having received an associate degree or high school education, 21% reported some college or a bachelor's degree, and 9% reported having an advanced degree. Annual household income ranged from nothing to over \$150,000 annually with an average of around \$60,000-\$69,000.

Measures

Maternal gatekeeping. Gatekeeping beliefs and behaviors exhibited by wives towards husbands were examined using an 11-item measure (Allen & Hawkins, 1999). Self-reports from mothers and partner reports from fathers were both used. This measure separates gatekeeping into three dimensions: standards and responsibilities (five items; for example, "I frequently redo some household tasks that my husband has not done well"), maternal identity confirmation (four items; for example, "I care about what my neighbors, extended family, and friends think about the way I perform my household tasks"), and commitment to differentiated family roles (two items; for example, "For a lot of reasons, it's harder for men than for women to do housework

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and child care”). Items for father’s partner reports were adjusted, for example, “My wife frequently redoes some household tasks I have not done well” and “My wife cares about what our neighbors, extended family, and friends think about the way she performs her household tasks.” Possible Likert-type responses ranged from 1 (not at all like me) to 4 (very much like me). Higher scores indicated higher levels of maternal gatekeeping beliefs and behaviors. Cronbach’s alpha for father’s partner report was .84 ($M = 2.45$, $SD = .65$) and mother’s self-report was .82 ($M = 2.55$, $SD = .64$).

Depressive symptoms. The Center for Epidemiologic Studies Depression, or CES-D, short-form scale (Radloff, 1977) was used to assess depression levels. Only the father self-report was included. The CES-D is a common scale used to help diagnose depression. For the short-form, ten statements were provided, and respondents rated themselves on a scale of 1 (rarely or none of the time), to 4 (most or all of the time). According to standard practice, items were then recoded to 0-3 and summed for an overall depressive symptom score with a clinical cutoff of ten ($M = 6.18$, $SD = 5.06$). About 20% of the sample fell above the clinical cutoff. Example items include, “I was bothered by things that usually don’t bother me” and “I felt that everything I did was an effort” and reverse code items such as “I was happy” and “I felt hopeful about the future.” This was used as an observed variable in the analyses because of the recoding and because it is specifically designed for all items to be weighted equally (Radloff, 1977). Cronbach’s alpha for fathers was .80.

Marital instability. This was measured using five items developed by Amato, Booth, Johnson, and Rogers (2009). The respondents were asked to consider times they thought their marriage “might be in trouble,” and the questions grew closer to likelihood of divorce such as, “Have you discussed divorce or separation from your spouse with a close friend or relative?” and

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“Have you and your spouse talked about consulting an attorney regarding a possible divorce or separation?” The responses were recorded on a six-point scale that ranged from 1 (never), to 6 (yes, within the last month). This was used as a latent variable in the model based on theoretical support and model fit evidence from a CFA. By including a latent variable in the model where it was most theoretically valuable also allowed me to avoid testing a fully saturated model, thus enabling me to use model fit indexes to assess the model. An exploratory factor analysis revealed all five items from the combined scales loaded strongly onto one factor, with factor loadings ranging from .56 to .88. Two separate latent variables, one for the mother report and the other for the father report, were created for this model. Both mediators were used as latent variables in order to maintain equality between the two models. The Cronbach’s alpha for fathers was .86 ($M = 1.95$, $SD = 1.23$) and for mothers was .88 ($M = 2.09$, $SD = 1.32$).

Partner connectedness. Scales for relationship communication, admiration, and teamwork were combined to create a latent variable representing this construct. Five partner-report items and five self-report items from the *Relationship communication* scale (Busby et al., 2001) were used including, “My partner is able to listen to me in an understanding way” and “I understand my partner’s feelings.” The responses were recorded on a five-point Likert scale ranging from 1 (never) to 5 (very often). *Admiration* and *Teamwork* items were each taken from subscales of the Marital Virtues Profile (Hawkins et al., 2007). For admiration, respondents were given three statements concerning their partner’s admiration for them including, “My partner sincerely compliments me on a regular basis” and “My partner admires me.” For teamwork, respondents were given another set of three questions including “My partner and I work together as a team to accomplish our goals” and “Our relationship is based on a deep sense of teamwork.” Responses were given on a six-point scale ranging from 1 (almost never) to 6 (almost always).

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An exploratory factor analysis revealed all 16 items from the combined scales loaded strongly onto one factor, with factor loadings ranging from .72 to .84. To create the latent variable, communication items, admiration items, and teamwork items were each combined with their own scales to create three separate observed variables. Because each of these measures use different scales and were never designed to be combined with each other, they were used as a latent variable in the model. The three composite measures were used for the latent variable in order to maintain power for the actual analyses by not overloading the model with variables. In this composite measure, the Cronbach's alpha for fathers was .95 ($M = 3.88$, $SD = .79$) and for mothers was .94 ($M = 3.86$, $SD = .77$).

Control variables. Control variables for these analyses include, age of each parent, age of child, gender of child, number of children, income, education of each parent, race of each parent, if their child is from their current relationship, and cohabitation prior to marriage (see Table 1 for summary statistics). Parents reported their age with mothers averaging slightly younger ($M = 28.13$, $SD = 5.04$) than fathers ($M = 30.12$, $SD = 5.66$). They were asked for the age of their first child ($M = 5.31$, $SD = 5.09$), which was then used as the focal child; age of the first child was included to account for any potential differences in gatekeeping based on the age of their children. Gender of the focal child was included to account for differences in parenting according to gender. There were more boys (56%) in the sample than girls (44%). Parents reported having about 2 children on average ($M = 1.71$, $SD = .98$). Race was recoded as separate dummy variables and each dummy variables was coded 0 (not that race) to 1 (being that race). Seventy-one percent of the children in this sample were born from the current marriage partner. Participants reported on cohabitation, with 82% reporting that they cohabited with their spouse prior to marriage. Due to high correlations between mother and father reports on child age, child

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gender, number of children, income, and whether or not the child is from their current relationship, only mother reports for these items were used in the final analyses.

Table 1 Summary Statistics

	M(N)	SD(%)	Range	
			Min	Max
Maternal Gatekeeping (Father)	2.45	.65	1	4
Maternal Gatekeeping (Mother)	2.55	.64	1	4
Father Depression	6.18	5.06	0	29
Marital Instability (Father)	1.95	1.23	1	6
Marital Instability (Mother)	2.09	1.32	1	6
Partner Connectedness (Father)	3.88	.79	1	6
Partner Connectedness (Mother)	3.86	.77	1	6
Father Age	30.12	5.66	19	56
Mother Age	28.13	5.04	18	47
Focal Child Age	5.31	5.09	0	27
Focal Child Gender – Male	(228)	(56%)		
Focal Child Gender – Female	(177)	(44%)		
Number of Children	1.71	.98	1	6
Household Income	7.02 (\$60k)	3.67	1	16
Father Education	3.47 (college)	1.44	1	7
Mother Education	3.74 (college)	1.37	1	7
Father Race				
White	(265)	(64%)		
Black	(50)	(12%)		
Latino	(58)	(14%)		
Other/Multiracial	(42)	(10%)		
Mother Race				
White	(276)	(66%)		
Black	(36)	(9%)		
Latina	(59)	(14%)		
Other/Multiracial	(45)	(11%)		
Father: Child from this Relationship – Yes	(292)	(71%)		
Father: Child from this Relationship – No	(119)	(29%)		
Mother: Child from this Relationship – Yes	(288)	(71%)		
Mother: Child from this Relationship – No	(116)	(29%)		
Cohabit Prior to Marriage – Yes	(340)	(82%)		
Cohabit Prior to Marriage Cohabitation – No	(76)	(18%)		

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Analysis Plan

Preliminary analyses, including descriptive statistics, CFA's, and correlations were performed using Stata 15.1 software. After gaining an initial understanding of the data, a Structural Equation Model (SEM) was created using *Mplus* 8 software. Based on theoretical understanding of the literature as well as preliminary analyses, two separate mediation models, including a combination of latent and observed variables, were created. The first model assessed the relationship between maternal gatekeeping and father depression with marital instability mediating the relationship for both partners (see Figure 1). A second model was developed, identical to the first but with partner connectedness mediating the association between depression and maternal gatekeeping for both partners (see Figure 2). SEM allows the simultaneous examination of multiple regression analyses while still finding the unique contributions of each variable.

As recommended in the structural equation modeling literature (MacKinnon, 2008; Preacher & Hayes, 2008), mediation was examined by testing the indirect effects in the model using bias-corrected bootstrap analysis. Confidence limits were estimated on the basis of 2,000 bootstrap samples. Bias-corrected bootstrapping analyses for mediation allowed the decomposition of direct, indirect, and total effects, and provided adjusted standard errors for the indirect effects (MacKinnon, 2008). Measurement and structural equivalence were tested for partner connectedness between husbands and wives; this construct is the only one created for this study and therefore needed closer examination and testing. Using a fixed factor method, equivalence ($\Delta\text{CFI} < .01$) was confirmed across both spouse reports (see Table 2).

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Table 2 Partner Connectedness Equivalence Testing

Invariance Model	χ^2	df	$\Delta\chi^2$	CFI	Δ CFI	RMSEA
Configural	92.67	6		.93		.18
Weak	93.54	8	.87	.93	.00	.16
Strong	99.18	10	5.64	.93	.00	.14

Potential problems with non-independent reports because of the nature of data collection by county clustering was accounted for through weighting the data in *Mplus*. Although I wanted to test for clustering, due to confidentiality, county identification was removed from the dataset. Weights were used for both mediation analyses and after comparing results with and without weights, there were no substantial difference found between the models. After testing for missing data, it was found that father reports of maternal gatekeeping (3.9%), mother reports of maternal gatekeeping (3.5%), mother reports of her own age (3.2%) and of her child's age (3.2%) were all missing completely at random. All missing data were imputed using FIML in *Mplus* for both of the final mediation models. Because the distribution for depression, marital instability, and partner connectedness were all highly skewed, the final analyses were run using MLR estimation; however, marital instability was exceptionally skewed (1.16-1.43%) and required further attention. To remedy any potential problems with the skew, I examined various transformations in Stata and chose one that would be most appropriate. After using that transformation and treating the variables as negative binomial in *Mplus*, I found that it did not substantially improve the skew. After consulting with multiple colleagues, it was decided that the best and only option was to censor the marital instability variables in *Mplus*, which remedied final analysis issues from the skewness.

Results

Preliminary Analyses

Preliminary correlation analyses found significant correlations between maternal gatekeeping reports, father depression, marital instability, and partner connectedness that support the hypothesis that marital instability and partner connectedness could act as mediators (see Table 3 for bivariate correlations of the main variables).

Table 3 Bivariate Correlations

	1.	2.	3.	4.	5.	6.	7.
1. Father Maternal Gatekeeping	--						
2. Mother Maternal Gatekeeping	.64***	--					
3. Father Depression	.08	.10*	--				
4. Father Marital Instability	.12*	.14**	.43***	--			
5. Mother Marital Instability	.09	.15**	.36***	.71***	--		
6. Father Partner Connectedness	-.09	.14**	.41***	.49***	.38***	--	
7. Mother Partner Connectedness	-.07	.16**	.31***	.47***	.54***	.65***	--

*p < .05; **p < .01; ***p < .001

Model 1: Marital Instability as a Mediator

A structural model was created with father depression predicting mother and father reports of maternal gatekeeping and mother and father reports of marital instability acting as a mediator (see Figure 1).

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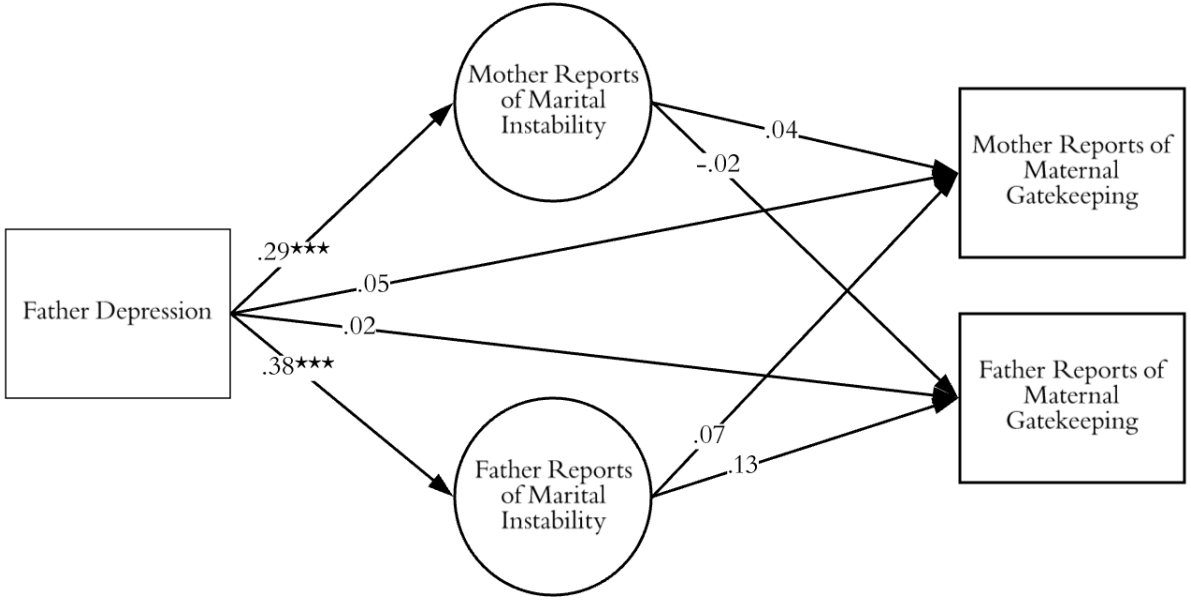


Figure 1 SEM of Marital Instability Mediation

Note: *** $p < .001$.

Note: Results show standardized coefficients. For parsimony, correlations and control variables were not included in this figure. Control variables include age of parents, age of child, gender of child, number of children, income, education, race, if their child is from their current relationship, and cohabitation prior to marriage.

Control variables for this model include age of parents, age of child, gender of child, number of children, income, education, race, if their child is from their current relationship, and cohabitation prior to marriage. In order to maintain power for the analysis as well as good model fit, only control variables with a significant association with the main variables were included in the final model. Both direct and indirect effects were examined to understand the unique contribution of marital instability (see Table 4 for details on the decomposition of effects).

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Table 4 Decomposition of Effects for Marital Instability, and Maternal Gatekeeping

Variable	Direct	Indirect	Total Indirect	Total Effects
Father depression on father maternal gatekeeping through father M.I.	.02	.05	.06	.08
Father depression on father maternal gatekeeping through mother M.I.	.02	-.01	.06	.08
Father depression on mother maternal gatekeeping through father M.I.	.05	.03	.05	.09
Father depression on mother maternal gatekeeping through mother M.I.	.05	.01	.05	.09
Father depression on father marital instability	.38***	--	--	--
Father depression on mother marital instability	.29***	--	--	--
Father marital instability on father maternal gatekeeping	.13	--	--	--
Father marital instability on mother maternal gatekeeping	.07	--	--	--
Mother marital instability on father maternal gatekeeping	-.02	--	--	--
Mother marital instability on mother maternal gatekeeping	.04	--	--	--
Control variables				
Father M.I. on father maternal gatekeeping through father education	.14	.23**	.14*	.29*
Mother M.I. on father maternal gatekeeping through father education	.03	-.24**	-.15*	-.18
Father M.I. on mother maternal gatekeeping through father education	.08	.14*	.10	.19
Mother M.I. on mother maternal gatekeeping through father education	.03	-.15*	-.08	.10
Black mothers father depression	-.07*	--	--	--
Father education on mother marital instability	-.09**	--	--	--
Father education on father maternal gatekeeping	-.20**	--	--	--
Father education on mother maternal gatekeeping	-.12*	--	--	--

* $p < .05$; ** $p < .01$; *** $p < .001$

Note: p -values are bootstrap bias-corrected. All reports are standardized. Only significant controls included in this table.

Marital instability was highly skewed to the left, meaning that most couples reported strong stability in their marriages. Prior to accounting for the skew of these variables, the model fit the data well ($X^2_{(119)} = 201.23$, $p < .001$; CFI = .96; TLI = .95; RMSEA = .04 [lo = .04, hi = .05]). In order to account for this skew, after attempting transformations and consulting with other professionals, it was determined that the best and only course of action was to use censored

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data in *Mplus* for more accurate results. However, after including censored variables, model fit was no longer available. The results in the significance and coefficients between the uncensored data and the censored data were not substantially different, so results from the censored data are included here.

No significant direct effects were found between father depression and either mother report of maternal gatekeeping ($\beta = .05, p = .43$) or father report of maternal gatekeeping ($\beta = .02, p = .73$). However, significant associations were found between father depression and mother reports of marital instability ($\beta = .29, p < .001$), as well as father reports of marital instability ($\beta = .38, p < .001$); according to these results, greater marital instability was associated with higher reports of father depression. Maternal gatekeeping was not associated with marital instability, including father reports of gatekeeping with father reports of marital instability ($\beta = .13, p = .41$) or mother reports of marital instability ($\beta = -.02, p = .86$). Mother reports of gatekeeping were also not associated with father reports of marital instability ($\beta = .07, p = .59$) or mother reports of marital instability ($\beta = .04, p = .71$). With no significant direct or indirect associations between father depression and maternal gatekeeping, there is no evidence of an indirect association or mediation.

Some control variables were also associated with main variables in the analysis, including Black mothers with father depression ($\beta = -.07, p < .05$). Father education was associated with mother marital instability ($\beta = -.09, p < .01$), father maternal gatekeeping ($\beta = -.20, p < .001$), and mother maternal gatekeeping ($\beta = -.12, p < .05$).; Because of the education associations, I examined the pathways from father education to marital instability and gatekeeping. I found that the indirect associations from father marital instability ($\beta = .22, p < .01$), and mother marital instability ($\beta = -.23, p < .01$) to father maternal gatekeeping were both

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significant through father education. I also found that indirect associations from father marital instability ($\beta = .13, p < .05$), and mother marital instability ($\beta = -.14, p < .05$) to mother maternal gatekeeping were also significant through father education. These findings suggest that a father's education plays an important role in any potential associations between depression, instability, and gatekeeping in family systems.

Model 2: Partner Connectedness as a Mediator

A structural model was created with father depression predicting mother and father reports of maternal gatekeeping and mother and father reports of partner connectedness acting as a mediator (see Figure 2).

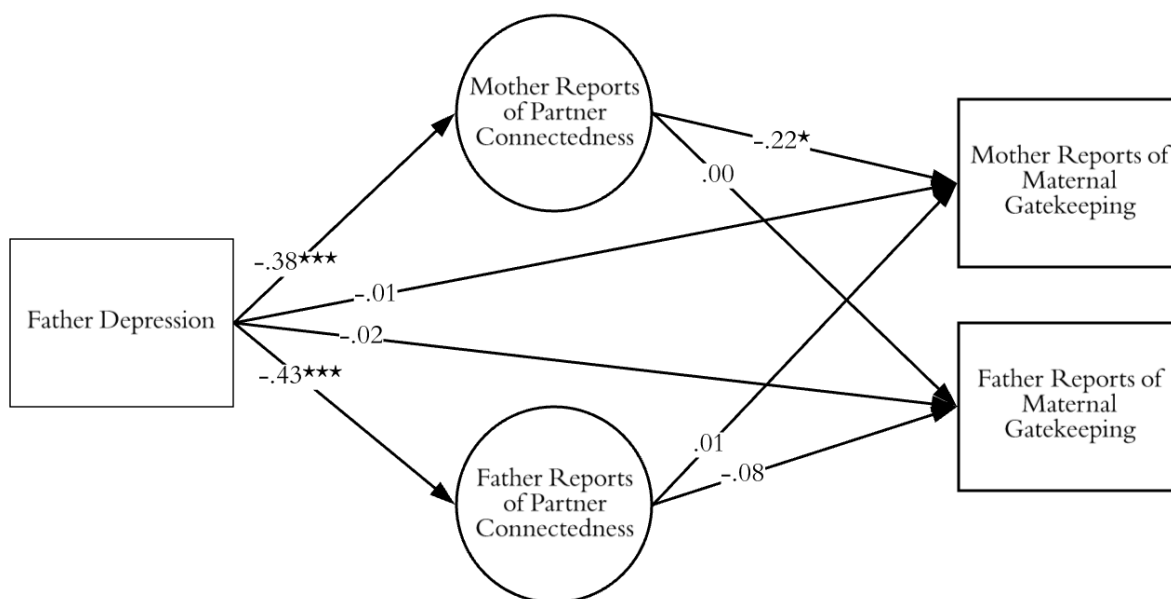


Figure 2 SEM of Partner Connectedness Mediation

Note: $*p < .05$; $***p < .001$.

Note: Results show standardized coefficients. For parsimony, correlations and control variables were not included in this figure. Control variables include age of parents, age of child, gender of child, number of children, income, education, race, if their child is from their current relationship, and cohabitation prior to marriage.

Control variables for this model include age of parents, age of child, gender of child, number of children, income, education, race, if their child is from their current relationship, and

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cohabitation prior to marriage. In order to maintain power for the analysis as well as good model fit, only control variables with a significant association with the main variables were included in the final model. Both direct and indirect effects were examined to understand the unique contribution of marital instability (see Table 5 for details on the decomposition of effects).

Table 5 Decomposition of Effects for Partner Connectedness, and Maternal Gatekeeping

Variable	Direct	Indirect	Total Indirect	Total Effects
Father depression on father maternal gatekeeping through father P.C.	-.02	.00	.02	.07
Father depression on father maternal gatekeeping through mother P.C.	-.02	.02	.02	.07
Father depression on mother maternal gatekeeping through father P.C.	-.01	.00	.07*	.08
Father depression on mother maternal gatekeeping through mother P.C.	-.01	.08*	.07*	.08
Father depression on father partner connectedness	-.43***	--	--	--
Father depression on mother partner connectedness	-.38***	--	--	--
Father partner connectedness on father maternal gatekeeping	-.00	--	--	--
Father partner connectedness on mother maternal gatekeeping	-.05	--	--	--
Mother partner connectedness on father maternal gatekeeping	.00	--	--	--
Mother partner connectedness on mother maternal gatekeeping	-.16	--	--	--
Control variables				
Mother education on mother maternal gatekeeping	-.09*	--	--	--
Father education on father maternal gatekeeping	-.32**	--	--	--
Father education on mother maternal gatekeeping	-.16*	--	--	--
Child age on mother partner connectedness	.10*	--	--	--
Black fathers on partner connectedness	.08*	--	--	--

* $p < .05$; ** $p < .01$; *** $p < .001$

Note: p -values are bootstrap bias-corrected. All reports are standardized. Only significant controls included in this table.

The model fit the data well ($\chi^2_{(77)} = 138.59, p < .001$; CFI = .95; TLI = .94; RMSEA = .04 [lo = .03, hi = .05]). No significant direct effects were found between father depression and either mother report ($\beta = -.01, p = .86$) or father report of maternal gatekeeping ($\beta = -.02, p =$

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.97). However, significant associations were found between father depression and mother reports of partner connectedness ($\beta = -.38, p < .001$), as well as father reports of partner connectedness ($\beta = -.43, p < .001$). According to these results, lower reports of partner connectedness are associated with higher reports of father depression. Father partner connectedness was not associated with mother self-reports of maternal gatekeeping ($\beta = .01, p = .89$), nor father partner reports of maternal gatekeeping ($\beta = -.08, p = .38$). Although mother partner connectedness was not associated with father maternal gatekeeping ($\beta = .00, p = .97$), it was significantly associated with mother maternal gatekeeping ($\beta = -.22, p < .05$). This association, from father depression to mother reports of gatekeeping through mother partner connectedness, was the only significant indirect effect ($\beta = .08, p = .05$). All indirect effects in the maternal reports of this gatekeeping model appear to be significant as evidenced by the sum of indirect effects ($\beta = .07, p = .01$). However, when examining specific pathways, the results seem to be driven by the maternal partner connectedness variable. Although an indirect effect does exist, without longitudinal data it cannot be confirmed that it is mediation.

Some control variables were also associated with main variables in the analysis. Father education was associated with both father ($\beta = -.32, p < .001$), and mother maternal gatekeeping ($\beta = -.16, p < .05$). Mother education was also negatively associated with mother maternal gatekeeping ($\beta = -.09, p < .05$). Child age was associated with mother partner connectedness ($\beta = .10, p < .05$) and Black fathers were significantly more likely to report partner connectedness than White fathers ($\beta = .08, p < .05$).

Discussion

This study expands the current maternal gatekeeping literature by using a family systems approach that includes both mothers' and fathers' perspectives (crossover and spillover), assesses individual (e.g. father's depressive symptoms) and dyadic factors (e.g. marital instability, connectedness) as correlates of gatekeeping in a nationally representative sample of newly married U.S. parents. Based on this approach, I hypothesized that father depression and maternal gatekeeping would be associated, and this association would potentially be mediated by marital instability and partner connectedness. Current researchers and professionals are missing a key piece of the family system by not understanding or exploring the effects of father depression on maternal gatekeeping, but this paper begins to fill that gap.

The first hypothesis, that paternal depression would be directly positively associated with maternal gatekeeping, was not supported. This was surprising because prior research has connected father depression with maternal gatekeeping when other maternal gatekeeping measures, such as those from Fagan and Barnett (2003) are used (see Thomas & Holmes, forthcoming). The gatekeeping measure used in the current study has three separate constructs: maternal identity confirmation, differentiated gender roles, and standards and responsibilities (Allen & Hawkins, 1999). Items from the current study focus less on maternal control or ownership of parenting (Fagan & Barnett, 2003), and more on a mother's standards, gendered expectations for the division of labor, and her need for external confirmation of her maternal identity (Allen & Hawkins, 1999). It is possible that this sample is less likely to adhere to these traditional ideas of maternal gatekeeping; the specific sample is newlyweds, many of whom cohabited prior to marriage. They could be more likely to have more modern ideas and views of maternal identity and the role of the father in the home. It is also possible that the amount of

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gate-opening and gate-closing balanced out any potential variability in the sample. Thus, it is likely that this measure for maternal gatekeeping in this specific sample does not tap into the features of gatekeeping that coexist with a father's depressive symptoms.

The second hypothesis, that marital instability would act as a mediator between maternal gatekeeping and depression, was not supported. Theoretically, there is support linking lower marital stability with both depression and maternal gatekeeping (Schoppe-Sullivan et al., 2015; Wittenborn et al., 2012); however, in this sample of newlywed couples the overall reports for clinical depression were minimal, marital stability was high on average, and maternal gatekeeping was low. There was a tight restriction on the range of marital stability in this specific sample. It is possible that the current sample does not capture the variance that exists in couples with higher levels of depression and lower marital stability. It is also possible that more variance would be captured for couples who had been married for a longer period of time. However, one area of this model that was significant connects marital instability to maternal gatekeeping through a father's education. Research has linked education to increased father involvement (Kulik & Tsoref, 2010), including encouragement from mothers for fathers to be involved (Kulik & Sadeh, 2015). Higher education may be linked to better access to resources including medical and mental health resources. Thus, in this instance, higher levels of education promote marital stability, and marital stability decreases the likelihood of maternal gatekeeping.

The third hypothesis, that partner connectedness would also act as a mediator between maternal gatekeeping and depression, was only partially supported. The support for this hypothesis comes from significant paths from father depression to mother partner connectedness and then on to mother maternal gatekeeping (see Figure 2). The presence of significant indirect effects suggests that though fathers experiencing depression do not report increased gatekeeping,

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depression is associated with their wives feeling less connected in their marriage (Wittenborn et al., 2012). Wives who feel less connected also report greater gatekeeping. The measure for connectedness focuses on emotional and communicative connection in couples; when fathers were depressed, feelings of connection decreased for both husbands and wives. But this decrease did not influence fathers' reports on maternal gatekeeping, possibly because they did not recognize the gatekeeping behaviors. The decrease in connectedness was associated with increased maternal gatekeeping behaviors, possibly as a protective reaction (Schoppe-Sullivan et al., 2015). However, because there was no significant direct path between maternal gatekeeping and father depression in the original analysis, I cannot confidently state that there is mediation. There were significant associations again between education and maternal gatekeeping, implying that education does influence gatekeeping behaviors. But because there was no significant association between education and any other variables, other sources for mediation using education were not tested.

This paper adds to the current gatekeeping literature by focusing on father reports of gatekeeping, including mental health as a main predictor, and using a nationally representative sample. However, there are some limitations with the method of analysis, the subsample used, and the lack of specific externalizing behaviors in the depression scale. Because mediation often assumes the passage of time, it is a method best used with longitudinal data. In future analyses, I plan to include partial mediation after receiving data from Wave 3 of this project, which will add to the current findings. Another limitation is that the dataset focuses only on recently married couples, so nearly all children were born prior to the current marriage of the couples. Lastly, the measure for depression was the CES-D; although it is correlated with other measures that focus on externalizing depression behaviors, such as the Masculine Depression Scale (Magovcevic &

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Addis, 2008), it still does not include an adequate number of behavior-focused items. This is important because research has found that men are more likely to express externalizing behaviors of depression (Magovcevic & Addis, 2008); thus, when only internalizing measures are used, many men are not diagnosed properly (Kilmartin, 2005). So, the percentage of men in this study who fell under the clinical cutoff could be a very modest estimation. Future analyses should include the MDS and external depression behaviors when focusing on fathers and their effect on family processes.

These results have implications for therapists and researchers alike. Therapists need to recognize the many different interconnected relationships that affect families, including both spillover and crossover that occur in homes where someone struggles with mental health (Goodman et al., 2014; Turney & Hardie, 2018). As they treat fathers for depression, they need to recognize how the father's depression could affect other relationships in the family unit. Individual's should be treated in light of the family system as a whole. The results from this study also show that researchers studying father's depression should examine how his depression impacts couple stability and couple connection. Those studying gatekeeping might consider exploring wives' perceptions of connectedness in particular, as well as education, which was a consistent predictor of gatekeeping across both analyses. Understanding these relational contexts may have important implications for co-parenting curricula, including the way in which the marriage itself can influence these factors. Exploring the context in which maternal gatekeeping occurs can help us better understand the implications for families.

In conclusion, these results are important for understanding maternal gatekeeping in a family systems context through showing that partner connectedness may act as a mediator between father depression and maternal gatekeeping. Although the results from these analyses

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were not definitive, they provide a basis for future research. This paper provides evidence that there could be a connection between father depression and maternal gatekeeping; I encourage more longitudinal dyadic research to further help researchers understand connections between father depression and maternal gatekeeping.

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