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어머니의 완벽주의와 아동의 수면문제의 관계: 어머니의 우울의 매개효과를 중심으로

The Mediation Effect of Mother's Depression on the Relationship between Mother's Perfectionism and Children' Sleep Problem

Xinyu Gu*, Myoung Ho Hyun**

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ABSTRACT

Present study was to test the role of mother's depression on the relation between mother's perfectionism and children' sleep problem. one hundred and thirty six pairs of mother and children(boys=67; girls=69) were recruited as participants to complete questionnaires. The mean age of children was 4.65(SD=.991), and mothers' was 35.7(SD=3.618). Mother's perfectionism and depression was assessed by MPS and BDI-II, children's sleep problem was estimated by Sleep-Waking Questionnaire. The result that mother's total perfectionism, self-oriented perfectionism and socially prescribed perfectionism can predict children' sleep problem was verified. But mother's other-oriented perfectionism affects children' sleep problem insignificantly. And mother's depression had a significant influence on children' sleep. Result of the mediation model was that mother's depression played a role of mediating effect on the relation between mother's total perfectionism and children' sleep problem. In detail, self-oriented perfection had a perfect mediating effect on the relation between mother's perfectionism and children' sleep problem, and socially prescribed perfectionism

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played a partial mediating effect on the relation between mother's perfectionism and children' sleep problem. However, other-oriented perfectionism did not has significant correction with children' sleep problem, so the mediating effect of mother's depression did not exist. Present results indicated that mother's perfectionism may not affect children' sleep problem directly but through depression.

주제어: mother, perfectionism, depression, children's sleep problem

I. Introduction

Sleep, as a significant healthy index, plays a very important role in our quality of life. Evidences had been proved that poor quality of sleep can result in impairment of daytime function or in emotional distress(American Psychiatric Association, 1994), and the effect of poor quality of sleep on next-day functioning, health, safety, and quality of life brings about a substantial societal burden and economic cost(Rosekind & Gregory, 2010). However, there is one third of people suffering from insomnia(a disorder of poor sleep quality or quantity) over the world(Weissbluth, 2015), and one out of every one hundred Koreans was having insomnia, and the prevalence of insomnia, increased by 34.3% from 2012 to 2016(National Health Insurance Service, 2018). Meanwhile, sleep problems also occurs in children. It has been suggested that proper sleep of infant and children has a close relationship with their psychosocial and neurobehavioural development(Thoman, 2005). Improper sleep may have a negative effect on children's developments of emotion, attention, cognition and language, and lead to learning disorder, ADHD or other disabilities(Chervin, et al. 2005; Dahl, 1996; Dearing, et al. 2001; Gregory & O'Connor, 2002).

A review on sleep disorder of early children has indicated an association between sleep patterns in children and psychopathology of the mother(Benhamou, 2000). The researcher has suggested that this association may due to emotional unavailability and inappropriate behavior of mothers. Previous researches have confirmed that mother's mood, especially depression, can lead to children' sleep problem(Kataria. Swanson, & Trevanthin, 1987; Minde, et al., 1993; Stern, 1994; Zuckerman, Stevenson, & Baily, 1987). Carr(1999) has found the cause of awaking at night of children into constitutional·biological factors and psychological·interactional factors. The psychological interactional factors includes mother's depression and anxiety and attachment problems between mother and child. Moreover, Susan, George, Samuel and Ronald(2006) has indicated a causal relation between mother's depression and sleep problem of children that mother's depression predicts infant(since born from 1 month to 36 month)'s longer awaking time 3 years later. Kim and Moon(2007) also reported the negative effect from mother's depression to children' sleep. Similar results were found on Beck(2006) and Choe, Hong, Chang, and Lee(최민희, 홍수중, 장형윤, 이경숙, 2014)'s studies. Therefore, the depression mood of mother can be an important cause of children' poor sleep.

Although, Several studies have indicated that perfectionism may play a role on the relationship between children and parents(Azevedo, et al., 2007; Azevedo, et al., 2010; Lundh, Broman, Hetta, & Saboonchi, 1994; Jansson, & Linton, 2007; Sona & Alireza, 2015). Perfectionism is a behavioral characteristic that desires oneself perfect or demands others in a excessive high standard, and it can be divided into self-oriented, other-oriented and socially prescribed perfectionism(Hewitt & Flett, 1991a). Self-oriented perfectionism is highly correlated with serious self-blame and setting exacting standards for oneself and stringently evaluating and censuring one's own behavior, which lead to discrepancy between the realistic self and the ideal self that makes self-respect lower and causes psychological maladjustment such like depression or anxiety. Socially prescribed perfectionism involves the perceived need to attain standard and expectations prescribed by significant others. The Other-oriented perfectionist is believed to have unrealistic standards for significant others, places importance on others' performance. On a more positive note, other-oriented perfectionism may be associated with desirable attributes such as leadership ability or facilitating others' motivation. However, other-oriented perfectionism could be related to interpersonal frustrations such as cynicism and loneliness and to marital or family problems(Hollender, 1965).

Three dimensions of perfectionism all require to accomplish unrealistic perfect performance on various aspects of life(Hewitt & Flett, 2002), which also have influence on relation between parents and child or marital relation. As Vincent and Walker(2000) have reported a significant correlation between maladaptive perfectionism and chronic insomnia, there is a necessity to check the effect from parents' perfectionism on children(Wiebe & McCabe, 2002). However, research on this area was limited. One hypothesis came out that perfectionism may not affect children' sleep directly, but have this influence through depression(임혜진, 1996). Kim(2005) has suggested a important relation between mothers' perfectionism and children' depression. Another Study also has confirmed that mothers' negative perfectionism plays a significant effect on depression of daughters(Sarkhanlou & Kiamanesh, 2015). In other words, parents, especially mother(usually the main fosterer), with high perfectionism may cause children' adaptation behavior or negative martial relation in a way that perfectionism may bring about depression, and meanwhile needs to control the relation with children or mate. So parents' perfectionism may affect children' maladjustment behavior through depression.

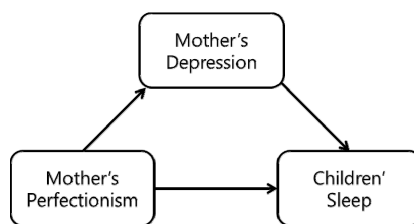


Figure 1: The mediation model of mothers' depression on the relation of mothers' perfectionism and children' sleep.

Therefore, psychological interactional traits such like parents' perfectionism and depression have been found to have effects on children' sleep. However, how mother's perfectionism and depression affect children' sleep has not been detailed, and study on this part was still limited. The purpose of present study was to identify whether mother's perfectionism affect children' sleep problem mediated by mother's depression (figure 1). Then the relation between mother's self-oriented, other-oriented and socially prescribed perfectionism and depression, and these factors how to have influent on children' sleep were investigated. Hypotheses of current study were presented below:

H1: Mother's perfectionism has significant correlation with mother's depression and children' sleep problem, and mother's depression also has a significant correlation with children' sleep problem.

H2: Mother's depression has a mediating effect on the relationship between mother's perfectionism and children' sleep problem.

II. Methods

2.1 Participants & Procedure

Total 136 pairs of mothers and children were recruited as participants from Seoul, Gyeonggi-do Province and Chungcheongnam-do Province. And 67 boys and 69 girls aged from 3 to 6 years old were included in present study. The mean age of children was 4.65(SD=.991), and mothers' was 35.7(SD=3.618).

2.2 Instruments

2.2.1 Multidimensional Perfectionism Scale: MPS

Multidimensional perfection scale (Hewitt & Flett, 1991a) used in present study, which is considered perfectionism on individual's internal aspect and external aspect including interpersonal relation, was translated into Korean version by Han(한기연, 1993). This scale involves three dimensions: self-oriented perfectionism, other-oriented perfectionism and socially prescribed perfectionism, and each dimension consist of 15 items and weighted equally on a Likert 1-7 scale (strongly disagree: 1 to strongly agree: 7). The Chronbach α of present study was total perfection: 0.89, self-oriented perfection: 0.84, other-oriented perfectionism: .658, socially prescribed perfectionism: 0.74.

2.2.2 Beck Depression Inventory-II: BDI-II

Beck Depression Inventory-II(Beck, Steer, & Brown, 1996) was a developed version of BDI for diagnostic standard of depression. This inventory is a 21-question multiple-choice and 4-point self-report inventory for measuring the severity of depression. Total scores range from 0 to 63. The Korean version of BDI-II translated by Kim, Lee, and Lee(2007) was used in this study. Higher overall scores indicate serious depression. The Chronbach α was 0.89.

2.2.3 Sleep-Waking Questionnaire

Sleep-Waking Questionnaire(Carvalho Bos et al., 2009) is a parental questionnaire to assess child sleep and waking behavior. The questions concerned sleep/wake times total sleep time , time to fall asleep, number of night awakenings, ability to go back to sleep alone after night awakenings, bedtime habits and difficulties, night time sleep related behaviors, daytime sleepiness, irritability and tiredness, factors influencing bedtime, and wake up practices in the morning. In addition parents were asked whether their child had any problem with sleep, whether they have sought professional help for a sleep problem in the child, about the use of sleep medication, and also to provide information on other medical disorders such as epilepsy, asthma, bronchitis, rheumatism, diabetes, mental disorder, mental retardation or others. It is a 4-point questionnaire, and higher score indicates more and serious sleep problems.

2.3 Data Analysis

Total 220 questionnaires were collected, but only 136 were available because missing data or unavailable answers. Descriptive statistics and regression analysis were run to analyse the relation between mother's self-oriented, other-oriented and socially prescribed perfectionism and depression, and these factors how to have influent on children' sleep problem.

III. Result

3.1. Corrections between factors

Table 1 showed the corrections between mother's perfection and depression and children' sleep problem.

Mother's total perfectionism had a significant correlation with depression($r=.272, p<.01$) and children's sleep problem($r=.260, p<.01$). Mother's depression was also related to children's sleep problem($r=.444, p<.001$) in significant level. So, the first hypothesis was verified. Mother's self-oriented perfectionism had a significant correlation with depression($r=.180, p<.05$) and children's sleep problem($r=.235, p<.01$). Mother's socially prescribed perfectionism was also related to depression($r=.354, p<.001$) and children's sleep problem($r=.339, p<.001$). However, mother's other-oriented perfectionism did not have any significant correlations with mother's depression($r=.098$) or children's sleep problem($r=.140$).

<Table 1> The correlation between mother's perfectionism, depression and children's sleep problem

	1	2	3	4	5	6
1. total perfectionism	(183.96±25.19)					
2. self-oriented perfectionism	.900***	(68.19±11.88)				
3. other-oriented perfectionism	.816***	.611***	(59.64±8.64)			
4. socially prescribed perfectionism	.811***	.592***	.491***	(56.50±8.81)		
5. depression	.272**	.235**	.098	.354***	(10.63±8.17)	
6. sleep problem	.260**	.180*	.140	.339***	.444***	(7.87±2.10)

* $p<.05$, ** $p<.01$, *** $p<.001$; () : (Mean±SD)

3.2. The mediating effect of mother's depression on the relation between mother's perfectionism and children's sleep problem

In order to test the role of mother's depression on the relation between mother's total perfectionism and children's sleep problem, mediating effect analysis according to Baron and Kenny(1986) was run. As table 2 presented, mother's total perfectionism as independent variable was having a significant effect on parameter(depression) at first step($\beta = .272, p<.01$). At second step, mother's total perfectionism were affecting dependent variable(children's sleep problem) in a significant level($\beta = .260, p<.01$). At third step, after controlling the effect of mother's depression on children's sleep problem total perfectionism affected sleep problem insignificant($\beta = .148, p>.05$). It indicated that there is a mediating effect of mother's depression on the relation between mother's total perfectionism and children's sleep problem, so the second hypothesis was also verified.

<Table 2> The mediating effect of mother's depression on the relation between mother's total perfectionism and children' sleep problem

	Regression Direction		<i>t</i>	<i>R</i> ²	<i>β</i>
step 1	mother's total perfectionism	mother's depression	3.042**	.066	.272
step 2	mother's total perfectionism	children' sleep problem	2.997**	.060	.260
step 3	mother's depression	children' sleep problem	4.676***	.188	.402
	mother's total perfectionism	children' sleep problem	1.723	.202	.148

p* < .05 , *p* < .01 , ****p* < .001

The same method was used to test the role of mother's depression on the relation between mother's self-oriented perfectionism and children' sleep problem. As table 3 presented, self-oriented perfectionism predicted depression significantly at first step($\beta = .235, p < .01$). At second step, self-oriented perfectionism also predicted children' sleep problem in a significant level($\beta = .180, p < .01$). However, after controlling depression self-oriented perfectionism did not affect children' sleep problem significantly($\beta = .082, p > .05$). Therefore mother's depression had a perfect mediating effect on the relationship between mother's self-oriented perfectionism and children' sleep problem.

<Table 3> The mediating effect of mother's depression on the relation between mother's self-oriented perfectionism and children' sleep problem

	Regression Direction		<i>t</i>	<i>R</i> ²	<i>β</i>
step 1	mother's self-oriented perfectionism	mother's depression	2.666**	.047	.235
step 2	mother's self-oriented perfectionism	children' sleep problem	2.086**	.025	.180
step 3	mother's depression	children' sleep problem	5.029***	.188	.422
	mother's self-oriented perfectionism	children' sleep problem	.977	.187	.082

p* < .01 , *p* < .001

The result of the effect of mother's depression on the relation between mother's socially prescribed perfectionism and children' sleep problem was present in table 4. At first step, mother's socially prescribed perfectionism predicted depression($\beta = .354, p < .001$) significantly. At second step, socially prescribed perfectionism also predicted children' sleep problem($\beta = .108, p < .01$) in a significant level. At third step,

after controlling depression socially prescribed perfectionism predicted children' sleep problem significantly, but the effect power was lower($\beta = .215, p < .05$). To identify the effect from socially prescribed perfectionism to children' sleep problem after controlling depression, Sobel test was run. Result was $z=2.99(p < .01)$, which indicated depression's partial mediating effect was confirmed. However, because mother's other-oriented perfectionism did not has significant correction with children' sleep problem, the mediating effect of mother's depression was not supposed.

<Table 4> The mediating effect of mother's depression on the relation between mother's socially prescribed perfectionism and children' sleep problem

	Regression Direction		<i>t</i>	<i>R</i> ²	β
step 1	mother's socially prescribed perfectionism	depression	4.112***	.118	.354
step 2	mother's socially prescribed perfectionism	children' sleep problem	4.057**	.339	.108
step 3	mother's depression	children' sleep problem	4.366***	.380	.187
	mother's socially prescribed perfectionism	children' sleep problem	2.134*	.186	.215

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

IV. Discussion

Present study was to test the role of mother's depression on the relation between mother's perfectionism and children' sleep problem. Since children' sleep plays an very important role on their developmental stages, if sleep problem happens emotional cognitive and physical problem may turn up when they grows up. Therefore it is necessary to identify mother's perfectionism and depression the important factors for children' sleep problem how affect children' sleep. Previous researches have suggested that mother's perfectionism affects children' maladaptive behaviors through mother's depression. Thus it can be assumed possibly that mother's perfectionism may not affect children' sleep problem directly but through depression. Results and discussions of this study were presented below.

First, the result that mother's total perfectionism, self-oriented perfectionism and socially prescribed perfectionism can predict children' sleep problem was verified. However mother's other-oriented perfectionism affects children' sleep problem insignificantly. Azevedo, et al.(2010) suggested that perfectionism as a personality trait affects cognitive arousal and psychological stress the risk factors of

sleep, and as a result has a negative effect on sleep. According to present results, the relation that mother's perfectionism affects children' sleep in a negative way was supported.

Second finding that mother's depression has a influence on children' sleep was consistent with preview researches. It can be explained that unskilled parenting behaviors or difficulty in dealing with safe and stable emotional relationship with child of depressive mother makes children feel anxiety and finally causes sleep problem.

Third, for verifying the mediating effect of mother's depression on the relation between mother's perfectionism and children' sleep problem, Baron and Kenny(1986)'s mediating effect analysis was used. It was the result that mother's depression plays a role of mediating effect on the relation between mother's perfectionism and children' sleep problem. Thus it can be known that mother's perfectionism does not affect children's sleep directly but through depression. In detail, self-oriented perfection had a perfect mediating effect on the relation between mother's perfectionism and children' sleep problem, and socially prescribed perfectionism played a partial mediating effect on the relation between mother's perfectionism and children' sleep problem. However, other-oriented perfectionism did not has significant correction with children' sleep problem, so the mediating effect of mother's depression did not exist.

In preview researches, the three dimensions of perfectionism have different corrections with psychopathy. Expecially, depression as a psychopathic result of perfectionism(Blatt, 1995) has been become known. Self-oriented perfectionism has been suggested relate to depression positively(Lee, & Rhyu, 2002) or have no relation with depression(한기연, 1993; Hewitt & Flett, 1991a, 1991b). Other-oriented perfectionism has been suggested have insignificant correction with depression(박선희, 2010). Socially prescribed perfectionism has haven a consistent positive correction with depression(최옥영, 1998; Enns & Cox, 1999; Flett, et al., 2003). In addition, Rehm(1977) suggested that cognitive features such as negative self-detection, excessive high standard, negative self-assessment, unintelligent self-reinforcement and excessive self-punishment are not just core concepts of perfectionism but also depression.

In present study, the result that self-oriented perfectionism or socially prescribed perfectionism had a positive correction with depression can be explained that high perfectionism mothers who desire oneself perfect or attain standard and expectations prescribed by significant others may confront negative emotions such as depression and anxiety when face to reality and may not be capable to give children stable emotional safety, and consequently lead to sleep problem. According to results of this study, mother's perfectionism can not be sure for causing children' sleep problem but may bring about depression first and then through depression affect children' sleep problem, so clinical intervention will be helpful for mothers when their perfectionism is causing depression and prevent children from getting sleep problem.

Several limitations and directions for future research are considered as below. Present study was a cross-sectional study, so it is necessary to find sleep problem pattern following children' developmental

stages through a longitudinal study. It is a weakness for using parents self-report measure to assess children' sleep problem, which may cause overestimating or underestimating problem. Present study did not investigate parents' sleep pattern which can have a great influent on children' sleep.

In summary, mother's perfectionism(self-oriented and socially prescribed) and depression can predict children' sleep problem, and when mother's perfectionism affects children's sleep, mother's depression have a mediating effect on it. Therefore, if prevent high perfectionism mothers from getting depression, children's sleep can be protected.

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국문요약

어머니의 완벽주의와 아동의 수면문제의 관계: 어머니의 우울의 매개효과를 중심으로

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본 연구는 어머니의 완벽주의가 아동의 수면에 영향을 미치는 데 어머니의 우울의 매개효과를 확인하려고 하였다. 총 136쌍의 어머니와 아동(남아=67; 여아=69)을 모집하여 설문지를 완료하도록 하였다. 어머니의 평균연령은 35.7(SD=3.618)세였고, 아동의 평균연령은 4.65세였다. 어머니의 완벽주의와 우울은 MPS와 BDI-II로 측정하였고, 아동의 수면문제는 Sleep-Waking Questionnaire로 측정하였다. 연구결과를 보면, 어머니의 총 완벽주의가 어머니의 우울과 아동의 수면문제와 유의한 상관을 보였고, 이러한 결과가 사회부와 완벽주의와 자기지향 완벽주의에서도 보였다. 그러나 타인지향 완벽주의가 어머니의 우울과 아동의 수면문제와 유의한 상관을 보이지 않았다. 매개분석 결과는 어머니의 총 완벽주의와 자기지향 완벽주의의 매개효과가 유의하게 나타난 것으로, 사회부와 완벽주의의 부분매개효과도 유의하게 나타났다. 이러한 결과를 통해 어머니의 완벽주의가 높을수록 아동의 수면에 부정적인 영향을 미치며 이러한 경로에 어머니의 우울을 통해 아동의 수면에 영향을 미친다는 것을 알 수 있다.

Key words: 어머니, 완벽주의, 우울, 아동의 수면문제

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