

Association between Authoritative Parenting Style and Caregiver Stimulation among Preschool-Aged Children in Indonesia

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Abstract

Background: Nurturing care within the home environment is fundamental to early childhood development. Parenting style may influence caregiver-provided stimulation, a key component of nurturing care. This study aimed to examine the association between authoritative parenting style and caregiver stimulation as forms of nurturing care among Indonesian preschool-age children.

Methods: A cross-sectional study was conducted in 2023 among 382 parents of children aged 3 to 6 years enrolled in kindergartens in Jakarta. Data were collected using self-administered questionnaires, including the Parenting Styles and Dimensions Questionnaire (PSDQ) and the Index of Child Care Environment (ICCE). Multivariable logistic regression analysis was performed to assess the association between authoritative parenting style and adequate caregiver stimulation, adjusting for parental working status, age, sex, and the number of children in the household.

Results: The mean age of the children was 60.4 months ($SD = 13.87$), and 50.5% were boys. The regression analysis showed that an authoritative parenting style was significantly associated with higher odds of sufficient caregiver stimulation (adjusted $OR = 2.61$, 95% $CI: 1.40-4.88$; $p < 0.005$).

Conclusions: Authoritative parenting style was significantly associated with caregiver stimulation among preschool-aged children in Jakarta. Parents are advised to adopt parenting approaches that support optimal early childhood development.

Keywords: Authoritative parenting styles, Nurturing care, Preschool children

INTRODUCTION

Early childhood is the golden phase of a child's growth, when the brain has the capacity to develop optimally across many domains, including cognitive skills and social, emotional, and physical development.¹ The family has a significant impact on early development, as children spend substantial time with their caregivers. Consequently, child development is associated with a desirable, nurturing rearing environment at home.² A nurturing and supportive rearing environment is essential to ensure optimal growth.³

The World Health Organization (WHO) and United Nations Children's Fund (UNICEF) Nurturing Care Framework (NCF) compiles evidence on the critical caregiving factors that promote early development: good health, sufficient nutrition, attentive care, opportunity for early education, and safety/security. The NCF specifically emphasizes caregiver support and parenting behaviors as proximal drivers of children's developmental outcomes, and also identifies priorities for health and social services. Child growth is facilitated by interaction with the surrounding environment. It is crucial to determine whether children have the opportunity to talk and engage with their family members. Stimulation within

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the home-rearing environment is important for child development. It includes playing with children, reading and shared mealtimes, and singing a song for the children.⁵ Moreover, it is well acknowledged that parental activities significantly influence the household environment and exert a long-term impact on child development.^{6,7}

Parents have varied ways of interacting with their kids, which affects children's development and reflects the fundamental relationship between parents and children.⁸ Parenting styles ought to prioritize the behavioral requirements that parents establish during the process of educating children.⁹ The authoritative parenting style has consistently been recognized as the most beneficial approach to promoting children's healthy development. Unlike other parenting styles, the authoritative parenting style underscores both nurturing parent-child connections and the implementation of constraints, control, and discipline in raising children.¹⁰ Children growing up with parents who employ an authoritative parenting approach tend to have greater self-discipline and independence, as well as a strong moral compass.¹¹ A prior study on preschool children revealed that authoritative parenting directly influences peer interactions, self-regulation, and emotional management skills.¹² Another previous empirical research consistently demonstrates that positive parenting practices, particularly those consistent with authoritative approaches, are predictive of enhanced emotional regulation, reduced externalizing behaviors, and greater school readiness in preschool-aged children.¹³⁻¹⁵ These relationships have been documented in various contexts, although effect sizes and cultural patterns differ.¹⁶ Indonesia, with its high diversity, implements cultural and religious parenting values and beliefs as a form of control.¹⁷ Another study found that, in an Indonesian population, the authoritative parenting approach was significantly correlated with children's emotional regulation.

On the contrary, authoritarian and permissive parenting styles have been associated with less favorable developmental outcomes, including poorer emotional regulation.¹⁸ Evidence from Indonesian context suggests that children raised with authoritative parenting exhibit higher levels of emotional regulation, empathy, and peer acceptance compared to those raised by permissive or authoritarian parents.¹⁹ The authoritative parenting style, which implements open communication, might relate to the home stimulation that the parents adopted for their children.

Despite recent Indonesian research documenting the impact of an authoritative parenting approach on children's religious attitudes and character formation²⁰, most studies did not assess whether authoritative parenting leads to responsive caregiving. Indonesian research has investigated parental feeding practices, maternal nutrition knowledge, and nurturing care.²¹ However, no integrated analysis exists that connects parenting style to the breadth of nurturing care implementation in home environments. Additionally, this relationship has not been explored using the Indonesian preschool sample. Therefore, this research aimed to assess the association between the authoritative parenting style and caregiver stimulation among preschool-aged children in Indonesia.

METHOD

Participants and Study Design

This cross-sectional study was conducted in the Pancoran District, South Jakarta, Indonesia, in 2023. The study population comprised parents of children between the ages of 3 and 6 years old. A total of 382 primary caregivers of children in kindergartens were selected using a purposive sampling. Inclusion criteria were parents aged at least 19 years old and having a child enrolled in kindergarten. Exclusion criteria included caregivers who lived separately from the child and those with medical conditions that limited their ability to interact with the child.

Measurements and Procedure

Parenting styles were assessed using the Parenting Styles and Dimensions Questionnaire (PSDQ), while caregiver stimulation as a component of nurturing care was measured using the Index of Child Care Environment (ICCE). The abbreviated version of the PSDQ, consisting of 32 items, was employed to evaluate parenting styles.²² These items were categorized into three parenting styles: authoritative (15 items), authoritarian (12 items), and permissive (5 items). The authoritative style comprised three sub-factors: connection, regulation, and autonomy granting. The authoritarian style included three sub-factors: physical coercion, verbal antagonism, and non-reasoning. The permissive style consisted of a single sub-factor, which was indulgent.

Responses were recorded on a 5-point Likert scale ranging from 1 (never) to 5 (constantly). For each participant, mean scores were calculated for authoritative, authoritarian, and permissive parenting styles. Each parenting style will yield a mean score across many sub-factors for participants. The highest mean score across the sub-factors for each parenting style indicated the caregiver's predominant approach in interactions with their child. The PSDQ has demonstrated validity and reliability for application in Indonesia.²³

Caregiver stimulation was assessed using the Index of Child Care Environment (ICCE), originally developed in Japan and subsequently translated into Indonesian. The instrument has demonstrated acceptable internal consistency (Cronbach's alpha of 0.778). The ICCE is a parent-reported measure designed to assess the degree of organization of the child's home environments in terms of individuals and physical resources, particularly their parents, as well as the quality of intimate interactions within that context.

The ICCE comprises four subdomains with 13 items. However, this study utilized five inquiries regarding caregiver stimulation, including How frequently do you engage in play with your child (interacting face to face)? How frequently do you read to your child? How frequently do you engage in singing with your child? How frequently does your spouse, partner, or other caregiver assist you with the child? Additionally, how frequently does your child eat with both parents? Each item was evaluated using a multiple-choice style with the following response options: 1) Rarely, 2) Once to thrice each month, 3) Once to twice per week, 4) Thrice to quadrice per week, 5) Nearly every day. The threshold was determined by the 25th percentile from the negative domain.

Statistical Analysis

Parental working status, age, sex, and the number of children in the household were included as covariates. The study used a self-reported questionnaire. Descriptive statistics and logistic regression analyses were performed using IBM SPSS 29.0.

RESULT

Most participating parents were aged 30–40 years, and the majority of respondents were mothers (95.8%). Educational attainment varied, with 10.7% having less than high school education, 57.1% completing high school, and 32.3% attaining education beyond high school. Most respondents were not working (69.4%) and had more than one child (81.2%). Among the children, 50.5% were male and 49.5% were female, with a mean age of 60.4 months. The characteristics of the participants are presented in Table 1.

Table 2 presents the descriptive statistics for parenting style scores among caregivers of preschool-aged children. The authoritative parenting style demonstrated the highest mean score (mean = 3.99; SD = 0.61). This result suggests that caregivers, on average, exhibited an inclination towards authoritative practices, defined by warmth, responsiveness, and explicit expectations. In contrast, the authoritarian parenting style had the lowest mean score (mean = 1.79; SD = 0.44), suggesting that harsh, controlling, and less responsive behaviors were relatively infrequent in the sample. The permissive parenting style showed a moderate mean score (mean = 2.50; SD = 0.57). In terms of score distribution, the authoritative style exhibited the widest range (min = 1.13; max = 5.00), while the authoritarian style showed a narrower range (min = 1.00; max = 3.25). The permissive style ranged from 1.00 to 4.20. Overall, these findings indicate a predominance of authoritative parenting among the study population.

Table 3 shows a statistically significant association between authoritative parenting style and nurturing care practices among preschool-aged children. Caregivers with an authoritative parenting style had higher odds of providing nurturing care compared to those with permissive or authoritarian styles (aOR = 2.61; 95% CI: 1.40–4.88; p = 0.003).

Table 1. Descriptive Statistics of the Participants (n = 382)

Variables	Frequency (n)	Percentage (%)
Age group (years)		
19–29	44	11.5
30–40	274	71.8
≥ 41	64	16.8
Relationship with children		
Mother	366	95.8
Father	10	2.6
Others	6	1.6
Educational attainment		
Less than high school	41	10.7
High school	218	57.1
More than high school	123	32.2
Working status		
Not working	265	69.4
Working	117	30.6
Number of children		
One child	72	18.8
More than one child	310	81.2
Children's sex		
Male	193	50.5
Female	189	49.5
Children's age in months (mean ± SD)		60.4 ± 13.8
Caregiver stimulation items		
Playing with children		
Low	4	1.0
High	378	99.0
Reading with children		
Low	169	44.2
High	213	55.8
Singing songs with children		
Low	74	19.4
High	308	80.6
Parents or other caregiver helping children		
Low	51	13.4
High	331	86.6
Shared mealtimes with children		
Low	14	3.7
High	368	96.3

Table 2. Descriptive Statistics (Mean, Standard Deviation, Minimum, and Maximum) of Parenting Style among Study Participants (n = 382)

	Mean	SD	Min.	Max.
Authoritative	3.99	0.61	1.13	5.00
Authoritarian	1.79	0.44	1.00	3.25
Permissive	2.50	0.57	1.00	4.20

Table 3. Association Between Authoritative Parenting Style and Nurturing Care Practice among Preschool Children

Variable	Adjusted OR	95% CI	P-value
Authoritative parenting style	2.61	1.40–4.88	0.003

Reference group: Other parenting styles (Permissive and Authoritarian)

DISCUSSION

Participants' Characteristics and Parenting Style

The study found that the majority of parents adopted an authoritative parenting style, followed by authoritarian and permissive styles, as shown in Table 2. The authoritative parenting style has consistently been recognized as a developmentally advantageous approach to promoting children's healthy development. Authoritative parenting involves parents setting clear and realistic objectives for their children, closely monitoring their behavior, actively engaging in communication with them, and providing appropriate responses to their needs.²⁴ Studies across various cultural settings consistently indicate that authoritative parenting is associated with favorable child outcomes, including improved social competence, academic performance, and emotional well-being.^{25,26}

In contrast, permissive parenting is characterized by high responsiveness but low levels of control, in which parents tend to allow children considerable autonomy, without investigating the underlying reasons or justifications. Moreover, authoritarian parenting is marked by high control and low responsiveness, often involving strict rules, limited child participation in decision-making, and a strong emphasis on obedience. They also actively support engaging and regulating their children's behavior without hesitation, prioritizing the child's best interest. They employ both verbal and non-verbal (physical) methods to penalize the child's undesired behavior, while failing to recognize positive behavior.²⁷

Nurturing Care Practices

Based on the logistic regression analysis, parents with an authoritative parenting style had 2.61 times the odds of providing caregiver stimulation compared to those with other parenting styles (aOR = 2.61; 95% CI: 1.40–4.88). This finding suggests a significant association between authoritative parenting and nurturing care practices. One possible explanation is that authoritative parenting style emphasizes responsiveness, open communication, and active engagement, which are key components of caregiver stimulation in daily interactions. This finding is consistent with previous research showing that parenting interventions focusing on "responsive caregiving" have effect sizes up to three times those in high-income contexts, highlighting that responsive parenting is a critical differentiator for child development in these regions.²⁸ The caregiver stimulation component, characterized by parents' active involvement in play, reading, and singing, aligns with Baumrind's authoritative parenting style, emphasizing warmth and involvement.

Additionally, recent evidence found that positive parenting practices are independent predictors of cognitive stimulation and children's skills.^{29,30} Furthermore, studies on Indonesian families suggest that authoritative parenting is particularly effective in fostering social and personal development through

frequent and meaningful parent-child interactions, creating a feedback loop where open communication facilitates more frequent and higher-quality stimuli.³¹ Thus, the observed association may reflect a broader pattern whereby authoritative parenting provides a supporting foundation for adequate caregiver stimulation.

An odds ratio of 2.61 indicates a significant association between an authoritative parenting style and the provision of nurturing care, especially within the Indonesian preschool setting. This finding emphasizes the potential link between parenting style and the quality of stimulation within the home environment. Children raised in authoritative households may experience greater responsiveness, consistency, and developmental support compared to those in permissive or authoritarian households. Caregiver stimulation in this study involved parental participation in daily activities, including playing, reading, singing, and shared mealtimes. These practices align with the core characteristics of authoritative parenting as a balance of warmth and control that fosters optimal child outcomes.^{18,19} Additionally, children with authoritative parenting styles may be more likely to interact with their parents in a friendly, open family atmosphere, which may also increase the number of human stimuli they receive from their parents. The findings are further supported by a prior study indicating that an authoritative parenting style is favorably correlated with academic performance among Chinese students.³⁶ Research in Indonesia demonstrates that authoritative parenting methods correlate with children's independence, social-emotional adjustment, and readiness for school.^{19,37} Additionally, this authoritative style emphasized the promotion of maturity and autonomy in children, while relying less on physical punishment and instead emphasizing communication-based disciplinary approaches.

This study is among the first to examine the association between parenting styles and the child-rearing environment using the ICCE in an Indonesian context, where the validated measures of the home environment remain limited. These findings highlight the necessity for parenting interventions and caregiver support programs that foster authoritative parenting behaviors. In Indonesia, where access to parenting education and early childhood services differs by region, integrating these supports into existing maternal and child health platforms could improve the dissemination of nurturing care practices. Importantly, efforts to promote authoritative parenting should be culturally sensitive, especially in communities where social harmony and respect for elders are highly valued. Authoritative parenting should be framed as a modern interpretation of *Asah, Asih, Asuh* (teaching, loving, fostering), thereby positioning responsiveness as a positive parenting method to build stronger, more respectful family bonds.³⁸

However, this study has several methodological limitations. First, the use of purposive sampling in selecting 20 kindergartens in Pancoran District may introduce selection bias, despite being justified by the study objectives. Although this approach was intended to capture socioeconomic diversity and facilitate school-family research partnerships, it may limit the generalizability of the findings to all kindergartens in Pancoran District and other settings in Indonesia. Purposive sampling was employed as the primary sampling strategy due to its ability to deliberately select information-rich cases relevant to the phenomenon of interest.³⁹ In this study, its use was justified for three reasons: (1) to ensure representation of the socioeconomic diversity within Pancoran District; (2) to facilitate the development of trust-based relationships between school and families, which was essential for obtaining informed consent in the assessment of sensitive parenting practices; and (3) to capture the heterogeneity of early childhood education models in the district, including national standard, Islamic-based, and Montessori approaches.

Second, the generalizability of the findings to paternal and non-resident caregivers is restricted by the predominance of maternal respondents in this study. Consequently, the findings primarily reflect mothers' perspectives on home-based nurturing care and their parenting style. This gender distribution, although consistent with epidemiological patterns in early childhood research, in which mothers typically serve as primary caregivers and engage more frequently with early childhood education settings, limits the applicability of the findings to paternal or non-resident male caregiver parenting practices.³⁹ The findings, therefore, primarily reflect maternal perspectives on an authoritative parenting style and on the implementation of nurturing care practices in home environments, rather than capturing the potentially distinct roles and contributions of fathers or other alternative caregivers. Future studies should recruit father-child dyads to examine whether associations between authoritative parenting patterns and nurturing care practices differ by caregiver gender, as well as other primary caregivers (e.g.

grandmothers, domestic workers), to capture the full spectrum of early childhood care arrangements in diverse Indonesian household structures.

Third, the use of self-report questionnaires to evaluate both parenting styles and nurturing care practices may have introduced bias into the reported data. Finally, causal inference cannot be established due to the cross-sectional design of the study. Longitudinal studies are therefore required to determine whether authoritative parenting practices lead to improved implementation of nurturing care over time.

CONCLUSION

The findings of this study indicate a significant association between authoritative parenting style and higher odds of caregiver-provided stimulation among preschool children in Indonesia. Parents are advised to adapt their parenting style to optimize early child development actively. However, given the cross-sectional nature of the study, causal inferences cannot be established. Therefore, longitudinal studies are required to confirm the directionality of this relationship before translating these findings into policy recommendations.

ETHICS APPROVAL

Ethical approval for this study was obtained from the ethics committee of University of Tsukuba (approval number: 1999).

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COMPETING INTEREST

All authors declare that there are no conflicts of interest.

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This study received no external funding.

UNDERLYING DATA

Data sharing is not applicable to this article as no new data were created or analyzed in this study.

DECLARATION OF ARTIFICIAL INTELLIGENCE USE

We confirm that there is no artificial intelligence (AI) used at any stage of the study, including data collection, analysis, visualization, etc. All work in this study was conducted manually by the authors without the assistance of AI-based tools or systems

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