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Delineating among Parenting Confidence, Parenting Self-Efficacy and Competence

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Introduction

Becoming a parent is one of the most demanding and intense social roles individuals can experience in their life.¹ Parent beliefs about how well they parent is a necessary component to understanding how their beliefs, actual parenting behaviors, and parent-child interactions are aligned. How confident a parent considers themselves is receiving increased attention by researchers because of the impact these parenting beliefs can have on the health and development of children. Functioning as a parent incorporates all that occurs with individual motives, affects, values, abilities, skills, and beliefs related to child rearing and the behaviors of caring for one's child. An individual's belief in their ability to be successful in the role of parenting (i.e., confidence) is an essential component of the quality and sustainability of parenting behaviors.²

Parenting has three essential dimensions: 1) providing care that protects children from harm that includes boundaries for the safety of the child and others, 2) parent-child interactions that support developmental, emotional and physical health, and 3) enhancing a child's potential by helping parents learn parenting strategies that facilitate effective growth and development.³ Parenting research often explores the process of parenting by observing how parents engage with their children in a specific context, daily interactions and/or caregiving tasks. By assessing the quality and dynamics of these interactions, evidence about which parenting behaviors and interactions create an optimal environment for child health and development can be determined.^{2,3}

Other parenting research focuses on the relationships between intrapersonal factors, constructs that occur within a person (e.g., thoughts, emotions, attitudes, values), and the quality of parenting behaviors. Parenting confidence, parenting self-efficacy and perceived competence are three related concepts shown to influence how parents engage in parenting behaviors. While, these three



concepts have been consistently used in parenting research over the last decade, the interchangeable use of terms, inconsistent conceptual definitions, multiple measures, and limited use of theoretical frameworks has resulted in ambiguity among concepts and limited ability to synthesize findings across studies.

Our inability to designate clear conceptual boundaries between each concept led us to ask several important questions. Is parenting confidence the same thing as parenting self-efficacy? How are these two terms distinguishable from parenting competence? If parenting confidence and parenting self-efficacy are two distinct concepts, how can these concepts be operationalized and measured as separate concepts? How does the use of the term competence enhance or diminish our understanding of the other concepts? Accordingly, a concept delineation is necessary when concepts appear merged, as if they shared the same experience.⁴ Offering conceptual boundaries to these concepts will help to better synthesize evidence related to our understanding of how intrapersonal factors influence parenting, and promotes the health and development of infants and young children. Therefore, the aim of this paper was to delineate the concepts of parenting confidence, parenting self-efficacy and perceived competence in the context of parents with young children (ages 0 – 3 years old).

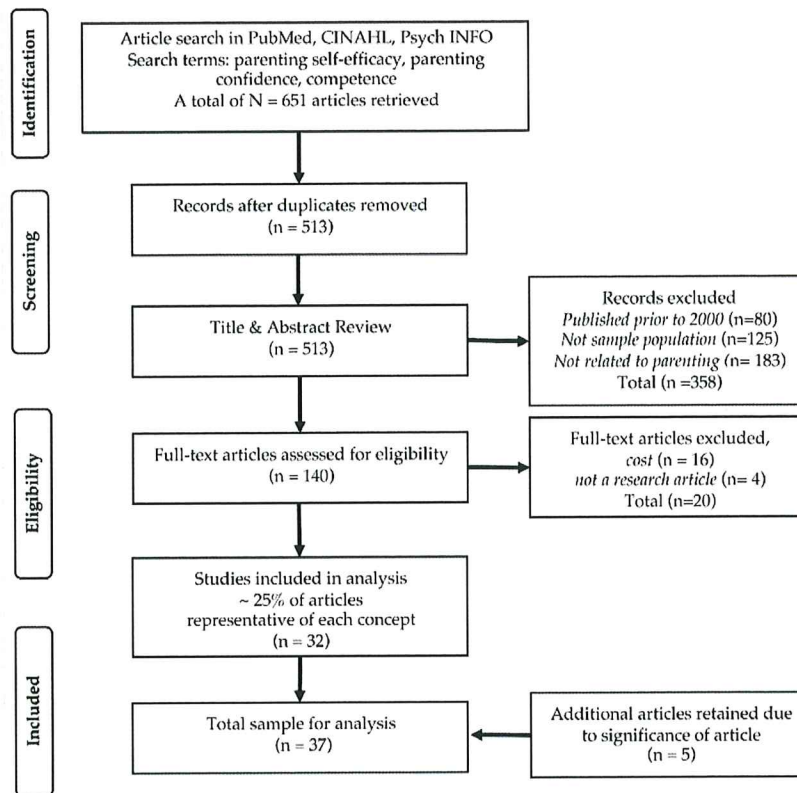
Methods

Morse's approach to concept delineation was used to disentangle the overlap between terms and offer clear conceptual definitions by examining the use of the concepts in a review of the literature.⁴ This method recommends an interdisciplinary exploration conducted in three phases: 1) collect data on the concepts based on a review of a literature; 2) describe each concept's antecedents, attributes, and consequences separately; and 3) discuss relationships between concepts and contrast potential differences. The utility of this method is to identify conceptual boundaries between similar or merged concepts.⁴

Search Strategy

The terms 'parenting self-efficacy' or 'parenting confidence' or 'competence' were identified as the appropriate search terms as they are the most common terms used to describe the phenomena of self-efficacy beliefs in the domain of parenting. An interdisciplinary search was conducted in PubMed, CINAHL, Psych INFO for published, full text articles in English ([Figure 1](#)). The initial search retrieved 651 articles with 138 duplicates. Title and abstract review was completed based on the following criteria: 1) identifiable conceptual definition or use of theory to describe the concepts of parenting self-efficacy, parenting confidence, or perceived competence, 2) sample population included parents of infants or toddlers ranging from zero to three years old, and 3) published after year 2000. Reviews, commentaries, clinical practice guidelines, study protocols or editorials were excluded from analysis as not pertaining to the sample population. The search was refined to articles published after year 2000 based on availability of two integrative reviews on parenting self-efficacy^{1,5} and a concept analysis on perceived parental efficacy that reviewed articles from 2000 and earlier.⁶ Limiting the studies to parents of infants and toddlers allowed for more coherent data analysis and interpretation of findings because parenting concerns are specific to the age of the child. The final sample included 37 articles, which was approximately 25% of full-text arti-

cles meeting inclusion criteria (n=120).⁴ An additional five articles published prior to 2000 were kept based on their seminal contribution to the development of these concepts (see [Table 1](#) for summary of articles).



[Figure 1](#)

TABLE 1

SUMMARY OF ARTICLES

Author (Year)	Sample	Conceptual Definition	Theoretical Framework	Level of Measurement <i>*italics indicates measure consistent with self-efficacy theory</i>	Variable Type
GENERAL SELF-EFFICACY (n=2)					
Benzies et al (2013)¹⁹	154 Mothers of children with disabilities (1 – 18 years)	“Self-efficacy is the belief in one’s own capability to adequately cope with stressful life demands or challenges” p. 35	Stress Theory and Self-Efficacy	<u>Global Self-Efficacy</u> General Self-Efficacy Scale	Predictor – IV
Raikes & Thompson (2005)¹⁷	65 Mothers of infants & toddlers (2 – 36 months)	“Extent to which parents felt control over their lives and belief in their ability to change their lives” p. 183	No theory referenced	<u>Global Self-Efficacy</u> Pearlin Mastery Scale	Mediator/Moderator
PARENTING SELF-EFFICACY (n=21)					
Anzman-Frasca et al (2013)²¹	110 Mother of infants (0 – 12 months)	“Parents’ beliefs that they can adequately care for their child and can handle situations involving their child” p.494 “Parental self-efficacy refers to	Self-Efficacy Theory	<u>Domain-General</u> Parenting Sense of Competence Scale (PSOC)	Predictor – IV

Level of Measurement

Providing an accurate assessment of how these concepts may differ requires a thorough understanding of how these concepts are measured. Parenting self-efficacy, parenting confidence, and competence are multi-dimensional in nature; thus, these concepts have different levels of measurement. Predominately, three levels of measurement exist for measuring self-efficacy beliefs: 1) *global* (beliefs about being capable or confident to complete any given task); 2) *domain-general* (beliefs about being capable or confident to complete parenting tasks or engage in the behaviors associated with parenting); and 3) *domain-specific* (parent's belief in their ability to parent at a specific level or in certain conditions). Assessing general self-efficacy is accomplished through evaluation of global beliefs not necessarily linked to parenting tasks or children of certain ages.⁷ Domain-general is concerned about the broad perceptions of parenting ability, and not focused on specific parenting tasks or domain of parent (i.e. feeding behaviors, academic performance).⁵ In contrast, domain-specific (also referred to as task-specific) instruments assess level of confidence in specific tasks of parenting often associated with particular ages, issues or concerns (e.g., toddlers, infants, diseases, eating, academic performance).¹

There is some support that domain-specific measures have better predictive validity and are more sensitive to change than domain-general or global self-efficacy measures.⁸ However, before 1997, no studies included both levels of measurement in a single study to verify this assertion. Only a few studies have combined levels of measurement to assess the multi-dimensionality of the concept or to provide more conclusive evidence as to which level of measurement has the best predictive validity and sensitivity to change.⁹⁻¹³ Of the studies that included more than one level of measurement, each had a different combination of levels and measures (e.g., domain-general & domain specific; global and domain-general; global and domain-specific) and highly varied samples; thus, the findings remain inconclusive about which level of measurement is best. It would be useful to assess which level of measurement may be most appropriate in varying contexts or parenting behaviors. Regardless how parenting self-efficacy and parenting confidence are measured, these concepts are identified as an important intrapersonal resource associated with better parent psychological health,⁵ quality of parenting behavior,¹⁹ and overall infant growth and developmental outcomes.¹⁴ Further work is required to determine which level of measurement may be most appropriate to determine the strength of the relationships among specific outcomes. [Table 2](#) provides a general definition of each concept, how the concept was used in the study, and measures to operationalize each concept.

TABLE 2

OVERVIEW OF CONCEPTS

	Parenting Self-Efficacy	Parenting Confidence	Competence
DEFINITION	“Parent’s belief or judgment about their ability to be successful in the parental role.” (Jones, 2005)	“Parental feelings of competence in the parenting role” (Crncec, 2010)	Perceived: “reflects her maternal confidence, which is a basic determinant of her capacity as a mother and affects her response to her infant.” (Mercer, 1994) Objective: “Quality of parental caregiving and interaction” (Miles et al, 2011).
USE OF CONCEPT	Predictor variable (n=9) Mediator/Moderator (n=2) Outcome variable (n=10)	Predictor variable (n=6) Mediator/Moderator (n=1) Outcome variable (n=2)	Outcome variable (n=5)
MEASURES	Parenting Sense of Competence (n=6) Maternal Efficacy Scale (n=4) Toddler Care Questionnaire (n=1) Parental Cognitions and Conduct Toward the Infant Scale (n=2) Self-Efficacy for Parenting Tasks Index (n=2) Parenting Confidence Scale (n=1)	Toddler Care Questionnaire (n=2) Maternal Confidence Scale (n=4) Researcher developed scales (n=3)	Parenting Sense of Competence (n=3) Maternal Competence Subscale – (PSI) (n=1) Composite score (n=1)

Parenting Self-Efficacy

Parenting self-efficacy (PSE) was the term used most often (n=21), with one study that used the term ‘infant care self-efficacy.’¹⁵ All but two studies^{16,17} provided conceptual definitions based on self-efficacy theory. Specific definitions ranged from quoting a frequently used definition of PSE, “expectations parents hold about their ability to parent successfully”⁹ to paraphrased definitions using words like the belief or judgment or confidence in one’s ability to perform effectively or

competently in the parenting role. Two studies^{16,18} assessed global self-efficacy beliefs rather than domain general or specific parenting beliefs because they believed it would provide a more comprehensive understanding of parenting confidence when a child has a health condition or disability, whereas domain general or specific measures are tailored to specific issues (e.g., academic performance, obesity, autism, or diabetes management or populations (e.g., adolescents, early childhood, or first time parents). The measure used most often (n=6) to assess PSE was the Parenting Sense of Competence Scale,^{9,12,13,17,19,20} a domain-general parenting scale that asks parents to rate *perceived* sense of competence in the parenting role. Some researchers consider this scale to be consistent with self-efficacy theory because the revised version, has an Efficacy subscale where the authors noted links to self-efficacy theory, although this was not explicit by the authors of the instrument.⁷ The second most commonly used scale (n=4) was the Maternal Efficacy Questionnaire (MEQ),^{12,21-23} a domain-specific scale that was created to measure how good a parent feels about their ability to perform tasks associated with caring for their infant. A total of 12 different scales^{10,11,14,24-29} were used to measure PSE, all of which were created using self-efficacy theory, except for the Parental Self-Agency Scale (for a complete review of scales see⁷).

In the 7 studies that included fathers, the measures were modified to include neutral language by changing the wording of the questions to be inclusive of both roles. However, none of the studies set out to validate a measure on a sample of fathers. A single qualitative study of fathers of preterm infants³⁰ was the only article to exclusively study fathers. The qualitative data confirmed that for fathers to feel confident, they required personal reinforcement (mastery experiences), role modeling (vicarious experiences), belief in their capacity to parent (self-perception of ability) and responsiveness from their infant. These findings are consistent with the mechanism for the development of self-efficacy as proposed by Bandura. Psychology journals focused on infant mental health and infant development were more likely to publish articles on this topic (n = 13) than nursing journals (n=6). Sociology, public health and one interdisciplinary journal were also represented.

Parenting Confidence

Parenting confidence (n=9) was most often defined as a parent's appraisal of his or her capability to effectively engage in behaviors associated with parenting. Those studies that used the term 'confidence' were less likely to provide a theoretical framework, mention self-efficacy theory, or provide a clear conceptual definition,³¹⁻³⁹ Confidence was measured using three scales: The Maternal Confidence Questionnaire (MCQ),³⁹ Maternal Self-Confidence Scale,³⁶ and the Toddler Care Questionnaire (TCQ).³³ The MCQ used most often (n=4) by the researcher who developed the scale. The articles using the Maternal Confidence Questionnaire (MCQ) focused on measuring a mother's perception of her parenting ability. However, the MCQ was created using Mercer's maternal role attainment theory, laying the groundwork for studying maternal confidence.⁴⁰ The TCQ was developed from the seminal work of Teti and Gelfand²¹ who were the first to explore maternal self-efficacy as a mediator of parenting behavior and parent psychological wellbeing. They defined maternal confidence as a mother's belief in her ability to effectively manage and carry out tasks related to parenting. The two studies^{33,37} using the TCQ mentioned the measure's link to self-efficacy theory; however, their operational definition and concept of interest was maternal confidence. In contrast, the TCQ measure was used in a study⁴¹ where the concept of interest was

PSE, further demonstrating the interchangeable use of measures and overlap of concepts. Only one study of parental confidence³² included fathers. Interestingly, no group differences between mothers and fathers was found related to level of confidence and psychological distress. Linking PC to a specific theory has made it difficult to distinguish perceptions of confidence in the parenting role as distinct from parental self-efficacy.

Competence

Perceived competence (n=5) was measured as an outcome variable in all the studies in the sample. Competence was defined as a mothers' perception of her ability manage or achieve competence in mothering, that is her perceived ability to feel competent. All but one study, used Mercer's Maternal Role Attainment Theory as the framework to guide the study. In Maternal Role Attainment, competence is only one component in the maternal developmental process to achieve competence in the mothering role as she integrates mothering behaviors into her life.⁴² The other two components are maternal identity and presence. Of the five studies exploring maternal competence, four used the Maternal Role Attainment Theory to guide the conceptual framework of competence. Even though this theory differs from self-efficacy theory, maternal competence was still measured by the Parenting Sense of Competence Scale (n=3)⁴²⁻⁴⁴, a self-report parenting measure widely accepted as a measure of domain-general parenting self-efficacy (i.e. *perceived* competence).⁷ The other study⁴⁵ measuring perceived competence used the Maternal Competence Subscale of the Parenting Stress Index, which has no theoretical ties but still used Maternal Role Attainment theory as the guiding study framework. The only exception to the measurement of perceived competence was a study exploring attributes of maternal role attainment.⁴⁶ In this study, competence was defined as an objective measure by creating a composite score of maternal interview data, behavioral observations, and scores from the HOME inventory subscales. Aside from this study, perceived competence was defined as a parent's sense of feeling capable in the parenting role, which overlaps with parental self-efficacy. Hence, for conceptual clarity and consistently in the literature, the use of the term competence should be reserved to describe an objective assessment of parenting quality attributed by someone other than the parent (i.e., not parental self-report) as has been mentioned by other authors.⁶

Findings

Findings were analyzed by organizing articles by their conceptual definition of parenting self-efficacy, parenting confidence, and perceived competence (see [Table 2](#)). Reviewing the literature in this manner allowed for identification of relationships between concepts. This also allowed for a better examination of how the concepts were studied (e.g., independent/predictor, mediator/moderator, or dependent/outcome variable) in each study sample.

Definition of Concepts Parenting self-efficacy (PSE) is a multidimensional concept defined as parental beliefs or confidence in their ability to successfully carry out parenting tasks and is a distinct, domain-specific concept captured under self-efficacy theory.^{5,8} Parenting confidence (PC) is defined as the belief or judgment a parent holds about their ability to be successful in tasks associated with parenting.^{7,41} Competence has been conceptually defined as either *perceived* competence - a parent's perception of his or her ability perform tasks associated with caring for their

child⁶ or as an *objective* appraisal by someone other than the parent to assess parenting quality.⁴⁶ The use of 'parenting sense of competence' or 'perceived competence' appears to be an early phrasing of the concept but has since been replaced by either PSE or PC.

Antecedents and attributes The antecedents and attributes of PSE and PC are known based on the extensive research of self-efficacy beliefs.^{1,8,47} Based on this literature, identified attributes of PSE, which now includes PC, is knowledge, self-perceived ability, and strength of these beliefs (or perceptions) (Table 3). Confidence itself is the main attribute of self-efficacy. Being confident and being efficacious describe a person who perceive themselves with the ability to engage in certain behaviors. These beliefs are essential to a person's ability to start and subsequently master a behavior, such as those required of parents to foster the health and development of their child.

TABLE 3

CONCEPT ANTECEDENTS, ATTRIBUTES, CONSEQUENCES

	Parenting Self-Efficacy	Parenting Confidence	Competence
ANTECEDENTS	<ul style="list-style-type: none"> • Mastery Experiences (knowledge) • Vicarious Experiences • Emotional State • Social/Verbal Feedback 	<ul style="list-style-type: none"> • Mastery Experiences (knowledge) • Vicarious Experiences • Emotional State • Social/Verbal Feedback 	<ul style="list-style-type: none"> • Identity • Presence • Perceived competence
ATTRIBUTES	<ul style="list-style-type: none"> • Knowledge • Self-perception of abilities • Strength of belief 	<ul style="list-style-type: none"> • Knowledge • Self-perception of abilities • Strength of belief 	<ul style="list-style-type: none"> • Ability to perform and quality of parenting behaviors (responsive to cues, talking, playing, affect) • Observed Interaction
CONSEQUENCES	<ul style="list-style-type: none"> • Effective parenting practices; higher quality of parenting behavior • Resiliency, empowerment, positive parent - child interactions • Associated with better illness-related caregiving quality • Better psychological adjustment • Positive infant/child developmental outcomes and health status because of parenting quality 		

Because of the cyclical nature between the antecedents and attributes of PSE and PC, determining the exact nature of how confidence develops is difficult. For some parents, having previous experiences (knowledge) of parenting behaviors such as infant care, soothing, or feeding may enhance confidence, but these parenting behaviors may be experienced differently for a parent who now

has an infant who requires hospitalization after birth; thus, having knowledge (an antecedent) does not translate to confidence immediately. Other parents may not have previous parenting experiences but through social and verbal feedback (antecedent: vicarious experience) and their own appraisal of confidence in other areas of life, they may have a greater sense of confidence not related to mastery experiences. If we think about a mother who has four previous children who then delivers a fifth baby with a congenital defect requiring intensive care immediately after birth, she may report a sense of confidence in general care of her infant but not feel confident in caring for that infant in the hospital setting until she has some mastery or vicarious experiences. While she may feel confident as a mother because she has four other children the experience of having a child in the hospital is new and thus her confidence may be different in this context. Conversely, first time parents may report similar levels of confidence even though they have no previous experience with infant care. If they were given opportunities to engage in parenting behaviors and received positive reinforcement and feel generally confident in other aspects of their life, they may develop a greater sense of confidence from knowing they can do it and having been given opportunities from nurses to engage in parenting behaviors.

One of the most important attributes of PSE and PC is the strength of this belief. Strength refers to the degree of certainty or uncertainty an individual has about a behavior.⁸ The greater the certainty or uncertainty of a belief influences how long a parent might persist in performing parenting behaviors.¹ Developing confidence in the parenting role is a cyclical relationship between mastery of effective parenting behaviors, increased feelings of confidence (efficacy beliefs), and a child's developmental successes.⁴⁸ Increasing a sense of confidence is strengthened by effective parenting (mastery experiences) and the developmental success or sustained health of a child is likely to increase a parent's confidence by interpreting their parenting as favorable. A strong sense of efficacy influences the quality of parenting practices while efficacy beliefs can also reinforce parenting behaviors as a child responds positively to parent-child interactions. The overlap in PSE and PC antecedents and attributes describe concepts that require both the perception of ability (a sense of confidence to complete the task) and knowledge to engaging in behavior one desires to be successful (mastery experiences).

Perceived competence, along with parenting identity and presence, are necessary determinates to acquire *objective* competence.⁴² In other words, *perceived competence* is another way to describe PSE or PC, which is an antecedent to competence (the actual ability to engage in effective parenting behaviors). A parent must have some level of baseline confidence in order to engage in parenting tasks. Confidence is likely to increase overtime as mastery experiences and social/verbal feedback become more frequent; but, to even engage in parenting behavior, one must feel as though they have some ability, even if minimal.

PSE and PC not only includes the degree of confidence a parent has about particular behaviors, but also includes having adequate knowledge about these behaviors.⁴⁹ The knowledge is both an antecedent and attribute. Parents who have prior knowledge of a given behavior may have greater confidence. The reverse is also possible, those who feel less efficacious or lack necessary knowledge do not persist in the behaviors of parenting as readily and are more likely to give up sooner.⁸ Successful parenting requires both knowledge of behaviors and the belief in their capacity that is not overpowered by self-doubt. Parents may often engage in behaviors that they have no prior

knowledge about (e.g. changing a diaper of a premature infant, consoling a fussy baby, attending to cues), but through modeling, social interaction, and personal achievement, they gain a greater sense of confidence in that behavior.

Implicit in most measures of PSE and PC is the assumption of prior knowledge of the task, but knowledge is not often directly measured. Of note, only two studies measured parental knowledge and confidence (self-efficacy) concurrently.^{23,49} One reason for this may be that measures assessing parents' feelings or ability to engage certain behavior inherently assume parents know what behavior is being asked of them. In creating a confidence measure, it may be an assumption that to measure confidence, this would not be otherwise possible if the individual had no knowledge of the necessary parenting behaviors. Thus, the two are inherently linked and not easily measured separately.

Consequences Based on the available evidence, the three concepts have the same consequences. The major consequence of being an efficacious or confident parent is engaging in appropriate parenting tasks that fosters an environment in which their child can grow and develop with success.⁵ Consequences of these beliefs are also associated with better quality of life,¹⁹ improved psychological well-being³² and greater parenting quality.²³ The consequent of being a confident parent can improve parent psychological well-being, promotes positive interactions with the infant, influences health and development of their child, and buffers against challenging situations, isolation, and maladjustment.

Use of Concept Understanding antecedents, attributes and consequences is related to how the concepts are used (including measurement and other methodological issues) in research studies. How these concepts have developed comes from the evidence of what may predict better confidence, the ability of confidence to influence parenting quality or parent and infant wellbeing, and how confidence may change over time.

Sixteen studies placed PSE or PC as an independent variable to predict infant development (e.g., temperament and behavior), infant health (e.g., short stature, weight and length), perceptions of infant temperament and behavior family functioning, stress, psychological wellbeing and/or parenting behavior (i.e., competence). Seventeen studies focused on identifying how predictors like social support, income, age, ethnicity, fatigue, family functioning, and depression were associated with PSE, PC, or competence (e.g., outcome variable). Four studies tested the mediation or moderation effects of parent beliefs on infant behavior, parent behavior (competence), and stress and one was a qualitative study with fathers. In summary, upon close examination of the conceptual definitions and instruments used to measure these concepts, little distinguishes the measures as being conceptually different. Confidence is the most identifiable and common word in the English language to help individuals relate to the concept we are trying to understand.⁵⁰ Feeling confident is something tangible and identifiable for parents and is the most useful way to help parents identify the phenomena on interest to researchers.

Delineation between concepts PSE and PC both describe parent perceptions of their ability to engage in the behaviors expected in their role as a parent, which includes those studies of competence that have used the conceptual definition that describes a parent's *perceived* sense of compe-

tence using either a domain-general or specific measure. The overlap among the attributes and antecedents for PSE and PC confirm why there has been significant overlap in the use of these concepts ([Table 3](#)).

Based on the analysis of the PSE and PC articles, there is significant overlap among the antecedents, attributes, and consequences for parenting self-efficacy and parenting confidence ([Table 3](#)). There is no distinct attribute for either PSE or PC; thus, it is not possible to delineate substantial differences between these two concepts. Confidence in parenting is a parent's belief in their ability to parent successfully,^{5,7} which assumes they also have the knowledge of specific parenting behaviors to foster their child's developmental successes. Lack of distinguishing differences may be partly because the most common measure (e.g., Parenting Sense of Competence Scale) was used in studies using each of the three terms, PC, PSE, and perceived competence. Based on this analysis, attributes for both PSE and PC include 1) parent appraisal of their parenting ability, and 2) knowledge of caregiving tasks and behaviors needed at each stage of their child's development. The following analysis revealed researchers primary aim was to identify perceived capacity about being successful in tasks associated with parenting. In contrast, Holditch-Davis et al⁴⁶ focused on competence as a specific component of a larger construct known as maternal role attainment; thus, their primary concept of interest was maternal role attainment and not parenting confidence or parental self-efficacy. Self-efficacy is the perception of confidence relevant to activities in context or situations.

The difference between PSE, PC and competence lies in *who* is providing the perception. Most often those who use the term competence are in fact measuring a parent's sense of competence (i.e., perceived) and are not measuring competence objectively. Actual competence is an objective measure of the quality of parenting behavior by someone *other* than the parent about his or her parenting ability.⁶ Competence implies assessment of parenting quality (e.g. the completion of behaviors). Four studies included an objective measure of competence as an outcome variable by creating a composite score of parenting behaviors from direct observations of free play and feedings to assess parenting quality.^{9,21,23,46} Holditch-Davis et al⁴⁶ demonstrated that objective competence was positively related to improved caregiving quality (e.g. responsiveness and participation). Greater competence was directly related to better typical caregiving and health-care related caregiving in high risk infants;⁴⁶ yet, this study did not include a measure of confidence or perceived competence. Other researchers have yet to find significant links between self-efficacy and parenting quality (objective competence).^{9,23} However, this could be because of the differences in how the composite score was created as the measures used differed in each study. Hence, for conceptual clarity and consistently in the literature, the term competence should be used as an objective measure of parenting quality done by someone other than the parent (i.e. not parental self-report or perceived competence) as has been mentioned by other authors. This is an important distinction for clarity and evaluation of research findings.

Discussion

Across the literature, parental self-efficacy, parent confidence and parent competence were each used to describe parents' sense of confidence, or appraisal of their ability to be a successful parent, including a judgment about their ability to perform the parenting role as it varies by situa-