

Article

Parenting Styles in Emerging Adulthood

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Abstract: Parents/caregivers remain important in the lives of emerging adults in the modern era and understanding the ways in which parents of emerging adults balance responsiveness, demandingness, and autonomy support can help inform evidence-based recommendations around developmentally appropriate protective parenting. The present study identified four “parenting styles” in emerging adulthood in a sample of 680 4-year university and community college students ($M = 19.0$, ranging from 18 to 25; 70.7% female, 22.6% male) who reported on their primary parent/caregiver’s parenting behaviors. These parenting styles largely overlapped with traditional conceptualizations of parenting styles (two authoritarian profiles, a potentially indulgent profile, and a profile characterized by the average levels of all parenting behaviors measured, which may reflect the modern authoritative parenting style of emerging adults). No hypothesized overparenting profile emerged. The potentially indulgent profile saw the lowest levels of depression, mood, and anxiety symptoms, whereas the potentially indulgent and authoritative profiles saw the most positive wellbeing outcomes. The findings underscore the way in which responsiveness and autonomy support in emerging adulthood appear developmentally appropriate and adaptive, and how helicopter parenting does not appear to be as important as other aspects of parent–emerging adult relationships.

Keywords: parenting styles; emerging adulthood; internalizing; wellbeing



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1. Introduction

Parents/caregivers (henceforth, “parents”) are among the most important determinants of adolescent mental health [1], but until recently we knew little about what protective parenting looks like in emerging adulthood. Emerging adulthood (ages 18–25) is a critical period in development [2], marked by a high risk of internalizing problems like anxiety and depression [3]. Mental health symptoms in emerging adults of the current generation Z are nearly twice the levels seen in adolescents [4] and are staggeringly high: during the 2021–2022 academic year, 44% of U.S. community college and 4-year university students reported symptoms of depression and 37% reported symptoms of anxiety [5]. College students also tend to endorse low levels of positive mental health, with only 36% endorsing experiences consistent with psychological flourishing [6].

The quality of adjustment during emerging adulthood has lifelong implications; the onset of internalizing symptoms during emerging adulthood heightens the risk of persistent negative mental and behavioral outcomes across adulthood [7]. Poor emerging adult adjustment can interfere with education and employment outcomes, which are linked to physical health outcomes across the life course [8,9]. Conversely, emerging adulthood can also be a developmental time period during which youth construct key building blocks for psychological flourishing, including high quality relationships, positive emotions, and resilience in the face of obstacles [10–12]. Given the long-term implications, it is critical to identify the ways in which we might leverage the protective power of parents to both minimize mental health risks and maximize positive wellbeing during the transition from adolescence into emerging adulthood.

A compelling literature is beginning to show the ways in which parental importance persists into emerging adulthood [13–16], especially regarding the ways that parents and their emerging adult children must navigate developmental tensions between ongoing support and connection alongside increased autonomy and reduced parental control [16]. The present study seeks to contribute to this understanding by examining constellations of emerging adults' perceptions of their parent's demandingness, responsiveness, and autonomy supportive parenting behaviors ("parenting styles" in emerging adulthood), with an emphasis on elucidating the roles of potentially autonomy supportive or inhibiting parental behaviors in the context of the broader parenting relationship, during a developmental period when autonomy development is crucial. Further, we examine the ways in which these parenting styles may come to bear on the mental health and positive development of emerging adults. Findings will have implications for evidence-based recommendations to parents of emerging adults around how to facilitate their child's positive psychological development and help their emerging adult child avoid poor mental health during this important phase of life.

1.1. Utility of Understanding Combinations of Parenting Behaviors in Emerging Adulthood

The ways in which parenting behaviors cluster together into "parenting styles" have been studied for the better part of a century [17,18], yielding important insights about how the co-occurrence of parental responsiveness (including parenting behaviors characterized by involvement, warmth, sensitivity, and support) and demandingness (including parenting behaviors like structure, limit setting, monitoring, and control) can facilitate healthy child and adolescent development [19]. Most often, parenting styles are conceptualized as capturing four quadrants formed by orthogonal dimensions of responsiveness and demandingness, yielding authoritative (high responsiveness, moderate-to-high demandingness), authoritarian (low responsiveness, high demandingness), indulgent or permissive (high responsiveness, low demandingness), and uninvolved (low responsiveness, low demandingness) parenting styles [17,18]. A fairly robust literature suggests that authoritative parenting (which balances supportive/responsive parenting with developmentally appropriate consistent rule setting and discipline/demandingness) facilitates positive child and adolescent adjustment across internalizing and externalizing outcomes [20,21], but much less is known about how parenting styles during emerging adulthood might shape emerging adult developmental outcomes.

Emerging adulthood is an important period of transition between adolescence and adulthood, during which parent–child relationships must evolve to accommodate the emerging adult's normative need for increased independence within the context of the parent–emerging adult relationship [22]. Research on parenting during emerging adulthood underscores the importance of understanding the same dimensions that were important in childhood and adolescence (i.e., responsiveness and demandingness, though the ideal level and behavioral manifestations of these indicators may look different as the offspring ages and leaves the home environment [13,14,23–25]). Indeed, the case for parental responsiveness as facilitative of positive emerging adult outcomes is strong [14–16,23]. During emerging adulthood, demandingness is often conceptualized to include parental rules and attempts to control behaviors such as emerging adult activities, finances, and work- or school-related decisions (behavioral control); efforts to shape behavior can also include tactics like parental guilt induction and withdrawal of affection (termed psychological control). The associations between behavioral control and developmental outcomes have been mixed. On one hand, moderate amounts of behavioral control may be necessary to scaffold emerging adults as they develop life skills, leading to more feelings of competence and better emerging adult adjustment [26–31], but high behavioral control can be associated with negative wellbeing when it is perceived as intrusive and over-controlling [32–34]. Conversely, psychological control has been quite consistently linked to poor psychological adjustment [35–37].

It is imperative that a parenting styles approach to emerging adulthood should expand upon the responsiveness/demandingness conceptualization in order to consider developmentally salient autonomy supportive parenting [36,38–40]. It is generally accepted, in line with self-determination theory [41–43], that autonomy supportive parenting (which supports offspring’s capacity for independent, autonomous behavior) facilitates positive emerging adult developmental outcomes [44,45]. A related but more controversial construct is that of “helicopter parenting” (so termed because parents “hover” over their child to help them avoid potential pitfalls; also known as overparenting), which is characterized by excessive and developmentally inappropriate involvement in a child’s affairs. Many have argued, and some research supports, the precept that helicopter parenting stymies healthy emerging adult attainment of autonomy, competence, and mental health [44,46–49]. However, there is also compelling evidence that helicopter parenting is not always associated with maladaptive outcomes [31,40,44,50,51].

Scholars have tended to conceptualize helicopter parenting and autonomy supportive parenting as distinct but correlated constructs [44–46], and indeed a recent latent class analysis revealed different clusters of families in which helicopter parenting sometimes co-occurred with low autonomy support and sometimes co-occurred with high autonomy support [52]. Interestingly, this study suggests that those families characterized by the combination of both high autonomy supportive parenting and high helicopter parenting saw the highest levels of life satisfaction [52]. It is possible that the mixed nature of past (largely variable-centered) findings on helicopter parenting in emerging adulthood have arisen from a linear examination of parenting behaviors in isolation, rather than a holistic examination of responsive, demanding, and autonomy supportive/inhibiting parental behaviors in combination; this holistic perspective is facilitated by the person-centered approaches reviewed below.

1.2. Existing Evidence of Parenting Styles in Emerging Adulthood

A parenting styles approach allows us to capture and describe multiple dimensions of parenting simultaneously and to understand how these constellations of parenting behaviors may be uniquely associated with emerging adult mental health and positive wellbeing. Person-centered analytic methods (e.g., mixture modeling) are well suited to the task of identifying parenting styles, as they can identify heterogeneous sub-groups of individuals who share common attitudes or practices and allow for a synthesis across multiple dimensions of parenting behaviors. Importantly, a person-centered approach allows us to tailor our study of parenting to the developmental phase of emerging adulthood. This approach can account for heterogeneity within dimensions, such that indicators of responsiveness, demandingness, or autonomy support may not always cluster together (e.g., a parent could be highly involved but not particularly warm, a parent could employ behavioral but not psychological control, a parent can demonstrate both frequent helicopter parenting and frequent autonomy support). These methods also allow for the exploration of non-linear associations between combinations of parenting and emerging adult adjustment outcomes. For example, we can test if moderate levels (as opposed to high or low levels) of combinations of different parenting behaviors may best facilitate healthy emerging adult adjustment [32,53,54]. In the current study we utilize this nuanced approach to parenting styles, as it allows for (a) the modeling of heterogeneity across multiple dimensions of parenting behaviors simultaneously and (b) the exploration of potential additive, interactive, and non-linear associations with emerging adult adjustment.

A small but informative literature has used person-centered approaches to examine styles and typologies of parenting across dimensions of responsiveness, demandingness, and autonomy support in emerging adulthood. Two studies did so with samples of university students in the US and Spain [36,39], revealing clusters that overlapped somewhat with traditional conceptualizations of indulgent/permissive, uninvolved, and authoritative (balanced) parenting, alongside at least some evidence [36] of overly involved parenting styles (with both high control and responsiveness indicators). These results highlight the

potential psychosocial benefits of parenting styles that are characterized by high responsiveness and the psychosocial risks associated with parenting that is characterized by high control and punishment alongside low responsiveness.

Most relevant to the present research is a recent study which examined profiles of warmth, psychological control, and helicopter parenting in a sample of 458 19-year-old emerging adults (74% attending college or technical school) [38]. Latent profile analysis revealed a profile characterized by below-average levels of warmth, psychological control, and helicopter parenting (somewhat analogous to traditional conceptualizations of uninvolved parenting); a profile characterized by above-average control and helicopter parenting and below-average warmth (somewhat analogous to traditional conceptualizations of authoritarian parenting); and a profile characterized by above-average warmth and below-average control, with average helicopter parenting (perhaps somewhat analogous to traditional conceptualizations of indulgent/permissive parenting). For fathers, there were two additional profiles: an “average” profile (characterized by levels near the mean on all three parenting dimensions), and a profile characterized by very high levels of control, low warmth, and average helicopter parenting. These results indicate that the most distinguishing feature of most profiles was control, and that most profiles evidenced relatively average (which were in absolute terms quite low) levels of “helicopter parenting” (no profile evidenced the hypothesized overparenting/high helicopter style). This study suggests that the uninvolved profile was associated with poorer emerging adult adjustment (school engagement, depression, delinquency) and that profiles characterized by high warmth tended to be associated with better outcomes (even if accompanied by helicopter parenting). Taken together, these person-centered examinations of parenting styles during emerging adulthood suggest that there is benefit to be derived from the simultaneous examination of multiple dimensions of parenting in a way that might uncover unique constellations of distinct relationship features. They also provide preliminary evidence that, thus far, autonomy supportive parenting and helicopter parenting have tended not to create a unitary construct, and instead tend to cluster with responsiveness and demandingness, respectively.

Our study extends this existing literature to identify parenting styles and their mental health and wellbeing correlates in emerging adulthood in a sample of Generation Z emerging adult students on four-year university and community college campuses in the wake of the COVID-19 pandemic. Studying these processes in a current sample of Generation Z (defined as being born in the late 1900s and 2000s [55]) emerging adults is important, as the landscape of emerging adult–parent interactions is rapidly shifting in the digital age. For instance, our own work [56] suggests that over a third of the emerging adults in the current sample have a parent who is currently surveilling their movements and whereabouts using digital location tracking via smartphone, and that those who are currently being tracked perceive their parents as less supportive of their autonomy and engaging in more helicopter parenting relative to those whose parents who are not digitally tracking their location. It is imperative that we understand parenting styles and their correlates in the current cohort of emerging adults for whom parental involvement has always been facilitated by ubiquitous digital connection. Further, our study is the first to examine how positive emerging adult development outcomes (i.e., happiness, engagement, social connection, perseverance, optimism) may be impacted by parenting styles that include the role of helicopter parenting.

1.3. Present Study

The present study seeks to understand how emerging adult perceptions of parenting behaviors (behavioral control, psychological control, helicopter parenting, warmth, involvement, and autonomy support) co-occur and relate to emerging adult mental health and positive developmental outcomes in a sample of 680 emerging adults attending four-year university and community college in the southeast of the USA in 2021. Our first study goal is to identify unique profiles of parenting in emerging adulthood and to describe how these

relate to socio-demographics. Given the data-driven nature of profile analysis, we cannot be certain how many profiles will emerge, but we focus here on potential profiles that we expect might emerge based on prior literature during adolescence and limited studies during emerging adulthood [17,18,36,38,39]. First, we expected that we may uncover the four “traditional” parenting styles (authoritative, authoritarian, indulgent/permissive, and uninvolved [17,18]) based on co-occurrence of responsiveness (as measured by involvement and warmth) and demandingness (as measured by behavioral and psychological control). We also hypothesized that we might uncover an “overparenting” profile, characterized by high helicopter parenting, low perceived parental support for autonomy, moderate-to-high demandingness, and high responsiveness (especially involvement). However, we also acknowledge a competing hypothesis (consistent with existing research on parenting styles in emerging adulthood [38]) that perceived parental support for autonomy and helicopter parenting might co-occur more with parental demandingness (helicopter parenting) and responsiveness (autonomy support) than with one another in an overparenting style. As past person-centered analyses have suggested that parenting profiles in emerging adulthood may differ by parent [36,38] and emerging adult [39] gender, socioeconomic status [39], and college attendance [38], we explored profile membership across these sociodemographic groups and age. Consistent with limited past research, we hypothesized that more responsive and (potentially) overparenting profiles would see overrepresentations of female, higher SES, younger, and college-attending emerging adults.

Our second goal was to test the extent to which parenting styles in emerging adulthood are associated with emerging adult mental health and positive wellbeing. Specifically, we expected that emerging adults in those profiles distinguished by moderate to high levels of responsiveness (the hypothesized authoritative and indulgent profiles), and autonomy support would evidence lower levels of mental health symptoms and higher levels of positive wellbeing. We expected authoritarian profiles to be associated with poor adjustment, given that low responsiveness may not meet emerging adult relatedness needs, and that the combination of demandingness without autonomy support may interfere with emerging adult competence and autonomy needs, leading to poor emerging adult adjustment. Finally, we expected that the hypothesized overparenting profile would relate to lower positive adjustment/wellbeing, but not necessarily present substantial risks for mental health.

2. Materials and Methods

2.1. Sample and Procedures

Data were collected through an online Qualtrics survey in the Fall 2021 semester. The survey participants were drawn from the psychology subject pools of a four-year university and a two-year community college located in southeastern USA. Students who took part in the study received course credits as compensation. Out of the initial 829 students who accessed the survey and agreed to participate, 31 were outside the age range of emerging adulthood (18–25), 92 showed concerns regarding data quality (e.g., completing less than 20% of the survey or spending less than 15 min to complete it), and 26 reported being parents themselves (with potentially distinct parent–emerging adult dynamics), and were thus excluded. Consequently, the final analytical sample consisted of 680 emerging adults (79.6% attended a four-year university, 20.4% attended a local community college). The study’s procedures, protocols, and measures received approval from the Institutional Review Board of the university.

Within the final sample of emerging adults ($N = 680$), ages ranged from 18 to 25, with a mean age of 19.0 ($SD = 1.44$). The majority of these emerging adults (70.7%) identified as female (including transgender and cisgender females) and 22.6% identified as male (including transgender and cisgender males). Additionally, about 4% identified as gender nonbinary or wrote in other gender identity options (e.g., genderqueer or gender-fluid). The sample was racially/ethnically diverse: 34.3% of the emerging adults identified as White, 33.1% as Black, 14.7% as Hispanic or Latinx (of any race), 9.3% as Asian or Asian

American, 2.9% as American Indian or Alaskan Native, 1.8% as Middle Eastern or North African, less than 1% as Hawaiian or Pacific Islander, less than 1% selected other options, and less than 1% declined to answer. The education level of the parents varied, with 46.2% of the emerging adults reporting that neither of their parents graduated from college, indicating that they were first-generation college students. Specifically, 7.5% of the sample reported that their highest educated parent had completed less than high school, 17.9% reported high school graduation, and 20.3% reported some college or technical school. On the other hand, 53.8% of the emerging adults reported that their most educated parent had graduated from college, including 33.7% who reported college graduation, 8.1% who reported some graduate school, and 11.9% who reported completing graduate school.

Throughout the survey, emerging adults were instructed to identify one primary parent/caregiver and to respond to questions related to parenting and the parent–child relationship in reference to that primary parent/caregiver (77.8% referenced a mother figure).

2.2. Measures

2.2.1. Profile Indicators

Emerging adults reported on their perceptions of their primary caregiver/parent's parenting behaviors, capturing dimensions of demandingness, responsiveness, and autonomy support.

Participants completed the 21-item Perceptions of Parents Scale (POPS; [57]) with three subscales reflecting (a) parent/caregiver involvement, (b) parent/caregiver autonomy support, and (c) parent/caregiver warmth. We utilized the college student version of the scale and, although the original scale contained items for both mothers and fathers, we adapted the scale such that items referenced their self-identified primary parent/caregiver. Participants reported on the extent to which the items were representative of their parent/caregiver on a 7-point Likert scale (1 = not true at all to 7 = very true). A confirmatory factor analysis (CFA) was completed, and the 3-correlated factor measurement model had acceptable fit to the data (χ^2 (130) = 819.902, $p < 0.001$, RMSEA = 0.087 [upper-bound 90% CI = 0.093], SRMR = 0.054, CFI = 0.895).

Participants completed a 14-item measure [31] with the following 3 subscales: (a) helicopter parenting, (b) behavioral control, and (c) psychological control. The measure was adapted such that “him/her” pronouns were replaced with “they/them” pronouns to be inclusive of diverse parent/caregiver gender identities. Participants reported on the extent to which the items were similar to the behavior of their parent/caregiver on a 5-point Likert scale (1 = not at all like them to 5 = a lot like them). A CFA of this measure, in which the three subscales were correlated, had good fit to the data (χ^2 (74) = 364.367, $p < 0.001$, RMSEA = 0.075 [upper-bound 90% CI = 0.083], SRMR = 0.063, CFI = 0.920).

2.2.2. Demographics

Participant age ($M = 19.0$, $SD = 1.44$, ranging from 18 to 25) was modeled continuously. Participants' gender reflects self-reported gender identity, regardless of sex assigned at birth, and was recoded into three categories: male (22.6%; including cis- and transgender men), female (70.7%, including cis- and transgender women; reference) and other (4.1%, including non-binary, gender queer, gender fluid). Participants' school-affiliation (four-year university (79.6%, reference) or two-year community college (20.4%)) was modeled dichotomously.

Participants selected one parent/caregiver on whom to complete parenting-related measures; parent/caregiver identity was coded categorically (i.e., mothers (77.8%, reference group), fathers (13.4%), and other (8.8%, including older siblings, grandparents, and other relative roles). Nonbiological and adoptive mothers ($n = 14$) and fathers ($n = 3$) were coded as mothers and fathers, respectively. Parent/caregiver education was modeled continuously as a proxy for socioeconomic status, representing the highest educational attainment of any parent/caregiver reported by the participant (1 = less than high school to 6 = completed graduate/medical/professional school).

2.2.3. Developmental Outcomes

Depressive symptomatology over the past two weeks was assessed utilizing the 13-item Short Mood and Feelings Questionnaire (SMFQ [58]). Participants reported the extent to which the items reflected their feelings/actions on a 3-point Likert scale (1 = not true to 3 = true). Consistent with recommendations, CFA found that a single factor model of depression had acceptable fit to the data (χ^2 (65) = 566.507, $p < 0.001$, RMSEA = 0.107 [upper-bound 90% CI = 0.115], SRMR = 0.047, CFI = 0.915), and this was then used to compute factor scores for use in distal outcome models.

Participant's mood and anxiety symptomatology during the past week were assessed using the Mini Mood and Anxiety Symptom Questionnaire (Mini-MASQ [59]). The 26-item Mini-MASQ is composed of the following three subscales: anhedonia, anxious arousal, and general distress. Participants indicated the extent to which they experienced each item (e.g., "felt really happy" and "felt withdrawn from other people") on a 5-point Likert scale (1 = not at all to 5 = extremely). We modeled these subscales as correlated latent variables and initial confirmatory analyses suggested regions of significant misfit (χ^2 (273) = 1789.504, $p < 0.001$, RMSEA = 0.092 [upper-bound 90% CI = 0.096], SRMR = 0.125, CFI = 0.798). Analysis of the factor loadings, residual variances, and modification indices indicated this misfit was largely related to the reverse worded items. In a subsequent CFA we correlated the residuals of the reverse worded items and dropped two items from the anhedonia subscale ("felt like I had a lot of energy" and "I felt lively, up") because they failed to load significantly (λ = 0.131, -0.087) and had high residual variances. The final CFA model demonstrated adequate fit to the data (χ^2 (243) = 1026.017, $p < 0.001$, RMSEA = 0.070 [upper-bound 90% CI = 0.075], SRMR = 0.068, CFI = 0.891) and was used to compute factor scores for use in distal outcome models.

Participants also completed the 20-item EPOCH Measure of Adolescent Wellbeing [60], which assesses wellbeing across five positive psychological constructs derived from the PERMA model of psychological flourishing [61], as adapted to youth: engagement (the capacity to become absorbed in what one is doing, involvement and interest in life activities and tasks), perseverance (the ability to overcome obstacles in pursuit of goals), optimism (hopefulness about the future), connectedness (satisfying relationships with others), and happiness (positive mood). Participants responded to items ("Indicate how much each statement describes you") on a 5-point Likert scale (1 = almost never to 5 = almost always). In line with recommendations, we modeled all five constructs as correlated latent variables in a single model. A CFA showed that this model had good fit to the data (χ^2 (160) = 644.109, $p < 0.001$, RMSEA = 0.070 [upper-bound 90% CI = 0.076], SRMR = 0.042, CFI = 0.919) and mirrored the validation studies of the measure, completed initially with adolescents, among an emerging adult population [60]. We computed factor scores for use in distal outcome models.

2.3. Analytic Plan

Data cleaning and initial analyses were completed in STATA/SE 17.0. All confirmatory factor analyses (CFA) and latent profile analyses (LPA) were completed in Mplus 8.6 [62]. All analyses utilized the robust maximum likelihood (MLR) estimator and missing data were handled using full information maximum likelihood (FIML; [63]). To avoid local maxima or local solutions, we used 10,000 random sets of start values, 500 iterations, and retained 250 solutions for final-stage optimizations [64].

LPA is a form of mixture modeling in which profile indicators are continuously modeled and variances are assumed to be equal across profiles. In addition to confirming the structure and fit of the latent variables utilized in the current study (fit indices detailed above), CFA were used to create factor scores for all six variables (parental involvement, autonomy support, warmth, helicopter parenting, behavioral control, and psychological control) used as indicators in the LPA. While factor scores do not account for error as well as latent variables, they reflect participants' optimally weighted scores and are thus superior to unit-weighted approaches (e.g., sum/mean scoring) [65].

LPA models were estimated in a stepwise fashion, with increasing numbers of profiles until model nonconvergence [64]. Both statistical and substantive criteria were used to identify the optimal enumeration of profiles. Statistical criteria included: (a) the Akaike information criterion (AIC), (b) the Bayesian information criterion (BIC), the sample-size adjusted BIC (ABIC), (d) the adjusted Lo, Mendell and Rubin's (aLMR), and (e) the parametric bootstrapped (BLRT) likelihood ratio tests [66]. Lower AIC, BIC, and ABIC values suggest a better fit to the data and were plotted to identify the elbow of the plot (i.e., the number of profiles after which the plotted fit indices flatten out). Likelihood ratio tests were used to compare a model with k profiles to a model with $k - 1$ profiles to determine if the k profile had a significantly better fit (i.e., $p \leq 0.05$). We also examined entropy, which is a gauge of how distinct profiles are from one another; higher entropy values are better, with 0.6 and 0.8 being the cutoffs for moderate and high classification accuracy, respectively [64]. In addition, we also considered the substantive meaning, interpretability, and size of the profiles when deciding how many profiles were optimal.

Following optimal profile enumeration, we used Vermunt's three-step procedure to explore the probability of profile membership based upon demographic covariates [67]. These multinomial logistic regressions were estimated for each demographic covariate (i.e., school affiliation, age, gender, parent/caregiver identity, and parent/caregiver educational attainment) in separate models. This automated three-step approach avoids altering the size or structure of the profiles when auxiliary variables are included in the model [67].

Finally, we estimated regression auxiliary models using the BCH approach [67], which allowed us to compare the mean values of indicators of depression, mood and anxiety, and wellbeing across profiles, with tests of the significance of these differences.

3. Results

3.1. Profile Identification

We estimated the models beginning with the one-profile solution and reached the six-profile solution before reaching nonconvergence (see Table 1). We accepted the four-profile solution because (a) the a-LMR LRT indicated that the four-profile solution was a better fit than the three-profile solution and that the five-profile solution was not significantly better, (b) the plot of fit indices flattened around four profiles, (c) the four profiles made substantive and theoretical sense, and (d) the smallest profile (9.8%) was large enough for subsequent analyses. In addition, the entropy of the four-profile solution (0.947) suggested adequate profile distinction and the posterior probabilities of each profile were high (ranging from 0.949 to 0.979).

Table 1. Profile enumeration.

Model	LL	Parameters	AIC	BIC	ABIC	Entropy	a-LMR	BLRT	Smallest Class %
1 Profile	−5580.78	12	11,185.55	11,239.82	11,201.72	−	−	−	−
2 Profiles	−4437.54	19	8913.08	8999.00	8938.68	0.948	<0.001	<0.001	33
3 Profiles	−3992.00	26	8036.00	8153.58	8071.03	0.950	0.08	<0.001	13
4 Profiles	−3605.12	33	7276.23	7425.46	7320.68	0.947	0.05	<0.001	10
5 Profiles	−3326.14	40	6732.28	6913.16	6786.16	0.955	0.18	<0.001	5
6 Profiles	−3161.19	47	6416.38	6628.92	6479.69	0.952	0.04	<0.001	5

Note. LL: log likelihood; AIC: Akaike information criterion; BIC: Bayesian information criterion; ABIC: sample-size adjusted BIC; aLMR: adjusted Lo, Mendell and Rubin's likelihood ratio test; BLRT: parametric bootstrapped likelihood ratio test.

The four-profile solution is depicted in Figure 1. The first profile ($N = 151$, 22.2%, “moderately authoritarian”) was characterized by moderately high levels of parental demandingness (behavioral and psychological control) and to a lesser extent, helicopter parenting, and moderately low indicators of parental responsiveness (involvement and warmth) and autonomy support. Profile two was the smallest ($N = 67$, 9.8%, “very authoritarian”) and was characterized by slightly below-average scores on helicopter parenting,

high scores on behavioral and psychological control, and very low scores on responsiveness and autonomy support. A plurality of participants belonged to the third profile ($N = 274$, 40.3%, “potentially indulgent”) and described their parent/caregiver as average in helicopter parenting, below-average in behavioral and psychological control, and high in responsiveness and autonomy support. The final profile ($N = 188$, 27.7%, “authoritative”) was characterized by near-average scores on all parenting style indicators.

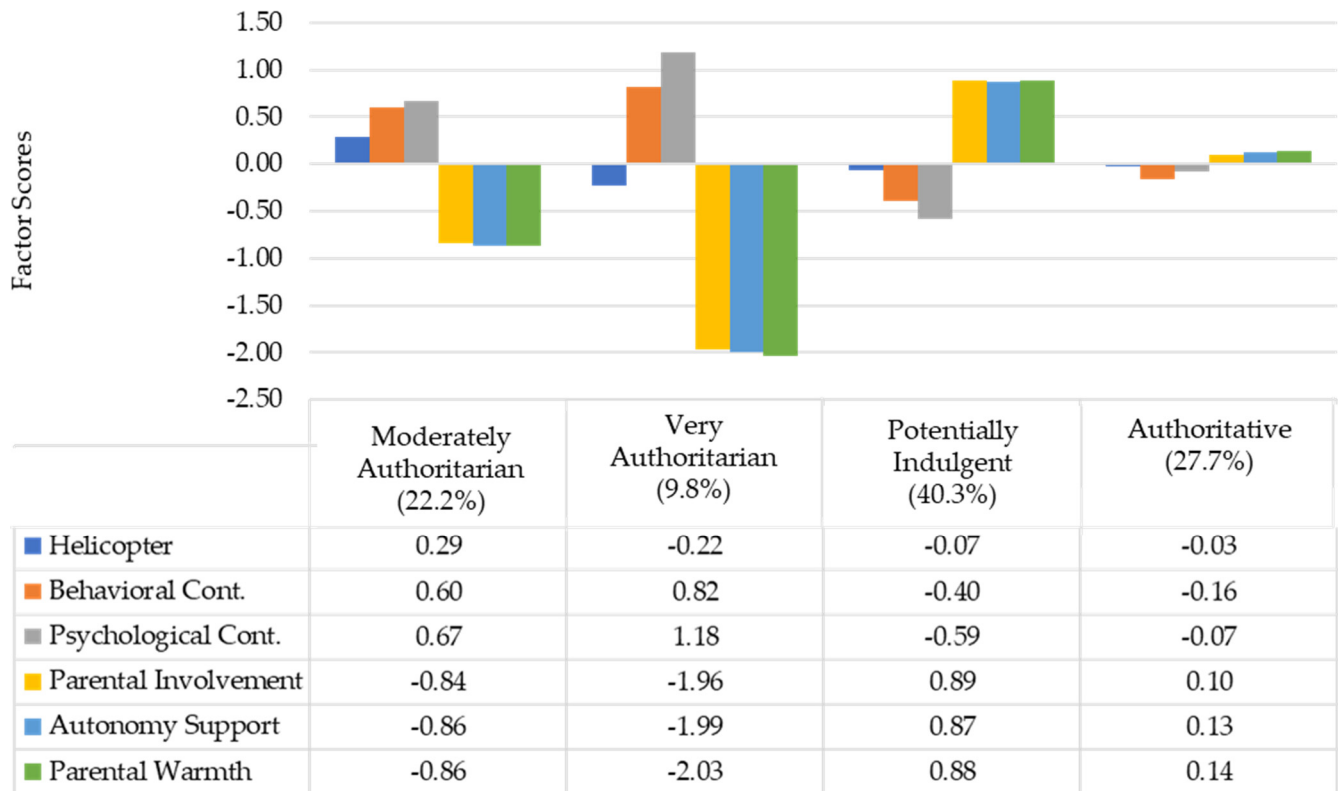


Figure 1. Means of Indicators for 4 Profile Model.

3.2. Profile Differences or Similarity across Different Demographic Groups

Using Vermunt’s three-step procedure [67], we estimated multinomial logistic regression models to determine if demographic covariates were significantly related to profile membership (see Table 2). Of these five models, only two (gender, parent education) indicated significant relations between demographic covariates and profile membership. Male participants were 2.00 (OR, CI: 1.17–3.44) and 2.02 (OR, CI: 1.38–3.51) times more likely than females to be members of the authoritative profile than the moderately authoritarian or potentially indulgent profiles, respectively. Participants who identified as a gender other than male or female were 6.76 (OR, CI: 1.78–25.75) times more likely to be members of the very authoritarian profile than the moderately authoritarian profile, 0.10 (OR, CI: 0.03–0.34) times as likely to be members of authoritative profile than the moderately authoritarian profile, and 4.47 (OR, CI: 1.38–14.48) times more likely to be in the authoritative profile than in the potentially indulgent profile. Of note, as the number of participants identifying as another gender was small ($N = 29$), confidence intervals associated with this sub-group are very large and should be interpreted with caution. Parent/caregiver educational attainment was also a significant demographic covariate; participants who reported that their parents had a higher education (i.e., one unit higher on a six-point scale) were 1.19 (OR; CI: 1.03–1.38) more likely to be assigned membership in the potentially indulgent profile than in the moderately authoritarian profile.

Table 2. Multinomial logistic regression models predicting profile membership.

	Reference: Moderately Authoritarian						Reference: Very Authoritarian				Ref: Potentially Indulgent	
	Very Authoritarian		Potentially Indulgent		Authoritative		Potentially Indulgent		Authoritative		Authoritative	
	OR	CI	OR	CI	OR	CI	OR	CI	OR	CI	OR	CI
1. 4-year Uni.	1.39	0.69–2.83	0.95	9.57–1.59	1.18	0.68–2.06	0.68	0.36–1.29	0.85	0.44–1.65	1.25	0.76–2.03
2. Age	1.00	0.80–1.24	1.02	0.88–1.18	1.07	0.92–1.25	1.02	0.84–1.25	1.07	0.88–1.31	1.05	0.92–1.20
3. Gender (ref. Female)												
Male	1.40	0.67–2.94	0.91	0.54–1.54	2.00 *	1.17–3.44	0.65	0.33–1.29	1.43	0.72–2.85	2.20 **	1.38–3.51
Non-binary	6.76 *	1.78–25.75	0.68	0.16–2.92	3.06	0.85–11.03	0.10 **	0.03–0.34	0.45	0.17–1.18	4.47 *	1.38–14.48
4. Caregiver (ref. Mother)												
Father	0.90	0.37–2.15	0.71	0.39–1.29	1.03	0.55–1.95	0.79	0.35–1.81	1.15	0.50–2.68	1.50	0.81–2.64
Other CG	1.50	0.52–4.26	1.07	0.49–2.34	1.57	0.69–3.57	0.71	0.28–1.79	1.05	0.41–2.69	1.47	0.74–2.92
5. CG Educ.	1.15	0.90–1.47	1.19 *	1.03–1.38	1.17	0.99–1.39	1.04	0.83–1.30	1.02	0.80–1.30	0.98	0.85–1.14

Note. * $p < 0.05$; ** $p < 0.01$. Uni = University. CG = Caregiver. Educ = Education.

3.3. Profile Membership and Developmental Outcomes

Using the BCH approach [67], we estimated three models to test whether developmental outcomes (i.e., depression, mood and anxiety, wellbeing,) were significantly related to profile membership. As the pattern of results was similar in sensitivity analyses which modeled the developmental outcomes as latent variables and in models which controlled for associations with demographic covariates (four-year university vs. community college, age, gender, caregiver education, and caregiver role) using the manual BCH procedure [67], we present here the more parsimonious models using factor scores and the automatic BCH procedure [67], which yields easily interpreted means for each developmental outcome on a factor score metric (such that values below/above zero indicate scores below/above the sample mean (see Table 3)).

Table 3. Distal outcomes.

	Moderately Authoritarian Profile	Very Authoritarian Profile	Potentially Indulgent Profile	Authoritative Profile
Developmental Outcome	Mean	Mean	Mean	Mean
Depression	0.502 ^a	0.421 ^a	−0.365 ^b	−0.010 ^c
Mood and Anxiety				
Anxious Arousal	0.160 ^a	0.188 ^a	−0.119 ^b	−0.019 ^c
Anhedonia	0.359 ^a	0.256 ^{ab}	−0.276 ^c	0.030 ^b
Distress	0.251 ^a	0.296 ^a	−0.187 ^b	−0.028 ^c
Wellbeing				
Engagement	−0.287 ^a	−0.074 ^{ab}	0.090 ^b	0.123 ^b
Perseverance	−0.341 ^a	−0.257 ^a	0.205 ^b	0.063 ^b
Optimism	−0.404 ^a	−0.298 ^a	0.245 ^b	0.069 ^b
Connectedness	−0.412 ^a	−0.359 ^a	0.260 ^b	0.074 ^c
Happiness	−0.442 ^a	−0.344 ^a	0.256 ^b	0.099 ^b

Note. Columns report means on a factor score metric (such that values below/above zero are below/above the sample mean) for each profile. Shared superscripts across rows indicate values that do not differ between profiles for each outcome, whereas distinct superscripts across rows indicate values that are significantly different ($p \leq 0.05$) between profiles.

In terms of depression, findings indicate that participants in the potentially indulgent profile had significantly lower levels of depressive symptoms than those in the moderately authoritarian profile ($p < 0.001$), the very authoritarian profile ($p < 0.001$), and the authoritative profile ($p < 0.001$). Participants in the authoritative profile had lower levels of depressive symptomatology than those in the moderately authoritarian ($p < 0.001$) and

very authoritarian ($p = 0.002$) profiles. No significant differences were found between the two authoritarian profiles.

Emerging adults in the potentially indulgent profile had lower levels of anxious arousal than those in the moderately authoritarian ($p < 0.001$), very authoritarian ($p < 0.001$), and authoritative ($p = 0.01$) profiles. Participants in the authoritative profile also had significantly lower levels of anxious arousal than those in the moderately ($p < 0.001$) and very authoritarian ($p = 0.001$) profiles. Again, no significant differences were found between the two authoritarian profiles. In terms of anhedonia, participants in the potentially indulgent profile had significantly lower levels than those assigned membership in the other three profiles (all were significant at $p < 0.001$). Participants in the authoritative profile had significantly lower anhedonia levels than those in the moderately authoritarian profile ($p = 0.004$). No significant differences were found between the very authoritarian profile and either the moderately authoritarian or the authoritative profile. Emerging adults in the potentially indulgent profile also had the lowest scores on general distress, significantly lower than the moderately authoritarian ($p < 0.001$), very authoritarian ($p < 0.001$), and authoritative ($p = 0.008$) profiles. Those in the authoritative profile had significantly lower scores of general distress than those in the moderately authoritarian ($p < 0.001$) and very authoritarian ($p = 0.004$) profiles.

Participants in the potentially indulgent and authoritative profiles consistently had the best wellbeing outcomes. In terms of engagement, participants in the potentially indulgent and authoritative profiles had significantly higher scores than those in the moderately authoritarian profile (both $p < 0.001$). Those in the potentially indulgent and authoritative profiles also had higher perseverance scores than those in the moderately authoritarian (both significant at $p < 0.001$) and very authoritarian profiles ($p < 0.001$ and $p = 0.006$, respectively). Similarly, the potentially indulgent and authoritative profiles had higher scores on optimism than the moderately authoritarian (both significant at $p < 0.001$) and very authoritarian profiles ($p < 0.001$ and $p = 0.002$, respectively). In terms of connectedness and happiness, the findings are similar (i.e., potentially indulgent and authoritative profiles had significantly higher scores than the two authoritarian profiles) but participants in the indulgent profile also had significantly higher scores on connectedness than those in the authoritative profile ($p = 0.031$).

4. Discussion

Parents remain important in emerging adults' lives in the modern era, which has implications for reducing historically unprecedented emerging adult mental health risks and improving positive adjustment outcomes. This power of parents to reduce risk and maximize flourishing has the potential to set emerging adults on trajectories of positive physical health, mental health, and wellbeing in later adulthood.

4.1. Parenting Styles in Emerging Adulthood

The present study uncovered four parenting styles in emerging adulthood, which largely overlapped with traditional conceptualizations of parenting styles (two authoritarian profiles, a potentially indulgent profile, and a profile characterized by average levels of all parenting behaviors measured, which may reflect a modern authoritative parenting style of emerging adults). The largest profile (40.3% of the sample) was made up of emerging adults who perceive their primary parent as engaging in above-average levels of warmth, involvement, and autonomy supportive parenting, slightly below-average levels of behavioral and psychological control, and approximately average levels of helicopter parenting (which we termed "potentially indulgent"). This is fairly consistent with two past studies [36,39], which uncovered sizable clusters of parents of emerging adults who similarly evidenced low demandingness and high responsiveness.

The second largest profile (20.7% of the sample) was characterized by near-average levels of all parenting behaviors (which we conceptualized as reflecting a balanced "authoritative" profile), and likewise replicates past studies which saw similarly average clusters of

parenting behaviors in emerging adulthood [36,38,39]. Finally, the emerging adults in our study perceived their parents as falling into two valences of authoritarian profiles. The first (22.2% of the sample), saw moderately high levels of behavioral and psychological control and (to a lesser extent) helicopter parenting, while the second (9.8% of the sample) saw higher levels of psychological and behavioral control, slightly below-average helicopter parenting, and very low levels of involvement, autonomy support, and warmth.

These emerging adult parenting styles saw more demographic similarity (across four-year university vs. community college, age, caregiver role (mothers, fathers, or others), and parental education) than differentiation, which we mostly saw related to gender. Males were overrepresented in the authoritative profile relative to the potentially indulgent and moderately authoritarian profiles; conversely, females were overrepresented in the potentially indulgent and moderately authoritarian profiles. Notably, our small group of non-binary gender identifying emerging adults saw their parents as overwhelmingly very authoritarian versus moderately authoritarian and potentially indulgent (and as more authoritative than indulgent). Although this group is small here (and thus generalizability potentially limited), these perceptions of parents as highly demanding and lacking warmth may be reflective of strained relationships around parental rejection of gender nonconforming youth [68,69].

The only other demographic difference that emerged was that emerging adults who perceived their parents as belonging to the potentially indulgent profile had parents who were more highly educated (compared with the moderately authoritarian profile). Interestingly, we did not find evidence that parent role (mother, father, or other primary caregiver/parent) was associated with profile membership; this is curious, given that some past studies [36,38] have suggested some differences between mother and father profiles. We also did not see evidence of an uninvolved or neglectful profile, characterized by low levels of all parenting behaviors measured, which has emerged (albeit as a small slice of families [38]) in past work. These divergences from recent studies may be due at least in part to methodological differences (i.e., we had students designate their “primary caregiver/parent”, which may have already selected a more homogenous group of the most involved parents, who were mostly mothers, for our study).

Further, these results suggest that emerging adult perceptions of parental autonomy support and low helicopter parenting usually did not travel together to form an autonomy supportive parenting style, but rather helicopter parenting tended to travel with behavioral and psychological control (indicators of demandingness) and parental autonomy support tended to travel with parental involvement and warmth (indicators of responsiveness). This is somewhat consistent with Padilla-Walker and colleagues’ 2021 [38] profile analysis in which helicopter parenting tended to co-occur with psychological control, albeit at generally low levels. Indeed, this is strong replication of that study’s finding that helicopter parenting overall was not a distinguishing feature of the profiles, and other recent evidence that helicopter parenting is uncommon and not a strong determinant of clusters of parent–college student relationship features [50].

4.2. Parenting Styles and Developmental Outcomes in Emerging Adulthood

The results here provide robust evidence that emerging adults who see their parent as highly involved, warm, and autonomy supportive tend to experience fewer depressive, mood, and anxiety symptoms and more positive wellbeing outcomes like happiness, connectedness, optimism, perseverance, and engagement. The potentially indulgent parenting style in emerging adulthood is associated with the best developmental outcomes, including fewer internalizing symptoms and more positive adaptive outcomes, even more so than a profile characterized by moderate levels of all parenting behaviors (which is somewhat analogous to traditional conceptualizations of the “ideal” authoritative parenting style) and especially in comparison with authoritarian profiles characterized by moderate-to-high levels of demandingness (which saw the poorest outcomes overall). Although this is inconsistent with the adolescent literature, which tends to conclude that permissive

or indulgent parenting is largely unrelated to internalizing problems [21,70], it suggests, consistency with a stage-environment fit perspective [71], in which indulgent parenting may be ideally suited to developmental milestones of autonomy, relatedness, and competency in the transition to adulthood. The benefits of indulgent parenting seen here are also quite consistent with recent studies in emerging adulthood which have underscored the adaptive benefits of parenting styles characterized by responsiveness and autonomy support [36,38,39]. This, combined with the lack of evidence of the hypothesized maladaptive overparenting profile, suggests that those who work with emerging adults and their families would do well to emphasize the potential benefits of parental involvement and support during this developmental stage (as long as it occurs with autonomy support) over the perceived risks of helicopter parenting and parental over-involvement (especially if the involvement is not perceived as controlling). That is, an emphasis (e.g., in the popular press [72]) on modern-day parents as helicopter parents who should stop meddling in their emerging adult child's affairs may inadvertently be reducing positive types of parental involvement that have the power to help emerging adults avoid mental health difficulties and live fulfilling lives.

4.3. Limitations and Future Directions

Our latent profile analysis, with nearly 700 diverse emerging adults in four-year university and community college settings, yielded valuable conclusions about the role of parents in emerging adulthood. However, it also has limitations that must be considered. A substantial limitation of the cross-sectional, emerging adult-reported data here is that we cannot know for certain the direction of the observed associations. Although here we conceptualize parenting styles as being potential determinants (i.e., offering risk or protection) of emerging adult mental health and positive wellbeing, it could also be that those students who are struggling most (a) experience negative attribution biases and thus *perceive* their parents as engaging in the most behavioral and psychological control, and as engaging in less responsive, supportive behaviors and/or (b) that those students who are struggling more *evoke* more controlling and less responsive behaviors from their parents. Future longitudinal research can and should help parse these questions, ideally in multi-informant (and even observational) data that can pull apart emerging adult perceptions of their parent's behaviors from how the parent sees themselves and how they actually behave in the context of daily life. This study is also limited by its focus exclusively on students who are attending either four-year university or a community college. Although community college students are certainly understudied, there are also many other emerging adults who are not involved in higher education and for whom the processes here would be of interest.

5. Conclusions

Emerging adulthood is a tumultuous time, during which emerging adults can establish patterns of mental health and positive wellbeing that set them on a course to risk or resilience in later adulthood. Parents play an important role in helping emerging adults navigate these sometimes-stormy waters, and results here highlight that many do so effectively by adopting parenting styles that are warm, supportive, involved, and facilitative of their child's budding independence. These findings can help inform future parent-focused interventions (e.g., with parents at the transition to college [73]) and recommendations for higher education professionals (e.g., student services, advising, college counseling centers) to help build and maintain positive parent-emerging adult relationships in service of better emerging adult mental health and positive development.

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