Military Adolescent Psychopathology Risks: Psychopathology as Related to Social Support and Life Stressors in Military Dependent Adolescents

Corey Pettit, Aubrey J. Rodriguez, & Gayla Margolin
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Background

- Military Adolescents must navigate situations that lead to elevated levels of stress (e.g., moves, separation from a parent).1
- Although military adolescents report experiencing stress related to aspects of the military beyond deployment, deployment is the most frequently assessed aspect of military family life.2
- Despite theoretical support for the positive influence of social support,3 past research has been inconclusive.4
- Military Adolescents may have less available peer and father social support, making mother’s social support particularly important.

Research Questions

1. How do moves and changes in school impact the internalizing psychopathology of military adolescents?
2. How does mother-to-youth social support impact the internalizing psychopathology of military adolescents?

Hypotheses

1. Military Stress (i.e., residential moves & school transitions) will be associated with elevated internalizing psychopathology among military youth.
2. Mother’s social support will be associated with lower levels of internalizing psychopathology.
3. Mother’s social support will moderate the relationship between military stress and internalizing psychopathology, such that high levels of support will protect adolescents with high levels of stress from experiencing high levels of psychopathology.

Methods

Participants
Participating youth (N = 80, 38 female) ranged in age from 14.0 to 18.9. Youth were 32.9% Hispanic/Latino, 60.9% White/Caucasian, 4.3% American Indian/Alaska Native, 2.9% Asian, 5.8% as Black, and 26.1% Multiracial.

Procedure
Youth reported on significant life events in the past year, perceived level of social support, and anxiety and depression symptoms.

Measures

1. Internalizing Psychopathology
Internalizing Psychopathology was assessed using two youth self-report questionnaires: the Children’s Depression Inventory (CDI) and the Revised Child Anxiety and Depression Scale (RCADS). The z-scores from these two measures were combined to create a measure of internalizing psychopathology. Average scores were -.12. (SD= 1.89, range= -3.11– 6.29).

Effects of Military Stress on Internalizing Psychopathology

<table>
<thead>
<tr>
<th>Variable</th>
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Effects of Mother-to-Youth Social Support on Internalizing Psychopathology

Military Transition Moderates the Relationship Between Mother Social Support and Internalizing Psychopathology

Results

Hypothesis 1:
- Military stress was not significantly predictive of internalizing psychopathology.

Hypothesis 2:
- High levels of mother’s social support predicted lower internalizing psychopathology.

Hypothesis 3:
- Military stress moderated the relationship between mother’s social support and internalizing psychopathology, where high levels of mother’s social support was associated with low levels of internalizing psychopathology only when military stress was low.

Discussion

- Military stressors on their own don’t explain the internalizing psychopathology in military adolescents.
- Mother’s social support is an important resource for these adolescents, but only when military stressors are at manageable levels.
- Further research might explore how different sources of social support impact military adolescents.

Sources


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Family Aggression and the Risk of Victimization in Late Adolescence

Sohyun C. Han & Gayla Margolin

University of Southern California

INTRODUCTION

- Adolescents report high rates of victimization across multiple relationship contexts, such as with friends and dating partners (Finkelhor et al., 2005)
- Parent-child and parent-parent aggression confer risk for dating and friend victimization (Stith et al., 2000)
- Aggression by mothers and fathers may have differential risks for males and females – findings have been mixed (e.g., Perry, Hodges, & Egan, 2001)
- Link between family aggression and victimization may be stronger for females than males (Ariaga & Foeshie, 2004)
- Peer group may be protective if adolescents have a greater proportion of prosocial than antisocial friends (Prinstein, Boergers, & Spinto, 2000)

HYPOTHESES

- Family aggression will confer risk for dating and friend victimization
- Gender will moderate the association of family aggression
- Family aggression will confer risk for dating and friend victimization
- Gender will moderate the association of family aggression
- Gender will moderate the association of family aggression

METHODS

Participants
- 125 adolescents and their parents from the USC Family Studies Project, a multi-wave longitudinal study
- 67 Males, 58 females
- Mean age of 12.71 (SD = .76) at wave 3 and 18.19 (SD = 1.11) at wave 5
- Ethnically and racially diverse community sample

Measures
- Maximum reported scores for family aggression were calculated from each reporter (adolescent, mother, father).
- Wave 3 Parent-parent aggression
- Conflict Tactics Scale, Straus 1979; Domestic Conflict Inventory, Margolin, John, & Foo, 1998.
- Wave 3 Parent-child aggression
- Parent Child Conflict et al., Straus et al., 1998.
- Wave 5 Victimization
- How Friends Treat Each Other, Bennett et al., 2011
- Wave 5 Prosocial and antisocial friend behavior
- Peer Behavior Inventory, Prinstein, Boergers, & Spinto, 2001.

RESULTS

Table 1. Correlations among study variables.

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<th>1</th>
<th>2</th>
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<td>M-Mom-Dad Aggr</td>
<td>-.32**</td>
<td>.37**</td>
<td>.57**</td>
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<td>M-Mom-Mom Aggr</td>
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<td>M-Child Aggr</td>
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<tr>
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<td>.02</td>
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<td>.19</td>
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<td>M-Friend Victim</td>
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<td>.01</td>
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<td>.26*</td>
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<td>6.09</td>
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<td>.74</td>
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</table>

Note: Correlations for males are reported in the top half of the matrix and correlations for females are reported in the bottom half.

Table 2. Regression analyses of family aggression variables predicting victimization by dating partners and friends among late adolescents.

<table>
<thead>
<tr>
<th></th>
<th>Dating Partner Victimization</th>
<th>Friend Victimization</th>
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<tbody>
<tr>
<td></td>
<td>B(SE)</td>
<td>B(SE)</td>
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<tr>
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<td>Mom-Dad x Gender</td>
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<td>-.003 (.014)</td>
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<tr>
<td>Mom-Mom Aggr</td>
<td>.003 (.007)</td>
<td>.057 (.006)</td>
</tr>
<tr>
<td>Gender</td>
<td>-.149 (.056)</td>
<td>-.235 (.021)</td>
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<td>Mom-Mom x Gender</td>
<td>-.004 (.010)</td>
<td>-.044 (.003)</td>
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<tr>
<td>Dad-Mom Aggr</td>
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<tr>
<td>Gender</td>
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<td>Dad-Mom x Gender</td>
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<td>-.003 (.010)</td>
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<td>Dad-Child Aggr</td>
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<td>.496** (.012)</td>
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<tr>
<td>Gender</td>
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<tr>
<td>Dad-Child x Gender</td>
<td>-.027 (.009)</td>
<td>-.346* (.004)</td>
</tr>
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</table>

*p < .05  ** p < .001

*This material is based on work supported by the NIH-NICHHD Grant No. R01 HD48807 (Margolin, PI), the David and Lucile Packard Foundation Grant No. 00-12802 (Margolin, PI), and the NSF GRFP Grant No. 0837362 (Han, PI)

DISCUSSION

- Dad-child aggression emerged as the only family aggression variable to confer risk for dating and friend victimization for both males and females.
- Link between dad-child aggression and dating victimization was stronger in females than males.
- Females may develop schemas or beliefs that male-perpetrated aggression is acceptable in relationships.
- However, the association between dad-child aggression and dating victimization was buffered by a high proportion of prosocial to antisocial friends among females, suggesting that prosocial friends can be protective.
- Findings suggest that family and peer factors are influential in the risk for dating and friend victimization in late adolescence.
Background

• Military Adolescents must navigate situations that lead to elevated levels of stress.¹

• Adolescents may be more vulnerable to life stressors (i.e. moves, separation from parent) than younger children because of developmental changes.²

• Previous studies³ on military coping have ignored variations in stress level experienced by adolescents and existing resources of adolescents.

• The ABC-X stress/crisis model suggests that military adolescents’ perception of their stress and existing resources could influence their coping abilities.⁴

Research Questions

1. How does military youth’s perception of Military Family Life Stress (MFLS) impact youth coping?

2. How does the quality of mother-youth communication impact youth coping?

Hypotheses

1. Increased MFLS will be associated with lower levels of active coping.

2. Better Mother-Youth communication will predict use of social support coping.

Methods

Participants

Participating youth (N = 70, 38 female) ranged in age from 14.0 to 18.9. Youth were 52.9% Hispanic/Latino, 60.9% White/Caucasian, 4.3% American Indian/Alaska Native, 2.9% Asian, 5.8% as Black, and 26.1% Multiracial.

Procedure

Youth participated with their mothers in a home interview, in which they discussed their fathers’ service history and family experiences over the past five years and completed surveys about family relationships and coping.

Measures

MFLS

MFLS was assessed in two ways:

1. Total duration of the service member’s deployment absences during the previous five years, M 8.19 (SD = 5.49, range 0-21).

2. Number of important family life events the service member missed during deployments during the adolescent’s lifetime. Life events measured: pregnancy/birth/adoption, death, wedding, school graduation, residential move, family member moving in or out of the service member’s home, divorce/marital separation of family member, serious illness/injury/hospitalization, children beginning school year, and job loss. Average number of events missed was 2.76 (SD = 2.69, range 0-12).

Summary of Regression Analyses Associating MFLS and Mother-Child Communication with Youth Coping

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Youth Coping Strategy</th>
<th>B</th>
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<th>β</th>
<th>B</th>
<th>SE</th>
<th>β</th>
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<tr>
<td></td>
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<td>Social Support Coping</td>
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<tr>
<td>Total Time Deployed</td>
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<td>-23</td>
<td>.13</td>
<td>-23*</td>
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<td>-38**</td>
<td>-49</td>
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<td>-24*</td>
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<td>Mother-Youth Communication (IPPA subscale)</td>
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<td>.29</td>
<td>.19</td>
<td>.22</td>
<td>.27</td>
<td>.12</td>
<td>.31</td>
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</tbody>
</table>

Results

Question 1:

• Both indices of MFLS (length of deployment and missed events) were negatively associated with youth active coping.

• MFLS was not significantly associated with social support coping

Question 2:

• Mother-youth communication quality was positively associated with social support coping

• Mother-youth communication was not significantly associated with active coping.

Discussion

• Military adolescents report less active coping at higher levels of MFLS, perhaps because they perceive MFLS as a type of stress they are unable to cope with in a problem-focused way.

• Youth who report better mother-youth communication report more willingness to seek support from others when confronted with military challenges.

• Further research might explore resources beyond the family that encourage military adolescents to use positive coping strategies.

• Future research should assess whether reduced active coping with MFLS is associated with maladaptive outcomes for military youth.

Sources


Contact: capettit@usc.edu

Society for Research in Child Development 2015 Conference, Philadelphia, PA
The current study provides nuanced assessment of three dimensions of risk related to military deployment as a universal risk factor for maladaptive outcomes, despite evidence that deployment effects are small and vary across family members.

The existing literature has tended to regard parent military deployment as a significant family event occurring during SM absence, in 10 categories: pregnancy/birth/adoption (reported by 24% in the past 5 years), death (38%), wedding (24%), graduation from school (40%), residential move (31.4%), family member moving in (12.9%) or out of the home (10%), divorce/separation of family member (11.4%), serious illness/injury/hospitalization (34.3%), children beginning school year (72%), and job loss (10%). SMs mixed an average of 4.84 such events (SD = 2.56).

Contact with Service Member – Each participant answered: “How often did you communicate with your spouse/partner” during the last deployment? Parents reported significantly more contact with the service member (M = 3.37, SD = 1.12) than did youth (M = 2.51, SD = 0.52). Parents reported an average of 4.84 such events (SD = 2.56).

The exis9ng literature has tended to regard parent military deployment as a significant event during the most recent deployment on a six-point ordinal scale: (0) Never, (1) Once a month, (2) 2-3 times a week, (4) Once a day, or (5) Several times a day. Mothers reported significantly more contact with the service member (M = 3.37, SD = 1.12) than did youth (M = 2.51, SD = 0.52), paired t (63) = 5.23, p < .001.

**Hypotheses**

H1: SM occupational hazard will be positively associated with mothers’ symptoms of anxiety and depression.

H2: Cumulative absence indices will account for significant additional variance, beyond the effect of number of deployments, in mother and youth outcomes.

H3: Occupational hazard and cumulative absence will interact to predict mothers’ symptoms.

H4: Frequency of contact with the service member will moderate the impact of SM absence on family members’ symptoms.

**Methods**

**Participants**

- Non-SM mothers and adolescents (n = 70 dyads) from active-duty military families.
- Youth (n = 38 female) aged 14.0 to 18.9 (M = 16.0, SD = 1.2). 32.9% identified as Hispanic/Latino; 60.9% self-identified as White/Caucasian, 4.3% as American Indian/Alaska Native, 2.9% as Asian, 5.8% as Black, and 21.6% as Multiracial.
- Mothers aged M = 39.9 (SD = 4.8) and well educated (90% had some college).
- 34.3% of SMs were youth’s stepfather; 15.7% of mothers were veterans/retirees.
- Most SM fathers were serving in the U.S. Marine Corps (52.9%) or Navy (34.3%).
- SMs had deployed M = 4.0 times during their careers (SD = 3.1), and 1.3 times (SD = .96) during the previous five years.

**Procedures**

- Mother-youth dyads were interviewed in their homes.
- Families participated in the Timeline Followback Military Family Interview (TBFMI) – adapted from retrospective reporting procedures to identify SM absences and significant family events during the previous five years, and to provide basic details of the SM’s job.
- Participants completed online self-report questionnaires about current symptoms.

**Measures**

- **Service Member Occupational Hazard** – Two ordered categorical indicators: rank and military occupational specialty (MOS). MOS was coded into four categories by the occupation’s proximity to combat (i.e., combat [coded [4.12% of sample], direct combat support [32.9%], logistical or other support of combat operations [25.7%], and administrative [1.17%]).

**Results**

H1: Occupational Hazard Is Positively Associated with Mothers’ Anxiety & Depression

<table>
<thead>
<tr>
<th>Variable</th>
<th>B</th>
<th>SE (B)</th>
<th>p</th>
<th>ΔR²</th>
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<tr>
<td>Stepfamily</td>
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<td>Number of Recent Deployments</td>
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<tr>
<td>Step 2 - Absence Variables</td>
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<td>-0.09</td>
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<tr>
<td>Important Events Missed</td>
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<td>.51</td>
<td>.11</td>
<td>4.47</td>
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</tbody>
</table>

H2: Cumulative Time Away Explains Additional Variance in Mothers’ Symptoms; Important Family Events Missed Explains Additional Variance in Youth Depression Symptoms

<table>
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<th>ΔR²</th>
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<td>Cumulative Time Away</td>
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<td>Important Events Missed</td>
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<td>.31</td>
<td>.08</td>
<td>0.15</td>
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H3: Absence Is Linked to Mothers’ Symptoms Only At High SM Occupational Hazard

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<th>Mothers’ Symptoms</th>
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<th>High</th>
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<tr>
<td>Anxiety Symptoms</td>
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<td>30</td>
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<tr>
<td>Depression Symptoms</td>
<td>10</td>
<td>20</td>
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</table>

H4: High SM-Youth Contact Buffers Youth Against Anxiety Linked to SM Time Away

<table>
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<tr>
<th>Youth Anxiety Symptoms</th>
<th>Low</th>
<th>High</th>
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</thead>
<tbody>
<tr>
<td>Time Away</td>
<td>10</td>
<td>30</td>
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</table>

**Discussion**

- Mothers appear to be particularly affected by (a) the potential for danger to the SM and (b) the amount of time they are separated from their spouses and “temporary single parents” to their children.
- Youth were affected by whether the SM’s absence co-occurred with significant family events. Further research on influential missed events may clarify the meaning and impact of the SM’s absence at these junctures.
- Contrary to previous findings linking frequency of contact to youth psychosocial distress, we found contact with the SM to be protective against youth anxiety symptoms. Understanding what makes contact with the service member risky versus protective is an important topic for future research.
- Our multiple significant moderation results highlight the importance of considering multiple dimensions of military service in conjunction with the family context.
- Instruments like the TBFMI may prove useful in clinical and research assessments of families who endure temporary parent absence.
- Future work should incorporate direct assessment of family member’s attributions/perceptions about these objective dimensions of military service experiences to clarify the mechanisms emerging here.

**References**


We wish to acknowledge the following grant support for this project: NIH Eunice Kennedy Shriver National Institute of Child Health and Human Development [Grant RO1 HD040807 to Margolin], NIH National Institute of Mental Health [Grant R01 MH72043 to Rodriguez], the False-Beck Fund for Research and Experimentation [Dissertation Grant to Rodriguez], and the American Psychological Foundation [Randy Gerson Memorial Grant to Rodriguez].

Contact: aubreyro@usc.edu
Military Life: Effects of Frequency of Deployment and Relocation on Adolescents’ Psychosocial Symptoms and Relationships with Parents

Mary J. Letourneau, Aubrey J. Rodriguez, & Gayla Margolin
University of Southern California

Background
The average civilian child will experience at least one move during childhood1. In contrast, the average military family moves every 2-3 years.

In civilian samples, high motility & other stressful events are linked with:
- Difficulty making friends
- Lower achievement in math and reading
- Emotional and behavioral problems
Furthermore, military children are exposed to deployments which have been linked with:
- Elevated stress and anxiety
- Declining grades
- Parent-child problems
- Problems sleeping
The current study assesses effects of motility and deployment on military adolescents’ psychosocial functioning and relationships with their parents.

Research Questions
1. How does the frequency of moves or deployments relate to military youths’ symptoms of anxiety and depression?
2. How does the frequency of moves or deployments affect the relationship between military youth and their parents?

Methods
Participants
Participating adolescents (N = 25, 18 females; mean age = 15.4) were recruited with their parents into an ongoing study of military families. Youth were 20% Hispanic, and racially diverse: 68% White/Caucasian, 16% Black/African American, 8% Native American/Alaska Native, 4% Asian/Pacific Islander and 4% Biracial/Multiracial.

Procedures
• Adolescents reported on their symptoms of depression, generalized anxiety, and social phobia.
• Adolescents also reported on two aspects of parent-child relationships: youth’s helping behavior towards their mothers and their perceptions of parental support.

Measures
Adolescents Depressive Symptoms – Each adolescent reported on their depressive symptoms on the Children’s Depression Inventory2. Average scores were 15.3 (SD = 6.0, range = 1-23).

Adolescents Generalized Anxiety and Social Phobia – Each adolescent reported on their generalized anxiety and social phobia symptoms on the Revised Children’s Manifest Anxiety Scale (RCADS)3. Average T-scores were 42.6 (SD = 9.3, range = 26-59) for generalized anxiety and 11.1 (SD = 5.2, range = 0-20) for social phobia.

Results

Effects of Relocation Frequency on Youth Anxiety Symptoms

<table>
<thead>
<tr>
<th>Number of Family Moves in Youth’s Lifetime</th>
<th>Youth Anxiety Symptoms</th>
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Youth’s Helping Behavior Towards Mothers - Adolescents reported on their helping behaviors using a 20-item measure created for this study. Average scores were 14.0 (SD = 8.1, range = 2-32).

Youth’s Perception of Parental Support - Youth reported their perception of Parental Support on the Child and Adolescent Social Support Scale (CASSS)4. Average scores were 31.7 (SD = 10.1, range = 11-50).

Summary of Results
Number of moves was significantly positively associated with youth anxiety; however it was not associated with youth depressive symptoms or social phobia symptoms.

Number of deployments was not significantly associated with any youth mental health symptoms.

Number of deployments during the youth’s life was associated with marginally greater perceived parental support.

It was not associated with youth provision of support.

Discussion
• Based the literature on stressful events, we asked if the number of deployments (stressful events) would be associated with greater mental health symptoms in youth. The fact that it was not suggests that there may be something different about how military children (versus civilian children) cope with stressful events.

• This study supports the suggestion that it could be the result of higher social support5, as number of deployments was associated with greater perceived parental support.

• Future studies could explore the coping mechanisms utilized by youth in military families to determine whether their strategies differ from those of civilian families, and whether any differences account for observed differences in youth adjustment.

References

We wish to acknowledge the following grant support for this project: NIH Eunice Kennedy Shriver National Institute of Child Health and Human Development [Grant R01 HD46087 awarded to Margolin], and NIH National Institute of Mental Health [Grant NIRS A F31 MH894035 awarded to Rodriguez].

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Background

- Parent mental health symptoms may alter family relationship processes in ways that confer risk of psychopathology to the developing child.¹
- Most investigations focus on spillover processes. A parent’s own mental health concerns may limit their ability to effectively relate as a parent.²
- Less research has assessed crossover processes. Stress related to the parent’s symptoms may also affect their spouse’s parenting, compromising the other parent-child relationship.³

The current study examines the influence of each parent’s own internalizing symptoms and his/her spouse’s symptoms on parenting behavior, and simultaneously assesses these parenting behaviors as mediators of the link between parent and youth internalizing symptoms.

Methods

Participants

Participating adolescents (N = 103, 50 females; mean age = 15.3, SD = .77, range = 13.7-18.6) were recruited (at age 10) with their parents into a longitudinal study of community families. Youth were 32% Hispanic, and racially diverse: 54.4% White/Caucasian, 18.4% Black/African American, 8.7% Asian/Pacific Islander and 18.4% Biracial/Multiracial.

Procedures

- Data collection at mid-adolescence (4th study wave)
- Parents and youth reported on symptoms of depression and post-traumatic stress during the previous year
- Families engaged in 15-minute videotaped problem solving discussions.

Measures

Parent Internalizing

Parental Depressive Symptoms (DEP) – Each parent reported on his or her own DEP on the Beck Depression Inventory, 2nd edition (BDI-II).⁴ Average scores were 8.2 (SD = 7.2, range = 0-32) for mothers and 7.3 (SD = 7.1, range 0-33) for fathers.

Parental Posttraumatic Stress Symptoms (PTS) - Each parent reported on his or her own PTS on the Los Angeles Symptom Checklist (LASC).⁵ Average scores were 11.0 (SD = 7.9, range = 0-30) for mothers and 10.4 (SD = 7.1), range 0-30) for fathers.

Youth Internalizing

Youth Depressive Symptoms (DEP) – The youth reported on his/her own symptoms of depression on the Children's Depression Inventory (CDI).⁶ Average scores were 5.3 (SD = 4.7, range = 0-18).

Youth Posttraumatic Stress Symptoms

Youth Posttraumatic Stress Symptoms (PTS) - The youth reported on his/her own symptoms of posttraumatic stress on the Youth Symptom Survey Checklist (YSSC; Margolin, 2000). Average scores were 9.2 (SD = 7.7, range = 0-32).

Parent and Youth Conflict Behavior

Trained undergraduate research assistants viewed videotaped family discussions and coded, in 3-minute intervals, the intensity/impact of the following behaviors: criticism, and support/affection. Behaviors were rated on the dyadic level (i.e., mother and father criticism were rated separately). Each tape was coded by two coders, and ratings were averaged across coders and summed across the five intervals. Reliability of the coded behaviors was acceptable; ICC (2,k) for criticism = .78 for mothers, .74 for fathers, and for support = .82 for mothers, .81 for fathers.

Family Members’ PTS Symptoms & Parent-to-Youth Criticism

- Both fathers’ & mothers’ PTS symptoms were positively associated with fathers’ criticism of the adolescent during the conflict discussion.
- Fathers’ criticism was positively associated with adolescents’ PTS symptoms. The overall indirect effect of parental PTS symptoms on youth PTS symptoms through fathers’ criticism was marginally significant (p = .08).

Family Members’ DEP Symptoms & Parent-to-Youth Criticism

- Patterns of association were similar for the DEP symptoms model, but paths were generally marginal or non-significant.
- Parental support was not significantly associated with youth or parent symptoms of PTS or DEP.

Discussion

- Fathers’ criticism of their adolescent children was associated with their own and their wives’ PTS symptoms and their wives DEP symptoms. This suggests that fathers’ parenting may be more vulnerable to both spillover and crossover effects of parental mental health symptoms.
- Additionally, we found some evidence that fathers’ criticism may account for the association between parental and youth PTS symptoms.
- Mothers’ criticism was not associated with either parents’ symptoms, nor with youths’ mental health symptoms.
- Future research should assess potential explanations for these gender-specific effects. Why and under what circumstances is fathering behavior more susceptible to the effects of psychopathology within the family than mothering behavior?

References


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- NIH NICHD R01-HD46807 (PI: G. Margolin)
- NIH NIMH F33-MH094035 (PI: A. Rodriguez)
Early Adolescents’ Perceptions of Positive Parenting Predict Positive Conflict Management at Mid-Adolescence

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INTRODUCTION

It has been suggested that positive parenting in early adolescence influences youth’s positive conflict management behaviors (CMB) in mid to late adolescence. Youth who display positive CMBs have a lower risk of concurrent adaptational deficits. Positive CMBs are key for adolescents to cope with differences within a positive relationship.

This study focuses on positive parenting as perceived by youth. It objectively rates youths’ conflict management behaviors observed during family discussions. Separates the aspects of positive parenting into two distinct groups: attunement and cohesion.

HYPOTHESES

Youth who rate their parents (as a team) as more positive will demonstrate more positive conflict management behaviors.

We will investigate whether youth gender, age, and perceptions of general conflict moderate associations between positive parenting and youth conflict management behaviors.

Youths’ perceptions of parental attunement will more strongly predict youths’ positive conflict management behavior than perceptions of family cohesion.

METHODS

Sample: 102 youth (52% male), who participated with their parents in a longitudinal study called the USC Family Studies Project. Youth were ethnically (32% Hispanic) and racially diverse (55% White, 19% Black, 9% Asian, 18% Multiracial).

Positive Parenting

In early adolescence ($M_{age}=12.5$), youth completed a questionnaire to report their view of their parents’ positive parenting skills (one report on both parents together).

Youth rated their parents on items measuring:

- Attunement (2 items) - responsiveness, praise and positive feedback, mutual respect
- Cohesion (9 items) - perceived emotional connections between family members (e.g., of trust or warmth, shared interests, shared family time)
- Ratings for items were summed ($M=83.5$, $SD=17.7$, range=10-116)

Positive Parenting was influential for youth involvement among younger teens but not older teens.

SUMMARY OF RESULTS

1. Main Effects: Youth Gender and Perceived Family Conflict
   - Males displayed lower support/affection and agreement behaviors
   - Males displayed marginally lower involvement in the discussions
   - Youth who reported higher family conflict were marginally more involved in the laboratory discussions

2. Moderator: Youth Age
   - Positive parenting was influential for youth involvement among younger teens but not older teens

3. Attunement and Cohesion were too closely correlated to distinguish unique effects

REFERENCES

- Beck Fund for Research [Grant F29 MH087296 to Margolin, awarded to Margolin], the National Institute of Mental Health [Grant NRSA F31 MH094035 awarded to Rodriguez] and the Fahs-Beck Fund for Research and Experimentation [Dissertation Research Award to Rodriguez]

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