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Abstract

Communication among children and their parents is consequential for children's development and adjustment. These concerns are particularly relevant for mothers in low-income households, who are more likely to experience depressive symptoms and low self-efficacy than mothers in other socioeconomic groups, with these problems often negatively impacting the emotional wellbeing of children in the household. This study examined associations among maternal emotional wellbeing, parent-adolescent communication, and adolescents' emotional wellbeing in a sample of 93 low-income mothers and adolescents. The results indicated that high reports of maternal self-efficacy were significantly related to perceptions of open and satisfying mother-adolescent communication. In addition, the results showed that open and satisfying mother-adolescent communication was significantly associated with high levels of youth self-efficacy, as well as lower reports of youth depressive symptoms. Practical implications for communication research and interventions targeting families and youth wellbeing are discussed.

Keywords

wellbeing, emotional, youth, maternal, communication, effects, adolescent, mother

Disciplines

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The Effects of Maternal Emotional Well-Being on Mother-Adolescent Communication and Youth Emotional Well-Being

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Abstract

Communication among children and their parents is consequential for children's development and adjustment. These concerns are particularly relevant for mothers in low-income households who are more likely to experience depressive symptoms and low self-efficacy than mothers in other socioeconomic groups, with these problems often negatively impacting the emotional well-being of children in the household. This study examined associations among maternal emotional well-being, parent-adolescent communication, and adolescents' emotional well-being in a sample of 93 low-income mothers and adolescents. The results indicated that high reports of maternal self-efficacy were significantly related to perceptions of open and satisfying mother-adolescent communication. Additionally, the results showed that open and satisfying mother-adolescent communication was significantly associated with high levels of youth self-efficacy as well as lower reports of youth depressive symptoms. Practical implications for communication research and interventions targeting families and youth well-being are discussed.

Keywords; emotional well-being; parent-child communication; low-income families

The Effects of Maternal Emotional Well-Being on Mother-Adolescent Communication and Youth Emotional Well-Being

As Bronfenbrenner (1979) pointed out, to understand children we must understand the ecological contexts within which they grow and develop. In these contexts, *parents matter* (Barber, 2002). In particular, communication among children and their parents is consequential for children's development and adjustment (Laursen & Collins, 2004). Research has implicated the importance of parent-child communication for predicting youth adjustment (Ackard, Neumark-Sztainer, Story, & Perry, 2006; Brody, Murry, Gerrard, Gibbons, McNair, & Brown et al., 2006) with this research limiting its focus to the amount or frequency of that communication. Recent directions, however, suggest that information about communication frequency should be supplemented with a greater understanding of the quality of the communication that occurs between parents and youth (Miller-Day & Kam, 2010).

A disproportionate amount of this research on parent-child communication has focused, however, on middle class families and examination of vulnerable populations such as low-income families is lacking (Miller-Day & McManus, 2009; Socha & Diggs, 1999). We believe this is unfortunate because youth in low-income families often experience a particularly unique developmental milieu that likely impacts socio-emotional and developmental outcomes (Jarrett, 1997; Jarrett & Burton, 1999). Parents in low-income families are more likely to experience depressive symptoms and low self-efficacy than parents in other socioeconomic groups and these problems often negatively impact the emotional well-being of children and adolescents in the household (Burt, Dulmen, Carlivati, Egeland, Sroufe, & Forman et al., 2005; Crouter, Bumpus, Maguire, & McHale, 1999; Elgar, McGrath, Waschbusch, Stewart, & Curtis, 2004; Pachter,

Auinger, Palmer, & Weitzman, 2006). Past studies have suggested that mothers' negative well-being severely diminished parent-adolescent relationships and led to inadequate parenting, which contributes to poor outcomes for children and adolescents from low socioeconomic households (Carlson & Corcoran, 2001; Crouter et al., 1999; Pachter et al., 2006; St. Pierre & Kaltreider, 1997; Whitbeck, Simons, Conger, Wickrama, Ackley, & Elder, 1997). Given these findings, the present study conceptualizes emotional well-being as low levels of depression with high levels of efficacy.

Depression. Scholars have noted that mothers in poverty are more vulnerable and susceptible to depression than other socioeconomic groups (Jones et al., 2002a; Ross et al., 1990). Maternal depression has been associated with negative mother-child interactions (Murray, Fiori-Cowley, Hooper, & Cooper, 1996), detrimental parenting practices (Hamilton, Hammen, Minasian, & Jones, 1993), and low levels of responsiveness to children's needs (Gelfand & Teti, 1990). As a result, maternal depression has been considered a risk factor for children's development (Abrams, Field, Scafidi, & Prodromidis, 1995; Elgar et al., 2004). Investigators have documented relations between maternal emotional well-being and children's emotional well-being (Forehand & Miller, 1997). According to a theoretical model of mutual influences on maternal depression and child adjustment (Elgar et al., 2004), attachment, child discipline modeling, and family functioning mediates the influences of maternal depression on child adjustment problems. In this light, communication patterns of depressed mothers who may be overly clingy and also may choose to avoid closeness can endanger a child's emotional well-being (Elgar et al., 2004). Consequently, children of depressed parents are more at risk to experience depression (Burt et al., 2005; Forbes, Shaw, Fox, Cohn, Silk, & Kovacs, 2006; Segrin & Flora, 2005).

Self-efficacy. Maternal belief in her own self-efficacy has been found to be related to effective parenting behaviors and children's positive development (Coleman & Karraker, 2000; Coleman, Trent, Bryan, King, Rogers, & Nazir, 2002). Self-concept serves as a protective factor for mental health against economic strains, family conflicts, and parenthood (Pearlin, 1989). A mother's general sense of competence and her perception that she can positively influence those in her life, such as her children, is particularly important for low-income mothers (Raver & Leadbeater, 1999). Mothers who experience a sense of efficacy and competence in their lives communicate positive attitudes and expectations to their children, contributing to feelings of perceived control and perceived efficacy among their children (Rogers, Parcel & Menaghan, 1991). Yet, as Lambert (1999) has argued, much of this previous family research has been focused on mid- to higher-wage earners and most likely cannot generalize to lower-wage earners. Because depression and parental sense of competence are both known to affect parenting behaviors and contribute to child outcomes in the parenting population at-large, it is reasonable to examine the influence of these predictors on mother-adolescent communicative interaction and adolescent's well-being in low-income families.

Parent-child communication. Normatively, youth are challenged with the development of independence from parents during the early adolescent years, as they move toward becoming autonomous, self-sufficient, productive, and competent adults (Allen & Land, 1999). During this transitional period, open and satisfying parent-youth communication are central to healthy adolescent adjustment (Ackard et al., 2006; Brody et al., 2006). For example, open and problem-free parent-child communication is found to positively affect adolescent self-esteem, feeling of happiness, and family satisfaction (Jackson, Bijstra, Oostra, & Bosma, 1998), as well as youth's psychological functioning and behavioral outcomes (Davidson & Cardemil, 2009; Houck,

Rodrigue, & Lobato, 2007; Huizinga, Visser, Van der Graaf, Hoekstra, & Hoekstra-Weebers, 2005; Miller-Day, 2008; Miller-Day & Dodd, 2004). Based on the previous literature, the present study is to investigate the linkage between mother-adolescent communication openness and satisfaction, and adolescents' emotional well-being in low income families. Specifically, two research hypotheses were posed:

H1. Maternal emotional well-being (measured during child's adolescence) directly related to mother-adolescent communication openness and communication satisfaction.

H2. Maternal emotional well-being (measured during child's adolescence) indirectly related to youth emotional well-being via mother-adolescent communication openness and communication satisfaction.

Method

Participants and Procedure

A total of 99 mother-youth dyads were recruited and participated in 2-hour in-depth, in-home interview as part of a larger study examining the determinants of mother-youth relations and their relation to youth adjustment among low-income minority families in a metropolitan city in Pennsylvania. Due to six incomplete responses, the current study included 93 early adolescents (56% girls, $M = 12.03$, $SD = .69$, years) and their mothers for the analysis. A majority of mothers were African American (67.2%) and the small number of Hispanic (13.7%) and European American (13.7%). The household income was below the Federal Poverty Level for all families included in the study.

Measures

Maternal emotional well-being. Maternal emotional well-being was assessed via the mothers' reports on two constructs: 1) maternal depressive symptoms, and, 2) maternal self-efficacy. Depressive symptoms were assessed using the Beck Depression Inventory - Revised (Beck, Rush, Shaw, & Emery, 1979). The 21 item "agree-disagree" scale included items that assessed key symptoms of depression (i.e., including sad affect, apathy, disappointment/guilt, and physical symptoms) ($\alpha = .85$). Maternal perceptions of self-efficacy were assessed using the 62-item Self-efficacy Scale (Sherer, Maddux, & Mercandante, 1982). The current study used 37 items from the original scale which included items that assessed perceived control, personal efficacy, and ego-resiliency (e.g., item, "There are many things that I do well", "I can find a way to get the things I want", "I can be successful in whatever I choose", $\alpha = .86$).

Mother-adolescent communication. Mother-adolescent communication was assessed via both mothers' and youths' reports on the Parent-Adolescent Communication Scale (Barnes & Olson, 1982). For the current study 9 items from the original 20 items were used that assessed openness/disclosure in communication (e.g. item, "When I ask questions, I get honest answers from my child", "I find it easy for me to express most of my true feelings to my child") and satisfaction in communication (e.g. item, "I am very satisfied with how my child and I talk together"). Mothers' items were rated on a 5-point scale (from 1 = strongly disagree to 5 = strongly agree, $\alpha = .74$), yet the adolescent's items were measured on a 4-point scale (from 1 = disagree a lot to 4 = agree a lot, $\alpha = .77$).

Youth emotional well-being. Youth emotional well-being was assessed via youth's reports on two constructs: 1) perceived competence and self-esteem, and 2) depressive symptoms. Perceived competence and self-esteem were assessed using the Self-efficacy Scale (Sherer et al., 1982) using 38 original items scale ($\alpha = .86$). The items (e.g. item, "I believe I can become

whatever I want to become”) were rated on a 4-point scales (from 1 = not at all to 4 = totally). Depressive symptoms were assessed using the Child Depression Inventory (Kovacs, 1992). The 27-item measure included items that measure key symptoms of depression in youth including sad affect, apathy, disappointment/guilt, and physical symptoms. The items (e.g. item, “I feel like crying everyday”, “Things bother me all the time”) were responded to on the 5-point agree-disagree scales ($\alpha = .78$).

Demographics include education, race and marital status (married; divorced/separated; widowed; never married; not married but living with partners).

Results

Ninety three participants who had complete data on all variables were included in the current study. The analysis indicated that mothers’ ($M = 1.46, SD = 0.37$) and youths’ reports ($M = 1.29, SD = 0.20$) on depressive symptoms were not at the ceiling of the scale, and that mothers’ ($M = 3.24, SD = 0.32$) and youths’ reports ($M = 3.21, SD = 0.35$) on self-efficacy were similar. Before creating the composite variable of mother-adolescent communication, we conducted a paired sample t-test to examine difference between mothers’ and youths’ scores and found no significant difference between mothers’ and youths’ scores: $t(87) = -0.67, p > .05$. A composite variable was formed to combine mothers’ ($M = 3.66, SD = 0.53$) and youths’ reports ($M = 1.46, SD = 0.37$) on their perceptions of mother-adolescent communication ($M = 2.98, SD = 0.40$). Three sets of linear regression analyses were carried out to test the research hypotheses. Findings showed that maternal efficacy was only significantly related to mother-adolescent communication ($\beta = 0.33, SE = .14, p < .05, F(6, 62) = 2.51, \text{Adjusted } R^2 = .12, p = .031$). Results also indicated that mother-adolescent communication had a significant and positive association with youth efficacy when controlling for maternal efficacy and demographics ($\beta =$

0.57, $SE = .12$, $p < .001$, $F(6, 65) = 5.21$, Adjusted $R^2 = .26$, $p < .001$), whereas mother-adolescent communication was inversely related to youth depressive symptoms ($\beta = -0.25$, $SE = .07$, $p < .001$, $F(6, 66) = 2.94$, Adjusted $R^2 = .14$, $p = .001$). Because significant effects were detected in the relationships among maternal emotional well-being, mother-adolescent communication and youth emotional well-being, it is reasonable to anticipate the mediating role of mother-adolescent communication on the relationship between maternal emotional well-being and youth emotional well-being (Baron & Kenny, 1986). To test the mediating role of mother-adolescent communication, a bootstrap method was used by looking at indirect (or mediated) effects via mother-adolescent communication with 5000 bootstrapped resamples (MacKinnon, Fairchild, & Fritz, 2007; Preacher & Hayes, 2004, 2008). We determined the statistical significance of the indirect effects using 95% bias-corrected and accelerated confidence intervals (CI) estimated by the bootstrap method. The bootstrap test using 5000 bootstrap re-samples revealed that mother-adolescent communication mediated the relationship between maternal efficacy and youth efficacy, whereas it did not mediate the relationship between maternal depressive symptoms and youth depressive symptoms.

Discussion

As expected, our results do show significant associations between maternal emotional well-being and mother-adolescent communication (Hamilton et al., 1993; Pett, Vaughan-Cole, & Wampold, 1994). That is, high reports of maternal efficacy were positively related to more openness and satisfaction of mother-adolescent communication. This finding shows implication as a mother who perceives herself as highly competent is more likely to engage in open and satisfying communication with her child. Surprisingly, however, maternal depressive symptoms were not significantly related to mother-adolescent communication. This result was not

consistent with previous literature on maternal depression and mother-youth interaction (Gelfand & Teti, 1990; Murray et al., 1996). We speculate that mother's self-efficacy captures the nuance of confidence in effective performance in various contexts, which indeed involves communicative interaction. Thus, mothers with higher reports of self-efficacy are more likely to have open and satisfying communication with her children than mothers with lower levels of self-efficacy.

Contrary to previous research such as Elgar et al. (2004) and Forbes et al. (2006), our study did not find significant relationships between maternal emotional well-being and youth emotional well-being. Surprisingly, neither maternal self-efficacy nor maternal depressive symptoms was directly related to adolescent self-efficacy and depressive symptoms. In this study, it was the mother-adolescent communicative interaction that was significantly consequential for youth and not mothers' general emotional well-being. These data suggest that mothers' self-efficacy was positively linked to open and satisfying communication with sons and daughters and this communication is what affected the adolescents. In other words, communicative interactions between mother and adolescent seem to be more consequential for youth emotional well-being than the direct effect of mother's emotional well-being (Hamilton et al., 1993; Jones et al., 2002a, 2002b).

As expected, we did find an association between mother-adolescent communication and adolescent emotional well-being. Consistent to the previous studies (Houck et al., 2007; Huizinga et al., 2005; Jackson et al., 1998) our findings indicate that mother-adolescent communication openness and satisfaction are important and are significantly related to youth self-efficacy and depressive symptoms. In other words, mother-adolescent reports of openness and satisfaction with communication were linked to higher levels of adolescents' reported self-

efficacy, whereas mother-adolescent communication was related to fewer depressive symptoms for the youth. Although our results revealed that maternal depressive symptoms did not show a significant association with mother-adolescent communication, the quality of communication played a positive role for youth emotional well-being. That is, openness and satisfaction of mother-adolescent communication is a protective factor for youth self-efficacy and depressive symptoms in low income households. This found to be true when we examined the indirect effect of maternal emotional well-being on youth emotional well-being via mother-adolescent communication. The analysis suggested that mothers who reported high levels of self-efficacy were more likely to have open and satisfying communication with her children, which in turn affected youth self-efficacy. This mediation effect implicates that mother's self-efficacy shows positive influences on youth self-efficacy throughout communication openness and satisfaction. In light of these results, we suggest that family scholars, intervention scientists, and practitioners consider the communicative aspects of mother-youth relations when trying to understand ecological contexts within which children grow or to improve the emotional development of youth, specifically in low-income households.

The findings of this research are important, but the study is not without its limitations. First, the sample size for this study was relatively small, limiting the ability to detect modest effects. As a result there were a number of associations that were trend level and, although they may have approached significance with a larger sample, we did not have sufficient power to detect them. Second, because this study was cross-sectional we do not draw any conclusion implying causality or any causal relations; we only speak to the unique associations among the variables. Finally, this present study measured two qualitative aspects of mother-adolescent communication. Although openness and satisfaction capture the nuance of the quality of

communication, it limits the overarching value of quality communication and its effects on youth emotional well-being. Thus it is needed to further investigate various aspects of communication such as contents of talks and youth developmental outcomes in low income families.

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Figure 1. Conceptual Model of Mother-Adolescent Communication and Youth Emotional Well-Being with Maternal Emotional Well-Being on Mother-Adolescent Communication.

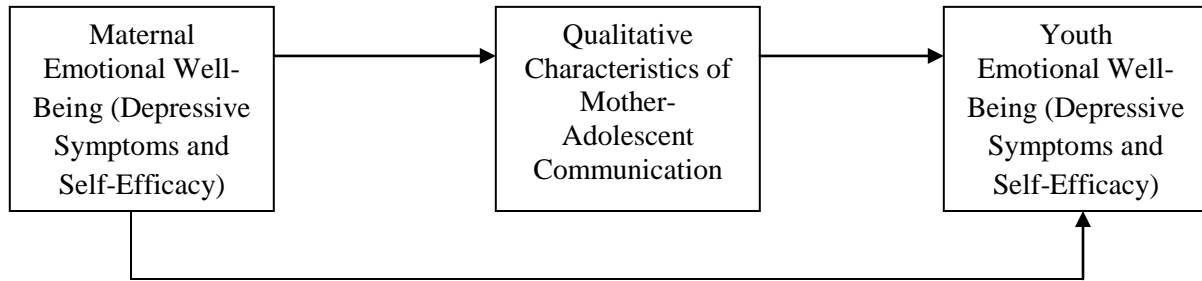


Table 1

Hierarchical Regression Analyses for Testing the Relationships among Maternal Well-Being, Child Well-Being and Mother-Adolescent Communication

<i>Parameter Estimates</i>	<i>Mother-Adolescent Communication</i>		<i>Youth Emotional Well-Being</i>			
			<i>Youth Self-Efficacy</i>		<i>Youth Depressive Symptoms</i>	
	β	<i>S.E.</i>	β	<i>S.E.</i>	β	<i>S.E.</i>
Model I						
<i>Block 1</i>						
Education I (High School Graduate vs Less HS Graduate)	-.15	.09	–	–	–	–
Education II (Some College/Associate vs Less HS Graduate)	.08	.12	–	–	–	–
Race (Black/African American vs Non-Black)	.00	.10	–	–	–	–
Marital Status (Married vs Not Married)	.04	.08	–	–	–	–
<i>Block 2</i>						
Maternal Depressive Symptoms	-.03	.12	–	–	–	–
Maternal Self-Efficacy	.33*	.14	–	–	–	–
Model II						
<i>Block 1</i>						
High School Graduate (vs Less HS Graduate)	–	–	.13	.08	–	–
Some College / Associate Degree (vs Less HS Graduate)	–	–	.15	.11	–	–
Race (Black/African American vs Non-Black)	–	–	.04	.08	–	–
Marital Status (Married vs Not Married)	–	–	-.03	.09	–	–
<i>Block 2</i>						
Maternal Self-Efficacy	–	–	-.00	.13	–	–
Mother-Adolescent Communication	–	–	.57***	.12	–	–
Model III						
<i>Block 1</i>						
High School Graduate (vs Less HS Graduate)	–	–	–	–	-.07	.05
Some College / Associate Degree (vs Less HS Graduate)	–	–	–	–	-.04	.07

Race (Black/African American vs Non-Black)	–	–	–	–	.02	.05
Marital Status (Married vs Not Married)	–	–	–	–	-.01	.06
<i>Block 2</i>						
Maternal Depressive Symptoms	–	–	–	–	.06	.06
Mother-Adolescent Communication	–	–	–	–	-.25***	.07

Note. Regression coefficients in the table are unstandardized estimates. Education, race and marital status are dummy-coded variables.

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