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THE INFLUENCE OF MARITAL SATISFACTION AND PARENTING STYLES ON CHILD DEPRESSIVE SYMPTOMS: AN EXPLORATION OF ETHNIC DIFFERENCES

A Thesis

Presented to the

Faculty of

California State University,

San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Arts

in

Psychology:

Child Development

bу

Briawna Simone Williams

December 2011

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Approved by:

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ABSTRACT

The purpose of this study was to examine the associations between marital satisfaction, parenting styles (i.e., authoritarian and permissive), and child depressive symptoms across ethnic groups (i.e., European Americans, African Americans and interracial families). Data from a 5-year longitudinal study, the Family Health Project, were used. The sample consisted of ninety-three married couples and their children from the Puget Sound area of Washington state. Contrary to expectations, marital satisfaction was unrelated to child depressive symptoms. No ethnic differences were found in the association between the authoritarian parenting style and child depressive symptoms. The permissive parenting style was additionally unrelated to child depressive symptoms across ethnic groups. However, parental gender differences were examined and husbands' authoritarian parenting styles were associated with child depressive symptoms. Future research is necessary to better understand this topic.

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CHAPTER ONE

INTRODUCTION

Several factors associated with parenting predict internalizing symptoms in children (Hughes & Gullone, 2010; Ha, Overbeek, Vermulst, & Engels, 2009; Albow, Measelle, Cowan, & Cowan, 2009). In particular, parental rejection, couple conflict, and lack of parental warmth have been linked to child internalizing symptoms (Yahav, 2006; Ablow et al., 2009; Milevsky, Schlechter, Netter, & Keehn, 2007). Internalizing symptoms are conceptualized as a disturbance in mood or emotion, which could lead to anxiety and depression (Hughes & Gullone, 2008). Anxiety disorder occurs in about 20% of adolescents, and is often a precursor for depression (Essau, Conradt, & Petermann, 2000; Hughes & Gullone, 2008). Depression, anxiety, and social withdrawal are commonly used to assess internalizing symptoms in children; this study will focus specifically on depressive symptoms. Depression is associated with maladjustment and has an adverse effect on child social and emotional well-being.

The incidence of depression has gone up over time for children and adults across various ethnic groups (Oquendo et al., 2001; Kleinman, 2004). Approximately ten to

fifteen percent of children experience moderate to severe levels of depressive symptoms throughout their childhood (Nolen-Hoeksema, Seligman, & Girgus, 1992), and 14-25% of children encounter major depression before adulthood (Kessler & Walter, 1998). The Gallup-Healthways Well-Being Index, which is a nationally representative source, indicates that 18% of European Americans, 16% of Latino Americans, 15% of African Americans, and 9% of Asian Americans report having ever been diagnosed with depression (Phelham, 2009). The meaning of "depression" varies across ethnic groups (Kleinman, 2004). For example, in Asian cultures, depression is more physical than psychological and may include fatigue, dizziness, and even physical pain (Kleinman, 2004).

Researchers are interested in studying depression because it is associated with adverse outcomes including suicidal thoughts, drug use, and academic underachievement. In the current study, two interpersonal factors will be examined for their association with depressive symptoms: parents' marital satisfaction and parenting styles. These variables will be investigated because they greatly predict a child's well-being and health (Ha et al., 2009).

The topic will specifically be explored among ethnic minority and intercultural families because European American findings may not generalize to diverse populations (Jambunathan, Burts, & Pierce, 2000; Ruiz, Roosa, & Gonzales, 2002; Ang, 2006). Few researchers have included ethnic minorities in their samples, so research in this area is needed. It is estimated that by 2050, the U.S. will be comprised of approximately 8% Asian Americans, 14% African Americans, and 25% Latino Americans (U.S. Bureau of the Census, 1997a). Todd and McKinney (1992) found that approximately 50% to 60% people have considered interracial dating, and at least 3% of the population is involved in a multiracial marriage (U.S. Census Bureau, 2002). With growing numbers of ethnic minorities and multiracial families in the U.S., it is becoming increasingly important to examine family processes with diverse samples.

CHAPTER TWO

REVIEW OF THE LITERATURE

In this section, literature will be presented pertaining to marital satisfaction, parent-child interactions, including parenting styles, and the relationship of these variables to depressive symptoms in children. Marital dissatisfaction has been linked to depressive symptoms in children (Katz & Gottman, 1993), and parenting styles are known predictors of child insecurities and depressive symptoms. Given that the majority of studies on this topic have focused on European Americans, this section will provide a comprehensive review, but focus particularly on ethnic variation, when such studies are available. The review begins with a definition of marital satisfaction and then addresses some of the key predictors of satisfaction including financial factors, marital conceptualizations, and communication patterns.

Marital Satisfaction

Marital satisfaction refers to the level of happiness in a marital relationship (Kamp Dush, Taylor, & Kroeger, 2008). It is an important construct to examine because dissatisfaction is a key predictor of divorce (Kamp Dush

et al., 2008). Marriage today is primarily based on personal fulfillment or satisfaction, rather than constraint factors such as financial necessity (Coontz, 2005). One reason for the shifting foundations of marriage (i.e., since the 1960s) pertains to the large-scale participation of women in the workforce. Women no longer need marriage for financial survival, the way they did in the past, which has resulted in a greater ability to terminate unhappy unions (Coontz, 2005). As marital dissolution became more common over the years, the stigma associated with divorce declined. Therefore, marriages today are likely to remain intact when satisfaction is high, and dissolve when satisfaction is low (Coontz, 2005). Although a majority of Americans will eventually marry, some individuals feel as though it is difficult to maintain happiness in a marriage (Amato, Johnson, Booth, & Rogers, 2003). A key predictor of marital satisfaction is a couples' financial well-being.

Financial Influences on Marital Satisfaction

Compared to the past, men and women are now more likely to receive a college education (Amato et al., 2003). Being college educated is associated with having a higher income, higher self-esteem, better communication skills, and a greater sense of personal control (Amato et

al., 2003). Overall, education increases the likelihood that both partners will work and that the wife will continue to work after having children. During the transition to parenthood, the mother's decision to stay home to care for young children can result in financial strain, which may negatively impact marital satisfaction (Amato et al., 2003). When mothers return to work, they may also experience marital conflict as a result of feeling obligated to work out of financial necessity (Amato et al., 2003).

Despite the general benefits of education on financial well-being and marital satisfaction, ethnic differences may exist. Adelmann, Chadwick, and Baerger (1996) found that after controlling for education, African Americans demonstrated less marital satisfaction than European American couples. Therefore, ethnic groups may vary in terms of the factors influencing martial satisfaction. Cultural differences in the conceptualization of marital satisfaction, and/or in the reporting of satisfaction may also explain discrepant findings across ethnic groups.

The relationship between financial stability and marital satisfaction can partially be explained by spousal roles in the home. Money is associated with power and the

more women contribute to household finances, the more input they are able to exert in family decision-making (Amato et al., 2003). Compared to the past, household chores are now more likely to be shared between spouses because of the increase in dual-earner families. Amato et al., (2003) found that marriages are more egalitarian and satisfying when household duties are shared. When husbands and wives earn relatively equal income, husbands tend to be more involved with child care and willing to coordinate their work with wives in order to maintain financial security (Cabrera, Tamis-LeMonda, Bradley, Hofferth, & Lamb, 2000). Researchers who have examined ethnic variation in shared roles, or egalitarianism, find that power structures differ across ethnic groups. Latino men are often the more dominant figures and decision-makers in the home (Negy & Snyder, 1997). As the husband and wife become more acculturated in the United States, these marital roles are likely to change, and egalitarianism becomes more the norm (Contreras, Hendrick, & Hendrick, 1996; Negy & Snyder, 1997). Using an acculturated Latino sample, McLoyd, Cauce, Takeuchi, and Wilson (2000) found that marital satisfaction was higher when household responsibilities were shared between husbands and wives. Asian cultures also tend to be patriarchical, especially

when less acculturated to the U.S., with wives preferring that their husbands exert control in the home (Epstein, Chen, & Beyder-Kamjou, 2005). However, Asian Americans with a high socioeconomic status (SES) tend to espouse more egalitarian relationship values and norms (Epstein et al., 2005).

Researchers have also identified differences between European and African American couples. First, a gender hierarchy of power is more common among European Americans, whereas African American couples are more likely to adopt egalitarian practices (Orbuch, Veroff, & Hunter, 1999). African American men value women who are independent, and prefer partners who are active, fair, and supportive in their family roles, such as cooking, cleaning, and child care (Orbuch et al., 1999; McLoyd et al., 2000).

Marital Conceptualizations

In addition to financial factors, satisfaction is also influenced by marital conceptualizations, which refer to attitudes, beliefs, and expectations about the marriage. Ideally, partners develop shared schemas about important topics such as gender role norms, division of labor, the role of in-laws, and the best way to resolve marital conflict (VanLaningham et al., 2001). Wieling

(2003) examined interracial partnerships and found that a primary determinant of marital success was shared interests. It is sometimes difficult to maintain shared conceptualizations because individuals' views change throughout the course of marriage (VanLaningham et al., 2001). People typically marry at a stage of high compatibility with their significant other; however, life experiences may cause partners to diverge in their attitudes and beliefs (VanLaningham et al., 2001). As changes occur, marital satisfaction could be affected because partners may no longer be able to meet each other's needs.

Unmet needs occur for a variety of reasons including having overly high expectations. If a marriage falls short of meeting a spouse's high standards, disappointment and dissatisfaction may result (McNulty & Karney, 2004).

Individuals who believe that marriage should last forever are more likely to work at resolving conflicts and problems because they perceive of no other means for achieving satisfaction (i.e., divorce is not an option)

(Amato et al., 2003). Individuals who approve of divorce are more likely to experience conflict and lower levels of marital satisfaction.

For interracial relationships, an additional factor, other than need fulfillment affects compatibility and satisfaction: racial identity. Leslie and Letiecq (2004) define racial identity as "the development of pride in one's race or culture that doesn't diminish or devalue other races and culture" (p. 570). Therefore, interracial couples with high marital satisfaction tend to be aware of their racial differences and devote effort toward maintaining their marriage. When racial identity is not well-established, marital conflict and dissatisfaction are more likely (Leslie & Letiecq, 2004).

When investigating marital satisfaction, it is important to consider the couple's marital cognition, which refers to how partners think about the relationship. Epstein et al. (2005) define marital cognition according to five components, which independently predict relationship outcomes: attribution, expectancy, selective attention, assumptions, and standards. Attribution refers to how people perceive the good and bad in their relationship (Epstein et al., 2005). Expectancy refers to a belief in the occurrence of particular events, or what a person expects to happen in the future (Epstein et al., 2005). Selective perceptions are the elements of a relationship that partners choose to pay attention to.

Assumptions refer to beliefs about the relationship or partner, as well as the individual's perception of the relationship (Epstein et al., 2005). Lastly, standards refer to a person's relationship expectations including gender role norms or communication patterns (Carrere, Buehlman, Gottman, Coan, & Ruckstuhl, 2000). Attribution, expectancies, and selective perceptions are influenced by moment-to-moment information processing, meaning they are continuously changing, whereas assumptions and standards are the stable concepts people develop about their marriage (Epstein et al., 2005). These cognitive components predict whether partners communicate positively or negatively with each other (Epstein et al., 2005).

Communication

A final variable that will be reviewed in terms of its relation to marital satisfaction is communication. Happy and unhappy couples typically differ in the delivery, rather than content, of their communications (Gottman et al., 1976). Communication consists of two components that each relates to satisfaction: nonverbal and verbal.

Miller and Perlman (2009) identify six components of nonverbal communication: facial expressions, gazing, body movement, touch, interpersonal distance, and paralanguage.

These mechanisms enable information to be communicated without words. Facial expressions are universally understood, and convey the same meanings cross-culturally. For instance, the emotions of happiness, sadness, fear, surprise, and anger are recognizable solely by looking at someone's face (Keltner & Shiota, 2003). Due to the universal meanings conveyed by facial expressions, some people may try to control their expression to disguise true emotions. The modification may include minimizing or intensifying the expression. Other ways of modifying emotion include neutralization or masking. In this case, people show no emotion through their face (i.e., neutralization) or show a different emotion from what they actually are feeling (i.e., masking) (Miller & Perlman, 2009).

Verbal communications pertain to the words used in and the timing of conversations. There are two elements involved in verbal communication, breadth and depth (Altman & Taylor, 1973). Breadth refers to the variety of topics that are discussed. Depth refers to the more personal nature of communications such as asking about where someone grew up, whether they have children, etc. This entire process is called social penetration, which is the process of disclosing personal information to other

people (Altman & Taylor, 1973). As the information shared between two individuals becomes more personal, their relationship becomes more intimate (Miller & Perlman, 2009).

Gender differences exist with respect to verbal communication. Women tend to be more sensitive when talking and use more expressions of uncertainty (e.g., like, maybe, seems), which are less likely to be used by men (Berger, 1994). Women also tend to ask more questions and talk about their feelings more than men. Men tend to be more confident, dynamic, and assertive in conversations (Mulac, 2006).

In terms of ethnic variations, Asian and European cultures generally differ with respect to both nonverbal and verbal communication. In Asian cultures, partners enact fewer activities together, and verbal communication is less frequent than in European cultures (Epstein et al., 2005). Epstein et al. (2005) examined the association between relationship standards and marital satisfaction in Chinese and American couples. The participants were 118 middle-class Chinese couples from Shanghai and 95 U.S. couples from suburban Maryland. The researchers found that nonverbal and verbal communications predicted satisfaction for Asian individuals, whereas only verbal communication

was associated with satisfaction for European Americans (Epstein et al., 2005). For example, Asian individuals were more likely to communicate a message of love through actions or task completion, rather than saying, "I love you."

Positive and Negative Communication Patterns

All couples experience periods of disagreement and the manner in which they deal with conflict is predictive of marital satisfaction. Partners can use different words to convey disapproval or disagreement and the choice of words impacts the manner in which a message is perceived. For instance, when describing a behavior that is upsetting, I-statements can be used to describe feelings and convey a message with precision (Miller & Perlman, 2009). This strategy enables partners to identify their feelings about a particular behavior or incident and avoid ambiguity. It is destructive to use words like, "you never" or "you always" when trying to describe an upsetting behavior. Another communication technique that is associated with positive outcomes is active listening. This involves being attentive so that a partner knows their message is understood (Miller & Perlman, 2009).

Summary

As this section has demonstrated, marital satisfaction is predicted by a variety of factors including financial status, marital conceptualizations, and communication patterns. Each of these factors tends to be included in assessments of marital satisfaction.

However, few researchers have investigated these predictors among ethnic minorities and/or in interracial couples. Despite a dearth of research on ethnic minority families, the existing studies demonstrate differences based on ethnic background, making it evident that more research on this topic is needed.

Parenting Styles

The quality of a couple's relationship predicts the quality of their parent-child relationships (Erel & Burman, 1995). Specifically, marital satisfaction enhances the parents' self-esteem, which then positively influences their child caretaking abilities (Cabrera et al., 2000). When couples have satisfying and stable relationships, parents are likely to provide responsive, supportive, and involved care (Cowan, Cowan, Schultz, & Heming, 1994). Different parenting styles predict different child outcomes. Another factor influencing child outcomes is the

manner in which children perceive their parents' care, and perceptions are likely to vary by ethnic group. This section reviews the literature on parenting styles and child outcomes, and addresses cultural differences on the topic.

Baumrind's Parenting Styles

Parenting styles refer to the overall emotional atmosphere of the parent-child relationship, which is evidenced through parenting behaviors (Jackson-Newsom, Buchanan, & McDonald, 2008). Baumrind's (1991) parenting style framework is commonly used by developmental researchers. The framework consists of three parenting styles: authoritative, authoritarian, and permissive. Each style varies based on two dimensions: responsiveness and demandingness (Maccoby & Martin, 1983). Responsive parents are accepting, involved, and use good communication strategies with their child. Demandingness refers to whether parents monitor and supervise their child, set limits, and provide appropriate disciplinary action (Guilamo-Ramos et al., 2007).

Authoritative parents are highly responsive and demanding. These parents exhibit a high degree of warmth, have clear rules, and open communication with their child. They also exert a high degree of behavioral control and a

low level of psychological control (Jackson-Newsom et al., 2008). For example, they set limits, but are willing to listen to their child's views and compromise if necessary. Research has shown that children who are raised with authoritative parents demonstrate better social competence, have fewer internalizing and externalizing problems, have higher self-regulatory skills, and experience greater academic success (Patock-Peckham & Morgan-Lopez, 2009).

Authoritarian parents are low on responsiveness and high on demandingness. This parenting style consists of low warmth, and high behavioral and psychological control (Jackson-Newsom et al., 2008). These parents set inconsistent rules that are non-negotiable, use harsh disciplinary strategies, and the children have little to no decision-making power (Jackson-Newsom et al., 2008). The child may feel rejected by his/her parents because of the lack of warmth and neglectful behavior that the parents demonstrate. Children with authoritarian parents tend to be at increased risk for dependency, aggression, emotional instability, and low self-esteem (Yahav, 2006; Patock-Peckham & Morgan-Lopez, 2009).

Lastly, permissive parents are low on responsiveness and demandingness. They demonstrate low behavioral and

psychological control. These parents display warmth but lack structure and discipline with their child. They believe their child should make decisions on their own without parental input, which leads the child to become impulsive and lack regulatory skills (Patock-Peckham & Morgan-Lopez, 2009).

The authoritative style is associated with optimal child outcomes. Simon and Conger (2007) examined mother and father differences in parenting styles. Their work demonstrated that researchers have typically focused on mother-child relationships in studies of parenting styles. When fathers have been included, researchers commonly include a computed average of the two parents' scores in their analyses of parenting styles. Simon and Conger (2007) found that if only one parent exhibits an authoritative parenting style, they are able to compensate for the less competent parent. Additionally, if parenting styles are complimentary, with one parent being permissive and the other authoritarian, an authoritative style can result, because one parent is responsive and the other is demanding (Simon & Conger, 2007).

In the U.S., authoritarian parenting is generally perceived as negative by European Americans. However, for people with different historical and cultural backgrounds,

this type of parenting style may be perceived as more desirable. Despite the cultural diversity within the U.S., most studies on parenting styles consist of middle-class European American participants (Jambunathan, Burts, & Pierce, 2000; Ruiz, Roosa, & Gonzales, 2002; Ang, 2006). It is important for researchers to examine cultural variation because the few studies that have used diverse samples find that parenting styles and practices may vary based on cultural beliefs, ethnic background, SES, and the number of years a family has lived in the U.S. (Jambunathan et al., 2000; Medora, Wilson, & Larson, 2001).

Asian Americans are more likely than European

Americans to use authoritarian parenting styles. Asian

parents tend to enforce high control and restriction, and

expect unquestionable obedience from their children (Chao,

1994). Compared to individuals from Western cultures,

Asians perceive authoritarian parenting practices more

favorably. Chao (1994) found that the unquestionable

obedience expected by parents demonstrates to children

that their parents care, are concerned, and have a desire

to be involved in their life. The act of being submissive

to parents is called chiao shun, meaning training (Aug,

2006). Chiao shun involves high parental control and

monitoring in order to provide success for the child and family. Another phrase that the Asian cultures live by is guan, which means to govern, love, and care for (Ang, 2006). According to this principle, the mothers set expectations and limitations, and the fathers are primarily responsible for disciplinary action (Jambunathan et al., 2000).

Latinos tend not to adhere to one particular parenting style and instead are likely to display all three styles (Hill, Bush, & Roosa, 2003). The variations could be explained by the diversity in this group's immigration history, income, and acculturation level in the U.S. (Hill et al., 2003). Within the culture, there are four constructs that can be used to describe family processes: Family of love, sympathy, personal relationships, and respect (Guilamo-Ramos et al., 2007).

Family of love refers to the beliefs, norms, and values of how the family structure should be represented, as well as the parental practices that should be displayed. Family of love is illustrated through the bond, loyalty, and strong relationships with extended family members (Guilamo-Ramos et al., 2007). It helps explain why within the Latino culture, children are likely to have multiple family members involved in child-rearing (Ruiz et

al., 2002). Sympathy involves keeping peace, being polite, and showing respect to elders, strangers, and oneself, whereas, personal relationships pertain to the inner person and the pride one should have for their culture (Guilamo-Ramos et al., 2007).

African Americans are more likely than European

Americans to adopt an authoritarian parenting style with

their children. In fact, the authoritarian parenting style

tends to have a negative effect on European American

children, yet may have a positive effect on African

American children (Jackson-Newsom et al., 2008). Physical

punishment is more common in African American families,

but compared to European Americans, African American

children are less likely to suffer adverse psychological

effects from this disciplinary style (Smetana, 2000).

These ethnic differences are likely related to the manner

in which parents display the disciplinary action (e.g.,

corporal punishment), and the content of messages (e.g.,

for the safety of the child) that accompany the discipline

(Smetana, 2000).

In the U.S., African Americans are over-represented among those living in poverty (Marger, 2009). Therefore, they are more likely than European American families to live in impoverished and violent neighborhoods.

Considering the dangerous environments in which many African American families reside, physical discipline is often used as a protection strategy, which is characteristic of authoritarian parenting styles. African American children are more likely than European American children to interpret their parents' authoritarian parenting styles as a form of concern and care for their well-being (Jackson-Newsom et al., 2008). Jambunathan et al., (2000) found that African American parents demand respect from their children, and have a focus on kinship, including family protection. Due to the neighborhoods that some African American families reside in, it is the parents' duty to protect their children, and the use of strict, controlling parenting is one method for achieving this goal (Jackson-Newsom et al., 2008). In comparison, African American parents from middle to high social classes are more likely to allow their children to exert decision making power; however, they still demand parental authority and obedience in the home (Smetana, 2000).

Interracial couples are more likely than intra-racial couples to exhibit disparate beliefs and practices related to parenting styles (Crippen & Brew, 2007). Quah (2003) examined interracial marriages and found that parenting roles, parent-child attachment, and disciplinary

strategies were culturally influenced and tended to differ across couple members. Crippen and Brew (2007) found that interracial couples were at risk for disagreement through various stages of their child's development. Disciplinary strategies were a common source of disagreement early on, whereas the discussion of racial identity tended to elicit conflict as the children grew older. However, there are benefits associated with interracial families as well. Children gain unique insight on issues such as racism, harassment, and discrimination. They may also adopt aspects of each parent's ethnic background into their own identity, thereby forming a rich self-concept. It is beneficial for spouses to reduce parenting conflict derived from their ethnic differences by discussing childrearing beliefs before the child becomes part of the household (Crippen & Brew, 2007).

Father and Child Relationships

Historically, fathers have served as the financial providers of the family, and left the childrearing responsibilities to mothers. Over time, fathers have gradually become more involved in the childrearing process (Carlson, 2006; Marsiglio, Amato, Day, & Lamb 2000).

Yeung, Sandberg, Davis-Kean and Hofferth (1998) found that compared to mothers, fathers spend approximately 30-40% as

much time with children, and on weekends 87% more time than mothers. Although these statistics demonstrate father involvement, the quality, rather than quantity of time spent with children is most important. According to Lamb (2004), quality parenting is characterized by father accessibility, engagement, and responsibility. Each of these characteristics contributes to optimal child development. Ideally, fathers should also become involved in their child's social organizations. Father involvement in their child's sport teams, parent-teacher conferences, and even friendships offer opportunities for quality interactions (Marsiglio et al., 2000). Overall, high-quality father-child interactions help reduce the risk of child depression and delinquency, and increase the child's self-esteem (Amato & Rivera, 1999).

Summary

The literature reviewed in this section demonstrated that authoritative parenting tends to provide the child with the greatest benefits, particularly within European American families. Authoritarian and permissive parenting styles are associated with more negative child outcomes, but some ethnic variation exists. Compared to European Americans, Asian and African American children tend to experience more positive outcomes from the authoritarian

style. It is important to note that a majority of the parenting research has focused on maternal interactions with children, and failed to include fathers in their samples and/or analyses. In order to address this limitation, the current study will evaluate the association between mothers' and fathers' parenting styles and child depressive symptoms.

Child Depressive Symptoms

Most people experience low levels of depressive symptoms in their life. However, some individuals experience them often and with great intensity, which would classify as a disorder (Hughes & Gullone, 2008). Children with depressive symptoms typically encounter disruptions in their social and emotional well-being (Hughes & Gullone, 2008). They are more likely to experience low self-esteem, poor academic achievement, early experimentation with drugs, and suicide attempts (Nolen-Hoeksema et al., 1992; Brock & Lawrence, 2008; Zimet & Jacob, 2001).

Marital Satisfaction and Child Depressive Symptoms

Marital conflict is an indicator of dissatisfaction and a majority of studies on child outcomes have examined the influence of conflict. This section will focus on

marital conflict as it relates to child depressive symptoms. Marital conflict itself does not necessarily predict maladjustment behaviors in children (Fincham, 1994). Rather, a child's well-being is affected when marital conflict is particularly intense and frequent (Zimet & Jacob, 2001). Amato (2003) found that children of divorced families were better socially and emotionally adjusted than children from high conflict families, which supports the idea that exposure to intense conflict is more detrimental to children than divorce (unless the intense conflict persists post-divorce).

Zimet and Jacob (2001) investigated marital conflict and were able to predict the likelihood of child maladjustment. They examined four dimensions of conflict: frequency, intensity, content, and resolution. Frequency referred to how often the conflict occurred. Couples who were involved in daily conflict demonstrated inappropriate social behavior to their child, which increased the risk of child depressive symptoms (Zimet & Jacob, 2001). Intense martial conflict, such as when physical violence is used, can also lead to the development of social and emotional problems in children (Grych, Wachsmuth-Schlaefer, & Klockow, 2002). The content of the martial conflict refers to the topic of conversation. When

the conflict pertains to the child, the child may experience feelings of helplessness, fear, and low self esteem (Zimet & Jacob, 2001). A sense of depression and guilt could also develop if the child blames themselves for their parents' conflict (Albow et al., 2009). Lastly, when the conflict is unresolved there are negative repercussions for the child, such as distress, anger, and depression because the child seeks to regain the state that existed prior to the conflict (Davis & Cummings, 1994).

The degree to which marital conflict affects the child's development is at least partly determined by how the child perceives and interprets the conflict (Ablow et al., 2009). Children are able to assess dimensions of conflict, such as frequency or intensity (Ablow et al., 2009). When children perceive the parental conflict to be threatening, depressive symptoms become more likely (Grych, Fincham, Jouriles, & McDonald, 2000). In such cases, the child may begin to feel as though they have caused the conflict (Ablow et al., 2009).

The child's cognitive processing of the conflict also determines how they feel and whether depressive symptoms will emerge (Ablow et al., 2009). A child's prior experience with parental conflict influences their

judgment of the current conflict, because specific behaviors can serve as primers to instigate an adverse reaction (Grych & Fincham, 1990). Davies, Myers, Cummings and Heindel (1999) examined parental conflict and child responses. They studied 112 predominately European American children between the ages of 6 to 19 years old and found that a child's conflict history was associated with emotional insecurities. Exposure to parental conflict caused children to alter their reactions to perceived threat and engage in avoidance behaviors when they felt threatened.

In general, children use either emotion or problem focused responses for coping with marital conflict (Schermerhorn, Cummings, DeCarlo, & Davies, 2007). Emotion focused responses involve coping mechanisms that regulate reactions (Grych & Fincham, 1990). For example, a child may change the negative affect to positive affect by focusing on the fact that their father did not hit their mother during the argument. These children may also alter their interpretation of the event. For example, the child may formulate a belief that their parents are not yelling because they are angry, but because they are hard of hearing. Problem focused responses occur when the child attempts to intervene or distract their parents during the

conflict. Davies et al. (1999) found that children who are exposed to frequent marital conflict adapt to the situation using habituation. Habituation involves decreasing responsiveness after a repetition of events; therefore, the more often parental conflict occurs, the less likely children will have intense responses. Children with constant exposure to marital conflict are compromised and use more problem focused and fewer emotion focused responses (Zimet & Jacob, 2001).

If children feel as though the conflict is continuous and global, they are more likely to experience low self-esteem and have poor communication skills with their parents (Grych & Fincham, 1990). Younger children tend to blame themselves for their parents' discord and are therefore more likely to intervene. They tend to feel as though they are responsible for their parents' resolution of the problem and will blame themselves if the issue remains unresolved (Fincham, 1994).

The age of the child is predictive of their ability to cognitively understand marital conflict, but children of all ages can experience maladjustment due to marital discord (Zimet & Jacob, 2001). McDonald and Grych (2006) found that children younger than seven years old did not have the cognitive ability to comprehend their parents'

conflict. They concluded that exposure to marital conflict has the greatest effect on development once the child is seven years and older. However, Ablow, Measelle, Cowan, and Cowan (2009) used an innovative technique for assessing younger children, the Berkeley Puppet Interview (BPI), and found that children as young as four and a half years old are capable of interpreting different aspects of their family environment, including marital conflict. The way in which child maladjustment was manifested tended to vary by age. Grych and Fincham (1990) found that young children demonstrated maladjustment in the form of behavioral problems, such as throwing tantrums and being disobedient, whereas older children were more likely to experience internalizing symptoms such as depression.

Parenting Styles and Child Depressive Symptoms

In addition to marital conflict, depressive symptoms may also result from the type of parenting style used with the child. It is well established that authoritative parenting styles elicit positive child outcomes; therefore, this section explores how the other two parenting styles, authoritarian and permissive, relate to depressive symptoms. As in the previous section on marital conflict, the child's perception and interpretation of the

interaction is a crucial determinant of whether depressive symptoms will emerge.

Recall that the authoritarian parenting style involves high behavioral and low psychological control (Jackson-Newsom et al., 2008). With this style, the child may feel overprotected because they are not allowed to make decisions and their autonomy is stifled (Patock-Peckham & Morgan-Lopez, 2008; Yahav, 2006). Yahav (2006) examined the effects of parenting styles on internalizing/externalizing symptoms using a sample of 159 children between the ages of 10-17 years. The families were middle-class and recruited from a family therapy clinic. The participants' ethnicities were not reported. Yahav (2006) found that internalizing and externalizing symptoms were most likely to occur when parents were overprotective. However, the children with internalizing symptoms perceived themselves as being less overprotected than the children with externalizing symptoms. In general, children who consider their parents' behavior to be overprotective are more likely to feel incapable, lack confidence, and develop anxiety and depressive symptoms (Patock-Peckham & Morgan-Lopez, 2008; Yahav, 2006). With time, there is a possibility that a sense of helplessness may also develop. Helplessness involves feeling that one

has minimal control over life events and that it is better to give up when presented with threatening circumstances (Nolen-Hoeksema et al., 1992).

Permissive parenting styles involve low behavioral and psychological control. Parents who use this style encourage children to be free-spirited and autonomous. As a result, parents engage in minimal parenting (Yahav, 2006). Children who experience this style are likely to feel a sense of parental rejection, which results from a lack of warmth and affection and/or neglect and inattentiveness (Yahav, 2006). Children who experience parental rejection may feel disconnected from their parents, causing them to internalize their emotions (Rohner, 2004). Yahav (2006) found that parental rejection was significantly associated with both internalizing and externalizing symptoms in children. However, maternal rejection specifically led to high levels of externalizing symptoms. Oliver and Whiiffen (2003) examined the impact of parenting perceptions on depressive symptoms and found that paternal rejection was linked to internalizing symptoms (i.e., depression) in males.

Research addressing the relationship between marital conflicts, parenting styles, and depressive symptoms among ethnic minority families is limited. Loukas and Prelow

(2004) examined internalizing and externalizing symptoms among 521 Latino adolescents. They found that a positive mother-child relationship was associated with low incidence of internalizing and externalizing symptoms in children. Even for low-income families, a positive mother-child relationship helped protect the child from negative outcomes.

Vendlinski, Silk, Shaw, and Lane (2006) investigated the association between family processes and child depression for African and European Americans. Their study specifically examined the relationship between child rearing disagreements and depression, and parent-child openness and internalizing symptoms. They found that child-rearing disagreements were associated with depression in European Americans, but not African Americans (Vendlinski et al., 2006). They also found that for European Americans, lower levels of depression existed when parent-child relationships were characterized by a high degree of openness. In comparison, African American families who demonstrated parent-child openness were at greater risk for child depression (Vendlinski et al., 2006). These findings indicate that cultural differences exist between European and African Americans, particularly in relation to communication strategies and child outcomes.

Summary

In the preceding two sections, literature was reviewed pertaining to the effects of marital conflict and parenting styles on child depressive symptoms. Severe marital conflict and extreme parenting styles (i.e., authoritarian or permissive) contribute to depressive symptoms in children (Erel & Burman, 1995; Yahav, 2006; Zimet & Jacob 2001). The current study examines the relationship between marital satisfaction and parenting styles with depressive symptoms for children in ethnic minority and multiracial families. As noted, a majority of studies have used European American participants, and the few researchers who have investigated this topic among ethnic minorities found important differences. In the following section, systems theory will be reviewed because it helps explain how subsystems such as spousal and parent-child relationships affect the child.

Theoretical Framework

Systems Theory

"Systems theory is useful for the study of family processes" (Bigner, 2006, pp. 40-45). It is particularly

helpful for guiding the present investigation, which examines the relationship of marital and parental processes on child outcomes. This section discusses the core assumptions and concepts of systems theory.

Assumptions

There are three assumptions that pertain to systems theory. First, family members are assumed to be interconnected (White & Klein, 2008). If changes occur with one member of the family, the entire family is assumed to be affected by the change. Therefore, changes within the marital relationship could affect the parent-child relationship. For example, parenting may suffer because the couple members are dissatisfied with their relationship, which would then affect the parent-child relationship. The second assumption refers to wholeness, or the idea that members of a family are interdependent and part of a larger system. It is impossible to study an individual family member by her or himself, because to gain an understanding of an individual, the entire family must be evaluated (Bigner, 2006). For example, the investigation of depressive systems in children cannot be understood by examining the child alone. Children are emotionally connected to their

parents, and if their parents are not providing supportive and responsive care, depressive symptoms may arise.

The final assumption is that the environment affects all systems, and the environment is in turn affected by the system (White & Klein, 2008). According to this assumption, feedback occurs in two ways. People immerse themselves in different environments such as home, work, or school settings. These environmental settings elicit different reactions in people, which could affect their overall behavior (White & Klein, 2008). For instance, a mother may become upset at her husband and take out her frustration on the child.

Concepts

Systems theory is based on the concepts of systems, feedback, and subsystems. The term system refers to the relationship between objects and their attributes (White & Klein, 2008). In other words, a system can stand alone from the influences of the environment, yet can also be affected by its environment (White & Klein, 2008). As an example, depressive symptoms in children may be associated with the child's biological make up, yet could also result from outside influences, such as a permissive parenting style.

Feedback is an assumption of systems theory as well as a concept. There are positive and negative feedback mechanisms that can affect the family system. Positive feedback encourages change and involves making decisions based on environmental influences (White & Klein, 2008). Negative feedback limits change, and involves maintaining the system in its current condition. An example of positive feedback is when a couple decides to divorce due to the high conflict they are experiencing. Negative feedback would involve staying in a conflictual relationship because the parents believe it is best for the children.

Each system consists of subsystems. For example, the family is a system, which may contain a marital subsystem, a parent-child subsystem, and a sibling subsystem. These separate subsystems could be evaluated independently as a way to understand the overall system (White & Klein, 2008). Although it is possible to investigate subsystems separately, the system itself is best understood through its multiple subsystems. Each family member plays a unique and significant role in the family structure. It is impossible for an issue to affect one member of a family without it affecting other members as well.

Hypotheses

Empirical research has demonstrated that marital satisfaction (i.e., conflict) is associated with depressive symptoms in children. Studies have also found that authoritarian and permissive parenting styles are associated with child depressive symptoms. However, some researchers suggest that authoritarian parenting styles benefit African American children, especially those from a low SES background. Research on marital satisfaction, parenting styles, and depressive symptoms in children have primarily been conducted with European American families, and mother-child dyads. In the current study, the topic will be explored among European Americans, African Americans, and interracial families. The current study will also include both mothers and fathers in the analyses to better understand how these processes operate across groups.

Hypothesis I: Marital satisfaction will be negatively associated with child depressive symptoms. This hypothesis is predicted to be supported across ethnic groups.

Hypothesis II: Authoritarian parenting styles will be positively associated with child depressive symptoms in European American families.

Hypothesis III: Authoritarian parenting styles will be negatively associated with child depressive symptoms in African Americans families.

Hypothesis IV: Ethnicity will moderate the association between authoritarian parenting styles and child depressive symptoms in that the direction of the relationship will be positive for European Americans and negative for African Americans.

Hypothesis V: Permissive parenting styles will be positively associated with child depressive symptoms. This hypothesis is predicted to be supported across ethnic groups.

Research Ouestions

Given that a majority of parent-child research has excluded interracial families and fathers as study participants, it is unknown whether the associations between marital satisfaction, parenting styles, and child depressive symptoms operate differently for members of these groups. Therefore, in the present study, rather than formulating specific hypotheses about interracial families and gender differences, the following research questions will be explored.

- T: What associations exist between authoritarian and permissive parenting styles and child depressive symptoms in interracial families?
- II: Does parental gender moderate the association between marital satisfaction and child depressive symptoms?
- III: Does parental gender moderate the association between parenting styles and child depressive symptoms?

CHAPTER THREE

METHODOLOGY

Participants

Participant Requirements

The target population consisted of married couples with elementary school-aged children. Families of ethnic minorities were oversampled due to their historic under representation in research studies. Families who met these criteria were invited to participate in the study.

Data Collection Procedure

The data for this project were collected as part of a 5-year longitudinal study called the Family Health Project. Data were collected from 2001-2006 in the Puget Sound area of Washington state. Participants were recruited using multiple methods including newspaper advertisements, flyers sent home from the children's school, and community outreach (Doohan, Carrère, Siler, & Beardslee, 2009). Interested couples were asked to contact the researchers via telephone. If they met the selection criteria, they were separately interviewed about their marital satisfaction and demographic characteristics. Parenting styles were assessed using parent-child observations, which is described in greater depth below.

There were over 600 interested participants, yet only 129 legally married couples met the researchers' criteria. The current study examines 93 of these 129 married couples, which includes 41 European American couples, 34 interracial couples, and 18 African American couples. Although the literature review included information about Latino American and Asian American parents, the sample size for each group was too small to include in this study. The families who participated in the study received compensation for sessions one and two.

Measures and Procedures

This study consisted of four independent variables and one dependent variable. The independent variables were marital satisfaction, authoritarian parenting styles, permissive parenting styles, ethnicity, and gender. The dependent variable was child depressive symptoms.

Marital Satisfaction

Marital satisfaction was assessed using

Locke-Wallace's Marital Adjustment Test (MAT). The MAT is
a 15-item scale that takes approximately 10 minutes to
complete. Eight questions assess disagreements and are
rated on a 6-point Likert scale ranging from 5 (Always
Agree) to 0 (Always Disagree). The questions about

disagreements pertain to a variety of topics including friends, sex relations, and philosophy of life. Six questions assess communication, cohesion, and conflict resolution and each question provides the participant with two, three, or four options to choose from (see Appendix D for Locke-Wallace MAT). The MAT has demonstrated high internal consistency (.90) (Locke & Wallace, 1959). The measure has also demonstrated discriminant validity in being able to distinguish between adjusted and maladjusted couples (Locke & Wallace, 1959).

Parenting Styles

Parenting styles were assessed using the SWEPT Family Coding System (Siler, Beardslee, Harvey, & Carrère, 2006). The SWEPT Family Coding System was created to evaluate family interaction during a teaching task. In the present study, the teaching task occurred during a parent-child exercise. Parents and children were encouraged to pretend as though they were NASA astronauts and asked to complete different tasks before they were able to blast off into space. The parent-child task examined the family's ability to communicate amongst each other, as well as parents instructing and coaching their children on a "space shuttle flight" computer simulation activity (Doohan et al., 2009). Parents were first given instructions on how

the space shuttle will launch through a computer program and then given 45 minutes to strategize the best way for teaching the information to their child. The parent-child exercise was videotaped and included: 1) the parent explaining the computer simulation space shuttle launch to their child; 2) a practice session with the parent and child; and 3) the child completing the blast off on their own with coaching and instructions from their parents (Doohan et al., 2009).

The SWEPT Family Coding System assessed three dimensions of the parent-child interaction: warmth, structure, and parental cohesion. During this assessment, the coders evaluated whether the mother and father demonstrated authoritative, authoritarian or indulgent (permissive) parenting styles. The current study included continuous scores from mothers and fathers who demonstrated an authoritarian or indulgent (permissive) parenting style. Each dimension was scored on a 7-point Likert scale ranging from 1 (coldness, lack of structure, and low parental cohesion) to 7 (warmth, supportive structure, and high parental cohesion). Warmth assessed the positive affect between the parent and child, a sense of enjoyment in the task, and the use of praise, compliments, and positive nonverbal gestures. Structure

evaluated the parents' organization, and whether the parent provided encouragement and age-appropriate teaching. Parental cohesion assessed the unified partnership between the parent and child, and was evaluated according to the problem solving strategies used during the task (see Appendix E for the SWEPT Family Coding System). The coders rated the family teaching task as whole using the SWEPT. Interrater reliability, as calculated by intraclass correlations, was .90 for warmth, .87 for structure, and .91 for parental cohesion.

Depressive Symptoms in Children

Depressive symptoms were assessed using the
Behavioral Assessment System for Children (BASC) (Reynolds & Kamphaus, 1992). In this study, only the depression subscale was used because it is a strong predictor for child maladjustment behaviors (Merrell, Blade, Lund, & Kempf, 2003). The assessment took approximately 30 minutes for the child to complete. Although the scale has five components, this study only used the child's self-report component (BASC-C). The BASC-C consists of 152 true or false items that are designed to assess clinical, interpersonal, and adaptive issues for children between the ages of 8-11 (Merrell et al., 2003). The BASC-SRP has demonstrated good reliability with Cronbach's alpha

coefficients ranging from .80 to .95 (Merrell et al., 2003). Test-retest reliability has also been demonstrated with correlations of approximately .77 and .75 (Reynolds & Kamphaus, 1992).

Demographic Characteristics

Participants identified their demographic characteristics including gender, age, education level, income, and ethnicity. They also responded to questions about whether or not they were in their first marriage, and the length of their current marriage (see Appendix G).

Statistical Analyses

All hypotheses and research questions were assessed using correlation analyses. Pearson's correlation coefficients were computed to examine the relationships among the independent variables (i.e., marital satisfaction, authoritarian parenting styles, permissive parenting styles, ethnicity, and gender) and the dependent variable (i.e., child depressive symptoms). The magnitude of ethnicity as a moderator was assessed using Fisher's r to z transformation, and subsequent tests of differences between the transformed r-values. This analysis provided insight about how marital satisfaction and parenting

styles are associated with child-depressive symptoms for parents with different ethnic backgrounds and genders.

CHAPTER FOUR

RESULTS

Data from 93 participants were used in the analyses. Prior to examining the specific hypotheses and research questions, the standardized scores for marital satisfaction, parenting styles (authoritarian and permissive for mothers and fathers), and child depressive symptoms were assessed for missing values, outliers, and assumptions necessary for multivariate analyses. The variables were screened separately for each ethnic group: European Americans, African Americans, and interracial families.

Preliminary Analyses

A majority of participants had some missing data; however, fewer than 10% of participants had data missing on multiple measures. Wives' marital satisfaction had 2 missing cases and wives' authoritarian and permissive parenting styles had 3 missing cases. Husbands' marital satisfaction, authoritarian parenting styles, and permissive parenting styles all had 5 missing cases, and child depressive symptoms had 6 missing cases.

Standardized "Z" scores were calculated for all continuous variables. Two univariate outliers were

detected and deleted for child depressive symptoms (Z = 3.686 and Z = 3.912). Multivariate outliers were investigated using Mahalanobis distance. Two multivariate outliers were deleted due to their extreme distances. The assumptions of linearity and homoscedascity were examined using scatterplots of residual and predicted scores. Both assumptions were statistically met. Finally, due to the nature of the measures (i.e., being skewed in the general population), several variables demonstrated non-normality. The child BASC Depression and husband/wife SWEPT Family Coding System for permissive parenting styles were positively skewed across all ethnic groups.

Before investigating the specific hypotheses, one-way ANOVAs were used to examine whether ethnic differences existed for the variables of interest (see Table 1). Child depressive symptoms, wives' marital satisfaction, husbands' authoritarian parenting styles, and wives' authoritarian parenting styles were significantly different across ethnic groups. Post hoc tests with LSD comparisons were used to examine the differences (see Table 1). The LSD comparison was chosen because of the small sample size and low power. Compared to European Americans, child depressive symptoms were significantly higher for African Americans. European Americans and

interracial wives had higher marital satisfaction than did African Americans. Compared to European American husbands and wives, African American and interracial husbands and wives demonstrated significantly more authoritarian parenting styles with their children. These results indicated that significant differences existed across ethnic groups for several variables being examined in this study.

Hypotheses

Hypothesis I

Marital satisfaction will be negatively associated with child depressive symptoms. This hypothesis was predicted to be supported across ethnic groups.

This hypothesis was examined using Pearson's correlation coefficients. No ethnic differences were expected so correlations were examined for the entire sample. The hypothesis was not supported in that marital satisfaction was not significantly associated with child depressive symptoms. The magnitude of the correlations was small and not significant for both husbands (r = .011, p = .921) and wives (r = -.154, p = .155). See Table 2 for the complete correlation matrix.

Hypothesis II

Authoritarian parenting styles will be positively associated with child depressive symptoms in European American families.

This hypothesis was also tested using Pearson's correlation coefficients. The correlations were small in magnitude and not significant for European American husbands (r = .061, p = .718) and wives (r = -.140, p = .400).

Hypothesis III

Authoritarian parenting styles will be negatively associated with child depressive symptoms in African Americans families.

Similar to hypothesis II, the third hypothesis also examined authoritarian parenting styles, but for African American families. The correlations were small to medium in magnitude and not significant for African American husbands (r = .292, p = .255), and small in magnitude as well as not significant for African American wives (r = .030, p = .909).

Hypothesis IV

Ethnicity will moderate the association between authoritarian parenting styles and child depressive symptoms in that the direction of the relationship will be

positive for European Americans and negative for African Americans.

The Fisher's r to z transformation was used to examine this hypothesis. The analysis revealed that ethnicity did not moderate the association between authoritarian parenting styles and child depressive symptoms (z < 1.96) (See Table 3). In other words, the relationship between authoritarian parenting styles and child depressive symptoms was not significantly different across European Americans husbands (r = .061) and wives (r = .140), African Americans husbands (r = .292) and wives (r = .030), and interracial husbands (r = .280) and wives (r = .322).

Hypothesis V

Permissive parenting styles will be positively associated with child depressive symptoms.

The fifth hypothesis was examined using Pearson's correlation coefficients. No ethnic differences were expected so correlations were examined for the entire sample. The hypothesis was not supported in that permissive parenting styles did not have a significant association with child depressive symptoms. Overall, the correlations were small in magnitude and not significant

for husbands (r = -.008, p = .945) and wives (r = .080, p = .463).

Research Ouestions

Research Question I

What associations exist between authoritarian and permissive parenting styles and child depressive symptoms in interracial families?

Pearson's correlation coefficients were used to examine the first research question. Results indicated that for interracial husbands (r = .280, p = .134) and wives (r = .322, p = .077), authoritarian parenting styles were moderately and positively associated with child depressive symptoms. However, due to the small sample size (n = 34), these associations were not significant. The association between permissive parenting styles and child depressive symptoms among interracial families was small in magnitude and not significant for husbands (r = .073, p = .702) or wives (r = -.030, p = .873).

Research Questions II and III

Does parental gender moderate the association between marital satisfaction and child depressive symptoms? Does parental gender moderate the association between parenting styles and child depressive symptoms? The second and third

research questions also used Pearson's correlation coefficients to examine the relationship between marital satisfaction and parenting styles with child depressive symptoms for husbands and wives. The associations were not significant, except for husbands' authoritarian parenting style, which exhibited a small to medium positive association with child depressive symptoms (r = .259, p = .017) (see Table 2).

CHAPTER FIVE

DISCUSSION

The purpose of this research was to examine the relationship between marital satisfaction (i.e., marital conflict) and parenting styles (i.e., authoritarian and permissive) with child depressive symptoms. Researchers who have examined the associations between marital satisfaction, parenting styles, and child depressive symptoms have used samples consisting of primarily European Americans and mother-child dyads. This study extended prior work by investigating these associations with an ethnically diverse sample, and by including both mothers and fathers in the analyses. Previous research indicated that severe marital conflict and extreme parenting styles (i.e., authoritarian or permissive) contribute to depressive symptoms in children (Erel & Burman, 1995; Yahav, 2006; Zimet & Jacob 2001). In this section, information from previous work is included to help explain the study's findings. Systems theory is also used to provide a better understanding of how subsystems, such as spousal and parent-child relationships affect child outcomes.

Main Analyses

In this study, the direction of the association between wives' marital satisfaction and child depressive symptoms was negative, whereas for husbands, it was positive. Although the direction of these associations was informative, neither correlation was statistically significant. Research has shown that marital dissatisfaction (i.e., conflict) is associated with negative child outcomes such as depressive symptoms, low self-esteem, and social and emotional problems (Grych et al., 2002; Zimet & Jacob, 2001; Albow et al., 2009).

Systems theory can be used to explain the relationship between marital satisfaction and conflict with child depressive symptoms. Recall that systems theory focuses on family subsystems (e.g., marital and parent-child relationships), and includes the concept and assumption of wholeness. According to this assumption, different family members, or subsystems, are interdependent and part of a larger system. In order to understand one member of the family, the entire system must be evaluated (Bigner, 2006). This assumption highlights the influence of one system (i.e., the martial relationship) on another system (i.e., the parent-child relationship). It therefore makes sense, and is in line

with previous research, that wives' marital satisfaction would predict fewer depressive symptoms in children.

It is more difficult to explain why the direction of the association between husbands' marital satisfaction and child depressive symptoms would be positive. One reason may be found in Katz and Woodin's research (2002). These researchers found that couples who are conflict avoiders (i.e., use withdrawal as a means for dealing with conflict) may still be able to have a stable marriage. In examining the items on the Locke-Wallace MAT assessment (e.g., "When disagreements arise, they usually result in husband giving in."), it becomes possible to see how a conflict avoider (in this case, the husband) could score high on marital satisfaction. From a child's perspective, however, a parent who is emotionally withdrawn may not be desirable and could lead the child to develop internalizing symptoms (i.e., depression, anxiety, social withdrawal) (Katz & Woodin, 2001).

With respect to parenting styles in European American families, prior research has found that the authoritative parenting style provides beneficial outcomes for children, whereas the authoritarian style has a negative effect (Steinberg, Lamborn, Darling, Mounts, & Dornbusch, 1994; Jambunathan et al., 2000; Ruiz et al., 2002; Ang, 2006).

Due to the large body of work demonstrating the positive effects of authoritative parenting on children, the current study did not focus on this style. Instead, the relationship between authoritarian parenting and child depressive symptoms was investigated. Although the results were not significant, the direction of the association between authoritarian parenting and child depressive symptoms was positive for European American husbands. This finding is consistent with prior research. For example, Lansford, Deater-Deckard, Dodge, Bates, and Pettit (2004) examined the effect of physical discipline on children in ethnically diverse families. They found that compared to African American parents, European American parents who used the authoritarian parenting style and physical discipline had children with more psychosocial problems such as depression.

In the current study, the direction of the association between authoritarian parenting and child depressive symptoms was negative, and was not significant. The work by Williams et al. (2009) may help explain this unexpected finding. These researchers examined the effects of behavior inhibition and parenting styles on internalizing problems in children. Their study sample was 98% European American. They found that the effect of

parenting often has to do with the child's temperament. It is possible that the European American mothers who used an authoritarian parenting style in this study were catering to their child's temperament, which allowed their child to respond positively toward this style.

Contrary to expectations, African Americans' use of the authoritarian parenting style was not associated with child depressive symptoms. This finding was originally predicted because of prior work (Smetana, 2000; Jackson-Newsom et al., 2008) indicating that the authoritarian style has a positive effect on child outcomes in African American families. One explanation for the non-significant association may be that socioeconomic status (SES) has a stronger effect than parenting styles on child outcomes. As noted in the literature review, African Americans are over-represented among low-income groups and may use the authoritarian style to protect children from environmental dangers (McLoyd et al., 2000; Kotchick & Forehand, 2002, Brody et al., 1994). In this study, African Americans resided in the Puget Sound area of Washington state, which is a middle class and predominately safe community. Therefore, the use of authoritarian parenting in such an environment may not

have been necessary for the child's protection and well-being.

The relationship between authoritarian parenting styles and child depressive symptoms did not differ across ethnic groups in this study. This finding reinforces the idea that the association between parenting styles and child outcomes is explained by variables other than ethnicity, but which are likely correlated with ethnicity. Julian, McKenry, and McKelvey (1994) examined cultural variations in parenting styles among European Americans, African Americans, Latino Americans, and Asian Americans and found that when SES was controlled for, the ethnic groups demonstrated more similarities than differences regarding parenting attitudes, behaviors, and involvement. Julian et al.'s findings, as well as those from the present study, support the notion that cultural background itself does not predict child outcomes such as depressive symptoms.

A majority of literature indicates that the permissive parenting style is associated with maladjustment and poor outcomes for children (Yahav, 2006; Oliver & Whiffen, 2003). Although the current study did not find significant associations between permissive parenting styles and child depressive symptoms, some

commentary can be offered regarding the direction of the correlations for fathers and mothers. Fathers' permissive parenting styles were negatively correlated with child depressive symptoms, whereas mothers' permissive parenting was positively associated with child depressive symptoms.

Milevsky, Schlechter, Netter, and Keehn (2007) found that fathers characteristically take on a more playful role with children. Although this role tends to be associated with the permissive parenting style, it may not conflict with the child's well-being. Mothers tend to be the more nurturing parent and are responsible for a majority of childcare. As such, they tend to form a more strong attachment to the child. The closeness of the mother-child relationship may result in more negative associations when the permissive parenting style is used, especially because this style may be interpreted as involving parental rejection (Yahav, 2006). Rohner (2004) found that parental rejection greatly obstructs the parent-child attachment bond, which could lead to internalizing problems such as depression.

Research Questions

The first research question examined the association between parenting styles (authoritarian and permissive) and child depressive symptoms among interracial families.

The results were not statistically significant, yet the direction of the correlation between authoritarian parenting style and child depressive symptoms was positive for husbands and wives and was medium in magnitude. Although little research exists on interracial families, findings from this study fit with a majority of prior work on parenting styles, indicating that the authoritarian style is associated with poor child outcomes (Jackson-Newsom et al., 2008; Patock-Peckham & Morgan-Lopez, 2009; Yahav 2006). For interracial parents, gender differences existed in the association between permissive parenting styles and child depressive symptoms, but the results were not significant. The gender differences may be explained by Crippen and Brew's (2007) findings, which indicated that interracial parents tend to have more disparities in their parenting beliefs and practices due to their different cultural backgrounds.

The second and third research questions investigated whether gender differences existed for husbands and wives in the associations between marital satisfaction, parenting styles (i.e. authoritarian and permissive), and child depressive symptoms. Husbands who used the authoritarian parenting style were significantly more likely to have children with depressive symptoms. Fathers

are typically the more controlling/demanding parent, whereas mothers tend to be more nurturing (Baumrind, 1991). As such, combinations of permissive mothers with authoritarian fathers may be common, and this could differentially impact child outcomes. Simons and Conger (2007) found that up to 16 combinations of parenting styles could be used by parents in the home, which reinforces the notion that differences in parenting styles may be common.

Secondary Analyses

This study used correlation analyses to examine the associations between marital satisfaction, parenting styles, and child depressive symptoms. A variety of correlations were examined, which were not directly predicted by the hypotheses or proposed in the research questions, and some of these findings were significant (see Table 2). These correlations are discussed in the following paragraph.

Wives' marital satisfaction was positively associated with husband's marital satisfaction. This is consistent with previous research indicating that wives and husbands are dependent on each other for rewarding outcomes and influence each other's satisfaction levels (Luo, Zhang,

Watson, & Snider, 2010; Luo, & Snider, 2009; Cobb, Davila, & Brandbury, 2001). Husbands' authoritarian parenting style was negatively associated with wives' marital satisfaction. Husbands' authoritarian parenting style may be associated with an authoritarian personality, which not only affects the child, but affects their spouse too. If husbands are controlling and demanding toward their wives, it is to be expected that their wives would report low marital satisfaction. Lastly, wives who demonstrated a permissive or authoritarian parenting style were more likely to have husbands who displayed the same style. In general, partners influence each other, which could transfer into their parenting styles (Simon & Conger, 2007).

Strengths and Limitations

There were a variety of strengths and limitations associated with this study. In terms of strengths, the current study extended prior work by including interracial families and fathers in the analyses. Prior work has focused primarily on European American families (Jambunathan, Burts, & Pierce, 2000; Ruiz, Roosa, & Gonzales, 2002; Ang, 2006) and examined mostly mother-child dyads (Simon & Conger, 2007). Interracial

families are becoming more prevalent in the U.S. and yet, limited research exists on this population. Further research is necessary in order to more completely understand the dynamics of interracial families. There is great diversity within this group and so many avenues remain to be explored in future studies.

As mentioned previously, a majority of work on parenting styles has focused on the mother-child relationship. Some research has focused on fathers and children (Carlson, 2006; Marsiglio, Amato, Day, & Lamb 2000), but few studies have examined the similarities and differences in parenting styles among mothers and fathers, and how these similarities/differences are associated with child depressive symptoms. This study extended prior work by examining each parent's parenting style, which allowed for an investigation of the unique associations of mothers and fathers. This study also included separate scores for mothers' and fathers' marital satisfaction, and examined their distinct relationship with child depressive symptoms, which extends previous research.

Notwithstanding, as with any research, this study had some limitations. The sample size within each ethnic group was small and did not provide sufficient statistical power to examine the proposed associations. Additionally, the

marital satisfaction (MAT) and child depressive symptoms (BASC) measures were self-reported, which may have been influenced by social desirable response bias. Although these measures demonstrated strong reliability and validity, individuals tend to skew their responses when the topic is personal. Selection bias is another limitation of this study; participants were primarily from the same socioeconomic community. In future studies, researchers would benefit from including participants who are more varied in terms of SES and neighborhood of residence (i.e., low-income and high crime).

Conclusions and Future Directions

This study provided insight on how marital satisfaction (i.e., conflict) and parenting styles (i.e., authoritarian and permissive) are associated with child depressive symptoms among ethnically diverse families. Gender differences in these associations were also examined for mothers and fathers. With one exception, the results did not lend support to the hypotheses. As noted, future researchers would benefit from including a larger number of families from each ethnic group in their analyses. This would increase the statistical power and allow for a more complete investigation of the topic.

Future researchers could include additional ethnic groups, beyond European and African Americans in their studies. This would allow for a more comprehensive understanding of the similarities and differences across groups in terms of how marital satisfaction and parenting styles are associated with children outcomes. For example, would the association between marital satisfaction, parenting styles, and child outcomes differ for Asian and Latino American families? And, how does acculturation impact these associations?

The inclusion of interracial families in this study was important given the recent increase in interracial couples in the U.S., but a more in-depth focus on the specific ethnicity of each parent would be worthwhile.

This could help identify whether children experience adverse outcomes, such as depressive symptoms, when mothers and fathers represent distinct cultural groups.

For example, do husbands and wives with different ethnic backgrounds encounter more conflict related to their parenting styles, and how might such conflict affect child outcomes?

Lastly, future research should revisit this topic with individuals from different SES communities, which would help disentangle the association of ethnicity and

SES on marital satisfaction, parenting styles, and child depressive symptoms. For example, to what degree are cultural influences on parenting diminished or enhanced as a result of SES? Are there instances in which cultural factors exert a larger impact than SES on marital satisfaction, parenting styles, and child outcomes?

Overall, this study provides insight on the relationship between husbands' and wives' marital satisfaction (i.e., marital conflict) and parenting styles (i.e., authoritarian and permissive) with child depressive symptoms among European Americans, African Americans, and interracial families. The study extended prior work in a variety of ways and also produced some unexpected findings. Although the specific predictions were not supported, this research should nonetheless inspire future research on this topic.

APPENDIX A

TABLE 1: SUMMARY OF A ONE-WAY ANOVA AND POST HOC

ANALYSES PREDICTING ETHNIC DIFFERENCES FOR

ALL VARIABLES EXAMINED IN THE STUDY

Table 1: Summary of a One-Way ANOVA and Post HOC Analyses Predicting Ethnic Differences for All Variables Examined in the Study

	-	Ethnicity				
	EA	AA	1			
Variable	M (SD)	M (SD)	M (SD)	F (df)	p	η^2
Child Depression	.84 _a (1.84)	2.94 _b (3.35)	1.71 _{ab} (2.43)	4.668 (2,84)	.012	.10
Marital Satisfaction Husbands	116.16 _a (16.13)	115.59 _a (17.46)	112.64 _a (26.68)	.350 (2,85)	.706	.01
Marital Satisfaction Wives	121.12 _a (17.19)	99.09 _b (27.06)	18.70 _c (22.79)	7.038 (2,88)	.001	.14
Authoritarian P.S. Husbands	2.48 _a (1.24)	3.47 _b (1.23)	3.26 _b (1.18)	5.583 (2,85)	.005	.12
Authoritarian P.S. Wives	2.00 _a (1.00)	2.71 _b (1.40)	2.59 _b (1.16)	3.485(2,87)	.035	.07
Permissive P.S. Husbands	1.53 _a (.64)	1.41 _a (.62)	1.52 _a (.81)	.168 (2,85)	.846	.03
Permissive P.S. Wives	1.88 _a (.98)	1.59 _a (.71)	1.84 _a (.99)	:602 (2,87)	.550	.01

Note. Means in the same row with different subscripts differ at p < .05; EA = European Americans, AA = African Americans, and I = Interracial Families

APPENDIX B

TABLE 2: CORRELATION MATRIX FOR HUSBANDS' AND WIVES' MARITAL SATISFACTION, PARENTING STYLES, AND CHILD DEPRESSIVE SYMPTOMS

Table 2: Correlation Matrix for Husbands' and Wives' Marital Satisfaction,
Parenting Styles, and Child Depressive Symptoms

Variables	CD	MSH	MSW	PH	PW	АН	AW
Child Depression	1.00		_				
Marital Satisfaction Husbands	.011	1.00					
Marital Satisfaction Wives	154	.580*	1.00				
Permissive P.S. Husbands	008	183	055	1.00			
Permissive P.S. Wives	.080	.031	.026	.591*	1.00		
Authoritarian P.S. Husbands	.259*	090	333*	045	.144	1.00	
Authoritarian P.S. Wives	.150	.051	- .043	.180	.152	.465*	1.00

 $[\]overline{^*p} < .0$

APPENDIX C

TABLE 3: SUMMARY OF FISHER'S R TO Z TRANSFORMATION

EXAMINING THE MODERATING EFFECTS OF ETHNICITY

ON AUTHORITARIAN PARENTING STYLES

Table 3: Summary of Fisher's r to z Transformation Examining the Moderating Effects of Ethnicity on Authoritarian Parenting Styles

	Husband r (n)	Wife r (n)	Z	р
European American	.061 (37)	140 (38)	0.84	.40
African American	.292 (17)	.030 (17)	0.24	.47
Interracial	.280 (30)	.322 (31)	-0.13	.90

APPENDIX D

LOCKE-WALLACE MARITAL ADJUSTMENT TEST

LOCKE-WALLACE MARITAL ADJUSTMENT TEST

Your Name:			ID#		Date:	_Date:					
	Lo	ocke-Wall	ace Marit	al Adjustn	nent Test						
1.	Circle the dot on happiness, ever point "happy" re from marriage, a who are very un experience extre	ything cor presents t and the so happy in t	nsidered, the degre cale gradu marriage	of your pr e of happ al ranges and on th	resent ma iness that on one s e other, to	rriage. The most peolide to tho	e middle ople get se few				
Ve	егу Нарру		На	рру		Perfec	tly Happy				
	ate the approximate our mate on the follo						you and				
		Always Agree	Almost Always Agree	Occas- ionally Disagree	Fre- quently Deagree	Almost Always Disagree	Always Disagree				
2.	Handling Family Finances			-	_						
3.	Matters of Recreation										
4.	Demonstration of Affection										
5.	Friends		-								
6.	Sex Relations						_				
7.	Conventionally (right, good, or properly conducted)										
8.	Philosophy of Life						ı				
9.	Ways of Dealing										

with in-laws.

For each of the following items, check one response:

10.	When disagreements arise, they usually result in (a) husband giving in (b) wife giving in (c) agreement by mutual give and take
11.	Do you and your mate engage in outside interest together? (a) all of them (b) some of them (c) very of them (d) none of them
12a.	In leisure time, do you generally prefer (a) to be "on the go" (b) to stay at home
12b.	Does your mate generally prefer (a) to be "on the go" (b) to stay at home
13.	Do you ever wish you had not married? (a) frequently (b) occasionally (c) rarely (d) never
14.	If you had your life to live over again, do you think would (a) marry the same person (b) marry different person (c) not marry at all
15.	Do you ever confide in your mate (a) almost never (b) rarely (c) in most things (d) in everything

Locke, H. J., & Wallace, K. M. (1959). Short marital adjustment and prediction test. Their reliability and validity. *Marriage and Family Living, 21*, 251-255

APPENDIX E SWEPT FAMILY CODING SYSTEM

SWEPT FAMILY CODING SYSTEM

	ai Co F	_	•		•			ai ci	ımaı	ie)									
Pare	enting	Styl	е																
Authoritative – Indulgent – Husband Husband				- Authoritative → Wife			-	Indulgent – Wife											
1	2 3	4	5	1	2	3	4	5		1	2	3	4	5	1	2	3	4	5
Au	Authoritarian – Indifferent - Husband Husband					-		Authoritarian – Wife					Indifferent – Wife				-		
1	2 3	4	5	1	2	3	4	5		1	2	3	4	5	1	2	3	4	5
Warı	mth -	Stru	cture	e - C	ohe	sior	า				_								
1 Cold	ness		2		;	3			4			5			6	W	'arn	7 nth	
1 Lack	of S	ruct	2 ure		(3			4			5	Sı	oqqı	6 rtive	Str	uctı	7 ure	
1 2 3 Low Parental Cohesion				4 5 High Pare			6 7 ental Cohesion												
Scaf	foldin	g	- 4						ngly	A	gre	e N	leut	ral	Disag	gree		tron	
Wife								Ay	ree								וט	sag	iee
1.	Pare child		hifts pility			tima	ate	•	1		2		3		4			5	
2.	Parent shifts too many levels (jumping)			•	1		2		3		4			5					
3.	Parent shifts levels appropriately when child is unsuccessful			ţ	5	4			3		2			1					
4.	Parent reduces support when child is successful				ţ	5		4		3		2			1				
5.	Pare direc	•		es ba	asic	, cle	ear	ŧ	5		4		3		2			1	
													٧	Vife '	Tota	l	_		_

Husband 1. Parent shifts underestimate child's ability level	1	2	3	4	5
Parent shifts too many levels (jumping)	1	2	3	4	5
 Parent shifts levels appropriately when child is unsuccessful 	5	4	3	2	1
 Parent reduces support when child is successful 	5	4	3	2	1
Parent provides basic, clear directions	5	4	3	2	1
			Husbar	nd Total	

Siler, C., Beardslee, C., Harvey, J., & Carrere, S. (2006). SWEPT family coding system. Unpublished manuscript, University of Washington, Settle.

APPENDIX F BEHAVIORAL ASSESSMENT SYSTEM FOR CHILDREN

BEHAVIORAL ASSESSMENT SYSTEM FOR CHILDREN

This assessment was not available due to copyright laws, but can be purchased online at http://www.pearsonassessments.com or by contacting Pearson at 1(800) 627-7271.

APPENDIX G

DEMOGRAPHIC QUESTIONS

DEMOGRAPHIC QUESTIONS

Personal Information Sheet

Please answer each question with regards to how things are TODAY.

- 1. Birthday
- 2. Current Age
- 3. Height
- 4. Weight
- 5. Sex (Check one) o Female o Male
- 6. Date of marriage
- 7a. Select the highest grade level you have completed:
 - 01 09
 - o 2 o 10
 - o3 o11
 - o 4 o 12
 - o 5 o Some college work
 - o 6 o Specialized vocational training
 - o 7 o Completed college
 - o 8 o Graduate degree (MA, MD, PhD)
- 7b. Specialized vocational training specify:
- 8. What is your yearly income (just yours, not including your spouse's)?
 - o less than \$10,00
- o \$50,000 \$59,999
- o \$10,000 \$19,999
- o \$60,000 \$69,999
- o \$20,000 \$29,999
- o \$70,000 **-** \$79,000
- o \$30,000 **-** \$39,999
- o \$80,000 **-** \$89,000
- o \$40,000 \$49,999
- o \$90,000 or above
- 9. What is your current occupational status? (select one)
 - o Employed full-time
- o Unemployed
- o Employed part-time
- o Disabled
- o Work at home/self-employed
- o Retired

o Homemaker

- o Student, full-time
- o Student part-time, employed part-time
- 10. Your occupation(s). Please briefly describe your occupation and what you do.

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