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EXPLORING THE LINKS BETWEEN FAMILY STRENGTHS AND ADOLESCENT OUTCOMES

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OVERVIEW

When families make the news, it is often for negative reasons such as violence or abuse. Negative perceptions of low-income families tend to be especially strong. However, families are critical to the positive development of children and youth, as well as to problems that may affect that development. Thus, it is important to examine not just the deficits, but also the assets and strengths that families of all income levels bring to raising children.

This Research Brief reports on the results of new Child Trends analyses of data from the 2005 Every Child Every Promise Study conducted by America's Promise Alliance. Our findings indicate that family strengths are associated with significantly better outcomes for adolescents in both lower-income families and higher-income families. Specifically, we found that adolescents from families that have these strengths are more likely to perform well in school, to avoid risky behaviors, and to demonstrate positive social behaviors than are adolescents from families that lack these strengths. Although our particular focus was on lower-income families—those making less than \$50,000 a year—we found similar results for families making \$50,000 a year or more.

WHAT ARE FAMILY STRENGTHS?

Family strengths have been defined as the "set of relationships and processes that inherently satisfy, support and protect families and family members, especially during times of adversity and change." These elements include emotional/subjective strengths (such as close and caring parents); behavioral/concrete strengths (for example, parental monitoring and involvement); and passive parenting strengths (for instance, positive parental role modeling).

Using data for adolescents ages 12-17 from low-income families in the 2005 Every Child Every Promise Study (ECEP), we examined four distinct forms of family strengths:

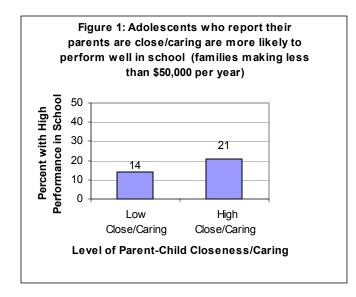
- Close and caring parents, including communication, providing the help and support that the child needs, and closeness;
- Parental monitoring/supervision and awareness: For example, knowing their children's friends and whereabouts, and ensuring that their children get sufficient sleep, wear bike helmets, and eat healthy food;
- **Parental involvement**, including involvement in school and homework, discussing things that matter to the child, talking about world events, and making educational plans:
- **Positive parental role modeling**: For example, exercising, volunteering, voting, reading the news, and not smoking, using drugs, or having an alcohol problem.

ARE FAMILY STRENGTHS RELATED TO ADOLESCENT OUTCOMES?

Adolescents whose families have more of these four types of strengths would be expected to have bet-

ter outcomes; and, in fact, we found consistent evidence that they do for all three of the outcomes examined: avoiding risky behaviors, school performance, and social competency. This pattern held both for families making under \$50,000 a year and those making \$50,000 or more—even after we took into account other social and demographic factors, such as family structure, race/ethnicity, and parental educational level.

Specifically, as shown in Figure 1, adolescents who reported having close and caring parents are significantly more likely to perform well in school. Higher parental monitoring and involvement are associated with better school performance as well, although having a parent who is a positive role model is not significantly related to school performance for families of either income level (see Table 1 at the end of this brief). These patterns were found in lower- and higher-income families.



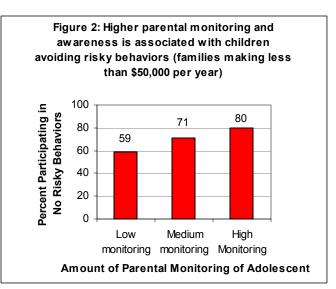


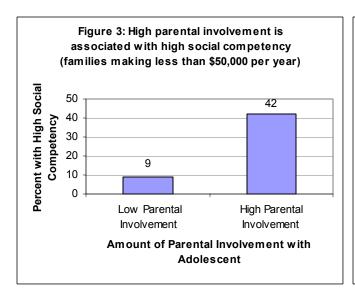
Figure 2 shows that among adolescents in lower-income families, those with higher parental monitoring are more likely to avoid risky behaviors. Also, among adolescents from lower-income families, risky behaviors are all significantly lower when parents are more close and caring and involved and are positive role models (see Table 1). These patterns hold for families making \$50,000 a year or more as well, except being a positive parent role model does not have a significant relationship with adolescents' risky behaviors among these families.

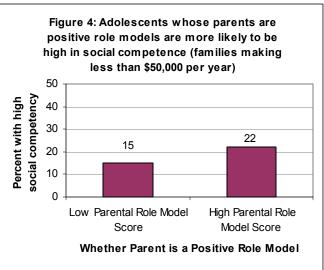
Figure 3 (on next page) shows that adolescents with a high level of parental involvement are more likely to score high on the social competence scale. Figure 4 (on next page) shows that adolescents whose parents are positive role models are also more likely to score high on this scale. Higher parental monitoring and parent-child closeness and caring are also associated with being more socially competent (see Table 1). Again, these patterns hold for lower- and higher-income families.

Indeed, these patterns hold even when additional social and demographic factors are taken into account: family income within each group, family structure, parent education, child age, child gender, and parents' country of birth and race/ethnicity.

Thus, our analyses find that all four measures of family strengths are significantly related to all indices

of positive outcomes for adolescents, with one notable exception. The exception was that parent role modeling is not related to school performance, as described above. This finding may reflect the fact that the measure of role modeling does not include specific educational activities such as reading for pleasure.





WHEN TAKEN TOGETHER, DO SOME OF THE FAMILY STRENGTHS EMERGE AS MORE IMPORTANT THAN THE OTHERS?

We also examined whether each of the individual family strengths indices affects adolescent outcomes in lower-income families, *over and above* the other indices and the confounding social and demographic factors—a stringent test of their significance. When all four family strength indices are assessed together, parent/adolescent closeness/caring is related to two out of three outcomes (school performance and social competence) and monitoring is related to two out of three as well (school performance and avoiding risky behaviors), over and above the other family strengths indices. Parental involvement and having positive parent role models are each related to one outcome (social competence). Thus, each adolescent outcome is related to at least one of the family strength indices when they are assessed together along with social and demographic factors. A similar pattern is found in higher-income families.

DISCUSSION

This study found associations between family strengths and adolescent outcomes, which does not necessarily mean that the family strengths cause these outcomes. Causation might run in the opposite direction in some cases. For example, when adolescents are more socially competent, they might perceive their parents more as more close and caring.

This study also found that having a positive parent role model has less of an association with the adolescent outcomes examined than the other family strengths. It should be noted that being a positive parent role model was defined here in general terms, not in specific terms, which might have yielded different results. For example, a parent who is an academic role model might affect school performance, while parental substance use might be more likely to affect whether the adolescent engages in risky behaviors.

It is important to note as well that the proportions of children experiencing high levels of family strengths, as measured here, are quite similar for lower and higher income families. The exception is again the Role Model score, on which higher income families score substantially higher (52% high vs. 35% high for children in lower income families). As found in analyses of the National Survey of Children's Health, lower-income families are less disadvantaged on indicators of family closeness and interaction within the family, compared with indicators of neighborhood safety and involvement in out-of-school time programs. The material disadvantages faced by low-income families, especially those in poverty and deep poverty are real and matter for children. Nevertheless, many low-income families possess other strengths; and the analyses above indicate that these strengths are of value to their children.

CONCLUSION

In sum, outcomes for adolescents are significantly better when they live in families with the strengths identified in this brief. This finding holds for adolescents in lower-income families, not just affluent families. In addition, the finding holds for all three adolescent outcomes and for all four measures of family strengths, though role modeling as measured here is the weakest of the four.

Families and adolescents alike are often told what *not* to do. Focusing on family strengths identifies what we value and seek in families. It also clarifies the behaviors and supports families can provide—building close relationships, monitoring, being involved, and setting a good example. Moreover, it provides insights for funders, policymakers and service providers on ways that the strengths of families can be leveraged to improve services and, subsequently, outcomes for youth.

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OVERVIEW OF DATA AND ANALYSES

ABOUT THE EVERY CHILD EVERY PROMISE STUDY

The data used for this analysis are from the Every Child Every Promise Study (ECEP) conducted in the fall of 2005 among more than 6,000 individuals—2,000 adolescents 12 to 17 years old, their parents, and the parents of 2,000 children 6 to 11 years old. The purpose of the study was to determine the extent to which American youth experience the developmental resources—Promises—that they need to become successful adults.⁸

FAMILY STRENGTH INDICES

Each index consists of four to five variables, each with four response categories:

Closeness/caring index: Adolescents reported on closeness with their mother and father; talking with them about problems; and whether parents provide the help and support they need.

Monitoring/supervision and awareness index: Adolescents reported on the extent to which their parents know their friends and know where they are. Parents also reported whether the child gets sufficient sleep, whether they had rules about the child wearing a helmet when riding a bike, and about eating fruits and vegetables.

Parental involvement index: Adolescents reported on how often their parent talks with them about what they did in school. Parents reported on how often they talk about college or work plans with the child; ask the child about homework, and talk with the child about world events. They also reported on how well they could talk with the child about "things that really matter."

Parental role model index: Parents were asked about whether anyone in the household smoked and/or had a drug or alcohol problem; how often they exercise; how many hours per week they volunteer, how often they vote, and how often they read the news.

Response values were recoded to 0 to 3, resulting in index scores ranging from 0 to 12 or 0 to 15, depending on the number of variables used for each index. Higher index scores indicate more family strengths such as closer relationships, higher levels of monitoring, greater involvement, and more positive role models. Those few respondents who did not provide an answer to more than one out of four or five variables (i.e., missing more than 25 percent of responses) received missing for that index. Index scores of children missing one response were weighted according to the number of available responses.

Both continuous and dichotomous versions of family strength indices were used for the regression analyses. For the continuous version, the index scores were standardized to the value ranging from 0 to 10. For the dichotomized indices, children with the highest index score were categorized as one and the rest as zero.

Similarly, four to five items were combined for each of the three outcome indices:

Risky behaviors index: Adolescents reported on their sexual activity and contraception; alcohol use; smoking; using marijuana or hard drugs, and getting drunk.

School performance index: Parents reported on their child's grades; school attendance; working up to ability; and word-processing knowledge.

Social competency index: Parents reported on the extent to which their child gives, lends and shares; shows respect for teachers and neighbors; understands other people's feelings; and tries to resolve conflicts with family and friends.

Each item had, or was recoded to, four response categories with values ranging from 0 to 3. The values were summed and weighted in the same manner used for creating the family strength indices. Higher scores mean better outcomes.

The following controls were used in multivariate analyses: age of child, gender of child, parents' highest level of education, family structure (two biological parents, single parent, two parents including one step-parent, other), race/ethnicity, parents' country of birth (U.S., other). Among the lower-income group there were also controls for income less than \$20,000; income \$20,000 to \$30,000 per year, and among the higher-income group there was a control for income greater than or equal to \$50,000 but less than \$100,000 per year.

The significance level used was .05.

Table 1—Association Between Family Strengths and Adolescent Outcomes Among Adolescents Ages 12-17, by Family Income*

Note: In all but one case (parent role model score and adolescent's performance in school), for families in both income groups), higher levels of family strengths are significantly associated with better outcomes.

Lower-Income Families (i.e., those making less than \$50,000 per year)

	Adolescent Outcomes										
	Performance in School			Social Competency			Participating in Risky Behaviors				
	%Low	%Medium	%High	%Low	%Medium	%High	%Some	%None			
Family Strengths											
Low Close/Caring	60%	26%	14%	56%	30%	14%	35%	65%			
Medium Close/Caring	56%	29%	15%	54%	29%	17%	21%	79%			
High Close/Caring	37%	42%	21%	32%	36%	32%	21%	79%			
Low Monitoring/Awareness	66%	26%	9%	60%	26%	14%	41%	59%			
Medium Monitoring/Awareness	55%	26%	19%	57%	26%	17%	29%	71%			
High Monitoring/Awareness	48%	33%	18%	44%	35%	21%	20%	80%			
Low Involvement	60%	29%	11%	65%	26%	9%	30%	70%			
Medium Involvement	55%	30%	16%	48%	35%	17%	28%	72%			
High Involvement	46%	30%	24%	33%	25%	42%	25%	75%			
Low Role Model Score	59%	27%	13%	59%	26%	15%	32%	68%			
Medium Role Model Score	43%	35%	22%	51%	30%	20%	25%	75%			
High Role Model Score	54%	30%	16%	42%	37%	22%	25%	75%			
*Source: Child Trends analyses	£ 2005 Ex	ory Child Ev	ary Dromis	a Study dat	0						

^{*}Source: Child Trends analyses of 2005 Every Child Every Promise Study data

Higher-Income Families (i.e., those making \$50,000 per year or more)

_	Adolescent Outcomes									
	Performance in School			Social Competency			Participating in Risky Behaviors			
_	%Low	%Medium	%High	%Low	%Medium	%High	%Some	%None		
Family Strengths										
Low Close/Caring	49%	31%	20%	49%	34%	17%	31%	69%		
Medium Close/Caring	35%	37%	28%	39%	36%	24%	20%	80%		
High Close/Caring	29%	31%	40%	29%	44%	28%	11%	89%		
Low Monitoring/Awareness	44%	32%	23%	49%	34%	18%	37%	63%		
Medium Monitoring/Awareness	45%	29%	26%	44%	36%	20%	25%	75%		
High Monitoring/Awareness	34%	36%	30%	34%	40%	26%	14%	86%		
Low Involvement	45%	30%	25%	62%	28%	10%	28%	72%		
Medium Involvement	37%	36%	27%	39%	40%	22%	20%	80%		
High Involvement	36%	32%	33%	18%	43%	40%	21%	79%		
Low Role Model Score	41%	38%	21%	48%	35%	17%	23%	77%		
Medium Role Model Score	39%	27%	34%	41%	38%	21%	26%	74%		
High Role Model Score	38%	33%	29%	35%	39%	26%	21%	7 9%		

^{*}Source: Child Trends analyses of 2005 Every Child Every Promise Study data