
This study addressed two questions about single-parent African American families: Are parenting strategies associated with perceived risks in the environmental context? and Does the association between parenting and child adjustment depend on the context in which parenting occurs? Families (N = 277) resided in 2 communities that differed in violence-related risk: one rural (low risk) and one urban (high risk). Mother-reported monitoring and warm, supportive mother-child relationships and child-reported internalizing problems, externalizing problems, and social competence were examined. Mothers monitored their children more in the urban than the rural community. The warmth and supportive nature of the mother-child relationship did not differ across contexts. A warm, supportive mother-child relationship was associated with fewer internalizing and externalizing child behaviors in both contexts. Monitoring was associated with fewer problem behaviors only in the urban community.


An essay is presented on the identity challenges of African American emerging adults. It aims to present some ideas about African American emerging adults, with a focus on identity issues. It discusses the idea that identity issues are more complicated and difficult for African American emerging adults because they must overcome the negative assumptions that others have about them as young Black people.


There is a growing body of data indicating that Gene × Child Maltreatment interactions at *monoamine oxidase A* (*MAOA*) play a role in vulnerability to symptoms of antisocial personality disorder (ASPD) but not major depression (MD). Using a sample of 538 participants from the Iowa Adoption Studies, we introduce a conceptual model that highlights two distinct pathways from child maltreatment to symptoms of MD, suggesting that maltreatment has different effects depending on genotype and highlighting the importance of including the indirect pathway through ASPD. As predicted by the model, high activity alleles predispose to symptoms of MD in the context of child maltreatment whereas low activity alleles predispose to symptoms of ASPD. We conclude that the Gene × Environment interplay at this locus (*MAOA*) contributes to both symptoms of ASPD and MD and that careful specification of child maltreatment may be essential if genetic association research is to produce replicable results.


A previous report in the *Journal of Family Psychology* (S. R. H. Beach et al., 2008) described the results of a randomized prevention trial contrasting families who participated in the Strong African American Families Program (SAAF, a preventive intervention for rural African American parents and their 11-year-olds) with control families. This brief report examines a novel contextual variable, child’s genetic risk status for negative affect and poor self-
control, as a moderator of treatment effects on caregiver’s depression. Genetic data were obtained from \(N = 109\) youths’ saliva samples. The primary study hypothesis of differential program impact on caregiver depression as a function of youth genetic risk was confirmed. Among caregivers with initially elevated scores on the Center for Epidemiologic Studies—Depression Scale (L. S. Radloff, 1977), SAAF participation was associated with greater impact on depressive symptoms among those whose children were at genetic risk, suggesting that effect size estimates based on full samples may underestimate the impact of prevention programs on at-risk subgroups, whose response is particularly important to understand and to target.


Discomfort with the integration of spiritual activities into marital interventions may be a response by practitioners to the weakness of available conceptual frameworks. We offer a framework that allows for integration of prayer into marital interventions (educational or therapeutic), and argue that when culturally appropriate, prayer can serve multiple functions in interventions that are consistent with traditional goals of skill-based approaches. Several specific ways in which prayer can be either an alternative or an addition to existing intervention strategies are outlined. The potential negative effects of prayer for couples and the dangers of integrating prayer into programs are also discussed. We conclude that effective skill-based family intervention and prevention with some traditionally underserved groups may require increased attention to integration of spiritual practices that are common in those groups.


Much evidence suggests that marital discord is related to depressive symptoms in married couples. In the present research, potential sex-related differences in the prospective effect of marital discord on depression were explored. Further, extending previous work, cross-spouse effects (i.e., the associations between one spouse’s marital discord and his or her partner’s later levels of depressive symptoms) were examined. Spouses from randomly sampled married couples \(N = 166\) with adolescent children provided reports of their marital quality and depressive symptoms at baseline and one year later. Structural equation modeling analyses were conducted. Results revealed that Time 1 marital quality was associated with Time 2 depressive symptoms, the magnitude of this effect was similar for both husbands and wives, and spouses’ own marital quality at Time 1 predicted their partners’ Time 2 depressive symptoms net of other predictors in the model. Implications for practice, policy, and future research are discussed.


The incremental importance of low-level physically aggressive behavior in predicting later depressive symptoms was examined in a community sample of intact first-time marriages with children. For wives, physically aggressive behavior predicted later depressive symptoms. No similar effect was found for husbands. In addition, husbands’ psychological aggression moderated the effect of their own physically aggressive behavior on wives’ later depressive symptoms. Wives’ psychological aggression did not moderate the effect of their own physically aggressive behavior on husbands’ later depression. Results suggest that marital models should incorporate the role of physical aggression in accounting for wives’ depressive symptoms and allow for the possibility of gender asymmetry in effects.

A randomized prevention trial contrasted families who participated in the Strong African American Families Program (SAAF), a preventive intervention for rural African American parents and their 11-year-olds, with control families. This article focuses on the program’s effect on primary caregivers’ depressive symptoms. Among the 167 caregivers with elevated scores on the Center for Epidemiologic Studies–Depression Scale, SAAF participation was associated with reduced depressive symptoms, enhanced parenting, and perceived improvements in youth behavior. Change in parenting (consistent discipline, youth monitoring, and open communication) but not change in youth intrapersonal competencies significantly mediated intervention effects on caregivers’ depression. Results support the link between reduced depressive symptoms and stronger family relationships, particularly the importance of enhanced parent efficacy in alleviating depressive symptoms.


Prior research demonstrates negative consequences of racism, however, little is known about community, parenting, and intrapersonal mechanisms that protect youth. Using a mixed-methods approach, this study illuminated linkages between positive and negative contextual influences on rural African American adolescent outcomes. Quantitative results provide support for Structural Ecosystems Theory, in that the influence of discrimination and collective socialization on adolescent outcomes was mediated by racial socialization and positive parenting. Parenting and community influences contributed to adolescent racial identity and self image, which protected against common negative responses to racism; including academic underachievement, succumbing to peer pressure, and aggressive tendencies. Qualitative results indicate that current measures of discrimination may underestimate adolescents’ experiences. Adolescents reported racist experiences in the domains of school, peers, and with the police (males only). Moreover, qualitative findings echoed and expanded quantitative results with respect to the importance of the protective nature of parents and communities.


This study examined whether maternal depressive symptoms serve as a mediator, moderator, or both, between maternal HIV status (absence vs. presence of HIV) and child depressive symptoms. Participants were 224 noninfected children, ages 6 to 11, and their mothers, 38% of whom were HIV-infected. Initial analyses indicated that HIV-infected mothers and their children reported more depressive symptoms than noninfected mothers and their children. The primary analyses suggested that maternal depressive symptoms play a moderating, but not a mediating, role as the direction of the relationship between maternal depressive symptoms and child depressive symptoms differed between HIV-infected and noninfected groups. Explanations for the findings are offered and implications for prevention and intervention programs are considered.


The role of religious activity in the psychosocial adjustment of 205 inner-city African-American women, one-half of whom are HIV infected, was examined. Those who were HIV infected reported praying more but viewed prayer as less effective in coping with a chronic illness. Frequency of prayer predicted optimism about the future, whereas religious activity was not related to current depressive symptoms.
Ecological theory was used to explore the pathways through which intimate relationship quality influenced health functioning among rural, partnered African American women. Structural equation modeling was used to analyze data from 349 women in Georgia and Iowa. Women’s intimate relationship quality was positively associated with their psychological and physical health functioning. Support from community residents moderated this link, which was strongest for women who felt most connected with their neighbors and for women who believed their neighborhood to have a sense of communal responsibility. Future research should identify other factors salient to health functioning among members of this population.


Current work on children’s individual characteristics and family processes that contribute to variation in sibling relationship quality is reviewed. Findings from these studies are summarized in a heuristic model that specifies hypothesized links among family processes, intrapersonal characteristics, and variations in sibling relationship quality. The model is designed to provide researchers with a host of hypotheses to test and refine in future studies. The contributions that sibling relationships may make to cognitive and psychosocial development are then reviewed, with a suggestion that sibling relationships comprised of a balance of both prosocial and conflicted interactions create experiences that are most likely to nurture children’s social, cognitive, and psychosocial development.


The data analyses presented in this commentary answered the three questions around which it was structured. The results suggest that: (a) maternal monitoring contributes over time to children’s development of externalizing behavior rather than vice versa; (b) maternal monitoring moderates the longitudinal association between active/emotional child temperament and children’s externalizing behavior; and (c) variations in maternal monitoring can be traced to the links among child temperament, maternal psychological functioning, and mother-child relationship quality.


Since the early 1980s, a growing body of research has described the contributions of sibling relationships to child and adolescent development. Interactions with older siblings promote young children’s language and cognitive development, their understanding of other people’s emotions and perspectives, and, conversely, their development of antisocial behavior. Studies address the ways in which parents’ experiences with older children contribute to their rearing of younger children, which in turn contributes to the younger children’s development. Finally, by virtue of having a sibling, children may receive differential treatment from their parents. Under some conditions, differential treatment is associated with emotional and behavioral problems in children.


The contribution of marital attributions to parenting and parent-child interaction was examined, along with the contribution of children's attributions for negative parental behavior to ineffective parent-child communication. Data from 170 children 10 to 12 years old (84 girls, 86 boys) were used to test a model of hypothesized links among conflict-promoting marital attributions, negative marital context, parenting practices, children's attributions for parent behavior, and ineffective parent-child communication. Husbands' and wives' marital attributions were related to the marital context, which was related to ineffective parent-child communication. Husbands' and wives' conflict-promoting marital attributions also were related to parenting practices, which were related to children's attributions...

The authors used a longitudinal, prospective design to investigate a moderation effect in the association between a genetic vulnerability factor, a variable nucleotide repeat polymorphism in the promoter region of *5HTT* (5-HTTLPR), and increases in youths’ substance use. The primary study hypothesis predicted that involved–supportive parenting would attenuate the link between the 5-HTTLPR polymorphism and longitudinal increases in substance use. African American youths residing in rural Georgia (*N* = 253, mean age = 11.5 years) provided 4 waves of data on their own substance use; the mothers of the youths provided data on their own parenting practices. Genetic data were obtained from youths via saliva samples. Latent growth curve modeling indicated that 5-HTTLPR status (presence of 1 or 2 copies of the s allele) was linked with increases in substance use over time; however, this association was greatly reduced when youths received high levels of involved–supportive parenting. This study demonstrates that parenting processes have the potential to ameliorate genetic risk.


A randomized prevention design was used to investigate a moderation effect in the association between a polymorphism in the *SCL6A4* (*5HTT*) gene at 5-HTTLPR and increases in youths’ risk behavior initiation. Participation in the Strong African American Families (SAAF) program was hypothesized to attenuate the link between 5-HTTLPR status and risk behavior initiation. Youths (*N* = 641, *M* age = 11.2 years) were assigned randomly to a SAAF or control condition. Risk behavior initiation across 29 months was linked positively with the 5-HTTLPR genotype and negatively with SAAF participation. Control youths at genetic risk initiated risk behavior at twice the rate of SAAF youths at genetic risk and youths not at genetic risk in either condition.


**Objective:** The present research addressed the following important question in pediatric medicine: can participation in an efficacious preventive intervention ameliorate the risk that a genetic vulnerability factor is hypothesized to confer on increases in risk behaviors across preadolescence? **Methods:** As part of the Strong African American Families preventive intervention study, data were collected from 641 black families in rural Georgia, assigned randomly to the prevention or control condition. The prevention condition consisted of 7 consecutive meetings at community facilities, with separate parent and youth skill-building curricula and a family curriculum. Each meeting included separate, concurrent sessions for parents and youths, followed by a joint parent-youth session in which families practiced skills they learned in the separate sessions. Involvement in risk behaviors was assessed when the youths were 11 (prettest), 12 (posttest), and 14 (long-term follow-up) years of age. A genetic vulnerability factor, that is, a variable-nucleotide repeat polymorphism in the promoter region of the *SLC6A4* gene (*5HTT*), was assessed 2 years after the long-term follow-up assessment. **Results:** Youths at genetic risk who were assigned to the control condition displayed greater increases in risk behaviors across the 29 months that separated the pretest and long-term follow-up assessments, compared with youths at genetic risk who were assigned to the Strong African American Families condition and youths without genetic risk who were assigned to either condition. **Conclusion:** This is the first study to demonstrate that participation in an efficacious preventive intervention can ameliorate a genetic risk for increasing involvement in health-compromising risk behaviors across preadolescence.

This longitudinal study was designed to test hypotheses, derived from a stress proliferation framework, regarding the association between perceived racial discrimination and changes in parenting among African American mothers in the rural South. A sample of 139 mothers and their children were interviewed 3 times at 1-year intervals. Mothers reported on perceived discrimination and two proliferated stressors: stress-related health problems and depressive symptoms. Both mothers and children reported on mothers’ competence-promoting parenting. Structural equation modeling revealed a chainlike sequence: Perceived discrimination forecast increases in mothers’ stress-related health problems, which in turn were positively associated with depressive symptoms. Depressive symptoms constituted the proximal variable associated with decreases in mothers’ competence-promoting parenting. These results emerged independent of socioeconomic characteristics.


Longitudinal links between perceived racial discrimination and later conduct problems and depressive symptoms were examined among 714 African American adolescents who were 10 – 12 years old at recruitment. Data were gathered 3 times over a 5-year period. Hypotheses were tested via latent curve modeling and multiple-group latent growth modeling. Increases in perceived discrimination were associated with increased conduct problems and depressive symptoms. This association was weaker when youths received nurturant-involved parenting, affiliated with prosocial friends, and performed well academically. For conduct problems, the association was stronger for boys than for girls; for depressive symptoms, no gender differences emerged. The findings thus identify contextual variables that moderate the contribution of perceived discrimination to African American youths’ adjustment.


The unique contributions that parenting processes (high levels of monitoring with a supportive, involved mother–child relationship) and classroom processes (high levels of organization, rule clarity, and student involvement) make to children’s self-regulation and adjustment were examined with a sample of 277 single-parent African American families. A multi-informant design involving mothers, teachers, and 7- to 15-year-old children was used. Structural equation modeling indicated that parenting and classroom processes contributed uniquely to children’s adjustment through the children’s development of self-regulation. Additional analyses suggested that classroom processes can serve a protective–stabilizing function when parenting processes are compromised, and vice versa. Further research is needed to examine processes in both family and school contexts that promote child competence and resilience.


Pathways from mothers’ and fathers’ perceptions of their coparenting relationship show different links to triadic family processes and to academic competence, externalizing, and internalizing in nine- to twelve-year-old African American youths.
A family process model was tested, linking adequacy of family financial resources to academic and psychosocial adjustment among 156 African American 6- to 9-year-old children with single mothers who lived in the rural South. Seventy five percent of the sample lived in poverty. Lack of adequate financial resources was associated with more depressive symptoms and lower self-esteem among mothers. Self-esteem was linked with family routines and mother-child relationship quality. The paths from mother-child relationship quality and family routines to child academic and psychosocial adjustment were mediated by the development of child self-regulation. An alternative partially mediated model improved the fit of the data for families with boys.

A family process model was tested that linked maternal education, maternal religiosity, and the adequacy of family financial resources to cognitive and psychosocial competence in the mothers’ children. The sample included 156 6- to 9-year-old African American children living in single-mother-headed households in rural areas, 82% of whom lived in poverty. The distal variables of maternal education, maternal religiosity, and adequacy of financial resources were linked with the proximal variables of “no nonsense” parenting, mother-child relationship quality, and maternal involvement in the child’s school activities. The proximal variables were, in turn, indirectly linked with children’s cognitive competence, social competence, and internalizing problems through their association with the children’s development of self-regulation.

With a sample of 139 rural, single-parent African American families with a 6- to 9-year-old child, we traced the links among family financial resource adequacy, maternal childrearing efficacy beliefs, developmental goals, parenting practices, and children’s academic and psychosocial competence. A multimethod, multi-informant design was used to assess the constructs of interest. Consistent with the hypothesized paths, financial resource adequacy was linked with mothers’ sense of childrearing efficacy. Efficacy beliefs were linked with parenting practices indirectly through developmental goals. Competence-promoting parenting practices were indirectly linked with children’s academic and psychosocial competence through their association with children’s self-regulation.

This study explored the unique contributions of children's temperaments, parents' and siblings' alcohol use norms, and parent-child discussions to 10- to 12-year-old children's alcohol use norms. Independent assessments of each family member’s alcohol use norms, mother- and father-reported child temperament assessments, and child reports of the frequency and nature of parent-child discussions were obtained for 171 families. Hierarchical multiple regression analyses revealed a moderational effect: Children whose temperaments placed them at greater risk for alcohol problems in adolescence and early adulthood reported alcohol use norms that became more liberal as other family members’ norms became liberal. Frequent and bidirectional parent-child discussions were linked with less liberal alcohol use norms. The results support a transactional model of norm development that features interplay among children's temperaments and family processes.

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Objective: The purpose of this study was to examine the contributions of child temperament, parents’ alcohol use norms for their children and parent-child relationship quality to children’s alcohol use norms. Method: Observational and self-report data on these variables were gathered from mothers, fathers and target children during home visits to a purposive random sample of 171 intact white families with a 10- to 12-year-old child, 85 with girls and 86 with boys. Results: Liberality in children’s norms was associated with active, sensation-seeking temperament, liberality in parents’ norms and poor parent-child relationship quality. Positive parent-child, particularly father-child, relationships were associated with less liberal child norms even when parents’ norms were liberal and children’s temperaments were active and sensation oriented. Conclusions: Positive parent-child relationships have a conventionalizing effect on children’s alcohol use norms that moderates the effects of temperament and parental norms. the development of alcohol use norms is best described by transactional models.

A longitudinal transactional model was tested linking parenting and youth self-regulation to youths’ psychological functioning and alcohol-use behavior. Participants included one hundred twenty 12-year-olds, their mothers, and their fathers from whom three waves of data were collected at 1-year intervals. Teachers provided assessments of self-regulation, and parenting was assessed from multiple perspectives, including youth reports, parent reports, and observer ratings. Youths reported their psychological functioning and alcohol-use behavior. The data supported the model. Parenting and youth self-regulation were stable across time, and self-regulation was linked with changes in harsh–conflicted parenting from Wave 1 to Wave 2. Parenting at Wave 2 was associated with youth self-regulation. Youth self-regulation at Wave 2 mediated the paths from parenting practices at Wave 2 to youth psychological functioning and alcohol use at Wave 3.

This study focused on hypotheses about the contributions of neighborhood disadvantage, collective socialization, and parenting to African American children’s affiliation with deviant peers. A total of 867 families living in Georgia and Iowa, each with a 10- to 12-year-old child, participated. Unique contributions to deviant peer affiliation were examined using a hierarchical linear model. Community disadvantage derived from census data had a significant positive effect on deviant peer affiliations. Nurturant/involved parenting and collective socialization processes were inversely associated, and harsh/inconsistent parenting was positively associated, with deviant peer affiliations. The effects of nurturant/involved parenting and collective socialization were most pronounced for children residing in the most disadvantaged neighborhoods.

A model was tested in which predictions were advanced about children’s internalization of their parents’ alcohol-use norms and their own subsequent alcohol-use behavior. The sample included 132 families with a child who was 10–12 years old at the Time 1 assessment. Data were obtained in 3 waves at 1-year intervals. Parents’ alcohol-use norms were assessed at Time 1, children’s alcohol-use norms at Time 2, and children’s drinking behavior at Time 3. The link between parents’ alcohol-use norms and children’s drinking behavior was mediated through the children’s own norms. Father–child relationship processes moderated the links between fathers’ and children’s norms and between children’s norms and subsequent alcohol use. The findings highlight a need for further research on internalization processes using samples large enough to detect moderational effects.
Data from 296 sibling pairs (mean ages 10 and 13 years), their primary caregivers, and census records were used to test the hypothesis that African American children’s likelihood of developing conduct problems associated with harsh parenting, a lack of nurturant-involved parenting, and exposure to an older sibling’s deviance-prone attitudes and behavior would be amplified among families residing in disadvantaged neighborhoods. A latent construct representing harsh-inconsistent parenting and low levels of nurturant-involved parenting was positively associated with younger siblings’ conduct disorder symptoms, as were older siblings’ problematic attitudes and behavior. These associations were strongest among families residing in the most disadvantaged neighborhoods. Future research and prevention programs should focus on the specific neighborhood processes associated with increased vulnerability for behavior problems.
parenting. Involved–supportive parenting at Wave 1 was linked with peer-directed self-presentations at Wave 2. Wave 2 self-presentations were linked indirectly with changes from Wave 1 to Wave 3 in externalizing and internalizing symptoms through their association with academic competence.


**Purpose:** The Strong African American Families program, a universal intervention to deter alcohol use among rural African American preadolescents, was evaluated to determine whether it also prevented conduct problems across the 29 months separating the pretest and long-term follow-up assessments. The program is based on a contextual model in which intervention effects on parental behavior and youth protective factors are hypothesized to lead to behavior changes. **Methods:** African American 11-year-olds (*N* = 667) and their primary caregivers were randomly selected from public school lists of fifth-grade students and randomly assigned to an intervention (*n* = 369) or control (*n* = 298) condition. Intervention families participated in a 7-week family skills training program designed to deter alcohol use. Each meeting included separate, concurrent sessions for parents and children, followed by a joint parent–child session during which the families practiced the skills they learned in their separate sessions. Control families were mailed leaflets regarding early adolescent development, stress management, and exercise. All families completed in-home pretest, posttest, and long-term follow-up interviews during which parent-report and self-report data regarding conduct problems, low self-control, deviance-prone peer affiliations, parenting, and youth protective processes were gathered. **Results:** Intent-to-treat analyses indicated that prevention-group youth were less involved than control-group youth in conduct problems across time. As hypothesized, prevention effects were stronger for youth at greater risk of developing conduct problems. Intervention targeted parenting and youth factors partially accounted for intervention effects among high risk youth. **Conclusions:** Although the Strong African American Families program was designed to deter underage drinking, it is also effective in preventing the development of conduct problems.


**Objective:** To test a contextual-ecological model of factors relevant for glycemic control in an understudied and vulnerable population of persons with diabetes mellitus Type 2. **Design:** Rural African American adults (40–65 years old, *n* = 200) with Type 2 diabetes and 200 adult support persons whom the adults with diabetes nominated were interviewed in their homes. Adults with diabetes and support persons reported their own psychological functioning, which included depressive symptoms, self-esteem levels, and optimism levels as well as the quality of their relationship with one another. Adults with diabetes reported the extent and quality of the instrumental and emotional support they received from their support persons. **Results:** Structural equation modeling indicated that psychological functioning among the adults with diabetes and support persons was associated with the latter’s provision of support for diabetes self-management. Support, in turn, was linked indirectly with glycemic control as assessed via glycosylated hemoglobin levels, through promotion of glucose monitoring. **Conclusion:** Targeting sources of support in patients’ immediate social contexts is important to the improvement of self-care and deterring of morbidity among rural African Americans with Type 2 diabetes.


A large research literature suggests that modelling in the absence of reinforcement for either the model’s or the observer’s behavior is a potent source of social learning. This literature is based entirely, however, on experiments using models that always display the critical behaviors. It is possible, therefore, that results obtained in these experiments would not generalize to natural settings in which modelling is intermittent. The effects of intermittent modelling were examined using three groups of 15 four- and five-year-old children. Male and female children from middle-income families were individually exposed to an adult model who alternated descriptions of pictures of
common objects. With one group, the model used no descriptive adjectives (color or number) in her descriptions after baseline; she used descriptive adjectives with 50% of the pictures with a second group, and 100% of the pictures with a third. Analyses of the data showed that the children substantially increased their use of descriptive adjectives in both modelling groups, but not in the no-modelling group. The fact that there were no significant differences between the 50% and 100% modelling groups suggests that results obtained in studies using consistent modelling can be generalized to natural settings.


Older siblings’ contributions to younger siblings’ competence net of parenting processes were examined with 152 pairs of first-born ($M = 11.7$ years) and second-born ($M = 9.2$ years) siblings in rural, single-parent African American families. The possible moderational effect of sibling conflict on the association between older and younger siblings’ competence was also examined. Mothers reported their parenting practices, teachers assessed siblings’ competence, and older siblings reported sibling conflict levels. Structural equation modeling indicated that parenting was linked with older siblings’ competence, which in turn was linked with competence among younger siblings. Hierarchical multiple regression revealed that older and younger siblings’ competencies were linked when sibling relationships included low levels of conflict.


This study was designed to test hypotheses about family risk factors and their links to dosage and efficacy of a family-centered preventive intervention. Participants were 172 families with an 11 year-old child randomly assigned to the intervention condition in the Strong African American Families Program (SAAF). Two family risk factors, ratio of adults to children in the household and youth unconventionality, were negatively related to dosage, defined as number of intervention sessions attended. Dosage, in turn, was associated with changes in targeted parenting behavior across the 7 months between pretest and posttest. The effect of family risk factors on the link between program dosage and changes in parenting behavior was stronger for families experiencing more risks. The results highlight the need for engagement strategies for recruiting and retaining high-risk families in preventive interventions.


In this study, the efficacy of the Strong African American Families Program (SAAF) was tested. The trial, which included 332 families, indicated that families who participated in SAAF experienced increases over time in regulated, communicative parenting; increases in targeted parenting behaviors, according to youths’ reports; and low rates of high-risk behavior initiation among youths. Changes in regulated, communicative parenting mediated the intervention’s impact on youths’ recognition of changes in parenting, which in turn was linked to changes in youths’ high-risk behavior.


A randomized prevention trial contrasted families who took part in the Strong African American Families Program (SAAF), a preventive intervention for rural African American mothers and their 11-year-olds, with control families.
SAAF is based on a contextual model positing that regulated, communicative parenting causes changes in factors protecting youths from early alcohol use and sexual activity. Parenting variables included involvement-vigilance, racial socialization, communication about sex, and clear expectations for alcohol use. Youth protective factors included negative attitudes about early alcohol use and sexual activity, negative images of drinking youths, resistance efficacy, a goal-directed future orientation, and acceptance of parental influence. Intervention-induced changes in parenting mediated the effect of intervention group influences on changes in protective factors over a 7-month period.


A three-wave model linking maternal functioning to child competence and psychological adjustment was tested with 150 African American families living in the rural South. The children were 11 years old at Wave 1. Structural equation modeling indicated that maternal education and per capita income were linked with maternal psychological functioning (self-esteem, optimism, depression) at Wave 1, which forecast mothers’ competence-promoting parenting 1 year later at Wave 2. Competence-promoting parenting forecast child cognitive competence, social competence, and psychological adjustment 1 year later at Wave 3, indirectly through child self-regulation. The data were reanalyzed controlling for Wave 1 child competence and adjustment. All paths remained significant, indicating that the model accounted for change in child competence and adjustment across 2 years.


The Strong African American Families Program, a universal preventive intervention to deter alcohol use among rural African American adolescents, was evaluated in a cluster-randomized prevention trial. This 7-week family skills training program is based on a contextual model in which intervention effects on youth protective factors lead to changes in alcohol use. African American 11-year-olds and their primary caregivers from 9 rural communities (N = 332 families) were randomly selected for study participation. Communities were randomized to prevention and control conditions. Intent-to-treat analyses indicated that fewer prevention than control adolescents initiated alcohol use; those who did evinced slower increases in use over time. Intervention-induced changes in youth protective factors mediated the effect of group assignment on long-term changes in use.


A randomized prevention trial was conducted contrasting families who took part in the Strong African American Families Program (SAAF), a preventive intervention for rural African American mothers and their 11-year-olds, with control families. SAAF is based on a conceptual model positing that changes in intervention-targeted parenting behaviors would enhance responsive–supportive parent–child relationships and youths’ self-control, which protect rural African American youths from substance use and early sexual activity. Parenting variables included involvement-vigilance, racial socialization, communication about sex, and clear expectations for alcohol use. Structural equation modeling analyses indicated that intervention-induced changes in parenting were linked with changes in responsive–supportive parent–child relationships and youth self-control.

We discuss serial marriage, defined as three or more marriages as a result of repeated divorce, from a heuristic perspective. We estimate the prevalence of the phenomenon and advance hypotheses based on existing empirical, clinical, and theoretical work concerning the development of this lifestyle and its consequences for family members. We discuss possible outcomes of children in serial marriage families. We present conceptual and theoretical considerations for the study of serial marriage, as well as suggestions for future research directions.


Parental divorce and remarriage are common experiences among American children in the 1990s. To provide optimal support for children who are adapting to their parents’ marital transitions, professionals must understand the nature of such transitions and have some idea of the challenges children face in adapting to these transitions.


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A family process model that links family financial resources and parental educational attainment to academic competence during early adolescence was tested. The sample included 90 rural African American youths between the ages of 9 and 12 and their mothers and fathers. Rural African American community members participated in the development of the self-report instruments and observational research methods. Parental educational attainment was linked with family financial resources and with parental involvement with the adolescent’s school. Greater family financial resources were associated with more supportive and harmonious family interactions and with lower levels of interparental conflict. Maternal involvement with the child’s school, family processes, and family financial resources were linked directly with academic competence and mediated by the development of youth self-regulation.


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We proposed a family process model that links maternal and paternal formal religiosity to marital interaction quality, parental co-caregiver [sic] support and conflict, parent-youth relationship quality, and parental use of inconsistent/ nattering parenting strategies. The sample included 90 African American youths and their married parents, who lived in the rural South. African American community members participated in the development of the self-report instruments and observational research methods used to test the model. The results supported most of the hypotheses. Religiosity was linked with higher levels of marital interaction quality and co-caregiver support, and with lower levels of marital and co-caregiver conflict. The associations between religiosity and parent-youth relationship quality were mediated by the marital and co-caregiver relationships.


We proposed a family process model that links family financial resources to academic competence and socioemotional adjustment during early adolescence. The sample included 90 9–12-year-old African-American youths and their married parents who lived in the rural South. The theoretical constructs in the model were measured via a multimethod, multi-informant design. Rural African-American community members participated in the development of the self-report instruments and observational research methods. The results largely supported the hypotheses. Lack of family financial resources led to greater depression and less optimism in mothers and fathers, which in turn were linked with co-caregiving support and conflict. The associations among the co-caregiving processes and youth academic and socioemotional competence were mediated by the development of youth self-regulation. Disruptions in parental co-caregiving interfered with the development of self-regulation. This interference negatively influenced youths' academic competence and socioemotional adjustment.


In this study we sought to determine whether sibling temperaments moderated the associations of parent-child relationship quality and family problem-solving behavior with sibling relationship quality. Observational assessments of mother-child and father-child relationship quality, family problem-solving behavior, and sibling relationship quality were obtained from the families of 49 pairs of brothers and 46 pairs of sisters. Mean ages were 10-2 for older siblings and 7-6 for younger siblings. Parent-reported child temperament assessments were also obtained. The links among mother-older child relationship quality, father-older child relationship quality, and sibling relationship quality were moderated by the older sibling's temperament. The younger and older siblings' temperaments moderated the associations between the quality of the father-younger sibling and sibling relationships. The association between family problem-solving behavior and sibling relationship quality was not moderated by sibling temperaments.


In this study we examined associations of 4 paternal direct and differential behaviors with concurrent and longitudinal assessments of sibling relationships, as well as the unique contributions of mothers' and fathers' behavior to the sibling relationship variables. Observational assessments of maternal and paternal direct and differential behavior, as well as observational and self-report assessments of sibling relationship quality, were obtained. Only one difference emerged between rates of maternal and paternal behavior toward the children; however, paternal behavior accounted for unique variance in sibling relationship quality more often than did maternal behavior. The results are discussed in terms of relative parental availability.

http://www.jstor.org/stable/353250

In this study we tested the hypothesis that parents’ differential treatment of their children would be associated with differences in siblings’ negative emotionality. Mothers, fathers, and sibling pairs from 98 families participated. Mothers and fathers were observed separately while interacting with their children; these interactions were quantified using a behavioral coding system that yields measures of differential positivity, negativity, control, and responsiveness. On a separate occasion each parent rated his or her children’s emotionality. When younger siblings received significantly higher negative emotionality ratings from both parents than did the older siblings, the parents enacted higher rates of differential treatment that favored the younger sibling. When older siblings were rated as significantly more negative in emotionality, and when the siblings were rated as similar in negative emotionality, parental treatment was more nearly equal.
http://www.jstor.org/stable/354023

A family process model linked mothers’ and fathers’ psychological functioning to sibling relationship quality in a sample of 85 9- to 12-year-old African American youths and their married parents living in the Southeastern United States. Members of the rural African American community participated in the development of the research methods. Better parental psychological functioning was linked to closer and more supportive relationships in the nuclear and extended families and with more supportive parenting practices. In turn, these family processes were linked with children’s development of self-regulation. Self-regulated youths experienced more harmonious and less conflicted sibling relationships.


We use ecological systems theory to guide our investigation of depression among a sample of 102 married Black mothers residing in the rural South. Using self-report data collected via computerized interviews during home visits, we conduct multivariate regression analyses, exploring the associations between depression and (a) spousal support and conflict, (b) cocaregiver support and conflict, (c) child conduct difficulties, and (d) socioeconomic risk. We hypothesize that each of these variables are associated with mothers’ depression scores and that the extent to which these familial variables and depression are associated will vary across socioeconomic contexts. Socioeconomic risk, child conduct difficulties, and conflict with a cocaregiver were associated with women’s depression in the full model. The moderational hypotheses were upheld for the variables of spousal support and child conduct difficulty. Spousal support and depression have a strong negative association under conditions of high socioeconomic risk and a nonsignificant relationship when socioeconomic risk is low. The association between child conduct difficulty and depression was exacerbated under high socioeconomic risk.


We tested a hypothetical model linking maternal education and maternal coping behavior with parent-child relationship quality, and in turn, children’s self-regulatory behavior and mental health difficulties. Consistent with predictions, mothers’ use of active coping behaviors predicted more positive parent-child relationship quality, greater child self-regulatory behavior, and fewer perceived behavioral and emotional difficulties in children. Implications of these findings for intervention with rural African American mothers are discussed.


Hypotheses concerning the extent to which adolescents’ cognitions mediate the relation between parenting behaviors and adolescent substance use were examined in a panel of African American adolescents (N = 714, M age at Time 1 = 10.51 years) and their primary caregivers. A nested-model approach indicated that effective parenting (i.e., monitoring of the child’s activities, communication about substances, and parental warmth) was related to adolescent substance use more than 5 years later. The parenting behaviors protected the adolescent from subsequent alcohol, tobacco, and marijuana use through associations with two cognitive elements from the prototype/willingness model: favorable risk images (prototypes) and behavioral willingness. Additional analyses indicated that these protective effects were strongest among families residing in high-risk neighborhoods.


This study of 422 two-caregiver African American families, each with a 10–11-year-old focal child (54% girls), evaluated the applicability of the family stress model of economic hardship for understanding economic influences on child development in this population. The findings generally replicated earlier research with European American families. The results showed that economic hardship positively relates to economic pressure in families. Economic pressure was related to the emotional distress of caregivers, which in turn was associated with problems in the caregiver relationship. These problems were related to disrupted parenting practices, which predicted lower positive child adjustment and higher internalizing and externalizing symptoms. The results provide significant support for the family stress model of economic hardship and its generalizability to diverse populations.


The effects of community characteristics on well-being were examined among 709 African American women. Direct and moderating effects of neighborhood characteristics on distress were tested. Aggregate-level ratings of neighborhood cohesion and disorder were significantly related to distress, although the relation between cohesion and distress became nonsignificant when individual risk factors were statistically controlled. Aggregate-level neighborhood variables interacted significantly with individual risk and resource variables in the prediction of distress, consistent with trait-situation interaction theories (D. Magnusson & N. S. Endler, 1977). Community cohesion intensified the benefits of a positive life outlook. Community disorder intensified both the benefits of personal resources and the detrimental effects of personal risk factors. Results showed evidence of resilience among African American women.


The entailment model of attributions is examined for the first time using a dyadic approach and longitudinal data. In a sample of 229 married partners with children, causal attributions were distinguished empirically from responsibility attributions and, consistent with the entailment model, the effect of causal attributions on conflict was mediated through attributions of responsibility. Only 1 path was influenced by spouse gender. Examination of cross-spouse effects revealed significant effects and provided a better fit than a model with no cross-spouse effects. The importance of including cross-spouse effects in attributional models is discussed.


Substantial research has focused on the negative associations between coparenting conflict, parental psychological functioning, and parenting behavior in European American, middle-income, families. However, less attention has been given to ethnic minority families and to families that are nontraditionally structured. In an effort to address this gap, the current longitudinal study examines the relation between conflict with the mother-identified primary cocaregiver and parenting practices in single parent, economically disadvantaged African American families. Participants included 234 mother–child dyads. It was hypothesized that conflict would relate to less utilization of positive parenting practices and that this association would be mediated, at least in part, by maternal psychological distress. Hypotheses were examined using structural equation modeling (LISREL 8.3). Conflict with a co-caregiver was significantly related to parenting both directly and indirectly through maternal psychological distress. Implications of the findings are discussed.

The purposes of this study were to develop an instrument that would provide a quantitative measure of the attitudes of undergraduate college students toward educational use of the Internet and to study selected behavioral correlates of those attitudes. The development of pilot scales along with a social desirability response scale and the resulting 18-item Likert format “Attitude Toward Educational Use of the Internet” (ATEUI) scale are described. Several behavioral correlates were found to provide evidence for the scale’s construct validity. For instance, favorable attitudes were associated with: (1) keeping track of valuable educational Internet sites; (2) sharing educational information found on the Internet with friends; (3) choosing classes that require Internet use; (4) greater frequency of Internet use, both in general and for educational purposes; (5) greater number of reasons for using the Internet for education; and (6) greater number of Internet features used. Some implications for future research are provided.


This study examined the role of family variables in child resiliency within a sample of African-American, inner-city children whose mothers are HIV-infected. Variables from three dimensions of the family were included: family structural variables, maternal variables, and mother-child (parenting) variables. The participants were 82 children between the ages of 6 and 11 and their HIV-infected mothers. Correlational analyses indicated that resiliency was associated only with three parenting variables: parent-child relationship, parental monitoring, and parental structure in the home. Hierarchical regression analyses indicated a multiplicative relationship between parental monitoring and parent-child relationship and between parental monitoring and parental structure in the home, suggesting that parenting variables potentiate each other. Clinical implications of the findings are considered.


This article introduces The Family Health Project, a multidisciplinary longitudinal investigation of children and their HIV-infected mothers and a comparison sample from the same inner-city environment. The background literature, purpose of the Project, advantages and challenges of interdisciplinary collaboration, methods of study including participant and design issues, overview of preliminary findings, clinical implications, and social policy implications are presented. Beyond introducing a new and important project examining a neglected sample in our society, the present article is intended to provide useful guidelines for other multidisciplinary large-scale clinical research projects.


This study assessed children's attributions in parent-child relationships, examined their association with relationship positivity and behavior displayed toward the parent, determined whether depressive symptoms account for these associations, and investigated whether parent and child attributions are linked. Ten- to 12-year-old children (116 girls, 116 boys) completed several questionnaires and were observed during parent-child interactions. Children's attributions for parent behavior were related to positivity of the parent-child relationship and to self- and parent-reported conflict and observed behavior with the father. These associations were not due to children's depressive symptoms but potentially augment our understanding of the effect of depression on parent-child relationships. Finally, gender moderated the parent attribution-child attribution association. The results underscore the importance of children's perceptions of family processes.

The study of conflict has dominated psychological research on marriage. This article documents its move from center stage, outlining how a broader canvas accommodates a richer picture of marriage. A brief sampling of new constructs such as forgiveness and sacrifice points to an organizing theme of transformative processes in emerging marital research. The implications of marital transformations are explored including spontaneous remission of distress, nonlinear dynamic systems that may produce unexpected and discontinuous change, possible nonarbitrary definitions of marital discord, and the potential for developing other constructs related to self-transformation in marital research.


**Objective:** To evaluate the efficacy of a parent-based sexual-risk prevention program for African American preadolescents. **Design:** Randomized controlled trial. **Setting:** Community-based study conducted in Athens, Georgia; Atlanta, Georgia; and Little Rock, Arkansas from 2001 to 2004. **Participants:** From 1545 inquiries, 1115 African American parent-preadolescent dyads (child, aged 9-12 years) formed the analytic sample. **Intervention:** Participants were randomized into 1 of 3 study arms: enhanced communication intervention (five 2 1/2-hour sessions), single-session communication intervention (one 2 1/2-hour session), and general health intervention (control, one 2 1/2-hour session). **Outcome Measures:** Continuous measures of parent-preadolescent sexual communication and parental responsiveness to sex-related questions at preintervention, postintervention, and at 6- and 12-month follow-ups; and dichotomous measure of preadolescent sexual risk (having engaged in or intending to engage in sexual intercourse at 12-month follow-up). **Results:** Using intent-to-treat participants, differences of mean change from baseline for continuous measures and relative risk for the dichotomous measure of sexual risk were calculated. Participants in the enhanced intervention had higher mean changes from baseline scores, indicating more sexual communication and responsiveness to sexual communication at each assessment after intervention for all continuous measures than those in the control intervention and single-session intervention. Preadolescents whose parents attended all 5 sessions of the enhanced intervention had a likelihood of sexual risk at the 12-month follow-up of less than 1.00 relative to those whose parents attended the control (relative risk, 0.65; 95% confidence interval, 0.41-1.03) and single-session (relative risk, 0.62; 95% confidence interval, 0.40-0.97) interventions. **Conclusions:** These results provide preliminary evidence for the efficacy of a parenting program designed to teach sexual communication skills to prevent sexual risk in preadolescents. **Trial Registration:** clinicaltrials.gov Identifier: NCT00137943.


Relative to the attention given to the family, the larger environmental context in which children live has received little attention. This study examined 277 African American children from single-parent families living in two community contexts: rural and urban. Resources and risks within each community were compared across communities. Furthermore, the relations of community, community environment (a resource-risk index), and the interaction of these two variables to child psychosocial adjustment were examined. Finally, the role of informant (mother or child) was examined. The results indicated that the mothers and children from the urban community reported more risks than those from the rural community. The community environment, but not community (rural vs. urban), related consistently to child psychosocial adjustment but only when the same informant (mother or child) reported both the resource-risk index and child psychosocial adjustment. Community did not qualify this relationship. Implications for prevention and intervention programs are considered.

This study examined the unique and interactive roles of mother and teacher depressive symptoms in child adjustment in 277 African American single mother-headed families, as well as whether the associations differed depending on the age and gender of the child. Findings revealed a significant association between maternal depressive symptoms and child depressive symptoms in girls, but not boys. Moreover, the combination of higher levels of both mother and teacher depressive symptoms was associated with the highest level of child depressive symptoms and, for younger children, externalizing symptoms. The importance of considering the multiple social contexts in which children interact is discussed.


This review provides a selective overview of scholarship on gender and families over the past decade. First, we discuss four characteristics of feminist perspectives to theoretical and methodological issues in social science. Then we describe briefly how feminist sensibility has been reflected in family scholarship over the past decade. We conclude with brief observations on the disjuncture between academic work on gender and the feminist backlash apparent in the contemporary culture.


The association of pubertal maturation with internalizing and externalizing symptoms was examined with a sample of 867 African-American 10–12-year-old children. Children reported their pubertal development status and timing using a self-report questionnaire, and symptoms were assessed through diagnostic interviews with the children and their primary caregivers. Pubertal status and timing were significantly associated with children’s reports of the internalizing symptoms of social anxiety disorder, generalized anxiety disorder, and major depression and with the externalizing symptoms of oppositional defiant disorder, attention deficit disorder, and conduct disorder. Pubertal development also was associated with caregivers’ reports of children’s externalizing symptoms. The pubertal transition was associated with internalizing and externalizing symptoms in both boys and girls.


The effects of the pubertal transition on behavior problems and its interaction with family and neighborhood circumstances were examined with a sample of 867 African American children 10–12 years of age. Pubertal development status, pubertal timing, and primary caregivers’ parenting behaviors were significantly related to affiliation with deviant peers and externalizing behaviors. Externalizing behavior among early-maturing children was associated positively with primary caregivers’ use of harsh–inconsistent discipline and negatively with nurturant–involved parenting practices. Disadvantaged neighborhood conditions were significantly associated with deviant peer affiliation. The effect of pubertal transition varied according to family and neighborhood conditions: Early-maturing children living in disadvantaged neighborhoods were significantly more likely to affiliate with deviant peers. Early-maturing children with harsh and inconsistent parents were significantly more likely to have externalizing problems.

Using 2 waves of longitudinal data collected from approximately 870 African American adolescents, this study examined (a) changes in early risk factors for substance use during transition to early adolescence, including perceived prototypes of substance-using peers, willingness and intention to use substances, number of substance-using peers, and youths’ own actual substance use; (b) the relationship between pubertal timing and these substance use risks; and (c) the interaction between pubertal timing and peer substance use in predicting the risks. Results showed that, first, risks for substance use increased, particularly among girls, during the transition to early adolescence. Children’s prototypic images of substance users became increasingly favorable during this transitional period; a greater number of them were willing and intended to use substances during the transition to early adolescence; and an increased number of early adolescents and their friends began to use substances. Second, these changes were significantly more likely to occur among early maturing girls. Third, early physical maturation interacted with peer substance use to affect these changes.


Effects of early physical maturation and accelerated pubertal changes on symptoms of major depression were examined in 639 African American children. Three rival hypotheses, early timing, off-time, and stressful change, were tested using 2 waves of data (mean ages = 11 and 13 years). The pubertal effect operates differently according to children’s gender and age. For girls, early maturation was consistently associated with elevated levels of depressive symptoms. For boys, early maturers manifested elevated levels of depression only at age 11, but these symptoms subsided by age 13. Boys who experienced accelerated pubertal growth over time displayed elevated symptom levels. Results support the early timing hypothesis for girls and the stressful change hypothesis for boys. Time at assessment is critical when examining boys’ pubertal transition.


This study examined mediators of the Strong African American Families Program, a randomized, dual-focus prevention trial intended to delay the onset of alcohol use and reduce alcohol consumption among rural African American youths. More specifically, it demonstrated that changes in consumption 2 yrs after the intervention were mediated through 2 different paths, a social reaction path and a reasoned/intention path. The social reaction path provided evidence that relative to the control condition, the intervention decreased children’s willingness to drink by making their images of drinkers less favorable. The reasoned/intention path provided evidence that the intervention influenced the children’s intentions to drink by increasing targeted parenting behaviors related to alcohol. Furthermore, the data demonstrate that these changes in willingness and intentions were independently associated with alcohol consumption at the follow-up, and they suggest that a dual-process model approach that targets both intentions and willingness can be more successful than either approach alone.


The relation between perceived racial discrimination and substance use was examined in a panel of 684 African American families, using the prototype–willingness model of adolescent health risk (F. X. Gibbons, M. Gerrard, & D. Lane, 2003). Discrimination was concurrently and prospectively related to use in the parents and the children (mean age = 10.5 years at Wave 1). The discrimination → use relation in the parents was mediated by distress (anxiety and depression). Among the children, the relation was mediated by distress as well as their risk cognitions (favorability of their risk images and their willingness to use) and the extent to which they reported affiliating with
friends who were using substances. Each of these relations with discrimination was positive. In contrast, effective parenting was associated with less willingness and intention to use. Theoretical and applied implications of the results are discussed.


This study examined the cognitions thought to mediate the impact of context on adolescent substance use and also the extent to which context moderates the relations between these cognitions and use. Risk cognitions and behaviors were assessed in a panel of 746 African American adolescents (M age 10.5 at Wave 1, 12.2 at Wave 2). Results indicated that adolescents living in high-risk neighborhoods were more inclined toward substance use and more likely to be using at Wave 2. These context effects were mediated by the adolescents’ risk cognitions: their risk images, willingness to use, and intentions to use. Also, context moderated the relation between willingness and use (the relation was stronger in high-risk neighborhoods) but it did not moderate the intentions to use relation.


A critical period hypothesis linking early experiences with both racial discrimination and conduct disorder (CD) with subsequent drug use was examined in a panel of 889 African American adolescents (age 10.5 at time 1) and their parents. Analyses indicated that these early experiences did predict use by the adolescents at time 3 (T3)–5 years later. These relations were both direct and indirect, being mediated by an increase in affiliation with friends who were using drugs. The relations existed controlling for parents’ reports of their use, discrimination experiences, and their socioeconomic status (SES). The impact of these early experiences on African American families is discussed.


Social psychologists have amassed a large body of work demonstrating that overweight African American adolescent girls have generally positive self-images, particularly when compared with overweight females from other racial and ethnic groups. Some scholars have proposed that elements of African American social experience may contribute to the maintenance of these positive self-views. The article evaluates these arguments using data drawn from a panel study of socioeconomically diverse African American adolescent girls living in Iowa and Georgia. The article analyzes the relationship between body size and social self-image over three waves of data, starting when the girls were 10 years of age and concluding when they were approximately 14. The findings show that heavier respondents hold less positive social self-images; however, the findings also show that being raised in a family that practices racial socialization moderates this relationship.


Previous research on corporal punishment has failed to consider the interaction of parent support and parent gender in predicting child outcomes. The current study examined whether parental support moderated the effects of corporal punishment on child outcomes (i.e., depression and aggression), and more specifically, whether the gender of the supportive parent moderated the effects of punishment from the opposite-sex parent. Results differed depending on the gender of the punishing and supportive parents, suggesting that parental support can be a protective factor in child outcomes but only under certain conditions. Mother support moderated the effects of father punishment on child depression but not child aggression. High corporal punishment by father was related to more
child depression at both high and low levels of mother support. High levels of mother support only seemed important (i.e., children were less depressed) at low levels of father corporal punishment. In contrast, father support moderated the relationship between mother corporal punishment and child aggression but not depression. Children with high father support showed less aggression across all levels of mother corporal punishment. At low levels of father support, child aggression increased as mother corporal punishment increased. For depression, mother corporal punishment was positively related to child depression regardless of level of father support. These findings suggest differential effects for mother and father support and have implications for the treatment and prevention of negative outcomes in children who are physically punished by their parents.


A 5-year longitudinal study of African American adolescents, aged 10 to 12 at Time 1, used the prototype/willingness (prototype) model to examine the (social) cognitive effects of the onset of sexual behavior on self-concept. Structural equation modeling (SEM) showed that becoming sexually active was related to favorable changes in adolescents’ self-concepts and that this effect was moderated by gender. The effect was more pronounced among boys than girls. Positive self-concept, in turn, was related to subsequent risky sexual behavior. Sexual onset was also associated with positive changes in adolescents’ images of the typical adolescent who has sex (i.e., sex prototype). This increase in prototype favorability marginally predicted subsequent willingness to have risky sex. In sum, sexual debut was related to increases in adolescents’ self-concepts and risk cognitions, both of which predicted risky sexual behavior.


In this article, we discuss general observations about successful delivery of culturally sensitive variations of empirically grounded strategies for relationship enhancement and divorce prevention. This discussion focuses on the importance of religious traditions in culturally sensitive marriage enrichment services. In particular, we highlight our ongoing investigation of the Program for Strong African American Marriages (ProSAAM) and share some of our experiences in disseminating ProSAAM to communities in northeast Georgia.


This study included three waves of data, collected from approximately 890 African-American children and their families. Antecedents and consequences of psychiatric disorders among this population were examined. Children’s temperament, pubertal timing, and experience of stressful life events were tested as antecedents of psychiatric disorders. Several aspects of school functioning were then tested as consequences of psychiatric disorders. In addition, children with a single psychiatric disorder and those with comorbid disorders were statistically compared. Results showed that (1) children with at least one disorder, compared to those with no disorder, exhibited significantly more difficult temperament, experienced puberty earlier, and underwent greater numbers of stressful life events; (2) those with at least one disorder had significantly poorer school outcomes than those with no disorder; (3) children with comorbid disorders, compared with those who had only one disorder, displayed lower educational aspirations and poorer school commitment.

The association between depressive symptoms and 2 measures of HIV disease status in 73 African American single mothers was examined. Hierarchical multiple regression analyses revealed that clinician-rated depressive symptoms predicted subjective, but not objective, parameters of disease status 12 to 14 months later. More symptoms of depression at the 1st assessment predicted an increase in physical complaints over the course of the study. Results suggest that researchers and clinicians interested in enhancing quality of life among African American single mothers with HIV infection, an understudied population within the HIV-AIDS literature, should consider both subjective and objective measures of the disease.


Risk for depressive symptoms among HIV-infected African American single mothers (n = 96), relative to demographically matched non-infected single mothers (n = 120), was examined, using both self-report and clinician-rated scales of depression. Assessment of depressive symptoms occurred at two points separated by one year. Findings revealed that HIV-infected mothers were at greater risk for depressive symptoms at both assessments, regardless of method of assessment. Moreover, HIV-infected mothers remained at greater risk when analyses were limited to cognitive and affective symptoms of depression, decreasing the likelihood that the difference between the two groups was due to greater endorsement of somatic symptoms of depression by the HIV-infected group.


This prospective study examined the association between stressful life events and self-reported health in 72 inner-city, low-income African American women with HIV. Depressive symptoms were examined as a potential mediator of this association. Findings indicated that family stressors predicted deterioration in self-reported health status over the 15-month assessment period. Additionally, the association between family stress and self-reported physical health was mediated by depressive symptoms such that the strength of the association between family stress and self-reported health was no longer statistically significant after depressive symptoms were entered in the model. This study suggests a potentially important target for prevention and intervention efforts aimed at enhancing the quality of life of women with HIV.


The primary purposes of this study were to examine whether maternal optimism is related to positive parenting and child adjustment and whether it contributes beyond maternal depressive symptoms to our understanding. The participants were 141 African American single mothers and one of their children. Findings revealed that maternal optimism was associated with positive parenting and this association was only partially mediated by maternal depressive symptoms. Maternal optimism was not associated with child psychosocial adjustment, but positive parenting was associated with lower levels of both internalizing and externalizing difficulties. The utility of understanding the link between maternal optimism and parenting for prevention and intervention efforts aimed at enhancing quality of life and subsequent child adjustment is discussed, as well as directions for future research on maternal optimism.


Three models of risk were examined for 277 African American children from single-mother-headed homes: cumulative, additive, and indirect models. Risk factors were mother-reported community risks, inadequate income, maternal depressive symptoms, and inadequate parenting. Child-reported internalizing and externalizing difficulties
served as dependent measures of adjustment. Whereas the cumulative risk model identified a subset of children within this group as at-risk for adjustment difficulties, only more proximal family variables (maternal depressive symptoms and inadequate parenting) accounted for unique variance in child outcomes (additive risk model). However, the more distal risk factors—community risk and inadequate income—were linked to both internalizing and externalizing difficulties through the proximal family variables (indirect effects model).


Parental monitoring is considered an essential parenting skill. Despite its relevance to a range of child and adolescent outcomes, including the prevention of conduct problems and substance use, there has been little empirical attention devoted to examining the antecedents of parental monitoring. Building on Bronfenbrenner’s ecological model, this study examined the association between the ecological context in which families reside and parental monitoring across two waves of data separated by 15 months. Findings were consistent across increasingly conservative sets of hierarchical multiple regression analyses. Whether the neighborhood was rural or urban and the level of maternal depressive symptoms predicted parental-monitoring behavior concurrently and longitudinally as well as change in parental monitoring over time. Monitoring increased over the 15-month interval more in urban areas than rural areas and among mothers with lower levels of depressive symptoms. Clinical implications and directions for future research are discussed.


This longitudinal investigation examined main and interactive effects of coparent support and conflict on mother and child adjustment in 248 low-income, African American, single mother-headed families. The findings indicated that coparent conflict was a more robust predictor of mother and child maladjustment both cross-sectionally and longitudinally than was coparent support. Moreover, findings revealed that coparent conflict and support interacted to predict one parenting behavior, monitoring, both cross-sectionally and longitudinally. Coparent relationships characterized by high levels of support and low levels of conflict were associated with the highest levels of parental monitoring behavior, whereas coparent relationships characterized by low levels of support and high levels of conflict were associated with the lowest levels of monitoring. The findings highlight the importance of examining both positive and negative aspects of coparent relationships in this at-risk, but understudied, group.


This prospective study examined the association between perceived neighborhood violence and maternal monitoring and the moderating role of 2 sources of support (coparents and friends/neighbors) among low-income African American single mothers. Mothers’ ratings of neighborhood violence were associated with monitoring both concurrently and longitudinally; however, this association was qualified by each source of social support. When neighborhood violence is perceived as being high by mothers, high levels of social support from coparents and from friends and neighbors are associated with more maternal monitoring. The findings point to the importance of understanding the social context in which African American single mothers live when developing and implementing parenting prevention and intervention programs targeting high-risk families.

In an effort to expand the parental conflict literature beyond 2-parent and divorced families, this study examined the following questions: Is coparental conflict between single mothers and the individuals who assist them in raising their children associated with child adjustment, and do parenting skills mediate or moderate this association? The sample consisted of 238 African American mothers and their 7- to 11-year-old children. Data were collected at 2 time points separated by approximately 15 months. Results indicated that coparental conflict was associated with child adjustment both concurrently and longitudinally, and that this association was partially mediated, but not moderated, by parenting skills.


We examined the extent to which 11- to 12-year-old children’s (N = 174) self-esteem (SE) stability and level related to their perceptions of various aspects of parent-child communication. Compared to children with stable SE, children with unstable SE reported that their fathers were more critical and psychologically controlling, and less likely to acknowledge their positive behaviors or to show their approval in value-affirming ways. Likewise, children with low SE reported that their fathers exhibited these qualities to a greater extent than did children with high SE. In addition, fathers of children with stable high SE were viewed as especially good at problem solving. Children’s SE level related to perceptions of mothers’ communication styles very similarly to how it did with fathers’; with respect to SE stability, however, relationships were generally less consistent and frequently absent. Discussion centered on the role of parent-child communication in promoting unstable SE.


The occurrence and co-occurrence of depressive symptoms and conduct problems were examined in the context of parenting behaviors in a community-based sample of 897 African American children and their primary caregivers using a multi-informant, longitudinal design. Parenting behaviors and clinical symptoms were assessed in 2 waves, when the children averaged 10.5 and 12.3 years of age. Parenting behaviors differed significantly according to a child’s symptomatology; (a) that is, when a child exhibited no depressive or conduct problems, (b) depressive problems only, (c) conduct problems only, or (d) co-occurring depressive and conduct problems. When parenting behaviors were examined according to changes in children’s symptom levels, children whose symptoms increased over time reported increases in hostility and harsh–inconsistent parenting and decreases in warmth and nurturant–involved parenting.


A 5-wave model linking family and maternal functioning to youth psychological adjustment was tested with 139 single-mother-headed African American families with young adolescents (mean age = 11 years at recruitment) living in the rural South. Structural equation modeling indicated that an accumulation of family risk factors at Wave 1 was linked with maternal psychological functioning at Wave 2, which forecast competence-promoting parenting practices at Wave 3. These parenting practices indirectly forecast youth externalizing and internalizing behaviors 2 years later at Wave 5, through youth self-regulation at Wave 4. The hypothesized model was retested, controlling for Wave 1 youth externalizing and internalizing behaviors. All paths remained significant, indicating that the model accounted for change in youth psychological adjustment across 4 years.

Confirmatory factor analysis was applied in a test of alternative factor models and measurement invariance across gender groups using data from the Early Adolescent Temperament Questionnaire (EATQ). Mother’s rated their 10-to 14-year-old children (116 girls and 115 boys) on the EATQ Shyness, High-Intensity Pleasure, Activity Level, Attention, Irritability, and Fear scales. A first-order six-correlated factor model best represented the structure of temperament. As expected, factor models based on composite indicators showed better overall model fit than did those based on single items. The measurement invariance of the first-order model across gender suggests that the EATQ measures the same aspects of temperament regardless of gender. A significant gender difference emerged at the latent mean level: Boys were rated high in high-intensity pleasure and activity level, and girls were rated high in attention.


Longitudinal links between contextual risks, parenting processes, youth self-regulation, academic achievement, and conduct problems were explored in young adolescents. Data were gathered across 4 years from 139 rural, African American, single mother-headed families with young adolescents (mean age = 11 years at recruitment). Structural equation modeling indicated that accumulated risks were associated with lower levels of the competence-promoting parenting practices that were linked indirectly with youth outcomes via youth self-regulation. A combination of parent and youth variables appears to foster a link that encourages academic achievement and discourages conduct problems during early adolescence. Parental involvement, support, and vigilance and youths’ development of self-regulation appear to enhance development among rural African American youths growing up in challenging circumstances. When Wave 1 academic achievement and conduct problems were controlled, all paths in the model remained significant thereby indicating that the hypothesized pathways accounted for change in the outcome variables across 3 years.


http://www.eric.ed.gov/ERICDocs/data/ericdocs2sql/content_storage_01/0000019b/80/16/fa/39.pdf

The functional relationships between developmental change in children’s self-control and academic achievement were examined using longitudinal family data. Multivariate latent growth models (LGM) were specified to determine whether the rate of growth in academic achievement changes as a function of developmental change in self-control. Data came from the Rural Georgia Single-Parent Family Study for 140, 127, and 124 families, and 114, 120, and 102 teachers. Self-control and academic achievement were significantly associated and indicated by the significant covariance between the variables’ initial status. Children who initially displayed better cognitive and behavioral self-control also initially displayed greater academic achievement. Change in these variables over time, however, was not significantly correlated. Measurement invariance was also assessed for the Children’s Self-Control Scale (CSC) (L. Humphrey, 1982) and the Woodcock Johnson test. Restrictive models, based on assumptions of equality across both time and raters, yielded adequate model fit.


The role of disclosing child sexual abuse on adolescent survivors’ symptomology [sic] and the presence of additional unwanted sexual experiences was investigated in a subsample of 111 adolescents from the National Survey of Adolescents who reported child sexual abuse. Results indicated that prompt disclosure of sexual abuse to an adult moderated the influence of penetration during the abuse on the number of symptoms at assessment. Thus, prompt disclosure buffered the influence of more severe abuse. Disclosure also had a main effect on the likelihood of further victimization. Participants who told an adult promptly after the abuse were less likely to report additional unwanted sexual experiences.

The relative prevalence of substance use among African-American high school students living in rural, urban, and suburban areas was examined. Students in rural areas reported equivalent or higher rates of substance use than did students in urban or suburban areas. Attention to substance use prevention among rural African-American students is warranted.


Objective: Rural African Americans with diabetes mellitus type 2 (T2D) represent a disadvantaged and understudied group who experience difficulties with maintaining glycemic control. Although mounting evidence has linked socioeconomic disadvantage to chronic disease morbidity, few studies have examined the mediating mechanisms that account for this effect. We hypothesized that rural African Americans' financial distress, community disadvantage, and educational attainment would predict glycemic control, indirectly, via effects on depressive symptoms. Methods: Predictions were tested using data from 192 rural African American adults with T2D and data from community support persons the participants nominated. Participants completed an in-home interview and provided a blood sample at a local laboratory. Levels of glycosylated hemoglobin (HbA1c) constituted the criterion variable. Results: Structural equation modeling analyses confirmed our hypotheses: financial distress, community disadvantage, and educational attainment demonstrated significant indirect effects on HbA1c via their influence on depressive symptoms. Conclusions: The findings underscore the importance of targeting mental health in interventions to support glycemic control as well as tailoring interventions for individuals in difficult socioeconomic circumstances.


Objective: The study objective was to examine the health-related and sociocontextual correlates of elevated depressive symptoms among rural African American adults with type 2 diabetes mellitus. Design: Cross sectional, observational study. Setting: Rural communities in central Georgia, United States. Participants: African American patients with type 2 diabetes mellitus (N = 200) were recruited from eight rural counties in Georgia by using community-based procedures. Methods: Participants were assessed on demographics (age, sex, and education), diabetes-related characteristics (health status, time since diagnosis, blood glucose control problems, and hemoglobin A1C level), and psychosocial variables (financial stress, community disadvantage, community support, social support, and patient-healthcare provider relationship quality). Elevated depressive symptoms, as assessed via the Center for Epidemiologic Studies–Depression scale, constituted the dependent variable. Results: Elevated depressive symptoms were present in 30% of the sample. Multiple logistic analysis of the contributors to depression predicted 57% of the variability in depression. Sex, neighborhood disadvantage, health status, hyperglycemic symptoms, social support, and patient-healthcare provider relationship quality predicted depression in multivariate analyses. Conclusions: Both health-related and psychosocial stressors contribute to depressive symptoms among rural African Americans. Problems in patient-healthcare provider relationships may impede identification of depressive symptoms among these patients. Providers require training and support to identify and treat depression among rural African Americans.

Little research has examined the links between role status changes during the transition to adulthood and sexual behaviors that place African Americans at risk for sexually transmitted infections. Moreover, the mediating processes that explain these links, or protective factors that may buffer young adults from risky sexual behavior, are unknown. African American young adults who had either completed or dropped out of high school (ages 18 to 21, \( N = 186 \)) provided information regarding their sexual behavior, role status, substance use, peer affiliations, religiosity, and receipt of protective family processes. Anticipated school attendance, part-time rather than full-time employment, and residence in a dorm or barracks rather than with peers or alone were negatively associated with risk behavior. Parenthood was positively associated with risk behavior; affiliation with peers who encourage risky sex partially accounted for this effect. Substance use fully accounted for the effect of part-time versus full-time employment on sexual risk behavior. Protective family processes and religiosity moderated the association of parenthood with sexual risk behavior. Prospective studies on these processes are warranted.


In this article, it is noted that poststructural ideas can be useful tools in fostering reflexivity and creativity for clinicians. By examining the process of meaning construction, clinicians can detach from repetitive interpretations of therapy discourse that lead to conversational closure. Four strategies for guiding a reading of family therapy interaction are presented: incitement to discourse, deconstruction, normativity, and the cultural grid of intelligibility. These strategies are used to describe examples of marital therapy discourse. By learning to read therapy as discourse, clinicians may critically examine how meaning is constructed and use that awareness to foster therapeutic conversations.


Postmodern models of therapy stress the participation of the clinician in a nonhierarchical, non-objectifying role, and highlight the therapist's embeddedness in the same processes of social construction as are the individual and the family. While much theory has been published in recent years, the actual conduct of a therapy session derived from the premises of postmodernism remains unclear. We investigated how a postmodern therapist manages talk in an actual session. We used textual analysis to examine a couples therapy session conducted by a prominent narrative therapist. Analysis of the talk led to descriptions of the couple's and therapist's agenda, and their interaction. The therapist's agenda is described in terms of "decentering" both the local unfolding narrative and its embeddedness in larger cultural stories. Five conversational practices: matching/self-disclosure, reciprocal editing, turn management to de-objectify, expansion questions, and reversals are examined. These practices inform the deployment of a decentering agenda in this specific text.


The role of high school dropout in the onset and rapid escalation of substance use was investigated with 1,762 African American youth participating in the 1990 and 1992 follow-ups of the National Educational Longitudinal Study of 1988 (NELS:88). In 1990, all youth were students; most were in the 10th grade and approximately 16 years old. Path analysis models were used to examine dropout’s unique contribution to substance use and its mediational effect on the association of prior problem behavior with later substance use. Compared with students, dropout youth were 1.6 times more likely to smoke cigarettes and 1.3 times more likely to smoke marijuana. Partial mediational effects emerged for problem behavior and use of cigarettes and marijuana.


Risk and protective factors that predict substance use were investigated with 318 African American high school dropout youths who completed the 1992 follow-up of the National Educational Longitudinal Study of 1988. A
A conceptual model linking positive family relationships and religious involvement to youths' substance use and conventional peer affiliations through a positive life orientation was examined with structural equation modeling. Positive life orientation, which included optimism and conventional goals for the future, fully mediated the influence of family relationships on conventional peer affiliations. Religious involvement directly predicted conventional peer affiliations and positive life orientation. Conventional peer affiliations mediated the other variables' influence on substance use.


Parenting behavior and its association with child psychosocial adjustment were examined in inner-city African American families. Participants included 86 HIV-infected women and their noninfected children and 148 HIV-seronegative women and their noninfected children. Interview data were collected concerning maternal physical health, parenting behaviors, and child psychosocial adjustment. The results indicated that mother-child relationship quality and monitoring were important parenting factors for adaptive child psychosocial functioning. HIV-infected mothers reported poorer mother-child relationship quality and less monitoring of their children's activities than did noninfected mothers, suggesting that maternal HIV infection may disrupt effective parenting. Directions for future research and clinical implications are discussed.


A correlation study was designed to test the hypothesis that maternal education, perceived family resources, and the importance of family routines would be related to children's dietary patterns. Additionally, the study examined the hypothesis that dietary patterns would be associated with children's cognitive and physical abilities. The sample for this study included 159 African American single-mother families with a 6- to 9-year-old child living in rural areas, most of whom lived in poverty. Children's eating patterns were assessed using a self-report questionnaire administered to the mother in an interview format. Children's cognitive ability was measured by several subscales from the Woodcock Johnson Psycho-Educational Instrument and the Harter Perceived Competence Scale for children. For male children, the mother's higher education was related to more adequate eating patterns at home, and more perceived family resources were related to the likelihood of taking vitamin supplements. For female children, greater milk intake was positively related to cognitive outcomes, including applied problem, passage comprehension, calculation, synonym identification, antonym identification, and quantitative concept scores. Milk intake was clearly related to more optimal cognitive development. The results of this study support the literature related to the importance of nutrition for cognitive and physical abilities in children.


Sibling unity during family transitions is considered a protective factor for child behavior problems, but there is little empirical support for the widespread child protection policy of placing siblings together in foster care. In a prospective study of 156 maltreated children, siblings were classified in 1 of 3 placement groups: continuously together (n = 110), continuously apart (n = 22), and disrupted placement (siblings placed together were separated; n = 24). Changes in child adjustment as a function of sibling relationship and placement group were examined. Sibling positivity predicted lower child problems at follow-up (about 14 months later), while sibling negativity predicted higher child problems. Placement group did not affect child behavior problems at follow-up; however, compared to siblings in continuous placement (either together or apart), siblings in disrupted placement with high initial behavior problems were rated as having fewer problems at follow-up, while siblings in disrupted placement with low initial behavior problems were rated as having more problems at follow-up. These findings highlight the importance of considering relationships between siblings and the risk that one poses to another before early placement decisions are made.

The present investigation examined the concurrent and longitudinal relations between attributions and negative behavioral interactions in the context of the father-child dyad. Participants were 177 fathers and their young adolescents recruited from nonmetropolitan counties in the southeast. Results indicated that for children, attributions about their father play a significant role in their negative behavioral interactions with their father both within and across time. Interestingly, father’s earlier negative behavioral interactions with their children predicted children’s subsequent attributions about their father in the longitudinal analyses. In addition, both attributions and behavioral interactions were highly stable across time for both fathers and children.


The authors examined whether early adolescents’ sibling relationships ameliorate the effects of a difficult temperament on best friendships, exploring whether qualities of early adolescents’ sibling relationships would moderate the link between temperamental difficulties and best friendship quality. Data were collected at two points. At first collection, parents provided temperament ratings for 73 later-born siblings (M = 7 years). Five years later, adolescents provided information about support and discord present in their best friendships and older siblings provided information about the warmth and conflict in their same-sex sibling dyads. The hypothesized moderating effect of the sibling relationship was found only for early adolescent girls. Support and discord in girls’ best friendships was negatively and positively predicted, respectively, by level of temperamental difficulty only when relationships with their older sisters were lower in warmth or higher in conflict. Implications for understanding and improving early adolescents’ closest friendships are discussed.


The early adolescent years are a critical period for social skill development, especially for children at risk for social failure. Data from the Adolescent Development Research Program (ADRP) were used to examine the interrelationship of parents’ stress, problem solving with their adolescent child, and youths’ social withdrawal. Data were collected from 231 families in the rural South, each of which included an 11- or 12-year-old child. Fathers’ but not mothers’ constructive problem solving with children was negatively associated with teachers’ reports of youths’ social withdrawal, with the association for fathers being especially strong for sons. Neither parents’ self-reported stress was associated with self-reported problem solving with children, nor was parents’ stress associated with children’s social withdrawal. Interventions with fathers that teach and encourage problem solving with children may benefit children’s social development, a benefit that may be especially helpful for socially withdrawn sons.


Using national data from the 1988 national Family Growth Cycle IV, analyses were conducted to identify socioeconomic, family, and individual characteristics that distinguished early and late coital behavior among black adolescent females. Results of the discriminant function analysis revealed that, compared to early coital initiators, late coital initiators were better informed about sexual issues and were exposed to life circumstances that encouraged them to delay sexual onset, such as two-parent families, higher income levels, open family sexuality communication, and higher levels of social autonomy.

Purpose: To identify the mechanisms by which intervention-induced increases in adaptive parenting were associated with a reduction in sexual risk behavior among rural African American adolescents across a 29-month period. Methods: African American families (N = 284) with 11-year-old children in nine rural Georgian counties participated in the 7-week Strong African American Families (SAAF) project. Counties were randomly assigned to intervention or control conditions. The program was evaluated via pretest, posttest, and long-term follow-up interview data collected in the families' homes. The current paper tests a hypothetical model of program efficacy, positing that intervention-induced changes in parenting behaviors would enhance [sic] youth self-pride, which in turn would forecast changes in sexual behaviors measured 29 months after pretest. Results: Compared with controls, parents who participated in SAAF reported increased adaptive universal and racially specific parenting. Furthermore, intervention-induced changes in these parenting behaviors were associated indirectly with sexual risk behavior through adolescent self-pride, peer orientation, and sexual intent. Conclusions: Culturally competent programs, developed through empirical and theoretical research within affected communities, can foster adaptive universal and racially specific parenting, which can have a long-term effect on adolescent sexual risk behavior. Effective strategies for designing and implementing culturally competent programs are discussed.


Data obtained from 2 waves of a longitudinal study of 671 rural African American families with an 11-year-old preadolescent were used to examine pathways through which racial and ethnic socialization influence youth self-presentation, academic expectations, and academic anticipation. Structural equation modeling analyses indicated that racial and ethnic socialization were linked with youth expectations for and anticipation of academic success through youth self-pride, which included racial identity and self-esteem, and through academic self-presentation. The results highlight the need to disaggregate racial and ethnic socialization to attain a better understanding of the ways in which these parenting domains uniquely forecast youth self-pride and academic orientation.


Risk and protective factors were examined to identify processes in rural, single-parent, Black families that are linked with positive child outcomes. Results can be linked to the competency and resiliency models. Protective domains promoted greater child self-regulation, with parenting protective factors promoting greater self-regulation than child and community protection. Maternal risk had the greatest negative effect on child self-worth. Results also revealed that protective factors moderate the relationship between risk factors and child outcomes. The association between risk factors and self-regulation was low when protection was high and was significant when protection was low. Furthermore, protective factors seem to insulate boys in high-risk settings more than girls in similar environments. These findings highlight the important role of protective factors in promoting successful development of Black children reared in economically stressed rural, single-parent families and the extent to which protective factors insulate and buffer risk factors that might otherwise compromise these children’s development.


Linking maternal racial identity, parenting, and racial socialization in rural, single-mother families with child self-worth and self-regulation.

The Center for Family Research has implemented the first family–community preventive intervention program designed specifically for rural African American families and youths. Basic information garnered during a decade of research in rural African American communities formed the theoretical and empirical foundations for the program, which focuses on delaying the onset of sexual activity and discouraging substance use among youths. The Center’s researchers have formulated future directions for engaging rural families in basic research and preventive intervention programs.


Functional changes in rural African American single-mother-headed families after the implementation of Temporary Assistance for Needy Families were explored from an ecological risk-protection perspective. The sample included 96 single mothers who received government assistance and their 10- or 11-year-old children. Links among maternal employment status, mothers’ physical health and psychological functioning, parenting, and children’s attributions about the cause of poverty were examined. Maternal psychological distress was linked with children’s attributions about the causes of poverty, both directly and indirectly through its association with parenting. Children who did not attribute poverty to social causes had higher academic goals than did those who attributed poverty to social, economic, or political barriers. Further research is needed on barriers to employment and the influence of maternal psychological functioning on parenting.


This study, an evaluation of the Strong African American Families Program, was designed to determine whether intervention-induced changes in targeted parenting behaviors were associated with young adolescents’ development of racial pride, self-esteem, and sexual identity. Participants were 332 African American mothers and their 11-year-old children in 9 rural Georgia counties. Families were randomly assigned to a control group or an intervention group. Unlike those in the control families, mothers in the intervention group reported increases in targeted parenting behaviors, which promoted self-esteem, positive racial identity, and positive sexual self-concepts among their children. These findings expand the study of African American youths’ identity development by including broader domains of identity and parenting processes other than racial socialization.


This study will address the initial question: Are there ethnic differences in parenting that remain when contextual variables are controlled and are related to culture, focusing on two samples of rural African American families. This study is part of a series of coordinated studies presented in this special issue (Le et al., 2008). Specific attention was given to ascertaining whether these differences were explained by contextual factors, such as socioeconomic factors (i.e., parents' educational level, homeownership, family structure, and number of children in the household). Finally, this study examined whether any differences in parenting (warmth, monitoring, communication) were attributed to cultural factors, after controlling for the contributions of contextual factors. Results indicate that parental education, family size, negative life events, racial discrimination, neighborhood characteristics, and religiosity were significantly associated with various domains of parenting among rural African Americans.

This study focuses on the links between social contexts and normative family patterns to identify factors at the societal, community, family, and individual levels that enhance African Americans’ ability to overcome stressful life events and foster positive family relationships. The Mundane Extreme Environmental Stress Model was used to explore these links. From urban and rural areas in Iowa and Georgia, 383 families with 10- or 11-year-old children were recruited. Structural equation modeling was used to test the hypotheses. Maternal psychological distress was linked with parent-child relationship quality both directly and indirectly through its association with intimate partnership quality. When racial discrimination was greater, stronger links emerged between stressor pileup and psychological distress, as well as between psychological distress and the quality of both intimate partnerships and parent-child relationships. Future research on African American family processes should include the effects of racial discrimination.


This paper presents a comprehensive review of research linking single-parent family structure to parenting processes, maternal well-being, and child developmental outcomes among African Americans. The approaches used to study these families, related methodological and conceptual concerns, and the factors linked to maternal well-being, effective parenting processes, family functioning, and child outcomes are addressed. Much work remains to be done on conceptualizing and assessing parenting processes among African Americans in general and single African American mothers in particular. Researchers must examine more carefully the circumstances that foster or impede successful parenting among these mothers. Studies also are needed to disentangle the interactions between economic stress and parenting behavior and to determine the extent to which the findings can be applied to middle-income single African American parents.


This investigation of the effects of stressful life events on rural African American women’s relationship well-being, psychological functioning, and parenting included 361 married or long-term cohabiting women. Associations among stressful events, socioeconomic status, perceived racial discrimination, coping strategies, psychological functioning, relationship well-being, and parenting were tested. Stressful events were related directly to diminished relationship well-being and heightened psychological distress and indirectly to compromised parenting. The results can inform research and intervention with African American women.


We present an overview of research on African American families and emphasize in this discussion limitations of approaches used in the past to study African American families. We also discuss and identify challenges for designing and implementing community, family-based programs targeting competence-promoting behaviors in African American families. In addition, we attempt to accomplish the following objectives: (1) identify themes in studies of African American families, including bias in prior research; (2) discuss ways in which prior approaches and conceptual models guiding studies of African Americans have created challenges for the development and implementation of community-based intervention and research programs; and (3) present the Parents Matter! Program as an example of a community-based prevention effort that attempted to overcome many of the challenges created by prior research efforts.


This article examines the influence of social and personal stressors on the physical and psychological functioning of African-American mothers with type 2 diabetes. The conceptual model presented proposes that exposure to multiple stressors may lead some African-American women to implement exaggerated coping behaviors to prove their competence, which in turn may prevent them from seeking and accepting the help they need. The negative consequences for health of this “superwoman syndrome” are emphasized. The moderating or buffering effect of social support and maternal psychological resources on the links between stressors, coping behaviors, and health are also considered.


Family scholars have developed a greater sensitivity to the relative neglect of families of color in research. However, there are a number of limitations in the research on families of color; specifically, race and ethnicity are often confounded with socioeconomic indicators and community of residence. This makes it difficult to identify the true effects of ethnicity and culture. In addition, race and ethnicity may interact with chronic poverty in such a way as to further interfere with and reduce life opportunities. Here we discuss some of the theoretical and conceptual issues pertaining to race, ethnicity, and culture as they affect family functioning and children’s development. In addition, we introduce a collection of papers that address family functioning and children’s development among families who are diverse ethnically, racially, socioeconomically, and by geographical location and community. The issues posed in this paper and in the Special Section challenge the field to reconsider how we study families and child development from culturally grounded perspectives.


The prospective effects of observed neighborhood disorder, stressful life events, and parents’ engagement in inductive reasoning on adolescents’ depressive symptoms were examined using data collected from 777 African American families. Multilevel analyses revealed that stressful life events experienced at age 11 predicted depressive symptoms at age 13. Furthermore, a significant interaction between neighborhood disorder and parents’ engagement in inductive reasoning was found, indicating that parental use of inductive reasoning was a protective factor for depressive symptoms particularly for youths living in highly disordered neighborhoods. The importance of examining correlates of depressive symptoms from a contextual framework, focusing on individuals, families, and neighborhood contexts, is emphasized.


This study extended an investigation by A. Bandura, C. Barbaraneli, G. V. Caprara, and C. Pastorelli (1996) by examining the structure, reliability, and correlates of the Moral Disengagement Scale (MDS), which measures disengagement from moral self-sanctions. Furthermore, the role of moral disengagement in the association between parenting and child behavior was examined. Two hundred and forty-five African American single-parent mothers and one of their children (mean age = 11.4 years) participated in the study. The MDS had similar factor structure, internal consistency, and demographic correlates as those reported by A. Bandura et al. (1996) with an Italian sample of children. The MDS also correlated with delinquent and aggressive child behavior, and moral disengagement partially mediated the relationship between parenting and child delinquent behavior.
In recent years, the role of epigenetic phenomenon [sic], such as methylation, in mediating vulnerability to behavioral illness has become increasingly appreciated. One prominent locus at which epigenetic phenomena are thought to be in play is the monoamine oxidase A (MAOA) locus. In order to examine the role of methylation at this locus, we performed quantitative methylation analysis across the promoter region of this gene in lymphoblast lines derived from 191 subjects participating in the Iowa Adoption Studies (IAS). We analyzed the resulting data with respect to genotype and lifetime symptom counts for the more common major behavioral disorders in the IAS, antisocial personality disorder (ASPD), and substance use disorders (alcohol (AD) and nicotine dependence (ND)). We found that methylation status was significantly associated with lifetime symptom counts for ND ($P < 0.001$) and AD ($P < 0.008$) in women, but not men. Furthermore, a trend was found for women homozygous for the 3,3 allele to have a higher degree of overall methylation than women homozygous for the 4,4 allele ($P < 0.10$). We conclude that methylation of MAOA may play a significant role in common psychiatric illness and that further examination of epigenetic processes at this locus is in order.


AIM: A number of studies have shown that genetic variation at GABRA2 alters vulnerability to alcohol dependence. The exact identity of the causal variant(s), and the relationship of these variants to other forms of substance use and behavioral illness is, however, uncertain. OBJECTIVE: Therefore, we genotyped 516 individuals from the Iowa Adoption Studies, a large longitudinal case and control adoption study of substance use, at 39 single nucleotide polymorphisms encompassing the GABRA2 locus and analyzed them with respect to their lifetime history of three common forms of substance use dependence [alcohol dependence (AD), nicotine dependence (ND), and cannabis dependence (CD)] in the Iowa Adoption Studies and relevant exposure variables. RESULT: Using regression analysis, we found substantial evidence that both GABRA2 genotype and haplotype are significantly related to vulnerability to AD, ND, and CD, with the strongest relationships noted with respect to ND. Consistent with earlier studies suggesting exposure is an important step in the development of substance use, we found the inclusion of substance exposure data in our analytic models markedly increased the strength of the genetic associations of GABRA2 haplotype with substance use. Finally, we report that the genetic effects were markedly more pronounced in females than in males. CONCLUSION: We conclude that genetic variation at or near the GABRA2 locus significantly affects vulnerability not only to AD, but to other forms of substance use including ND and CD, and that the effects may be sex dependent.


AIM: Traditionally, large scale genotyping projects have used DNA derived from whole-blood or lymphoblast cell lines. But over the past several years, a number of investigators have begun to use DNA prepared from saliva for genotyping studies, particularly for use in behavioral genetic studies. However, the comparability of DNA from these two sources has not been rigorously analyzed by unbiased sources. OBJECTIVE: In this communication, we compare the single nucleotide polymorphism genotyping results from DNA derived from whole-blood samples obtained from 474 participants from the Iowa Adoption Studies with that of saliva samples prepared from 555 members of the Strong African-American Families project. RESULTS: We found that DNA prepared from whole-blood performed significantly better than that prepared from saliva. Genotyping success was significantly associated with the concentration of human DNA in the saliva sample as determined by quantitative PCR, but not with the total amount of DNA as determined by UV spectroscopy. CONCLUSION: We conclude that investigators contemplating...
the choice of source materials of DNA for genotyping studies will need to balance the ease and economy of saliva-based DNA collection methods with the higher yields and rates of genotyping calls associated with DNA prepared from whole-blood.


Parental, peer, and older siblings’ contributions to adolescents’ substance use were investigated with 2 waves of panel data from 225 African American families. Structural equation modeling showed that older siblings’ behavioral willingness (BW) to use substances at Time 1 (T1) predicted target adolescents’ Time 2 (T2) use, controlling for other T1 variables. Regression analyses revealed an interaction between targets’ and siblings’ BW, such that targets were more likely to use at T2 if both they and their siblings reported BW at T1. This interaction was stronger for families living in high-risk neighborhoods. Finally, siblings’ willingness buffered the impact of peer use on targets’ later use: Low sibling BW was associated with less evidence of peer influence.


The authors examined the relations between adolescent–therapist and mother–therapist therapeutic alliances and dropout in multidimensional family therapy for adolescents who abuse drugs. The authors rated videotapes of family therapy sessions using observational methods to identify therapist–adolescent and therapist–mother alliances in the first 2 therapy sessions. Differences in adolescent and mother alliances in families that dropped out of therapy and families that completed therapy were compared. Results indicate that both adolescent and mother alliances with the therapist discriminated between dropout and completer families. Although no differences were observed between the 2 groups in Session 1, adolescents and mothers in the dropout group demonstrated statistically significantly lower alliance scores in Session 2 than adolescents and parents in the completer group. These findings are consistent with other research that has established a relationship between therapeutic alliance and treatment response.


In this paper, we draw from the family stress model developed by Conger and colleagues (Conger and Conger 2002) to propose an alternative perspective for understanding this relationship. According to this model, hardship and negative events create family stress. The emotional distress that results disrupts parenting which then leads to child and adolescent maladjustment. The model indicates that the Stressor produces emotions and behaviors in parents that create problematic outcomes for children because they disrupt the parents’ ability to engage in high quality parenting. Support for this model has been demonstrated in other studies using the same two samples utilized in the present study.


This article uses a sample of 867 African American households to investigate differences in parenting practices and child outcomes by type of household. Results indicate that mothers provide similar levels of parenting regardless of family structure. Secondary caregivers, however, show a great deal of variation in quality of parenting. Fathers and grandmothers engage in the highest quality parenting, stepfathers the poorest, with other relatives falling in between. These differences in parenting do not explain family structure differences in child behavior problems. Results suggest that children do best when there are two caregivers in the household, although stepfathers are an exception
to this rule. Child behavior problems are found to be no greater in either mother-grandmother or mother-relative families than in households with two biological parents. In terms of risk for child behavior problems, these family forms seem to be functionally equivalent.


This article uses hierarchical linear modeling with a sample of African American children and their primary caregivers to examine the association between various community factors and child conduct problems. The analysis revealed a rather strong inverse association between level of collective socialization and conduct problems. This relationship held after controlling for a variety of individual-level variables relating to family, peers, and school. Two other community-level variables, prevalence of crime and concentrated disadvantage, were not significantly related to conduct problems. Overall, the results suggest that successful childrearing is a community enterprise. It appears that communities significantly reduce their risk for child conduct problems to the extent that adults know the children, parents, and teachers in their area, and they are inclined to act upon these social ties either by reprimanding children who are misbehaving or by notifying the proper authorities.


This article examines the relationship between racial discrimination and delinquency. Using longitudinal data collected on approximately 700 African American children, we begin by establishing an association between exposure to discrimination and delinquent behavior. Next, we use structural equation modeling to test various hypotheses regarding the emotional and cognitive factors that mediate this association. For boys, the association between discrimination and delinquency is mediated by feelings of anger and depression and by the belief that aggression is a necessary interpersonal tactic. The results are somewhat different for girls. Although anger and depression mediate part of the effect of discrimination on delinquency, discrimination continues to display a small but significant direct effect. The implications of these findings for criminological theory are discussed.


Various hypotheses were identified regarding the manner in which community context might influence the association between two dimensions of parenting—control and corporal punishment—on child conduct problems. The authors used hierarchical linear modeling with a sample of 841 African American families to test these hypotheses. Consistent with the evaporation hypothesis, the results indicated that the deterrent effect of caretaker control on conduct problems becomes smaller as deviant behavior becomes more widespread within a community. The findings for corporal punishment supported the normative parenting argument. Although there was a positive relationship between caretaker corporal punishment and child conduct problems in communities where physical discipline was rare, there was no association between the two variables in communities where physical discipline was widely prevalent. These results suggest that a particular parenting strategy may be more effective in some neighborhood environments than others. The theoretical implications of this view are discussed.


This study investigated the correlates of childhood depressive symptoms in an African American sample. We included processes that are likely to operate for all children, regardless of race or ethnicity, as well as events and circumstances that are largely unique to children of color. These various constructs were assessed at both the
individual and community level. The analyses consisted of hierarchical linear modeling with a sample of 810 African American families living in Iowa and Georgia. Three individual-level variables were associated with childhood depressive symptoms: uninvolved parenting, racial discrimination, and criminal victimization. At the community level, prevalence of both discrimination and criminal victimization were positively related and community ethnic identification was negatively related to depressive symptoms. Further, there was evidence that community ethnic identification and neighborhood poverty serve to moderate the relationship between criminal victimization and depressive symptoms. Overall, the findings underscore the importance of considering factors unique to the everyday lives of the cultural group that is the focus of study, while demonstrating the dangers of a “one model fits all” approach to studying children of color.


Studies have shown that exposure to discrimination increases the probability that African American adolescents will engage in delinquent behavior, especially acts of violence. The present study extended this research by examining the extent to which supportive parenting buffers a youth from these deleterious consequences of discrimination. Analyses based upon two waves of data from a sample of 332 African American adolescent males and their caretakers supported this hypothesis. Further, the results indicated that there are two avenues whereby supportive parenting reduces the probability that discrimination will lead to violence. First, supportive parenting decreases the chances that discrimination will lead to anger and a hostile view of relationships. Second, supportive parenting lowers the risk that anger or a hostile view of relationships, when they develop, will result in violence.


Past research has largely ignored the developmental changes within the child that account for the association between parenting and risk for delinquency. We used structural equation modeling and data from a longitudinal study of several hundred African-American families to test the contentions of various theories regarding the sociocognitive and emotional factors that mediate the impact of parental behavior on a youth’s risk for delinquency. Our findings largely supported the theories. The impact of monitoring/discipline was indirect through low self-control and acceptance of deviant norms, whereas the effect of hostility/rejection was indirect through low self-control, hostile view of relationships, and acceptance of deviant norms. These two dimensions of parenting were no longer related either to affiliation with deviant peers or to conduct problems once the effects of these psychological characteristics were taken into account; the impact of these parenting practices was completely mediated by these four cognitive/affective variables. Contrary to expectation, however, these psychological factors did not mediate any of the relationship between caretaker involvement in antisocial behavior and child conduct problems.


A decade of research by UGA professors Gene Brody and Velma Murry is teaching Georgia’s African-American youth how to succeed in life.


This study was designed to determine the extent to which adults’ ratings of cognitive and social competence among rural African American children converge. Hypotheses about the conditions under which intracultural and extracultural raters perceive children’s competencies similarly were also tested. Mothers, fathers, relatives, family friends, and teachers independently assessed cognitive and social competence for a sample of 91 rural African
American children. The data supported predictions that ratings of cognitive competence would be more similar across rater than would ratings of social competence, and that parents’ involvement in their children’s schools would be associated with more similarity in parents’ and teachers’ ratings of child competence. Identification of the processes that help African American children to function well in both intracultural and extracultural settings is important.


We examined the factor structure of the Children’s Depression Inventory (CDI) among a sample of 523 African American children (mean age = 12.76) and a sample of 564 European American youth (mean age = 12.43). Previous investigations have produced discrepant factor structures among samples of predominantly majority-culture children, but fewer investigations of the factor structure of the CDI have been conducted among non-European American samples. Confirmatory factor analyses of the original 5 factors identified by Kovacs (1983, 1991) revealed that the items had invariant measurement properties across the samples. The latent factor structure, however, revealed telling differences between the two samples. For European American youth, only one of the original five factors was meaningfully differentiated from the others, whereas for the African American youth, two of the factors clearly emerged as unique facets of depression. Consistent with other reports, between-group mean differences on the CDI and its factors were noted. We argue that further validation of the CDI among traditionally underserved populations is warranted. Predictive validation investigations, in particular, are needed to examine the relationship between CDI factor scores and clinical outcomes.


Addressing potential weaknesses in an earlier investigation, the authors examined the latent structure of marital discord using 4 product indicators from the Marital Satisfaction Inventory—Revised (Snyder, 1997) in a representative sample of community couples (N = 1,020). Results from 3 taxometric procedures suggested that marital discord is taxonic, with an estimated base rate of .31. Cut scores for classifying members of this marital discord taxon were identified. Additional analyses with several data sets of community and clinic couples provided evidence that the marital discord taxon classification demonstrated good (a) 6-week test–retest reliability, (b) criterion validity (i.e., differences in taxon prevalence in community vs. clinic couples), and (c) construct validity (i.e., correlations with therapist ratings of relationship quality). These results suggest that discordant couples differ qualitatively and not just quantitatively from nondiscordant couples and that user-friendly methods, suitable for a range of research and clinical applications, can be used to identify marital discord.


The authors tested a theoretical model of how self-control constructs are related to psychological symptomatology and variables that predispose to involvement versus noninvolvement in substance use: willingness to use, affiliation with peers who use, and efficacy for resisting use. Data were obtained from a sample of 332 children (mean age = 9.3 years) who were interviewed in households. Structural equation modeling showed that good self-control was related to more positive well-being and less externalizing symptomatology, whereas poor self-control was related to more externalizing and to more internalizing symptomatology. Externalizing had paths to willingness and peer use, well-being had inverse paths to these variables, and poor self-control had a direct effect to lower resistance efficacy. Multiple-group analyses indicated gender differences in paths from symptomatology to predisposing factors. Implications for understanding vulnerability to substance use are discussed.

This research tested predictions from a self-regulation model of factors relevant for early onset of tobacco and alcohol use with a community sample of 889 African American children (mean age = 10.5 years). Criterion variables were peer substance use, willingness to use substances, and resistance efficacy (intention to refuse substance offers). Structural modeling indicated effects of temperament dimensions were mediated through self-control and risk-taking constructs, which were related to school involvement, life events, and perceived vulnerability to harmful effects of substances. Peer use was predicted by life events, poor self-control, and parent-child conflict; willingness was predicted by life events, risk taking, and (inversely) parental support; and resistance efficacy was predicted by perceived vulnerability and (inversely) poor self-control. Findings are discussed with reference to theoretical models of early protection and vulnerability processes.


This research tested predictions about pathways to substance use and sexual behavior with a community sample of 297 African American adolescents (M age: 13.0 years). Structural modeling indicated that parent–adolescent communication had a path to unfavorable prototypes of substance users; quality of parent–adolescent relationship had paths to good self-control, higher resistance efficacy, and unfavorable prototypes of sexually active teens; and religiosity had inverse direct effects to both substance use and sexual behavior. Self-control constructs had paths to prototypes of abstainers, whereas risk taking had paths to prototypes of drug and sex engagers and direct effects to outcomes. Prototypes had paths to outcomes primarily through resistance efficacy and peer affiliations. Effects were also found for gender, parental education, and temperament characteristics. Implications for self-control theory and prevention research are discussed.


Objectives. To test a theoretical model of how ethnic pride and self-control are related to risk and protective factors. 

Design. A community sample of 670 African American youth (mean age = 11.2 years) were interviewed in households. 

Main Outcome Measures. Measures of cigarette smoking, alcohol use, and sexual behavior (lifetime to past month). 

Results. Structural modeling analyses indicated parenting was related to self-control and self-esteem, and racial socialization was related to ethnic pride. Self-control and self-esteem variables were related to levels of deviance-prone attitudes and to perceptions of engagers in, or abstainers from, substance use and sexual behavior. The proximal factors (behavioral willingness, resistance efficacy, and peer behavior) had substantial relations to the criterion variables. Participant gender and parental education also had several paths in the model. Results were generally similar for the 2 outcome behaviors. 

Conclusions. In this population, self-esteem and self-control are related to parenting approaches and have pathways to attitudes and social perceptions that are significant factors for predisposing to, or protecting against, early involvement in substance use and sexual behavior.


The present study examines perceived neighborhood context and gender as moderators of the relation between self-regulation and conduct problems among low-income African American youth (7 to 15 years old; 50% girls) from single-mother homes. Mother-child dyads (N = 277) provided ratings of self-regulation, neighborhood resources and
risks, and aggression and other conduct problems. Analyses revealed a significant three-way interaction among self-regulation, neighborhood context, and gender. Neighborhoods lower in resources and higher in risks exacerbated the link between poor self-regulation and aggression and conduct problems for girls, but not for boys. Clinical implications of the findings and future research directions are discussed.