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ABSTRACT

This paper presents results of a study of how family dysfunction contributes to adjustment of adolescents. The question is considered from two disciplinary vantage points: (1) structural anthropology, which considers dysfunction in terms of the affirmation of kinship relations; and (2) a family systems approach which emphasizes the role of factors such as family cohesion and adaptability. To appreciate the role of family dysfunction in the adjustment of adolescents, the study attempts to first determine which properties of the family constitute its functionality. In the anthropological approach one of the main functions of the family is to perpetuate kinship relations through behavior. Three types of kinship relations operate in most families: (1) affinity, the relationship between spouses, (2) consanguinity, the relationship between siblings, and (3) descent, the relationship between parents and their children. In the study, 283 undergraduate students completed a questionnaire in which they provided information on family characteristics as well as adjustment problems during their adolescence. Subjects were asked whether they ever had received professional help with various symptoms which are typically associated with social and emotional problems such as tension, depression, fear, anger, and suicide attempts. They also indicated whether given kinship relations in their family ever felt as if they were other types of kinship relations. Subjects also indicated whether they saw the primary caretaking responsibilities in their family as entrusted to children rather than the adults. It was found that family cohesion and the confusion of kinship relations were significant predictors of adjustment problems, whereas family adaptability was not. (DK)

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Socio-emotional Adjustment in Adolescence and the Perception
of Family Relations

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Abstract

The question how family dysfunction contributes to adjustment of adolescents is considered from two disciplinary vantage points: structural anthropology, which considers dysfunction in terms of the affirmation of kinship relations, and family systems approach which emphasizes the role of factors such as family cohesion and adaptability. N = 283 undergraduate students completed a questionnaire in which they provided information on family characteristics as well as adjustment problems during their adolescence. It was found that family cohesion and the confusion of kinship relations were significant predictors of adjustment problems, whereas family adaptability was not.

Family dysfunction is becoming an increasingly important concept in the debate about the factors affecting the social and emotional adjustment of adolescents. There is an extensive empirical literature which links various forms of problem behavior in adolescence to aspects of family functioning, such as a lack of stability (Austin & Martin, 1992; Mednick, Baker & Carothers, 1990), lack of parental supervision (Ensminger, 1990), high levels of family enmeshment and symbiotic mother-child relationships (Senior, 1988; Verheij & Reek, 1986), social isolation of the family (e.g. Pilotta, Widman, Jasko & Endress, 1991) lack of consistency in caretaking figures, and the lack of generational boundaries (Berg, Kidd & Carr, 1990). To the extent that family processes affect adolescent adjustment, a significant role has been attributed to processes which exacerbate dysfunctional properties of the family such as sexual abuse and neglect (Polit, White & Morton, 1990), and substance abuse (McKay, Murphy, Rivinus & Maisto, 1991). However, existing work on the relationship between the family and adolescent adjustment does not specify the notion of family dysfunction very clearly. To appreciate the role of family dysfunction in the adjustment of adolescents, it needs to be determined first which properties of the family constitute its functionality. The present study considers this issue from two disciplinary vantage points: structural anthropology (e.g. Levi-Strauss, 1963; 1969), and family systems approach (e.g. Minuchin, 1985).

Two perspectives on family dysfunction

The first conceptual point of departure, structural anthropology, proposes that one of the main functions of the family is to perpetuate kinship relations through behavior (Levi-Strauss, 1963; 1969). Levi-Strauss distinguished three types of kinship relations that operate in most families: (1) Affinity, i.e. the relationship between spouses, (2) Consanguinity, i.e. the relationship between siblings, and (3) Descent, i.e. the relationship between parents and their children. Perpetuation of these relations through behavior indicates that family members interact with each other in accordance with these relations. A clear demarcation of kinship relations in the family serves many critical functions, such as the prevention of incest, and assurance of caretaking of the off-spring. By enforcing these distinctions, families provide stability and continuity to the community of which they are part (ibid.)

If we can define functionality in the family in terms of the demarcation of kinship boundaries, one could argue that a family can be characterized as being dysfunctional if the absence or confounding of such demarcations leads to maladjustment of the family as a whole, or of some of its individual members in particular, for example if adjustment problems arise because a parent - child relation is confounded with a relation of affinity in the interaction between particular family members. Koopmans (1992) found in a preliminary study that a confused perception of kinship relations is indeed associated with adolescent adjustment.

The present study attempts to confirm these findings using a larger sample.

A shortcoming of the structural anthropological approach with respect to the question at hand is that it does not propose a mechanism through which effects of family interaction on the adjustment of individual family members can be understood. The second conceptual tenet of this study, the family systems framework, deals more specifically with this issue (Copeland & White, 1991; Minuchin, 1985). Family systems frameworks propose that adjustment problems of individuals should be seen as an indicator of difficulties in the interaction of the family as a whole system, difficulties of which an individual member becomes a "symptom carrier" (see e.g. Ackerman, 1958; Arieti, 1959; Bateson, Jackson, Haley & Weakland, 1956; Bowen, 1960; Jackson, 1965; Minuchin, 1974). Olson (1989) identified two dimensions to which most features of this interaction can be reduced, namely family cohesion and family adaptability. Family cohesion refers to the ability of families to operate as a coherent interactive unit, and family adaptability to the ability of the family to effectively adapt its internal structure to meet environmental demands. Both cohesion and adaptability, according to Olson, are established through interactions of individual members with each other.

Family dysfunction from this point of view refers to an inability of families to adjust, due to levels of cohesion and adaptability which are either too high or too low, as a result of which the family becomes incapable of dealing with the demands of

the environment. For example, families that are too cohesive (enmeshment) may make it difficult for adolescents to assert their independence from the family of origin, whereas a family that is not cohesive enough (disconnection) may provide insufficient support and guidance for its members.

Family cohesion has indeed been found to be associated with psychological impairment among adults with substance abuse problems (Kang, Kleinman, Todd, Kemp et al., 1991), and with depressive affect among sixth grade children (Feldman, Rubenstein & Rubin, 1988). Both the level of cohesion and level of adaptability have also been found to be different in families who function adequately, as compared to families with adaptive problems (schizophrenia, neurosis, substance abuse, juvenile delinquency etc., see Olson, 1989). In the present investigation, an attempt is made to assess the role of family cohesion and adaptability in the adjustment of late adolescents and young adults who look back on their family of origin.

Method

A questionnaire was completed by $n = 283$ undergraduate students, enrolled in psychology and education classes at a liberal arts college in a predominantly white middle class suburban region in the Northeast. Subjects completed the questionnaire during class-time, and were informed afterwards about the objectives of the study. Subjects participated on a voluntary basis. The majority of students in the subject pool were female (84%). Average age was

$M = 20$ yrs. and 6 months ($SD = 3.48$).

Subjects were asked whether they ever had received professional help with various symptoms which are typically associated with social and emotional problems such as tension, depression, fear, anger, and suicide attempts (see Appendix A), and they indicated whether given kinship relations in their family (e.g. mother - son relation) ever felt as if they were other types of kinship relations (e.g. brother - sister, see Appendix B). Subjects also indicated in this section of the survey whether they saw the primary caretaking responsibilities in their family as ever having been entrusted upon the children rather than the adults.

Family adaptability and family cohesion were measured using the Family Adaptability and Cohesion Evaluation Scale (FACES III; Olson, Porter & Lavee, 1985). Convergent and discriminant validity of the FACES III has been established by Edman, Cole and Howard (1990), and reliability among family members has been estimated by Alexander, Johnson, and Carter (1984). Correlations between family members' scores were rather low for the adaptability items but not for the cohesion items.

The FACES III was modified in two ways for purposes of the present study. First, since Pratt and Hansen (1987) found that only low scores on the FACES correspond to family dysfunction, rather than both extremely low, and extremely high scores, cohesion and adaptability were considered as linear measures (continuous variables), rather than being categorized on their extremity (balanced and midrange vs. extreme).

Second, because the focus of the study is on the relation between the family and adolescent adjustment, subjects were asked to rate cohesion and adaptability in their families as it was when they were children, rather than rating their present family status, as is the original intent of the instrument.

Results

Table 1 shows that the group who reported having received professional help with social and emotional problems experienced significantly less cohesion in their family of origin than the group that did not report ever having received professional help. Differences in experienced family adaptability failed to reach statistical significance. In addition, it appeared that significantly more instances of confusion of kinship and caretaking roles in the family of origin were reported by the group that also reported adjustment problems.

Table 2 shows the correlations between perceived family characteristics and age. It appears that adaptability and cohesion, both measured by the FACES, are significantly correlated. Role confusion is correlated with family cohesion as well: there tends to be less role confusion in families that are also seen as more cohesive. In both instances, however, the effect size is modest.

A logistic regression model (LOGIT) was fitted which predicts the probability of adjustment problems on the basis of confusion of family roles, family adaptability, and family cohesion. It appeared that role confusion and family cohesion were both significant

Table 1

Family Adaptability, Family Cohesion, Role Confusion and Age for
Subjects With and Without Adjustment Problems

Variable	Indicators Adjustment Problems		
	Present	Absent	<u>p</u>
Family Adaptability			
<u>M</u>	20.9	22.0	
<u>SD</u>	5.8	5.8	
Family Cohesion			
<u>M</u>	32.9	36.8	< 0.0001
<u>SD</u>	7.6	7.1	
Role Confusion			
<u>M</u>	2.1	1.1	< 0.0001
<u>SD</u>	1.6	1.2	
Age			
<u>M</u>	21.0	20.1	< 0.05
<u>SD</u>	4.4	2.8	
<u>n</u>	101	182	

Table 2

Pearson Correlations Between Family Adaptability, Family Cohesion, Role Confusion, and Age

Measure			
	2	3	4
1. Family Adaptation	.28**	.10	-.07
2. Family Cohesion	--	-.02	-.13*
3. Role Confusion		--	.08
4. Age			--

* $p < 0.05$ (two-tailed)

$p < 0.01$ (two-tailed)

predictors of the occurrence of adjustment problems, whereas age and family adaptability were not (see table 3). The regression model predicted the occurrence of such problems with 72.1% accuracy if all four predictors were included in the model. Table 4 shows the association between the observed number of subjects who experienced adjustment problems and the number of subjects who were predicted to experience such problems according to the regression model. It can be seen in table 4 that the model performed particularly well in the prediction of adjustment problems as being absent (87% of the cases correctly predicted), indicating that the model is conservative in its prediction. There are relatively few

Table 3

Parameter Estimates, Significance, and Goodness of Fit Statistics for Logistic Regression Model Predicting Adjustment Problems in Adolescence on the Basis of Family Characteristics, Role Confusion, and Age

Parameter Estimates				
	<u>B</u>	<u>SE(B)</u>	<u>df</u>	<u>p</u>
Family Adaptability	-.03	.02	1	
Family Cohesion	-.07	.02	1	< 0.001
Role Confusion	.52	.10	1	< 0.0001
Age	.04	.04	1	
Intercept	.82	1.16	1	

-2 Log Likelihood Ratio = 50.16, df = 4, p < 0.0001

72.1% Correctly Predicted

Table 4

Predicted versus Actual Occurrence Adjustment Problems in Adolescence, and Percentage of Instances Correctly Predicted

Symptoms Adjustment Problems				
Observed	Predicted		Total	% Correct
	Present	Absent		
Present	45	56	101	44.6
Absent	23	159	182	87.4
Total	68	215	283	72.1

cases in which symptoms are predicted to occur whereas, in fact, there are none. There is a substantial number of cases, however, where symptoms are predicted as being absent, whereas they are in fact present.

Discussion

Findings of this study indicate that there are significant differences between the families of those youngsters who have experienced adjustment problems at some point in their lives, as compared to those who have not experienced such problems, particularly in the experienced level of family cohesion, and in perception of kinship and caretaking roles in the family as being

qualitatively distinct. These findings are consistent with earlier studies which report different cohesion levels in the families of youngsters with adjustment problems (e.g. Olson, 1989). Findings of the present study also indicate that confusion in the perception of kinship relations, and primary caretaking relations, may be a critical variable to consider in the assessment of the effects of family dysfunction on the social and emotional adjustment of adolescents, as suggested by earlier findings (Koopmans, 1992).

The findings of this study attest to the importance of the association between family dysfunction and adolescence adjustment; They indicate that adjustment problems in adolescence may indeed be predictable to some extent on the basis of how the family of origin is perceived by the youngster. The findings of this study specifically indicate that family cohesion and the confusion of kinship roles in family interaction may significantly affect the likelihood that adjustment problems arise in adolescence. Future work needs to decide how family properties reported in the literature as being associated with problem behavior of adolescents, such as lack of stability, social isolation, and the lack of generational boundaries are associated with the confusion of kinship boundaries.

This study has several limitations. First, generalizability of the findings is limited by subject characteristics. Subjects were predominantly female, middle class, living in suburban areas. Although there seem to be no grounds a-priori to expect different results in samples with other demographic characteristics, this

possibility nevertheless needs to be addressed empirically. Generalizability is also limited by the fact that an undergraduate sample is used, who are asked to look back on their past family experiences. Their responses might reflect their current perspective on their family of origin, rather than their point of view as it was when they were younger. To rule out this possibility, longitudinal research needs to be conducted in which early adolescents are followed for an extended time period. Such work would have the added advantage that the prediction suggested in the current analysis can be further put to the test by assessing whether those youngsters who experience role confusion at time 1 are more likely to develop adjustment problems at a later time than those who do not experience such confusion at time 1. Such an assessment is needed because the prediction discussed in this paper has been fitted to the data retroactively.

The present study is also limited in its concern to the perception of family characteristics, rather than the occurrence of actual events. It is conceivable that role confusion reported by the subjects does not adequately mirror actual family interactions. In other words, it is possible that there are differences in reporting between the 'confused' and the 'non-confused' group, whereas there are no actual differences in how their respective families operate. This possibility needs to be empirically investigated as well. It is particularly important to carry out this work because one of the major contentions of family systems perspectives is that social interactions in the family create

adaptation problems, rather than perceptions of how other family members function. Bateson et al. (1956) argue, for example, that the inclination of family members to perceive their family environment in terms of double bind interactions is a result of the fact that those interactions have in fact occurred. Similarly, the notion that family therapy can be used as a remedy for adjustment problems in adolescence is based on the presumption that changes in actual family interactions will favorably affect the behavior of individual family members, rather than changes merely in the perception of those relations (see e. g. Minuchin & Fishman, 1981). The question ultimately needs to be resolved to what extent perceptions of the family are congruent with behavior.

The question also needs to be resolved to what extent the two perspectives on dysfunctionality (confusion of kinship relations versus extreme adaptability and cohesion as sources of dysfunction) are compatible. The literature on the family offers little guidance on this issue because the two perspectives stem from different disciplines. Levi-Strauss (1963) was primarily concerned with the description of family roles in different communities, rather than with the deviation from patterns which are legitimized by the community. In addition, the study of family characteristics in structural anthropology is not primarily concerned with of the emotional consequences of family processes for the development of individual family members, but rather by cultural differences in how family relations are classified and behaviorally reinforced.

Family systems perspectives, on the other hand, have been

looking for ways to describe family deviance, without considering how the definition of family relations may be at odds with the prescriptions of particular communities with respect to those relations. The idea that the assignment of roles in the family may significantly affect the functioning of families and their individual members is often implicitly recognized (e.g. Minuchin & Fishman, 1981). There is a lack of agreement in family systems circles, however, about how the distribution of roles and relations should be conceptualized. Levi-Strauss' (1963) distinction between relations of affinity, consanguinity, and descent is a promising framework, because it incorporates the most basic functions of the family, namely reproduction (affinity), caretaking (descent), and the prevention of incest (consanguinity, descent). Moreover, these descriptors are general enough to characterize most types of family, regardless of cultural, or religious differences. In addition, as the results of the present study indicate, there also is a strong association between the ability of youngsters to adapt to their environments, and the demarcation of kinship relations as Levi-Strauss formulated them. The present findings suggest, then, that the interface between those two areas of knowledge is a potentially fruitful field of inquiry.

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APPENDIX A

1. Have you ever received professional help with any of the following problems (please check as many as apply):

- _____ Bedwetting/bedsoiling
- _____ Refusal to take food or eating binges
- _____ Sudden decline in school performance
- _____ Emotional problems (tension, depression, anger etc.)
- _____ Behavioral problems (tantrums, sloppiness, indifference, acting out behavior, antisocial or aggressive behavior)
- _____ Difficulties relating to people
- _____ Being too much isolated or a loner
- _____ Shyness
- _____ Suicide attempts or suicidal thoughts
- _____ Hallucinations or delusions
- _____ Fear and anxiety

Note: For each of the problems checked, subjects were asked to indicate the age(s) at which they experienced them.

APPENDIX B

1. Did it ever seem as if the relation between you and your father/stepfather felt as if it were a relation between husband and wife?
2. Did it ever seem as if the relation between you and your mother/stepmother felt as if it were a relation between husband and wife?
3. Did it ever seem as if the relation between you and one of your brothers or sisters felt as if it were a relation between husband and wife?
4. Did it ever seem as if the relation between you and one of your brothers or sisters felt as if it were a relation between parent and child?
5. Did it ever seem as if the relation between you and your mother/stepmother felt as if it were a relation between siblings?
6. Did it ever seem as if the relation between you and your father/stepfather felt as if it were a relation between siblings?
7. Did it ever seem as if the relation between you and your boyfriend/girlfriend or spouse felt as if it were a relation between siblings?
8. Did it ever seem as if the relation between you and your boyfriend/girlfriend or spouse felt as if it were a parent-child relationship?

APPENDIX B (Continued)

9. Did you ever take care of your parent(s) for prolonged periods of time?

10. Did you ever take care of your sibling(s) for prolonged periods of time?

11. Did any of your sibling(s) ever take care of you for prolonged periods of time?

For item 1 - 8, the response option was:

Y / N If yes, how old were you then? _____

Please indicate why the relation felt that way / why it never felt that way.

For item 9, 10, and 11, the response option is:

Y / N If yes, how old were you then? _____

Please specify the reasons: